2010

Recognising Prior Learning in Psychotherapy Training: a Critical Appraisal

Aine O'Reilly

Clanwilliam Institute

Follow this and additional works at: https://arrow.dit.ie/level3

Recommended Citation
Available at: https://arrow.dit.ie/level3/vol8/iss1/5

This Article is brought to you for free and open access by the Journals Published Through Arrow at ARROW@DIT. It has been accepted for inclusion in Level 3 by an authorized administrator of ARROW@DIT. For more information, please contact yvonne.desmond@dit.ie, arrow.admin@dit.ie, brian.widdis@dit.ie.
Recognising prior learning in psychotherapy training
A critical appraisal

Aine O’Reilly, Clanwilliam Institute, 18 Clanwilliam Terrace, Grand Canal Quay, Dublin 2

Abstract
Recognition of prior learning (RPL) raises policy and procedural questions and also ideological, ethical and political questions. Focusing on psychotherapeutic training this paper presents critical reflections on RPL and argues that this accounting highlights questions and tensions that a focus on policy and procedure alone can obscure.
Introduction

Clanwilliam Institute (CWI) has been one of the leading centres of systemic (family) therapy and practice in Ireland since its establishment in 1982. It provides a variety of services including marital and family therapy, mediation, organisational consultation and professional training for systemic practitioners. In 2007 CWI received accreditation with the Higher Education and Training Awards Council (HETAC) for its Postgraduate Diploma and Masters in Science in Systemic Psychotherapy training programmes which are placed at level 9 on the National Framework of Qualifications. These HETAC accredited programmes are a development of training programmes run for over 20 years prior to academic accreditation. Prior to 2007, CWI training, similar to a substantial portion of psychotherapy training in Ireland, depended on a voluntary system of recognition by non-statutory professional bodies, in this case the Family Therapy Association of Ireland (FTAI). However moves towards the professionalising and statutory regulation of the profession, spurred by concerns about client protection and professional recognition, are leading increasingly to alignment with national and European academic and professional standards (ICP 2003). Currently all psychotherapy training in Ireland that comes under the umbrella of the Irish Council for Psychotherapy (ICP) is working towards European standards established by the European Association of Psychotherapy (EAP), the European psychotherapeutic organisation with consultative status at the Council of Europe. The CWI was the first training provider in Ireland to be accredited under European compliant regulations.

This somewhat rapid transition from non-formal training to accredited, regulated training is a site of great potential for psychotherapy training. Accreditation provides significant possibilities for evolution of systemic psychotherapy training informed by the wealth of knowledge of European psychotherapy and academia. However, the space between psychotherapy and academia can be a site of tension and discord. Academic perspectives on training are embedded in construction of knowledge and learning that at times do not fit comfortably with the philosophy, theory, ethos and practices of psychotherapy. The project of achieving formal accreditation for the sector allowed for a negotiation and movement towards some common position – a dialogue between the academic and the psychotherapeutic. However that common position is neither fixed nor stable. It is a provisional positioning, always subject to challenge, re-negotiation and change. This
paper argues that the tension in the space between the academic and the psychotherapeutic, in particular as it plays out in the practice of RPL, can be seen in terms of its potential: that it provides a space for critical reflections on educational practices that can be useful for both academic and psychotherapeutic knowledges and practices.

This assumes that RPL is a particular site of tension – and therefore of possibility – between the academic and the professional. On the one hand RPL offers considerable potential for moving psychotherapy training towards academic recognition without excluding those who have invested so much of themselves in psychotherapeutic-related learning prior to accreditation of training programmes. It allows those who have the knowledge skills and competence gained in non-formal learning settings to be recognised and credited with this learning. Furthermore its safeguards and its procedural requirements are intended to ensure that this happens while also maintaining standards – surely the best of both worlds for a profession on the cusp of statutory registration! On the other hand its process of comparison between formal and non-formal learning throws into sharp relief the differences in what counts as learning in psychotherapeutic and academic learning. How this site of difference is managed is crucial to how psychotherapy moves forward.

**Professional training in psychotherapy: the context**

Professional training in psychotherapy, in particular in the field of systemic psychotherapy, is undergoing considerable change. Movements towards the accreditation and regulation of psychotherapy training by regulatory bodies external to the systemic psychotherapy field – such as academic, statutory and European psychotherapy bodies – is, in the main, relatively recent and fits with movements within the profession to align pre- and post-qualification training with European and National Frameworks of Qualifications and to standardised entry requirements to, and standards for, the profession across Europe. The 2007 accreditation by the HETAC of the CWI Postgraduate Diploma and Masters in Science in Systemic Psychotherapy is an example of this move towards external regulation. Previously the practice and training of psychotherapy, and in particular systemic (family) psychotherapy, had tended to occur outside of the statutory regulatory systems for professional practice and training in Ireland, Europe and elsewhere (for Ireland see ICP 2003; for UK see Alliance for Counselling and Psychotherapy 2009; for Canada
see Psychiatric Patient Advocate Office 2005; for New Zealand see Ministry for Health 2007). Instead, standard setting and quality assurance have depended on a voluntary system of regulation introduced by non-statutory professional bodies such as the FTAI, and the European Family Therapy Association (EFTA).

The CWI accredited programmes are a development of a training programme run for over 20 years prior to academic accreditation by the Institute. This previous programme was accredited by the FTAI and recognised as fulfilling specified training criteria for the purposes of FTAI full membership. The CWI HETAC accredited programme differs from the previous programme provided by the Institute in significant ways; however there is also considerable continuity in the pre- and post-HETAC accreditation programmes.

In attempting to align itself with academic bodies in particular, psychotherapy training needs to take on broad processes and procedures from academia that are different to professional training. Achievement of academic accreditation requires the shaping of training discourses and practices by external systems of meaning and valuing that at times do not fit with the meaning-making and valuing of the theories of psychotherapy. RPL is a particular site of tension between the academic and the psychotherapeutic for a number of reasons. RPL procedures require a comparison of formal accredited training and non-formal, unaccredited training – and therefore make visible the differences. RPL measures non-formal psychotherapeutic training by the standards, values and procedures of formal academic training, determining what can be counted as learning and what cannot be counted. Process groups, personal development, critical self awareness are central to a profession that depends for its usefulness on relationships and process rather than end products, but these do not lend themselves automatically to academic assessment strategies. The inclusion of a social justice agenda in the ethics of systemic psychotherapy resulted from a long, and at times contentious, debate within the Irish community of family therapists (see O’Reilly 2005) and yet within an academic framework privileging this particular worldview is not always straightforward. Learners in psychotherapy training are also clinical practitioners and the ethical requirement of clinical practice, including self care and client-centred positioning, do not automatically fit within a learner-centred approach to education and training.
Recognition of prior learning possibilities within the profession

These differences notwithstanding, RPL is of particular importance in the psychotherapeutic domain, where learning has tended not to be formally recognised. Psychotherapists whose training is non-formal, many of whom are registered as fit-to-practice with their professional body, do not have an academic qualification attached to their professional qualifications. This can impact on their progression through academic education, on their job prospects, and may impact on areas such as mobility and progression within the profession, particularly when statutory registration of psychotherapists is introduced.

RPL is a process that appears to be particularly useful in managing the transition of professions such as psychotherapy into the higher education net. The recognition of prior learning is a statutory requirement of HETAC and FETAC accredited programmes.

Recognition is a process by which prior learning is given a value. It is a means by which prior learning is formally identified, assessed and acknowledged. This makes it possible for an individual to build on learning achieved and be formally rewarded for it. The term ‘prior learning’ is learning that has taken place, but not necessarily been assessed or measured, prior to entering a programme or seeking an award. Prior learning may have been acquired through formal, non-formal, or informal routes.

(NQAI 2005: 2)

RPL facilitates a learner’s lifelong learning through providing possibilities for access, transfer and progression. The purpose of RPL according to the National Qualifications Authority of Ireland (NQAI) policy framework is

- entry to a programme leading to an award
- credit towards an award or exemption from some programme requirements
- eligibility for a full award

(NQAI 2005: 2–3)

RPL’s facilitation of flexibility of learning pathways allows, on the face of it, continuity between
non-formal learning and formal learning where standards can be demonstrated to be met. This process recognises and supports the interests of learners in obtaining formal recognition for prior learning. This is of particular importance where entry to the profession has tended to follow routes through professional training and work-based learning rather than academia.

However, at the same time the process and procedure for granting formal recognition must maintain academic standards and public confidence in academic standards. Recognition of learning requires demonstration of equivalence of learning; that is that the standards of training on a specified training programme are demonstrated to be met but are met in different ways to ‘standard’ learners on or entrants to a programme. Therefore applicants are required to demonstrate achievement of standards. Training institutes are required to develop robust and ethical assessment of RPL procedures, quality assurance mechanisms, as well as processes for consultation and review of policies and practices.

Within the CWI, for example, RPL applicants are required to demonstrate achievement of standards of the training programme against which the recognition is sought. The programmes in Systemic Psychotherapy are not only academic programmes; they are also professional training programmes complying with European standards for psychotherapy. Therefore applicants for formal recognition of learning must demonstrate not only academic learning but also equivalent professional learning, competence and compliance with professional award standards and criteria.

RPL is not only about determining equivalence of standards, it is also about the process by which that equivalence is measured. Where RPL is not rigorous and thorough then public confidence in academic and professional awards will be threatened. In order to balance the sometimes competing aims of recognising prior learning and maintaining academic and professional standards RPL policy and procedures must ensure a consistent and equitable approach to the granting of recognition and recognition and must be embedded within quality assurance mechanisms. RPL learners must not be advantaged or disadvantaged in comparison to regular learners as a result of RPL procedure.

These procedural requirements call for consultation and negotiation at a number of levels as is
demonstrated in the case of the CWI in Figure 1. Consultation is required with academic and professional accrediting bodies, professional ethical regulations and bodies, funding agencies and governance structures within the Institute – its Institute Board, Academic Council and Management structures. CWI is a provider of therapeutic services and a registered charity as well as a training provider. Therefore CWI policies cannot be developed without reference to the wider context of its governance. In this regard, RPL policies and procedures need to incorporate and address the requirements of various governance and regulatory bodies that oversee the professional practices of the Institute.

The construction of an RPL policy needs to satisfy these many varied requirements, and therefore the framework presented for consultation needs to be consistent, rigorous, and inclusive of many positions. To be acceptable to the various stakeholders, the grounding documents need essentially, to argue its case, methodically, systematically, meticulously, exhaustively. This is both a benefit – the process will be required to be thorough before being accepted – and a difficulty. This intense governance is necessary to ensure maintenance of standards; its aim is to make visible RPL procedures and to ensure accountability for RPL outcomes. It provides, on the face of it, a general framework that is open to considerable challenge and improvement by stakeholders, in particular in terms of its procedural compliance to good practice. However – to use a psychotherapeutic analogy – the manner in which the story of RPL is told shapes and constrains the challenges it invites. To tell the story of RPL as process and procedure is to invite challenge and critique to those processes and procedures; it is not to invite a critical reflective challenge on the construction and meaning of RPL, or an exploration of how the practice of RPL plays out in the lives of applicants to the process. In this sense RPL could be seen as a totalising strategy; a process of recognition that obscures the dilemmas within its operation. To tell the story differently is perhaps to invite different challenges and different reflections.

**RPL: multiple narratives**

The narrative of recognition of professional learning can be told in many ways. Within CWI a consultation document for stakeholders is required that outlines procedures and policies and places these within a framework of professional and academic narratives, including CWI theoretical and ethical narratives. Information for applicants and assessors is also required; these documents describe what is done by whom and how this links to wider Institute policy and ethos.
Figure 1: Stakeholder input in RPL operating principles in CWI: Sources
This process of document construction, consultation and revision is intended to produce a finished product that is acceptable to stakeholders as thorough, fair and compliant with regulations and can be utilised by learners and the CWI in the process of recognition.

Such a process does not lend itself easily to critical reflections. And yet, presenting policy and procedural development without a critical reflection on the meaning of a project is I think problematic. While there are indeed many procedural difficulties, there are also ideological, ethical and political questions that a focus on procedure can obscure. This account provides another possible narrative alongside the narrative of policy construction that – at least provisionally, temporarily and marginally – allows for a place of critique. Without such a critique the development of RPL can be seen in terms of goodness of construction and the wider ideological and ethical questions obscured; or indeed the ideological and ethical questions can become so problematic that procedural constraints are devised to allow applications for RPL only in certain relatively straightforward situations. In either case, the inclusive potential of RPL can be lost. This is particularly possible with RPL where there are choices that are involved in how far along the track of providing options for RPL applicants a training provider can go. This is an area that a training provider can chose – up to a point – not to develop, and in particular, where a provider can chose not to be innovative. And yet if we are serious about the potential of RPL to foster difference and inclusivity in the community of learners, and to promote new understandings of what might be counted as learning within the community of educators, then, surely, it is innovation and development that is required.

Perhaps also not engaging critically with some of the issues RPL raises is to sidestep questions that are not solely embedded within the RPL arena. Within the CWI RPL process a comparison of current accredited formal and previous informal training – as is required by RPL process – makes visible differences between these trainings, and the question in the RPL process is what is missing from non-formal learning. This is a sufficient step for the RPL process, but not for a critical engagement with the ethics, theory and practice of psychotherapy training. Such an engagement requires that we ask: What does formal learning leave out? What could we include before that is not included in formal learning? In what way does compliance with national standards and procedural requirements shape our training? Does this shaping fit or not fit for the
profession? Do these changes work towards the benefit or detriment of clients? These ethical practice questions suggest that the problematic areas of RPL (in addition to the dominant questions of quality and maintaining standards of awards) are embedded within a wider context than RPL. For the psychotherapies they raise the problematic nature of formal accreditation of psychotherapy training where national and European standards may not reflect the ethos, values, ethics and beliefs of the profession.

A critical exploration raises uncomfortable questions about what accreditation means for psychotherapy training, rather than – or as well as – what RPL policy means for professional and academic training providers. Perhaps, even, where RPL is seen as a contested site, a place where tensions become visible, then critical examination of the issues it raises can be a useful if uncomfortable project for all of us involved in higher education. What, if any, differences lie between national and European standards and the values and beliefs of any educational programme? Are we measuring and marking – and thereby rendering visible – that which we consider to be the fundamental essential outcomes and processes of our education and training? What might we be leaving out of our programmes of education – and thereby rendering invisible – as a result of our focus on standards? How does this focus on standards and on processes and procedures shape our training provision and how does this shaping play out in the lives of our learners? These questions are not, perhaps confined to the psychotherapeutic domain, or even the higher education domain, but have resonance throughout education.

**Formal recognition of psychotherapy training: an uncomfortable project**

Formal academic accreditation of systemic psychotherapy training is problematic. It requires the shaping of training discourses and practices by external systems of meaning and valuing that at times do not fit with the meaning-making and valuing of the theories of psychotherapy. Systemic psychotherapy has undergone a period of challenge, critical self-reflection and change over the last three decades (Parker 1999). It has found its own claims to knowledge and expertise questioned not only from within (Guilfoyle 2006) but also from other regimes of knowledge production and professional practice such as academic accreditation processes, funding agencies, the courtroom, the medical centre, not to mention the novel, film and radio talk show. The
questions of how psychotherapeutic knowledge is produced, who may lay claim to it, and the consequence of the practices based on this knowledge have become particularly significant, prompting an interrogation of the profession’s past (Rose 1985; Rose 1999) and its current knowledges and practices (Guilfoyle 2006; White and Epston 1990). Alongside the evidence-based questions common to any profession that lays claim to a scientific base and with it public funds – such as how effective is our practice, do we provide value for money, can we demonstrate a positive outcome from therapy, what standards are required of our profession? – lie ethical, theoretical, professional questions such as: What are the links between therapeutic practices and macro socio-cultural process and institutions? (See Rose 1985; Rose 1991; Guilfoyle 2006.) What are the implications of therapy’s tendency to construct and reproduce a particular value-laden version of personhood? (See Sampson 1989; Parker 2000.) How does therapy contribute to the maintenance and reinforcement of dominant oppressive structures? (See Rose 1999.) What are the implications of the construction of the individual as a local site for diagnosis and intervention? (See Simon 1998.) The evidence-based and theoretical/ethical questions are not unrelated; indeed their interrelationship provides another interactional layer of questioning: How does the acceptance of outcome measures for therapy or training, the measurement of effectiveness and efficiency and all the other regulatory processes that we are embedded in, impact on the ethical and theoretical positioning of psychotherapy? To what extent does the question of an evidence base for our practice highlight or obscure the relationship between therapy and macro socio-cultural processes? Or indeed to what extent do assessment of standards based on national frameworks shape the training of psychotherapists, giving value to some areas of therapist accomplishment (such as knowledge, skills, competence) and rendering invisible and without value others (such as being with another; critical reflexivity; ethical and personal reflections) (Larner 2004).

Challenges from within and without the systemic field have impacted upon the way the profession and its practices are constructed (see Boston 2000). With the postmodern turn in psychotherapy, totalising expert narratives are opened to interrogation, and the local, personal knowledges of clients, service users and consumers of services are given recognition previously unheard of. ‘[T]he power and privilege ascribed to those who were presumed to possess knowledge has been undermined, with the perspectives of all individuals understood as having
validity in terms of personal truth’ (Sexton, Weeks and Robbins 2003: 6). Personal truth, local knowledge, the obscured and silenced tellings of history and stories become not only valued telling in the therapeutic domain; they are also challenges to the knowledge and practices of psychotherapy, acts of resistance to a psychotherapeutic grand narrative that shapes the client and indeed the modern self (Madigan 1999).

In systemic psychotherapy, with its emphasis on contextual meaning-making and interconnections between contexts, we are particularly self-conscious about how our training and psychotherapeutic practices mirror each other. The grand masters of family therapy may be experts in their localised areas of knowledge, but this does not place them or their knowledges beyond challenge, by clients as much as by therapists or trainee therapists. Trainers are required to judge the learning of their learners – we are after all required to produce therapists who sit with clients – but the manner of judging – the standards, practices, textual resources and devices of our training (and judging) are open to challenge, and – through our theories – we are required to allow, facilitate, encourage and respond to such challenges. With non-formal training the possibility of responding to such challenges and changing training practice rested with CWI and its professional body. Within the more formalised structures of accredited training change is a much slower – and more constrained – process, and psychotherapy becomes embedded within an academic higher education discourse that can seem both alien and unwieldy.

**Critical reflections: challenging the regulating of psychotherapy training**

How to include the requirement for outcome measures for therapy and common training standards for psychotherapy within a systemic, social-constructionist, narrative therapeutic training and practice is an ongoing debate in the psychotherapy field (Boston 2000). However, psychotherapy is no stranger to the need to continue to operate in the face of discontinuity, contradiction and destabilising. Psychotherapy has tended, in this current postmodern phase, to find holding positions that allow us to continue to practice without neutralising a debate through premature stance taking (FTAI 2005). This requires a reflexive approach that is inclusive of disparate conflicting positions. Postmodern psychotherapy does not ‘decide between truth and fiction, but articulates both in a double reading or meaning, oppositions or duality is suspended
but presented simultaneously’ (Larner 1994: 14).

Larner’s approach might suggest a holding of standards and outcomes questions with the ethical theoretical questions. But we do need to decide what course of action to take; in this case how open should we be to recognition processes? Should we take the stance (that seems rather frequent) of doing the minimum required and excluding those troublesome situations that do not fit easily within our safeguards from the net of possible applicants? Or should we address the difficulties raised and see if we can continue further down the path of seeing how possible recognition might be? Why for example is it not practice to determine eligibility for a full award as suggested by the NQAI (2005) and the Organisation for Economic Co-operation and Development (OECD 2008) through RPL when the principles are so similar – we need to test and assess, fairly and ethically, with due process and fair procedures. The questions facing us in the more troublesome of RPL situations are, it appears to me, no different to the troublesome questions we face with devising our programme assessments: how we include the assessment of oral traditions of apprenticeship and practical work; how we include ethical and professional standards of practice within training standards for psychotherapists; how we assess the cornerstones of psychotherapeutic practice such as self-reflexivity, critical awareness, engagement in therapeutic relationships? However much we reflect on oppositions and duality, accountability for our practices requires more than holding disparate positions; it requires critical reflection and a position-taking on the implications of practice in this area.

These critical reflections are different to the reflexive approach described above. Reflexivity makes visible and names difference, holding these contrary positions in the same space. Critical reflexivity interrogates how these differences might play out in practice and why this might be the case – and crucially how we might be different.

One of the symptoms of therapeutic discourse in psychology is that there is often a simple appeal to ‘reflexivity’ to solve problems of politics and power in the discipline ... reflexivity is sometimes even thought to be a solvent in which the abusive aspects of psychology can be dissolved. ... I want to draw a contrast between reflexivity as such and a critical reflection. While reflexivity is something that proceeds from within the interior
of the self ... critical reflection traces the subjective investments we make in our everyday practice, and traces them to the networks of institutional power that contain us. While reflexivity can be a passive contemplative enterprise ... critical reflection is an active rebellious practice that drives the individual into action as they identify the exercise of power that pins them into place and the fault lines for the production of spaces of resistance.

(Parker 1990: 9)

One of the – somewhat unintended – consequences of this critical approach is that it brings into question not only the RPL/former learner issue, but also the move within psychotherapy towards formal academic accreditation. Embedding ourselves and our training within a framework of academia involves incorporating the views of knowledge, learning, achievement and success; of accepting the valuing implicit in this system. Exploring the possibility of recognition for non-formal learning highlights this difference by comparing the learning achieved within formal learning with that achieved outside of formal learning in terms of this academic framework for formal learning. Comparisons between non-formal and formal psychotherapeutic training highlights the differences and, I think, brings into question again the move in psychotherapy towards integration within governmental and academic frameworks of knowledge. As Harris states:

Candidates are essentially invited to reconstruct themselves ... within the terms set by national standards which, in turn, embody the capital in the sub-field and field. In so doing their (learning from) experience is subjected to the powerful discourses and scrutiny of the various position-holders in the field. Individuals package their learning for judgement. One can only guess at how ‘failure’ is experienced under such circumstances.

(Harris 2000: 30)

The candidates’ task of constructing an application for recognition of prior learning requires considerable investment and personal risk-taking. They are required to document and contextualise their experiences of learning, and present in such a way that specific learning is demonstrated. Their lifeworld of learning is then offered for assessment. Many of these RPL
applicants have had complex, sometimes painful and often exclusionary experiences of standard education – which is frequently why they come through this ‘non-standard’ route. To have one’s learning recognised – named as learning and achievement by an ‘expert’ body in the field – can be a life-affirming experience. To have one’s learning not recognised is at times to have a life story of exclusion, inadequacy and marginalisation re-affirmed. This is, of course, the risk we all take in including ourselves within programmes of learning. However, to not gain recognition of learning in the context of RPL – designed to challenge exclusionary practices – on the grounds that objective measurement of learning against unchallengeable criteria demonstrates a lack of achievement effectively masks the positioned dominant discourse on what is knowledge, what is learning. Instead of challenging dominant discourses and exclusionary practices RPL can re-enforce them (Murphy 2008).

Regulating psychotherapy
As the profession of psychotherapy moves, though by no means inevitably, towards national and international harmonisation of training and standards it finds itself increasingly embedded in other ‘regimes of truth’ – academic, legal, governmental. There are further webs of constructions of what is to be counted and what is not to be counted. These constructions render some aspects of psychotherapy training and learning as ‘visible’ – those that come within standards – and others as unseen, i.e. unaccountable. We become, some argue, the embodiment of that which we have fought against in the therapeutic context; experts who measure the outcome of psychotherapeutic training by standards of social norms. There is an argument to be made for standing outside of these regulatory frameworks of academia and statutory regulation. Let us shape our own profession by our own standards, the argument goes. We focus on valuing the non-measurable, the obscured, the not-yet said and that is what our training should do. Furthermore, our move towards academic and social recognition is about establishing our professional turf, achieving status and associated salaries and not so much about services to clients. And this is, I think, an argument worthy of consideration.

Accrediting psychotherapy training: a critical perspective
In the context of RPL the standards reflected in our accredited programme are set at national and international level. The standards for unaccredited experiential learning are set broadly by the
profession and in particular by training providers. Similar to situations where outcomes measures for therapy are set externally and not in conversation with clients, the process of localised challenge and resistance is more difficult. Accredited training programmes look for outcomes of learning; psychotherapeutic theories (and frequently therapeutic conversations with clients, learners, colleagues) challenge us to explore much less measurable aspects of being: quality of therapeutic relationship, critical self-reflexivity; ethical positioning; being with others. In training the challenge is to find ways to value and judge these qualities in ways that fit within the National Framework while at the same time knowing that to measure and categorise is also to construct and impart a value (a particular quality of therapeutic relationship is ‘good’ another is not, irrespective of what the client might think). In the CWI we have, through a process of academic accreditation, found a holding position that allows for a temporary – but always tentative, uneasy and continually revised – fit between the academic and the psychotherapeutic – and perhaps also between the role of the therapist as story facilitator and the role of the psychotherapy trainer as assessor. With RPL the starkness of the contrast becomes more visible. There is no opportunity for evolution of the meaning of ‘goodness’ in therapy in terms of standards through negotiation, debate and critical reflection on the relationship between framework of valuing learning; instead there is a judgement of a psychotherapeutic way of being and knowing in terms of the framework and standards of academic framework of knowing. In RPL, that which is not measured is not counted as having value. In the psychotherapeutic, to measure is to classify, give value and impose meaning from a position of expertise. And, as Harris (2000) points out the dominant discourse of RPL and national standards tends to be managerialism/human capitalism:

An alternative reading of the social functions of RPL [is] that rather than being a mechanism to tackle exclusive practices, RPL is more likely to be a further selective practice to secure the entry of ‘suitable’ human capital into the labour market to meet economic need. The candidates who are likely to succeed are those who hold the capital and habitus of the field.(Harris 2000: 30–31)

Not accrediting psychotherapy training: a critical perspective
A critical perspective on standing separate to academic regimes of truth would see this stance as obscuring connections between meaning-making in psychotherapy and the social world in which it is embedded and that we have helped to create. Psychotherapy has no more claim to truth and
rightness, freedom and empowerment than anyone else. Non-formal training also occurs in a socially constructed world; is also embedded in social worlds that reflect and re-create social norms and values, and in hierarchies of meaning-making and valuing that are external to the person being judged. To reify and mystify therapeutic knowledge as outside of the social world is also to challenge where our theories lead us; to where all knowledges are problematic (though some are more problematic than others). To place non-accredited training as being ‘more-free’ to practice, more liberating and empowering is in itself a construction that obscures its own complicity with social discourses psychotherapy seeks to challenge.

To be trained as a family therapist, through formal or non-formal learning is to become a part of a web of loyalty, meaning-making, truth construction. The psy professions – that set of professions dealing with the psyche (Rose 1996) – as Rose points out:

give form to a whole variety of beliefs, aspirations, dreams, hopes and fears. They have been enmeshed within the diverse norms that have been elaborated by moralists and pedagogues for the evaluation of the capacities and conduct of the self. They have been bound up with the programmes, projects and techniques though which authorities have sought to shape and reform selves. They underpin the regimes of judgment and calculation through which persons understand and act upon themselves and their lives. And they have helped compose a body of critical reflections on the problems of governing persons that would simultaneously satisfy the demands of social order, harmony, tranquility and well-being and accord with their true nature as human beings.

(Rose 1991)

As a part of its negotiated move towards accreditation, the CWI considered staying outside of academic higher education discourses through not seeking accreditation and not engaging in academic practices of assessment, recognition of prior leaning, judging trainee therapist performance by externally imposed standards, and so on. All of these tasks, as our prior training demonstrates, can be carried out in different ways. These ways may not fit with academically constructed views on the appropriateness of teaching and learning practices, but then academic process can be in opposition to the tenents of psychotherapy! Part of the reason for not taking this
route was not dissimilar to the managerialism/human capitalism discourse that Harris (2000) associates with national standards: the psychotherapy profession, and the training to survive it needs external recognition, for why else would a trainee invest large sums of money and years of their life in undergoing such strenuous training? And if not recognised why would clients pay for such services? There are other arguments too, but these are perhaps more acceptable and more widely discussed – protection of clients, maintaining standards of the profession, accountability (Psychiatric Patient Advocate Office 2005). Moving outside of other regulatory frameworks does not help us sidestep our own regime of truth and does not avoid the part self-interest may play in our choices. But then in the manner the profession of psychotherapy is described by Rose (1985, 1991, 1996, 1999) nothing can really make a difference, and that is perhaps the limitation of his exploration. Such deconstruction does not lead to reconstruction, and therapeutic training and practice requires reconstruction as well as deconstruction, position-taking and action as well as critique (Parker 1990).

There is a difficulty, I am suggesting here, when psychotherapy attempts to place itself outside complicity with dominant discourses, with socially constructed value-laden systems of meaning that limit who people are and what they can be – whether client or learner, or indeed therapist or trainer. Recognition generally, and recognition of former learner experiential learning in particular measures psychotherapy training – and the people who inhabit that training – by academic standards, and the differences are highlighted and made visible as results. We can say (ignoring the critical portion of this project) how unrigorous our previous training was by academic standards (and by implication how good our current training is, by these standards). Or, applying only the critical perspective on academia, we can glorify our past; the purity of psychotherapy training can seem to speak of some global age of freedom and flexibility. Neither response, I am suggesting, holds up to critical scrutiny. Or, we can see all professional discourses as complicit with dominant, restrictive discourses and look for a way to move forward within these restrictions.

To move forward, I think we need to see people as both the inhabitors of discourses and more than the inhabitors of discourses and regulatory practice; to have some hope in a diversity of human responses possible within regimes of meaning and value setting – choice, resistance,
agency; perhaps even humour, rebellion, waywardness – not highlighted in the telling of Rose. This could be seen as related to Foucault's notion of resistance (Butin 2001), perhaps, but is concerned, unlike both Rose and Foucault, with finding a practice position that allows for choices that impact on people's lives to be made. People, my argument goes, can be more than the discourses they inhabit, even if they cannot move outside the totalising impulses of grand narratives and their interplay in the practices and procedures of a profession. And perhaps even those people who make up the professions and the institutions that construct and propagate various regimes of truth can lay claim to these qualities; and can act to initiate, facilitate and encourage resistance. From this perspective it is not the stepping outside of regimes of truth and meaning that matters – we cannot do this anyway – but it is how we foster the differences to and the resistance to these regimes that matter. And this, perhaps, is the critical reflexive project. Recognition of prior learning, and the measurement of experiential unaccredited former therapeutic training becomes not only subject to procedural scrutiny by the various stakeholders, but subject to ethical, professional theoretical and critical scrutiny and position taking on where this scrutiny might lead us.

**A way forward?**

There is of course no solution or resolution, merely an ongoing formulation and reformulation of a position that is always subject to critical reflections and also allows us to continue. This critique in itself is part of the response. As Foucault states, the function of criticism is 'to show that things are not as self-evident as one believed, to see that what is accepted as self-evident will no longer be accepted as such' (Foucault 1989: 154). Recognition of prior learning is, self-evidently, a useful way of proceeding where learning has occurred outside of mainstream institutions of learning and has not been formally recognised. This in particular allows 'non-standard' learning to be given value; and non-standard learning is so often the learning of those outside of mainstream society; those who by virtue of income, gender, culture, class and family circumstance could not gain access to mainstream higher education. From this perspective RPL is a critical, reflexive project – it challenges the operation of power in producing exclusionary practices in education, and furthermore produces mechanisms by which those excluded can challenge and overturn their own exclusion. However, recognition also implies a non-recognition of that which could also be designated as learning – that which is not measurable in terms of
specified outcomes. While this may make sense within the necessary but decontextualised
exploration of RPL as an education practice it does not always make sense or fit with the personal
and interpersonal with the world of psychotherapy. Crucially, this process of recognition occurs
within a web of meaning-making and valuing that produced those exclusionary practices in the
first place, and through its decontextualising a focus on RPL procedures can obscure these
connections.

But in this, I think, psychotherapy is not much different than other professions and activities.
Meaning and valuing are a part of knowledge systems, whether in education, therapy – or music,
art or any discipline. Knowledge of music theory and practice will not help me accurately predict
which music takes me over and which music bores me; the brilliance of some authors remains
unrecognised. Perhaps the discourse of discourses blinds us to what lies outside and beyond ‘the
discourse’; the potential for all of us to be more than the sum of our discourses. This is what, it
appears to me, is at the heart of any critical project – allowing in those aspects of the lives of the
subjects of our practices that have been excluded, obscured or silenced.

From a critical perspective, it appears to me, how we carry out the minutiae of our tasks does
matter – how open our procedures are to critical examination, how responsive we are to the
voices and challenges of the subjects of our practices, how we account for the operation of power
and knowledge in our practices. From this perspective, it seems to me, openness to the voices and
challenges of RPL applicants is important. Where an applicant requests consideration for formal
recognition of their learning then we have – as the gatekeepers of academic recognition – a
certain ethical responsibility to respond to their requests for inclusion, and to listen to and
respond to suggestion of exclusionary practices.

My own position is this: within psychotherapy RPL allows the creation of a level playing field
where those who have attained knowledge, skills and competence through non-formal learning
can be recognised for this achievement. Where learners ask for access then we have a
responsibility to hear their case. We also have a responsibility – primarily to clients but also to
the profession – to ensure that the standards of psychotherapy are upheld. Where, in addition,
 systemic therapy is seen as potentially useful to clients (Carr 2000a and 2000b; Stratton 2005),
and we have a wealth of knowledge and experience on recognition of prior learning as a rigorous process then let us open up the debate to a wider audience and site of decision-making. RPL requires considerable resources; it is an exacting, demanding, challenging activity that requires rigorous and thorough procedures. Yet it is also a site of considerable hope and possibility.

Within the world of psychotherapy – of which I am a part – it is up to the community of psychotherapists to tease out these questions, to achieve a balance between maintaining professional standards (whatever we decide them to be) and developing inclusionary practices; to manage the many disparities and to take a position. Opening up the conversation, through a rather complex consultation process and implementation procedure will, I hope, serve not only to ensure the agreement of stakeholders but will also open up a critical dialogue across disciplinary boundaries.

**Conclusion**

The purpose of this account is to reflect critically on the process and meaning of RPL and to highlight some of the theoretical, ethical and professional questioning that RPL raises. In doing so – as is so often the case with critical reflections – wider institutional and organisational stances come within the interrogation net. The CWI project of seeking academic accreditation for its training, and indeed the wider psychotherapeutic project of seeking statutory recognition for the profession, are presented as problematic. This is not to suggest that these tasks should not be pursued; but it does mean that those who are involved in developing policies and procedures have a responsibility to include a critical reflexive approach as well as a constructive formative approach.

Psychotherapy and academia do not always fit easily together. This disparity of positioning and conceptualisation creates considerable potential for polarisation of the psychotherapeutic and the academic. However the connection between academia and psychotherapy also contains considerable possibilities. A dialogical space between the psychotherapeutic and academic can create the potential for new, different thinking and positionings to emerge. From a critical perspective this questioning is not confined to the therapeutic or the academic spheres; instead these are common questionings to all of us who inhabit a critical space. What are the practical consequences of the educational theories we inhabit in psychotherapy and academia? What are
the theoretical stakes in such practice in the real world? What connections between the psychotherapeutic and the academic might be forged to understand and change how we provide training and education? How are attempts to connect theory and practice played out at local level in our current training programmes? These are questions that concern us all; and in dialogue we have, I think, more possibilities of constructing answers that are useful to our consumers than separately or apart.
References


Psychiatric Patient Advocate Office (Canada) (2005) ‘Consultation on the Possible Regulation of Psychotherapy and/or Psychotherapists’, Submission of the Psychiatric Patient Advocate


