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Work-life balance for aspiring clinical psychologists: Topics from reflective practice sessions

Christina Demetri, Simone Saidel, Florence Ingall, Rebecca Hefferman-Clarke, James Armstrong, Emilia Kramarz, Eleanor Jones, Carolina Fialho, Firat Deniz Caglar, Eden Gezehagn & Simon Riches



Work-life balance is vital in clinical psychology, especially in early career stages. In reflective practice sessions, ten aspiring clinical psychologists raised topics of financial constraints, employment insecurities, time commitment, industry competitiveness, guilt, risk of burnout, and lack of self-care.

Introduction

WELLBEING of mental health practitioners is often challenged by a range of factors including stress, job retention, and burnout (Saddington, 2021). A recent United Kingdom study found that 52 per cent of mental health workers recorded moderate-to-severe levels of emotional exhaus-

tion (Pappa et al., 2021). Factors such as high volumes of clinical work and unpaid overtime lead to significant burnout (Owen et al., 2021). In response to this, there is an increasing trend of emphasising self-care in trainee and qualified clinical psychologists (Wise et al., 2012) and exploring burnout in these psychological practitioners (Summers et

al., 2020). However, despite aspiring clinical psychologists, such as assistant psychologists and psychological wellbeing practitioners, also managing high workloads and psychological complexity, self-care does not appear to be emphasised to the same degree. The aim of this study was to use reflective practice sessions to understand the perspectives of aspiring psychologists on work-life balance, and its associated challenges.

Methods

Participants were aspiring clinical psychologists who intended to apply for the Doctorate in Clinical Psychology (DCLinPsy) by the November 2021 deadline. To reflect the range of DCLinPsy applicants, convenience sampling was used to recruit participants from a variety of mental healthcare roles, and from culturally, ethnically, and geographically diverse backgrounds. Participants were recruited by authors CD and SR from their extended professional networks. All participants declared an interest in the topic of work-life balance for aspiring psychologists.

Participants ($N=10$, all authors apart from SR) held substantive, paid, full-time mental health roles that constituted relevant experience for a DCLinPsy application. The aim was to recruit participants from a range of roles in which aspiring clinical psychologists commonly work. Participants were psychological wellbeing practitioners ($N=4$), research assistants ($N=3$), assistant psychologists ($N=2$), and a cognitive behavioural therapist ($N=1$). They were based in London ($N=7$), Oxford ($N=2$), and Greater Manchester ($N=1$). Eight were female and two were male. Ages ranged from 25 years old to 28 years old. Participants identified as White British ($N=6$), White-Other ($N=2$), Middle Eastern ($N=1$), and Black African/British ($N=1$). Following the reflective practice sessions, nine of the ten participants applied for the DCLinPsy in November 2021. One participant became uncertain about pursuing a career in clinical psychology.

Participants met for seven reflective practice sessions. This was understood by the group as 'a conscious activity in which we engage

to explore our experiences and develop new understandings and conceptualisations' (Boud, Keogh & Walker, 1985). These sessions were facilitated by CD on Microsoft Teams from August to October 2021. Sessions were one-hour in duration, held fortnightly, and took place outside of working hours. The aim of the sessions was for participants to share their views on work-life balance. There was an introductory meeting, followed by five reflective discussions in which participants raised topics that impacted their work-life balance. The sessions did not have structured questions but rather the facilitator invited participants to freely raise and discuss topics that had historically or currently impacted their work-life balance. These were then reflected on as a group, with key points of each issue identified and summarised at the end of each meeting. In the reflective practice sessions, participants reached an agreement on the topics they wanted to report and how they should be described in the written paper. The final meeting involved all participants contributing to the write up of this paper, by refining these topics and drafting descriptions. A qualified clinical psychologist (SR) supported the design of the study and writing of this paper but did not attend any reflective practice sessions and was not involved in selection of topics.

The group was convened as the participants felt as though work-life balance was a pertinent professional issue with which all were experiencing difficulties. The group provided a space to discuss these challenges, whilst offering peer support to normalise the feelings that emerge as a result of work-life balance feeling uneven at this early career stage. Participants recognised that this is an area that had not yet been explored widely. Participants wanted to contribute and bring awareness to this professional issue through disseminating their findings.

In August 2021, after two reflective practice sessions had been completed, Health Education England (HEE) announced that individuals who had been on a funded HEE course in the previous two years would be

ineligible to apply for the DClinPsy. This announcement created additional turmoil whilst the group was underway, as five participants were briefly ineligible to apply for the DClinPsy but had already begun preparing for the applications that opened in September 2021. This decision was later rescinded due to the protests this caused within the psychology community.

Results

In reflective practice sessions, participants reported work-life balance-related topics of financial constraints, employment insecurities, time commitment, industry competitiveness, guilt, risk of burnout, and lack of self-care.

Financial constraints

Financial strain was a common topic raised across the sessions. The consensus was that there was an element of putting personal lives on hold due to financial limitations associated with pursuing the DClinPsy. Participants agreed that securing a role that supports progression onto the DClinPsy comes with financial strain. They reported that these roles often sit within a low pay band or are unpaid, such as honorary assistant psychologists or honorary research assistants, which is at times incongruent to the demands of the job. Many participants referred to the impact this has on personal lives, whereby aspiring psychologists are often left without sufficient funds to meet friends, go on holiday, live independently, and have a family of their own. Participants reflected that this disproportionately affects those from working class or ethnic minority backgrounds which limits their access to the profession.

Employment insecurities

Participants reported that based on their experience, fixed term contracts for research assistant, assistant psychologist and honorary assistant psychologist roles can lead to ongoing worries about job security. Participants agreed that, to boost chances of having their contract extended or gaining a new job, individuals often overwork by taking on multiple jobs,

some of which are unpaid or voluntary, and have high workloads, thus impacting their work-life balance. Participants discussed that in their personal experiences of working in the NHS and universities, they had known cases where employers were more inclined to hire new starters willing to work within a lower pay band rather than addressing systemic and structural difficulties that result in poor job retention.

Time commitment

As the DClinPsy application process spans approximately nine months from application to selection, participants reflected that this takes a toll on applicants, some of whom apply several times before securing a place. It was recognised by participants that the application process is lengthy to meet the requirements of selection at each university and ensure applicants have sufficient time to prepare. Whilst these deadlines acted as a motivator to some participants, others felt a need to put their personal lives on hold to meet ongoing, often competing demands. For example, participants' reasons for taking part in this study included wanting to increase awareness and understanding of the challenges aspiring psychologists face, as well as adding value to their DClinPsy application by being a co-author on a paper relevant to clinical psychology. By participating in the sessions and contributing to writing this paper, participants used their spare time outside of work hours. Participants were aware that unpaid work is a systemic issue in clinical psychology, and that many clinical psychology publications will be written in authors' spare time. However, participants felt that the impact of this systemic issue was more severe for aspiring clinical psychologists due to their low paid roles. Participants reflected that the expectation to do unpaid work sets a dangerous precedent at this early career stage that is likely to have an impact at every career stage.

Competitiveness

Due to high numbers of DClinPsy applicants, participants felt pressure to exceed the

minimum requirements in order to excel in the application process. This generally created feelings of competitiveness and jeopardised work-life balance. Examples of this included holding voluntary roles in evenings alongside a full-time clinical role and feelings of guilt for reading a book unrelated to psychology. Participants discussed that, whilst competitiveness can be healthy and motivating, the competitiveness felt throughout the DClinPsy application process was all-encompassing and brutal. This was agreed by all participants to be a key challenge, due to the time spent on applications and having limited support from some peers due to competitiveness elicited by the application process. Participants reflected that this felt incongruent with the identity and nature they associated with a caring, compassionate profession.

Guilt

All participants experienced guilt. They reflected that this was driven by an imbalance between the desire to succeed and feeling they were not doing enough to achieve this. This led participants to overwork to gain more experience, with the aim of scoring higher in the DClinPsy selection process. Participants felt that this resulted in emotional and physical burnout as overworking reduced time for self-care. The sessions proved beneficial in normalising feelings of guilt and lessened its intensity for participants. The experience of the sessions fostered the general consensus that reflective spaces for aspiring psychologists are a beneficial tool for supporting one another. Whilst it was recognised by participants that there is a provision available in some services for this, it was agreed by all that making it commonplace for aspiring psychologists could act as a preventative strategy for these feelings worsening amongst this group.

Risk of burnout

Overworking was a common feature of almost all participants' roles. The impact of this was reflected on in the sessions, including participants working more than one job, working longer hours than contracted, or working when they felt emotionally or physically unwell. Participants agreed that there is a systemic expectation

to work as hard as possible due to the requirements and demands of clinical training. This fuelled participants to overwork in the hope of meeting these expectations. This meant participants felt they were emotionally disconnected from people and activities outside of work, which felt unfair, a loss and ironic given the nature of the professional role. Due to high caseloads, participants reported that their role offered little time to debrief or gather headspace after difficult encounters. As a result, participants reflected that they often thought about work whilst at home.

Lack of self-care

Participants reported that they often advised service users of the importance of self-care and compassion but often did not experience this for themselves. Participants felt that this was often overlooked and unmonitored by supervisors and senior team members. The group agreed that monitoring wellbeing and work-life balance should be built into the structure of supervision for aspiring psychologists. Ultimately, it was felt that 'self-care does not score points' in the DClinPsy application.

Discussion

This study aimed to use reflective practice sessions to identify key underlying factors associated with the challenges posed to work-life balance for aspiring psychologists. Topics operated like a vicious cycle for participants in the sense that feelings of guilt, employment insecurities, industry competitiveness and financial constraints drove them to overwork, thus reducing time for self-care and increased the risk of burnout. The topics that derived from the reflective sessions were consistent with outcomes of the British Psychological Society (BPS) membership survey (2019), which found financial constraints, excessive workloads, and emotional exhaustion had a negative impact on those that work in a variety of psychology professions.

Employee wellbeing is crucial for providing high quality care and achieving positive clinical outcomes within the NHS (West & Dawson, 2012). Despite the NHS Long Term Plan (2019)

aim to achieve compassion across the workforce, the NHS Survey (2020) reported almost 50 per cent of staff experienced work-related stress. National Institute for Health and Care Excellence guidelines on 'Mental wellbeing at work' (2009) highlight that working environments can negatively impact mental wellbeing when staff do not have sufficient control and support to manage high demands they are experiencing. If work-life balance is not modelled or encouraged, as participants reported, it can perpetuate the likelihood of neglecting wellbeing and failure to achieve a work-life balance for its workforce.

BPS Practice Guidelines (2017) recommend that self-care should be prioritised through supervision to ensure individual wellbeing and quality of care. Self-care is considered important for trainee and qualified clinical psychologists and supervisors, for reducing stress and burnout levels and supporting work-life balance (Wise et al., 2012). Although the importance of self-care is encouraged for trainees and qualified psychologists (Callan, Schwartz & Arputhan, 2020), it appears to be often overlooked for aspiring psychologists and the findings of this study indicate that there needs to be more awareness of this issue. Participants reflected that encouragement and support for self-care in early career stages would allow for better work-life balance and workforce retention. If aspiring clinical psychologists had more support through reflective practice sessions, time focused on self-care skills, and mentoring throughout the application process from peers and clinicians either in training or once qualified, it could reduce the stress they experience. Mentoring schemes have been identified as a beneficial resource to support aspiring psychologists in gaining a place on the DClinPsy (Bawa et al., 2021). These would also help bridge the gap for those from underrepresented groups so that clinical psychology as a career path feels attainable in the most inclusive way (Scior et al., 2016, Janally, 2020).

Strengths of this study include the reflective sessions occurring alongside the DClinPsy application process, allowing real-time reflections on how the demands at this early career stage impacts on work-life balance. The safe reflective practice environment allowed access to the direct

subjective experience of current applicants. Use of videoconferencing enabled participants in different regions of England to meet regularly and represent different viewpoints. It also allowed for flexible planning of the reflective practice sessions to ensure high levels of engagement and participation. The age range of participants reflects the majority of those applying to training as 67 per cent of current trainees are aged 25–29 (The Alternative Handbook, 2022). Participants' demographic diversity reflects the community of aspiring psychologists, including roles that cover the key jobs aspiring psychologists work in. This, together with participants' different career stages, enabled a variety of views and experiences to be shared. The diversity of the sample adds to the validity and generalisability of the findings. Limitations of the study include the small sample size, limited ethnic, geographical, and gender diversity, and potential demographic characteristics that were not represented by participants in this study, such as being a parent, or living with a disability, which poses limits to the generalisability of findings.

The findings of this study could inform the design and structure of early career job roles and supervisor training in clinical psychology. This could ensure that clinicians at this career stage feel well supported and able to manage a more stable work-life balance. Healthcare organisations should support this by facilitating open and diverse workplace cultures which provide accessible reflective spaces. This would reduce stress experienced by staff through enabling discussions on the emotional impact of work and by incorporating elements of peer support (Smith et al., 2022). Self-care is seen as a practical step to be employed by trainee clinical psychologist and supervisors (Wise et al., 2012), which participants believe should be further expanded to provide greater support to aspiring psychologists. Future research could focus on developing a more comprehensive understanding of the challenges posed to the work-life balance of aspiring psychologists and the interventions that might support this. Such research might include large-scale surveys to reach a wider and more representative number of aspiring psychologists, including marginalised groups. Formal quan-

titative and qualitative analyses could provide further exploration of the topics identified in this study.

In conclusion, work-life balance of aspiring clinical psychologists is an area of concern that would benefit from greater awareness and support. The findings of this study highlight the dissonance between aspiring clinical psychologists advocating for clients' self-care, on the one hand, but finding it challenging to consistently practice it themselves, on the other hand. The psychological implications and pressures of this early career stage make this particularly challenging, and greater support within supervision, mentorship programs, and dedicated time focused on self-care skills in the workplace have been highlighted as beneficial resources that should be made widely available.

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