

# The Role of Self-reflexivity in Transition Leadership Training in the Healthcare Sector

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*Leaders in the healthcare sector, frequently find themselves attempting to improve service provision by adopting evidence based-best practices, as requested by policy. Notwithstanding, change implementation is often not straight forward. As an insider-turned-researcher I initiated a Maltese National Healthcare Service-wide doctoral inquiry into the lived experience of leaders during change and transition, to gain insight into which leadership styles and managerial skills characterise an effective transition leader from a psychotherapeutic perspective. The inquiry was divided into two phases, using mixed methods with an action-research element. Arising themes indicating the need for individual proactive self-actualisation, development at an emotional-transferential level and the undoing of identity following organizational/personal shifts, provided a platform for the co-creation of a Training Manual focusing on self-reflexivity. Training using the Manual was offered to the participants facilitating their looking more closely at how power relations stalled personal and organisational growth by hindering change implementation processes. Encountering the need to unblock shame, some met impasse, others modified their underlying metaphor/identity enhancing a change in behaviour while retaining the power inherent in their previous identity, while others yet noted that the training enhanced their managerial skills. The Training Manual was well received in the healthcare field and beyond. The results of the inquiry suggest that self-reflexivity is an essential element when planning training for leaders and that **self-actualisation, and self-reflexivity** are essential managerial competences supporting transitions while enhancing creativity and inter-dependence. This implies that self-reflexivity needs to be introduced in mainstream managerial training.*

**Key words:** Leadership, Self-actualisation, Self-Reflexivity, Shame, Power, Identity and Transition management.

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## **Introduction**

As part of a doctorate by professional studies I carried out an inquiry into the lived experience of leaders during organisational change, exploring ways of facilitating transition management training. The Maltese National Healthcare Service (MNHCS) was adopted as a case study. Part of the Public Sector, this organisation is one of Malta's main employers. As it mirrors trends across the European Union and the United Kingdom, where many of its employees' train and offer training, results obtained could be shared outside the Maltese Islands.

The outlay of this article involves: a description of the background and the need for change; a literature review with considerations relevant to the local field and research design; methods and methodology describe how phenomenology was adopted as the overarching orientation and how Critical Narrative Analysis integrated with an action-research element involving an advocacy-participatory paradigm, led to the construction of Phenomenological Critical Narrative Analysis as a tool for data analysis; Ethical considerations and means used to retain insider-researcher objectivity follow; data collection included participative-observation during Communications Macro Target Team (CMTT) meetings, unstructured interviews with volunteering Heads and reflexive self-annotations, supporting triangulation; data analysis supported the emergence of spontaneous themes forming the platform for the writing the Training Manual in collaboration with the participants; findings of the CMTT sessions, exploratory Interviews and the collaborative evaluation of the Manual are then described; a section on self-reflexivity elucidating insights generated from the study, is followed by a synthesis; a section about Post-doctoral work describes some products, the wider professional influence of this research and modifications in the training manual in light of more recent practices and learning

## **Background and Context – the need for change**

Reviewing MNHCS work practices, and observing the need to follow international trends towards transdisciplinary care-plans, and knowledge-sharing (Azzopardi Muscat, et al., 2014; Grech, 2002) the MNHCS Permanent Secretary requested initiation of a Ministry-wide Re-engineering plan, in a mechanistic context lacking human/material resources. Heads were encouraged to adopt a complementary shift in leadership style/managerial skills from technical administration to team-management. Technical administration defined as ensuring resource availability so clinical interventions could be adequately carried out. Team-management defined as multidisciplinary collaboration in careplan creation/implementation, introducing standard operational procedures and new services (NHSS, 2014). The existing knowledge-based, labour-intensive context, required substantial restructuring (Dalmas, 2005).

Senior management, seemingly unaware that the collaborative spirit set forth in policy challenged the clinicians' individualistic identity (Micallef, 2003), promoted clinicians to managers, adding financial auditing/business plans to their habitual interventions. Faced with difficulties when juggling with a change in sense of self/role/style, clinicians-cum-managers attempted to change behaviour, while safeguarding their sense of self/identity (Vassallo, 2007). Work-based observations indicated that the training offered while based on international standards, met with limited success (Dalmas, 2005) as only Heads interested in management attended training which started after change was implemented (Micallef, 2005).

As a senior psychologist in the MNHCS, facing similar dilemmas, I asked my supervisor, "What can I do?" Her reply, "Who do you become?" challenged me. If I wanted to *become* a team manager I needed to let my technical administrator *identity* go. This inner shift was facilitated by the narrative function of the personality (Chidiac & Denham-Vaughn, 2008), asking "*Who am I/Who do I become?*" during the accommodation phase of the transition/developmental process (Ginger, 2006). Identity modification, required critical self-reflexivity. This observation initiated a doctoral inquiry into the exploration of the lived experience of leaders during change

and transition, to gain insight into more appropriate supportive interventions (Barr & Dowding, 2012).

### **Objectives**

This inquiry aimed at gaining insight into leaders' underlying processes as they developed in their contextual changes; which managerial skills enhanced the change/transition process; what were their training needs/preferred approaches, and to co-create/validate a related training manual.

### **Literature Review**

Change starts by letting go current ways of thinking, feeling and behaving, so new ways may be created, accepted and adopted (Bridges, 2003). This transition process entails modifications in the interpretation of meaning (Dima & Skehill, 2011; Manderschied & Harrower, 2016) which emotional, transference, projective and spiritual processes of becoming may hinder/support. Adapting healthily to shifts in context is a choice one makes when reconnecting one's life narrative pre- to post-disruption (Barber, 2006).

Integrating managerial and psychotherapeutic change models (Kaplan & Norton, 2008; Ginger, 2006) indicated how, theoretically, the lived experience of transition during organisational change may develop:

An overarching organisational goal is split into smaller ones that may be catered for by its various entities/departments. Given their central role as culture carriers, leaders, need to be the first to adopt the required shift (Amado & Elsner, 2007; Binney et al., 2012), to promote it in others (Baek-Kyoo, 2005; Hawkins & Smith, 2013). As leaders become aware that they need modify their sense of self/identity, they may re-enact habitual, possibly ineffective coping mechanisms (Thomas & Hardy, 2011). Increasing leaders' awareness about their reaction to change, could support insight, facilitating acceptance and participation in the transition process

(Gilley et al., 2011; Farrell, Keenan et al., 2013). Since, transition managers need to reform their sense of self/role/identity, to model new ways to employees, (Nicholsen & Carroll, 2013) they would benefit from developing consciousness of self-change over time (Oyserman et al., 2004), becoming aware and accepting who they are, while recognizing who they need to become. To achieve this, they could engage in inner dialogue, asking: *What are my needs?* – identifying unconscious aspirations; *Who do I need to become?* – enhancing self-awareness, facilitating identity modification (Gilbert & Orlans, 2011); *What do I want?* – making conscious decisions. Emergence of the leader's effective style would occur simultaneously with transition unfolding at organisational level, influenced by the wider field (Binney et al., 2012).

Achieving self-change requires reflective thinking during which one gains awareness of predominant processes by coming in touch with the regular interactions and practices taking place in the surrounding culture (Syed et al., 2012). This process may motivate leaders to challenge the habitual way in which things are done, and to adopt relevant values to facilitate effective service provision (Cartwright, 2002). By reflecting on their practices, leaders could increase awareness of their training needs (Camargo-Borges & Rasera, 2013; Gibson & Hanes, 2003). This implies that reflective thinking could improve governance through leaders' appropriate and relevant self-development (Grey 2007). To this end, training could focus on increasing self-awareness, understanding the process one needs to embark upon to develop an identity which enhances goal achievement and self-fulfillment (Hawkins & Smith, 2013). Training could adopt an action-research approach in the form of supervised practice at the workplace, (Hawkins & Shohet, 2012) supporting leaders to replace competency training with "learning to learn" (Gray, 2007, 478), in a confidential setting, promoting critical self-reflection (Chidiac & Denham-Vaughn, 2009).

If MNHCS leaders could critically self-reflect while introducing care-plans/audits, they could facilitate a shift in the organisation's underlying goals, policies and norms, improving governance (Kitchenham, 2008). Since Bridges (2003) described the leadership style relevant to

transition and Barber (2006) depicted how to support various phases of change, it was beneficial to focus the inquiry on the impact change implementation has on the leader (Robson, 2002) focusing on lived experience, gaining insight into underlying processes as Heads responded to organisational change (Reissman, 2008). Applying this knowledge to training programs would benefit all stakeholders (Binney, et al., 2012; Gray, 2010; Thomas & Hardy, 2011).

## **Methodology**

Exploring leaders' lived experience to better understand how they may be supported, required empathic understanding of their individual story (Cresswell, 2007). The chosen methodology had to appeal to their sense of logical structure so they could feel sufficiently comfortable with the innovative. A phenomenological overarching orientation, narrative analyses with a critical thrust including an action-research element (Langdridge & Hagger-Johnson, 2009) was deemed appropriate. The methodology of this inquiry was, split into two phases:

**Phase 1:** – Exploration, description, and interpretation of the Heads' lived experiences within their context as they occurred, using first-person action-research practices and phenomenological critical narrative analysis. This facilitated delving into new areas of knowledge, developing insight into common phenomena. Arising themes were used as a platform to co-create a Training Manual.

**Phase 2:** – Determination of the effectiveness/validation of the Manual with the participating Heads, evaluating its impact on their shifts of sense of self/role/identity, using second-person action-research practices in a participatory manner, and critical self-reflective, change-supporting elements. Narrative and paradigmatic modes were employed. The former explored Heads' desires, goals and intentions through their stories, the latter facilitated the logico-scientific understanding of experiences through empirical observation (Langdridge, 2007). Constructionism supported the assumption of a position of advocacy, raising awareness, establishing dialogue with what unfolded in the field while being critical of the same (Camargo-Borges & Rasera, 2013; Figure 2).

**Phenomenological Critical Narrative Analysis:** (PCNA) was developed by integrating critical narrative analysis (Langdridge, 2007) with second-person action-research practices (Cresswell, 2007). Critical moments were introduced into the analyses through hermeneutic reflexivity (Langdridge & Hagger-Johnson, 2009), involving a critique of the illusion of subjectivity. PCNA supported the exploration of the Heads' underlying process by highlighting identity changes, allowing themes to emerge spontaneously in a hierarchy of patterns from the data collected and flexible analyses of Heads' stories/text on a case-by-case basis, identifying patterns of meaning within/across data; presenting the whole in a structured manner (Langdridge, 2009).

**The Action-research approach** entailed the organisations mode, supporting collaboration among professionals to reflexively improve professional practice (Hughes, 2008). This approach was chosen for its problem-solving focus, and its mirroring coaching models' framework (Hawkins & Smith, 2012). As the inquiry required a critical self-reflexive focus, Barber's (2012) model highlighting action and critical self-reflection at each phase, was adopted.

- Pre-contact: Awareness of conscious/unconscious processes, different levels of experience and personal politics manifested as behavior, mindset, emotions and motivation.
- Orientation: Researcher and participants draw a contract engaging in preparatory activities.
- Identification: Problems are identified, remedies discussed and solutions attempted.
- Exploration: Monitoring the impact of strategies implementation on all stakeholders.
- Resolution: Measuring success, termination of the alliance and final reflections.

**Ethical permission** to carry out the doctoral inquiry in Malta was obtained from the Maltese Data Protection Board and the Malta University Research Ethics Board. The research proposal was approved by the Metanoia/Middlesex Ethics Committee. Being an insider-turned-researcher, while placing me in a position to gain valuable insights, raised ethical concerns (Czarniawska, 2004). Acknowledging my presence in the field could influence study outcomes, I adopted a psychotherapeutic approach to interviewing to decrease my impact, while attempting to be as critically reflexive as possible by distancing myself from feeling part of the

organisation (Frambach, 2003). I adopted a heuristic approach to ensure personal integrity and ethical expression (Finlay & Evans, 2009) while focusing on not eliciting desired data (McLeod, 2010). Democracy was attained by adopting an action-research approach (Hughes, 2008).

### **Methods and Research Design**

The inquiry required a flexible research design lending itself systematically to the collection and analyses of data-rich information, facilitating working with shifts in sense of self/role/identity producing themes, allowing the research question to be re-shaped by subsequent questions (Robson, 2002). Data source and methods triangulation were adopted at each phase (Langdrige & Hagger-Johnson, 2009). It became a multi-stranded metastory, (Bamberg, 2006) diverse from that offered by the politically powerful (Czarniawsa, 2004).

**Sampling and Participants:** Names of potential participants were obtained from an organisational consultant, and a letter was sent to all. Volunteering participants, held various posts in the MNHCS ranging from public health/medical consultants to executive managers to healthcare administrators. Ages ranged between 31 and 58 years. The age of appointment to leadership positions varied between 22 and 47 years. Their length of stay in leadership ranged from 9 months to 36 years. All held a position requiring contract renewal every three years. Their extent of leadership training ranged from none to Master's-level. Motivation to participate included:- interest in the research topic, finding solutions for management issues and introducing staff support. Four participants dropped out and were replaced for the evaluation of the Manual.

### **Data Collection:**

**Macro-level** (socio-cultural) data was collected during attendance of an Internal Communication Macro Target Team (CMTT) sessions. Adopting an observer-as-participant stance I heard the voices of management undergoing anxiety when faced with change (Czarniawska, 2004). Participants, permitting my attendance, vetoed audio-recording of sessions, so I took down conversations *verbatim* on a notebook computer, noting the persons involved, events narrated in a time sequence, and emotions exhibited (Robson, 2002). The first



Head to speak was coded CMTT1 and so forth. Attending the CMTT meetings allowed me to observe the outcomes of non-reflective change implementation, providing supportive information for the exploratory interviews (Cresswell, 2007), .

**Micro-level** (emotional-projective) data was collected through exploratory interviews during transition, before the sense-making retrospective process and contextual influence set in, decreasing faulty recall. I met the Heads approximately once every four months at T1-T2 -T3 over a year. Interviews scheduled by appointment, were conducted at their offices (Gray, 2007). Heads allowed me to record the interviews. The first interviewed Head was coded H1 and so forth. This process gave them time/space to narrate their story from the introduction of the organisational shift to their new roles following contract renewal, demotion or dismissal (Nicholsen & Carrol, 2013). Reissman's (2008) five phases of representation were adopted for the interviewing, transcription and relating processes:

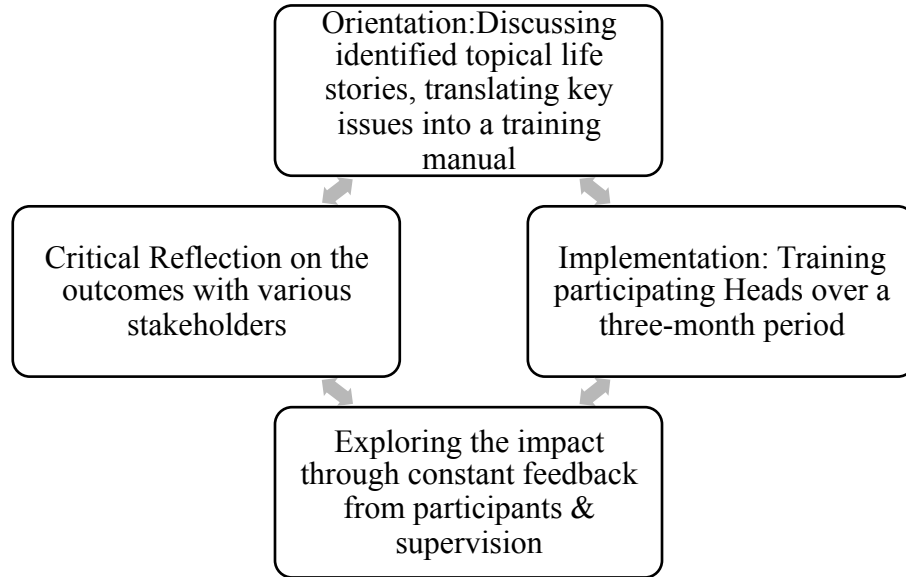
**T1** the research question; *"What is your lived experience of change and transition?"* was asked at the start of the interviews. *"What metaphor symbolises who you are in your current position?"* was asked at the end. Interviews were transcribed and analysed between sessions. Arising themes from individual participants were sent to them personally for feedback.

**T2** and subsequent interviews commenced with the question *"What are your reflections on the themes arising from the previous discussion?"* Training needs/desired approaches were explored. A draft Training Manual based on arising themes was sent to the participants between T2 and T3.

**T3** - themes arising from T2 and the draft Training Manual were discussed.

An amended Training Manual was Shared amongst participants who volunteered for training.

**To determine the effectiveness of the Training Manual** – I focused on process studies, encouraging stakeholders to participate in decision-making at all stages of the action-research cycle (Fillery-Travis & Lane, 2006). The evaluation consisted of: training-in-activity with each participant indicating what was learnt; the PCNA of exit interviews; and metaphor analysis (Lawley, & Tompkins, 2013; Figure 3 overleaf).



**Figure 3:** Action Research Spiral for Determining the Effectiveness of the Manual

**Data Analysis:** During the PCNA of the transcribed material topic-centered narratives, linked by themes were adopted (Reissman, 2008). Common patterns of meaning were identified, appreciating what fell out of this pattern and working with both. Data sets were placed into codes producing a thematic map. Narratives were deconstructed asking ‘*Which other voices need to be heard?*’ The synthesis, intertwined my interpretations of the descriptions, with my observations (Langdridge, 2009).

## Findings

Participative-observation of CMTT sessions facilitated insight into the Heads’ experience of ongoing change/implementation and outcomes of non-reflective facilitation. Exploratory interviews supported insight into Heads’ underlying processes, training needs/preferred approaches and the outcomes of their non-reflective managerial interventions. Findings will be presented using the PCNA structure.

***Participative-observation of CMTT sessions:*** Eleven CMTT sessions, were facilitated by CMTTF between June – July 2012. Heads nominated by administration<sup>†</sup> as their representatives, were tasked to create guidelines enhancing inter-employee and inter-entity communication. CMTTF planned to convince the Heads that it would benefit MNHCS to become a learning organisation, and introduce the position of Communications Coordinator at Director (CCD) level. One hoped some Heads would become “multipliers of the process” (Session #2, line 1). Stating that CMTT outcomes depended “on the personality of the leader” (Session #9, line 17) CMTTF set the canonical narrative as *hero who enters to turn the organisation around*. One appeared unaware that the Heads regarded CMTTF as representing MNHCS administration. They were cautious of embracing the prescriptive document, since they had to account for their actions to the absent decision-takers. Rhetoric included distancing through second- and third-person pronouns, and self-referentiality through the egocentric *I*. Verbalisations such as “people...do not like to see change” (CMTT10, Session #6, line 127), coupled with a wary tone of voice, indicated attempts to play for time until the picture became clearer, while appearing to support the communications document<sup>‡</sup> setting the counter-narrative as *change terrifies us into inaction; anonymity protects us*.

The MNHCS non-reflective change implementation processes involved: Senior management leading through *personality cult* (shadow narrative) created core groups to carry out their directions, precipitating a silo-mentality, *us v. them* culture. Reportedly, they adopted this style, to camouflage limited managerial skills, while controlling other Heads. Middle-management belonging to the core-groups, encountering an oppressive attitude, felt deterred from voicing their feelings/initiatives, as manifested when the CMTT Heads adopted very tentative language to describe potential initiatives verbalizing, *perhaps, if, maybe*. Heads responded from a perspective of fear of sanctions/self-gain, with underlying feelings more likely to be envy/spite: “Management wants an employee to...be creative, but when creativity does not work, [they] be-Head him with a scimitar” (CMTT2, Introductory Session, line 39). Living in constant fear of

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<sup>†</sup> Senior management and administration are used interchangeably in this section.

<sup>‡</sup> Reference to *document* in the text means the communications document.

being shamed, mistrusting their staff's ability to maintain confidentiality, CMTT Heads shifted blame of limited efficiency onto sabotage carried out by subordinates: "The problem is when lower workers do harm on purpose" (CMTT9, Session #2, line 78). Heads, identifying with their oppressors became oppressive and/or infantile. "Good communication is that which gets you what you want" (CMTT11, Introductory Session, line 36). Apparently lacking self-reflexivity they *distanced from self-growth* - the shadow narrative. Lower echelons, excluded from core groups, reported resentment, with bottom-up rebellion and/or adaptation, joining their unions in an attempt to redress the power differential, severing communication.

CMTTF, infact, did not consult *with* the CMTT Heads. One deflected<sup>§</sup> their several warnings about how they felt, erroneously supposing that one could change their mind-set during the documentation process. One appeared unaware that the proposals, triggered the show-stopping overall narrative - *We will all do what we have to, so when change implementation fails, we all save face*, and predominant **theme** *MNHCS pièce du résistance, propose, stop (silence), wait (to gain time), abort (to safety)*. One gave the politically powerful Heads what they wanted to avoid conflict, so less powerful Heads, gained time through strategic requests for clarification, making counter-suggestions, until they gave rise to a scenario they could control. Discouraged by the perceived lack of collaboration, CMTTF, exclaimed that unless all agreed "we can forget it" (Session #11, line 34). CMTTF imposed the recruitment of a CCD deeming *him* necessary to create "a single perspective" (Session #7, line, 19). Heads voiced resentment that another Director could be given power to tell them what to do. CMTTF, negotiated the insertion of the term *cooperation* in the document, allowing them to collaborate if/when they deemed fit, rendering CCD dependent on individual goodwill. A diluted version of the original proposal was rubber stamped, *getting the job done but only on paper* – shadow narrative.

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<sup>§</sup> In gestalt psychotherapy this means turning away either an internal stimulus or one from the environment, preventing awareness (Ginger, 2006)

The main obstruction to an effective outcome emerged in Session #3 when CMTTF asked the Heads to discuss their **identity**. Overwhelmed, most projected an image of competence, emphasising pride in their professional status: “We are those who are contributing to achieve the goals...” (CMTT5, line 5). In Session #7, asked to reflect about their **identity and values**, Heads reiterated that their sense of self emanated from “pride in the...professional state” (CMTT10, line 74). CMTTF gave up: “If we have a problem understanding *who we are*, we cannot go forward” (line, 43). Enjoying pride in their status Heads defended themselves from commitment to change fearing its loss: “This is ego” (line 104), verbalised CMTT5.

**Exploratory Interviews:** occurred between January – December, 2013 while participants waited for administration to either renew/terminate their three-year-term contract or re-instate/demote them after changes in political administration. Narratives evidenced anxiety, fear, anger, frustration, resentment and feeling irrelevant. Feelings were at times overtly expressed while at others camouflaged as over-composure and/or deflected into a bitter humour. Interviewed Heads also distanced from their narratives using second- and third-person, singular and plural, adopted the self-referential egocentric *I*, projected an image of excellence, hiding internal conflict. Distancing and detachment appeared to be MNHCS-wide coping mechanisms. Incoherence between verbal and non-verbal processes re-elicited the theme *public v. private selves*.

#### **a) Heads Underlying processes**

During Interview #1, Heads felt challenged by the research question “*What is your lived experience of change and transition?*” asking about their experience *of* rather than *how* they implemented change. Evaluating their impact on the enhancement of the quality of service provision, Heads assessed if they were *good enough* for re-instatement. They narrated adjusting to circumstances through a series of transitional crises, habitually *juggling* (shadow narrative) in a conditioned manner. Narratives echoed perused literature (Gilbert & Orlans, 2011; Thomas & Hardy, 2011). Viewing the inquiry as change agency senior management

belittled/ridiculed it, evoking an *expert – amateur interaction*: “You can’t make the nervous calm.” (H13, line 40) verbalised sarcastically. Middle-management tended to evoke a *dominant teacher – student interaction*: “Look, let me tell you!” (H2, line 11; H8, line 6). Caught in the same organisational shame/blame narrative as CMTT Heads, they also were reluctant to discuss their *private selves/identity*. To re-establish power dynamics some requested a copy of the methodology, others a list of references to ensure the research had *solid scientific basis*.

Proposing policy updates was viewed as an opportunity to “Increase consistent, reliable services...” (H1, Int, #1, lines 14) *enhancing quality, accessibility, and sustainability of service provision to the service user* (canonical narrative). Creative change was discouraged with “innovations... thrust upon you...most of the time, you just absorb the change” (H5, Int. #1, lines 14, 18).

Interviewed Heads echoed CMTT Heads narratives of non-reflective change implementation processes. Though senior management preferred adopting evidence-based research methods when attempting to implement change: “that does not happen much” (H9, Int. #2, line 28). Peers were approached with “scientific argument” (H2, Int. #2, line 26), however “personal psychology and the other person’s psychology” (H5, Int. #1, line 73) were essential to elicit individual goodwill giving rise to the overall narrative: *It’s not what or how much you know that matters but how well you get on with those who matter*. Middle-management, deemed “incompetent...[had]...to think like...” (H2, Int. #2, line 26) senior management. Lower echelons were approached through change agents adopting manipulative techniques. When persuasion failed senior management resorted to imposition setting the shadow narrative *power is in giving direction not in being of service*. Shifting blame onto lower echelons’ resistance to change, Heads justified the need for autocracy, and lack of transparency. They failed to acknowledge that the adoption of constraining communication styles, led to elective mutism (silence) and/or frustrated acting-out (unionisation), setting the counter narrative *striving for consensus orchestrates inaction*.

Heads also got caught in the MNHCS vicious cycle: “evolving and changing [not necessarily] into something better” (H4, Int. #2, line 88), becoming slowly but surely desensitized, detached and

alienated and/or leaving. They realized that going higher could entail meeting more constraints, precipitating frustration. The more distant Heads became from the core business, the more they risked **identity crises**: “It’s...easier...to empathise...when you meet...the person...using the service” (H6, Int. #1, line 26). Speaking of their life as leaders, they took deep self-supportive breaths followed by silence. Self-actualisation slowed down spiritual-emotional regression, providing sufficient intrinsic rewards and energy to protect oneself: “Surviving is...*moment of reflection*...being happy doing what I do” (H3, Int. #1, line 116).

By Interview #2, having read the emergent themes from Interview #1 Heads felt they were losing control over the research. This precipitated further polite annihilation/ridicule as part of a *belligerent diplomatic argument*. While feeling displeased/furious at what emerged, they could not deny it: “I was taken aback...I was more of a guinea pig than I realised” (H5, line 8). To retain their top-down expert **identity** intact, participants *split* me into *bad listener* when I questioned and *good listener* when I empathised, being happiest when what I said was ‘exactly, exactly’ what they intended. The interviews ended on a relieved note for re-instated Heads, disappointment for Heads who accepted demotion with ambiguous grace and fury for Heads who experienced their demotion as narcissistic injury.\*\*

Detached from their inner selves to survive MNHCS practices, hid frustration and anxiety under a veneer of over-composure and ego-centricity, living in fear of being shamed.

### ***b) Managerial skills and values for change implementation***

During Interviews 1# and #2 Heads disclosed encountering difficulty when practicing skills, they learnt during training. They acted *as if* they were following management theory but the intent was survival, the avoidance of shame and blame.

Active listening, acknowledgement, and equity aimed at ensuring loyalty, rather than understanding. Heads, disseminated information/knowledge about the organisation cautiously, disclosing even less about themselves, believing that this could lead to loss of power: “sharing

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\*\* A narcissistic injury occurs when a person reacts negatively to perceived or real criticism or judgment, boundaries placed on them, and/or attempts to hold them accountable for harmful behaviour (DSM-5, 2013)

inner feelings enough gains...trust, too much...becomes shaky" (H15, Int. #1, line 10). Heads noted that building good working relations with peers resulted in greater collaboration, however they set clear power distances between themselves and the staff, reducing the latter to a nameless mass; "...the staff has to benefit as well...give *him* a win-win situation" (H2, Int. #1, line 83). For Heads outcome evaluation was an ongoing exercise assessing whether one was attaining the desired results. This approach entailed being "able to accept, failures, mistakes" (H15, Int. #1, line 52), "...find[ing] ways of improving" (H1, Int. #2, line 12); saying "...'look, this didn't work,' we need to adapt" (H3, Int #1, line 17). Negotiation, persuasion, and organisation techniques aimed at achieving a win-win situation for as many stakeholders as possible; "I don't trust them and they don't understand me....so, you build trust" (H1, Int. #2, line 48, 53).

While acknowledging that being authentic and honest could generate trust, Heads noted that survival required flexibility, shrewdness and opportunism, possibly also manipulation: "sometimes...you may need to say a half-truth (H13, Int. #2, line 49); "You can't, (triplicated) occupy certain positions and not have a thick skin" (H9, Int #1, line 30). Commitment and passion, involved owning a project which reflected one's cause: "If you don't succeed try and try again" (H13, Int. #1, line 11). When passion died one "moved on" (Int. #1, H3, line 116; H12, line 83). Patience, tenacity, perseverance and resilience, were essential given the slow, unfolding of change. Accepting the situation and, working in the here-and-now were related to lack of continuity rather than mindfulness: "constantly, understand the constraints...results take time" (H15, Int. #1, lines 56, 57). Self-control involved being logical, aware of negative feelings to retain clarity of vision and thought, focusing on what had to be done: "recognize that a situation is about to escalate...the circle of enemies needs to be converted into a circle of friends" (H1, Int. #1, line 84, 96).

Responding to the draft Training Manual sent between Interview #2 and #3, Heads noted that it was evident that the Manual had been written by someone who knew the field verbalising "you've invented...an adapter plug...we can *think* about changing our processes" (H14, Int. #3, line 28).



**c) Training needs and desired approaches**

During Interview #3 declared training needs tended to self-referentially address the development of pre-existing predispositions, safeguarding positions of power. Skills required to function within the MNHCS were not found in managerial books/training as: “new managers do not even know what skills they are going to be needing” (H1, line 46). These skills could be imparted to chosen acolytes: “You cannot include...a day-to-day person in this...da” (H2, line 39).

However, when requesting further training about ethics, moral development, facilitating the emergence of the true-self, focusing on enhancing professionalism and increasing awareness of how far they had developed in these aspects, Heads exhibited awareness of their need to develop/rediscover their humanity: “the patient [as active participant] needs to become the ethos of the organisation” (H2, line 43),

Training approaches requested included interactive seminars/workshops wherein Heads could discuss issues, exchanging solutions. One-to-one coaching/mentoring sessions by: “someone...wiser...at the same level...to share grievances with” (H9, line 89), would “allow the situation to grow and develop” (H15, Int. #3, line 119), avoiding suffering associated with learning from one’s mistakes. Reflection as a form of personal development was highlighted: “It’s very difficult to bring about change when you yourself have not gone through *short stop of suspense* changes. Then you can say that you lead by example” (H9, line 67). Heads requested a “training manual [offering] sufficient flexibility for the person to revisit what one had learnt” (H1, line 44).

PCNA of Interview #3 highlighted that a reflexive-tool, could circumvent the organisational narrative *tell me what to do so I know what to resist*. This was added to the draft Training Manual.

**Writing the Training Manual:** Discussions with stakeholders indicated that it would be beneficial if the Training Manual drew on:- Gray’s (2006, 2007, 2010) executive coaching approach wherein training would focus on daily workplace interventions: Denham-Vaughn and

Gawlinski’s (2012), coaching model, so training would be based on field-relational and gestalt theory: NicholSEN and Carrol’s (2013) suggestions that the trainer/researcher, practicing self-awareness, would empathise with the leader who practices: a) self-observation, followed by self-disclosure; b) self-examination through reflection/feedback; and c) self-development through transformation by new knowledge: and Barber’s (2012) multidimensional approach which facilitated engaging in five forms of interventions, helping participants develop forms of intelligence/skill at various levels. Table 1 outlines the facilitative skills, relationship levels, and types of intelligence addressed.

**Table 1:** Multi-Level Amalgamation for Holistic Inquiry

<b>Facilitative Skill</b>	<b>Relationship Level</b>	<b>Intelligence</b>	<b>Fostered Skill</b>
Engaging the physical-sensory environment. Facilitating awareness.	Negotiating the working alliance	Sensory intelligence.	Observation and listening.
Responding to sociocultural environment. Organisational dynamics and ethical boundaries are explored and recognised. Strategies are contracted/implemented.	As above.	Social intelligence.	Inquiry and communication
Acknowledging the emotional-transferential climate. Focusing on: client/organisation biography, resources, learning orientations, discovering emotional blockages.	Idealised dimension of relationship vs power politics; shadow side of contractual relationship.	Emotional intelligence.	Coaching and counselling.
Surfacing the imagined-projective shadow. Drawing attention to unconscious processes and dynamics.	As above.	Self-intelligence.	Mindfulness and self-awareness.

<p>Locating intuitive-spiritual qualities. The attitude of listening without fitting what one hears into pre-packaged concepts.</p>	<p>Authentic relationship, accurate perceptions, willingness to be honest. Transformation occurs.</p>	<p>Intuitive intelligence.</p>	<p>Reflective and envisioning.</p>
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The Training Manual developed into three sections:

**Introduction:** - The concept of leadership and how synergistic learning supports self-development were discussed, exploring how the reader could adopt critical self-reflection during transition.

**Self-Reflective Tool:** - Replying to set questions, one could identify problems, seeking remedies, critically self-reflect, attaining behavioural clarity and awareness that one’s practice is changing.

**Self-Reflective Manual:** - Supported the reader to learn from personal observation and critical self-reflection, facilitating the cultivation of a new sense of self/identity, and the development of transitional leadership skills/related roles. Conceptual frameworks and models upon which the tool was based, were discussed.

**d) Training Outcomes and Evaluation of the Manual**

Training commenced March 2014, with thirteen participating Heads and two new volunteering Heads – fifteen in all. During an initial meeting an up-dated version of the Manual was presented to them offering them a choice to read it on their own, or work through it with me. Five Heads opted to read it and meet for discussions. Ten Heads, identified areas they required training in and we worked together. This section will discuss results obtained from: training-in-activity; PCNA of Exit interviews and metaphor analysis. Exit interviews occurred one month following training allowing Heads time to work on their respective projects. Metaphors verbalised during Interview #1 were compared to those offered during the Exit Interviews

evaluating possible shifts in sense of self/identity, managerial skills/leadership style and/or learning style, not consciously verbalized, on a case-by-case basis. As projective techniques may reveal what participants do not necessarily know or want known about themselves, I asked them point blank which metaphor symbolised who they were, demystifying the process, increasing trust (Edgar, 2004).

**Training-in-activity:** Heads' projects were discussed during three/four meetings held over a three-month period. Process notes were kept. All Heads indicated that organisational issues arose when projects reached the exploration phase (Barber, 2012) - monitoring the impact of strategy implementation on stakeholders, possibly because adopting a top-down approach with subordinates rendered monitoring difficult. H14 noted that when building communication, the best plan was "coming down to earth, on level with the staff." H15 started having coffee in the kitchen, to give the message "I am a part of you at lower level." Training supported them to develop awareness so they could identify their values, and then support the development of awareness in others, so all could become aware which value they might need to change/adopt to successfully achieve desired outcomes.

Three Heads adopting guidelines explicated by the Manual commenced projects discussing the way forward with colleagues and subordinates. They found this exercise demanding, however agreed it, 'unexpectedly' facilitated the smooth flow of the project. Two Heads requested team-building for their entity. Though this achieved the desired managerial goal, it set subordinates on the path to differentiation. Feeling they were losing control over the staff, the Heads developed internal conflict. Notwithstanding, they reported that this activity left a positive impression on senior management, promoting managing-up. Heads seeking to enhance their interactions with subordinates, rather than their own self-development, became more effective.

**Exit Interviews:** Heads were asked set questions to evaluate the training outcomes:

Asked what they considered to be of significant learning for themselves and how they best learned from the meetings, Heads, voiced appreciation for the way the Manual integrated management with psychotherapy, logical thinking with empathy: "the way it is structured [and

the] questions [made you] reflect...rendering you more empathic” (H1, lines 5, 7); “It came at the right time...*he...he...* sometimes it’s good to have something that...helps you filter your thinking” (H13, line 34). Heads, noted that they found the Manual time-consuming, requiring in-depth thinking prior to insight.

Asked if they were aware of any self-growth, due to the work carried out through the Reflective tool, Heads reported a limited increase in *self-awareness and self-reflexivity*, which they tended to intellectualise, justify and/or rationalise to some degree. Heads deemed the outcomes had commenced during the exploratory interviewing process, wherein ‘hard’ questions had “started self-reflection...maybe before I did not give it any attention” (H10, line 4). Focused on self-reflection, the Manual could not be used as a set of models/directions indicating what Heads were meant to think and/or how to reply. Heads lacking an internal locus of control found this difficult to digest. Sounding surprised H10 and H13 respectively verbalised; “That *thing* made me...stop, think and plan...I have a tool I can use” (H10, line 2); “You...make the time to actually...reflect” (H13, line 3). Blame for the increase in *undesired self-awareness and self-reflection* was at times shifted onto me, as author of ‘*the thing*.’

Other Heads, while appearing angry at *unplanned personal change*, reported feeling content when training supported achievement of managerial goals. This mirrored the CMTT narrative – *they want change, we do not want self-growth*. Self-reflection, while giving results might have precipitated *unblocking of shame* which Heads wanted to avoid: “It exposed me to my deficiencies...I think (H2, line 5); “I was finding it hard to adjust [to demotion]...*Long reflective silence*...Because I...I...never really thought about it” (H13, lines 4, 20). Other Heads yet used the Manual to serve their purpose: “The forms of thinking...helped...we can make a better team with each other” (line 11). *We* being H3 and myself, as H3 distanced from the staff who needed training; “You...need to resist the temptation that after things have reached full circle, you say ‘Didn’t I tell you?’...otherwise you get into trouble” (H6, lines 26, 29). These verbalisations implied that the main theme behind resistance was *professional narcissism*.

Asked if this work helped them develop their current form of intelligence and/or exposed them to other forms which they also developed and to what extent it did so, eight Heads

reported a shift in one of the various intelligences: self-, emotional-, social-, imaginative-, and/or spiritual; five learnt a new learning style, shifting either from abstract conceptualisation to active experimentation or vice versa. Active experimentation of the guidelines supported some Heads to discover individual needs for managerial training and others to observe that they needed to *stop, step back, and think prior to planning*, actively counteracting the MNHCS non-reflective change implementation process.

Eleven Heads claimed that the Manual helped them achieve their training needs; ten Heads claimed it helped their personal transition; thirteen Heads noted that the Tool supported their ability to self-reflect, enhancing awareness of who they were and who they wanted to become.

***Identity work and Metaphor analysis:*** Metaphors chosen distinguished between male and female archetypes (Morgan, 2006) echoing CMTT and Exploratory Interview narratives: -

- male archetypes included: Gandhi, Mandela and Robin Hood: These counter-culture metaphors echoed the CMTT and Interviewed Heads respective narratives: *the hero who turns the organisation around, wants a personality cult and power is in giving direction not in being of service.*
- female archetypes included the old humped tree, the gnarled pine and the wise old *person*: Related to deformity and old age, the anti-thesis to Health *who is male*, these metaphors echoed the Heads' narratives *they want change, we have to juggle around to survive.*

Pre- and Post-metaphor analysis evidenced how Heads veered towards change that *maximized power*. H3 describing oneself as the captain of a boat with holes in it, gathering a team together to fix them, evidenced one's intent to extend one's personality cult. More frequently however change was carried out to *retain power*. Following demotion H15 shifted one's metaphor from a rider on a roller-coaster being mainly atop, to a wise old *person* adopting a low profile trying to blend with one's surroundings still exerting influence. Power retention also took the form of minimising shameful connotations by using euphemisms: *holes* rather than *shortcomings* (H3)

Some Heads found it easier to speak about their *private selves* through metaphor. The oppressed Healthcare administrators chose deformity a gnarled pine battered by the elements and a humped tree of wisdom which could spiral out of control to describe who they had become as a result of coping with senior management.

During the evaluation of the training manual some Heads appreciated the integration of professions, becoming more sensitive to the feelings of others, and more empathic with the pace of the changes one is carrying out with the other. The adoption of empathy, and co-creation was stalled by the *dominant, masculine archetypal orientation* of the existing culture and its underlying narratives which were introjected by other Heads. The discovery of this issue could only be carried out through dialogue and self-reflexivity (Chidiac & Denham-Vaughn, 2018). Heads agreed that despite being limited by time, their colleagues and themselves needed to stop and think, and that the Manual had facilitated that process.

**Self-reflexivity:** Supervision and keeping a journal, protected me temporarily from becoming ensnared in MNHCS practices, assuming the role of rebellious/adapted child and/or identifying with the oppressors (Evans & Gilbert, 2005). Finding myself trying to remain calm and composed, despite the ridicule, belittling and splitting, I gained insight that senior management's cold indifference could be a form of self-defence. Informed by Etherington (2004), that researchers need to delicately tread the pathway between their own possible narcissism and need for control, and that of their participants, I did my best to hold my presuppositions at bay, while adopting psychotherapeutic, active listening. The Heads, unused to this approach, apparently mistook it as a sign of weakness. As I did not act as an *expert*, I was an *amateur* to whom some Heads, imparted their skills. Being cognisant of the *as if* managerial tactics I began to recognise them when they were used by my direct line managers.

As an insider-researcher, I was surprised at the extent of the negative impact from the ongoing lack of continuity. Heads were given insufficient time to let their current sense of self/roles/identity go between one shift and another, so by necessity, they lived in the here-and-now, practicing secrecy as a survival tactic (Shapiro, 2013). This worldview precipitated a sense of insecurity, pervasive mistrust and fear of failure leading to *the shame-blame narrative*

resulting in the *alienation-demotivation process*. Consequently, Heads developed egocentric self-referentiality, personality cult leadership styles and core groups, limiting policy implementation at strategic level, decreasing the quality of service provision. This process resonated with the point raised by keynote speakers at the *Joint Action on Mental Health and Well Being: Driving Mental Health at Work in Europe* (2014), that even if policy were drawn following professional research and interventions respect ethical evidence-based best practice, implementation is not straightforward.

**Synthesis:** In line with Nichol森 and Carrol's (2013) conclusions, this research confirmed that the *undoing of power* is a difficult task for Heads. Finding it difficult to let their old grandiose identity go, even when this became necessary, Heads developed new identities to retain a semblance of their lost power. Adherence to the social contract, and self-transcendence was limited as Heads distanced from a professionally ethical identity for safety (Hamilton, 2008) resorting to egocentric self-referentiality (Langdridge, 2007). This is not restricted to the local scene. Encouraging management to involve employees at an early stage of the change process, Psy-ga (2013) advises managers to model on chameleons evoking the *hero that enters the organisation to turn it around* while appearing to merge with the background/company/employees. This resonates with the identity leader (Haslam et al., 2011; Steffens et al., 2014) who creates an image of *we-ness* to bring about change. This leadership style lacking self-reflexivity, led CMTTF to achieve limited outcomes. Deflecting feedback from the CMTT participants, CMTTF remained unaware that one was losing their trust and collaboration (Stetler, 2014). The concept of the *change implementer as change catalyst*, remaining unscathed by the implementation process, was and is still found in mainstream managerial training (NHS, 2010). MNHCS Heads might benefit from heeding Psy-ga<sup>††</sup> (2013, 105 - 109) that when "managerial staff expect from employees, conduct which they are not yet able to deliver, employees may simply feel overloaded." Leaders viewing human development as a value are more likely to achieve desired goals (Huppert & So, 2013; Leggett & James, 2016).

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**Post-Doctoral Work: Products and the wider professional influence of this research:**

Following the Heads' suggestion, I went out and "explained [the manual] to [others]" (H1 Int. #3, line 18). H2's verbalisation that the Manual could "bridge between professions which are not necessarily within health" (Int. #3, line 13) foretold the Manual's future. Wanting to share their development in self-awareness and self-reflection MNHCS Heads asked me to start team-building sessions in their respective departments. Knowledge-sharing, meaning-making, self-actualisation, and critical self-reflection proved essential to create a collaborative environment in what was essentially a *dominant-submissive, shame-blame scenario*.

**Moving beyond:** Collaboration with the Commission for Domestic Violence, in 2017, led to the setting up of the Peer-to-Peer Case Study Research Group, promoting self-reflexivity, knowledge- and meaning-sharing and discussing evidence-based best practice within a related taskforce. Commissioners provided us with platforms to disseminate outcomes. We held a Workshop on March 2019 sharing our findings with peers and Heads of Departments. Workshops in self-reflexivity were also carried out with employees hailing from various Ministries including Home Affairs and Education as well as at the University of Malta where I am now employed as Head of Counselling Services.

**Modifications in the training manual in light of more recent practices and learning:** The Training Manual is being prepared for publication, and is the basis of a post-doctoral study to further explore the *role of self-reflexivity in transition-management training, supporting leaders to develop a hybrid practioner-researcher identity* (Barber, 2012). Armsby (2013) highlights that the integration of professional and academic identities is beneficial as one identity supports the other. This resonated with my doctoral experience when I found myself 'reflexively understanding as a person, expressing as a professional, repositioning my researcher stance into that of the acknowledged participant' (pg. 15). In hindsight, I realised that self-actualisation through the development of a doctoral identity protected me from embarking on the alienation-demotivation process, while my identity of practitioner protected me from *getting lost in a vortex of helplessness* upon losing sight of the core business, the client. The Manual would continue to train the leader in self-reflexive dialogue as a tool for transition-

management - the practitioner (Chidiac & Denham-Vaughn, 2018); while supporting him/her to develop research skills, particularly appreciative, holistic inquiry – the researcher (Breslow et al., 2015). This would distance from the problem-solving approach risking development of shame/blame, focusing on a passion-centred mindset, fuelled by the person's need for self-development and transcendence (Waters & White, 2015).

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