Asian Journal of
HUMAN
SERVICES

April 2020
Vol. 18

care manager,
awareness,
nutritional
improvement

menstrual pain, self-care scale,
snacking, home care,
special health care needs,
group home, elderly men,
spousal bereavement, grief
process, health anxiety,
nursing care, patient
acceptance system

Inclusive
education,
ICT utilization

scale development,
teacher training,
home health
nursing, instructors,
down syndrome,
verb, reflecting
process,
graduate students

SHORT PAPER

Experience of Reflecting Process in Graduate School for Clinical Psychologist

Norimasa ITAKURA [1]   Seiya MITANI [2]   Megumi KATO [3]

1)   Faculty of Education, Gifu University, Japan
2)   Faculty of Comprehensive, Tohoku Fukushi University, Japan
3)   Social welfare juridical person FUNABUSE, Japan

ABSTRACT

This study investigated the difference of experiences between reflecting process (RP) and conventional case conference. The subjects were 20 graduate students who were novice counsellors. All of the subjects were divided into two groups, high session management self-efficacy and low session management self-efficacy. Before and after RP, the transition of the self-efficacy was examined. The results showed that RP got higher score than conventional case conference in such items as "I was able to express my opinions properly," "I was able to listen properly to the opinions of other participants." RP also marked higher than usual case conference in some categories; considerations from multilateral perspective and unexpected ideas. However, although the group of low session management self-efficacy increased the self-efficacy after RP, the group of high session management self-efficacy did not show the change of self-efficacy. These results suggested the effectiveness of conducting RP in considering purposes and according to development stage of graduate students.

Ⅰ. Introduction

In many graduate school programs for clinical psychologists in Japan, it is obligatory to present a case review, which usually involves being responsible for a clinical case at a counseling facility. Subsequently, student clinicians are required to make a presentation based on that case at a conference. The purpose of this is to help student clinicians develop an underlying theoretical perspective about a case and to facilitate appropriate management. Case conferences also present an opportunity for students to gain knowledge and different perspectives that can be applied to their other cases. Due to this, undertaking a case conference has positive implications for a practitioner's case management skills (Shimoyama, 2013). However, there is a lack of empirical research about whether doing case reviews are useful for those who present the cases in terms of resolving their case management difficulties and promoting the development of their clinical skills. Kobayashi, Fukumoto, Matsui et al.(2013) have described the need to improve the quality of clinical education for psychology students in Japan by providing increased clinical supervision and verifying the efficacy of clinical education methods so that students can acquire greater knowledge and skills.

The use of reflecting teams is an innovative method for training counselors, which was developed by Andersen(1987). The purpose is to offer multiple descriptions and perspectives of clients' situations. In this approach, the counseling team shares its reflections with clients after observing the counseling session. This allows clients to select the ideas that seem pertinent to their situation (Chang, 2010). Role plays using this reflecting process (RP), where in the roles of therapist, client, and observer are shared among participants, can be used as a part of case review conferences. The interactions with opinions and ideas from various perspectives afforded by this method create new perspectives, ideas, feelings, and modes of action for everyone involved.

The diverse comments of those involved in an RP session make it possible for student clinicians to gain insight into perspectives that may have been overlooked. In addition, the clinicians are able to gain an increased awareness of interviewing methods through observing the role-play processes (Andersen, 1991; 2001). Thus, with RP, all participants can have the opportunity to hone their skills as psychologists. It also has further applications for the supervision and training of clinicians (James, MacCormack, Korol, et al., 1996). The advantage of RP is that, both in life and in role play, everyone contributes equally to the therapeutic moment (Smith, Yoshioka & Winton, 1993). Because of this capacity for providing an overview of the case, RP can be seen as suitable for helping to educate psychologists.

According to Misawa, Itakura & Hasegawa(2008), in a conventional case conference, "the presenter presents a summary of their case examples, and then proceeds with a free-form question and answer session in the presence of a moderator." This study focuses on students in graduate schools for clinical psychologists who have experience of both

conventional case conference and RP, and it considers the difference between both approaches in terms of students' experiences of reviewing cases. Previous research has highlighted the effectiveness of education that is appropriate to the therapist's stage of development (Skovholt & Ronnestad, 2012). Therefore, this study also looks at the difference between participants with high and low self-efficacy in terms of session management (SM), considering the difference in SM self-efficacy before and after experiencing RP.

II. Subjects and Methods

1. Subjects

The sample comprised 20 graduate students who were enrolled in Master's courses at a university in the Tokai region in 2016. The mean age of the students was 28.55 years (SD = 8.13). Twelve students were in their first year of study and five were in their second year. In addition, there were three visiting students working as teacher's assistants who also took part in the study.

2. Questionnaire Contents

The SM self-efficacy scale (Kasai, 2005) was used to measure the student clinicians' self-efficacy in conducting interviews. This scale is part of the Japanese language version of the counseling self-efficacy scale, and it uses a seven-point scale to assess the extent to which respondents feel they can manage counseling interviews, from "not at all confident" (1 point) to "very confident" (7 points). In constructing items related to the students' experience of case conference, we reference the results of investigations by Maki(2013) and Kitazoe(2005) into the experiences of case conferences for students, as well as Shimoyama's description of the purpose of case conferences (Shimoyama, 2013), and the findings of Kasai and Tsuchihashi(2012) on the necessity of self-reflection. Based on the aforementioned studies and consultations with three psychology graduate students, we created 11 items relating to case conference experiences. We used a six-point scale, from "not at all" (1 point) to "very much" (6 points) to compare the experience of conventional case conference with experiences using RP.

3. Procedures and Ethical Considerations

After obtaining informed consent from participants, we started by distributing the SM self-efficacy scale to the participants. Subsequently, the researcher explained that they were going to conduct a case conference designed specifically for family therapy. Then, the participants were divided into four groups, comprising four–five people per group, and a second year Master's student at Graduate School A took the role of presenting cases (hereinafter referred to as the "client") and presented a case that they were

responsible for in the consultation room (Figure. 1). The case related to a woman whose daughter refused to go to school. The situation had been resolved in a series of seven sessions with the mother, and we obtained her consent to present this case.
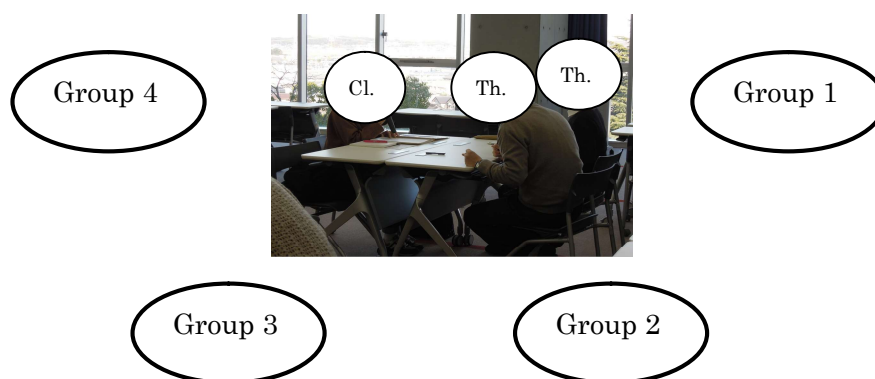
The procedure was performed using a four-step process:

(1) RP does not make use of handouts and information sheets etc.; instead, in the first 20 minutes of the session, the person in the role of the main therapist and the person in the role of the assistant therapist summarized the client's case and proceeded to clarify any issues with the case. In RP, those in the client's role may speak with those in therapist's roles only, and the observers quietly watched the interaction between the clients and therapists.

(2) In the next stage, the four participants in the observers' roles spent 20 minutes discussing the counseling interview. When reflecting on their observations, the participants were told not to engage with the presenters ("clients") and the interviewers (therapists). According to the RP method (Andersen, 1991; 2001), we requested the participants to engage in reflection using a calm tone of voice and maintaining an open and questioning attitude throughout, without making critical or negative remarks or speaking in a judgmental manner. The clients and therapists quietly observed these discussions.

(3) After reflection, the clients and therapists discussed the case again for 15 minutes, and the observers quietly watched their interaction.

(4) Following this, each group engaged in reflection on the case for 15 minutes more. Then, in the final 5 minutes, the client and therapist discussed a summary of the case, and the RP ended.

After finishing the RP, we again administered the SM self-efficacy scale to all of the participants. In addition, we obtained responses to 10 questions regarding the participants' experiences of case conferences. Following this, we debriefed the participants and obtained consent, fulfilling the confidentiality obligations in relation to the case contents.

<Figure 1> Configuration of RP in this study
※Note : Therapist = Th. Client = Cl.

4. Statistical analysis

A paired t-test was conducted to compare the experiences of RP and conventional case conference. To investigate the changes in SM self-efficacy before and after doing RP, while also considering the differences between high and low SM self-efficacy, a mixed-design analysis of variance was conducted to examine factors internal and external to the participants and two factors relating to self-efficacy and pre- and post-RP were examined. Date analysis was performed with IBM SPSS Statistics 21.0.

Ⅲ. Results

1. Comparison of Experiences of RP and Conventional Case conference

The results for each item are shown in Table 1. For the items, "I was able to express my opinions properly" (t (19) = 2.65, $P <$ .05, $\triangle$=.73), "I was able to listen properly to the opinions of other participants" (t (19) = 3.10, $P <$ .01, $\triangle$=1.52), "I was able to examine the case from a multilateral perspective" (t (19) = 3.68, $P <$ .01, $\triangle$=1.45), "It was useful for getting ideas that were applicable to my own cases" (t (19) = 2.79, $P <$ .05, $\triangle$=1.01), "Unexpected ideas were generated" (t (19) = 6.00, $P <$ .001, $\triangle$=.2.03), and "I was able to get useful viewpoints for advancing the case" (t (19) = 2.63, $P <$.05, $\triangle$=.56), the scores were again significantly higher for RP than for conventional case conference. However, for the items "I was able to think deeply about the case," "I was able to think deeply about myself, "It was useful for defining the path of the case," and "I was able take my time to reflect on the case," there was no significant difference between conventional case conference and RP.

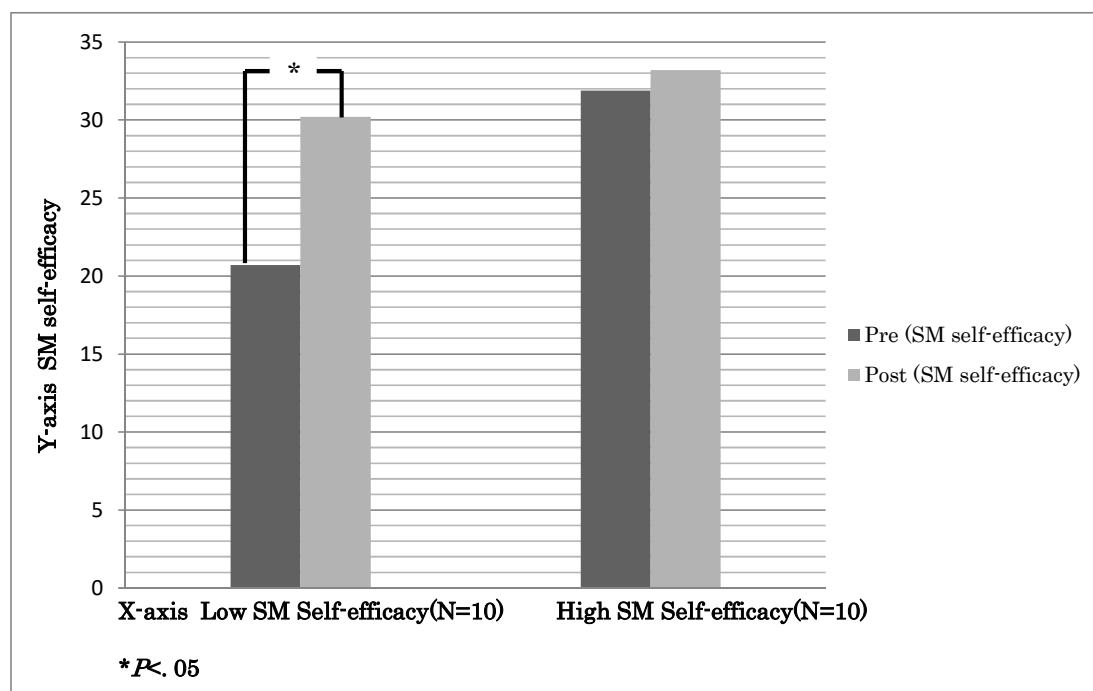<Table 1> Differences between RP and conventional case conference

	RP		Conventional case conference			
	M	SD	M	SD	t-ratio	effect size (Δ)
1) I was able to express my opinions properly.	4.15	1.23	3.25	.97	2.65[*]	.73
2) I was able to listen properly to the opinions of other participants.	5.00	.56	4.15	1.04	3.10[**]	1.52
3) I was able to think deeply about the case.	4.25	1.12	4.55	.76	-.84	.27
4) I was able to examine the case from a multilateral perspective.	5.05	.69	4.05	.89	3.68[**]	1.45
5) It was useful for getting ideas that were applicable to my own case.	4.90	.79	4.10	.91	2.79[*]	1.01
6) I was able to think deeply about myself.	3.75	.85	4.10	.79	-1.58	.41
7) It was useful for defining the path of the case.	4.45	1.05	4.30	1.03	.39	.14
8) I was able take my time to reflect on the case.	4.20	.95	4.50	.61	-1.45	.32
9) Unexpected ideas were generated.	5.15	.59	3.95	.76	6.00[***]	2.03
10) I was able to get useful viewpoints for advancing the case.	4.75	.72	4.35	.81	2.63[*]	.56

[*]$P<$.05 [**]$P<$.01 [***]$P<$.001

2. Changes in SM Self-Efficacy Before and After RP

As a result, it was shown that SM self-efficacy increased following RP (F (1, 18) = 7.67, $P <$.05, η^2 =.28). Furthermore, since the interaction was significant (F (1, 18) = 4.42, P

Human

Services

<.05, η^2 =.16), a simple main effect test revealed that in the group with low SM self-efficacy scores, their SM self-efficacy improved after their experience with RP. Meanwhile, there was no change to SM self-efficacy after RP in the group with high SM self-efficacy scores (Figure 2).

<Figure 2> Changes in SM self-efficacy pre- and post-RP

Ⅳ. Discussion

In this study, for the items relating to "expressing opinions properly" and "listening to other participants' opinions properly," RP scored higher than conventional case conference. This suggests that the RP process of sharing diverse opinions through discussion and engaging in repeated self-reflection while listening to the opinions of others is effective regarding speaking and listening to others. Since RP participants engage in free reflection and avoiding critical remarks, it is possible that participants who were inexperienced as counselors were less likely to feel intimidated by the evaluation element of the case conference. Moreover, in comparison with conventional case conference, it was shown that RP allows for cases to be examined from a more multilateral perspective, which helps with generating more ideas and unexpected applications. These support the finding that RP produces a wide range of useful ideas (Misawa, Itakura & Hasegawa, 2008). However, regarding the items, "deeply thinking about the case" and "taking time to reflect on the case," there was no significant difference between RP and conventional case conference. On this basis, conventional case

conference may have advantages in terms of self-reflection, gaining a deep understanding of cases, and reflecting on cases. Therefore, it seems necessary to implement RP after reflecting on the purpose of the case conference. In addition, although SM self-efficacy increased in the low SM self-efficacy group, there was no change in the SM self-efficacy of the high SM self-efficacy group. In light of the differing developmental stages of therapists, it can be expected that factors such as professional judgment will become more systematized over time through repeatedly taking part in case conferences. Based on this, it seems that as SM self-efficacy increases, ways of understanding cases gradually converge from a broad perspective, and thus it may become difficult to obtain effects from the diversity of ideas produced with RP. This suggests that, when considering the implementation of RP, the most effective approach may be to apply RP according to the level of self-efficacy and the developmental stage of the therapist.

V. Limitations

In this study, the reliability and validity of the items are yet to be thoroughly examined. Since this study did not make the comparison using a case, further study is required to make an exact comparison between RP and conventional case conference. This study focused on relatively positive factors of case conferences; however, Maki(2013) found that graduate students can feel lost and that their voices are not being heard during these conferences. From this, it may be that investigation focusing on less positive factors is necessary. Despite the problems identified above, this study is significant in terms of verifying the effect of clinical education on clinical psychologist training courses as first identified by Kobayashi, Fukumoto, Matsui et al.(2013).

References

1) Andersen T (1987) The reflecting team: Dialogue and meta-dialogue in clinical work. Family Process, 26, 415-428. doi: 10.1111/j.1545-5300.1987.00415.x

2) Andersen T (1991) The Reflecting Team: Dialogues and Dialogues About the Dialogues. New York: W. W. Norton.

3) Chang J (2010) The Reflecting Team: A Training Method for Family Counselors. *The Family Journal: Counseling and Therapy for Couples and Families*, 18, 36-44. doi: 10.1177/1066480709357731

4) James S, MacCormack T, Korol C & Lee CM (1996) Using reflecting teams in psychology students in systemic therapy. *Journal of Systemic Therapies*, 15, 46-58. doi: 10.1521/jsyt.1996.15.4.46

5) Kasai M (2005) A Study of Japanese Version of Counselor Activity Self-Efficacy Scales. *Research bulletin of Naruto University of Education*, 20, 61-69. (in Japanese)

6) Kasai M. & Tsuchihash K (2012) Development Process of Novice Counselors : Case Conference Experiences. *Research bulletin of Naruto University of Education*, 27, 169-183. (in Japanese)

7) Kitazoe N (2005) A Study of the Supervision and the Case Conference : Opinions of Supervisees. *Research bulletin of Naruto University of Education*, 20, 23-30. (in Japanese)

8) Kobayashi S, Fukumoto R, Matsui H, Iwai S, Sugano M, Komaki A et al. (2013) The present situation and problems connected with the training education in psychology clinics attached to the clinical psychologist training graduate school. *Journal of Japanese Clinical Psychology*, 31, 152-157. (in Japanese)

9) Maki T (2013) Importance of Practical Wisdom in Graduate Programs of Clinical Psychologist Bulletin of the Faculty of Education. *Journal of the Faculty of Education*, 25, 25-34. (in Japanese)

10) Misawa H, Itakura N & Hasegawa K (2009) Empirical Study of Communication of Teams in the REFLECTING PROCESS. *Japanese journal of family therapy*, 26, 65-73. (in Japanese)

11) Shimoyama H (2013) The Aim and method of case conference. *Japanese journal of psychotherapy*, 39, 643-648. (in Japanese)

12) Skovholt TM & Ronnestad MH (2013) The Developing Practitioner: Growth and Stagnation of Therapists and Counselors London, NY: Routledge.

13) Smith TE, Yoshioka M & Winton M (1993) A qualitative understanding of reflecting teams: I. Client perspectives. *Journal of Systemic Therapies*, 12, 28-43. doi: 10.1521/jsyt.1993.12.3.28

CONTENTS