Why do people choose to become psychologists? A narrative inquiry

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Research suggests that mental health professionals have more problematic family backgrounds than those in other professions, but little is known about the role that early experience has on career choice. This is of particular importance for the education of psychologists, given the current emphasis on skills and research training and the call for a greater focus on personal development. This study aimed to explore connections between distressing events and career choice, using a qualitative narrative inquiry research design. Fifteen students participated, each undertaking junior psychology courses. For many distressing experiences in childhood, adolescence or early adulthood were directly related to career choice, supporting the development of empathy for others and inspiring them through both good and bad encounters with helping professionals. While a majority of participants followed this route to psychology training others were inspired by positive experiences, particularly in the satisfaction and the recognition of personal suitability gained from a variety of helping roles. More research is required, to assess the personal development needs of students, to map their occupational prognoses and to trial personal development initiatives in university settings.
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WHILE THE training of psychologists has traditionally focussed on the development of clinical and research skills (Larner, 2001) there is an increasing recognition that personal development is also a critical component in the development of competent clinicians (Hughes & Youngson, 2009). Many factors are responsible for this, including a substantial body of psychotherapy research which stresses that the therapeutic relationships plays a more significant role in determining treatment efficacy than specific skills or intervention models (Hubble, Duncan & Miller, 1999). While the development of technique is important, there is an increasing call for training programmes to focus on reflective-practitioners (Schon, 1991), who have a high degree of both personal and professional development. This call comes from consumers themselves (Hughes et al., 2009), students (Dozier, 2003) and those concerned with the prevention of burnout amongst professionals (Skovholt & Rønnestad, 2003, Smith & Moss, 2009).

One of the complexities involved in developing a focus on personal development in psychology training is the lack of a clear understanding of the psychological needs of students. It has been suggested that students are in fact inspired by the desire to resolve personal psychological distress (Goldberg, 1986), a wish to fulfil unmet childhood needs for intimacy (Wheelis, 1958), or the need to maintain caretaking roles adopted in the family of origin (Friedman, 1971). A number of studies have compared the backgrounds of psychotherapists and other mental health professionals to those of physicists (Fussell & Bonney, 1990), social psychologists (Murphy & Halgin, 1995), and a combination of other professionals (Elliott & Guy, 1993). Those in the mental health fields reported significantly higher rates of adverse childhood experiences than comparison groups, including parentification (Elliott & Guy, 1993), and evaluated their childhoods in significantly more negative terms (Fussell & Bonney, 1990). It has been argued, however, that these findings might be due to a greater ability to recognise

and report these experiences as a result of training and professional practice (Nikcević, Kramolisova-Advani & Spada, 2007). To address these concerns, a number of studies sampled counselling or clinical psychology students rather than practitioners. Students too experienced greater dysfunction in their family of origin than comparison groups (Brems et al., 1995; Kier & Lawson, 1999), had more negative perceptions of their family of origin (Kier & Lawson, 1999), and reported higher rates of adverse childhood experiences (Brems et al., 1995).

Despite these findings little is known about the processes that lead people who have experienced difficulties in childhood to pursue the field of psychology. A more substantial and richer understanding of the lives of students is required if these experiences are to inform the education and training of psychologists. The current study will feature junior psychology students who aspire to a career conducting psychological therapy. The study will employ an innovative qualitative methodology called narrative inquiry, one that is ideally suited for an exploration of the connections between distressing events and career choice across the life span (Bleakley, 2005). Data collection and analysis will focus on the question: How does your decision to want to become a practicing psychologist conducting therapy relate to the story of your life so far?

Method
Participants
Fifteen university students undertaking undergraduate psychology courses and intending to complete a major in psychology were recruited through an online research participation system and email. Inclusion criteria required that the participants' ideal future career was as a practicing psychologist conducting therapy and that they were fluent in English. Participants were aged from 18 to 37 years, including 10 recent school leavers as well as five mature age students. Ten participants were female and five male. Five participants identified themselves as Anglo-Australian, and ten consisted of a variety of other cultural and ethnic backgrounds.

Procedure
Data analysis
Narrative construction
Narratives were constructed according to methods described by Connelly and Clandinin (1990) and Howie (2010). Chronologies listing major events discussed in the interviews were written first to provide a scaffold. Headings reflecting major topics of interest relevant to the research questions were then derived from the transcripts. Text within transcripts was collated according to these headings, and extraneous material was excluded. Narratives were then created using the chronology and headings as a guide, in the third person past tense and using participants' own words. Narratives were then presented to participants at a second meeting to determine whether they were authentic reflections of their experience. Participants were also given the opportunity to make additions, deletions, or alterations (Chase, 2000). Where necessary, revisions were checked with participants through email. Without exception, participants affirmed their narratives, and while a small number of minor alterations were requested, these were not pertinent to the research questions. After narratives were finalised, participants were assigned pseudonyms and all identifying data was de-identified.

Analysis of narratives
Thematic analysis was applied to the final narratives to identify patterns across participants and to develop themes in accord with the research questions (Howie, 2010). In this process, each sentence in a narrative was interpreted and summarised, resulting in a distilled phrase reflecting the major elements relevant to the research questions. The distilled elements from each narrative were then provisionally assigned codes according to their content and meaning. Across narratives, elements with a shared

focus were placed in the same code, and code definitions were maintained and refined to ensure they correctly represented participants' narratives. Codes were then re-examined with a senior colleague, and finalised. Relationships between the codes and attributes of participants were then explored.

Results

The influence of distressing events.

A significant number of participants in this study described the experience of distressing events in childhood, adolescence or early adulthood as an important influence on career choice. These events varied greatly in nature and severity and included: falling out with a close friend, self-esteem issues in adolescence, sibling and parental suicide, immigration, coming out as a homosexual, the death of a family friend and childhood neglect and abuse. From these experiences, participants developed compassion and a strong desire to help others.

Participants emphasised the feelings of isolation that accompanied their psychological distress. Describing the aftermath of a major falling out with her former best friend, Cheryl said, *'I just could not understand like I got really hurt and I was really depressed and down for ages'*, and also felt that she *'didn't have anyone to talk to about this.'* Similarly, Amanda recalled her issues with self-esteem: *'I wasn't happy with the way I looked, I wasn't happy with how I acted, my personality'*, and in retrospect, laments having *'gone through this whole journey by myself.'* Analogous emotions were involved in Nicolas' experience of preparing to come out as a homosexual. He admits, *'that was probably the lowest part in my life'* and *'one of the most traumatic things that someone could go through.'* Because of the inherent secrecy involved in his situation, Nicolas also *'didn't know where to turn … who to talk to.'*

For these participants, the combination of psychological distress and isolation resulted in the development of empathy for others in similar circumstances. Regarding her experience, Cheryl felt very strongly that *'other people should not have to feel like this'*, and asserted, *'if someone else goes through this, I want to be the person they can talk to.'* Amanda also believes that her experience inspired her desire to help others: *'reflecting back on that age and the trouble I had as a young child … I realised that I wanted to help people.'* Having had to negotiate coming out by himself, Nicolas asserted, *'I don't want other people to go through the same thing'*, so much so that he insisted, *'that's what I want to dedicate myself to, helping people through that life experience.'*

The influence of seeing helping professionals

Other participants were influenced to become psychologists because of help they received from professionals. Sara, for example, saw two general practitioners after her sister's suicide, and her mother's subsequent mental illness. Compared to other helping professionals, Sara found their assistance *'the most helpful'*, and thought, *'I really admire what you do, I want to become a GP.'* However, she later *'realised the role that they played in my life was more one of a psychologist'*, and decided that she would like to help others in the way they had helped her by becoming a psychologist. Similarly, Janice was inspired to become a psychologist after a positive experience with a helping professional. Feeling overwhelmed by culture shock after immigrating to Australia from Asia, Janice *'went to see the counsellor and she kind of helped me through.'* After her experience of being helped through her own problems, Janice concluded that *'it's such a good profession to actually help people get used to the culture and environment'*, and *'thought helping people in this way would be a really worthwhile thing to do.'*

Others were motivated because of negative experiences with professionals. Radha, for example, decided to seek help after engaging in self-harm and attempting suicide, and was referred to a psychiatrist. She recalls, *'after telling my whole story for like an hour, so she just say okay, these are the medication I prescribe, you take it this much.'* Radha considered the experience *'traumatising'* as

she had sought help and gotten *'nothing'* from the psychiatrist, and *'still didn't have anybody to talk to.'* In their consultation, the psychiatrist informed Radha that *'she was not a psychologist, she was a psychiatrist'*, a distinction she had been unaware of. This proved to be instrumental to Radha's eventual decision to become a psychologist, as it initiated her research into the profession. She recalls, *'that's when the whole thing started developing.'*

The continuing need to understand oneself

While many of these students found empathy for others after distressing events and some sought professional help, they still entered training with unanswered questions. Marcus believed that studying psychology would help him understand his own uncharacteristic behaviour after an acrimonious break-up. *'It hurt me so much and made me act out in ways that I know I'm not, I'm hoping studying psychology will allow me to understand why I did the things I did.'* Marcus also hoped his studies would help him gain insight into what it means for him to be homosexual. *'Another reason for wanting to go and venture into this field is because I want to understand what makes me gay.'*

Vivian, on the other hand, hoped to make better sense of the abuse and neglect she had suffered as a child: *'I hoped I would have a more scientific picture or theory-based picture into what I've been going through.'* Radha also perceives the pursuit of a career in psychology to be a means of understanding of her family members and dynamics. Because of her conflicted relationship with her divorced parents, and her troubled childhood, Radha believes that it is important for her to understand her family, stating, *'I guess that's what's most important to me, explaining my family first and then [helping] others.'*

The influence of prior helping roles

Many participants also nominated positive experiences helping others as influencing their choice of career, including the provision of peer and family support, volunteer work, and school leadership roles. Interest-

ingly, the majority of these participants had not experienced significantly distressing life events, although some described self-esteem or identify stresses in adolescence.

Geraldine highlighted the importance of the helping role she held while at boarding school, and how it had helped her to realise the impact that talking to people about their problems could have. *'I think the decision to become a psychologist would come back a lot to the intimate environment we kind of had at school, like especially the way that boarding houses were set up. In Year 10 you were kind of the dorm monitors for the younger girls … we kind of talked to them all individually and went through what was worrying them and stuff and that really helped.'*

Speaking about her volunteer work in a nursing home, Janice emphasised the importance of satisfaction in her decision to pursue psychology. *'I did drawings of the old people and do massages and play lawn bowls with them, it's great … Yeah, that nursing home experience or volunteer work really pushed me towards this kind of helping profession … It just gives me this enormous amount of satisfaction'.*

These experiences were seen as relating to particular personal characteristics that suited them to a career as a psychologist. *'We've been given gifts and talent in certain areas and I feel like this is the occupation or job which suits mine in a good way … Not everyone can be patient enough or impartial enough to sit down and talk to someone'* (Alistair).

'I know that you need to have an analytical mind for psychology. You have to be able to see things from a different perspective and I think I'm able to do that …. And that's another reason why I decided to go into psychology' (Nicholas).

The influence of role models

A variety of different types of role models also influenced career choice. In the case of Victoria, her mother played a central role: *'she's always involved in the community and helping people. I guess that's why I admire her a lot and think, you know, maybe that's where I get it from.'* Radha, one the other hand, was influenced by a friend who taught maths in underprivileged schools: *'that's what pushed*

me to help, because most of those children he works with has [sic] nothing.' She described how her own history of childhood distress, suicidality and self-harm, coupled with this role modelling supported her choice to pursue a career with disadvantaged children.

Others described how observing therapists at work consolidated their career choice. Miriam observed counsellors supporting a family friend in hospital: *'I saw how much of a difference they made and how much they could help just by knowing things to say and things to do, it really just made me feel yeah, you've chosen the right degree.'* Nisha witnessed the positive effects of psychotherapy on her husband who was suffering from a mental illness. *'One of the doubts I had was how useful is any of it? Does it actually do any good?'* However, after seeing improvement she concluded that, *'I've seen that it actually does do something useful.'*

Career advice
In many cases the choice to become a psychologist was clarified or consolidated by career advice. In some cases the advice came from loved ones: *'I was sitting with my dad and my dad was talking about bringing up children. I made a comment about child rearing or something and he's like gosh, you should be a psychologist. And that's when the idea of becoming a psychologist clicked'* (Nicholas). In others it came from professional advisors at school. *'We went to a careers advisor and she also recommended psychology and so I'm like oh, I've got to do something and so I may as well do this. But yeah, like talking about it with the careers advisor, it made the idea more firm in my mind, gave me more confidence kind of thing'* (Gavin). Amanda had a long-standing desire to help people and was encouraged to select psychology. *'I'd never actually really thought about it until I went to a counsellor in Year 12, a careers counsellor, and he said to me you know what are your interests, like what do you do outside [school] and I told him about like my volunteering and he said have you ever thought about psychology?'*

Discussion
Despite previous research that implicates psychological distress in career choice for psychologists the majority of studies have failed to provide rich descriptions of lived experience, ones which allow for a more complex understanding of the personal motives of student psychologists. Results from this study lend support to the finding that distressing events do play a role in career choice. These events had a variety of effects, including the development of empathy and a desire to help others, in some cases the desire to emulate professionals who have helped or be better than ones who did not. For some this career choice is then consolidated by observing helping role models or by specific career advice. Interestingly, in this study, not all distressing events related to childhood. Many of the events described occurred in adolescence and some in early adulthood. The stereotype of parentified children still seeking lost needs for intimacy was not a major theme.

Of particular interest was the finding that, for a significant number of participants, distressing events were not related to career choice. These students were motivated by positive, satisfying experiences they had in helping roles, experiences which for some demonstrated their personal suitability for the profession. This mediates against a dominant story of all psychologists as 'wounded healers' (Burns, 2009).

The question remains, however, as to the needs of psychologists who may have been inspired, in part, by distressing events earlier in their lives. It seems from this study that some may still be entering training with a desire to understand themselves further and that many will be disappointed by the lack of such emphasis in much psychology training at present. Indeed, Dozier (2003) found that clinical psychology students were most dissatisfied with the attention their programme paid to personal development. Of equal concern is our lack of understanding concerning the occupational prognosis for these students, if this perceived need for

personal reflection is not given greater attention. It is clear is that all psychologists choosing to work therapeutically will face significant risks. Adverse psychological consequences, including compassion fatigue and burnout, are particularly prevalent (Carroll, Gilroy & Murra, 1999), negatively impacting the professionals themselves, but also increasing the likelihood of unethical behaviour and impaired professional efficacy (Neumann & Gamble, 1995; Smith & Moss, 2009). It is also clear that specific personal characteristics have been associated with greater susceptibility to occupational stress, including when professionals conducting therapy are motivated by a desire for intimacy (Farber, 1983), or tend to become emotionally involved with clients (Gomez & Michaelis, 1995), or have unrealistic expectations of practice which may also represent a vulnerability (Kottler, 2003; Skovholt & Rønnestad, 2003). More research is required to support the role that educators in psychology play, in both protecting future clinicians from harm and ensuring that their future clients receive the best possible treatment. In particular, longitudinal studies would be of benefit, mapping the course of students, from university admission to employment, with particular attention paid to isolating early signs of occupational stress and burn-out.

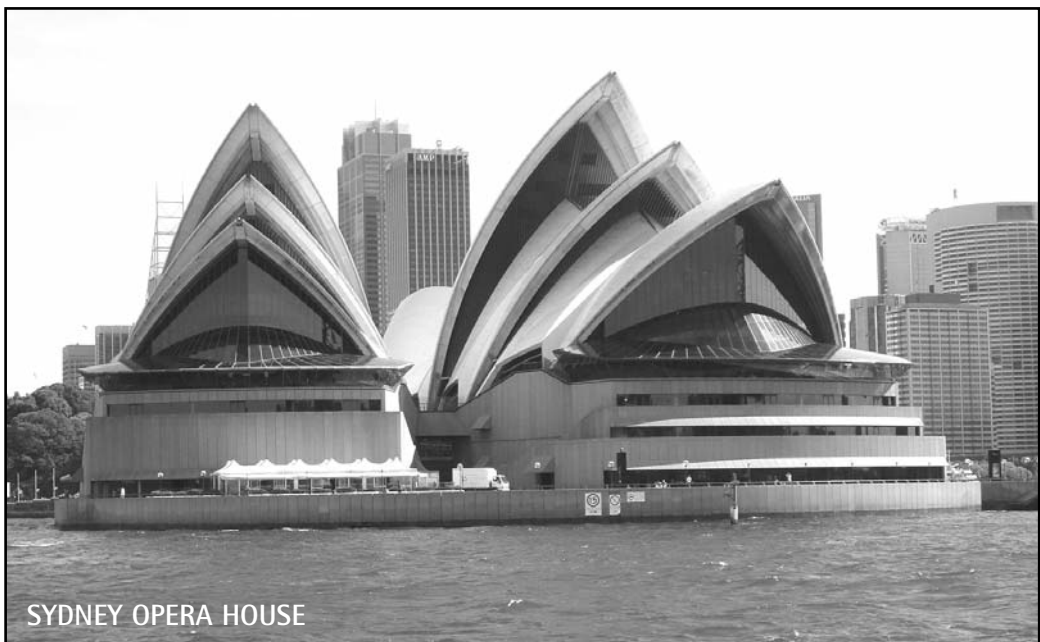**The authors**
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