

## Self-case study as a catalyst for personal development in cognitive therapy training

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**Abstract.** Personal development is a vital requirement of counsellor development, and educators need to consider how best to promote and support students' personal development throughout training. 'Self-case study' can provide both learning and personal development opportunities for counselling students. This qualitative narrative study explores seven students' perspectives about their experiences of completing a self-case study as a learning requirement for a compulsory introductory course in cognitive therapy at undergraduate level. Unstructured individual interviews were used for data collection. Data analysis involved identifying themes and analysing the narrative structure of stories. The findings emphasized the view that self-case study provides useful learning opportunities in the areas of theory, practice and personal development. Most participants described transformational life changes resulting from completing a self-case study. This paper presents selected findings. The ethical issues and limitations of this study are discussed. Self-case study is recommended as a potentially effective education strategy.

**Key words:** Cognitive therapy, cognitive therapy training, narrative enquiry, self-case study, student perspective.

### Introduction and literature review

Counselling outcome research emphasizes that regardless of techniques used, the person of the counsellor and the counselling relationship contribute significantly to outcomes (Lambert & Barley, 2001). Hence the more self-aware and interpersonally effective the counsellor can be the more they are able to effect change in others. Similarly recent training research in cognitive therapy has focused on personal development contributing to interpersonal effectiveness as an important component in ultimately enhancing therapeutic expertise (Bennett-Levy & Thwaites, 2007a) To this end, it is important that counselling education promotes and supports personal development in students.

Despite this acknowledged importance of personal development in assisting students to become professional practitioners (Schön, 1983; Irving & Williams, 1995), there has been

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limited research available to guide educators in making this aspect of teaching effective (Bennett-Levy, 2006). Furthermore, students' perspectives are missing from counselling education research (Bennetts, 2003). Gathering student perspectives may enable trainers to better understand student learning and how students experience the personal development process.

Bennett-Levy has found that self-practice of cognitive therapy techniques and self-reflection can offer a valuable aspect in training cognitive therapists (Bennett-Levy *et al.* 2001). Laiterer & Willutzki (2005) strongly recommend self-practice and self-reflection as essential training strategies. Writing as a part of students' self-practice process, can assist personal and professional development (Bolton, 2005).

Writing case studies is a commonly used teaching strategy in counselling education and other teaching disciplines (Ramsden, 1992; Wasserman, 1993). Case studies offer an understanding of people in contexts, support the application of theory to practice and develop case conceptualization skills (Prieto & Scheel, 2002). These conceptual skills are essential for understanding clients' needs. There is limited research on the value of using case study or self-case study when educating counsellors. Krieshok & Pelsma (2002) found self-case study to be useful for vocational psychology students in the application of theory to themselves in real-life situations, deepening understanding of theory and being able to generalize skills to their vocational counselling clients. The authors of the study were interested in cognitive therapy students' experiences of self-case study.

## **Objectives**

The study objectives were to explore cognitive therapy students' perspectives on the use of self-case study related to their learning and personal development. This would allow a deeper understanding of student experience and the potential use of self-case study in cognitive therapy education.

## **Method**

### ***Participants***

Participants were seven undergraduate students (six women, one man) completing introductory training in cognitive therapy as part of a Bachelor of Alcohol and Drug Studies or General Counselling programmes. In New Zealand, as in the UK, short courses in cognitive therapy training are increasingly being offered to a variety of mental health professionals (Myles & Milne, 2004). Five participants were graduates and the remainder were completing training.

### ***Ethical issues***

An ongoing ethical concern for counselling education is the expectation that students use and share personal experiences while developing skills. This dual relationship requires trust from students and integrity from tutors who are also assessors.

The qualitative interviews were conducted 1–3 years post-self-case study as the researcher could only interview students following completion of the teaching relationship. Participation in this study was voluntary.

Ethical approval was granted by the research committee at the Auckland University of Technology.

### ***Case study format in education context***

In the Bachelor programmes cognitive therapy training is scheduled in the second year of counselling education. The introductory cognitive therapy training involved 70 hours of face-to-face teaching over 15 weeks including 30 hours of self-practice of techniques. Teaching emphasizes participatory and experiential learning. Students submit a taped cognitive therapy demonstration and case study for final assessment. Students have the choice of presenting a client or self-case study. They are instructed to choose a 'manageable' problem behaviour and to consult with their tutor if necessary.

The self-case study option involves an in depth exploration of a student's own problem behaviour 'as if [they] were onlookers' (Bolton, 2005, p. 7). This involves the student developing an assessment and treatment plan. The assignment requires students to complete and record the following tasks. First, provide a life review summarizing development, context and problem impact, then apply learning theory explaining what factors maintain the problem behaviour. The next task is to hypothesize what needs the problem behaviour is attempting to meet (Glasser, 1998). Students then completed a brief multimodal assessment (Lazarus, 1989) including goals with relevant interventions and finally wrote a cognitive conceptualization (Beck, 1995).

The self-case study was assessed on the application of cognitive theory to practice and specifically not on the personal content.

### ***Procedure***

Participants were recruited through a mail-out in 2007 sent to 46 students who had completed the cognitive therapy training between 2004 and 2006.

Narrative enquiry was chosen as a suitable research methodology related to the purpose of this qualitative research and the dual relationship of researcher and researched. The narrative interview method involves researchers positioning themselves as a reporter interviewing an expert on their experience (Josselson, 2007). Unstructured individual interviews opened thus: 'I am interested in your story of what it was like to learn cognitive therapy and to write a self-case study. Start anywhere you wish from when you began the course or as you completed the course or as you were writing the self-case study.'

An adapted analytical tool by Lieblich *et al.* (1998) was used to analyse interview narratives for both content and form. This allowed exploration of experience and individual differences between participants. Themes were compared and contrasted between participants. This article will focus solely on themes, related to participants' experience of completing a self-case study.

### **Results**

Participants chose problems such as procrastination, comfort eating, perfectionism, and social anxiety. The following themes emerged from the analysis: understanding the problem, the tutor relationship, the writing process, personal development, childhood trauma, empathy, and integration of cognitive therapy skills.

The themes are presented and illustrated with verbatim participant reports. Pseudonyms have been used for participants.

### ***Understanding the problem***

Participants experienced the self-assessment task as very useful for illuminating the impact of the problems.

Mary described the limitations of anxiety:

*Doing that study not only showed me my problem but showed me how big it all was. Every time I wanted to ... [speak] ... literally shaking and um sweating.*

For some, this beginning self-awareness was unsettling.

Jayne describes this experience:

*It was ... an eerie experience, mm. ... Yeah ... , I hadn't even thought about it, that this [case study] was the catalyst until now, mm ... it is very confronting.*

Participants described this deepened self-understanding as personally challenging. They gained insights to their use of unhelpful coping mechanisms, e.g. alcohol and drug use, avoidance, and work addictions.

### ***The tutor relationship***

Five participants emphasized trust and safety as important qualities in the tutor relationship supporting the self-development process.

Mauri said:

*especially the things that I wrote down that were quite um, personal ... and I was happy to actually go to that level of depth because of the person [tutor] that was reading it and if I didn't know ... and trust [that tutor] ... as much as I did ... , I wouldn't have shared as much.*

Rachael wrestled with the decision to self-disclose.

*It was ... quite hard because I thought 'Well I am putting all of my personal information into my assignment and how much do I want to do that?' ... and I realized that there was more benefit in it than there was discomfort.*

Rachael's dilemma is a salient reminder for counsellor educators to support and treat students with the same ethical standards of care as counselling clients.

### ***The writing process***

All participants reported development of self-awareness through the writing process.

Writing in the third person developed new perspectives.

JAYNE: *Seeing your story written out with so much thought ... it had never really occurred to me to look at myself really with that much depth before.*

As participants self-reflected, they gained insights leading to 'deepened' self-knowledge. Andy describes this process.

*I have known about that before, like a long time and . . . read about it [having a perfectionist attitude] . . . but it didn't actually change until I . . . I looked over my case, as I was writing it and I thought 'It is really, really you and this is why, it is you and this is how, it is you.'*

### **Personal development**

Many participants attributed 'life changing' personal transformation to completing a self-case study.

Mary offered her experience:

*The highlight was doing my own case study and I am just so grateful that I did that, as the social anxiety was . . . growing. For me . . . it was the breakthrough and that's changed my life, . . . it has enabled me to work where I am, . . . to be in groups of people, um it has changed every part of my social self . . . and my children . . . it is enormous.*

The depth of personal development included core belief change. Mauri describes this.

*But internal happiness, . . . to actually believe in it is a different level of happiness. I identified the core belief, . . . and to actually to be able to challenge it . . . which changes the emotional reactions for me in lots of situations.*

### **Childhood trauma**

Three participants viewed writing a self-case study as a catalyst for both remembering and processing childhood trauma. Participants emphasized the need for safety within the tutor–student relationship in order to tell these stories. As Bolton says: 'Artistic processes such as writing can . . . enable a harnessing of . . . memories which we do not know we remember (2005).

Jayne concluded that self-case study had illuminated the effects of childhood sexual abuse.

*When you look at it, in the context of survival, love and belonging, . . . you can see how much it would affect, well it did affect me, . . . in so many different areas, . . . power, freedom . . . because you're analysing yourself.*

For Mauri, helpful emotional processing was catalysed through the writing process:

*I have reached that place of release I guess, letting go, letting go of that anxiety, that fear that I had carried all my life and um a huge relief, really a huge relief.*

Although the structure of the self-case study is more scholarly than creative, research into expressive and explorative writing has shown significant health benefits (Pennebaker, 2000; Lepore & Smyth, 2002).

### **Empathy**

Participants developed more empathy for their counselling clients as a direct result of their own self-practice and self-development.

RACHAEL: *It [self-case study] gave me . . . an understanding of what it is like for anyone that I am going to try it [cognitive therapy] on.*

NELLIE: *Underneath all of this that motivates them to do this behaviour . . . through survival . . . maybe some core thing going on . . . it makes it easier to empathize with them.*

Participants transferred their deepened conceptual understanding of their own behaviour to their clients' behaviour.

### ***Integration of cognitive therapy skills***

Six out of seven participants described a sense of mastery with the skill of challenging unhelpful thinking. This sense of competence was shown by continued self-practice.

JAYNE: *I do use CBT a lot on myself, on my irrational thinking, often catching my thoughts out. 'How useful is this to be thinking this?'*

Participants described continued personal benefit from using: thought records; journal writing to track negative thinking; questioning themselves 'What is the evidence?' and testing rules for living. They attributed their success to the simplicity of the cognitive model and positive experiential learning.

## **Discussion**

### ***Self-case studies provide multi-dimensional learning opportunities***

This small study has built on the self-experiential work of Laireter & Willutzki (2003), Bennett-Levy and colleagues (2001) and Haarhoff & Stenhouse (2004) by introducing self-case study as a new form of self-practice. This study has added depth to the understanding of how students might benefit from this new self-practice element.

Participants emphasized the usefulness of the self-case study structure in providing personal experiential learning opportunities. It afforded a unique learning experience where the student was both author and the subject of the case study. Including the 'self' into case study adds opportunities for reflective writing and reflective reading which consolidates the learning (Bennett-Levy, 2006).

Participants described their involvement in conceptualizing, writing, re-reading and then self-reflecting as deepening both their self-awareness and their understanding of cognitive theory. This finding is also consistent with earlier research (Bennett-Levy, 2003; Laireter & Willutzki, 2003; Haarhoff & Stenhouse, 2004)

This study differs from previous research on self-practice and self-reflection (Bennett-Levy *et al.* 2001) as it has not differentiated between reflection on process and reflection on content nor included structured written reflections. This difference raises ethical considerations in training which are further discussed later.

Personal development heightened participant empathy for the counselling clients' experience which substantiates earlier cognitive therapy training research (Bennett-Levy *et al.* 2003; Laireter & Willutzki, 2003; Bennett-Levy & Thwaites, 2007b).

Participants developed a sense of confidence with development of cognitive therapy skills which matches earlier research (Laireter & Willutzki, 2003) and a sense of competency enabling continued self-practice of cognitive therapy as in Myles & Milne's (2004) study. Most described transfer of skills to clients as in the paper by Krieshok & Pelsma (2002). Participants' perception of competence was not measured.

### ***The use of self-case study can mean valuable self-development***

Self-case study acts as a catalyst to facilitate personal development. Trust in the student–tutor relationship was an important foundation supporting students to write a self-case study for assessment. Autobiographical self-case study writing is a powerful exercise. As Ricoeur (1986) wrote: ‘Self comes into being only in the process of telling a life story’ (p. 132).

Participants considered the application of several cognitive theoretical approaches (Lazarus, 1989; Beck, 1995; Glasser, 1998) helped them to develop self-awareness. Most participants described moments in this self-development process where new knowledge became internalized. Their words were ‘internalized’, ‘owned it, [knowledge] moved from a head level to more of an internal level’.

As noted by Marton & Saljo (1976) knowledge has become knowing which is tacit knowing. This integration of knowledge has a transforming effect on the person. Three participants described core belief change which they attributed to developing an understanding of how the core belief originated and use of thought records. Change at core belief level usually requires 6–12 months of sustained practice (Beck *et al.* 2003).

Childhood sexual abuse raised by participants was an unexpected finding in this research. Krieschok & Pelsma (2002) similarly found their students chose to disclose greater personal depth than trainers anticipated. It is acknowledged that these participants were a particular group who had already completed significant personal growth both within counselling training and in personal counselling. This may have prepared them to both continue further personal development through cognitive therapy skills practice and to specifically address childhood trauma via their self-case studies. The holistic structure of the case study and the writing process appeared to assist in bringing childhood sexual abuse forward and facilitate helpful processing (Pearson, 1994; Pennebaker, 2000).

Overall, participants experienced self-case study as deeply challenging, liberating and personally transformative. They recommended that tutors remain aware of students’ potential need for support. This is consistent with previous research (Bennett-Levy *et al.* 2001; Truell, 2001).

### ***Limitations of this study***

This study had a limited response to the 46 invitations sent to potential participants. However, seven participants is considered an appropriate number for an in-depth exploratory qualitative study (Rice & Ezzy, 2005). The reason 39 individuals declined participation requires speculation.

Possible causes for the low response rate may have been: the power imbalance in the student–tutor relationship, students being disinclined to reflect further on personal case study material, lack of interest given that 1–3 years had passed and prioritization of achieving qualification over participation in research activities.

The self-selection of participants is a significant limitation. While the participants were a purposive sample of ‘experts’ on their own experience (Rice & Ezzy, 2005), they may have chosen to be involved in this study because of positive counselling training experiences or loyalty to their former tutor. This dual relationship of the researcher as former tutor requires discussion. Participants’ desire to please their former tutor may have influenced the reported experiences. It also can be argued that the prior teaching relationship was a strength, as trust developed across time enabled safety for participants in disclosing to greater depth.

Completion of this study 1–3 years after participants had completed self-case study is a significant limitation due to participants' reliance on memory. Perhaps participants gave insufficient attention to other life influences for personal development.

The self-case study being written for assessment is a significant limitation. It is possible that students perceived that writing a self-case study may lead to a pass or enhance chances of a high grade. This remains an ethical issue in any project in which personal material may be disclosed in the context of an academic assessment. The use of voluntary unmarked self-case studies could mitigate this ethical issue.

This small study size ( $n = 7$ ) could be expanded with a larger group of participants interviewed by a researcher other than their former tutor immediately after completing the self-case study. If the researcher did not have a dual role with the participants, more students might participate in the study and disclose their experiences more freely.

### ***Implications for counselling and cognitive therapy education***

This study suggests that counselling and cognitive therapy education should consider inclusion of self-case study into the curriculum as a means of fostering theoretical understanding, skill enhancement and personal development. Personal development assists professional development which prepares students to develop as effective counsellors and cognitive therapists (Bennett-Levy & Thwaites, 2007a; Corey, 2009). Despite the primary academic focus of counselling training, educators must consider the demands of personal development and support students accordingly (Krieshok & Pelsma, 2002). Childhood trauma may be an experience for a number of students who are mental health professionals (Elliott & Guy, 1993). If self-case study is utilized as a teaching strategy, students and tutors need to be prepared for this possibility.

### **Conclusions**

Self-case study can be an innovative teaching strategy providing multi-dimensional learning opportunities for students encompassing understanding of cognitive theory skill development and valuable self-development.

### **Declaration of Interest**

None.

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### **Recommended follow-up reading**

**Bolton G (ed.)** (2005). *Reflective Practice: Writing and Professional Development*, 2nd edn. Los Angeles: Sage.

**Clandinin DJ (ed.)** (2007). *Handbook of Narrative Inquiry: Mapping a Methodology*. Thousand Oaks, CA: Sage Publications.



## References

- Beck AT, Freeman A, Davis DD** (2003). *Cognitive Therapy of Personality Disorders*. New York: Guilford.
- Beck J** (1995). *Cognitive Therapy: Basics and Beyond*. New York: Guilford.
- Bennett-Levy J, Turner F, Beaty T, Snith M, Patterson B, Farmer S** (2001). The value of self-practice of cognitive therapy techniques and self-reflection in the training of cognitive therapists. *Behavioural and Cognitive Psychotherapy* **29**, 203–220.
- Bennett-Levy J** (2003). Mechanisms of change in cognitive therapy: the case of automatic thought records and behavioural experiments. *Behavioural and Cognitive Psychotherapy* **31**, 261–277.
- Bennett-Levy J** (2006). Therapist skills: a cognitive model of their acquisition and refinement. *Behavioural and Cognitive Psychotherapy* **34**, 57–78.
- Bennett-Levy J, Lee N, Travers K, Pohlman S, Hamerni E.** (2003). Cognitive therapy from the inside: enhancing therapist skills through practising what we preach. *Behavioural and Cognitive Psychotherapy* **31**, 145–163.
- Bennett-Levy J, Thwaites R** (2007a). Self and self-reflection in the therapeutic relationship. In: *The Therapeutic Relationship in the Cognitive Behavioural Psychotherapies* (ed. P. Gilbert and R. L. Leahy), pp. 255–281. New York: Routledge.
- Bennett-Levy J, Thwaites R** (2007b). Conceptualizing empathy in cognitive behaviour therapy: making the implicit explicit. *Behavioural and Cognitive Psychotherapy* **35**, 591–612.
- Bennetts C** (2003). Self-evaluation and self perception of student learning in person-centred counselling training within a higher education setting. *British Journal of Guidance and Counselling* **31**, 305–323.
- Bolton G (ed.)** (2005). *Reflective Practice: Writing and Professional Development*, 2nd edn. Los Angeles: Sage.
- Corey G** (2009). The counsellor: person and professional. In: *Theory and Practice of Counselling and Psychotherapy*, 8th edn (ed. J. Brooks), pp. 16–35. California: Brookes-Cole.
- Elliott D, Guy J** (1993). Mental health professionals versus non-mental health professionals: childhood trauma and adult functioning. *Professional Psychology: Research and Practice* **24**, 83–90.
- Glasser W** (1998). *Choice Theory a New Psychology of Personal Freedom*. New York: Harper Collins.
- Haarhoff B, Stenhouse L** (2004). Practice makes perfect: practicing therapy techniques and training. *New Zealand Clinical Psychologist* **4**, 325–332.
- Irving JA, Williams D** (1995). Critical thinking and reflective practice in counselling. *British Journal of Guidance and Counselling* **23**, 107–113.
- Josselson R** (2007). Ethics in narrative research. In: *The Handbook of Narrative Research* (ed. D. J. Clandinin), pp. 827–840. Philadelphia: Sage.
- Krieshok T, Pelsma D** (2002). The soul of work: using case studies in the teaching of vocational psychology. *The Counselling Psychologist* **30**, 833–846.
- Laireter A, Willutzki U** (2003). Self-reflection and self-practice in training of cognitive behaviour therapy: an overview. *Clinical Psychology and Psychotherapy* **10**, 19–30.
- Laireter A, Willutzki U** (2005). Personal therapy in cognitive-behavioural therapy: tradition and current practice. In: *The Psychotherapist's Own Psychotherapy: Patient and Clinician Perspectives* (ed. J. D. Geller, J. C. Norcross and D. E. Orlinsky), pp. 41–51 Oxford: Oxford University Press.
- Lambert M, Barley D** (2001). Research summary on the therapeutic relationship and psychotherapy outcome. *Psychotherapy* **38**, 357–361.
- Lazarus A** (1989). *The Practice of Multi Modal Therapy*. Baltimore: Baltimore University Press.
- Lepore SJ, Smyth JM** (2002). *The Writing Cure: How Expressive Writing Promotes Health and Emotional Well-Being*. Washington, DC: American Psychological Association.
- Lieblich A, Tuval-Mashiach R, Zilber T** (1998). *Narrative Research Reading, Analysis and Interpretation*, vol. 47. Thousand Oaks, CA: Sage.

- Marton F, Saljo R** (1976). On qualitative differences in learning: I – outcome and process; II – outcome as a function of the learner's conception of the task. *British Journal of Educational Psychology* **46**, 4–11, 115–127.
- Myles P, Milne D** (2004). Outcome evaluation of a brief shared learning programme in cognitive behavioural therapy. *Behavioural and Cognitive Psychotherapy* **3**, 177–188.
- Pearson QM** (1994). Treatment techniques for adult female survivors of child hood sexual abuse *Journal of Counselling and Development* **73**, 32–38.
- Pennebaker JW** (2000). Telling stories: the health benefits of narrative. *Literature and Medicine* **19**, 3–18.
- Prieto LR, Scheel KR** (2002). Using case documentation to strengthen counselor trainees' case conceptualization skills. *Journal of Counseling and Development* **80**, 11–21.
- Ramsden P** (1992). *Learning to Teach in Higher Education*. London: Routledge.
- Rice LP, Ezzy D** (2005). *Qualitative Research Methods: A Health Focus*, 2nd edn. Melbourne: Oxford University Press.
- Ricoeur P** (1986). Life: a story in search of a narrator. In: *Facts and Values* (ed. M. Doeser and J. Kray), pp. 34–68. Dordrecht: Martinus Nijhoff, Basic Books.
- Schön D** (1983). *The Reflective Practitioner: How Professionals Think in Action*. London: Morrice, Templesmith.
- Truell R** (2001). The stresses of learning counseling: six recent graduates comment on their personal experience of learning counseling and what can be done to reduce harm. *Counselling Psychology Quarterly* **14**, 97–89.
- Wasserman S** (1993). *Getting Down to Cases: Learning to Teach with Case Studies*. New York: Teachers College.

### Learning objectives

- (1) To gain understanding about the experience of a group of students who wrote self-case studies.
- (2) To develop awareness of the potential of self-case study as an effective teaching strategy.
- (3) To consider the potential of self case-study for mastering skill development and promoting self-development for students.
- (4) To appreciate the value of narrative enquiry as a research approach which can facilitate an in-depth understanding of students' experience of writing a self case-study.