

“What do I share?” Personal and private experiences in educational psychological counselling.

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The aim of the study is to explore and develop knowledge about how educational psychological counsellors' personal and private experiences appear in their counselling practice. We conducted four focus group interviews with twelve counsellors from Educational Psychological Counselling Service. Through Thematic Analysis four themes emerged. The first is that counsellors' personal and private experiences functioned as a backdrop for their counselling practice. The second theme is the counsellors' use of different types of stories. The third theme deals with how the counsellors were holding back relevant stories. Finally, the fourth theme comprises the purposes of counsellors' self-disclosure. The conclusion is that personal experiences form a backdrop for counselling practice and are relevant for how a counsellor makes sense of and understands a situation or a problem. Self-disclosure is in some situations used explicitly in the counselling setting. On the other side the counsellors sometimes consciously hold their experiences back.

Keywords: Educational Psychological Counselling Service; Personal experiences; Private experiences; Self-disclosure

Introduction

This paper addresses counsellors with both personal and private experiences in professional practice in the field of educational and psychological counselling. This issue has been explored in connected fields, such as psychotherapy (e.g., Hanson, 2005; Henretty, Currier, Berman, & Levitt, 2014; Henretty & Levitt, 2010), but not as often in counselling in educational contexts. The educational and psychological counselling service (EPCS) in Norway is directed towards professionals in kindergarten and schools and also parents and children. Their work is regulated by laws, regulations and values that concern relevant activities (Education Act, 1998), and they are mandated to perform assessments through testing, mapping and observations of for example students' learning difficulties and social/emotional difficulties, give advice concerning children with special needs and to help schools and kindergartens develop inclusive environments. The EPCS is supposed to focus on the whole system and on the development of teachers' professional competency and to conduct preventive work in working with developing schools and kindergartens on a systemic level. Their mandates, roles and tasks are thus twofold. On one hand EPCS conducts assessments of children with special needs, develops individual subject curriculum and support and collaborate with the child, parents and professionals concerning the individual student's learning and development. On the other hand the counsellors' work is system-oriented in supporting schools and preschools to develop an inclusive learning environment (Education Act, 1998). These expectations will contextualize and influence counselling in certain directions and represent the hallmarks that can separate their work from other types of counselling. Even though the name of the service comprises "psychological counselling", few of the employees are trained as psychologists. In a study

of competency in employees in EPCS from 2013, they found that 70 % of the counsellors working in EPCS had a master degree, and 78 % of the counsellors had educational background from the field of education or special needs education. 13 % had background from psychology and 6 % from the field of social work (Hustad, Strøm & Strømsvik, 2013).

The counsellors are professionals that will draw on professional knowledge, a compound competency that includes the profession's knowledgebase and counsellors' experiences and judgements (Molander & Terum 2008). A crucial element in professional development is how interpersonal experiences influence professional life (Rønnestad, 2008).

The discussion on counsellors' self-disclosure (CSD) has been ongoing for decades (Henretty et al., 2014). In the early 1900s, Freud introduced the idea that a counsellor should be like a blank screen or like a mirror to the clients in that counsellors should mirror only what is shown in the clients. Since then, the idea of CSD has been viewed as incorrect and unethical by many counsellors (Langs, 1979; Zur, 2007). A counsellor should not disclose his/her own personal experiences (extra-therapy experiences) or feelings in sessions with clients (intra-therapy experiences). However, in the last several years, a change in this view on mental help professionals (like counsellors) has occurred, in which practising self-disclosure is now viewed as helpful (Goldfried, Burckell, & Eubanks-Carter, 2003). The pro-disclosure arguments grew within a Rogerian humanistic framework (Rogers, Kirschenbaum, & Henderson, 1990). In 2010, Henretty and Levitt found that over 90% of therapists self-disclose to clients (Henretty & Levitt, 2010). In the following text, we will present some findings from relevant research on counsellors' self-disclosure. The studies are from psychotherapeutic contexts, either from psychotherapeutic settings or from

supervision on psychotherapy as the research from educational psychological counselling are difficult to find. Counselling and psychotherapy can be seen as somewhat different activities where counselling are more oriented towards mainstream life transitions as psychotherapy is seen as more concerned with psychological disorders. In spite of this, both activities can be seen as addressing growth, development and change. Counselling in different settings can draw on some common foundational ideas and methods. However, discussions of differences and similarities between psychotherapy and counselling in different contexts go beyond the scope of this article.

First, we found evidence that counsellors' theoretical orientations influence the use of CSD (Burkard, Knox, Groen, & Perez, 2006). However, current therapeutic theories with different theoretical orientations propose having an open mind about therapist self-disclosure (Goldfried, 2013). On the other hand a neutral stance where CSD is avoided, is still influencing the practice of counsellors (Bottrill, Pistrang, Barker, & Worrell, 2010).

In general, research on counselling processes and outcomes can be conducted from two basic angles: from counsellors' and/or clients' perspectives. The impact of self-disclosure in counselling has most often been assessed through clients' perceptions of the counsellor via ratings on various variable scales (Henretty et al., 2014). Measures related to the relationship between clients and counsellors have also been used in CSD studies (ibid). Henretty et al. (2014) conducted a quantitative meta-analytic review of 53 studies from 1968 to 2011 on self-disclosure versus non-disclosure. The review concluded that *CSD overall had favourable impacts on clients*. The mean effect size for the impact of CSD on clients was small but significantly different from zero (ibid.). The participants/clients had positive perceptions of self-disclosing counsellors and would more likely disclose themselves to a self-disclosing counsellor. Compared with non-disclosure, CSD that

revealed similarities between a client and a counsellor had a favourable impact, which was also the case concerning CSD with negative content valence and also CSD that was related to intra- or extra-therapy experiences. Intra-therapy experiences are experiences that occur in the counselling sessions in the “here-and-now”, and extra-therapy experiences are experiences that are brought in from past experiences outside of the therapy room (Henretty et al., 2014).

A relevant question concerning CSD is if there are connections between counsellors’ extra-therapy experiences and their professional practice as counsellors. Findings from a project where they explored senior therapists’ experiences indicate that there are connections between personal experiences and how therapists work professionally (Rønnestad & Skovholt, 2001). Profound experiences in adult life had impacts on therapists; both positive experiences and less favourable aspects of life influenced their professional practice. Therapists’ personal experiences appear to be essential for their therapeutic practice (Rønnestad & Skovholt, 2001). Findings from another study concluded that personal experiences were foundational for building relationships with clients in recovery (Marino, Child, & Krasinski, 2016). Findings from this study on the role of personal experience in professional training and work in mental health services and support concluded that therapists valued their personal experiences as a resource through which they could assist others (ibid). A study that explored connections between family therapists’ personal and private lives to therapeutic practices found that all therapists interviewed could report such connections (Jensen, 2008).

Therapists’ quality of life seems to have an impact on the counselling relationship. More specifically, a study suggests that therapists’ quality of life influences the working alliance in the counselling relationship (Nissen-Lie, Havik, Høglend, Monsen, &

Rønnestad, 2013). It seems that clients are sensitive to their therapists' private life experiences of distress, which is reported as being communicated through the therapists' in-session behaviours. It was also found that the therapists' judgement of alliance quality was positively biased by their own sense of personal well-being.

In recent years, many studies have concluded that the therapeutic alliance is a significant factor in the outcomes of counselling/psychotherapy (Flückiger et al., 2012; Horvath & Bedi, 2002; Horvath, Del Re, Fluckiger, & Symonds, 2011). Research suggests that self-disclosure fosters stronger relationships and alliances (Hanson, 2007). For example, psychotherapists that used self-disclosure were rated positively by their clients, and the counselling relationship was perceived as stronger (Somers, Pomerantz, Meeks, & Pawlow, 2013). Another study concluded that the counselling relationship had improved because the clients felt understood by their therapists, the clients experienced their therapists as more helpful and human, and CSD promoted trust and confidence (Burkard et al., 2006). Alliance is a central factor in the counselling relationship. However, it seems that the numbers of self-disclosure are not significantly correlated with alliance score (Levitt et al., 2016). There are also connections between stronger supervisory working alliances and greater willingness to disclose (Mehr, Ladany, & Caskie, 2015).

Different aspects of counselling self-disclosure have been explored, such as their relational impact and the reasons that therapists self-disclose (Tantillo, 2004). Tantillo (2004) studied therapists working with eating disordered clients. Tantillo (2004) found that CSD among other things provided validation and promoted empathy in therapists that focused on *normality*, sharing *similar experiences*, sharing *relational dilemmas*, and using *humour*. Different *contextual factors* also seemed to be relevant in the consideration of whether or not to use CSD as the purpose of therapy. These factors were also important as a

stage in the therapeutic process based on the availability of time to address what follows the disclosure (ibid.). Levitt et al. (2016) proposed that disclosure that conveyed *similarity* between clients and therapists was associated with fewer post-session symptoms compared with disclosure that conveyed neither similarity nor dissimilarity. Additionally, self-disclosure that acted to *humanize the therapist* was associated with fewer clinical symptoms post-session than disclosure that expressed appreciation or encouragement (ibid.). The *timing* of CSD over the course of the therapeutic relationship has also been a topic in research. In a paper on self-disclosure in clinical social work, Raines (1996) proposed that the aspect of timing of self-disclosure seems to be essential. In the beginning of therapy, clients may ask questions about certain facts relative to the social worker/therapist, such as the therapists' type of degree, training, and years of experience. Such questions are classified as clients' "right to know" about the therapist and may serve as guidelines of self-disclosure for therapy in social work settings. However, personal questions during the middle phase of therapy are more problematic because there are no straightforward answers for whether they should be addressed by the therapist or not; rather, the issue depends on contextual factors (ibid.).

These findings concern counselling in psychotherapeutic contexts and show that CSD may influence counselling processes and that the counsellors' personal experiences play a role in professional practice. The relevance of these results for counselling in educational contexts is not clear, and this area of practice needs more thorough investigation. We will however claim that counselling in psychotherapeutic contexts carry *some* common features with counselling in educational settings, as both is concerned with promoting change and strengthening the clients' agency. We will however focus specifically on exploring the uniqueness of counselling in educational settings. The purpose

of this article is to explore the field of the EPCS concerning extra-therapy experiences, so we ask:

How do educational psychological counsellors' personal and private experiences appear in their counselling practice?

Methods

This study intends to contribute to the exploration of a complex topic, the appearance of counsellors' personal and private experiences in counselling. When exploring complexity and meaning making processes to get a better understanding of the issues studied, qualitative methodology is most useful (Denzin & Lincoln, 2008). Therefore, a qualitative approach was applied. Qualitative approaches include a variety of methods, such as for example observation, interviews and case studies. To get the first oversight over a relatively new field, focus groups interviews can be appropriate. The data collection was thus performed as focus group interviews, where individuals discuss the issue as members of a group rather than being simply individuals, and where reflections were developed by connecting ideas in the group (Bryman, 2008; Malterud, 2012; Silverman, 2006). Altogether, twelve counsellors from the EPCS participated and took part in four focus group interviews. The interviews were conducted over a period of six months. Each interview lasted approximately 80 minutes (from 60 to 90).

Selection criteria and sample

To recruit participants, the "Piggy-back Focus Groups" method (Malterud, 2012) was applied. This method of forming focus groups involves using already existing occasions where persons from actual target groups are gathered. Participants in this study were

recruited from an in-service training programme for counsellors from the EPCS run by two of the researchers. Two focus groups were formed from two different classes in this in-service training programme. Through our network as educators in the field of EPCS we made connection with two EPCS offices and formed groups of counsellors, one from each office, two in all.

The criteria for participation were that the groups should both be homogenous in terms of relevant experiences in the area and yet have various backgrounds, years of experience and geographic workplaces, as recommended by Malterud (2012). One group consisted of four people, two consisted of three people and only two participants were included in one of the groups due to sickness. All participants worked as educational psychological counsellors for preschools/schools with similar mandates, roles and tasks working both at a systemic and individual level as described earlier. The participants were experts in different fields, but had similar roles concerning counselling teachers, students and parents. Therefore, the homogenous dimension was covered. The participants *varied* in age, years of experience and education to a certain degree. They were all women between 30 and 60 years of age. The variation in experience involved having worked as counsellors from two to 20 years. The variation in education consisted of some participants having master's degrees in special needs education, others with master's degrees in speech therapy, and some were educated teachers and preschool teachers with continuing education in special needs education and with different specialties in counselling. These various educational backgrounds are all common and in accordance with the formally demands for working as EPCS counsellors in Norway.

The interviews

Through the questions *what to explore* (obtain foreknowledge, doing research reviews), *why to explore this* (discussing the relevance) and *how to explore it* (discussing methods), we developed the interview themes (Kvale & Brinkmann, 2015). The research question in the study was formulated in a hermeneutical literature review process. By reading relevant research, the search query was expanded, and the research question was revised and sharpened. Through this work, themes for an interview guide were developed and gathered in sequential themes. Which theme to start with and which theme could serve as closure in the conversation were decided.

The interviews with the groups of students from the in-service program were conducted at the college where the program took place, while the interviews with the groups from EPCS offices occurred at the participants' workplaces. All of the interviews were audiotaped. Two researchers were involved in each interview. One led the conversation and functioned as a moderator, and the other had the role of an observer. The moderator introduced a theme to explore, and then, the participants discussed the subjects, as recommended by Malterud (2012). By connecting ideas and sharing associations, experiences, stories and opinions, the questions at hand were discussed and elaborated upon by the participants. The moderator followed up with further questions or asked for stories, examples or concrete experiences that could illustrate the topics that were explored. When a subject was thoroughly covered, the moderator introduced the next theme. The observer took notes and managed the audiotape. She was also invited at some points to contribute with relevant follow-up questions, ensuring that each topic was explored in depth (Malterud, 2012). The observer asked one, two and/or three follow-up questions in all four

interviews. All of the researchers were involved in conducting the interviews, as both moderators and observers. We were also all actively involved in the transcription of the audiotaped recordings.

Analysis

In the analysis of the transcribed data, we methodologically followed the steps for thematic analysis as presented by Braun & Clarke (2006), including six steps: (i) familiarization with the data, (ii) generation of initial codes, (iii) searching for themes, (iv) reviewing the themes, (v) defining and naming the themes, and (vi) producing the report. The first two steps (familiarization with the data and generation of initial codes) were performed in three ways: by transcribing the data, by the researchers individually studying the transcriptions/data and through discussions in the research group. The text was divided into several meaning units (initial codes) in these phases. The third and fourth steps (searching for themes and reviewing themes) were also performed both individually by the researchers and by discussions in the research group. Some meaning units/themes that were irrelevant to the research question were excluded at this point. The remaining themes were then abstracted into sub-themes. In the fifth step (defining and naming the themes), the sub-themes were assembled into four main themes and 16 categories that are presented in the section, “Results”. The described steps were not followed in a linear straightforward process. The analyses were performed in a hermeneutic back-and-forth process between the parts and the whole (Kvale & Brinkmann, 2015) by moving forth and back between the steps.

The thematic analysis was within a constructivist reference, in which meaning and experience are socially produced and reproduced rather than understanding meaning as

something that is internal within each individual (Braun & Clarke, 2006). The researchers tried to remain sensitive to the participants' opinions, experiences and perspectives. The researchers were all actively involved in the analysis process and closely cooperated in all of the phases and in producing the report (step six in the method). The analysis was both theory-driven, using important input from our analysis of earlier research as lenses, and data-driven, searching for surprising and new insight from the data (the participants) concerning the matter at hand. Through the data analysis we have captured the participants' voices that will be presented in the finding section. Other methodological approaches such as Grounded Theory method also capture participants' subjective experiences in the process of analysis (Charmaz, 2014), and this approach functioned as a backdrop in our thematic analysis.

To ensure validity, the research group closely cooperated throughout all stages in the course of the research process, from reviewing relevant literature for the research questions to discussion and elaboration of the analysis and results (Kvale & Brinkmann, 2015). Member checking was conducted to maximize trustworthiness as recommended Hays & Wood in qualitative research (2011). In focus group interviews, validity is linked to the quality of group discussions. To ensure that all participants were involved in the elaboration and discussion of themes, the researchers had roles of moderator and observer/secretary. Another aspect is to ensure that the participants and the researchers have an intersubjective understanding of the themes and questions during the interviews (Malterud, 2012). Member checking followed the analysis by mail, in which the participants were asked whether they recognized, agreed upon and were comfortable with the categories and themes that had been developed. They confirmed that the themes were essential to the meaning that had been developed in the interviews.

One of the focus groups had only two participants, which may have restrained the discussion and elaboration of themes. The generalizability may be weak in this study. Nevertheless, all participants were working within the same context. To some extent, it is reasonable to assume that the results can be recognizable to other employees in the EPCS.

Findings

How do educational psychological counsellors' personal and private experiences appear in their counselling practice? Serving to answer this question, the following four themes emerged in the analysis: (a) Backdrop, (b) types of stories used, (c) holding back relevant stories, and (d) purposes of self-disclosure. Quotations are used in the presentation of the findings. Because the interviews were conducted in Norwegian; we have translated these quotations.

Backdrop

This theme includes personal experiences as a backdrop for counselling practice. The participants reported that they are influenced by different aspects of their personal experiences in their counselling practice. In this study, personal experiences are used to describe experiences from all areas in life. This theme consists of three categories: *private experiences*, *work experiences* and *personal way of being*. The term "private experiences" is used to describe experiences from outside work, and "work experiences" refers to experiences from work. "Personal way of being" comprise the participants conception of their personal traits.

Private experiences

Experiences from childhood were specifically mentioned by the participants, who stated that personal experiences such as being the big sister in the family or having a brother with Down's syndrome had great impacts and influenced their career choices and their counselling practices. One said: "These personal experiences are actually the reason why I work as a counsellor." Experiences from adult life were also mentioned, specifically from being a parent themselves. One participant stated that counselling with parents is quite different after she became a mother herself: "There is a difference in meeting parents before and after having children of my own." All of the participants were mothers. Some had important experiences in having their own children with difficulties, such as attention deficit-hyperactivity disorder (ADHD) and/or other difficulties, and by being in the client role themselves. One said: "My daughter has been struggling, and I know something about being a next of kin, the powerlessness you can experience in meeting professionals." The participants also used experiences from their own parenthood. When asked for advice from clients, one said: "I use my own experience in bringing up my own three children." The participants also expressed that difficult times in life had provided essential experiences. One participant mentioned: "Experiences from hard times in life have touched something in me both privately and as a professional." According to the participants such private experiences were significantly influential and formed a backdrop for their counselling practice.

Work experiences

This category refers to experiences from different kinds of professional practices, both from working as teachers in schools/preschools and from counselling. According to the

participants, experiences from teaching in school/preschool play important roles in their practice as EPCS counsellors. Having worked as teachers provided more self-confidence in their roles as counsellors for teachers because they understood the clients better. We found that previous work experiences are mostly used in counselling with other professionals/teachers in school and in kindergarten to provide a frame of understanding and recognition with teachers as needed. As stated in one of the focus groups: "... experience from professional work is important in the counselling role, and I use it a lot." Experiences from previous and ongoing counselling practices were also recognized as essential.

Personal way of being

The connections between counsellors' personal ways of being and their counselling practices were emphasized. One of the participants expressed clear connections between herself as a child and as an adult: "You take your personality into the counselling setting ... I was somewhat reserved as a child, and I think I still am as an adult. So I do not share private information; I think that is connected to my personality."

According to this participant, counsellors are unique and different because of their personal ways of being. She also provided an example of such a personality trait (reservation) and stated that this trait implies that she does not share personal information in the counselling process. Another participant talked about being humoristic and direct as a person and how this trait influenced her counselling practice.

Use of own experiences and stories

The results show that EPCS counsellors use different kinds of stories explicitly in their

counselling practice. We found that they use everyday stories, positive stories, and similar stories. These categories are elaborated as follows.

Everyday stories

Some of the participants told of using everyday stories from their personal life in their counselling practice, such as having a son who plays football, having a child who does not clean his room or the challenges associated with getting their own children to do homework or to write words correctly. Stories from parenthood were used more in counselling parents than professionals.

Some of the participants had developed a story repertoire that they could use repeatedly if the situation called for it. One participant said: “I have several times used this utterance from my son: ‘Dad, I really like you and mom better when you are apart, because when you come together you gang up on me!’”. This story was used in counselling to allow for reflections on how children are perceiving parents.

Positive stories

We also found that stories with positive values were useful. These stories were told to students, parents and professionals and could be derived from participants’ private lives or from their professional practices. One participant shared a story that she used often: “When relevant, I tell about a former client who was very short but then really grew in his adolescence.”. The goal of such stories is to promote an optimistic attitude. The use of positive stories in contrast to challenging stories was also highlighted: “It is different to tell about kids who enjoy, e.g., a reading class in contrast to something much more painful, serious and heavy.”. Furthermore, positive stories were used to give clients ideas for

solutions to challenges. One participant talked about giving advice concerning reading difficulties to a client/teacher: “We tried something that worked well at that school; maybe you can try this structure?”.

Similar stories

The data indicated that the participants used stories/experiences from their own lives when dealing with similar problems as the clients. First, we found that similar stories from participants’ parenthood experiences were used. Second, stories/experiences that the participants struggled with themselves were used. Stories from participants’ parenthood experiences were expressed in different ways. One participant talked about a client (a student) who refused to go to school, and the student’s parents asked the counsellor for help/advice. The counsellor then told the parents that her son also refused to go to high school and that she had to drive him to school every day. Another participant had a daughter with reading difficulties, and she had used this experience in counselling a student. Some of the participants talked about similar stories that were more existential in nature. “I have a ten-year-old daughter, and she suffers from deep anxiety. I have told about this once to one of the clients (parents).” Another participant reported that at one point, she told some clients about her own child who had anxiety issues; she told the clients how she and her husband dealt with these issues.

Stories/experiences that the participants were dealing with themselves and used in counselling were expressed. An example was a participant who worked as a speech therapist for students. She herself has a speech impediment (pronunciation) and would sometimes use that in working with clients. She told us “I have difficulties with

pronunciation/speech myself, and sometimes I make the students explicitly aware of this and use it in my counselling with them.”.

Stories not used

We also found that some personal stories/experiences were actively held back and not shared, even if they were relevant to the situation. We found various reasons for this “holding back” and organized the data in the following categories: Not processed experiences, private stories, not exposing others.

Not processed stories

Some participants could share examples of situations where specific experiences or stories popped up in their head, but they chose not to tell the story. They had different reasons for not telling the story, but the story lingered as background in their head during the conversation. One reason for not using stories that came to mind was the time aspect, that the experience they associated with the problem at hand was too raw and fresh. One of them said: “I do not use new experiences, but I can tell things that I have some perspective on.”. Several participants emphasized that some passage of time after the story that came to mind could make it easier to use the story. By having some passage of time, they said they gained some overview of their experiences and could use their stories in a more reflective way.

Too-private stories/experiences

Another reason for not telling personal stories is that some stories/experiences are considered too private. One of the participants said: “I have personal experiences with

death; I lost my parents quite early. And that is a story I consciously never share, especially in meeting people who are grieving.”. Another participant who grew up on another continent never shares this fact in meetings with immigrants from the same continent, even though she feels it could establish some common ground. Her reason for not telling about her own immigration is that it could introduce some themes that could be too revealing and private and could undermine the counselling process.

Not exposing others

Another reason for not sharing stories that come to mind is to avoid exposure of other persons, such as participants’ own children with difficulties. One informant considered telling parents who were reluctant to receive help from the EPCS that she also had been reluctant when her child had similar problems. She chose not to tell her story because she did not want to expose her own child who went to the same school as the parents’ son/daughter.

Purposes for using personal stories

This theme entails the purposes of self-disclosure. The findings involve the following four categories: building relationships, evoking hope, expanding teachers’ understanding, and persuading clients.

Building relationships

We found that one main purpose of self-disclosure in counselling is to strengthen the counselling relationship. By sharing personal experiences in different ways, the participants hoped to create an atmosphere of confidence and/or alliance. Some personal stories are

used as *small talk* and as *icebreakers* in establishing contact and building relationships with clients. The participants stated that sharing their own experiences/stories from daily life made the clients see them as more human and fallible, which could contribute to both trustworthiness and equality. Several participants agreed that telling personal stories could make the clients *relax*. One said: “You cannot sit there and be the one who knows it all.”. It was felt that the counsellor subsequently appears more personal, more like a human being and less like an expert. One of the participants shared her own experience of cooperating with a professional from another field: “I gained a new confidence in this professional because she told something that appeared very genuine, not something you rattle off from a book.”.

The participants also emphasized telling humoristic stories as useful. One stated that she created situations of recognition and laughter using her own stories, which fostered a safe atmosphere. By sharing personal shortcomings as parents, some participants claim that parents will be more likely to open up to them. Another participant said that she shared blunders from her own practice with teacher clients to build alliances with them and to make issues less serious or dangerous. One participant commented that it is helpful to have a son with ADHD, even though she does not tell her story explicitly: “It is a plus to be in the same shoe.” By sharing stories from their personal lives, several participants emphasized that focusing on similarities strengthened the counselling relationship.

Evoking hope

The participants agreed upon that evoking hope in clients is an essential purpose of CSD. One participant claimed that she wanted to uplift the clients by telling stories from her own life and said that she could tell clients that things may turn out OK even if it seems

hopeless at the time. Several participants stated that they often share examples of clients who had persevered in difficult situations. One said: “When I talk to young boys who do not find their place in school I sometimes tell about former students who have turned out ok.”. Evoking hope in families was also mentioned as an important purpose. One of the participants has a daughter of her own who struggled, so she shared her experiences with a family. Her comment on this strategy was: “I shared my story to give hope.”.

Another finding was that participants wanted to reframe clients’ problems as more harmless to evoke hope. One participant said that she shared her own daughter’s reading difficulties with a young client: “I told him that I read from the textbook aloud for my daughter when she was in grade 10, because he (the client) was embarrassed to tell that his mum did that in grade 8.”. The goal was to show the client that his problems were less deleterious and to help him accept his own reading difficulties. Through this he could be motivated to work on his reading skills and to accept his challenges.

Expanding clients’ understanding

The results also showed that expanding clients’ understanding is a purpose of CSD. One participant said that she is using stories from her private life as a parent in counselling with teachers with the intention of expanding the teachers’ understanding of parents’ perspectives: “We often see that there is a deficiency in meeting and understanding parents, and I can use my own experience, my own vulnerability in encountering professionals as a mother.”.

Another aspect of expanding teachers’ understanding was brought up by a participant who had worked as a teacher and now worked as a counsellor. She said that she could challenge teachers by sharing stories from her own teaching practice: “Teachers

should not be smothered with understanding; my task is to challenge them.”. Stories from her professional life are used to challenge and to expand the teachers’ understanding and practice in different areas, in both understanding parents and children better and exploring possible solutions in their practice.

Persuading clients

We also found that persuading clients is another purpose of CSD. The participants talked about several situations in which they tried to persuade clients on different issues. One participant talked about a situation in which she wanted to get some parents to acknowledge their child’s problems; she tried to do so by sharing some problems that she had with her own children. Another participant talked about some parents who were reluctant to refer their child to the EPCS. She decided to tell them about her own son’s problems and that he attended the EPCS. The participant said that the reason for sharing this story was to demonstrate that turning to the EPCS is not scary in an attempt to persuade them to ask for help from the EPCS.

Another purpose of telling personal stories is to normalize clients’ problems. One participant focused on her own speaking difficulties to show clients that there are many ways to talk normally. Other participants talked about the fine line between rendering problems harmless and minimizing problems. One used to tell stories with a positive angle to comfort clients. She once wanted to generalize and normalize a client’s problem by telling a personal story, but the client understood it as an attempt to minimize the problem and did not find it helpful. Another participant said: “A word I use a lot is ‘normalize’ ... Normalizing through telling my own experiences makes people unwind.” She found that normalizing could be positive in some situations.

Discussion and conclusion

The purpose of this study was to explore how CSD and personal experiences affect counselling practices in the EPCS. Similar to previous research on CSD in psychotherapeutic contexts (Henretty & Levitt, 2010), the findings in this study indicate that CSD appears in educational psychological counselling. The EPCS counsellors' roles as experts, drawing on professional knowledge as mentioned in the introduction in this paper, makes this finding interesting. Teachers, students and parents expect EPCS counsellors to be experts with professional knowledge of special needs education, developmental issues and school contexts. Therefore, it is interesting that the counsellors also self-disclose and use their own personal experiences in the counselling sessions. In an extensive survey of the EPCS (Hustad, Strøm, & Strømsvik, 2013), three essential areas that are required to fulfil the service's tasks and mandates were investigated: *theoretical knowledge* of the themes/subjects in counselling, *assessment competence* and *practical skills in conducting the counselling process*. The main conclusion is that the EPCS has very good expertise in multiple different themes/subjects but that the staff needs to develop competence in being closer connections to teachers through the counselling process. One can ask if self-disclosure in the EPCS may be a way of developing a closer dialogue with teachers. We cannot make any certain conclusions about this possibility from our study, but the counsellors' purpose, as we have seen in the Results section in this paper, is to strengthen the counselling relationship. The counsellors recognize that their personal experiences form a backdrop for counselling sessions and that their active use or lack of use of CSD is with the best intentions for the clients. A strong and positive relationship is a central aspect of developing a closer dialogue with teachers and to form alliances. In this respect, our

findings are consistent with conclusions from the survey of the EPCS (Hustad et al., 2013).

The finding in our study that personal experiences from both private and professional life serve as implicit backdrops in the EPCS counselling practice are consistent with research that confirms similar connections (Jensen, 2008; Marino et al., 2016; Rønnestad & Skovholt, 2001). This finding is also supported by Goodson & Numan (2003), who propose that personal experiences influence professional practice and identity. Our findings indicate that critical incidents in the counsellors' current lives were experienced as important backdrops for their counselling practice, which is consistent with suggestions from Goodson and Numan (2003). Some comments were made that experiencing difficulties in one's own life was advantageous in supporting counselling processes, which is consistent with research that focuses on how therapists' personal experiences can support clients (Marino et al., 2016). However, the active use of current critical episodes in counselling was seen as challenging by the participants in our study. After some time, when the critical incident has been processed, counsellors find it useful to draw upon these episodes when relevant. Processing critical incidents and considering if/when these incidents are applicable in counselling involve some degree of reflective awareness. Reflections on the personal impact that an incident had, reflections about a client's needs, and reflections whether sharing the incident is for the benefit of the client, need to be addressed. The counsellors talked about non-disclosed stories that lingered in the background of their minds in concrete and specific situations, indicating an ongoing reflexive process that includes awareness of both personal and contextual processes and how both parts in the counselling process can be influenced (Reid & Bassot, 2012). Our findings indicated that counsellors could clearly express their reasons for withholding personal stories and their reasons for actually using stories explicitly. Goodson and Numan

(2003) emphasize that reflective awareness of critical personal incidents may lead to realistic views of both possibilities and restraints encountered with clients. In other words, our findings appear to be consistent with Goodson and Numans' ideas.

In our findings, counsellors' personal traits were mentioned as factors that influence their professional practice. Here, personal traits are understood as characteristics that are biologically based, stable over time, and appear early in life. An understanding of personal traits as an essential part of the conception of self may be seen as opposed to a relational, contextual understanding of the self. One can ask if this understanding of personal traits could imply that counsellors, to a lesser extent, use counselling methods in a flexible manner. If a counsellor has the self-conception of, e.g., being reserved (as one of our counsellors mentioned), this conception can be challenged in a professional role where the counselling situation demands e.g., openness and self-disclosure. Our findings indicate that having such a self-concept can be an obstacle to self-disclosure. In general, counselling literature/research emphasizes the use of a wide range of counselling competencies as essential (Egan, 2014; Falender & Shafranske, 2012; Author, XXXX).

The findings show the fluid connection between personal experiences as backdrops for professional practice and personal stories explicitly disclosed in counselling settings. The counsellors were concerned about maintaining focus on the clients' issues and not taking up time themselves. Consequently, they considered the situation and timing before sharing personal stories. This finding is supported by other research that emphasizes the importance of timing in regard to self-disclosure (Raines, 1996). Raines (1996) reinforces timing as essential in social work and that contextual factors should be considered seriously before sharing personal experiences. Again, reflective awareness about oneself and the context is highlighted.

Our findings indicate variety in the types of stories used from counsellors' personal lives. We heard of everyday stories that were useful for small talk, positive stories to offer hope and similar stories to underscore equality in the counselling relationship. Similar stories also included existential stories that demanded more thorough consideration before use. The use of stories such as the ones we found is supported by results from other research (Levitt et al. 2016; Tantillo, 2004).

The counsellors reported that the purpose of disclosing personal stories was to either establish or enhance the relationship with the client and/or to support the client. These goals are consistent with research that focuses on CSD to strengthen the alliance (Hanson, 2007) and to enhance the counselling relationship (Burkard et al., 2006). The focus on developing alliances and good working relationships with clients and on building trust and confidence is similar to research on therapy (Burkard et al., 2006; Somers et al., 2013).

In our findings, we discovered a dilemma between two conflicting purposes of CSD. On one hand, the counsellors use self-disclosure to persuade the clients to understand the situation in a specific way, which can be seen as an attempt to meet the expectations that are attached to the professional role as experts to provide advice based on expert assessments. On the other hand, the counsellors used self-disclosure to expand the understanding in the clients and to prompt clients to explore possible solutions to different situations. This could lead to a larger repertoire of actions in the given situation. When we look into the mandate of the EPCS, two different roles are expressed: being experts as well as facilitating processes in complex matters (Hustad et al., 2013). Our discovery of the two conflicting purposes (persuading and expanding understanding) underlines the sometimes ambiguous and double role of the EPCS, supporting and empowering consultees as well as challenging and influencing them using their professional knowledge. Students/cases that

are referred to the EPCS are complex and demand different approaches that combine expert knowledge and counselling skills.

This study focused on the use of self-disclosure in counselling from a counsellor perspective. We found that the participants' experience that the use of CSD can support a constructive counselling process when used with awareness and sensitivity. By assuming a continuing process of reflection on knowing when, why and how to use personal experiences, the participants claim that CSD can be beneficial to clients.

This study is not without limitations. First, some aspects connected to the study design with focus group interviews are one limitation. By using a semi-structured interview guide in a focus group interview, we sometimes found it difficult to follow up on each participant's statements, which could have led to an underreporting of the use of CSD simply because the participants did not recall relevant experiences. The triangulation of the methods, such as observations of counselling settings and individual interviews with the participants, could have elaborated and nuanced the data. Through direct observation, we could capture what the participants actually did. Interviewing the participants individually could have provided more detailed, in-depth data. A combination of these methods could have strengthened the study. Second, the fact that we only have data from counsellors' perspectives and not clients' experiences may be seen as a limitation. Clients' perspectives could have contributed necessary and interesting input on how CSD affects counselling outcomes. By combining the clients and the counsellors' voices of the same experience of CSD we could have developed a cross-verification on the understanding of CSD in counselling. However, in this study we focus merely on the counsellors experiences.

In future research, the questions of CSD in educational psychological counselling could be addressed with clients as participants (children, parents and teachers) to explore

how they experience counsellors' use of CSD in counselling practices. Hearing the clients' voice on this issue could contribute to the elaboration and discussion on the complexity of CSD in counselling. Further research on the connections and interrelationship between the CSD as part of a counsellors' backdrop, the stories used (or not used) by a counsellor and the purposes he/she reports on using stories explicitly could also be of interest. How questions concerning power, domination and persuasion are connected to the use of personal stories should be explored further, as well as how use of CSD to influence clients can be understood as a way of exercising power. Jensen (2008) claims that therapists sometimes use personal stories to influence clients in directions built on the therapists own, personal and private experiences, with no foundation in research or the established knowledge base. This could also be the case in EPCS work and is therefore an area for further research.

In the review section of this paper we presented different research findings showing that counsellors in psychotherapeutic contexts emphasize use of CSD in various ways. Research on conducting CSD in counselling within educational contexts, is however lacking. The intention of this study is to fill into this gap. Our findings showing that educational psychological counsellors acknowledge the use of CSD, is important and interesting. The role of counsellors in EPCS includes both expert knowledge such as knowledge about child development, learning, school and kindergarten etc. and process competence such as counselling skills in listening, supporting students, teachers, parents etc. Our findings that EPCS counsellors personal and private experiences is emphasized in educational psychological counselling practices seems to be relevant to both the role as expert- and process counsellors. Working systematically on how private and personal experiences and

CSD can be combined with, and discussed in light of theoretical knowledge, can support the development of the counsellors' professional practice.

Knowledge about CSD should be involved in education and in-training programs of educational psychological counsellors. The finding that personal and private experiences forms a backdrop for counselling practice indicate that sensitivity about how to use and when to use personal and private experiences is essential. We found that everyday stories, positive stories and similar stories was emphasized as useful, but also that personal stories was not used in counselling. It seems thus highly relevant and important for counsellors to be aware of when to actively use or not to use personal stories in educational psychological counselling.

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