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Service User Involvement in Cognitive Behavioural Therapy Training; an Interpretive Phenomenological Analysis.
Abstract

**Purpose:** The last two decades have seen an increase in service user involvement (SUI) in the training of Mental Health Professionals (MHP). There is developing empirical support for SUI in MHP training, however, there is no published research into SUI in the training of Cognitive Behavioural Therapists. This study explores Cognitive Behavioural Therapy (CBT) trainees’ experience of SUI in their training. The study focuses on how an individual service user (SU) led training session is experienced and how this differs to routine CBT training.

**Approach:** Semi-structured interviews were conducted with six participants. Transcripts of the interviews were analysed using Interpretative Phenomenological Analysis (IPA).

**Findings:** Data revealed three superordinate themes: 1; predisposing influences on learning, 2; factors associated with emotional processing of experience and 3; impact upon learning outcomes. The results suggest that participants’ appraisal of their learning from SUI maybe influenced by how they accommodate the emotional impact of the experience.

**Value:** The paper makes recommendations for educators on courses involving service users, acknowledges the study’s methodological limitations and suggests areas for future research.

*Key words:* Service User, Cognitive Behavioural Therapy, Education,
Policy context

Shifts in the dynamic between service users and health professional has led to changes in policy governing service user involvement (SUI) in healthcare planning and delivery, including education and training (Rogers & Pilgrim, 2014). Increased SUI in the planning and delivery of mental health care has been advocated for over the past two decades (Department of Health, [DoH] 1999; DoH, 2001a; DoH, 2005; DoH, 2007). There has been an increased partnership between SUs and educational institutes in the delivery of training for nurses (DoH, 2006; ENB, 2000) psychiatrists (Fadden, Shooter & Holsgrove, 2005) and clinical psychologists (BPS, 2010). The British Association of Behavioural and Cognitive Psychotherapists (BACBP) publish a course accreditation process for courses providing training in Cognitive and Behavioural Psychotherapies (BACBP, 2015), which stipulates, ‘Courses will be expected to demonstrate how they have meaningful involvement of service users in the development and delivery of the programme’ (p. 15).

Arguments for SUI in training.

Arguments for SU inclusion in training broadly fall into two positions; philosophical/ethical and evidence based justifications (Schreur, Lea & Goodbody, 2015). Ethical justifications include: the potential to re-evaluate the view that the SU is significantly different to him/herself (Croft and Beresford, 1994); inculcate lasting positive attitudes in trained professionals (Tew, 2004); and attention to the experience of the person receiving therapy broadening perspectives on what people hope to gain from therapy (Townend et al., 2008). Holttum, Lea, Morris, Riley and Byrne (2011) state, “It would seem a major anomaly, and an uncompromising start to mental health careers, if such modelling of partnership work did not start at the pre-qualification stage…” (p. 191). Porter, Hayward and Frost (2005) further
argue that SUI is likely to promote future clinical practices that are sensitive to the articulated needs of the user.

Five reviews address SUI in MHPs’ education; Happell et al., (2014); Minogue et al., (2009); Repper & Breeze, (2007); Townend, Tew, Grant & Repper, (2008) and Perry, Watkins, Gilbert and Rawlinson (2013). They highlight a number of generalisable findings concluding the involvement of SUs in training is limited and highly variables across disciplines. In the most recent review of 16 studies Happell et al. (2014) report that MHP trainees gain insight into the experience of service users involved in their training, insights into mental health difficulties and an understanding of how mental health services could be improved.

These views do not emphasise the potential benefits to the SU which might include; increasing sense of empowerment, the reclaiming of “voice” and opportunities to improve teaching skills (Hanson & Mitchell, 2001). The reviewed literature is heavily biased towards the potential value of SU involvement in training reflecting the prevailing shifts in attitude. Dissenting voices in published literature are quieter, a possible reflection of how articulation of opinion or publication of empirical research are influenced by prevailing ethical attitudes. Tew, Holley and Caplen (2012) cite a number of participants in research who expressed preference for traditional “medical model” approaches to their training. McGowan (2010) questions the proposed benefits and encourages an open debate and further research.

**Definitions of SU involvement**

Hubbard, Wilkinson and Petch (2004) acknowledge the wide variation in SUI in training and encourage clarity in definition. For example, Minogue et al. (2009) highlight that involvement takes place across a number of areas in the field of mental health; education,
further training, research & development and service planning. For the purposes of this paper the definition of involvement will extend to involvement in the training of MHPs.

**Rationale for and aims of the study**

There is a gap in published literature examining the involvement of SUs in CBT training. Much of the existing research into SUI in training focuses on allied disciplines (Babu, Law-Min, Adlam & Banks, 2008; Schreur et al., 2015) Given the significant variation in role and function of allied MHPs caution should be exercised in transferring findings from research.

The aim of the study is to explore the CBT trainee’s experience of a training session delivered by a SU. The SU delivering training had been in receipt of CBT within a service that course graduates would be qualified to work in. A better understanding of this experience has the potential to show how the training experience might enhance therapist development and in what way SUI might be best employed in education.

This study aimed to add to the existing research by answering the following questions;

1. How do CBT trainees experience a training session delivered by a SU?
2. Is the SU involved teaching experienced differently to a regular teaching session?

**Method**

**Design**

Interpretative Phenomenological Analysis (IPA) was employed to examine the way in which individuals conceptualise their experiences through capturing and analysing subjective experiences and further analysing data through the researcher’s own interpretation (Smith, Flowers, & Larkin, 2009). IPA is relevant to this research because it encourages an
examination of internal processes relating to experience and the development of a description of these processes relating to the educational experience (Brocki & Wearden, 2006).

Ethics, Participants & Procedure

The HEI Research Ethics Committee granted approval for the research. In addition the BABCP code of ethics was adhered to throughout the duration of the study (BABCP, 2009).

The study aimed to examine the CBT trainee’s experiences of SU involvement in teaching capturing the richness of participant’s experience rather than making generalisable findings; this approach reduces the need to have a large cohort size. Following IPA guidelines, a small sample was recruited (Smith et al., 2009). Smith & Osborn (2008) recommend 5 to 6 for a student project. CBT trainees attending a post graduate diploma in CBT at a higher education institute (HEI) who had attended a SU lead teaching session on their training were approached. The researcher had no involvement in this training course. Eleven potential participants were approached by email (addresses provided by managers of local services] inviting interest. Six trainees employed as trainee CBT therapists aged between 32-48, one male and five female, all with core professional backgrounds in mental health practice including two accredited counsellors, an occupational therapist, a clinical psychologist and two psychological wellbeing practitioners, responded. All participants names have been changed. All gave written consent to be interviewed and for their data to be used. Confidentiality was agreed and agreement was established for participants to withdraw at any time in the process.
Data Analysis

The study employed a non-experimental, qualitative design using semi-structured interviews. The flexible interview structure provides the participant with an opportunity to share their experience and provide some structure to the subsequent analysis. With participant consent the researcher digitally recorded interviews. Transcripts were generated from the recordings. All data collected was governed by the data protection act (OPSI, 1998) and stored according to HEI policy.

Smith et al. (2009) write that analysis should evolve idiosyncratically depending on those involved in the analysis and the subjective interpretative process. Analysis of the first two transcripts were conducted by the two authors to ensure a transparency of process and to ensure emerging themes were discussed. The following process was adhered to;

1. Anonymised transcripts were read line by line. First reading focussed on descriptive comments, second reading, linguistic comments and third reading conceptual comments.

2. For each case, emergent themes were identified.

3. Following analysis of the first five transcripts and identification of emergent themes, further ‘submersion’ in transcripts led to the clarification of sub themes. Themes present in less than 50% of transcripts were not considered for further analysis unless identified as being of significant richness.

4. Using Smith et al. (2009) guidance sub themes were further analysed using a variety of approaches including pattern recognition, clarification of differences and ‘subsumption’ into encompassing or superordinate themes; three superordinate themes were identified.

5. Emergent themes from the remaining transcripts were verified with the superordinate themes.
Quality assurance

Pope, Ziebland and Mays (2000) address the lack of convention in analysis of qualitative data, in particular the risks inherent in being overloaded with information. They acknowledge the difficulties inherent in “human” analysis recognising the predictable flaws and the need for researcher integrity. Robson (2002) encourages the novice researcher to adopt an apprentice stance in analysis. To this end initial descriptive data analysis was conducted by both authors.

Yardley (2000) identifies criteria to evaluate qualitative research; sensitivity to context, completeness of data collection and researcher reflexivity. Careful consideration was given to minimise bias in data collection; to this end the first author chose not to interview trainees on the course he is directly involved with but rather a wholly independent course for whom he has no training involvement.

Bracketing is a recommended method for mitigating against excesses of researcher subjectivity and is of particular importance when considering the close relationship between the researcher and their chosen topic (Tufford and Newman, 2010). Tufford and Newman (2010) consider the methods of bracketing the researcher might employ and describe the use of reflective diaries as a means of routinely visiting the researcher’s subjective lens. The researcher kept a reflective diary from research outset. Furthermore the author engaged in a bracketing interview. Conducted by a colleague this took the form of a semi-structured interview designed to highlight preconceptions prior to commencing data collection.

Findings

Analysis of interview transcripts identified three superordinate themes (1) Predisposing influences on learning, (2) Factors associated with emotional processing of experience and (3) Impact upon learning outcome. Eleven subthemes were subsumed under
the three superordinate themes. Figure 1 provides a visual summary of sub and superordinate themes.
Figure 1

Master table of sub themes & superordinate themes, (numbers represent number of participants generating related sub theme)
The results indicate that all participants had expectations of the SU led session despite having been told little about what to expect beforehand and for some participants these expectations were related to their prior experiences of SU involvement and assumptions about the nature of SUI. They also indicate that participants had established expectations of training informed by established pattern of training delivery. These expectations informed the experience of the SU led session, which was characterised by a range of emotional responses. This related to how the SU was experienced, how the session fitted with existing expectations for learning and prior learning experiences. Participants differed in the ways in which they emotionally processed their experience. Interestingly a clear split across participants emerged in respect to learning outcome; whilst all participants identified specific learning the appraisal of the learning experience differed.

Predisposing influences on learning

This superordinate theme captures the sub themes that are associated with informing trainee expectation of SUI.

Prior experiences informing expectation. This refers more specifically to participants having had experience of SU involvement in prior training. Four participants reported this experience generally in favourable terms:

“We had a service user come in to speak to us about... psychosis, ..., and her experience with that. ... it was, ..., actually interesting to kind of hear it from their point of view, um, and kind of see exactly what they were experiencing.” (Faye, p1. 11)

Perhaps, unsurprisingly, prior SUI centred on the sharing of experience of a mental health difficulty.

Anticipation. A majority of participants expressed hopeful expectations for the session Faye’s positive experience of having heard a SU talk about their experience of psychosis informed her expectations and anticipation for the session:
“I was hopeful that,... the person would speak about her experiences of maybe using a service and how ... she had experienced growing up, as well. And kind of what differences had been for her compared to someone else. ... but then also, I guess I was hoping that she would maybe suggest ways that we could work better with her and other people, ..., and I suppose, um, just kind of giving us..., tips about the best ways to work with people like her.” (Faye, p4. 18)

This general positive anticipation might imply a trust in the organisation in planning SU involvement and certain assumptions about the process.

**Assumptions about the SU.** Varying assumptions were held about the SU, Cathy assumed that she would have had a favourable experience of CBT in order to come and talk to people in training;

“It is usually the norm, ..., to somehow choose a person due to ethical reasons as well, I suppose, ..., that coped well, uh, with a treatment or the, the intervention that, ..., was working.” (Cathy, p4. 12)

**Factors associated with emotional processing of experience**

This superordinate theme relates to the ways in which participants reacted emotionally to the SUI and how they made sense of their experience. Participants had varying expectations of the session informed by prior experience, assumptions and expectations. All participants identified a notable range of affect elicited during the session and all attempted to make sense of this affecting experience in different ways. The personal interpretation appears to relate to the learning process.
Experience fit with expectation. The way in which participants appraised the ‘fit’ between the session and prior CBT teaching appeared to have a strong relation to elicited affect and the subsequent ability to acknowledge and internalise any learning from the session. One participant, Abi, shared her memory of a critical appraisal of the way in which the session was introduced;

“...annoyed that we haven’t been given warning because actually it could have been much more valuable had we have been given warning.” (Abi, p13. 3)

Abi was annoyed at the decision to involve a SU in the session and questioned how the novel learning experience would relate to prior learning experiences;

“... the first thing that went through my mind is ..., how is this going to fit in, ..., how will this, ..., person’s experience become part of the training, ?” (Abi, p3. 3).

She then explains how the session did not match with her understanding of the aims of the teaching;

“... it is very powerful role play but actually we were there to learn about theories, (I: hm hm), rather ..., it felt a bit more experiential in terms of they were trying to get us to understand this woman’s experience ....” (Abi, p8. 16)

Whilst Abi was alone in this critical perspective, the subsequent realisation that the experience jarred with established teaching styles led to strong antagonistic feelings and impacted upon her subsequent appraisal of learning from the experience.

Rick, who had positive experiences of SU involvement in education, shared an alternative perspective implying that novel teaching approaches have the potential to galvanise interest;
“When you’re used to the same two or three speakers, you grow comfortable in that, ..., it’s like being in an armchair, a bit, which obviously has its benefits, but, um, uh, has its downside too. Whereas, um, when its somebody new coming in or a different topic, you kind of a bit more, like, again, interested. Curious.” (Rick, p19. 3)

Affective responses to experience. Participants reported a wide range of emotional responses to the learning experience. These varied between frustration, anger, suspicion, sadness and warmth. Responses related both to the SU and the teaching methods employed. Cathy described feeling sad in listening to distressing aspects of the SU’s shared history making links to her own personal experience;

“I remember that I felt sad when she talked about, uh, her difficult experiences. I remember that I had memories about that. Um, for example when she was talking about, uh, the bullying at school, and, uh, the fact that she could not be perceived from teachers as she had an issue of understanding and interpreting things.” (Cathy, p7. 18)

This demonstrates feelings of empathy for the SU and relates to Cathy’s subsequent learning from the experience. Although most of the participants expressed an empathic response one may have expected this to accompany a positive appraisal of the learning experience, one in which the teaching had a profound impact, however, this was not the case.

Making sense of experience. All participants tried to make sense of their emotional responses to the teaching session. These varied and appeared strongly related to subsequent appraisals of the session. Cathy’s sadness is tempered by suspicion, about the SU’s motives for being involved;
“I remember thinking, is it her decision to share this information and is it her initiative, or she has been prompted by the teachers? For example, so, is she stressed now, is she stressed to remember things, is she stressed to, uh, to comply with the psychologist, uh…” (Cathy, p6.14)

Cathy’s attempts to integrate her emotional experience with the SU’s performance led to her questioning stance and a subsequent positive appraisal of the SU;

“She has a power, she had a power more, so that is more, I think, determination, not obsessively, not compulsively, you know, to take all things out or anything like that. But she was powerful on the way that she... like there was a hidden message, like I have my own rights here, and I came to tell you that I have rights, that was kind of, uh, like she was seeking for, uh, equality, basically.” (Cathy, p9.5)

Conversely Abi and Tracy appeared to engage in externalising appraisals to allow for accommodation of the distress experienced during the session. Abi and Tracy focused on the University’s rationale for convening the session;

“I suppose, I mean this sounds really bad, but I suppose I questioned their rationale for bringing, (I; right), the service user to the session…’ (I; okay)... ’ (Abi, p7.5)

‘...why the hell have the university brought somebody in to a CBT course who thinks CBT is rubbish? - that is just ridiculous. I , I , I was more flabbergasted with the university...’” (Tracy, p9.19)

**Impact upon learning process.** The combination of affect and appraisal appears to inform the way in which participants were able to relate to the SU teaching and learn from the experience. Abi, who viewed the SU as vulnerable struggled to maintain the learner role, appearing to feel responsible for her wellbeing:
“Did she have to be in the room, ..., why could she have not gone and have a coffee, (I: right), and made to feel more comfortable and, ..., just supported in that way.’”

(Abi, p11. 2)

Carla also appraised the SU as being, ‘vulnerable’ and similarly felt some responsibility;

“...but what I found challenging was how vulnerable she came across, and how to safeguard against that, I suppose.” (Carla, p8. 6)

Whilst Cathy acknowledged the limitations placed on her personal learning style;

“If she was not there, if that person was not there, uh, I would be more, um, extrovert, and sharing, ...  Again, it was enlightening for us, ..., I decided to leave these questions for my own research, not to sharing these questions at the moment.”

(Cathy, p14. 11)

All three participants struggled to remain in the learner role adopting a more comfortable/less threatened position through emotional avoidance or resorting to the therapist role.

**Links to prior experience.** Some participants were explicit in how the session prompted memories of prior experiences;

“I linked the memories back to my placement ..., where there were some kids who had been in foster care and adoption, and, uh, you could see that the parents were for example saying that, uh, he’s misinterpreting things, and, uh, due to that he is taking revenge from us.” (Cathy, p7. 24)

**Impact on learning outcomes**

This superordinate theme encompasses sub themes that relate to the specific learning identified and the participants’ appraisal of the learning experience. Whilst all participants
identify specific learning outcomes there is a notable split in the appraisal of the learning experience which led to a number of participants negating their learning. Those that found the experience elicited uncomfortable emotion were more inclined to dismiss the learning experience in spite of being able to identify helpful learning.

**Specific learning identified.** Learning identified related to the need for adaptation of standard CBT approaches to clients with differing conceptual abilities and the importance in considering a client’s personal experience in informing an interpersonal relationship.

Abi highlighted both areas;

> “I suppose enough to come away and to think about that sometimes, to remind yourself that, ..., we should always think about the individual, so there was that, (I: right), but also, two, just at how sometimes strategies do have to be adapted,”

*(Abi, p15. 9)*

**Appraisal of the learning experience.** Whilst all participants were able to identify specific learning outcomes there appears a contradiction between this and appraisal of the learning experience. Cathy is clear that it was a positive experience and that this related directly to her learning:

> “I found it very... enlightening. Uh, it gave me a lot of, uh, how we say... it gave me a lot of, um, awareness of what her problems have been prior to her engagement with treatment. What was her past experience, and what her needs are, what her needs were within the sessions from the psychologist, what her needs, what she wanted from the psychologist, and, uh, she slowly entered into how, how the progress, uh, had influenced her.” *(Cathy, p5. 5)*
Whilst challenged and questioning of the SU’s involvement Cathy remained fully engaged with the learning process, conceptualised new perspectives and acknowledged the value of the teaching style. Tracy, who also reported back the detail of her learning had a differing perspective;

“I still think it wasn’t a very helpful learning experience, ..., I can remember thinking, what, what was that about, (I: um), what have I got out of that, that was just , you know, I could’ve been using this time to write my essay ...” (Tracy, p27. 3)

This pattern of contradiction; acknowledgment of specific learning whilst dismissive of the value appeared related to the discomfort experienced during the session, whether that was feelings of frustration or vulnerability and an established expectations of what CBT education should look like to the trainee. Those participants who held firmer ideas of what CBT teaching should look like and those less tolerant of distress appeared more likely to externalise this processing, blaming others and negating any potential benefits.


**Discussion**

The results indicate that participants experienced a range of emotional responses to SUI. These were informed by a number of predisposing influences on learning. All participants learnt from the experience citing; the benefits of understanding a lived experience, SU experience informing future therapeutic engagement and a consideration of how to adapt CBT approaches. However, individual appraisal of learning differed according to the emotional impact and related processing of the experience.

It seemed that whilst not directly establishing the practical difference between teaching sessions, the data indicated that participants were very aware of the difference. This appraisal of difference was informed by established socialisation to teaching present in identified sub themes and had a subsequent impact upon appraisal of value of teaching experience.

**Established versus novel learning experiences**

Improving Access to Psychological Therapies (IAPT) training course are designed to address a set of CBT competencies and meta-competencies published in a framework (Roth & Pilling, 2008). IAPT courses are governed by the BABCP, which accredit courses on the basis they adhere to the framework. HEI’s often have competing demands, which influence flexibility in training delivery (Armstrong, 2016). Participants in the study appeared to demonstrate an established pattern of training experience reflected in the sub theme of “experience fit with expectation”, one, which reflected the exacting demands of the IAPT curriculum, possible limitations of HEI flexibility and the established pedagogical attitudes of principal teachers. The SU led session clearly differed to the established teaching norm and offered a challenge to the learner in adaptation to the novel learning experience (sub theme; impact on learning process). The degree to with which participants were able to adapt to the
novel experience appears to inform the degree to with which they were able to value the learning available represented in the sub theme; appraisal of learning experience.

**Reflection, threshold concepts and transformative learning**

Whilst all participants were able to identify specifics learnt from the session (sub theme; specific learning identified), a number were clear in negating this learning stating it could have been better achieved in other ways. This finding, mirrored in research from complementary disciplines (Ikkos 2003; Tew et al., 2012), warrants further consideration. What might account for the differing ways in which participants accommodated the novel learning experience and what mechanisms might account for the negation of learning?

Reflection on experience has long been viewed as integral to the learning process. Kolb (1984) suggests that it is important in processing experience to allow for the development of novel concepts to guide future behaviour. Indeed, Bennet-Levy (2006) places reflection at the heart of his “Declarative, Procedural, Reflective” model for CBT skill acquisition. Some participants appeared capable of an independent reflection upon the experience in line with prior research (Happell & Roper, 2003) whilst others did not and subsequently were unable to process the experience as meaningful. This informs recommendations made below.

Kolb’s model has been criticised for not incorporating an affective dimension (Jarvis and Parker, 2006) into the learning cycle. Meyer and Land (2003) suggest that the threshold concept, that which allows for a new way of thinking about presented information, can lead to previously inhibited progressions in learning. Unlike Kolb (1984), Meyer & Land (2003) highlight the central role affect plays in gaining new and transformed perspectives. Some participants could articulate the value in an emotional connection to the learning experience. It seems that this learning experience is one that allows the participant to fully engage and
potentially exceed the threshold concept affording an opportunity for significant learning manifest in behavioural change.

The novel learning experience led to some participants having a “transformative experience”; being able to identify rich learning whilst others, still able to identify learning, could not be viewed to have had a transformative experience. The author tentatively suggests that the former were able to engage with the SU led teaching facilitating meaningful engagement with a threshold concept. The later were unable to engage and subsequently reflect upon the experience. Harmon-Jones, Brehm, Greenberg, Simon and Nelson (1996) provide some supporting evidence for this suggesting that attitudes can shift in the presence of cognitive dissonance but in the absence of psychological distress.

**Troublesome knowledge & cognitive dissonance**

Mezirow (1978) suggests that significant shifts in perspective occur after engagement with “disorientating dilemmas” and maintains the process of meaningful reflection on experience facilitates the processing and re-evaluation of perspectives. However, Perkins (1999) suggests that certain experiences may be represented in the form of “troublesome knowledge”, unpalatable and hard to digest. In categorizing troublesome knowledge, he highlights “alien knowledge” as that which sits in a conflicting paradigm to ones’ own. The results suggest that the session was both disorientating and troublesome to all participants. It jarred with the established, socialised expectations for learning (see above) and was experienced as alien by some participants. All participants experienced significant affective responses to the learning experience (sub theme; affective responses to experience).

Reflection upon the experience appears to have been significant in informing whether the experience was viewed as transformative. Those participants who negated the benefit of the experience were more likely to engage in affect avoidance through a number of mechanisms including blaming, dismissing as tick box exercises or attempting to rescue.
Schreuer et al. (2015) in discussing similar process in the training of clinical psychologists suggests a series of “ego-defence mechanisms” are employed including denial and splitting (Freud, 1936). Rachman (1980) posited “emotional processing” as a mechanism by which emotional disturbance is processed thereby allowing further accommodation of experience. Baker et al. (2012) summarise how this process might contribute to the maintenance of a number of psychological disorders. Whilst participants in the study could in no way be viewed as experiencing psychological distress, the ways in which they processed the affect elicited by the learning experience differed between;


This might suggest that a similar process occurs in which avoidance impacts upon emotional processing preventing the possibility of new learning.

**Recommendations for educators**

The findings from this study have particular relevance to those involved in CBT education. This paper has highlighted both theoretical and ethical justifications for involving people who use mental health services in the training of cognitive behavioural therapists. However, the study highlights that in order to optimise the benefits of inclusion and minimise accusations of tokenism educators might consider the following recommendations. These recommendations complement the considerations made for optimal SUI in MHP education (Tew, 2004; Townend et al., 2008) and recruitment to MHP courses (Matka, River, Littlechild & Powell, 2009);
1. **Preparation of trainees**: the involvement of service users can be highly affecting. This has the potential to facilitate or negate learning. Preparation of trainees through establishing expectations and a consideration of how the experience might best be used could maximise the learning opportunity. This is unlikely to temper the emotional impact of the experience but should optimise emotional processing and minimise related negating processes.

2. **Opportunities for post experience reflection**: reflection is integral to the processing of new experience into established learning. Alien knowledge can be uncomfortable/aversive and lead to cognitive avoidance. In the provision of forums for reflection on SUI educators might consider the identification and processing of both affect and cognitive content related to learning experience. This has the potential to generate new perspectives on therapist attitude, perceptual and relationship skills (Bennett-Levy, 2006). Furthermore the identification of uncomfortable affect provides the trainee therapist with opportunity for further self-practice advocated by the BABCP (2000) and refined by Bennet-Levy et al. (2014).

3. **Educators reflections on teaching**: there are an established set of parameters that define the way in which CBT educators can deliver training (IAPT curriculum, HEI restrictions, individual pedagogical attitudes). These parameters do not necessarily inform optimal learning opportunities. Educators should routinely consider the impact of the aforementioned parameters on desired educational outcomes and reflect upon the capacity for inclusion of novel training opportunities, such as SUI, to facilitate broader learning.

**Limitations**
In the absence of prior empirical research into the involvement of SUs in CBT training there was a strong rationale for employing an IPA approach (Robson, 2002; Willig, 2008). IPA approaches do not attempt to offer generalisable findings therefore the themes identified cannot be extrapolated. The study focussed on a sample of participants who had a limited experience of SUI in their CBT training, this places limits on the depth and breadth of their reflection. Furthermore, the focus of attention was on trainee experience at the exclusion of educator and SU experience, the inclusion of the additional experience would have provided a more in depth analysis.

**Future Research**

Despite the limited opportunities afforded to the participants for SUI in their education, the experience remained powerful, suggesting SUI in CBT education warrants further examination. This could entail exploring participants across multiple HEI sites and, with participants with a greater experience.

The study highlighted a number of comparisons with routine teaching approaches. This lends itself to the study of comparisons to further highlight the unique perspective offered through SUI. Quantitative research methodology has the potential to provide perspective on whether one approach could be viewed as significantly different to the other.

**Conclusions**

The study provides an insight into the experience a small number of trainee CBT therapists. The results suggest SUI in CBT training can be an emotive experience. This experience of emotion appears to be primed by a number of predisposing factors. The
appraisal of learning outcome seems to be informed by the way in which participants accommodate the emotional impact of the experience. Some participants seemed able to process emotion in a way that allowed them to appraise the learning experience as positive and identify specific learning outcomes. Whilst others seemed to struggle to accommodate the emotional experience and subsequently negated their learning experience. This process of learning as facilitated by emotional processing can be theoretically underpinned by processes of transformative learning (Meyer & Land, 2003). Whilst the chosen methodology prevents findings from being generalised the study does highlight a number of practical recommendations for educators in the preparation of trainees prior to SUI. It also emphasises the importance of promoting opportunities for ongoing reflection on novel training experiences.
References


