

Psychology for students



The
British
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Society

Edinburgh Lectures

Thursday 9 November
The Assembly Rooms, Edinburgh

Dr Julian C.W Boon, *University of Leicester*
Myth and reality in psychological profiling

Professor Vicki Bruce, *University of Edinburgh*
Face perception

Dr Colin Cooper, *Queens University Belfast*
What's new in intelligence

Professor Ronan O'Carroll, *University of Stirling*
Psychology, medicine and health

Professor Stephen Reicher, *St Andrews University*
Beyond the banality of evil: Understanding the
psychological roots of tyranny and genocide

London Lectures

Monday 4 December
Kensington Town Hall, London

Professor Tom Troscianko, *University of Bristol*
Vision and the natural world

Dr Daryl O'Connor, *University of Leeds*
The secret life of hormones: Androgens and
human behaviour

Professor Richard Bentall, *University of Manchester*
Understanding madness

Professor Tom Ormerod, *Lancaster University*
The importance of failure for insightful thinking

Professor Ray Bull, *University of Leicester*
Research on the police interviewing of suspects



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Short articles (around 600 words), news, tips, quotes, cartoons and other contributions of particular relevance to students are most welcome. Send to: Nicola Hills, c/o the Society's Leicester office. E-mail: Nicola_Hills@hotmail.com

Clinical psychology – Is it for you?

BY JOHN HALL AND SUE LLEWELYN

PSYCHOLOGY is one of the most popular degree subjects in Britain, while clinical psychology is the most popular psychology-related career choice for psychology graduates. So most psychology students must at sometime think: is clinical psychology for me?

Clinical psychology isn't for everyone. Clinical psychologists work with people who are under pressure, distressed, stressed or not functioning well. Clients may not have the kind of relationship they would like, or be angry, difficult or withdrawn.

Essentially, clinical psychologists are problem solvers, who are routinely faced with a series of personal tangles where psychological understanding may help, or where some sort of clinical or social care setting may be appropriate. The tools used are psychological, manifest though thinking, understanding, theorising, reflecting and relating to others, together with the initially small number of techniques or specific competencies learned through training. Clinical psychologists' clients come from any point in the life cycle, and the problems they bring range from difficulties in establishing early attachments or satisfying adult relationships, distress and maybe bizarre experiences and moods, facing loss or fear, coping productively with disability, and dealing with death.

The systems and structures that many people live in do not always help them negotiate these life challenges particularly well, so clinical psychologists often also work indirectly, with carers or families to encourage them to develop a more psychologically satisfactory way of engaging with people in distress. In some cases, the system is the client; hence psychologists may also work with teams, families or communities.

What all this requires from the aspiring clinical psychologist is interest and enthusiasm to work with people who are struggling, often with difficult emotions, but who don't always communicate clearly what is wrong, either because they don't know or because they feel angry, confused or trapped. Nevertheless they may know what their goals are, and have clear views about what might help them or their clients or families.

In Britain, most clinical psychologists

work for the NHS, where the dominant model is medical. Hence most colleagues tend to see people primarily in medical terms, perhaps forgetting psychological issues. So the aspiring psychologist needs to be reasonably resilient, both because clients can be distressed and because the environment does not necessarily support what psychologists may believe would be most conducive to psychological health. For instance, resources are inevitably limited, so therapy may have to be briefer

than would be ideal, and opportunities for in-depth psychological research are often unavailable, no matter how important the question. This means that psychologists need to be able both to co-operate, but also to constructively confront inappropriately medicalised formulations of need, and the poor quality of care that may be offered.

Having said that, opportunities both to help others in distress and to learn about the range of human experience are vast. Clinical psychologists have to enter with clients into their emotions and fears, listening to their narratives and dramas, as well as to make a difference to the outcome. The clinical arena provides opportunities to examine psychological theories in practice, as well as stimulating new ideas and insights. Helping someone who feels that their life is worthless to discover that actually there is hope and a productive future for them, is rewarding, as is helping a mother to learn to parent her children effectively rather than rejecting them or resorting to violence.

So clinical psychology may be for you

if you are interested in people, are prepared to stay with problems which don't immediately offer easy solutions, to work with other professional groups who may disagree with some of your views, but still want to learn from you, and if you are prepared to think logically and rationally about problems through a process of assessment, formulation, intervention, and evaluation. You also need to be prepared to look at your own psychological functioning and be willing to examine personal experiences and beliefs, particularly as they may affect how you relate to others.

Like any jobs, there are ups and downs. The ups are primarily about a job that is intrinsically interesting and worthwhile and which provides opportunities to explore your interests. There will never be a shortage of the need for psychological insight, since our society is hardly becoming any less dysfunctional. You will have a salary during training, with relatively good pay and conditions to follow. Research is possible, although external funding is often limited. Colleagues are often a real source of interest and comfort, and often become close friends. There are also increasing opportunities to work in agencies outside the NHS, such as charities.

Downs include working (for most) in large bureaucratic organisations, which can be frustrating and painfully slow. The physical environment can be rundown and basic; clients can be demanding and distressing; there are few subsidised perks and bonuses don't exist. But your clients teach you an enormous amount about the business of being human, and about the extraordinary ways in which people find meaning and solace in their lives.

FIND OUT MORE

What Is Clinical Psychology? (John Hall and Sue Llewelyn, OUP, 2006) provides an overview of the main areas where clinical psychologists work, ranging from care of the acutely ill in medical settings, to psychological interventions with children and the learning disabled, to the provision of treatment for people with psychotic symptoms or eating disorders. The book also includes section on how to apply for training in the UK, and what working abroad might involve.