# **Trainees' forum**

## On being shadowed

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During my psychiatric training to date I have been observed at work by medical students, psychiatric nurses and social workers, by video cameras and the members of family therapy teams, by consultant psychiatrists and others. All these experiences of being observed have been challenging and educative; probably I share them with most psychiatric trainees.

Recently I have had the opportunity to be shadowed through a working week by a person with wide experience in psychotherapy. She was approaching the diploma in Gestalt psychotherapy and required to spend some time observing general psychiatric practice. The experience of being observed in this way is, I suspect, uncommon, and raised several issues worthy of report and comment.

My current post is attached to a consultant psychiatrist/psychotherapist. My week includes time at an adult psychotherapy unit, and about three sessions of psychotherapeutic work with individuals. I receive supervision from a consultant whose orientation is predominantly analytic.

I had agreed to the arrangement, which was instigated by the visiting psychotherapist, with feelings of excitement, interest and confidence. I obtained consultant permission, and I arranged for my shadow to lead a teaching session on Gestalt therapy at our weekly psychotherapy academic meeting. I approached all the patients I was seeing regularly and obtained their permission for her to be present. They were also aware of and, as I will describe, used their right to change the arrangement at any time. My shadow and I discussed the issue of confidentiality. As a result of this preparation her presence was in several cases directly helpful and constructive, and in many was that of a benign and neutral observer, later providing me with a valuable and unique opportunity for feedback. In no cases that have come to my awareness did her presence ultimately detract from the therapeutic work.

I actually approached the week with only a residue of pleasurable anticipation, and with a good deal of anxiety. I felt that I would be judged and might well be found wanting. Although I am used to the role of educator and guide, particularly when teaching medical students, I think that on this occasion I set myself up as an apologist for modern psychiatric practice. At the first event of the week, a clinical review meeting, my feelings of unease were immediately exacerbated when drugs and diagnoses were the main currency, and when opinions that would usually have sounded balanced and helpful suddenly had a distinctly judgemental slant which diminished the patient as a person. The presence of my shadow, the humanistic psychotherapist, had the effect of highlighting a polarisation within me, one that lies between a position of humanisation and existentialism and that of the rational reductionist. My meetings with patients during the week were thus tinged with more than usual awareness of Buber's distinction between the relationship of I-Thou and I-It.

My relationship with the patient in the consulting room, which I think I usually measure and regulate largely intuitively, was examined, challenged and questioned. My shadow perceived the psychiatrist as 'hovering' expectantly around the patient, observing and assessing from a distance. In Gestalt terms contact was made tentatively and then quickly broken. This was in contrast to my shadow's description of her working style as a more immediate and direct use of the relationship. Was I sufficiently and correctly available to the patient I wondered? What light did my experience shed on this? I became clearer about the nature of the contract between patient and psychiatrist (usually implicit, shared with other members of the service and with primary care) and its distinction from that made between patient and psychotherapist (more explicit and private). The primacy of the knowledge base of the psychiatrist in formulating an opinion contrasts with the use of skills and personal resources of the psychotherapist. There is clearly overlap, but less than I had previously supposed. I was forced to make more than an intellectual acknowledgement of this during my week with a shadow.

Throughout the week the distinction between my work as a psychiatrist and as a psychotherapist was under scrutiny, and under examination it seemed to acquire the qualities of an electron. Both wave and particle, the act of observation serves to determine

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the set of properties that are seen. The presence of a psychotherapist seemed to constrain me to the role of the psychotherapist in the early part of the week and only later, as I too became an observer of the interaction, did my usual flexibility of stance return, and the component psychiatrist re-emerge in his own right. The generous support of my shadow was vital in this transition, and I would go further to say that a mutual regard was necessary for the week to be successful and possible.

The presence of my shadow encouraged challenge and reformulation. Some examples illustrate this. In one case a woman whose symptoms had previously been seen mainly in terms of benzodiazepine dependence and withdrawal and of an obsessional personality style, emerged as one half of a complex balance of symptomatology, her abusive husband and his rheumatoid arthritis oscillating with her in a dance of dependency. On another occasion my shadow's presence precipitated the topics of trust and confidentiality (at which point she left the interview) with a patient for whom these themes are central, and rewarding work followed. In a further case a patient who had been quietly angry for most of our previous meetings asked my shadow to leave and then communicated more openly than ever before. The act of claiming the session for herself and asserting her right to the time seemed vital.

I was keen to be seen to perform well. My shadow's presence served a super-ego function and exaggerated the usual demands I place on myself. Her parental qualities heightened my need to please her. My awareness of her physical presence fluctuated. At times I noticed her very little, at times she was an active participant in the interview. Between patients we engaged in stimulating debate and at the end of each day a spontaneous process of review and attempts at clarification took place. One immediate outcome for me was a growing feeling of exhaustion, and a need to set aside some time to work alone. I needed, for example, that contemplative minute between patients and the regenerative time spent chatting with clinic staff. I had acknowledged but underestimated the importance of these moments.

I suspect that my therapeutic style lay between that of my supervisor and that of my shadow. How to juggle a 'free-floating awareness', the consideration of psychodynamics and the offering of interpretations, with a more immediate and present acknowledgement of my relationship with the patient? My lack of clarity was witnessed and the resulting feedback was robust and useful. If a contrast of styles generated one tension another possible cause was the presence of my Jungian shadow sitting dimly in the corner of the room. However, Henderson (1964) stated that, "although we do see the shadow in a person of the opposite sex, we are usually much less annoyed by it and can more easily pardon it". This was my experience.

At the end of one difficult day I felt deskilled, overwhelmed by the challenge of being a psychotherapist in a psychiatric setting, and wondering what I had gained in five years of psychiatric training. However, later as 'psychiatrist' I was able to reassure myself that I have a useful set of skills, an ability to 'hover' with people in a helpful way, and resources which have been refined by experience which allow me to work with people in uncommon states of distress and difficulty.

I now feel reassured in my position as a psychiatrist who wishes to train further in psychotherapy and I feel pleased that I made an offer, which retrospectively was a courageous one, to expose myself to a considerable degree of scrutiny. I would recommend the experience to others.

#### Reference

HENDERSON, J. (1964) Ancient myths and modern man. In Man and His Symbols (ed. C. G. Jung) London: Aldus Books.