Trainee and Qualified Educational Psychologists' Experiences of Using a Culturally Responsive Consultation Tool: An Exploratory Study

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Artificial Intelligence (AI) Use Declaration

Artificial intelligence tools (Claude, Grammarly) were used in a limited and supportive capacity during the preparation of this thesis. Their use focused primarily on proofreading, language clarity, sentence refinement, and formatting, as well as supporting the clarification of ideas during drafting. These tools were used as an assistive aid to support the writing process and did not generate substantive academic content. All conceptualisation, analysis, interpretation, and scholarly argumentation and judgement presented in this thesis are my own work.

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Abstract

Growing cultural diversity within the United Kingdom has generated increasing demand for Culturally Responsive Practice (CRP) across professional contexts, including Educational Psychology (EP). EPs work with children and young people (CYP) and parents/carers from a wide range of cultural backgrounds. EPs are required to engage in CRP, yet the resources to support this in EP practice remain underdeveloped, and empirical research in this area is limited. This thesis presents an exploratory study which aimed to address this gap by exploring the experiences of trainee and qualified Educational Psychologists (T/EPs) using a culturally responsive consultation tool (CRCT). The CRCT is a digital interactive resource that was co-developed by me and a team of T/EPs to facilitate collaborative cultural exploration during consultation. A qualitative research design was employed, which reflects my role in developing the tool, but also the novel nature of using the tool as an intervention. The study is underpinned by a social constructivist epistemology and relativist ontology. Using a systems-psychodynamic lens, data were generated through focus groups with T/EPs at two time points. This was to capture the experiences of enacting CRP during participants' typical consultation practice, and the experiences of enacting CRP with the CRCT. Reflexive thematic analysis was used to analyse the data. The findings identified that TEPs were more likely to use the CRCT than EPs, suggesting that the training period represents an optimal window for embedding new tools into practice. The findings also identified that psychological and systemic barriers to CRP implementation were experienced by both groups, regardless of experience level. These findings informed a revised CRCT and the 4R framework to understand the CRP barriers within consultation. Aligning with its exploratory design, this research raises important questions about how culturally responsive consultation tools might be further developed, embedded, and evaluated within EP practice.

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1 Introduction

Educational Psychologists work in a profession that has long acknowledged the importance of culturally responsive practice, whilst struggling to enact it consistently. This study responds to that struggle and proposes a theoretical framework to understand it. The current study explores the use of a culturally responsive consultation tool (CRCT), that was co-created by me and a team of trainee and qualified Educational Psychologists (T/EPs). It explores practitioners' experiences of enacting culturally responsive practice (CRP). This study adopts a systems-psychodynamic lens, addressing both the systemic conditions that shape the landscape of CRP, and the psychodynamic processes that operate within consultation. This research explores how T/EPs enact culturally responsive consultation in their everyday consultation practice, what makes that enactment inconsistent, and what conditions support T/EPs in providing it consistently.

1.1 Race, Ethnicity, and Culture

The perception of race, and how it is subsequently defined, has been subject to debate. Bonilla-Silva (1997) defines race by biological similarities, such as skin colour, phenotype, hair texture, and facial features. However, this definition has been argued to be reductive with little scientifically valid classification (Lewontin & Levins, 1997). By applying a social lens, race can be defined as a socially constructed categorisation of individuals based on the perceived aesthetic similarities and traits (Omi & Winant, 2015; Urdan & Bruchmann, 2018). This research aligns with the idea that race is a form of socialisation, whereby individuals learn about the social meanings of race and their racial identity (Omi & Winant, 2015). The social stance of race aligns with this study, viewing race as a site of power and meaning-making. Understanding race as socially constructed, as opposed to biologically fixed, supports this study's exploration of minoritised voices being silenced within a culture of inconsistent CRP.

Ethnicity can refer to groups of people who share commonalities geographically and linguistically, but also have shared ancestry, heritage, culture, and customs (Markus, 2008). Generalisation stemming from commonalities within ethnic groups has led to stereotypical tropes based on appearance, history, religion, or traditions (Urdan & Bruchmann, 2018). Generalisations and stereotypes can become socially ingrained, leading to assumptions and decisions being made about, or for a group, without seeking knowledge from within the group (Fricker, 2007). This bears relevance to EP practice. The study explored how a lack of critical CRP can lead to unconscious bias or incorrect information about a family's cultural background being shared.

Culture is a complex and multidimensional construct (Urdan & Bruchmann, 2018). Whilst it can reference shared values, beliefs, and customs, it can also characterise defining moments within an era or movement, such as the 1960s cultural shift (Urdan and Bruchmann, 2018). Triandis (2002) considered culture as both objective and subjective, encompassing physical environments (objective), and the social norms, roles, beliefs, and traditions that shape the group behaviours (subjective) (Triandis, 2002). Urdan and Bruchmann (2018) further suggest that definitions of culture can overlap with race and ethnicity, such as reference to shared values, beliefs, and customs experienced by a group of people. Beyond these definitions, culture is also a dynamic, individual experience, resisting essentialised or static readings (Ouyang et al., 2025).

Drawing on these perspectives, this research views culture as shared customs, practices, and social norms which shape groups (Urdan & Bruchmann, 2018), and as something uniquely experienced by individuals within groups (Triandis, 2002). This dual understanding informs the study in two ways. First, it reinforces the risk of assumptions that are grounded in generalised or stereotypical readings of cultural experience. This research argues that assumptions may contribute to the absence of explicit CRP. Second, it enables

CRP itself to be understood as a practitioner culture with its own shared norms, practices, and emergent ways of working. Combined, these perspectives shape the study's objective to explore how culture is enacted by EPs in consultation.

1.1.1 Cultural Competence

Cultural Competence was first developed within the counselling profession (Sue et al., 1982). As a practice requirement, cultural competence was intended to support healthcare professionals to hold awareness, knowledge, and skills to work effectively across cultural contexts (Sue et al., 1992). The term cultural competence is more frequently used within US healthcare contexts, but in the UK, it is more commonly used to describe the engagement with CRP (Lekas et al., 2020).

Cross et al. (1989) extended the use of cultural competence to organisational and service contexts. They defined cultural competence as "a set of congruent behaviours, attitudes, and policies that come together in a system, agency or among professionals, and enable that system, agency or those professions to work effectively in cross-cultural situations" (Cross et al., 1989, p. 13). Cross et al.'s (1989) extension of cultural competence has led to its wide use within school psychology, where cultural competence is used to measure self-perceived confidence in cross-cultural work (Vega et al., 2018). Within EP practice, cultural competence has been represented as a dynamic, lifelong process utilising self-reflection, and shaped by the professional contexts that individuals operate within (Beattie et al., 2025).

Cultural competence has increasingly attracted criticism, as its underpinning assumption is that healthcare professionals can develop a complete understanding of cultures that differs from their own (Li et al., 2023). This assumption disregards the complexities of culture by claiming one can become culturally competent by acquiring facts about different

cultural groups (Li et al., 2023). The focus becomes on mastering information from different cultures, rather than working effectively in cross-cultural situations (Li et al., 2023). Studies on cultural competence efficacy demonstrated that training can leave practitioners feeling unprepared to facilitate race and culture discussions, causing discomfort and resistance in practice (Abrams & Gibson, 2007; Li et al., 2023).

Despite these criticisms, the term cultural competence is used in this research for a specific purpose. Rather than invoking the assumption that practitioners can acquire complete cultural knowledge (Sue et al., 1992), cultural competence is used here to describe practitioner confidence with engaging in cultural conversations. Cultural competence is used to refer to the relational and developmental skills that are used to navigate cultural difference, and the skills that can be built upon over time (Cross et al., 1989).

1.1.2 Cultural Humility

Cultural Humility was developed as an alternative to cultural competence in response to the critique of cultural competence focussing on the acquisition of cultural knowledge (Tervalon & Murray-Garcia, 1998). Tervalon and Murray-Garcia (1998) positioned cultural humility as a humbling practice, focussing on partnerships with, and advocacy for, diverse communities. The concept of cultural humility is characterised by a "lifelong commitment to self-evaluation and critique", that goes beyond personal assumptions and biases (Schiavo, 2023, p. 124; Kumugai & Lypson, as cited in Lee & Haskins, 2021). This makes it a primarily intrapersonal, within-self process. Whilst cultural humility encourages an interpersonal stance that is curious and other-oriented, its primary focus is on deepening one's own personal awareness, rather than driving interpersonal or systemic change (Stubbe, 2020).

The term cultural humility is referenced in the literature, but is not used explicitly to define an act of cultural introspection, self-reflection, or advocacy (Schiavo, 2023). The term has been criticised for a lack of clear direction, which can lead to practitioner overwhelm whilst trying to enact it (Danso, 2016). For example, cultural humility has been considered to lead to over-sensitivity and hesitation to address cross-cultural situations, which can lead to the avoidance of cultural exploration in practice (Danso, 2016). Cultural humility also has a focus on individual practice, rather than addressing systemic issues (Danso, 2016). This research addresses systemic and psychodynamic barriers to culturally responsive practice, and cultural humility cannot currently offer a unique contribution on this pursuit.

1.1.3 Culturally Responsive Practice

CRP evolved from Ladson-Billings (1995) work on culturally responsive pedagogy. It defines the practice of being open and actively adapting to the cultural norms and needs of others (Ladson-Billings, 1995). Where cultural competence is relatively static and knowledge-focused, CRP is understood as an active and fluid process, continually enacted through professional interactions (Sakata, 2021; Vega et al., 2018). Sakata (2024) proposes that CRP synthesises cultural competence and cultural humility, bringing together the knowledge and skills of the former, with the reflexive self-awareness of the latter.

Whilst CRP is intended to foster equity, critics note that without systemic change, it risks superficial or tokenistic application (Kehl et al., 2024). CRP has nonetheless been shown to encourage ownership over learning, promote social-emotional development, and support discussions on identity, culture and social justice (Calibara, 2025).

The terms ‘culturally responsive’, ‘cultural responsivity’, and ‘CRP’ are used throughout this research to describe how participants engage with culture in consultation. Cultural curiosity is also included, which is the active desire to learn about and appreciate

perspectives different from one's own (Loue & Nicholas, 2023). Also, cultural enquiry, describing the redistribution of power for individuals to define their own cultural values (Duxbury et al., 2015).

1.1.4 Socio-political Landscape

The United Kingdom is currently experiencing a period of significant socio-political unease. This is characterised by mounting cultural division, increasing political polarisation, and growing challenges to equity and diversity work (The State of Social Cohesion, 2026). The resurgence of the Black Lives Matter movement in 2020, following the murder of George Floyd, prompted renewed urgency around anti-racist practice across public services, including Educational Psychology (Lichwa et al., 2024). Similarly, there has been a rise in right-wing ideology, both in the UK and internationally. In the UK, this has manifested through anti-immigration rhetoric and a significant rise in racially and religious-based hate crime (The State of Social Cohesion, 2026). The rollback of diversity, equity, and inclusion (DEI) policies in the United States has had a knock-on effect in the UK (Siddique, 2025). For example, over half of UK businesses have reportedly changed their approach to DEI (Siddique, 2025). The ongoing conflict in the Middle East has contributed to a sharp rise in Antisemitism and Islamophobia across the country (Adams & Weale, 2023).

These events are not separate from school, as they enter the system and shape policy, relationships, and whether identity is celebrated or concealed (DfE, 2022). EPs working in this climate cannot be culturally neutral, they must engage in cultural conversations. It is within this context that developing anti-racist practice and addressing cultural complexities became a key priority for EPs (Lichwa et al., 2024). The urgency of this context is why the profession requires evidence-based tools to support consistent CRP.

1.1.5 Multiculturalism in Education

Education policy in the UK has increasingly focused on promoting multiculturalism in schools (Kirkham, 2016). This is driven by demographic change, with 38.4% children in primary schools and 37.8% students in secondary schools, representing ethnic minority populations; which has steadily increased each year (DfE, 2025). In addition, the EAL (English as an additional language) population more than doubled between 1997-2013, and now represents 21.4% of school-aged children in British schools (DfE, 2025; Strand & Lindorff, 2020). These statistics reflect a population whose cultural, linguistic, and experiential diversity requires responsiveness from the professionals who work with them.

1.1.6 Educational Disparities

A recent analysis recognised improving educational attainment for ethnic minority groups, with Black Caribbean, Black African, Pakistani, and Bangladeshi students achieving at, or above, the White British average (Strand & Lindorff, 2015; DfE, 2025). Nevertheless, significant disparities persist in disciplinary outcomes. In Autumn Term of 2024/25, Black Caribbean and Mixed White and Black Caribbean students were twice as likely to be permanently excluded as their White British peers, with a rate of 0.10 versus 0.05 (DfE, 2025). These groups also faced higher suspension rates (5.10 and 7.21 respectively) than White British students (4.97). Gypsy, Roma, and Traveller children similarly faced significant disciplinary disproportionality, with suspension rates of 15.16 and 11.75 respectively (DfE, 2025). This points to a pattern of cultural marginalisation and a failure to respond to the cultural contexts and lived experiences of children whose identities sit outside dominant norms.

Cultural inequalities are not evenly distributed across the education system, with ethnic disproportionality impacting how specific groups are represented statistically. Strand and Lindorff (2018) identified the overrepresentation of Black students with Special

Educational Needs (SEN) in England. They identified that Black Caribbean and Mixed White and Black Caribbean students were twice as likely to be identified with social, emotional, and mental health (SEMH) needs as White British students (Strand & Lindorff, 2018). They suggest that this may reflect inappropriate interpretations of cultural differences, low teacher expectations, and institutional racism (Strand & Lindorff, 2018).

Black SEN Mamas (SEN Mamas CIC), a UK advocacy and support organisation, examined the systemic barriers Black families face navigating special educational needs and disabilities (SEND) systems in the UK (Black SEN Mamas, 2025). Through their research, participants shared their experiences of systemic bias, which they suggested contributes to the recurrent misdiagnosis in Emotional and Behavioural Difficulties (EBD) categories. Black SEN Mamas identified the overrepresentation of young Black people with SEND, suggesting professionals may lack in their understanding of cultural nuance (Black SEN Mamas, 2025) This leads professionals to rely on their implicit bias and negative stereotypes to interpret 'challenging' behaviours. Misinterpreted behaviours and a lack of culturally competent interventions can increase the risk of school exclusion, academic marginalisation, and disengagement from education (Black SEN Mamas, 2025). There was a call from the organisations to address the lack of cultural competence within schools and local authorities (Black SEN Mamas, 2025). The parents represented in the study reported feeling alienated, frustrated, and undervalued by systemic failures and hoped to have a voice in shaping the policies that impact them (Black SEN Mamas, 2025).

The research by Black SEN Mamas demonstrates the importance of developing structural support for professionals to engage responsively, so families and CYP receive equitable CRP.

1.2 Governing Bodies

The regulatory bodies that govern EPs consider culture as an important component of professional practice. The Health and Care Professional Council (HCPC, 2023) requires professionals to treat service users with dignity, to respect diversity, and avoid discriminatory behaviour (HCPC, 2023, 5.1). The HCPC also requires professionals to challenge barriers to support and understand equality legislation that applies to their practice (HCPC, 2023, 5.2). This includes the Equality Act (2010), which provides a legal framework to protect individuals from discrimination (Equality and Human Rights Commission, 2018). Furthermore, the SEND Code of Practice (2015) highlights the importance for collaborative work to build trust within systems, such as between the home and school, and prevent discrimination (CoP, 2015).

The BPS Code of Ethics and Conduct states that EPs must demonstrate cultural competence by respecting individual and cultural differences (BPS, 2021, 3.1). Cultural competence is embedded in the principle of respect, requiring professionals to treat people fairly, acknowledge diversity, and avoid discriminatory practice (BPS, 2021, 3.1; HCPC, 2023, 5.7). The BPS guidance for doctoral accreditation mandates trainee EPs develop the ability to recognise, challenge and address discrimination and inequality during practice (BPS, 2025).

Whilst EPs are required to demonstrate their proficiency in CRP, the acquisition of CRP skills depends on the individual training programmes and can vary significantly (Ginn et al., 2022). Furthermore, the governing bodies do not offer much physical support, such as tools or frameworks, for practitioners to enact CRP, highlighting the mid-consultation gap (Sakata, 2021).

1.3 What are EPs Doing to Address Culture?

The question of how EPs address culture in practice is not new. Booker et al. (1989) raised concerns about systemic racism and the need for anti-racist practice within the profession. This longstanding issue was formally acknowledged by the Division of Education and Child Psychology (DECP) working group in 2006, who provided a performance checklist for promoting racial equality for EPSs. However, there was an absence of mandatory reporting requirements. Despite the performance checklist, Harrison and Atkinson (2025) acknowledge the ongoing challenges to attend to racism in practice internally and externally, as well as the challenge EPs face to challenging their own practice. They suggest EPs are well-placed to challenge racism, although they struggle with the confidence to do so in practice (Harrison & Atkinson, 2025). They suggest that anti-racist practice is emphasised as a personal responsibility, although some T/EPs may not feel comfortable or confident to challenge racism within the education system (Harrison & Atkinson, 2025).

The resurgence of the Black Lives Matter (BLM) movement in 2020 following the murder of George Floyd prompted renewed discussions within the EP profession (Lichwa et al., 2024). The Educational Psychology Race and Culture Forum (EPRCF) responded by hosting a webinar, 'The Whiteness of Educational Psychology in Britain', urging EP professionals to challenge their biases and address systemic racism within education systems (Williams, 2020). The Division of Educational and Child Psychology (DECP) working group was formed to address racial equity in EP practice (BPS, 2024).

The DECP pledged to "support services to further develop more rigorous and effective methods for monitoring anti-racist and inclusive practice" (BPS, 2024, p.3), highlighting the need for more research and support for EPs to enact inclusive practice. There are EP networks that seek to promote reflection and action, including the Black and Ethnic Minority Educational Psychology (BEEP) Network, and the Trainee Educational

Psychologists Initiative for Cultural Change (TEPICC). Currently, reflection spaces are reported to commonly support practitioners to understand their relationship to anti-racist practice, but more tangible resources are currently under-represented (Sakata, 2021).

Recent EP doctoral research has examined how culture is addressed in practice. Marriott (2023) found that EPs conceptualise 'culture' as complex and dynamic. Marriott (2023) highlighted systemic barriers to CRP and called for support for professional development in EP practice. Sakata's (2021) Delphi study found that whilst EPs reached consensus that CRP was fundamental to their practice, its development, however, was largely dependent on individual motivation rather than systemic provision. Participants also agreed that there was a lack of systemic support, and that the profession required more specific tools and frameworks to bridge the gap between policy and practice (Sakata, 2021). This is the gap that the CRCT seeks to address.

1.4 Consultation

Consultation represents a key opportunity for T/EPs to explore culture from the families' perspective. Consultation is considered a core function of EP practice in the UK (Scottish Executive, 2002). It is a collaborative and relational process, typically involving a T/EP, Special Educational Needs and Disabilities Coordinator (SENDCO) (possibly another school representative such as a teacher or teaching assistant), and a parent/carer. It is a structured, solution-focused conversation designed to create positive change for children, by supporting adults to develop actionable strategies to enhance academic success and social-emotional wellbeing (Royle & Atkinson, 2025). Consultation can create systemic change at individual, group, or school-wide level, and is characterised by a collaborative process in which each member's contribution is valued equally (Guiney et al., 2014).

Consultation enables T/EPs to learn about the strengths and needs of the child or young person (CYP) (Royle & Atkinson, 2025). Before consultation, SENDCOs send T/EPs a referral form, which is a document sharing key contextual information about a CYP, including age, spoken language, their home context, and school context (Royle & Atkinson, 2025). Consultation is often the sole opportunity for T/EPs to hear about the home context, making it vital for learning about a family's cultural experiences, potentially leading to valuable insights (Cline & Frederickson, 2015). Cultural exploration can contribute to the reduction of assumptions and encourage cultural exploration. This exploration can help to build a more holistic picture of the child's experiences and can foster a more comprehensive understanding of the child's needs (Cline & Frederickson, 2015).

The Relational Model of Consultation (RMC), developed by Kennedy and Lee (2021) at the Tavistock and Portman NHS Foundation Trust, provides the consultation framework underpinning this research. The RMC describes consultation as 'an approach to professional helping driven by the primacy of relationships between people…and systems' (Kennedy & Lee, 2021, p. 137). It is rooted in psychodynamic, attachment, and systemic thinking. The RMC encourages consultants to attend to the presence of intrapsychic, interpsychic, and group dynamics during consultation (Kennedy & Lee, 2021). This aligns with CRP, as it requires practitioners to attend to what is spoken and unspoken, visible, and invisible during consultation. For the purposes of this research, terminology derived from the RMC, including 'triad', 'consultant', 'consultee', and 'client' were used throughout to describe the relational dynamics of consultation (Kennedy & Lee, 2021). 'Triad' describes the relationship between the T/EP, SENDCO/teacher, and parent/carer. 'Consultant' refers to the trainee or qualified EP leading the consultation. Kennedy and Lee (2021) intended for the term 'consultee' to refer to parents/carers and SENDCOs/teachers. However, the term

'consultee' is exclusively used for parents/carers throughout the study for ease of reading this research. 'Client' refers to the child/young person (CYP) who is the subject of consultation.

1.4.1 Background on the Culturally Responsive Consultation Tool (CRCT)

This study seeks to explore the experiences of T/EPs implementing culturally responsive consultation, with a key focus on using the CRCT. The CRCT was co-created as part of the Promoting Racial Equity Task (PRET), which took place during my first year on the Professional EP Doctoral Training at the Tavistock & Portman NHS Foundation Trust. The PRET project was developed in response to guidance by the Division of Educational and Child Psychology (DECP, 2006) to promote racial equity (BPS, 2024). The PRET project is considered to highlight the complexity of working around racial equity, but was also designed for its importance in enacting change within services (Tobin et al., 2023). There were four trainees, including myself, and two qualified EPs who collaborated on the PRET project between January 2024-July 2024.

1.4.1.1 Stage One

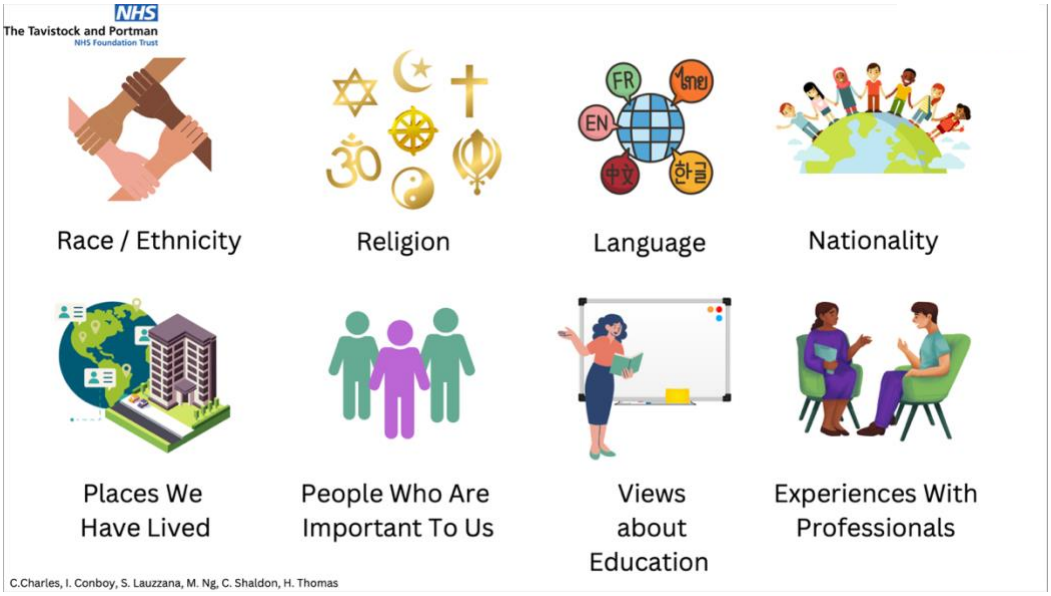
The idea for our PRET project stemmed from a previous PRET project that ran two years before, called the Palette. The Palette included a list of questions that consultants could ask during consultation. The Palette supported consultants to ask questions about racial and cultural experiences. It emphasised consultant-led cultural enquiry, meaning consultants chose questions they deemed relevant to the consultation. Whilst this project encouraged cultural curiosity, my team wanted to enhance the relational and collaborative aspects to CRP in consultation (Kennedy & Lee, 2021; Royle & Atkinson, 2025). My team looked for themes within the Palette and chose questions that could be adapted for our project. We created our set of questions and positioned them as 'prompt' questions to encourage consultee authority and collaboration, rather than continue the consultant-led format.

1.4.1.2 Stage Two

The team decided the consultation tool would be an A4 paper format (see Figure 1). We discussed a set of cards, a commonly used resource in EP practice, but decided a sheet format was more accessible and easily transportable. The tool was designed to be interactive, with the intention that consultees could select an area to reflect on. For this reason, we named the tool 'The Consultation Talking Tool', to showcase the interactive design. The list of questions was available for consultants to refer to on a separate page, with the intention of aiding the conversation if consultees found sharing their cultural experiences challenging. Race and ethnicity served as the umbrella concepts for the consultation tool. Despite the tool aiming to promote racial equity, we gradually realised its relevance in the field of CRP, addressing aspects of identity beyond race and ethnicity.

Figure 1

The Consultation Talking Tool



1.4.1.1 Stage Three

The team carefully selected eight areas that were deemed relevant for information gathering during school consultations. The tool comprised of eight items, carefully selected for their application to discussing race and ethnicity from a socio-political and sociocultural perspective. The areas on the tool were: race/ethnicity, religion, language, nationality, places we have lived, people who are important to us, views about education, and experiences with professionals. These items created an entry point for dynamic conversations that explored how identity intersects with educational experiences.

Two theoretical frameworks particularly informed the tool's development: the Social Graces (Burnham, 2012) and Ecological Systems Theory (Bronfenbrenner, 1979). Whilst the Social Graces initially encouraged exploration of multiple intersecting identities, the focus was refined toward race and ethnicity to align with the PRET project's aim; to promote racial equity. Nevertheless, the intersectional nature of identity remained central to the tool's design. Bronfenbrenner's (1979) Ecological Systems Theory provided a framework for understanding how the CRCT enabled exploration from immediate contexts (family, microsystem) to broader societal structures (culture, macrosystem).

1.4.1.2 Stage Four

The CRCT was initially trialled by the team during consultation. We then conducted focus groups with parents/carers from Bengali, Turkish, and Somali communities. These communities were selected as they formed the largest populations in the borough. Feedback from these groups were gathered informally as part of the PRET project. The feedback informed my initial desire to research the tool further. For example, one parent described how the cultural experiences from his community were not celebrated by the school, and viewed T/EPs as being well-positioned to redistribute power so cultural experiences could be heard.

Throughout the PRET process, the team also acknowledged the lack of tools and resources to support cultural exploration during consultation, which inspired this research.

1.4.1.3 Stage Five

This is the stage where my doctoral research began. To capture the tool's potential to encourage conversations about cultural experiences and identity that transcends race, I renamed the tool the CRCT. To increase its accessibility, I created a digital version to include the question prompts on the screen to enable consultees to take ownership of the conversation. This adaptation enables consultees to take their time to look through each item and share which aspects they would like to explore further (Figure 2). Digitalising the tool also enhances the interactivity (see Figure 3) and power redistribution the tool sought to promote (Fricker, 2007; Norman, 1988). The CRCT includes a language tab (Figure 4), although this design element was not developed until after the data collection phase of this doctoral research project.

Figure 2

Digital CRCT redesigned for this research.

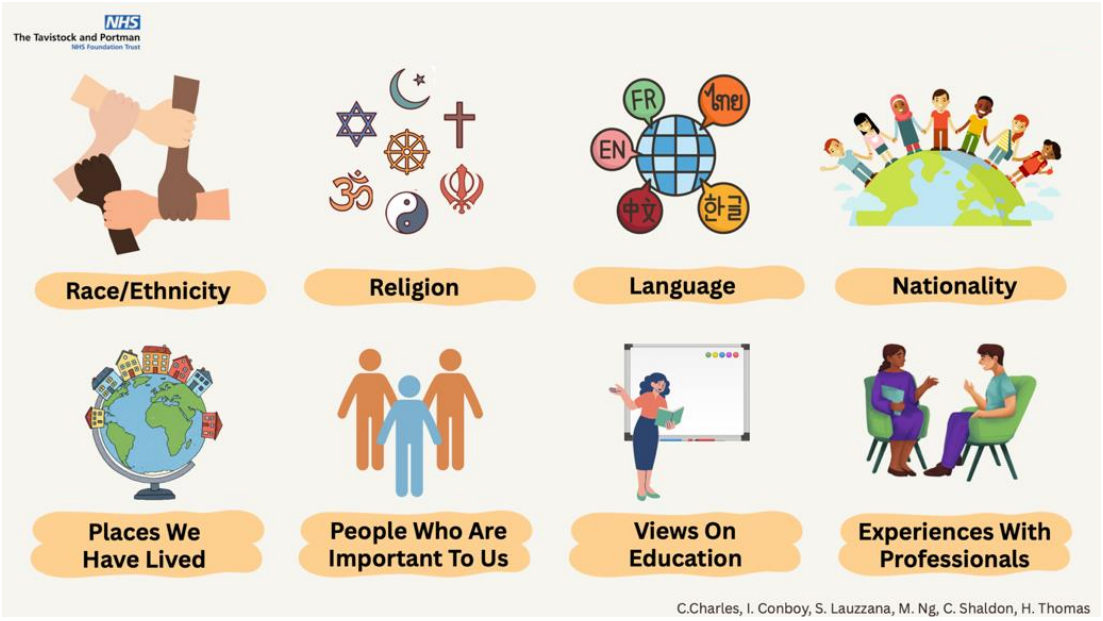


Figure 3

Interactive question prompts

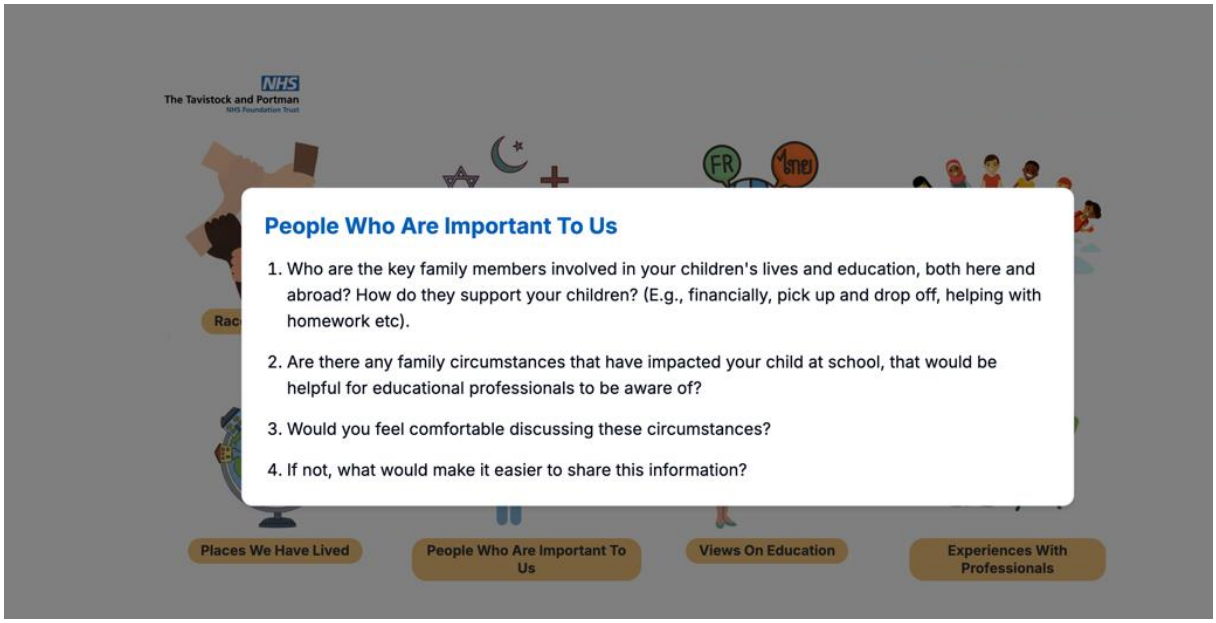
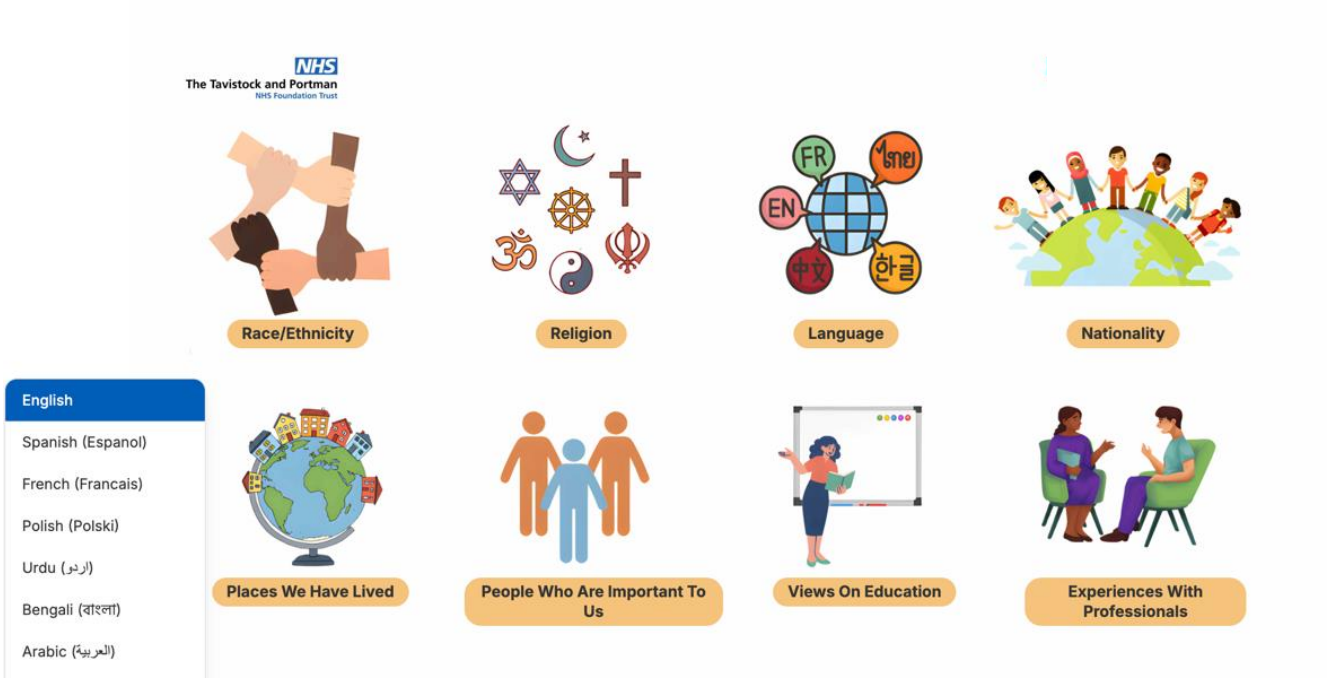


Figure 4

Language option added post data collection



1.4.2 Theoretical underpinnings of the CRCT

Three theoretical frameworks were particularly influential in shaping the design of the CRCT: the Social Graces (Burnham, 2012), Ecological Systems Theory (Bronfenbrenner, 1979), and Sociocultural Theory (Vygotsky, 1978).

1.4.2.1 Social Graces

The Social Graces framework was central to the tool's development. This framework encourages learners to critically explore matters of social difference, making it particularly relevant for understanding how practitioners may engage with the tool (Birdsey & Kustner, 2021). The Social Graces includes fifteen areas of social difference; gender, geography, race, religion, age, ability, appearance, class, culture, ethnicity, education, employment, sexuality, sexual orientation, and spirituality (Burnham, 2012). Whilst the tool's origins were rooted in promoting racial equity, the Social Graces framework guided the team to recognise the intersectional nature of the areas the tool had organically surfaced. This acknowledges that identity cannot be understood through a single lens alone (Burnham, 2012; Crenshaw, 1989). The Social Graces framework can provide a lens for exploring less visible aspects of identity that may shape how cultural situations are understood (Birdsey & Kustner, 2021).

1.4.2.2 Ecological Systems Theory

Bronfenbrenner's (1979) ecological systems theory explores the interplay of relationships within and between systems. The theory's nested systems – microsystem, mesosystem, exosystem, macrosystem, chronosystem- provide a framework for understanding how the CRCT can encourage the exploration of a CYP's immediate surroundings (i.e., family) to broader structures (i.e., culture). Culture is not experienced in a vacuum, it permeates different contexts, is understood through personal and systemic lenses,

and changes constantly (Rogoff, 2003). Bronfenbrenner's (1979) theory provides a structure to address inter-systemic relationships, and the CRCT provides a resource to understand this (Bronfenbrenner, 1979).

1.4.2.3 Sociocultural Theory

Central to Vygotsky's (1978) sociocultural theory is the concept of mediated learning. Mediated learning views tools and symbols as vehicles through which understanding is constructed collaboratively (Vygotsky, 1978). Learning and development progress through social interaction, shaped by the cultural and social contexts in which they occur (Vygotsky, 1978). The CRCT represents a mediation tool (Vygotsky, 1978), creating a structured space for cultural knowledge to be surfaced and shared within the consultation triad. This theoretical lens helps to explain how tool-mediated consultation can support practitioners to develop cultural responsiveness through relational, dialogic practice, rather than solely through individual knowledge acquisition.

1.5 Theoretical Foundations of My Research

Three theoretical frameworks were identified through iterative engagement with the data and literature to illuminate the relational, epistemic, and psychological processes occurring within consultation. Rupture-Repair theory (Safran & Muran, 2000) addresses the relational consequences of unacknowledged cultural difference. Epistemic injustice (Fricker, 2007) provides a framework for understanding how cultural testimony is silenced or validated. Transitional objects theory (Wastell, 1999) provides a lens for understanding how structured tools may support practitioners to navigate the anxiety that CRP can provoke.

1.5.1 Rupture-Repair

A rupture in a professional relationship can be defined as a tension or breakdown between a patient and therapist, originally conceptualised within a therapeutic context (Safran & Muran, 2000). These tensions can stem from one or both parties only being partially aware of a breakdown in understanding (Safran & Muran, 2000). This can lead to challenges within the working relationship and cause ineffective communication (Safran & Muran, 2000). Ruptures typically occur through disagreement about the goals of a task or the work, or through strains in the relational bond (Safran & Muran, 2000).

In the context of consultation, a rupture may occur when a consultee feels patronised, misunderstood, or unheard within the triad. This is pertinent where cultural difference is present and unacknowledged (Safran & Muran, 2000). A practitioner's failure to recognise or respond to the cultural context of a family may constitute a relational rupture, even when unintentional (Safran & Muran, 2000). Safran and Muran (2000) suggest that repair occurs when intervention is explicit and relational, addressed at the level of underlying meaning, rather than surface behaviour. Evidence supports the value of active repair when practitioners take direct steps to address weakened alliance (Landsford, 1986, as cited in Safran and Muran, 2000).

Rupture-repair offers an understanding of how explicit engagement with cultural factors in consultation can prevent or address relational strain. Power redistribution within the triad, ensuring that each member including the family, can draw on their lived experience and cultural knowledge of the child, is understood here as a mechanism of relational repair.

1.5.2 Epistemic Injustice

Epistemic injustice, as Fricker (2007) defines it, is a wrong done to someone specifically in their capacity as a knower. This study draws on two dimensions of Fricker's (2007) framework; testimonial injustice and epistemic justice. Testimonial injustice occurs

when a speaker receives diminished credibility due to identity prejudice, meaning their account or knowledge is not believed or valued because of who they are (Fricker, 2007). Diminished value may be based on class, race, gender, or other aspects of their identity (Fricker, 2007). Epistemic justice, in contrast, describes the redistribution of epistemic power that positions a speaker's experiences as credible and valued by the hearer (Fricker, 2007).

In the context of this research, testimonial injustice is used to describe the silencing of consultee or client cultural testimony through the absence of explicit CRP. This study takes the position that such silencing is not necessarily conscious, rather, the absence of structural support for practitioners leaves unconscious processes unchecked. This creates conditions in which testimonial injustice is exacerbated. Epistemic justice, in this research, occurs when practitioners explicitly create the conditions for CRP within consultation. The significance of consultee agency in this process is central to my expression, and understanding of, epistemic justice. It is the consultee's choice to engage with, or decline, an invitation to explore cultural factors. Declining the CRCT is still considered to enact epistemic redistribution, as the power to determine relevance of cultural testimony is situated within the consultee.

1.5.3 Transitional Objects

The tool was not designed with a psychodynamic lens in mind. However, I considered how tools and frameworks can support, primarily, trainee Educational Psychologists who are transitioning from university to placement. The concept of transitional objects has experienced many evolutions. Wastell (1999) considers how transitional objects can be applied to adults who may experience anxiety as they develop their practice. Wastell (1999) proposes that by providing appropriate transitional objects, psychological support can reduce defence mechanisms and task avoidance. Hirschhorn (1988) and Senge (1990) suggest frameworks and resources can pose as transitional objects by reducing the demands of a task,

whilst providing psychological support in the face of discomfort (Wastell, 1999). My study adopts this conceptualisation of transitional objects to frame how the CRCT may support T/EPs in consultation and wider practice spaces.

1.6 Research reflexivity and positionality

My positionality is shaped by my own experiences of intersectionality. As a Jewish, Mixed White and Black Caribbean woman, I have navigated predominantly White-dominated spaces across my professional life. I have personally experienced what it means to have cultural identity rendered invisible or be required to prove worth that was assumed to others. These experiences gave me an early and embodied understanding of testimonial injustice, before I had the language to name it.

Within EP training, my intersecting identities are less immediately visible within a diverse cohort. Yet in schools, I recognise the patterns of institutional racism that persist, despite the profession's internal efforts towards change. The same dynamics I have observed and navigated throughout my life, is now encountered from a practitioner's vantage point. It is from this position that I can observe both the genuine commitment of many practitioners to CRP, and the structural conditions that make that commitment difficult to enact consistently.

This accumulated experience explains my decision to continue developing the CRCT beyond the PRET project, and it is what this research is, at its core, driven by. This personal investment is a source of both energy and potential partiality, and I have worked throughout this study to distinguish between what the data shows and what I hoped it would show.

1.6.1.1 Aims

Goforth (2020) reflected on thirty years of culturally responsive consultation research, and identified the same gap as this study, situating the present research within a thirty-year

trajectory of unresolved need. The overall aim of this research is to explore the impact of making culturally responsive practice explicit in EP consultation. Rapple (2023) conceptualises impact as beneficial change to beliefs, behaviours, and practices. My research demonstrates this through several impact types, including cultural (changes in values and beliefs), attitudinal (change in attitudes), and understanding and awareness (advancing understanding of an issue among those who engage with the research) (Reed cited in Rapple, 2023). The CRCT is positioned as the vehicle through which this change is enacted. A theoretical framework was developed to support users to understand how the barriers to CRP operate at the individual and systemic levels, and what conditions support T/EPs to navigate them.

This study does not position the CRCT as a replacement for the ongoing learning and development required for CRP. Rather, it examines whether providing a structured framework can support practitioners in initiating and sustaining cultural conversations that might otherwise be avoided.

Central to this research is the redistribution of power to provide the infrastructure for consultees to share their experiences without relying on consultant initiation. To ensure meaningful engagement with the CRCT, participants received training that frames CRP as a dynamic, lifelong process requiring self-awareness, adaptability, and acceptance of difference (Diller & Moule, 2005 as cited in Johnson, 2019).

1.6.1.2 Research Questions

The research questions this study seeks to answer are:

- How do T/EPs experience the implementation of CRP in consultation?
- What helps to embed CRP in Educational Psychology?

- What are the experiences of using a culturally responsive consultation tool in Educational Psychology practice?

1.7 Roadmap of the Thesis

The following chapter provides a scoping review to explore the existing literature on culturally responsive consultation. The literature scopes the tools and frameworks available in the UK and US for educational and school psychologists to support CRP. The scoping review follows a hybrid approach to map the data, and studies are synthesised thematically. The methods chapter presents and details the epistemological and ontological position that shapes the research. The methods chapter also provides the structure for the data collection, reflexive thematic analysis. The findings chapter demonstrates the identification of barriers to enacting CRP, to the potential for redistributing power to support CRP. This chapter explores the use of the CRCT for consistent CRP during consultation. Finally, my discussion chapter reviews the findings in relation to the research questions. A systems-psychodynamic theoretical framework is introduced to address the gap to consistent CRP in consultation. The discussion chapter also provides guidance on the CRCT, as well as a framework to support practitioners to identify unconscious projections that can act as a barrier to CRP. The chapter closes with my dissemination strategy, limitations of the study, conclusion, and closing reflections.

2 Scoping Literature Review

2.1 Introduction to Literature Review

The purpose of this scoping review was to gain an understanding of the frameworks, tools and resources currently available to support in-the-moment culturally responsive consultation. Scoping reviews aim to provide a comprehensive understanding of emerging fields, mapping the nature and extent of research evidence currently available (Arksey & O'Malley., 2005; Levac et al., 2010). Building on Arksey & O'Malley's (2005) scoping review method that promotes broad evidence mapping, the literature review adopts a hybrid approach as outlined by Levac et al. (2010) and Peters et al. (2020). Consequently, this review moves beyond a descriptive summary, to provide a critical appraisal of the utility and enactment of CRP tools in consultation practice (Peters et al., 2020). This involves evaluating the theoretical robustness of identified frameworks and identifying the systemic implementation gap within mid-consultation practice.

2.2 Methodological Approach

Arksey and O'Malley (2005) proposed a six-stage framework for conducting scoping reviews. This was later developed by Levac et al. (2010), then refined by the Joanna Briggs Institute (JBI) (Peters et al., 2020). JBI guidance emphasise the need for a planned approach to scoping reviews, ensuring the knowledge synthesis is systematic, transparent and trustworthy to account for the broad nature without losing rigour (Peters et al., 2020). A systematic review was not deemed appropriate, as the literature is emergent in nature, and the field is not yet developed to support the standardised quality appraisal required (Peters et al., 2024). A scoping review, by contrast, is specifically suited to mapping the breadth and nature of evidence in emerging fields, identifying gaps, and generating questions for future research (Arksey & O'Malley, 2005).

Whilst the study is based on Arksey and O'Malley's (2005) six-stage framework, it integrates key refinements from Levac et al. (2010) and Peters et al. (2020) to address the complexities of the research topic. Whilst Arksey and O'Malley's (2005) framework provides the scaffold for this review, its original guidance on Stage Five (collating, summarising, and reporting findings) has been critiqued for lacking analytical depth (Levac et al., 2010). In its original form, the framework does not require the researcher to move beyond descriptive mapping, which is insufficient for the analytical objectives of this doctoral study. Levac et al.'s (2010) recommendations were used to address this critique and align the purpose statement - mapping and critically appraising evidence on culturally responsive consultation in Child, Community and Educational Psychology - with the review questions. I incorporated the fourth stage to include both a numerical summary and a narrative review. Whilst JBI's technical guidance was drawn on selectively throughout this review, I used a flow diagram for scoping reviews (PRISMA-ScR) to enable transparency (Peters et al., 2024; Tricco et al., 2018). JBI elements have been drawn upon selectively to enhance rigour in specific stages rather than applied as an overarching framework (see Table 1).

Whilst JBI guidance recommends data is charted by independent reviewers, this level of rigour suits large-scale systematic reviews and is excessive for doctoral scoping review conducted by a single researcher (Peters et al., 2024). The summary table in this study primarily follows Arksey and O'Malley's (2005) framework but incorporates refinements from Levac et al. (2010) and Peters et al. (2020).

Table 1 presents the framework developed for in this review. Each stage is mapped to the specific methodological choices made in this study, with reference to the frameworks that informed those choices. This transparency is consistent with the iterative and reflexive approach advocated by Levac et al. (2010).

Table 1

Scoping review framework

Stage	Purpose	Framework and Justification
Stage 1	Clarifying the Purpose and developing review question/s (Levac et al. (2010)	• I created a research question and sub questions in line with my purpose statement, ensuring they address the same aspect of the research problem. • Clear inclusion criteria were set in response to the alignment of purpose and research question.
Stage 2	Identifying Relevant Studies (Arksey & O'Malley., 2005)	• A multiple-source search strategy was carried out to achieve comprehensiveness. I used electronic databases, reference-harvesting, and hand-searches for published studies and reviews. • Breadth and comprehensiveness were considered within the capacity of this research. • Titles and abstracts were screened to create inclusion and exclusion criteria.
Stage 3	Study Selection and Extraction (Peters et al., 2020)	• I created a data extraction/summary table to capture key details, such as author, year, population, and specific outcomes related to my research question.

		• I used a PRISMA-ScR flow diagram to show the flow of included studies.
Stage 4	Collating, Summarising, and Reporting (Arksey & O'Malley, 2005; Levac et al., 2010)	<u>Numerical (mapping) summary</u> • I stated the total number of studies included after inclusion and exclusion criteria were established. • The study characteristics were presented. This includes the year of publication, geographic locations, and study design. • Contextual data was included, such as the type of participant or the setting. <u>Narrative Review</u> • An inductive approach was used to identify recurring patterns, conceptual arguments, and gaps across the included papers. • Findings were organised into two temporal themes reflecting when CRP occurs in relation to consultation.
Stage 5	Conclusion and Implications (Peters et al., 2020)	• I synthesised my evidence in relation to the purpose of the review. • I explored future implications related to the review question.

2.2.1 Stage 1: Clarifying the Purpose

The purpose of this scoping review was to map and critically appraise the available evidence regarding culturally responsive consultation in child, community and Educational Psychology. It was also designed to inform the development of future CRCT guidance and a practice framework, to bridge the identified implementation gap between theoretical models and active EP practice. The purpose directly informed development of the primary review question: 'What approaches currently exist to support culturally responsive EP consultation practice?' In line with Peter's et al (2020) guidance, a secondary question was developed to explore further how CRP was enacted in in-the-moment consultation: 'To what extent are CRP tools and frameworks applied consistently during consultation?'

Scoping review questions are designed to guide the development of inclusion criteria based on the population, concept and context (PCC) mnemonic (Peters et al., 2020). The PCC framework was used because it is well suited to qualitative research educational research, where setting and systemic factors shape practice, in this case, EP practice (Peters et al., 2020).

2.2.1.1 Population

The population for this review is UK Educational Psychologists. However, initial searches were unsuccessful in returning literature focussing on culturally responsive tools in EP practice. I had to reconsider the terminology used to define the role of psychologists working in learning settings for young people, and hence expanded the search terms to include 'school psychologist'. This widened the available literature and revealed studies and reviews conducted in both the United Kingdom (UK) and United States (US), enabling more scope to map the existing literature in the field. Whilst there is limited academic literature

available to distinguish between the defined roles and responsibilities of a UK Educational Psychologist and US School Psychologist (SP), the literature reveals considerable overlap of the roles. Some key differences include guiding bodies for practice, employment settings, and typical client-ethnography.

2.2.1.2 Concept

The core concept central to my scoping review was the use of formal and informal tools, frameworks, and resources to facilitate CRP in EP and SP contexts, including consultation, training and professional development. This encompassed theoretical models, such as the ADDRESSING framework, practical guides, and reflective prompts.

2.2.1.3 Context

The context for this scoping review is educational or school-based settings. This includes any collaborative problem-solving process involving the EP/SP, SENDCO/teacher, parent, or CYP. Studies were included regardless of geographic location, as the findings are applicable to the systemic and individual consultation models used in current EP practice.

2.2.2 Stage 2: Identifying relevant studies

2.2.2.1 Search Strategy

I conducted a series of systematic searches to capture the breadth of relevant literature. The literature searches were conducted between March and May 2025 in six databases: APA PsycInfo, PsycArticles, PsycExtra, Psychology and Behavioural Sciences Collection, Education Source, ERIC, and EBSCOhost. These databases were chosen based on their relevance to psychology and education. I conducted a final literature search to include

search terms I had not tried, such as ‘cultural humility’ as opposed to ‘culturally responsive’ to expand my literature base.

The search strategy included several parameters to ensure the relevance and quality of the studies. I selected papers solely written in English due to resource and time constraints, and the search dates were set to retrieve papers published between 2020-2025. The search date rationale links to the resurgence of BLM movement which ignited a renewed interest in CRP (Lichwa et al., 2024).

2.2.2.2 Search Process

Four searches were conducted across the databases using carefully selected search terms. The asterisk function was used to account for variations in spelling, for example “psycholog*” which may return ‘psychology’, ‘psychologist’, or ‘psychologists’. I used the PCC framework to develop my search terms to ensure the returned searches captured a focus on culturally responsive consultation with a focus on EPs (UK) and SPs (US) (Peters et al., 2020). For a full list of search terms, please see Appendix B. In total, four hundred and eighty-one items were returned at this stage.

2.2.2.3 Additional Searches

In addition to the systematic database searches, I emailed authors known to be writing on CRP within Educational Psychology, who identified two papers relevant to my review. Whilst this approach sits outside standard search methodology, it was employed as a supplementary strategy to capture research not accessible in academic databases. My supervision also suggested two additional relevant journal articles. Two papers were identified through supervision suggestions and one through direct author contact. In total, these supplementary searches produced three additional papers once screened for relevance.

2.2.3 Stage 3: Study Selection and Extraction

2.2.3.1 Geographical Location

This review focuses on the experiences of EPs and SPs using culturally responsive tools and frameworks during consultation practice. The inclusion of US studies focussing on SP practice was considered for the applicability in a UK context. Furthermore, consultation practice in the US follows a similar triadic structure with a consultant, school and home representative, which transfers to a UK context.

2.2.3.2 Selection Process

Stage 3 focused on the rigorous selection and extraction of evidence. In this stage, the four hundred and eighty-one papers identified in the previous phase were subject to a multi-step screening process to ensure only the most relevant papers were included. Two papers included practice tools and frameworks designed for training, but were included for their focus on culturally responsive support for practitioners, with concepts applicable beyond training to consultation practice. Titles and abstracts were first screened against the PCC eligibility criteria, leading to the exclusion of four hundred and fifty-six (see Table 2).

Table 2

Inclusion and exclusion criteria for scoping review

Criteria	Inclusion	Exclusion
Population	Studies that included 'educational' or 'school' psychologists. EP or SPs working in a triadic relationship with a focus on CRP. EPs or SPs exploring consultation, or relevant, practice with a focus on CRP.	Studies that do not focus on EP or SP practice. Studies that did not focus on EP and SP CRP practice in the helping relationship.
Concept	Research exploring EP and SP use of CR tools and frameworks. CR tools and frameworks that are conceptual, yet applicable to the research aims.	Research that did not address CR tools or frameworks. CR tools and frameworks that are not intended for EP/SP practice.
Context	Papers written within a UK or us EP/SP context. EP/SP work in educational settings.	Papers outside a UK/US context CRP work that did not focus on consultation or training settings.

Twenty-five full-text articles were retrieved and critically assessed for their relevance, for example whether they focused on culturally responsive EP practice or Anti-Racism in

consultation. At this stage, I excluded fourteen papers. One further paper was excluded on closer reading as insufficient relevance was confirmed, resulting in a final database inclusion of ten papers, supplemented by three papers identified through supplementary routes, totalling thirteen.

Data were reported via the Preferred Reporting Items for Systematic Reviews and Meta-Analyses- Scoping Review (PRISMA-ScR) framework (Tricco et al., 2018) to ensure methodological consistency and transparency during selection (see Appendix C).

2.3 Data extraction

Data were charted using a summary table developed in line with Arksey and O'Malley's (2005) framework and refined by Levac et al.'s (2010) recommendations (see Table 3). The table captured key study characteristics including author, year, country, sample, methodology, focus, and main findings. This enabled systematic comparison across the thirteen included papers. In accordance with JBI guidance, the charting process was iterative, with the extraction template refined as familiarity with the literature developed (Peters et al., 2020).

The findings under the two descriptive themes, 'Pre and Post Consultation Reflection and Preparation' and 'Mid-Consultation Enactment of CRP' were organised according to the temporal phases of CRP for consultation practice. The analytical insight, generated through synthesis across both themes, is presented in the gap discussion, and identifies a structural absence of mid-consultation support in the current evidence base.

2.3.1 Stage 4: Collating, Summarising, and Reporting

In accordance with the hybrid framework, Stage 4 collated, summarised, and reported the data (Arksey & O'Malley, 2005; Levac et al., 2010). This phase involves a dual-step

analysis; a numerical summary of the thirteen included papers to map the breadth of the field, followed by a narrative review of the findings.

2.3.1.1 Overview of included studies

The thirteen papers comprised both empirical studies (n=8) and non-empirical papers (n=5). The empirical studies were largely qualitative based on qualitative interviews (n=3), focus groups (n=2), qualitative case studies involving practitioner reflection (n=1), a Delphi study (n=1), and quantitative scale (n=1). These empirical studies provided evidence-based findings on culturally responsive consultation, with qualitative sample sizes ranging from nine to twenty-three participants, and a total of eighty-three participants for quantitative studies. The non-empirical papers, such as Pham et al. (2022), contributed valuable theoretical frameworks and identified systemic barriers, though they lacked direct empirical validation. The inclusion of both study types enabled a comprehensive mapping of both the evidence base and the theoretical landscape. Geographically, nine of the included papers are US-based, whilst four are UK-based.

The thirteen papers reveal a consistent pattern in how culturally responsive consultation has been conceptualised and supported to date. Most papers focus on the available tools and frameworks within the pre-consultation space, building practitioner awareness, developing reflective capacity, and scaffolding self-assessment processes outside of the consultation. A smaller number of papers attend to how consultation can be adapted to be more culturally responsive, but these tend to be contingent on practitioner skill, relational trust, or favourable systemic conditions. The mid-consultation space, the moment of active CRP, remains largely unsupported by structured, replicable tools.

2.3.1.1.1 Population

All but two of the included studies focus on qualified EPs and SPs in a consultant role. The remaining two papers consider the experiences of trainee EPs and SPs either directly or theoretically. For example, McGrory-Cooper et al. (2024) and Sayegh et al. (2023) focus on pre-service training in culturally responsive consultation and assessment, respectively. Whilst interactions with parents/carers and school staff are represented throughout the review, the focus remains on the consultant role and their strategies to enact CRP.

2.3.1.1.2 Study Focus

Six studies proposed CR tools and frameworks to reflect on CRP (Sakata, 2021; Sakata et al., 2024; Lichwa et al., 2024; Sayegh et al., 2023, McGrory-Cooper et al., 2024; Pham et al., 2022). Adaptations to multicultural consultation (MSC) were a primary focus for two US based studies. Gills et al. (2024) addressed MSC by reviewing how actionable it is in practice. McGrory-Cooper et al. (2024) aimed to present a model of teaching CRC to address the lack of training in the integration of MSC.

2.3.1.1.3 Methods of Data Collection

Included studies were methodologically varied, with two studies incorporating multiple means of data collection. Lichwa et al. (2024) utilised focus groups and author reflections, whilst Sakata et al. (2024) similarly used reflections and case studies. Ratheram & Kelly (2023) also conducted focus groups, whilst Sakata (2021) conducted a Delphi study. Sayegh et al. (2023) and Pham et al. (2022) reviewed existing literature on culturally responsive consultation. Gills et al. (2024) conducted a secondary analysis of semi-structured interview data from Parker et al. (2020). McGrory-Cooper et al. (2024) and Goforth (2020)

proposed conceptual review papers to present the gaps and contemporary needs in culturally responsive consultation. One quantitative study was included, using an adapted version of the Multicultural School Psychology Counselling Competency Scale (Clinkscales & Barrett, 2024).

2.3.1.1.4 Analytical Approaches of Included Studies

Five papers employed a narrative review approach to synthesise existing literature and explore key concepts (Goforth, 2020; Pham et al., 2022; Sayegh et al., 2023; Steed & Kranski, 2022; McGrory-Cooper et al., 2024). Sakata (2021) conducted a Delphi study which informed the creation of her Culturally Responsive Self-Reflective Framework. Sakata et al. (2024) used a comparative analysis to develop themes reflecting the relationships amongst part of the data. Parker et al. (2020), and Marriott (2023) conducted interviews. Clinkscales & Barrett (2024) used a multiple regression for the paper as part of a larger study on racial matching in school-based consultation.

2.3.1.1.5 Reflection Frameworks

During the screening process, it became evident that existing approaches to culturally responsive consultation fell into two primary descriptive themes: conceptual frameworks and practical practitioner tools. In addressing the review question - 'What approaches currently exist to support culturally responsive EP consultation practice?' - I identified how the field viewed these approaches through specific paradigms, systemic models, visual aids, and adapted assessment materials. The reflection frameworks identified during screening were predominantly designed to support individual practitioner self-reflection, rather than in-the-moment cultural enquiry within the consultation triad. This positioned CRP as a practitioner-oriented process of preparation, rather than a relational, in-consultation practice. The

narrative review examined this distinction by exploring when frameworks were designed, in what context, and their empirical grounding or theoretically basis to identify availability.

Table 3

Summary of the scoping review literature

Number	Author, Year and Country	Title	Sample	Methodology	Focus	Main Findings
1	E. Sakata, Z. Ahmed and E. N. Chinnéide 2024 UK	Promoting self-reflection and cultural attunement in culturally responsive consultation: the development of a tool for practice	EPs, trainee psychologists, and consultation supervisors	Case studies and personal reflections	Post consultation CRP reflection tool	The CRT prompted reflection on intrapersonal experiences and interactions.
2	H. Lichwa, C. Allen-Delpratt and H. Morris 2024 UK	The 'Promoting Racial Inclusion in Training' Reflective Framework (PRIT): Development of a tool to support EPs when designing and delivering training	EPS team and self-reflections	Focus group	Practitioner self-reflection tool for anti-racist practice	Reflections on whose responsibility it is to bring issues of race within systems.
3	Parker, Castillo, Sabnis, Daye & Hanson 2020 US	Culturally Responsive Consultation Among Practising School Psychologists	Fifteen practising school-based SPs	Two semi-structured interviews	SP experiences using the Multicultural School Consultation Model (MSC)	Cultural frameworks and adaptation models should be integrated into daily practice

4	E. Sakata 2021 UK	How can Educational Psychologists develop Culturally Responsive Practice? A Delphi Study	Twenty-three EPs in round one and eighteen EPs in round two	Delphi Study- two surveys Deductive thematic analysis	Guiding CRP self-reflection framework for EP practice	CR requires thinking outside of traditional frameworks and models of practice
5	A. N. Goforth 2020 US	A Challenge to Consultation Research and Practice: Examining the "Culture" in Culturally Responsive Consultation.	None	Conceptual Paper	To reflect on thirty years of CRP in SP practice	Ecological framework and sociocultural variables can push boundaries on how CRP is conceptualised
6	E. Ratheram & C. Kelly 2023 UK	An exploration of developing the practice of educational psychologists with minority cultural and linguistic populations in England: A dynamic journey of understanding and change	Single EPS using EPs, PEP, and AEPs	A participatory action research (AR) design, comprising four focus groups.	Self-reflection and professional development framework for working with minority cultural and linguistic (C&L) populations.	Cultural self-awareness and reflection can support fluency in C&L cases
7	Steed and Kranski 2022 US	Culturally Responsive Early Childhood Consultation	None	Conceptual Review Paper	Reduce racial bias in pre-schools	Need for SPs to model CRP and be comfortable sharing

						their identities in culturally responsive consultation.
8	Sayegh, Vivian, Heller, Kirk, and Kelly 2023 US	Racial, Cultural, and Social Injustice in Psychological Assessment: A Brief Review, Call to Action, and Resources to Help Reduce Inequities and Harm	None	Literature review	Identify gaps and contemporary needs in preservice school consultation training	There is work to be done to increase equity and inclusion in psychological assessment.
9	A. Clinkscales, and C. A. Barrett 2024 US	What's race got to do with it? Relationships between racial match and school psychologists' perceptions in school-based consultation.	Eighty-three predominantly (95%) white school psychologists through NASP	Quantitative study using adapted standardised scales.	Examine the perception of CYP need through racial matching	It is easier to identify CYP need in diverse triads compared to all-White triads.
10	Marriott 2023 UK	An exploration into how Educational Psychologists (EPs) engage in culturally responsive practice through the consultative model of service delivery	Three senior EPs and six main grade EPs	Semi-structured interviews	How EPs conceptualise and respond to culture within the consultative model.	Reflexivity is important for CRP and the consultant must be guided by core values such an inclusion and anti-oppressive practice.

11	Gills, Castillo & Parker 2024 US	A Qualitative Analysis of School Psychologists' Consultation Paradigms and Their Approach to Culturally Responsive Consultation	Fifteen school psychologists	Secondary analysis of semi-structured interviews	Difference between eco-behavioural and medical model for CRP outcomes	Eco-behavioural approaches are most likely to evoke culturally responsive consultation.
12	Pham et al 2022 US	Dismantling Systemic Inequities in School Psychology: Cultural Humility as a Foundational Approach to Social Justice	None	Commentary	Reflect on using a cultural humility framework in SP practice	Systemic change is needed for CRP consistency across institutions.
13	McGrory-Cooper, Holmes, Kaiser, and Miranda 2024 US	Getting Comfortable with Being Uncomfortable: Approaches to Training in Culturally Relevant Consultation	None	Practice Model Paper	To present findings on SPs using Multicultural School Consultation (MSC)	CRC training can increase SP confidence in addressing cultural dynamics in consultation

2.3.2 Narrative Review

Following engagement with the included literature, an inductive approach was used to identify recurring patterns, conceptual arguments, and stated or implied limitations across the papers (Popay et al., 2006). My organisation of included studies by temporal phases was not pre-determined but emerged through the grouping of initial codes into related categories. This drew on principles of inductive thematic analysis adapted for narrative synthesis (Braun & Clarke, 2006). It was only during the latter stages of synthesis that two distinct temporal clusters emerged: frameworks and tools around pre-consultation and post-consultation, and those addressing mid-consultation enactment. The absence of structured, transferable mid-consultation support subsequently became the primary analytical finding across both themes. This structure was not finalised until after my data analysis, as I engaged in an iterative approach, returning to the literature following analysis. I reorganised the review considering the systemic gap in CRP enactment and the recognition that reflective culturally responsive practice is better established outside consultation, whilst mid-consultation support remains largely theoretical and inconsistently accessible. The two temporal clusters ultimately reflected the data, lending coherence between the analytical and theoretical aspects of the study.

By aligning this inductive process with the guidance of Levac et al. (2010), the review moved beyond descriptive mapping of the literature to generate new analytical insight. The analytical insight generated across both themes is presented in the gap discussion, where the findings are reviewed against the overarching purpose. It is situated within the broader field through Goforth's (2020) theorisation of the mid-consultation gap. This analytical insight ensured findings were critically interpreted in relation to the review's overarching purpose, to map and critically appraise evidence on culturally responsive consultation in Child, Community and Educational Psychology (Levac et al., 2010).

The two descriptive themes are: ‘Pre- and Post-Consultation Reflection and Preparation’; and: ‘Mid-Consultation Enactment of CRP’. Findings are reported study by study, with an analytical discussion addressing the gap throughout.

2.3.2.1 Reporting the findings

2.3.2.1.1 Theme 1: Pre and Post Consultation Reflection and Preparation

Seven papers addressed the development of CRP through structured self-reflection, training, and preparation that occurs outside consultation. These included empirically grounded tools developed through practitioner research (Lichwa et al., 2024; Ratheram & Kelly, 2023), conceptual frameworks derived from consensus methodology (Sakata, 2021; Sakata et al., 2024), and theoretical and training models drawing on existing literature (McGrory-Cooper et al., 2024; Pham et al., 2022; Sayegh et al., 2023). For example, Sakata et al. (2024) sought to enhance practitioner self-awareness of potential stereotypes and biases, whilst Sakata (2021) developed a guiding framework for EPs to reflect on cultural responsiveness. Lichwa et al., (2024) proposed a self-reflection framework for contracting, planning, and delivering training. Adaptations to MSC were a primary focus for two US-based studies. Gills et al. (2024) reviewed MSC’s practice actionability, whilst McGrory-Cooper et al. (2024) aimed to present a model for teaching culturally relevant consultation to address the lack of MSC training.

Whilst the papers in this theme represent the most substantial body of evidence in the review, the available tools and framework were oriented towards building EP awareness and reflective capacity before or after consultation. The papers did not address how to provide structured support during consultation. Included studies were critically appraised to assess the degree to which developing awareness and reflective capacity outside consultation translates

into changed practice within consultation. The evidence based largely leaves this unanswered.

Sakata (2021) Culturally Responsive Practice Self-Reflective Framework

Sakata's (2021) Delphi study represents one of the most methodologically rigorous contributions in this theme. By using a two-round consensus process with twenty-three EPs, Sakata (2021) produced a framework grounded in practitioner expertise, emerging from consensus rather than the application of existing theoretical models of practice. The eighty-two agreed components of CRP provide a comprehensive map of what culturally responsive EP practice involves, spanning intrapersonal development, interpersonal processes, relationship-building, and systemic considerations. The framework acknowledges hot spots, blind spots, and soft spots to attend to the unconscious, moving beyond surface-level competence checklists. Sakata (2021) also represents a significant contribution to UK-specific EP literature, explicitly acknowledging that prior to this study, no UK-based framework for CRP in the EP profession existed.

However, the framework's utility for changing practice in the mid-consultation space is limited by its design. It is structured as a self-reflection and professional development guide for practitioners to engage with over time in supervision or as part of ongoing CPD. The framework is theoretically coherent and practically useful for developing cultural awareness, but there is no evidence presented that using the framework can change what practitioners do during consultation. Whilst the framework is designed as a tool for self-reflection; practitioners may still struggle to enact CRP or respond to a culturally significant moment that arises during consultation.

Sakata et al. (2024) The Culturally Responsive Tool (CRT)

The CRT was developed to build on Sakata's (2021) framework, extending the focus from self-reflection to cultural attunement. This describes the active, relational process of attending to cultural dynamics as they emerge in professional encounters. The tool's theoretical underpinning is coherent, drawing on cultural constellations, the exploration of sameness and difference within the consultation triad, and the psychodynamic concepts of hot, blind, and soft spots. The CRT attends to both the intra and interpersonal aspects of the consultation relationship (Sakata et al., 2024). The authors acknowledge the challenge of accessing unconscious processes and feelings as they arise during consultation and position the CRT as a tool for supervision, not within consultation (Sakata et al., 2024).

The CRT was designed to support post-consultation reflection to help practitioners make sense of cultural moments after, rather than to support in-the-moment CRP. The CRT addresses the gap between developing awareness and enacting responsiveness, but its own design parameters locate it in the post-consultation space, rather than within consultation. To date, the tool has not undergone empirical testing regarding its effectiveness changing practitioner behaviour or improving outcomes for culturally diverse clients.

Lichwa et al. (2024) The 'Promoting Racial Inclusion in Training' (PRIT) Framework

The PRIT framework is one of two empirically grounded tools in this theme. It was developed through a focus group with an EPS team whose reflection on culturally responsive training practice directly informed the framework's content (Lichwa et al., 2024). The participatory design is a strength of the study, as the framework emerged from practitioners' own experiences, giving it the ecological validity, that theoretical models lack. The framework's attention to intra and interpersonal reflection, racial equity, and managing

emotive topics reflects the complexity of delivering culturally responsive training in a profession that remains predominantly white and middle class.

The PRIT framework's scope is linked to training delivery, which limits its direct applicability to the review question. However, it supports practitioners to prepare for discussion about race and culture, but does not address their responses to cultural dynamics when they arise in a consultation with a teacher or parent/carer. A further limitation is that the effectiveness of the framework has not been evaluated, leading to a lack of evidence to whether practitioners who use the PRIT deliver more culturally responsive training. The focus group methodology, whilst appropriate for tool development, captures what practitioners think about race and training, not what they do differently as a result.

Ratheram & Kelly (2023) Supporting Reflection and Professional Development

Ratheram & Kelly (2023) provide the most directly relevant empirically grounded contribution in this theme, using a participatory action research design comprising of four focus groups with nine EPs from a single EPS. The methodology is appropriate to the research aims, and the participatory approach aligns with the values of CRP, rather than researching EPs as subjects. The design positions them as co-investigators of their own developing practice. The findings provide a rich description of EPs who acknowledge the emotional and cognitive labour of maintaining cultural awareness in practice, and the importance of safe spaces for reflective conversations.

The study demonstrates that EPs value reflection on CRP, but does not demonstrate that engaging in such reflection changes what they do during consultation. In other words, the gap between reflection and enactment is addressed theoretically, but the authors do not fill it with practical resources. Whilst they do recommend a practical tool, such as a prompt sheet,

to identify what can support in-the-moment consultation practice, no evidence is presented to support its effectiveness.

McGrory-Cooper et al. (2024) Training Model for Culturally Relevant Consultation

McGrory-Cooper et al. (2024) present the most comprehensive pre-consultation training model included in the review. It draws on Joyce and Showers' (2002) professional development framework to propose a staged approach to building culturally relevant consultation competencies in trainee school psychologists. The model addresses awareness, conceptual knowledge, skill, acquisition, skill application, and ongoing self-assessment. The authors use role-play with scripts, and multicultural case analysis to reflect a genuine attempt to move towards active CRP skill development.

However, the training model has several limitations. The model is a training framework to develop competencies in trainees before they enter practice, rather than to support EPs during consultation. The evidence for the model is also anecdotal based on self-report data from the authors' own courses. Therefore, there is no formal evaluation to demonstrate the efficacy of the model. The study in part, addresses the gap I seek to address, which is the scaffolded preparation for CRP before consultation, but the lack of support during consultation.

Sayegh et al. (2023) ADDRESSING Framework for Culturally Responsive Assessment

Sayegh et al. (2023) propose the ADDRESSING framework as an actionable structure for integrating diversity, equity, inclusion, and justice (DEIJ) in psychological assessment, including clinical interviewing. The framework's attention to the intersecting dimensions of cultural identity span age, disability, religion, ethnicity, socioeconomic status, sexual orientation, indigenous heritage, national origin, and gender. This intersectional approach

moves beyond simplistic race-based categorisation. For EPs who practice consultation and conduct assessments frequently, the framework provides a structured means of examining their own assumptions and the systemic biases embedded in assessment tools.

Whilst assessment is adjacent to consultation, the ADDRESSING framework's primary function is preparatory, and designed to support practitioners to examine biases before engaging with clients. The tool does not address how practitioners respond to cultural dynamics as they emerge, however. The paper is positioned as a call to action and a resource guide rather than an evaluated practice tool. There is no empirical evidence of the framework's effectiveness in reducing assessment bias or improving outcomes for culturally diverse clients. It is categorised in this descriptive theme because its primary analytical function is to inform and prepare practitioners, but its contribution to mid-consultation enactment is limited.

Pham et al. (2022) Cultural Humility as a Foundation for Social Justice

Pham et al. (2022) propose a cultural humility framework as a foundational orientation for school psychology practice. This expands Goforth's (2016) model to incorporate five domains for cultural humility: openness and critical reflexivity, understanding and transforming power and privilege, social justice advocacy, alliance building, and relational empowerment. The framework's theoretical contribution supports practitioners to acknowledge cultural responsiveness as an ongoing process of self-examination and relational attentiveness, rather than a fixed endpoint of knowledge acquisition. This distinction is important and aligns with the psychodynamic and systemic commitments that underpin the present study.

As a practice framework, however, cultural humility functions at the level of orientation and disposition rather than enactment. The framework tells practitioners how they

should be open, reflexive, and aware of power, without specifying what to do when a culturally significant moment arises during consultation. For example, if a teacher makes a racially reductive comment about a child's family, cultural humility as an approach is necessary, but also insufficient for knowing how to respond, as it lacks action. The authors acknowledge that the framework has not received formal appraisal and note the importance of institutional, as well as individual, change. Nevertheless, the gap between orientation and action remains, and is precisely the gap this review is seeking to document.

Appraisal Summary for Theme 1

The available pre and post consultation tools and frameworks range from theoretically sophisticated to empirically grounded. Together, they represent a meaningful body of work on developing practitioners' cultural awareness, self-reflective capacity, and professional orientation towards CRP. However, none of the tools have been empirically tested for their effectiveness in the consultation space and none were specifically designed to support practitioners during active consultation. The question of whether developing awareness before consultation translates into changed practice within it, is raised by several authors (Sakata et al., 2024; Pham et al., 2022). However, this remains largely unanswered.

2.3.2.2 Theme 2: Inside the Consultation Room: Mid-Consultation Enactment of CRP

Five papers examined how CRP was enacted or might have been enacted within the active consultation space. These included empirical studies drawing on semi-structured interviews with practising EPs and SPs (Parker et al., 2020; Marriott, 2023; Gills et al., 2024), a quantitative study examining racial dynamics within the consultation triad

(Clinkscales & Barrett, 2024), and a conceptual paper proposing culturally responsive strategies for early childhood consultation (Steed & Kranski, 2022). This theme contains studies most directly relevant to the review questions, but the evidence base remains limited. The papers in this theme describe what mid-consultation CRP looks like when it happens, but they do not address how to make it happen reliably or consistently.

Parker et al. (2020) Culturally Responsive Consultation Among Practicing School Psychologists

Parker et al (2020) provided the most directly relevant empirical evidence in this theme. They used semi-structured interviews with fifteen school psychologists to identify strategies to address cultural dynamics during consultation. The five themes that emerged - involving others, educating consultees, demonstrating support, engaging in ongoing learning, and navigating contextual and power influences - were practitioner-generated accounts of adaptive consultation practice. The study described what culturally responsive consultation could look like when experienced practitioners attempt it. The ecological validity of interview methodology with practising professionals gave the findings a grounded quality that theoretical models lack.

However, the fifteen participants were recruited on the basis of self-reported use of culturally responsive strategies. This introduced selection bias, as the study captured CRP as practiced by those already motivated and skilled to enact CRP, not wholly representing the field of SPs. The study also identified specific strategies, but did not evaluate whether those strategies produced different outcomes for the children, families, and teachers at the centre of the consultation triad. Practitioners reported adapting their practice, but there was no data to show whether these improved outcomes for culturally diverse clients. Furthermore, identifying contextual and power influences as a barrier indicated that despite individual skill

or intent, conditions that limited CRP enactment could still be encountered. Mid-consultation enactment of CRP is shaped by systemic factors outside of individual control, a finding that suggests that practitioner skill or motivation alone is insufficient to address the gap.

Marriott (2023) Culturally Responsive Practice Through the Consultative Model

Marriott (2023) provided UK-specific empirical evidence based on semi-structured interviews with nine EPs. Marriott (2023) explored how EPs conceptualise and respond to culture within the consultative model of service delivery. The study contributes to an underrepresented area of UK EP literature. The findings resonate with the broader field of EPs who engage in personal reflection and collaborative work to enact CRP in consultation. The findings suggest a process of shifting consultation practice to better meet the needs of specific school and family contexts.

The study, like Parker et al. (2020), included participants who appear relatively motivated to enact CRP during consultation, which was not wholly representative of EPs. The study identified that collaboration and adaptation was possible and valued, but did not specify how this venture could be supported. The findings remain at the level of orientation and attitude rather than providing a framework that a less experienced or less culturally confident practitioner could follow. This distinction aligns with this review's documentation; CRP as a disposition held by some practitioners, versus CRP as a practice supported by transferable resources and the right conditions.

Gills et al. (2024) Consultation Paradigms and CRP

Gills et al. (2024) conducted a secondary analysis of Parker et al.'s (2020) interview data of fifteen school psychologists using the MSC model. The paper examined how the

consultation paradigm that practitioners operated within shaped their engagement with cultural factors during consultation. For example, practitioners operating within an ecological model were more likely to attend to cultural dynamics, gather culture-specific information, and engage collaboratively with families. Practitioners that used a medical model tended to locate difficulty within the child and engage less with cultural context. This suggests that consultation frameworks are not culturally neutral, as some frameworks facilitate CRP, whilst others may hinder it. If mid-consultation CRP is partly a function of which consultation models are used, enhancing culturally responsive consultation may require systemic change in how EPSs conceptualise and deliver consultation, beyond individual practitioner development. This sits beyond the reach of any individual practitioner-facing tool, making this a systemic barrier.

Clinkscales & Barrett (2024) Racial Matching in School-Based Consultation

Clinkscales and Barrett (2024) provided the only quantitative study in this review, examining how racially matching members of the consultation triad affects consultant perceptions and consultation processes. The study's design used adapted standardised scales with eighty-three school psychologists. The study is methodologically significant as the first to quantitatively examine how consultants' own representations of student problems vary based on the racial composition of the triad. The study found White consultants were less likely to identify the presenting concern when there was a racially matched White teacher and White student. Furthermore, White consultants perceived the student-teacher relationship as stronger when both teacher and student were White, compared to Black. The findings also revealed that consultants were more likely to identify the presenting need if a child was Black. Critically, self-reported cultural competence was not associated with any of the representation variables.

However, the study did not include a measure of whether racially matched or mismatched triads produce better outcome for children. Critically, the sample was predominantly white (95%) which raises questions about whether the findings reflected the experience of consultants from the global majority. Most importantly, for this review, racial matching was not an element that individual practitioners could control or deploy in the consultation, it was a systemic and staffing-level variable. Knowing racial match affects consultation dynamics does not provide practitioners with a means of responding more culturally responsively in mismatched triads; the most common scenario encountered.

Steed & Kranski (2022) Culturally Responsive Early Childhood Consultation

Steed and Kranski's (2022) conceptual paper proposed how culturally responsive consultation might be used to address racially disproportionate discipline against Black children compared to White children in early childhood settings. This review paper of the existing evidence provided a description of culturally responsive strategies enacted during consultation. This included reflective questioning, soft confrontation, guided reflection, and the use of the Jones Intentional Multicultural Interview Schedule (JIMIS). The paper cited evidence that early childhood consultation using a culturally responsive lens reduced teachers' use of racially disproportionate discipline, improved teacher self-efficacy, and cultural sensitivity. Their synthesis of existing research suggests the approach they propose may produce meaningful outcomes for CYP.

However, the proposed strategies have no empirical evidence of effectiveness as the paper acknowledges that no comprehensive model of culturally responsive early childhood consultation currently exist. Furthermore, the strategies described were drawn from existing literature and proposed as aspirational rather than evaluated. The paper also foregrounds the conditions under which CRP is most effective, including consultant expertise in cultural

diversity, racial matching between consultant and child, and a trusting relationship between consultant and teacher. This paper provided strategies to understand what culturally responsive early childhood consultation could look like in ideal conditions, but not how to enact it across contexts. The paper illustrated the aspirations for mid-consultation CRP, but lacked an evidence base. Therefore, it cannot demonstrate whether the aspiration for mid-consultation CRP is achievable through the strategies proposed.

Appraisal Summary for Theme 2

The evidence from the five papers in this theme most directly answer my review question, but were also more evidentially limited than Theme 1. The empirical studies provided some evidence of practitioner-generated accounts on whether adaptive strategies improved outcomes for culturally diverse children and families. The one quantitative study measured perceptions, rather than outcomes and identified a structural variable, racial matching, that practitioners cannot control. The conceptual paper described aspirational strategies without an evidence base. Together, the papers in this theme document that CRP during consultation is possible, if practiced by motivated and experienced practitioners. CRP is also suggested to be shaped by systemic factors as much as individual skill. The evidence lacks a transferable, structured mechanism which practitioners can use to enact in-the-moment CRP, regardless of experience level, triad cultural dynamics, or contextual constraints.

2.3.3 Gap in the Literature: The Unanswered Question

The narrative review generated analytical insight beyond individual description. I identified evidence across both themes that converged into a single finding. Theme 1 demonstrated that the field has invested substantially in building practitioner awareness and

reflective capacity outside the consultation space. However, the findings did not demonstrate whether this translates into CRP support within it. Theme 2 demonstrated that mid-consultation CRP is practiced by motivated and skilled individuals, but is unsupported by structured, transferable tools. CRP is shaped by systemic conditions outside of practitioner control. The convergence of these findings from pre/post-consultation preparation and mid-consultation enactment generated a gap between knowing CRP matters, and being structurally supported to enact it. The findings of Goforth (2020) serve to explicitly theorise the mid-consultation gap identified in this review.

Goforth (2020) reflected on thirty years of culturally responsive consultation research and identified the same gap as this study. Goforth (2020) acknowledges the field has theorised cultural responsiveness comprehensively without translating that theory into concrete, in-the-moment support that practitioners need during consultation. Goforth (2020) argues that research has tended to focus on broad cultural competencies such as awareness, knowledge, and skills, without adequately attending to how these translate into active consultation practice. Her challenge to researchers and practitioners is to reconceptualise indirect service delivery, and to question whether the Western notion of 'helping' embedded in consultation frameworks is adequate for culturally diverse consultees and clients. Goforth (2020) urges practitioners to move beyond essentialism and towards intersectional and ecological understandings of culture. Goforth (2020) named a structural failure of what she deems a 'mature field', to move from theory to practice. This is as applicable to the UK-EP context as the US-SP context that the literature primarily draws on.

2.4 Stage 5: Conclusion and Implications

2.4.1 Conclusion

The thirteen papers included in this review highlight a consistent and analytically significant pattern. The literature has invested substantially in supporting practitioners to

develop cultural awareness, self-reflective capacity, and theoretical orientation towards CRP, all of which occurs outside the consultation space. A smaller but meaningful body of empirical work documented how experienced and motivated practitioners adapt their practice to address cultural dynamics as they arise. What the literature has not produced is a structured, transferable, and empirically evaluated support for CRP during consultation. The pre-consultation space is better-theorised, but its transfer to practice is lacking. The mid-consultation space is documented through practitioner accounts, but unsupported by practice tools. The gap between awareness and enactment, between knowing that CRP is important and having a structure to support in-the-moment CRP, is the defining absence in the current evidence base. In response to the secondary review question - 'To what extent are CRP tools and frameworks applied consistently during consultation' - the review concludes that the current evidence base is weak and lacking in tools. Where they do exist, they are either untested for their effect on consultation, reliant on practitioner confidence and skill, or constrained by systemic factors outside individual control. Whether existing tools and frameworks are effective in improving outcomes for culturally diverse clients remains beyond the scope of this review and represents a question for future empirical investigation.

The gap identified in this review has significant resonance in a UK context. Whilst US literature offers most empirical evidence on culturally responsive consultation, the five UK-based papers in this review - Sakata (2021), Sakata et al. (2024), Lichwa et al. (2024), Ratheram & Kelly (2023), and Marriott (2023) - are largely located in the pre-consultation space. The UK papers mostly focus on self-reflection and professional development, rather than active consultation tools. The UK-EP profession has produced no empirically evaluated mid-consultation CRP structure. Consequently, for qualified UK EPs the gap is not merely a theoretical absence, but a practical one, experienced in every consultation where cultural dynamics arise and no structured support exists for navigating them. This gap directly

informs the research questions and provides justification for both the development and empirical evaluation of the CRCT as a practice-based intervention. The CRCT was co-created with EPs to address the identified absence, recognising that only building cultural awareness before consultation is insufficient without structured, portable support to enact it.

2.4.2 Implications

Whilst the review identified numerous theoretical models, it has highlighted a significant gap in transferable, in-the-moment tools. For EPs, the implication of this gap is an over-reliance on individual practitioner skill and motivation during consultation, rather than embedding culturally responsive tools. Future research must pivot from theorising cultural awareness towards the empirical evaluation of mid-consultation tools that support the enactment of CRP during consultation. The CRCT represents a response to this gap, addressing both the in-the-moment consultation support and addressing the assumption that CRP enactment is reliant on confidence and skill.

3 Methodology

This chapter sets out the methodological framework underpinning this study. It begins by situating the research within a relativist ontological and social constructivist epistemological position. The chapter will justify the selection of a qualitative methodology and focus group design. Next, the process of participant recruitment will be demonstrated, followed by details of the CRCT training process, and data collection process. I will then describe the six-phase reflexive thematic analysis used to generate findings. The chapter concludes with a discussion of research quality and ethical considerations.

3.1 Research aims and Purpose

This research aims to explore the experiences of T/EPs using the CRCT to facilitate conversations about race, culture, and other aspects of cultural identity. Given the limited empirical research on culturally responsive consultation tools in EP practice, this qualitative study takes an exploratory approach to understand a novel practice intervention. Explorative research investigates phenomena that have not been studied in depth and seeks to gain a deeper understanding of phenomena (Elman et al., 2020). The research seeks to answer the following questions:

- How do T/EPs experience the implementation of CRP in consultation?
- What helps to embed culturally responsive practice in Educational Psychology?
- What are the experiences of using a culturally responsive consultation tool in Educational Psychology practice?

To address these questions, my research was designed to capture data at two points: prior to use of the CRCT (focus group one) and following use for one term (focus group two).

3.2 Research Positioning

3.2.1 Relativist Ontology

Ontological assumptions concern the nature of reality, with a broad distinction between realist and relativist positions (Poucher et al., 2019). A realist ontological position indicates a belief in an objective reality that exists independently of the researcher's knowledge (Poucher et al., 2019). A relativist ontological position rejects the idea of an objective, singular reality, and aligns with the assumption that there are multiple realities (Pretorius, 2024). These realities are shaped by human actions and individual sense-making, which suggests that reality is dependent on those interpreting it (Braun & Clarke, 2022). There is some fluidity to the relativist position, as the same phenomena can be researched from different perspectives, depending on the purpose and aims (Crotty, 2020). Braun and Clarke (2022) suggest a relativist ontology is most suited for research that interprets, questions, and analyses reality (Braun & Clarke, 2022).

The relativist position aligns with my research, which seeks to understand the reality of enacting CRP, rather than the reality of CRP itself, which would shift the ontology towards a more realist or critical realist position (Pretorius, 2024). If I adopted a critical realist ontology, I would be positioning CRP as a phenomenon that can be observed and measured, although subject to personal experience (Bhaskar, 1978). However, this research is not studying the reality of CRP, but the reality of how it is incorporated into consultation practice. Relativism requires the researcher to be active in shaping the analysis, focusing on how language and meaning are constructed, rather than aiming for a singular truth (Braun & Clarke, 2022).

The empirical literature demonstrated that CRP is enacted differently across the profession, but is reliant on how practitioners' use tools to engage with race, culture, and identity in consultation. This is shaped by their own positionality, professional experience, and the specific contextual demands of their setting. This variability in enactment produces

multiple, situated realities rather than a single, objective account of what culturally responsive consultation looks like in practice. Therefore, my positionality is that there cannot be a fixed reality when exploring experiences of CRP across diverse practitioners and contexts. This research offers a theoretical account of the CRCT as one example of how the gap in CRP consistency might be addressed. I remained mindful that no single tool constitutes a universal solution, and that any response to the consistency gap must be responsive to local context, working relationship, and need.

3.2.2 Social Constructivist Epistemology

This study is epistemologically grounded in social constructivism. This position supports the idea that knowledge is actively constructed through social interaction, language, and cultural context (Detel, 2015). Social constructivism emphasises the role of social interaction for knowledge construction, such as between colleagues, reinforcing its usefulness for this study (Cobb, 2006). However, it also highlights how individuals construct new ideas or concepts based on their own knowledge and experiences (Cobb, 2006). This position aligned with my endeavour to explore how enacting CRP can be shaped by individual experiences, yet the consistency of enactment could be explored through co-constructed meaning. Knowledge in this sense is a relational, interpretive endeavour, shaped by each practitioner's identity, context, and the social interactions through which they develop professional knowledge (Pretorius, 2024).

I considered social constructionism for its emphasis on knowledge as constructed through social contexts (Pretorius, 2024). However, I seek to gain knowledge through individual sense-making and the co-construction of knowledge and social constructivism is most suited to this pursuit (Pretorius, 2024).

3.3 Research Design

3.3.1 Qualitative Methodological Approach

Qualitative research is suited to exploratory studies that seek to understand complex social phenomena where little prior research exists (Creswell, 2009). As the CRCT represents a novel intervention with no established empirical base, a qualitative approach enables the generation of rich, descriptive data that can illuminate both the practical application and subjective experiences of practitioners engaging with this tool (Lim, 2024). Unlike quantitative methodologies that measure predetermined variables and test hypotheses, qualitative enquiry allows for the discovery of unanticipated themes and exploration of meaning-making processes that naturally occur (Braun & Clarke, 2024).

Qualitative methodologies are fundamentally concerned with answering 'how' and 'why' questions rather than 'how many' or 'how much' (Merriam & Tisdell, 2016). This study seeks to understand how EPs use the CRCT during consultation, why certain aspects of the tool are experienced as beneficial or challenging, how the tool influences the dynamics of consultation relationships, and why practitioners make certain choices in their application of the tool. These questions cannot be adequately addressed through quantitative measures, as it would not capture the complexity of their professional experiences (Silverio et al., 2022).

The inherent flexibility of qualitative research is suited to under-researched phenomena (Creswell & Creswell, 2023). As the CRCT had no empirical research base at the time of this study, there were no established frameworks for understanding how practitioners might experience its use, what challenges they might encounter, or what benefits might emerge (Tenny et al., 2022). A hypothesis-testing approach would have been inappropriate and potentially limiting, as I would have been required to pre-determine what aspects of the participants' experiences were worth measuring (Tenny et al., 2022). Qualitative methodology's openness to emergent findings means that unexpected themes, challenges, and benefits can be surfaced and explored (Tenny et al., 2022). Finally, qualitative research

enables the generation of rich, contextual data that situates experiences within their broader professional, institutional, and socio-political contexts (Silverio et al., 2022).

3.4 Participants

3.4.1 EPS Service Context

This research was conducted within an outer London Educational Psychology Service serving a culturally and linguistically diverse population. Prior to the commencement of this research, the service began to engage with questions of cultural responsiveness at an organisational level. An anti-racist working group was already in place, reflecting a commitment to equity work beyond individual practice. Transcultural supervision had also been offered within the service, providing a structured space to recognise sameness and difference within professional relationships. This indicates that cultural dynamics in EP work were being attended to at a relational level. More recently, an explicit move to embed EDI reflections within team meetings has sought to make cultural responsiveness a more consistent feature of collective practice.

3.4.2 Inclusion/Exclusion Criteria

The research focused on qualified and trainee EPs working in a single local authority. Before participants were invited to join the study, I delivered a presentation to the EPS team so, at the point of participation, they were familiar with the CRCT (see Appendix D). Whilst participants from other local authorities were considered, the choice to include T/EPs from one local authority was based on the following factors:

- The chosen local authority is one of the most diverse boroughs in the country, affording participants ample opportunity to use the CRCT in consultation.
- I am on placement at the selected EPS and was granted permission to carry out my research there by the Principal Educational Psychologist (PEP).

- From an accessibility perspective, I was able to present the CRCT at a team meeting, subsequently organising focus groups via shared calendars.

Whilst there were opportunities to recruit participants from my university cohort who had previous experience using the tool, my research aimed to explore the experiences of enacting CRP before and after the tool's use. This meant that their participation would present challenges from a methodological perspective. If participants had been using the tool from the outset of their consultation practice, collecting the 'before' data would pose challenges. Therefore, the decision to focus on one Borough with no previous exposure to the tool was both a methodological and practical one.

3.4.3 Recruitment

There is no universally agreed participant size, but focus groups should be large enough to generate deep, rich, and varied data, whilst remaining small enough to enable all voices to be heard (Tang & Davis, 1995). Following ethical approval (see Appendix E), participants were recruited through convenience sampling. Convenience sampling is a form of nonprobability sampling where members of a target population are recruited (Etikan et al., 2016). Convenience sampling is typically associated with quantitative research due to its emphasis on generalisability. However, it is also appropriate for qualitative research with readily available participants from a homogenous group who share the characteristic of interest, in this case T/EPs from a single EPS with shared experience of the CRCT (Etikan et al., 2016).

Following the initial presentation at the team meeting, an invitation to participate (see Appendix F) and recruitment poster (see Appendix G) was shared via email to the EP team.

The two TEPs who joined post-training received training via Teams and were invited to participate.

Using a single EPS to recruit TEP participants presented challenges. I aimed to recruit three to six participants per focus group. At the time of initial recruitment, there were three TEPs (excluding myself), at the service. However, at the point of data collection, two TEPs transitioned to be newly qualified (NQEPs). I considered whether they should be transferred into the EP group ahead of FG1. However, the participants agreed to participate in the TEP group during their third year of training. Also, most of their consultation experience, up until that point, was as TEPs. These factors constituted their participation in the TEP group, despite their new NQEP status.

3.4.4 Sample

Five QEPs and five TEPs/NQEPs agreed to participate in the study, totalling ten participants. The QEP group included three senior EPs and two main grade EPs. Broad demographic data were not collected to preserve the anonymity of participants. However, participants were diverse, encompassing a range of cultural backgrounds, professional experiences, and career stages. At the point of participation, the T/EPs' experiences working in the borough spanned from one month to seven years. The diversity of the participant group, such as their cultural identities, professional experience, and career stage, was an analytic strength, enabling nuanced dialogue about CRP across different positionalities and practice contexts (Rodriguez et al., 2011). Demographic information was shared during the focus groups, and extracts with demographic information were analysed with participant consent (see Appendix H). I sought to present the extracts containing demographic information with anonymisation as a priority. For example, I used 'they' and 'them', rather than 'she/her, he/him'.

3.5 CRCT Training and Introduction

The CRCT training was designed for the purpose of this study. I delivered it during a 40-minute slot in a team meeting, and for 40 minutes online with the two new TEPs. The training aimed to establish a shared understanding of CRP consultation principles, contextualised to the borough's demographic profile. The training also positioned the CRCT within broader professional competencies and ethical obligations, as outlined in the HCPC Standards of Proficiency for Practitioner Psychologists. I included a case study exercise that enabled participants to practise applying the tool with colleagues, and concluded with a questions and answers session, alongside an invitation to participate in the research.

3.6 Data Collection

3.6.1 Focus Groups

Focus groups are a form of group interview comprised of small sets of people, centred around a topic of interest (Lauri, 2019). From a philosophical perspective, focus groups align coherently with the social constructivist epistemology underpinning my research. Whilst I did consider individual interviews, focus groups support this epistemological position by creating a space where participants actively construct understanding together by building on each other's contributions, challenge or affirm each other's perspectives, and collectively make sense of their experiences (Kitzinger, 1995). From this perspective, the group dynamic itself became part of the knowledge-generation process, as the participants' thinking evolved through their engagement with each other's viewpoints (Kitzinger, 1995). The co-construction of meaning through conversation mirrored the collaborative nature of consultation practice, whereby EPs work alongside consultees to develop a shared understanding of complex situations (Kennedy & Lee, 2021).

Focus groups are not without limitations, and several challenges required careful consideration. The risk of dominant voices overshadowing quieter participants was addressed

through active facilitation (Smithson, 2000). I used round-robin techniques, directly inviting quieter members to contribute, and attended to non-verbal cues (Smithson, 2000). Social conformity or groupthink, where participants align their views rather than articulating individual perspectives, was mitigated by explicitly normalising disagreement and using prompts such as: "Did anyone have a different experience?' (Sim, 1998).

Throughout the process, my reflexive diary (see Appendix I) provided a space to examine how my positioning as a co-creator may have shaped the data being generated (Olmos-Vega, 2022). My dual role as researcher and co-creator of the CRCT introduced the risk that participants might emphasise positive experiences over challenges (Bergen & Labonté, 2020). I managed this by framing honest and critical feedback as equally valuable at the outset of each group, actively seeking limitations through direct questioning (see Appendix J). The presence of professional peers provided a degree of accountability within the group dynamic, as participants were engaging with colleagues who had shared the same training (Kitzinger, 1995). However, I remained mindful that peer familiarity can also produce pressure towards consensus (Kitzinger, 1995).

3.6.2 Focus Group organisation

Focus groups were conducted separately with QEPs in one group, and TEPs/NQEPs in another. The first reason for separating the groups was the potential risk of trainee voices being silenced. Silencing may have occurred out of TEPs' fear of being perceived by QEPs, or from a perception that their experiences may not be as rich (Morgan, 1997). Second, I considered the breadth of practice contexts QEPs may discuss, and whether trainees would be able to contribute to the conversation. TEPs do not consistently work outside their main placement obligations, which could lead to less TEP input if the conversation developed past TEP placement exposure. Lastly, I considered whether trainees would be as open and honest

in front of senior EPs. For example, the presence of seniors may influence explicit self-censoring, or implicit fears of inadequacy (Kitzinger, 1995; Castanelli et al., 2021). Professional hierarchies are inherent to EP training, and trainees are frequently observed, evaluated, and supervised by qualified EPs, creating a potential for less honesty and a hesitance to reflect on uncertainty (Kitzinger, 1995). By creating separate spaces, the research accounted for these power dynamics, whilst ensuring experiences at different professional stages could be authentically explored.

3.6.3 Data collection at two-time points

To meet my research aims, to explore how T/EPs enact CRP during consultation, and to explore the impact of the CRCT on their practice, I decided to conduct focus groups at two time points. Following training on the CRCT, focus group one (FG1) was designed to collect baseline data on the participants' current experiences of culturally responsive consultation. Focus group two (FG2) was conducted four months (a school term) later, to provide sufficient opportunity for participants to use the tool.

FG1 explored participants' typical consultation practice. This included how, and when, they enacted CRP, what enablers and barriers they experienced, and what supports were available to help them engage with culturally responsive work. FG2 was designed to support participants to reflect on their direct experiences of using the CRCT over the preceding term, including any barriers encountered, adaptions made, and whether the tool had enabled a more intentional approach to CRP in consultation. Focus groups were conducted via MS Teams and lasted between 60 and 90 minutes. Focus group guides for both time points are included in Appendix K.

3.6.4 Responding to data collection challenges

Due to unforeseen circumstances, two participants from the trainee focus group were unavailable to participate in FG1. To enable their participation, I decided to conduct a joint interview. A joint interview offered the opportunity for the participants to reflect together, which can be useful when a topic, in this case CRP, may benefit from drawing on each other's knowledge and experiences (Polak & Green, 2016). I considered this an appropriate solution to this early challenge. The joint interview lasted 60 minutes.

Attrition is a recognised challenge in pre-post intervention studies, particularly where participation requires implementing a new practice tool within demanding professional contexts (Sidani & Braden, 2011). In this study, three participants (two NQEPs and one QEP) were unable to attend FG2 due to changed circumstances. The two NQEPs offered written reflections on their decision not to continue (see Appendix L). These accounts, whilst not analysed as primary data, were included as contextually relevant to understanding the barriers to tool adoption at early career stages. A further analytically significant development emerged in FG2. It became apparent that two QEPs and one TEP had not used the CRCT during the study period. Of the original ten participants, this meant that only four used the tool as intended. Rather than treating non-use as a methodological failure, accounts from participants who did not use the tool were retained within the analysis as contextually relevant. The decision to analyse all accounts, including treating accounts from participants who did not use the CRCT as equally valid data, was grounded in the reflexive thematic analysis framework (Braun & Clarke, 2022).

3.7 Data Analysis

The focus group and joint interview data were analysed using Reflexive Thematic Analysis (RTA) (Braun & Clarke, 2022). RTA is a flexible interpretative approach that helps the researcher actively construct themes from the data, making meaning through sustained

and reflexive engagement with participants' accounts (Braun & Clarke, 2022). RTA treats the researcher's subjectivity as a resource to support the generation of knowledge, with the codes and themes representing the researcher's interpretations. The goal of RTA is not to discover a pre-existing reality, but to construct a rich, nuanced, and theoretically coherent account of meaning (Byrne, 2021).

3.8 Braun & Clarke's (2022) Six Phases of RTA

Braun and Clarke (2006) first introduced their six phases of thematic analysis to bring transparency to a widely used, but often under specified method. The later addition of 'reflexive' signified the researcher's critical, interpretive role in knowledge generation (Braun & Clarke, 2022). In RTA, themes are not objectively discovered within data, but actively constructed through the researcher's sustained engagement with it, meaning no two researchers would produce identical themes from the same dataset (Braun & Clarke, 2022).

The six phases are: familiarisation with the data, generating initial codes, searching for themes, reviewing themes, defining and naming themes, and producing the written analysis (Braun & Clarke, 2022). These phases are not intended to be linear, but recursive and iterative, with the researcher moving between them as interpretation develops (Braun & Clarke, 2022).

I took an inductive approach to coding and theme development, remaining grounded in participants' accounts. I acknowledged my unavoidable relationship to the data as a co-creator of the CRCT (Braun & Clarke, 2022). However, I also brought theoretical sensitivity to the analysis. As I moved through the later phases, patterns in the data began to resonate with psychodynamic concepts, specifically the unconscious processes shaping practitioners' engagement with, and avoidance of, CRP. These concepts, including rupture and repair (Safran & Muran, 2000) and projective identification (Klein, 1946), were not predetermined

categories at the outset of analysis, but emerged as theoretically meaningful framings through iterative, reflexive engagement with the data. My approach was best understood as theoretically sensitised induction, rather than deductive application (Braun & Clarke, 2022). RTA was deemed appropriate for this study, as it treats researcher subjectivity as a resource, rather than a threat to validity (Braun & Clarke, 2022; Braun & Clarke, 2024).

3.8.1 Phase One: Familiarisation

3.8.1.1 Transcribing, reading, re-reading, and writing initial codes.

In RTA, familiarisation requires the researcher to immerse themselves in the dataset to develop an initial, holistic sense of the breadth and depth of the data (Braun & Clarke, 2022). This phase is not passive, but involves active engagement with the transcripts and the generation of initial analytic observations. To familiarise myself with the data, I re-watched recordings of the focus groups, read, and re-read transcripts. This enabled me to check that digitally generated transcripts were accurate against the recordings. Also, it provided a chance for me to write down my initial, raw interactions with the data (see Appendix M).

I decided to code my data manually on colour-coded post-it notes to help visualise initial codes and developing patterns. This helped me to engage with the data more personally (Clarke et al., 2021). I considered learning new software to help the coding process, but decided that manual coding allowed me to remain close to the data and to develop an embodied familiarity with participants' accounts (John & Johnson, 2000). This would have been harder to achieve through software-mediated analysis (John & Johnson, 2000). During this phase, I was not yet engaged in formal coding but was instead attending to the data as a whole. I was noticing recurring words, moments of hesitation or emphasis in the transcripts, and the emotional texture of participants' accounts (Braun & Clarke, 2006).

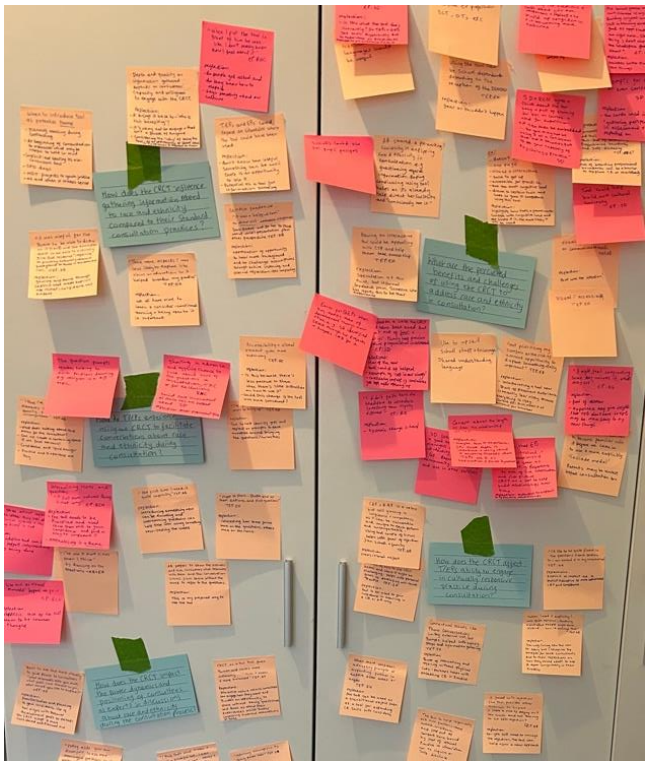
3.8.2 Phase Two: Generating Initial Codes

Generating my initial codes involved producing a comprehensive and systematic set of labels that captured analytically relevant features within the dataset (Braun & Clarke, 2022). In RTA, Braun and Clarke (2022) distinguish between semantic coding, which captures the explicit, surface-level meanings in data, and latent coding, which involves interpreting the underlying ideas, assumptions, and conceptualisations that shape what participants say. I initially generated codes that reflected participants' stated experiences of using the CRCT, before progressively developing codes that captured the implicit psychological processes, such as avoidance, protection, and permission-seeking, that appeared to shape their engagement with CRP. In total, I generated one hundred and forty-five initial codes across the four focus group datasets. This over-inclusive approach is consistent with Braun and Clarke's (2022) guidance that the coding phase should prioritise comprehensiveness over reduction, with refinement reserved for later phases.

To identify the participant group (TEP or QEP) and the time point (FG1 or FG2) that data were collected, I colour coded post-it notes (see Figure 5). The post-it note colours represent: light pink for TEP-FG1; dark pink for TEP-FG2; light green for QEP-FG1; and dark green for QEP-FG2. Each post-it note contained both an initial code and a primary reflection on the data point, to guide my reflexive engagement. The codes derived from my engagement with the transcripts and the reflexive responses, including my own emotional reactions to participants' accounts. For example, my reflections included moments where my investment in the CRCT as co-creator felt like it might be colouring my interpretation, and observations about data that felt uncomfortable, or surprising, to encounter. These reflexive notes were integral to the coding process. I revisited the reflections at later stages to help me identify where my positionality may have oriented my attention, and to consider alternative interpretations that I might have overlooked.

Figure 5

Initial Thematic Mapping using post-it notes



I organised my initial codes by research question, which were written on blue cue cards to help guide the coding process (see Figure 5). Organising codes by research question at this stage was a deliberate methodological choice, as it ensured that the coding process remained oriented towards the study's aims and prevented analytical drift (Braun & Clarke, 2022). However, I also remained open to codes that did not map neatly onto the predetermined questions, noting these separately and categorising them as potentially emergent or unexpected findings. I systematically reviewed codes across all four focus group datasets to check for consistency and to identify early patterns.

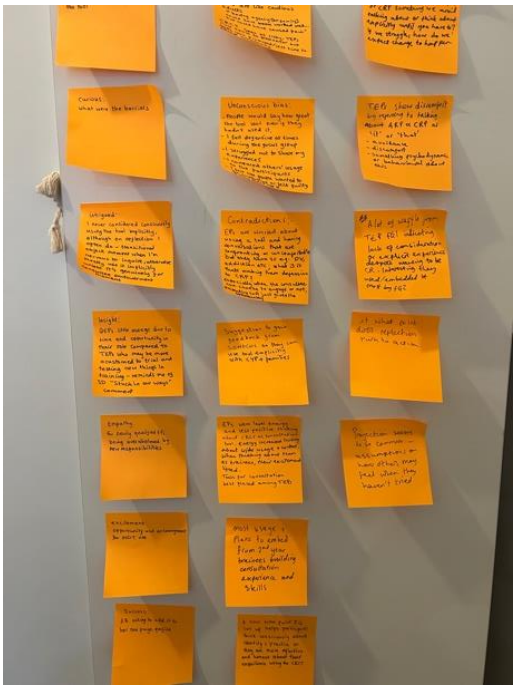
3.8.3 Phase Three: Searching for Themes

This phase involved organising the codes into potential themes. In RTA, a theme goes beyond a collection of similar codes, but describes a core concept that captures a coherent, unifying response to the research question across the dataset (Braun & Clarke, 2022). To

search for themes, I wrote broader reflections on orange post-it notes (see Figure 6), commenting on commonalities across participant accounts and patterns within the data. Crucially, the reflections captured emerging patterns that exceeded the participants' stated conscious reasoning. From the one hundred and forty-five initial codes, I identified fourteen candidate clusters, each organised around a unifying idea that appeared across the dataset (Braun & Clarke, 2022). It was during this phase that I began to notice some participants' hesitancy, avoidance, and discomfort around CRP, which could not be fully accounted for by practical barriers alone. Drawing on my existing knowledge of psychodynamic concepts, I began to consider whether these patterns might reflect unconscious processes such as projection, the need for relational safety, or anxiety about professional identity. I did not enter the analysis expecting to find these unconscious processes, but they were identified from my immersion in the data and reflexive engagement with my own responses to what I was reading and hearing.

Figure 6

Reflections on the codes



Once all focus groups were coded, I wrote candidate themes onto smaller, beige post-it notes (see Figure 7). I organised codes under these candidate themes, creating columns to visually represent my interpretation of the data (see Figure 8). In reviewing these columns, I considered whether each theme contained a mixture of TEP and QEP voices, finding that whilst some themes appeared strongly across both participant groups, others, notably those relating to permission-seeking and professional identity, were more prominent in trainee accounts. I merged themes that overlapped in a process to begin identifying themes. It was at this stage that the overarching psychodynamic concepts identified began to crystallise.

Figure 7

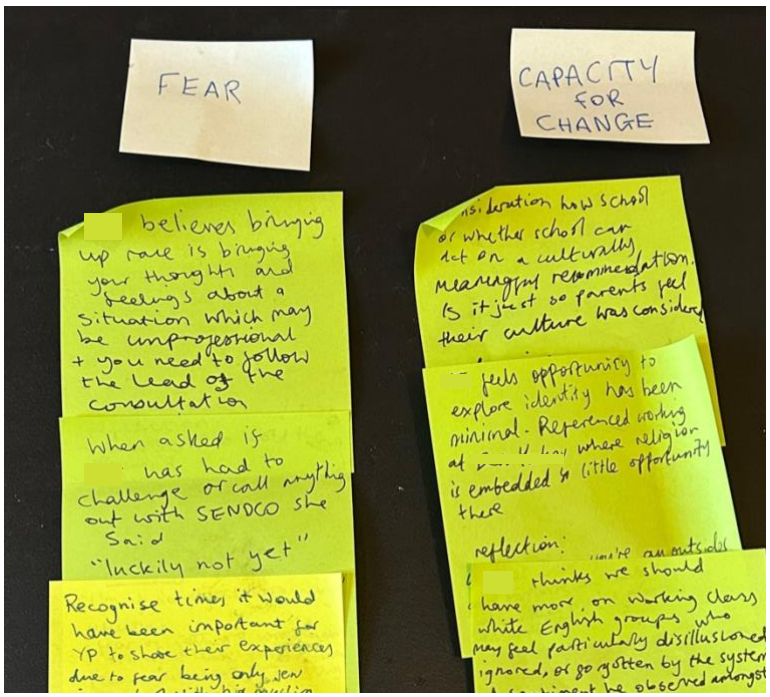
Examples of candidate themes

I noticed that several distinct patterns in the data could be understood as expressions of a shared underlying dynamic, in which practitioners' relationship to race and culture was mediated by protection, projection, and permission. This recognition shaped the subsequent development of my four core themes. At this stage, my candidate theme list included a range of initial titles, some descriptive and some already carrying interpretive weight. Examples included: 'comfort/discomfort', 'opportunity', and 'power dynamics' (see Figure 8). These early titles were working labels rather than final names. Their purpose was to capture what

the data appeared to be saying before I had formed a view about the deeper conceptual understanding organising them.

Figure 8

Clustering data into themes



3.8.4 Phase Four: Reviewing Themes

Phase four involved reviewing candidate themes to assess their internal coherence and their meaningful distinction from one another (Braun & Clarke, 2022). The purpose was to ensure that each theme worked analytically, and that it captured a genuine pattern of meaning. In this stage, I reviewed my themes to ensure that each one represented a coherent core idea or concept. I did not want themes to be too broad, narrow, or insufficiently differentiated from adjacent themes (Braun & Clarke, 2022). To support this, my supervisor encouraged me to consider the story my data was telling. I centred this question and re-read the headings and content of the candidate themes.

My themes and subthemes were created by clustering the emergent themes to create four core themes and twelve subthemes. For each candidate theme, I returned to the relevant coded extracts to check that the data genuinely supported the thematic claim that I was making, and that extracts were not better accounted for by an adjacent theme. My supervisor's question: "What story is your data telling" prompted me to step back from the granular level of individual codes and consider the overarching interpretive argument of the dataset as a whole (see Figure 9). This shift in perspective was significant as it was at this point that the four core themes began to cohere both as individual categories and as a conceptually integrated account of how practitioners navigate race, culture, and identity in consultation (Braun & Clarke, 2022).

Figure 9

Forming Themes and Subthemes

3.8.5 Phase Five: Defining and Naming Themes

Phase five involved defining and naming themes in a way that captured their essential quality and communicated their analytic scope (Braun & Clarke, 2022). Theme names should be active and evocative, reflecting not only the content of the themes, but the interpretive argument being made (Braun & Clarke, 2022). Once I decided the names of my themes, I re-read the emergent themes and codes to ensure I could justly define each one. I wrote an explanation under each theme to ensure the name represented what the theme was describing. I then considered subtheme names and what ideas I wanted them to represent. The naming of my four core themes was a careful and deliberate process. Each name was chosen to communicate an interpretive argument about what the data generated (see Table 4).

'Protection in Projection' was named to capture the psychodynamic process of practitioners displacing their own discomfort about race and culture onto external actors (the institution, the family, the training system, the school representatives) as a form of self-protection. 'The Permission Gap' represented the structural and relational absence that practitioners described, leading to the sense that CRP requires explicit authorisation, that was rarely given. 'Knowledge is Whose Power?' was chosen to surface the systemic focus of CRP, reframing the familiar assertion that 'knowledge is power' to ask whose knowledge is legitimised, whose is marginalised, and who controls access to both. The name carries psychodynamic undertones in its attention to power as something held, withheld, and unconsciously protected. Whilst the theme resonates with Fricker's (2007) concept of epistemic injustice, it is not reducible to it. Instead, the focus is on the broader experiences of knowledge and power within which practitioners and the communities they serve are positioned. 'The Russian Doll' named the nested, generative possibilities of the CRCT as a single-design tool. Just as a Matryoshka (Russian) Doll contains multiple figures within one form, the tool was found to span layers of practice at the individual, relational, and institutional level, that had not been consciously considered in its design. The theme captures

something that emerged unexpectedly through the analytic process. The tool operated across rupture and repair cycles at multiple levels simultaneously, and this was unanticipated. In this sense, the theme carries both Fricker's (2007) epistemic concerns about what knowledge the tool makes possible and for whom, and Safran and Muran's (2000) rupture-repair framework, in that the tool's nested reach created conditions for repairing relational and systemic ruptures around race and culture that practitioners had not previously had a vehicle to address.

Table 4

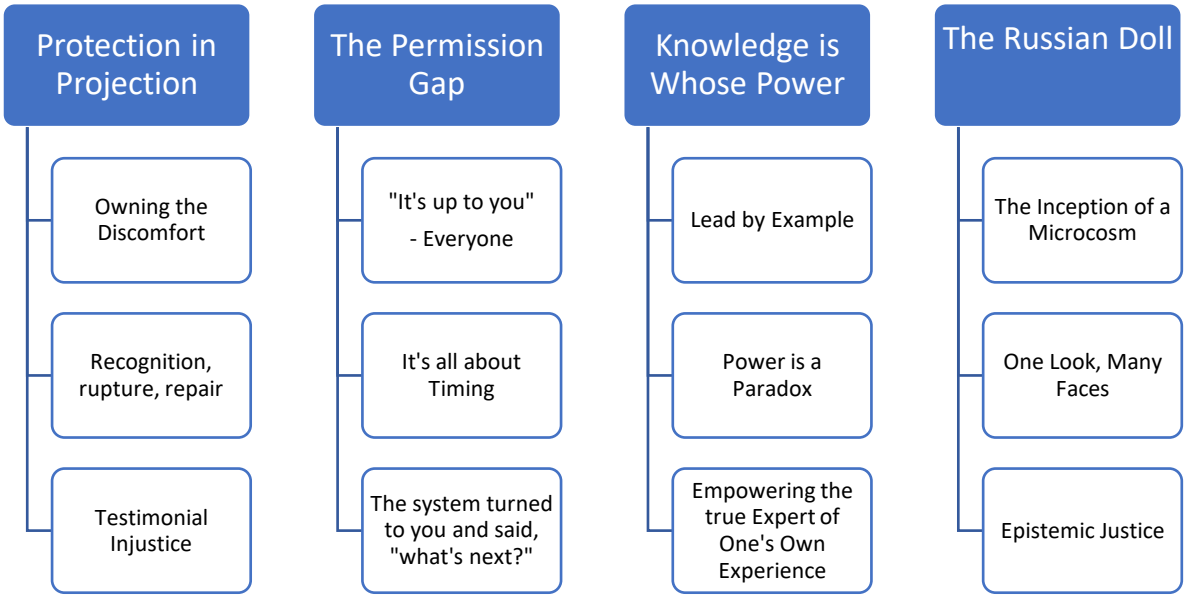
Image defining Themes and Subthemes

Theme	Subthemes
Protection in Projection: The individual/psychological level attending to why practitioners experience barriers to CRP.	**Owning the Discomfort:** Individuals naming their uncomfortable feelings within CRP consultation.
	Recognition, Rupture, Repair: The process of breaking the psychological/individual barriers to CRP and moving towards enactment.
	Testimonial Justice: The impact of cultural experiences being dismissed.
The Permission Gap: The systemic level - what enables or blocks change, and who holds the agency to close it.	**"It's Up To You" - Everyone:** Collective waiting occurs when CRP enactment is not claimed as anyone's responsibility.
	It's All About Timing: What makes enacting consistent CRP an ethical dilemma.
	The System Turned To You and Said, "What's Next?": The EP profession's need to address the gap in CRP resources for in-the-moment consultation.
Knowledge is Whose Power: The relational experiences demonstrating what can change when power is redistributed.	**Lead By Example:** T/EPs taking up their legitimate power to enact CRP.
	Power is a Paradox: When T/EPs do not feel empowered to face discomfort, despite being perceived to be.
	Empowering the True Expert of One's Own Experience: Power redistribution benefits all.
The Russian Doll: The generative and practical possibilities when the tool is distributed across professional layers.	**The Inception of a Microcosm:** How tools can impact cultural change within the profession.
	One Look, Many Faces: The same tool can be applied to different contexts.
	Epistemic Justice: What happens when consistent CRP becomes expected and ingrained in practice.

Once I felt confident with my themes and subthemes, I created a thematic map (see Figure 10). This map reflects the iterative and reflexive engagement with the data, resulting in four core themes and twelve subthemes. The themes each capture a distinct, yet interrelated aspect of the participants' experiences of culturally responsive consultation. Together, this constitutes the analytic argument of the findings chapter.

Figure 10

Thematic Mapping



3.8.6 Phase Six: Write up

Phase six involved producing a written analysis of the findings. In RTA, data extracts serve as the evidential grounding for the researcher's interpretive claims (Braun & Clarke, 2022). Therefore, the relationship between the extracts and the analysis must be made explicit (Braun & Clarke, 2022). During the write up of my findings, I structured each theme thematically, rather than participant-by-participant, ensuring the analysis moved fluidly between the voices of qualified EPs and trainees, bearing relevance to the analytic argument.

I selected extracts that best demonstrated each subtheme, and that together conveyed the breadth and nuance of participants' experiences. I ensured the write-up remained accountable to the data, and my interpretive position as a researcher and co-creator was not a passive consideration with no interpretive impact. The research aims and questions were used as an orienting framework throughout, ensuring that the written analysis maintained a focus on the three core areas of enquiry: barriers to CRP, facilitators of CRP, and practitioners' experiences of the CRCT. The table below provides a sample of data extracts organised under their final subtheme names, illustrating the relationship between the data and the written analysis (see Table 5).

Throughout the write-up phase, I continued to consult my reflexive diary, using it to interrogate my own interpretive choices in moments where my reading of an extract felt confident or self-evident. I used my diary to make these constructions visible by recording why I had chosen particular extracts, what I had considered and rejected, and how my positionality as co-creator of the CRCT may have inflected my framing of participants' accounts.

Table 5

Sample of coded data

Code	Data Extract
Owning the Discomfort	"It's making me question my own practise and what I find uncomfortable. I mean I'm kind of conscious my whiteness."- FG1 "I guess not prioritising my comfort at the risk of a missed opportunity"- FG2

"It's up to you"- Everyone	“I guess when it's explicitly brought up by parents or staff, like when we've discussed before, if a child is described as defiant, for example, and it sounds more like a microaggression challenging towards staff.”-FG1 "I didn't quite have the headspace to introduce something new or slightly different" -FG2
One Look, Many Faces	“This is an area that spans tribunals, like, you know, it spans all areas”-FG1

3.8.7 Research Quality

Quality in reflexive thematic analysis is assessed differently from positivist or post-positivist research traditions, which rely on criteria such as validity, reliability, and generalisability (Braun & Clarke, 2024). As Braun and Clarke (2024) argue, these criteria are not simply transferable to qualitative enquiry, as applying them without critical engagement risks distorting the epistemological commitments that make qualitative research valuable. For this study, quality was assessed using Braun and Clarke’s (2024) Big Q Qualitative Reporting Guidelines, which identify four interrelated markers of quality RTA. These are: coherence, transparency, reflexivity, and situatedness (Braun & Clarke, 2024). Each is addressed in the sections below. These criteria are specific to the qualitative, social constructivist position within which this study is situated.

3.8.8 Coherence

Coherence was ensured by maintaining consistency across the study's philosophical, methodological, and analytic layers (Braun & Clarke, 2024). The relativist ontology and social constructivist epistemology adopted for this study informed the choice of qualitative methodology. Focus group design, and reflexive thematic analysis, were each selected for their alignment with the study's epistemological position, rather than for reasons of convenience (Braun & Clarke, 2024). Analytic decisions, including the move towards psychodynamic interpretation, to treat non-use of the CRCT as analytically meaningful, and the naming of the themes, were each grounded in the data analysis and the reflection points documented in my reflexive diary.

3.8.9 Transparency

Transparency was supported by maintaining a comprehensive audit trail throughout the research process. This included records of focus group schedules, recruitment procedures, focus group guides, consent documentation, and analytic memos documenting how codes developed into themes (Braun & Clarke, 2024). The coding process was illustrated in the data analysis section. This provided access to the analytic steps and enabled independent assessment of the interpretive processes taken in this study (Braun & Clarke, 2024).

3.8.10 Reflexivity

Reflexivity was central to the quality of this study. This is consistent with Braun and Clarke's (2022) position that researcher subjectivity, when actively engaged with rather than suppressed, enriches qualitative analysis. As co-creator of the CRCT, my relationship to the data carried risks, as my investment in the tool's success could have led me to over-weight positive accounts, or minimise critical ones. I addressed this through several strategies. I

recorded my emotional responses to participants' accounts and engaged with ongoing reflections on how my positionality shaped my analytic attention. I used supervision to share my reflections and challenge my interpretations. This helped me to honestly reflect and interpret the data, considering my personal investment in the success of the tool, and accepting limitations as analytically viable. During the focus groups, I explicitly invited critical feedback and responded to it with evident interest, seeking to create conditions in which honest accounts were valued over affirming ones.

3.8.11 Quality and Rigour

Several strategies were used to ensure the quality of the findings. First, I conducted four focus groups to allow for rigorous exploration through a two-stage data collection design. This enabled the analysis of the participants' perspectives before and after the introduction of the CRCT. I utilised supervision to share my reflections, interpretations, and analytical process (Braun & Clarke, 2024). I used member-checking by regularly summarising emergent interpretations to the participants during the focus groups, inviting them to correct or elaborate to ensure my understanding (Lincoln & Guba, 1985). These strategies together support the credibility of the findings as grounded, participant-accountable interpretations rather than researcher impositions.

3.8.12 Situatedness

Situatedness, as described by Braun & Clarke (2024), refers to the extent to which the research is positioned within its specific context. Qualitative research does not claim generalisability, instead, it offers situated, interpretively rich accounts that readers can assess for relevance to their own contexts (Braun & Clarke, 2022). This study is explicitly situated, as it took place within a single, diverse EPS. The participants were comprised of practitioners at different career stages who had all received training on the CRCT. The specific socio-

cultural context of the borough shaped the nature of the participants' accounts and is documented in sufficient detail throughout this chapter to allow readers to assess the resonance of the findings with their own settings. Rather than claiming transferability in the quantitative sense, this study offers conceptual resonance. The themes generated, and the theoretical framework through which they were interpreted, are offered as a set of ideas that practitioners and researchers in comparable contexts may recognise, interrogate, and build upon.

The situated nature of this research also carries limitations. The specificity of the context, a single EPS in a diverse borough, means that the findings are most directly applicable to settings with similar demographic and professional characteristics. Participants self-selected into the study, and those who volunteered were likely to hold existing commitments to CRP, as evidenced by the QEP group's membership of the borough's anti-racist working group. This shaped the nature of the accounts generated, and is part of the study's situated character, rather than a methodological failure.

3.9 Ethical Considerations

My study was approved by the Tavistock Research and Ethics Committee on April 2nd, 2025 (See Appendix E). To ensure ethical vigour, I will use the BPS (2021) four ethical principles of: respect, competence, responsibility, and integrity, to structure the ethical considerations of this study.

3.9.1 Informed Consent

All participants were initially informed about the research during training on the CRCT. Where potential participants expressed interest in taking part in the research, I sent an email with the information sheet detailing the purpose of the research, its boundaries, confidentiality, data handling, and the right to withdraw (see Appendix N). This process

supported the participants to make an informed decision to engage with the study. An electronic consent form was distributed via email directly to participants (see Appendix O). This included check boxes and a signature consenting to participate. The consent form was distributed six to eight weeks prior to FG1, depending on when participants agreed to participate, allowing adequate time to consider their involvement. Two TEPs joined the study two weeks before FG1. At the start of both FG1 and FG2, consent was verbally re-confirmed by reminding participants of their right to withdraw at any point without giving a reason and without professional consequence. Permission to video-record the session was explicitly re-sought, as the focus groups were originally planned to be in-person. However, the participants unanimously agreed a preference for virtual focus groups, with transcription occurring via Microsoft Teams. This iterative approach to consent reflected the ongoing agency I wanted participants to experience throughout the research process (British Psychological Society, 2021).

3.9.2 Anonymity and Confidentiality

A series of measures were taken to protect the anonymity and confidentiality of the participants. This was necessary as participants were all from the same service and belonged to one of two groups, TEPs or QEPs. This made it easier for colleagues to identify participant views pertaining to professional experience (Hollway & Jefferson, 2000). First, participants were made aware of the potential for this before they agreed to participate. Second, participants were reminded at the beginning of the focus groups to respect the boundaries of confidentiality and to not share what was said inside the group. Finally, participants were assigned a code to anonymise their experiences during the reporting of the findings.

Each Trainee EP and Qualified EP were assigned a number between 1-5. This represented the five participants per group. During the findings and discussions chapter,

qualified EPs were referred to as QEP-1, QEP-2, QEP-3, QEP-4, and QEP-5. Trainee EPs were TEP-1, TEP-2, TEP-3, TEP-4, and TEP-5. These numbers were assigned randomly for the sole purpose of reporting the findings. It is important to note that whilst every effort was made to preserve anonymity in the reporting of findings, the limits of confidentiality with the focus group itself were made explicit to participants. I informed the participants that what is shared in a group setting cannot be fully controlled by me, and participants were asked to respect the confidentiality of their peers' contributions.

3.9.3 Power dynamics

There were various power dynamics considered during the study. Firstly, there was the dynamic between myself as the researcher and the participants, trialling a consultation tool I helped to develop. Social desirability, the need for social approval, is a phenomenon that was considered during the research, as it can unconsciously influence participants to respond with, what they may deem as, 'correct' responses (Podsakoff et al., 2003). However, as a student gaining the views of qualified EPs, some of whom hold senior roles, I reflected on my own feelings of adequacy in an EP role, and the usefulness, or need, for a culturally responsive consultation tool. Furthermore, as co-creator of the tool, I had to consider how I managed my wants and desires for the tool to be deemed successful and ensured this did not influence participants to be less authentic in the reflections of their experiences. I utilised supervision to discuss my thoughts and feelings regarding the tool's benefits and limitations. I also reminded participants that all their experiences and reflections are useful, irrespective of my involvement and investment in the tool.

As a researcher exploring CRP, my own racial and cultural identity positioned me in relation to the participants in ways that were neither neutral nor static. Shared identity with

some participants may have facilitated openness, whilst perceived difference with others may have shaped what was, or was not, said.

3.9.4 Minimising Harm

Engaging in culturally responsive practice is a competency that T/EPs must demonstrate (HCPC, 5.1). Whilst cultural responsivity is a competency, the literature review highlighted the barriers to adhering to this in practice. Participants were informed that the tool was intended to be used flexibly. This was to reduce the pressure on participants to use the tool 'correctly', as each consultation would be unique. Minimising harm in this study required sensitivity to the emotional and professional risks inherent in asking practitioners to reflect on their own CRP. This necessarily involved examining potential gaps in knowledge, unconscious biases, and moments of practice that may not have been sufficiently culturally responsive. Participants were explicitly reassured that the research was not evaluating their individual competence.

3.9.5 Support for participants

Participants were provided with a debrief sheet alongside their consent form (see Appendix P). The debrief sheet and follow-up email included information on support available should participants wish to process any reflections arising from participation, including access to their placement supervisor, the university's wellbeing services, and professional supervision routes. This reiterated their right to withdraw without having to give a reason why, as well as a supportive space they could access if they needed to reflect on their experiences after participating. The two NQEPs expressed guilt for leaving the study and offered to share reflections. I arranged individual debriefs to ensure they were not emotionally impacted by their decision to not continue. I also followed up our conversation via an email, formally inviting them to share reflections (Appendix Q). The follow-up email

to the two NQEPs who withdrew reiterated that their decision carried no professional consequence.

3.9.6 Data Protection

Data was stored in compliance with UK General Data Protection Regulation. Focus groups were recorded using Microsoft Teams, using my University of Essex account. This means that recordings and transcripts were automatically downloaded to the University's Microsoft OneDrive account, which is password protected, via a two-step authentication code sent to my phone. Data will be stored for ten years and disposed of following the retention period, as outlined by the UK Research and Innovation guidance (2022).

3.9.7 Researcher Reflexivity

Reflexivity is defined as the researcher's critical, ongoing engagement with how their subjectivity, positionality, and context shapes the research process (Olmos-Vega et al., 2022). In this study, reflexivity was a continuous practice woven through data collection, analysis, and write-up. This section draws together the reflexive aspects of the research discussed across the chapter and situates them within Olmos-Vega et al.'s (2022) framework. This identifies four purposes of reflexivity: acknowledging, explaining, capitalising on, and transforming subjectivity. For this study, the primary purpose was to capitalise on subjectivity. I hold the position of co-creator of the CRCT, and as practitioner who embeds the CRCT in the same professional context as the participants. This was treated as a resource for generating a deeper and more situated insight into the data (Braun & Clarke, 2022).

As co-creator of the CRCT, I brought a significant degree of investment to the research. I wanted the tool to be experienced as useful, and I was aware that this desire could shape both how I facilitated the focus groups and how I engaged with the data. To manage this, I established several practices from the outset. During the focus groups, I explicitly

positioned critical feedback as equally valuable to positive accounts. I asked questions specifically designed to surface barriers and limitations and attended carefully to my own responses when participants expressed doubt or disengagement with the tool. During the analysis, I used my reflexive diary to interrogate findings, and I asked myself whether alternative readings had been genuinely considered or prematurely closed off. My supervisor questioned and challenged my interpretations and required me to account for my analytic decisions that I had not yet made fully explicit.

My racial and cultural identity also shaped the research in ways I reflected on throughout. As a researcher exploring race and culture with practitioners who vary in their own racial and cultural identities, and their relationship to CRP, I was never a neutral presence in the focus groups. I attended to this by reflecting on what participants communicated, but also by what I was primed to hear by my own experiences. This ongoing reflexive practice is a vital aspect to the analytic rigour. It is what makes the interpretations offered in the findings chapter accountable, transparent, and grounded in a sustained, and self-aware engagement with the data.

3.9.8 Chapter Summary

This chapter has outlined the methodological approach underpinning this exploratory study. The research is positioned within a relativist ontology and social constructivist epistemology. A qualitative methodology was selected as most appropriate for addressing the exploratory research aims and three research questions guiding the study. Qualitative inquiry enabled the exploration of the participants' lived experiences, meaning-making processes, and the contextual complexities shaping culturally responsive consultation practice. Coherence between the study's philosophical position, methodological choices, and analytic approach has been maintained throughout. Focus groups were chosen as the primary data

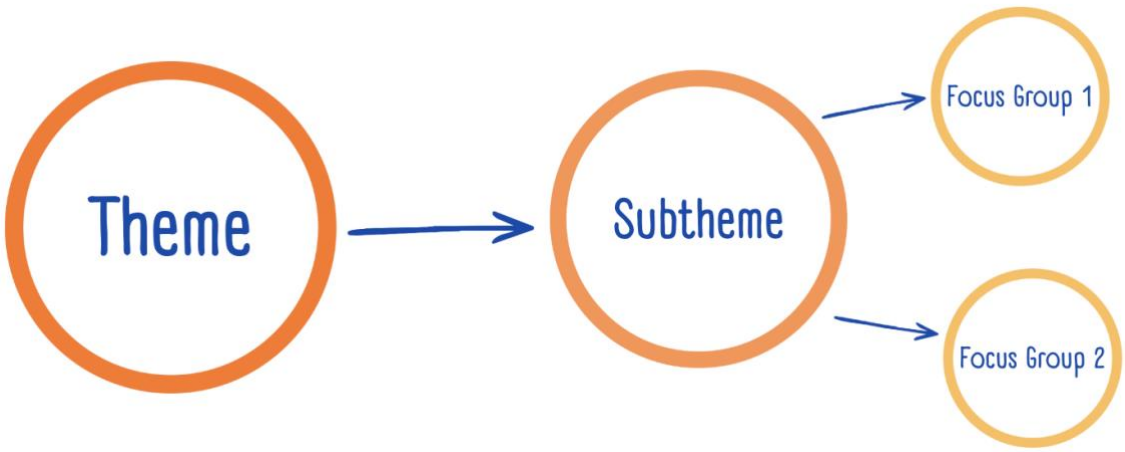
collection method for their alignment with social constructivist principles, their capacity to generate rich collaborative dialogue, and their efficiency in capturing diverse professional perspectives. Ten participants (five qualified EPs and five TEPs/newly qualified EPs) from a single diverse local authority were recruited through purposive sampling. Following CRCT training, participants used the tool flexibly over one school term before reflecting on their experiences in FG2. Data were analysed using Reflexive Thematic Analysis, an approach that foregrounds researcher interpretation whilst generating rich, nuanced themes grounded in participant accounts.

4 Findings

This chapter presents my findings to address the research questions. The first question, 'How Do T/EPs Experience the Implementation of Culturally Responsive Practice in Consultation?', will be predominantly addressed through findings from FG1. FG1 focussed on current methods T/EPs use to implement CRP, as well as the consistency of their approach during consultation. FG2 focused on any intentional practice change associated with use of the CRCT. Findings from both FG1 and FG2 are used to answer my second research question, 'What Helps to Embed Culturally Responsive Practice in Educational Psychology?'. My third research question, 'What are the experiences of using a culturally responsive consultation tool in EP practice?' reports findings from FG2. To capture change over time, the findings chapter is structured thematically to highlight findings by focus group. Distinguishing between data from FG1 and FG2 across the themes and subthemes was designed to provide the reader with a sense of participant engagement with CRP before and after the introduction of the CRCT (see Figure 11).

Figure 11

Reporting of findings structure



4.1 Theme 1: Protection in Projection

'Protection in Projection' captures a psychodynamic movement through FG1. Practitioners project their own discomfort about culturally responsive practice onto clients before attempts for enquiry are made. Projection serves as a protective function, which allows for the avoidance of vulnerability in initiating conversations about race and identity by assuming the conversation will cause harm to families. However, this protection restricts CRP and places it as reactive, often referral-led, rather than in a proactive consultant-led position. The data traces this process and its consequences across three subthemes.

4.1.1 Subtheme: Owning the Discomfort

This subtheme highlighted practitioners' recognition that explicit CRP can be challenging. There was a distinction between the way discomfort was depicted in FG1 and FG2. Participants in FG1 discussed the potential impact of exposing clients to discomfort, whilst participants in FG2 were more inclined to recognise discomfort as a mechanism for change.

FG1:

Participants were seen to project discomfort onto families and schools. However, there was a moment where one participant caught themselves mid-thought and questioned who the discomfort belonged to.

"I feel more comfortable when a family or perhaps school feel a bit more comfortable… or maybe it's my own shying away from the area… it's making me question my own practise and what I find uncomfortable. I mean I'm kind of conscious my whiteness." (QEP-2, FG1)

Whilst EPs are cautious of the impact of bringing sensitive and personal topics into consultation, there was a pattern of pre-empting discomfort. However, it was unclear whether the discomfort was genuinely the consultee's or the consultant's.

"I've had conversations before about the feeling of bringing up race and ethnicity when it's more of like a visible difference and how some EPs might feel that the parent or carer might be taken aback by that and might assume that the EP is making assumptions based on their race and ethnicity". (TEP-1, FG1)

Words like 'might' and 'assume' linguistically enact the projections, as they hedge responsibility for the discomfort, making whose feelings are being protected ambiguous. This ambiguity is functional as it allows practitioners to frame avoidance as client-protection rather than self-protection. This forecloses the possibility of finding out how the consultee/client feels about engaging in conversations about their identity, which maintains the projection loop. This creates a self-fulfilling prophecy: if practitioners never ask, they never gather evidence that families might welcome the conversation, and the belief that families find it uncomfortable remains untested.

FG2:

Focus group two shifted to centre discomfort as the practitioner's own. TEPs were able to name the discomfort and move through it more frequently than the QEP group. This may also reflect the more frequent tool engagement amongst the TEP group.

"I think I've shied away from elements like ethnicity, race, identity, like those kind of questions…because I find it uncomfortable to speak about, or sometimes it's just like what it

might bring up for me as well…putting aside your own discomfort to ask a more meaningful question could, you know, empower and help the family of the young person." (TEP-2, FG2)

After using the CRCT, TEP-2 was more confident in naming their limitations with CRP. TEP-2 could reflect on the areas they would initially shy away from whilst using the tool (ethnicity, race, identity) and reflected on where the discomfort stemmed from. TEP-2 ended by sharing thoughts on putting aside their discomfort to empower families and young people.

I could maybe open up the conversation and, you know, if it doesn't land, then I suppose that's okay and it's about just, yeah, managing that in the moment and kind of I guess not prioritising my comfort at the risk of a missed opportunity to explore something that's really important. (TEP-1, FG2)

TEP-1 had a similar experience to TEP-2. TEP-1 named the discomfort: 'if it doesn't land then I suppose that's okay'. TEP-1's position shifted from FG1, where they shared their assumptions about consultee willingness to engage, to FG2 where they recognised that to not attempt exploration could lead to a 'missed opportunity'.

4.1.2 Subtheme: Recognition, Rupture, Repair

This subtheme looks at recognition, rupture and repair in turn. This highlights the journey from identifying barriers in culturally responsive consultation, to addressing these barriers, then working towards progress. This process is cyclical, as it does not assume progress leads to a fixed solution, but pivots between stages. The goal is to identify challenges and work towards addressing them.

FG1:

4.1.2.1 Recognition; knowing but not doing.

In the following extract, QEP-4 identified the distance between recognising inequitable access to CRP and repairing the gap. QEP-4's reflection named recognition at a systemic level. They knew the exclusion data and held the research in mind, but the question of when and how to name it in consultation remained unresolved. This was not ignorance, but paralysis, as QEP-4 could name the systemic challenges, yet the mechanism to bring change into the consultation space was absent.

"I think sometimes there may be certain factors as well, a bit like a red flag, so for example anything around exclusion, knowing the data and the research on that as well and being very mindful of that and then also I think trying to gauge at what point and how do we explicitly name that in the consultation?" (QEP-4, FG1)

By recognising the challenges around naming and initiating change in a system, practitioners could start to consider the knowing-doing gap and work to address it.

FG2:

4.1.2.2 Rupture; Client unfamiliarity with being asked.

QEP-4's journey between FG1 and FG2 captured how change occurs. By FG2, QEP-4 had trialled the tool with a young person whom they reported was unsure about how to feel being asked questions about identity. Rather than discomfort, the young person expressed unfamiliarity. This may reveal what happens when CRP is explicitly introduced.

"I think what was interesting with the young person that I met was that I think they very rarely get asked those questions, so when I sort of put the tool in front of him, he was sort of like, oh, I don't really know, you know, how I feel about, you know, this aspect." (QEP-4, FG2)

The tool surfaced something that had not been buried by the CYP, but by the absence of opportunity. It also highlighted the challenge of explicit CRP practice for practitioners who may have approached CRP in a reactive, rather than proactive way. 'I sort of put the tool in front of him' suggested uncertainty in navigating cultural enquiry. The rupture was the imperfect trials and learning, recognising how it might feel to lead on culturally responsive frameworks and tools, but also guiding someone through this practice when it is not often available.

4.1.2.3 Repair; Parent and SENDCO finding new language.

When consultants provided an opportunity for CRP, they planted a seed of opportunity. Repair did not rely on that opportunity being fully exploited, but the choice redistributed power. The repair was the breaking of the projection loop and focusing on the current reality, rather than safeguarding the idea of discomfort.

"It was helpful for the parent to be able to draw on it and see that example there, to be able to actually give that response. I think, I can't remember what the SENDCO said, but she did give me feedback at the end to say that it was a helpful tool to use to draw out answers from the parent, but also to help her think about elements that she hadn't thought about that could be contributing to the presentation of the child." (TEP-2, FG2)

The SENDCO feedback represented how repair could take place. During FG1, TEP-2 had the opportunity to reflect on their CRP. Using the tool ruptured their ordinary consultation practice by redistributing power. The SENDCO recognised the tool encouraged active listening, parental autonomy, and cultural understanding amongst the triad. The presence of the tool enacted repair for the SENDCO, regardless of whether they were consciously aware that anything was missing in the first place. It was the active engagement and permission to share that contributed to the repair of inconsistent CRP. When CRP was reactive, opportunities for cultural reflection and sharing become intentional. The SENDCO reported their reflections on understanding factors contributing to the child's presentation. The repair provided an opportunity that could lead to systemic reflections.

4.1.3 Subtheme: Testimonial Injustice

I have used Fricker's (2007) concept of testimonial injustice to guide my interpretation of marginalised voices being silenced. This is a pattern I have recognised throughout the findings, which operates at a predominantly unconscious level. The silencing can be a lack of opportunity to explore cultural context, or T/EP reflections of unconscious bias. Testimonial injustice relates to the projection loop that leads practitioners to assume cultural context is too sensitive or tokenistic to explore, thus leading to the conscious decision not to explore.

FG1:

When I analysed QEP-3's recount of an exchange with a Black young person, I understood this to demonstrate the human cost of testimonial injustice. At the height of Black Lives Matter as a global movement, the young person was reported to explicitly name the absence of racial enquiry.

"It was through meeting a young person…he actually explicitly stated, it was probably 2021, something like that… he's a black young person, and he said 'we haven't had any discussions about Black Lives Matter and what's going on in the world…please can school facilitate these discussions, they're not happening'… [conversations about race] get kind of brushed aside and I guess that's it then?" (QEP-3, FG1)

The phrase "I guess that's it then?" is a resignation of expectation for conversations about race to occur. The young person felt the absence of CRP in schools. The shifting responsibility from professionals to the school indicates a wider systemic avoidance. This teaches young people their cultural experiences are not appropriate in professional spaces or in schools. Avoidance also serves the cyclical nature of projection, where assumptions on who is best placed to have conversations about culture and identity lead to an absence of CRP.

"I think sometimes we can play a nice role in bridging a gap between context so that there's more of a shared understanding and just going back to when I mentioned the school…they've been accused of kind of having unconscious bias and I think that became quite a useful piece of information because I was able to explore it with the parent, get her views and then in my recommendations, think about how the school can address unconscious bias which kind of validated the experiences of the mum and what she felt was going on". (TEP-1, FG1)

This account identifies that individuals within systems may yearn for these conversations but may end up feeling unvalidated or disempowered. Recognising this helps redistribute power, and practitioners are vital in facilitating that.

FG2:

QEP-2 named the structural conditions that make truth telling risky. QEP-2 reflected on the calculated risks consultees may take before they choose to speak about identity.

"I think, for some I imagine that if you are from a background where you felt incredibly marginalised and you're perhaps sitting in a room where there might often just be lots of white professionals. How comfortable might you be to kind of raise that?" (QEP-2, FG2)

This participant shared the ongoing curiosity they had for exploring the impact of race and ethnicity on CYP's experiences and presentation in school. T/EPs may carry a curiosity or want for deeper enquiry, but the existing systemic barriers and projection loops can prevent this from happening.

"I think it's [the tool] made me more aware of it [race and ethnicity] and just more curious about it. I think I've always been sort of curious about it, but like in my own head or when I'm reading the referral forms and things, it's making me ask more questions and I'm hoping that is what continues as I continue to use the tool". (TEP-2, FG2)

Acting on the curiosity can begin to repair the testimonial injustice described by QEP-3 and QEP-2. The tool was described to support cultural exploration by providing a framework for enquiry that was not yet available. TEP-2's use of the CRCT to 'ask more questions…as I continue using the tool' positions the tool as a transitional object.

Theme Summary

This theme positioned the primary barrier to CRP as a self-protective loop, operating largely outside of conscious awareness. Practitioners in FG1 consistently assumed families would find conversations around culture and identity uncomfortable or inappropriate, yet these assumptions were rarely tested. The projections allowed practitioners to avoid their own discomfort by placing it in the hypothetical responses of families. By FG2, participants who had engaged with the CRCT began to name this dynamic shift from 'they might feel uncomfortable' to 'I find it uncomfortable'. This shift emphasised the first steps towards change.

The three subthemes demonstrated the progression and consequences of this. 'Owning the Discomfort' documented T/EPs recognising the discomfort in their uncertainty, identity, and fear of rejection. 'Recognition, Rupture, Repair' identified what happens when the projection loop is interrupted. Testimonial Injustice named the cost of conversations about race being "brushed aside", leaving families and CYP feeling unseen and unheard. Consultants were not deliberately withholding CRP. By applying a psychodynamic lens to understand unconscious defences, I understood the participants to have been embodying a layer of protection to defend against consultee discomfort, despite it not being explicitly stated by the consultees themselves. This theme established that individual discomfort, whilst real, was not the root of the problem. The systemic absence of clear permission and process for CRP is. This absence is examined in 'The Permission Gap'.

4.2 Theme two: The Permission Gap

'The Permission Gap' captures a paradox: CRP is positioned as everyone's responsibility, yet it is uncommon for EPs to step into their 'legitimate authority' as there is no clear process for who initiates these conversations. This theme displays how CRP defaults to a waiting

position. Practitioners wait for families to initiate, families wait to assess whether the space is safe, and the system waits for individuals to take personal initiative.

4.2.1 Subtheme: "It's up to You"- Everyone

This subtheme identified the waiting position the triad engages in. Whilst T/EPs are positioned to enact CRP, this assumption is complex and unsupported. The waiting position operated at a subconscious level, and how it operates is understood through the participants' account. The participants described T/EPs engaging in a reactive approach to CRP when clear opportunities were presented, parents/carers shared their cultural experiences when they felt comfortable, and SENDCOs followed the T/EP's lead. This mismatch of assumptions could often lead to reactive and inconsistent CRP during consultation.

FG1:

TEPs and QEPs both struggled to gauge who was best positioned within the triad to introduce cultural enquiry.

"I wait for families to initiate and I think sometimes it can come out with later involvement...I worked with a Black Caribbean 15-year-old boy who had been permanently excluded from school, but in the initial consultation with his mum, ethnicity wasn't discussed. We had a follow-up consultation and she said, you know, this really hurts as his mum, he's a Black Caribbean teenager, like, I know too many families within the community whose children [have been excluded], so she initiated, but I thought afterwards should I have brought it up sooner?" (QEP-1, FG1)

T/EPs are positioned as the experts and are expected to lead the collaborative process of consultation. Presenting opportunities for collaboration requires initiation, and the question of who initiates, when everyone in the room could, remains ambiguous.

The EP might wait for the parents to show openness, the parent might wait for the EP to create a safe space, and the SENDCO might wait for the EP to lead, and the EP in turn might wait for the SENDCO to be receptive. This does not symbolise collaborative practice, it is an example of collective waiting where each person's hesitation influences everyone else's. The consultation becomes a space where CRP can only happen if someone starts.

"I think also like another factor might be to have everybody in the room to have that conversation, because if you're a parent and you're not sure, you might not feel comfortable... I know for me as a professional it might be harder to bring up because it's something I haven't done before... all that are involved in the consultation can have an impact on how that conversation is actually brought up or started." (TEP-4, FG1)

TEP-4's reflection captured the creation of the permission gap. When everyone's comfort and readiness affected whether the conversation could happen, responsibility was diffused and no one claimed it. EPs are positioned to step into their legitimate authority, but the absence of structure to bring the agenda for cultural conversations leaves the space filled with uncertainty.

FG2:

T/EPs are expected to adhere to competencies and proficiencies to consider EDI and be culturally responsive in practice. Furthermore, T/EPs are the members of a consultation space that can provide opportunities to discuss EDI.

"Equity, diversity and cultural curiosity span across all areas of practice... it is important for it to be embedded as a framework during training... we have as part of our appraisal an area for equity and diversity so one of your appraisal targets needs to be related to that area and it's to keep this area as a common thread across all areas of practice." (QEP-1, FG2)

Appraisals and professional guidance require T/EPs to own their legitimate authority to create the space for CRP to occur. However, there is a gap between the requirement to enact CRP and the availability of tools and frameworks to support this. Tools can serve as dis/comfort management for practitioners and support them to create a space where cultural enquiry can be explicit.

4.2.2 Subtheme: It's all about Timing

T/EPs are balancing several professional expectations and ethical considerations when approaching consultation. Cultural sensitivity and the avoidance of harm are professionally required. CRP can be unintentionally avoided when there is no structural guidance on how to balance the ethical considerations of practice, with practical in-the-moment support to enact CRP. This can become a part of the problem and contribute to the projection loop, moving from valid ethical consideration to defence to protect against the unknown.

FG1:

Consultees may wait to see whether disclosing information about their cultural background is the right time and how it will be responded to. They may wait and 'scope' for the right time to bring it up, if it ever is.

"I think that's the thing, isn't it? There's a risk for the family or young person in bringing that [cultural background], you know, it's a vulnerability that they're bringing, and so, sometimes it's a scoping exercise of can we receive that information?" (QEP-3, FG1)

TEP-5 considered whether a one-time consultation space was the right environment to explore cultural background. Despite carefully considering cultural practice, TEP-5 was still in the same position as a practitioner who avoids CRP. Rather than timing being presented as a lack of confidence, it highlighted a valid ethical dilemma.

"Knowing that if someone is here as a refugee and they've experienced conflict in another country, and my involvement is limited, how deep do we explore? How much do we unpack while maintaining a safe environment where the parent and the child can still leave the consultation feeling regulated and continue with the rest of their day so I'm not inflicting harm on them in terms of my involvement... it's like an ethical barrier." (TEP-5, FG1)

This account demonstrated the sensitivity T/EPs hold towards consultees and clients. The projection loop is not wholly avoidance; it is also considered and respectful. Whilst there is an amalgamation of considerations that feed into reactive CRP, it is important not to pathologise practitioner avoidance. Holding sensitivity and consideration in mind can help

CRP be more meaningful and consultee-led, but the opportunity must be there for this to happen.

FG2:

QEP-1 considered the longevity of the consultative relationship compared to projects. In projects, CRP was more likely to have the time and space to unravel and for the trust to build throughout the involvement.

"I'm quite conscious that family aren't going to be seeing me, they'll see me for a review meeting, but we won't have like an ongoing relationship. Whereas say in the projects, for example, like in youth justice, they might be working with a key practitioner for over a year in some places. And over time, you know, the practitioners will use tools... building like that relationship over time and then with the young person could feel, yeah, like really like it shows like a lot of curiosity about their lived experiences." (QEP-1, FG2)

TEP-3, as a trainee conducting primarily one-off consultations, thought about when the right time to introduce the consultation tool was during one-off consultations. QEP-1, with access to longer-term project work, thought about timing across a relationship, and in which session during long involvement created the conditions for depth.

"I plan to introduce it at the beginning, just to kind of, I guess, establish what is comfortable to talk about, where different avenues and lines of enquiry might lead me to different aspects of their identity… I think the more that it becomes a part of practice, it'll be a lot easier. You'll kind of explain it in a way that, you know, lands well, is soft and they understand how it contributes to the consultation process. So yeah, it's new, but a lot of things are new at the

beginning and then obviously it becomes part of practise and that's the whole point to improve it." (TEP-3, FG2)

TEP-3 also considered how embedding new practice can take time, but that this was 'the whole point'. Individual practice and systemic change are a consistent, explicit, and ongoing pursuit.

4.2.3 Subtheme: The System turned to you and asked, "What's Next?"

This subtheme captures the moments where participants were expected to provide CRP, but without structural support. The participants described feeling responsible for CRP, but without clear guidance, resources, or frameworks to enact it. The system articulates CRP as essential through professional requirements, but turns toward individual T/EPs to determine how this will be implemented. This makes T/EPs accountable for enacting CRP, but whilst navigating the Permission Gap's structural ambiguity. The subtheme generates data exploring how systemic demands, such as professional requirements without systemic scaffolding through resources, creates uncertainty.

FG1:

QEP-5 captured the systemic challenges. When they tried to address the mother's explicit naming of race-based challenges for her child, the school felt there was nothing that they could do.

"I think it's difficult and even thinking back to that original consultation I was talking about with the Jamaican child who was the only Black girl in her class and mum shared the experience of that and how she felt different to her peers. School kind of felt well there's not

much we can do, but then we did come to think about other areas of life and kind of family connections and community connections as well, but I think school definitely felt stuck in that and I wasn't sure. So yeah, I found that a bit challenging." (QEP-5, FG1)

The teacher being described as feeling 'stuck' reflects what the FG1 data identified about the system; change is slow and sticky. The system's failure was identified as a gap in culturally specific knowledge. This raises the question of whether it is enough for practitioners to be culturally responsive or whether they need to be culturally specific, and whether that is possible.

"It feels almost artificial for me to make a recommendation that's culturally specific and yet I have no idea how that would even look or be implemented. So, it feels like I'm sort of just forcing it - shoehorning something cultural into a report or a recommendation." (TEP-5, FG1)

The use of 'shoehorning' presents CRP as performative when the limits to knowledge have been met. This extract links to Theme 1, 'Protection in Projection', as CRP does not require expertise in all cultural nuance, but feeds into the loop of discomfort. The loop becomes self-sustaining, as not knowing enough becomes the reason not to try, and not trying ensures practitioners will never know enough. This in itself is comforting, as it requires no further action. The system has failed TEP-5 by training them to believe CRP requires cultural expertise, rather than confidence to learn from families. The gap is not in TEP-5's knowledge of specific cultures, but their confidence to offer culturally curious recommendations without being the expert. The tool intervenes by creating a structure for the family to provide the

knowledge, positioning the EP as a curious learner, rather than the expected all-knowing expert.

FG2:

TEP-1 spoke about contracting the CRCT during planning meetings. They reflected on plans to embed the CRP at the systemic level, keeping it dually in the minds of themselves and the SENDCO throughout their work together. This plan relies on explicit practice, which naming the tool and bringing it openly into the space does.

"Thinking about contracting… maybe in like planning meetings, bringing it up and just introducing the tool. I think that's a really good way of doing it, actually, so it's not kind of on-the-spot." (TEP-1, FG2)

This participant considered how CRP could become embedded into EP practice and the impact of implicit and explicit CRP.

"When you're introduced to frameworks of practice, like in training, it can then be embedded, like, you know, so you may not be using it like at a conscious level, but it becomes part of your tapestry of psychology practice." (QEP-1, FG2)

'Tapestry' implies something woven in, but if CRP is not 'at a conscious level', it suggests an element of invisibility, which feeds into the current systemic limitations. QEP-1's quote holds both possibilities whilst also drawing attention to the nature of embedded practice. Building a tapestry takes time and practice, leading to greater depth and skill. However, this may lead to less explicit CRP.

Theme Summary

Throughout my analysis of the 'Permission Gap' I identified CRP to be systemically optional in EP work. CRP happened when circumstances aligned, rather than something that was provided structurally. Across FG1, the participants described waiting for consultees to share cultural experiences, whilst navigating their own ethical and relational uncertainty about when to bring culture into the conversation. FG1 also revealed the limits of practitioners to create systemic change.

In FG2, there was reference to institutional responsibility, such as appraisal targets, but the question of whose responsibility it was during consultation was partially unanswered. The tool was not shown to assign responsibility clearly, but externalised who took up power. Through the tool's visuals and interactive features, it encouraged the exploration of areas deemed relevant, rather than questioning who would enact cultural conversations. By redistributing the power, EPs, SENDCOs, families, and CYP can draw on the tool's areas or questions as a moment of shared exploration. The question of who holds the authority and expertise to navigate these barriers, and how power operates, is explored in 'Knowledge is Whose Power'.

4.3 Theme Three: Knowledge is Whose Power

This theme examines who holds epistemic authority in the consultation space. The theme explores who gets to decide what is relevant, who is positioned as the expert, and how power operates. The tool intervenes by redistributing epistemic authority by creating the conditions for families to assert their power.

4.3.1 Subtheme: Lead by Example

This subtheme demonstrates how T/EPs initiate culturally responsive consultation. The strategies used are perceived to be highly individualised, dependent on individual confidence to self-disclose and model cultural exploration. Leadership to enact CRP is also seen to be lateral, meaning it happens between practitioners in team meetings or supervision, rather than top-down, such as starting with the practitioner and trickling CRP through the consultation triad.

FG1:

QEP-3 spoke about modelling conversations around identity. Modelling shifted the risk of disclosure away from the consultees and showed that identity could be spoken about in that space. Initiating conversations around identity has been revealed to be done modestly and with caution, which aligns with the literature.

"Sometimes I use my own personal identity and kind of maybe share something if we're going in that direction. I might share something about myself being of dual heritage to kind of model or open something up. So, there are times when I, well I do that quite a lot actually, I would say." (QEP-3, FG1)

Self-disclosure is a strategy to encourage vulnerability. When practitioners do not have a visible difference, this was seen to be more challenging. QEP-2 and TEP-1 shared their awareness of their whiteness in consultation spaces, providing an example of how CRP through self-disclosure may not work at a systemic level, but can be an impactful individual strategy. QEP-3 made themselves vulnerable to redistribute risk, whereas TEP-4 managed the conversation to create safety without personal exposure.

"I think the main thing is, yeah, resistance from people in the consultation and how you frame the conversation and how you make it not personal, but also really acknowledge what is possibly going on in the setting to make sure that the recipient is open to what you're saying and not closed off straight away." (TEP-4, FG1)

The tension between 'not personal' and 'really acknowledge what is possibly going on' is the fragility of culturally responsive consultation. The setting can help consultees enter consultation with an openness that may lead to more honest conversations. TEP-4's approach showed leadership through conversation management. This created the conditions for culture to be named without triggering defensiveness or closure, demonstrating leadership through process rather than leading through personal disclosure. The two accounts reflected the breadth of possibility for how change can happen in consultation.

FG2:

Leadership in this extract is viewed as lateral, rather than top down. Leading by example happened between practitioners, such as during team meetings or reflective groups, rather than enacted during a single consultation. This positions reflective groups and team meetings as spaces to share, learn, and gain confidence. What is gained through these spaces can then be utilised during consultation. Reflecting with colleagues is where knowledge is produced, resources are shared, and confidence is gained. Sensitivity around the consultation space is mitigated through peer leadership.

"I do think actually spaces to pause with groups of EPs are incredibly powerful and it makes me think of, you know, like in the team meeting, we have a section on resources and people very occasionally might bring something along, but like actually, utilising some of those

spaces, when we're together as colleagues and actually to share an element of practice can be very powerful… if there is a particular tool that increases cultural curiosity for us to be able to have time to think." (QEP-1, FG2)

The use of 'very occasionally' suggested there was already an under-utilised space for conversations around CRP to happen. There were opportunities for peer-learning, but this required assertive leadership for EPs to take up their authority.

4.3.2 Subtheme: Power is a Paradox

This subtheme highlights the mismatch of expectation regarding the distribution of power. T/EPs are positioned as 'experts', guiding the consultation. Simultaneously, consultation is a collaborative process with the expectation that each member of the triad can learn from one another's perspectives. Calling out unconscious bias or cultural assumptions seemed to arise as key issues that threaten the working relationship between T/EPs and SENDCOS. Whilst T/EPs are systemically required to call out bias, the power of the working relationship may outweigh the power of rupturing. This leaves the parent/carer in a position where they need to fight to be heard, rather than each person's power being respected. In the pursuit of power by each member of the triad, an innate powerlessness is revealed.

FG1:

TEP-1 reflected on the various assumptions of power that operated simultaneously, attending to how it is multifaceted and fragile. Whilst EPs are positioned as 'experts' through their role in the helping relationship, this relies on their own taking up of their legitimate power (the authority conferred by professional role) (Fricker, 1959). When there is a need for challenge, T/EPs have to consider the power of their working relationship with the school and how

firmly they can challenge. This extract addressed power in relation to racial identity, professional positioning, and relational power.

"As for white women, can we really know what it's like to be this young black girl and kind of truly empathise with the mum and what she's experiencing. Is it for us to say yes, there are unconscious biases, no, there aren't unconscious biases happening…can we really take that hard a viewpoint? And I think just in that circumstance because there's quite a few of us and it was like trying to be careful of the power dynamic trying to keep the conversation open to kind of tackle those feelings of defensiveness from the school staff, whilst also acknowledging kind of white privilege and just trying to elicit different perspectives and a bit more understanding." (TEP-1, FG1)

The school was described as defensive, which could act to disempower families or to disempower practitioners from calling out systemic issues. White privilege was acknowledged as a form of dominant power in this extract, whilst other forms of power were more invisible. The paradox is demonstrated when T/EPs are positioned to call out systemic issues, but personally, they may feel disempowered to do so.

"Initially when we got into the consultation, the parents were kind of saying like, he's not autistic and, you know, we left the other school because they were pushing this … and I was just thinking about how that might have felt, that power the previous SENDCO had, and also the power of the SENDCO in the consultation hearing about their experience…we were able to have really good conversations around the importance of what their child needs…the power kind of forced its way into consultation because of their experience." (QEP-5, FG1)

The imagery of power 'forcing its way' into consultation demonstrates what I view the paradox to be. Parents had to assert themselves forcefully to be heard collaboratively and the consultation became productive only after the family's power breached the space. Power had to force entry because the system did not invite it, and the very fact that breach was necessary is an organisational problem. Power can belong to everyone, but it is reserved for those who will fight to be heard. This raises the question: should families have to fight to be heard collaboratively? The EP wants genuine collaboration, but the institution positions the EP as gatekeeper, and that gate only opens when parents push hard enough. Genuine collaborative consultation would create conditions where family power does not need to force its way in because it is invited from the start.

FG2:

In this extract, TEP-1 shared their experiences of power when using the tool in the consultation space. TEP-1 reflected on the interactive and flexible nature of the tool and how this helped the consultant take up their legitimate power to empower consultees.

"I think that's what's good about the tool is that there is that option to choose what feels most relevant or even, you know, where things might not have been considered before and with the different areas and I suppose reducing assumptions by giving, yeah, giving power over." (TEP-1, FG2)

In FG1, TEP-1 questioned who has the authority to distribute power. TEP-1 alluded to how 'calling out' can impact the working relationship with SENDCOs. By FG2, TEP-1 had the confidence to address this assumption by 'calling in', allowing the consultee to choose what

areas they felt were most relevant to explore, which organically redistributed the power whilst protecting the working relationship.

4.3.3 Subtheme: Empowering the True Expert of One's Own Experience

This subtheme demonstrates how the participants enacted power redistribution. Individuals seemed to adopt practice techniques through experience, such as recognising patterns in their school systems, leading them to prepare for recurring incidences. Some participants provided suggestions to empower families by providing culturally relevant recommendations. The CRCT arose as a means to elevate consultee voice and empower parents/carers to share their cultural experience.

FG1:

Referral forms are documents that SENDCOs fill out and send to EPs to provide background information detailing the child's needs. The referral form includes personal details such as the CYP's home language, age, and gender, as well as baseline information regarding the school and home contexts. SENDCOs may make assumptions based on their knowledge of a child, leading to incorrect background information.

"Sometimes in schools where I know maybe the SENDCOs are a little bit less collaborative with parents I'll actually bring the request form and kind of show them because sometimes the SENDCOs kind of filled in like home language and ethnicity, but actually the parents will kind of correct that and be like actually, no, we speak this other language as well and that's actually incorrect." (QEP-5, FG1)

By bringing the referral form into the consultation space, QEP-5 redistributed power to allow the consultee to name aspects of their identity and ensure assumptions were corrected. A mixture of institutional biases and convenience became embedded, reducing the frequency of collaboration. SENDCOs hold high levels of responsibility and carry high workloads. This may reflect a culture of unconscious bias or the systemic failings to keep CRP in the forefront.

Considering cultural experiences was important throughout T/EP involvement with schools and families. This may not always lead to improved outcomes but may generate a deeper understanding for cultural context that may be unbeknownst without cultural curiosity.

"Rather than just saying "OK parents should be doing these things", you could kind of maybe delegate to another member of the family that might be living with the child and have a really close relationship with them so I think just being aware of who, what I guess a primary caregiver would be and the different adaptations when it comes to culture." (QEP-3, FG1)

QEP-3 described an experience working with a family whose culture honoured the maternal grandmother as the main caregiver for the family. QEP-3 explained the impact of making cultural assumptions. Professionals can demonstrate cultural appreciation by exploring what a primary caregiver looks like through enquiry and exploration with families.

FG2:

Providing a flexible and accessible tool or framework can relieve the cognitive load from consultants, who are already leading different aspects of the involvement. This could renew

the practicalities of CRP and empower consultees to take more authority to share information they feel is relevant and important to them or their CYP.

"I think I prefer to show other people and kind of let them explore the different areas and kind of, yeah, pick out questions that they want to explore more." (TEP-1, FG2)

In diverse boroughs, it is highly likely there will be consultations with people who have English as an additional language, as recognised in the following extract. There may also be invisible or visible differences impacting communication. Having a visual tool can help consultees interpret the meaning behind the different areas of the CRCT without needing to use the questions.

"I presented the visual and people could look at it because I didn't show any of the questions or anything, I just asked what resonated with you and they picked an image and then the conversation took from there. So, I think the visual is helpful and if I think about it in a context where, you know English might not be the first language or, you know, there might be some sort of communication difference or difficulty, then, you know, the visual could be quite helpful as well in communicating what I might be asking." (TEP-2, FG2)

The participants used the tool to help with their discomfort in asking culturally curious questions. This showed how a visual tool can be consultee-led. TEP-1 considered the possibilities the CRCT had in bridging language barriers and assisting mutual understanding amongst the triad.

Theme Summary

'Knowledge is Whose Power' explored the idea that there needs to be a systemic reconsideration of what information counts as relevant. Modelling helped consultees view identity as a topic that could be spoken about in the consultation space, as it redistributed the risk of vulnerability from family to practitioner.

TEP-4's careful framing of conversations uncovered a different type of leadership whereby the conversation was managed to allow for openness. In addition, gaining a deeper understanding of the setting helped create the architecture for naming sameness and difference without causing defensiveness or closure. QEP-1 revealed that leading by example could happen in peer spaces where CRP becomes normalised rather than exceptional.

The paradox identified that EPs must enact CRP whilst navigating an experiential gap. The tool helped to address this by redistributing power for families to decide what becomes relevant data during consultation. EPs cannot simply 'give' authority to families due to the institutional structure of consultation placing the EP as 'expert'. However, EPs can create conditions through modelling, framing, and structural tools to make the family expertise more visible, actionable, and authoritative. The next theme, 'The Russian Doll' extends this principle further, showing how epistemic justice can be designed into tools themselves.

4.4 Theme Four: The Russian Doll

A Russian or matryoshka doll is a set of nesting dolls symbolising motherhood and family unity (Nesting Doll, 2019). The metaphor is used extensively across the social sciences to represent the 'nested approach' where smaller components are constrained within larger ones (Chong & Graham, 2013). This allows researchers to study interconnected levels, such as

micro, meso, and macro contexts in unity (Chong & Graham, 2013). The Russian Doll as a metaphor captures how the tool contains multiple possibilities nested within a single form. It also represents the many layers of personal and systemic contexts that need to be addressed and appreciated to break the projection loop and consistently enact CRP.

'The Russian Doll' analysis differs from the preceding themes in drawing exclusively from focus group two. This reflects the nature of what the theme captures; the possibilities the tool provides in terms of power and professional reach. These reflections were only available to participants after they engaged with the tool, and it is their voices in FG2 alone that populate this theme. The CRCT can be used in Team around the Child (TAC) meetings or consultations, with parents/carers or young people, by EPs or other professionals, explicitly or implicitly. Each context can be addressed by a different face of the same structure.

4.4.1 Subtheme: The Inception of a Microcosm

This subtheme captures the expansion of the tool beyond its initial design and purpose. The participants imagined the tool spanning EP practice and beyond into other helping professions. The word 'inception' represents the early stages of establishing wider tool use, and 'microcosm' represents the small artifact (a consultation tool) reflecting a larger purpose (spanning professional practice).

QEP-4 grounded the inception of a microcosm in evidence by naming real professional spaces that the tool had organically shown up. These specific contexts demonstrated how the tool can support areas beyond its original design.

"I think it could be a really helpful sort of vehicle, especially like not just consultation, but you know, like TAC meetings particularly, or, you know, for around exclusions particularly like views on education. I think that they are some really interesting questions, actually, that I know I've, you know, explored some of this within some of the TACs I've been a part of, so I think, yeah, sharing it with school partners." (QEP-4, FG2)

Each context is an example of the tool's flexibility, allowing it to enter different contexts without the need for adaption. EP practice contains varying and unique contexts. It is a relational and helping profession that intertwines with other helping professions, for example in multidisciplinary meetings. CRP is one, but not the only, area that professionals working with families are required to adhere to. A tool that can be accessed in multidisciplinary spaces can help create a shared understanding of the families /TEPs work with, and dispersing the CRCT amongst them can create synergy within CRP with families.

"It's like a cascade model, like this is the kind of the beginning of it and then the more people are aware of it, I guess it increases like how effective it is, how well known it is, parents may be aware of it before we get in there" (TEP-3, FG2)

TEP-3's systemic vision showed how the tool could support CRP in a variety of contexts across professional domains. The contemplation may lend to the few existing tools and frameworks that put CRP in action whilst distributing power amidst the triad.

QEP-1 explored the impact that the CRCT could have if it was embedded into EP training. This indicates TEPs are best placed to initiate systemic change through the learning and implementing of frameworks that address systemic challenges, such as reactive CRP.

"I think it is important for it to be embedded as a framework during training… for it to be a constant focus…across practice." (QEP-1, FG2)

It is unclear whether this feeds into the projection loop, as it shifts responsibility away from EPs who "Can get a bit…set in their ways" (QEP-1). It also recognises that the system needs to be ruptured and TEPs who are building their 'tapestry' may have the opportunity to build the confidence and skills to explicitly bring CRP into the professional spaces they interact with.

4.4.2 Subtheme: One Look, Many Faces

This subtheme reflected the progression from my intended use for the CRCT as a consultation tool, to a resource for different areas of EP practice. The tool's interactive features and flexible functions made it relevant to various professional contexts. The retrospective application of the tool generated dynamic conversations between participants, and I interpreted this as hope that tools and resources can address a critical structural gap that the CRCT addresses.

The CRCT was positioned as holding opportunities for multi-disciplinary use. TEP-3 acknowledged professions that have similar face-to-face consultations and reflected how our contexts cross over. The tool was framed as an instrument to ensure CRP is accessible across disciplines.

"It kind of gives more opportunities for things like CPD training, things like that, so just expanding its reach. I think it's easily adaptable for a school setting… I think a lot of people would benefit from it outside of the EP profession. Or even if it's not schools and maybe

speech and language therapists [SLT] or occupational therapists [OT] because everyone's kind of got that face-to-face consultation with either a child or a parent in the same diverse boroughs that we would all work in. They're kind of meeting the same people that we are so they could also benefit from having this kind of framework to know how to effectively and sensitively manage that [CRP] and explore that as well." (TEP-3, FG2)

TEP-3 acknowledged the potential of families meeting an array of helping professionals. The idea that having a tool that all professionals are fluent in, and can use with families, creates familiarity. This normalises the use of a single framework that considers culture and identity as significant in our work. This also normalises consultees talking about how they experience identity and sharing what they feel is relevant with professionals, something that the CYP in 'The Permission Gap' struggled to do the first time he was faced with the task.

QEP-1 grounded the CRCT in the EP profession. QEP-1 recognised the different roles EPs have and how the tool can facilitate opportunities for personal growth through supervision, leadership, and within multidisciplinary work. This echoed TEP-3's reflections on MDT use, but provided the QEP context stemming from their extended experience.

"Whether your role is quite SEMH focused or if you're working in the early years or if you're, you know, in leadership or supporting supervision, it's like this is an area that spans tribunals, like, you know, it spans all areas. So, it is definitely an important area to focus on." (QEP-1, FG2)

TEP-1 began to embed the tool in consultation and planned to expand the ways the tool can be applied more widely throughout their practice. This encapsulates 'one look, many faces',

as TEP-1 drew on the interactive visual elements and how young people may 'take ownership' over sharing aspects of their identity as well.

"I think maybe as well, if you're using it with a young person or someone, yeah, a child or young person who's older, I suppose maybe that interactive element might be beneficial and a young person might enjoy kind of clicking on the different areas themselves and taking ownership of it that way. So that would be something I'd like to try actually in future as well, using it with a young person as well as in consultation."
(TEP-1, FG2)

When tools become embedded into practice, the relationship with dis/comfort shifts. It becomes easier to recognise where the discomfort lies and tools can be used to support that discovery. There is also a behavioural shift occurring. Whilst there was a tentative approach to CRP, with practice and consistent use, there is a shift towards exploration for more opportunities and contexts. This indicates the CRCT, or preferable tools and frameworks that become embedded in the EP toolkit, can become familiar enough to experiment with, allowing for the stretching of contextual application.

4.4.3 Subtheme: Epistemic Justice

Epistemic justice is a concept introduced by Fricker (2007). I am using this concept to recognise the redistribution of power the CRCT has demonstrated. Epistemic justice ensures fairness in knowledge production, sharing, and the validation of marginalised voices (Fricker, 2007). Throughout this subtheme, the participants describe moments where power imbalance can be readdressed to elevate consultee voices to ensure their contributions are heard and appreciated organically within consultation.

The tool is enacting a process of explicit CRP that self-disclosure and modelling cannot do alone. It externalises the agenda, distributes choice, and creates a structural counterweight to the EP's institutional authority.

"I think the accessibility of it all, being very visual, kind of letting the parents or carers lead per se, I think gives them that bit of autonomy as well and confidence within the consultation. I think it makes it more balanced. You have to be aware of like your power imbalances as well when you go into these meetings. So, I think, yeah, overall, it's really helpful for practice." (TEP-3, FG2)

TEP-3's acknowledgement that power imbalances exist even whilst you are trying to counteract them is honest about the limits of that redistribution. The tool helps this, although it does not solve issues of power.

The tool is not something that is done to consultees, but is something that is done by consultees, should they wish to. They have the power to share as much or as little as they want, explore as many or as little areas, to fully engage, or reject it.

"I guess it would give like options in terms of like for people in the room. What's meaningful for them and what they might want to bring up, rather than it being like imposed on them." (QEP-2, FG2)

The use of the word 'imposed' highlights the structural conditions for choice that the tool creates. Offering choice is a redistribution of power, whether the consultee uses it or not. At

the very least, CRP is not gatekept by EPs who have the expertise to navigate relational dynamics, create 'safe spaces', and create systemic interventions. It is offered structurally, interactively, and in an oft consultee-led manner. This helps to disrupt the projection loop as consultants only have to consider their own discomfort - perhaps with introducing the tool - whilst the consultee manages the depth and breadth of cultural exploration based on their own comfort and readiness. However, the nature of the tool is it is adapted to suit the style of the consultant, which has generated the discovery of its expanding use past consultation, as demonstrated in the data.

Theme Summary

'The Russian Doll' theme provided a perspective that tools carry possibilities and constraints, which are built into their design. The CRCT's generative capacity, as documented across FG2, stems from its flexibility. It can be adapted to different contexts without requiring redesign. Its accessibility through the visual and interactive features work across language and communication differences. 'The Inception of a Microcosm' showed participants considering the tool beyond its original consultation context.

QEP-4 named TAC meetings, exclusion processes, and school partnerships as spaces where the tool had organically appeared. TEP-3 envisioned a cascade model where familiarity with the tool spread across professionals, encourages more culturally responsive enquiry across professions. QEP-1 grounded the vision in training by considering the impact of embedding the tool early and becoming a part of the foundational toolkit that TEPs can draw upon to make up their 'tapestry'.

‘One Look Many Faces’ documented the tool’s adaptability. The same visual structure was applied to parents in consultation, young people exploring their own identity, SENDCOs thinking about whole-school approaches, and other professionals (SLTs, OTs) working with the same families in different contexts. TEP-1’s vision of a young person “clicking on different areas…taking ownership” showed how the tool can enter multiple contexts without requiring expertise to deploy it.

Epistemic Justice showed the tool supporting what individual practitioner skill has struggled to do alone. TEP-3 and QEP-2 both identified how the tool redistributed power through structure. The consultee chooses what to explore, what to engage with, and what to leave untouched. The word ‘imposed’ became central to the notion that offering choice, even if the choice is to reject the tool, is a form of epistemic justice.

5 Discussion Chapter

5.1 Introduction

This study explored how Trainee and Qualified Educational Psychologists experienced implementing CRP in consultation. The focus was on a co-created culturally responsive consultation tool (CRCT). Despite this policy context, a gap remains. Whilst local authorities and schools may identify as 'anti-racist' or 'culturally responsive', these overarching declarations obscure how, and whether, these commitments are adopted by individuals during practice (Parsons, 2022). This research addresses this gap by examining T/EPs' experiences of trying to enact CRP during consultation.

It was designed to be exploratory, collecting data at two-time-points (before using the CRCT and after using the CRCT). Ten participants (5 EPs and 5 TEPS) from a single London borough took part in the study. Following training on the CRCT, participants were invited to take part in a focus group. Focus group one explored the experiences of CRP before engaging with the CRCT. Focus group two explored the experiences after using the CRCT in practice. Using reflexive thematic analysis, I generated four themes, 'Protection in Projection', 'The Permission Gap', 'Knowledge is Whose Power', and 'The Russian Doll'.

To capture the CRCT's impact on participants' practice, I have drawn on Miranda Fricker's (2007) Epistemic Injustice. Testimonial justice occurs when a speaker's word is not given credibility by the recipient (Fricker, 2007). I will draw on Fricker's (2007) concept of hearer responsibility to understand how professionals working with parents/carers, and CYP, can be positioned to elevate speakers' voices. To address the cycle of discomfort that was projected into the consultation space, I drew upon Safran and Muran's (2000) concept of rupture and repair. Rupture and repair can be defined as a tension or breakdown within a therapeutic relationship, and the subsequent addressing of the breakdown to the benefit of the

client (Safran & Muran, 2000). In this case, the breakdown refers to the gap in structural support for CRP, which is addressed to support the explicit enactment of CRP.

By merging Fricker's (2007) theory of Epistemic Injustice with Safran & Muran's (2000) Rupture and Repair, which informed one of my subthemes, a conceptual contribution was created. Later in this chapter, I will present the 4R Framework that I have developed to support practitioners locate themselves within the cycle of recognition, rupture, redistribution, or repair (4R) across consultation, supervision, MDT projects, or other contexts in which they operate. This framework complements existing tools by making CRP context-dependent and non-linear. Finally, the chapter addresses research limitations and implications for training and practice, including opportunities for dissemination. The chapter concludes with a personal reflection about my research journey.

5.2 RQ1: How Do T/EPs Experience the Implementation of Culturally Responsive Practice in Consultation?

This section primarily addresses data gathered during FG1. This is because FG1 provides an understanding of how T/EPs engaged with CRP when no in-the-moment resources were available. Conversations across both T/EP groups also demonstrated how psychodynamic barriers impact both T/EPs during consultation.

The data showed that implementing CRP in consultation can be uncomfortable, ambiguous, and inconsistently applied. The qualified EP group were able to draw on wider role contexts beyond consultation, such as multidisciplinary teamwork, where they felt a greater opportunity to develop relationships, leading to more moments to enact CRP. Ambiguity was identified as the primary challenge, leading to potentially missed opportunities (QEP-1) and practitioner self-questioning (QEP-2), rather than to explicit, consistent, and equitable CRP. I identified a pattern in 'Protection in Projection' in which practitioners projected their own discomfort onto families. This created a self-fulfilling

prophecy, recognising that cultural conversations may be perceived as more harmful than helpful. 'The Permission Gap' guided me to identify the shared uncertainty of whom initiates cultural conversations amongst the triad. This ambiguity produced collective waiting, rather than action. These two themes demonstrated how barriers to CRP were operating at both psychological and systemic levels. The psychological impact of ambiguity and discomfort were interpreted as defence mechanisms, whilst the systemic challenges were theorised to feed a projection loop.

This section illustrates how professional EPs (and SENDCOs) may unconsciously discredit the voices of consultees and clients through inaction. Fricker (2007) recognises how human judgement is fallible and how even the most skilled and perceptive professionals can mistakenly discredit others. The research provides a new lens to understand what contributes to inconsistent CRP and the silencing of consultees and clients. To do this, I must explore the individual barriers and why they might lead to inconsistent CRP, and the inevitable silencing of consultees. The barriers are not a reflection of the individual skill and care professionals have, but a reflection on what is enabling silencing to continue.

5.2.1 Protection in Projection

In FG1, participants consistently described avoiding cultural conversations. The avoidance stemmed from projected anxiety, assuming families would feel uncomfortable discussing race, culture, or identity. This acted as justification for not initiating cultural conversations. QEP-2 captured how the projection loop could be experienced: "I feel more comfortable when a family feels comfortable…or maybe it's my own shying away…" QEP-2 initially expressed concern for the consultee's comfort, but quickly acknowledged their own avoidance. QEP-2 recognised their own discomfort and how this may have impacted their ability to honestly interpret the consultee's feelings about CRP. For QEP-2, the projection

was an automatic defence mechanism that held a threat of the unknown (Kozlowska et al., 2015). Another example of how projection can operate was demonstrated when TEP-1 shared: “when it’s more of like a visible difference…the parent or carer might be taken aback.” TEP-1 reflected on the discomfort that cultural curiosity may provoke when consultees are from a different racial or cultural background to the practitioner. However, TEP-1 assumed discomfort on behalf of the consultees without confirming this stance. By externalising the discomfort, TEP-1 was enacting a protective response.

To make sense of the participants’ experiences, I considered how projection may stem from feeling uncontained in a space that they are expected to contain (Bion, 1962). This may lead to an unconscious deflection to protect their professional identity, by masking their discomfort as someone else’s (Festus, 2025). This would not disrupt the power imbalance completely, as EPs hold the expert position in the triad and rely on this structure being maintained. However, this assumption compounds the projection loop, leaving it unchallenged and allowing projection to go unaddressed.

Freud (1894) described projection as a defence mechanism in which one’s unacceptable thoughts or feelings are attributed to others. The participants were not interpreted to be consciously dismissing cultural conversations. However, I understood them to be unconsciously defending against the discomfort by locating it within the consultees. Their avoidance was framed as client-protection, whilst functioning as self-protection. During focus group one, two participants identified their discomfort towards addressing CRP with consultees. However, the subject of the projection quickly shifted towards parents/carers and their perceived discomfort, to SENDCOs and their unconscious bias as a barrier to CRP. I interpreted this shift as a moment where participants battled against the unconscious pull of projection. By naming SENDCOs and their unconscious bias as a key barrier to CRP, the participants seemed to shift the focus from their deficits onto another powerful member of the

triad. This power play identified how EPs may be positioned as 'experts', but without explicit structures to enact it in practice, CRP makes the system tremble. Participants could not fully commit to breaking away from the projection loop independently, and were drawn back into the cycle that had been protecting them.

My interpretation of projection led me to consider how ambiguity around CRP implementation operates systemically, rather than at the individual level. CRP is a requirement of BPS (2021) and HCPC (2018), yet not embedded systemically. This requires individuals to draw on their knowledge, skills, and confidence to enact CRP. The system creates conditions where projection, which I have identified through the data, can remain unchallenged. Ahmed (2012) observes that when diversity work is framed as 'everyone's responsibility', it becomes no one's specific obligation. My findings support this by demonstrating how cultural conversations rely on individuals. Without structural support, projection overrides the need to enact.

Projective identification, which Klein (1946) describes as the splitting of unwanted parts of the self, which is then projected onto others, extends this understanding. EP projections create an expectation that cultural conversations are situational. EPs may model talking about identity through personal disclosure (QEP-3), bring in the referral forms (QEP-5), or by adopting another creative approach. This inconsistency sends the message that EPs will enquire about race or culture when they feel it is necessary. Frequency and approach rely on practitioner confidence and skill set, and the lack of systemic support feeds the discomfort, which leads to testimonial injustice.

Fricker (2007) describes a type of testimonial injustice attributed to excess credibility. An example of excess credibility is a professional, in this case an EP during consultation, who is the only access point to certain forms of information that a parent/carer request. The parent/carer assumes the EP is in a position to provide the information they need, or to enact

the enquiry relevant to the consultation (Fricker, 2007). Yet, the EP may struggle to enact certain lines of enquiry as they may not have the knowledge or resources to support it. For the EP to disillusion the parent/carer of their inflated view of consultant expertise, they run the risk of damaging the working relationship by undermining parent/carer confidence in the EP (Fricker, 2007). This means that the EP may continue their line of enquiry that aligns with their capacity or capability, avoiding factors that would be too difficult to navigate. As a well-educated professional, the EP is in an advantageous position, but can become disadvantaged when the expectation placed upon them surpasses their ability (Fricker, 2007). In the context of consultation, when challenging factors arise, such as enacting CRP with little support or balancing ethical barriers with practice requirements, the EP may defend their excess credibility for the sake of the helping relationship (as well as protecting the professional ego). They enact the projection loop by placing their discomfort onto consultees, thereby manipulating their professional credibility to mask practice discomfort, in this case CRP.

By drawing on Fricker (2007), it becomes clear how projection can lead to testimonial injustice in EP practice. QEP-3's re-telling of the Black young person's account highlights how calling out the absence of cultural conversations can still leave it "brushed aside", as projection becomes an ever more impenetrable cycle. The rhetoric around cultural conversations as 'uncomfortable' or 'sensitive' strengthens, blurring the line between ethical responsibility and role requirement. The boy's cultural testimony was being silenced at a time when racial injustice was globally present. This example is one account nestled in a culture of pre-emptive silencing. QEP-3 did not contest the young person's experience, but the defensive projection served as an unconscious justification for not initiating CRP. Not offering explicit CRP at the outset of their working relationship was the product of projection. Systemic discomfort, and a lack of structural support for flexible, in-the-moment

CRP, encourages the projection loop and impacts those whose voices are least credited within the system (Fricker, 2007).

Across the literature, EP discomfort was named as a barrier to CRP. My findings reinforce the idea that practitioners do experience discomfort, which requires ongoing opportunities for reflection. Three tools discussed in the literature review demonstrate this. First, Sakata et al. (2024) described practitioner anxiety when exploring cultural issues. She developed a self-reflective framework for CRP addressing "hot spots" (strong emotional reactions), "blind spots" (lack of awareness), and "soft spots" (over-identification). Second, Lichwa et al. (2024) emphasised white practitioners' responsibility to self-educate on race and culture, rather than expecting those from the global majority to educate them. Lastly, Ratheram and Kelly (2023) acknowledged the "emotional and mental labour" of continuous cultural reflection and advocated for "safe spaces" where practitioners can explore discomfort without judgment.

These frameworks positioned discomfort as something that could be addressed through self-reflection. However, I theorise that discomfort operates defensively through projection. This is a psychodynamic process, which self-reflection cannot interrupt alone, as it operates unconsciously to protect practitioners from vulnerability. The projection loop posits that awareness alone cannot interrupt the psychodynamic barriers, but creating conditions that make CRP consistent can, especially as discomfort appears to peak during consultation.

Ratheram & Kelly (2023) found that practitioners can reflect deeply on cultural differences with colleagues but still experience anxiety when engaging in CRP during consultation. The "safe spaces" for reflection exist outside of consultation, whilst projection operates inside it. Lichwa et al.'s (2024) participants also reflected on their discomfort when addressing CRP. The PRIT framework for culturally responsive training prompts

practitioners to consider language and imagery, and to reflect on who is best placed to deliver the content (Lichwa et al., 2024). Prompting facilitators to reflect on whether they are best placed to present creates a gap in the 'doing' of CRP. My findings support this suggestion; it does not necessarily support the notion that practitioners may not be best placed to deliver CRP. However, if participants did not feel comfortable to be culturally inquisitive, they often did not enact it. For example, TEP-2 used Sakata's (2021) Culturally Responsive Reflective Framework in supervision, but struggled to apply their skills when delivering explicit CRP during consultation. Frameworks therefore can support the development of cultural and relational competence and personal reflection, but the barrier to enactment still exists.

This research is the first empirical demonstration of how projection may be operating as a barrier to CRP in Educational Psychology consultation. Whilst previous research identified discomfort as a barrier to CRP in consultation, there is no reference to the defensive processes that prevent discomfort from being addressed. My research reframes the problem by viewing projection as a self-fulfilling prophecy, assuming discomfort is situated within consultees (Klein, 1946). This assumption is seldom tested; thus, the projection loop continues. The reflective frameworks evidenced throughout the literature demonstrates the desire to engage with CRP, but discomfort is repeatedly named as a barrier with no support for the duration of consultation.

5.2.2 The Permission Gap

The Permission Gap addressed the systemic barriers to culturally responsive consultation. Participants described CRP as theoretically everyone's responsibility, with TEP-3 sharing it was up to "everyone in the room", but practically, no one had a clear obligation to enact it. Responsibility seemed to be diffused, and each person's hesitation influenced the others.

The data identified a pattern of multidirectional waiting to initiate CRP within the triad. EPs waited for parents/carers to indicate openness to CRP: “Can we receive that information?” (QEP-3). Parents/carers appeared to wait and assess whether the consultation space was safe before disclosing cultural experiences, and SENDCOs appeared to wait to be led by EPs. This circular waiting meant conversations rarely happened, with each party assuming the other would initiate. Whilst the perspectives of parents/carers and SENDCOs were formed by the T/EPs, it demonstrates how a lack of systemic certainty or permission to initiate CRP can, in some cases, lead to its dissolution.

Concerns around timing compounded the ambiguity, with TEP-5 describing an ethical barrier around the length of their involvement whilst working with a refugee family: “How much do we unpack while maintaining a safe environment where the parent and the child can still leave the consultation feeling regulated and continue with the rest of their day, so I'm not inflicting harm on them in terms of my involvement... It's like an ethical barrier.” The question reflects genuine professional judgement of containment, limited involvement, and risk of harm. However, the outcome of not exploring cultural experiences parallels defensive projection. Ethical uncertainty and defensive processes can become indistinguishable, leading to the same outcome of silencing cultural testimony (Fricker, 2007). For example, QEP-1 reflected, “Should I have brought it up sooner?” after working on a youth justice case, questioning whether waiting for the right moment meant nearly missing the opportunity for cultural enquiry altogether. Both examples highlight the systemic conditions that create the uncertainty which feeds defensive projections.

Latane and Darley’s (1970) bystander effect theory demonstrates diffused responsibility. When everyone can enact CRP, individuals feel less personally responsible for acting. When the SENDCO, class teacher, parents/carers, and EPs are all present, each can assume someone else will initiate cultural conversations. When it does happen, I discovered

SENDCOs bring cultural reflections of the family to EPs privately, EPs wait for the "right time" or default to strategies such as self-disclosure, and families may share once they feel safe. This connects to Ahmed's (2012) analysis of how institutions resist diversity work by diffusing it across many people and spaces, so no one is specifically accountable. When CRP is positioned as "everyone's responsibility" without procedures designating who initiates and in what context, it becomes no one's responsibility in practice.

However, EPs are positioned to hold power and expertise in consultation, as they enable the flow, lead the formulation, and write the recommendations (Gutkin & Curtis, 1990; Wagner, 2000). The power asymmetry created an assumption that if cultural issues are important, the EP will raise them. This can lead to a conflict of wills, as EPs are expected to initiate as they hold legitimate power (French & Raven, 1959), but hesitate to in fear of causing harm. Legitimate power concerns a person's title, rank, or standing (French & Raven, 1959). It is based on the idea that people are expected to follow those who hold dominant social positions, in this case the EP (French & Raven, 1959). Families and school staff, therefore, may wait for the EP to initiate, assuming the EP's professional judgement determines what is relevant. However, cultural conversations can be emotionally difficult and potentially re-traumatising (Steed & Kranski, 2022), and EPs are required to follow professional standards outlined by the BPS (2021) and HCPC (2018) to avoid ethical harm. The worry about relevance (QEP-2; TEP-5) further complicates this, as including cultural conversations risks harm, and EPs may need to justify its importance. They also risk CRP becoming tokenistic, deepening feelings of discomfort and uncertainty (Ahmed, 2012). When systems offer no guidance for resolving this tension, projection becomes a psychologically convenient way to address an ethically complex situation.

McGrory-Cooper et al. (2024) identify gaps in culturally responsive consultation training and propose a stage-based model that includes self-assessment, educational readings,

case studies, role-plays, and supervision. Their model acknowledges that training alone is insufficient and practitioners need structured support throughout the profession. My findings also show that despite having knowledge of CRP, practitioners still experience uncertainty when initiating CRP in consultation. Systemic structures can help T/EPs navigate the ethical dilemma by accepting their legitimate power (French & Raven, 1959) to lead CRP, whilst distributing the power amongst the triad. It provides a clear indication of who is providing the tools to enact CRP, whilst allowing different members of the consultation triad to engage and exercise their own power (Kennedy et al., 2021). It provides the opportunity, but does not force engagement, which addresses the ethical dilemma, whilst respecting the right to cultural testimony.

The existing literature on CRP frameworks do not explicitly acknowledge the systemic processes that prevent CRP, despite practitioners being trained and willing to enact it. McGrory-Cooper et al.'s (2024) training model prepares trainees conceptually, but its effectiveness relies on self-reported outcomes rather than empirical evaluation of practice change. Parker's (2020) finding that the eco-behavioural model encourages greater CRP does not explain why practitioners struggle to apply it consistently. The Permission Gap addresses this by acknowledging that training prepares practitioners, and models provide structure, but when no systemic process exists, collective waiting persists. The gap does not operate at the individual level, but recognises systemic instability makes CRP individually optional, rather than systemically embedded.

Whilst the literature addresses the barriers EPs face in implementing CRP, it does not explain why trained and willing practitioners still wait to implement it. The Permission Gap identified the assumption that CRP is everyone's responsibility, when EPs are the members of the triad professionally required to take up their legitimate power to enact it (French &

Raven, 1959). This contradicts the ethical obligations that EPs should enact cultural responsiveness, further feeding the discomfort and ambiguity.

I identified a critical shift within the TEP group between FG1 to FG2 and their attitude towards CRP. Before the tool was used, the TEPs expressed concern around initiating CRP despite knowing it was something they were consciously thinking about before FG1. When the CRCT was used in FG2, they shifted from concerns and fears associated with how CRP may be received by consultees, to gaining the confidence to try. The key priority TEPs named was redistributing power, which removed the pressure from them as "experts", when they may not feel like experts yet, due to their position as learners at the beginning of their practice journey. When TEPs used the CRCT, they reflected on how power can be redistributed. The tool could allow consultees "to pick out questions they wanted to explore" and TEP-1 realised that: "the visual could be quite helpful as well in communicating what I might be asking".

5.2.3 Section Summary

Protection in Projection recognised how defensive processes operated at the individual level. When systems provided no in-the-moment support, projection became a psychologically convenient resolution. The Permission Gap demonstrated how systemic barriers created conditions where defences appeared professionally justified. Together, they formed a mutually reinforcing cycle where psychological defences were enabled by systemic ambiguity. This created a situation where discomfort was rationalised through psychological defences.

5.3 RQ2: What Helps to Embed Culturally Responsive Practice in Educational Psychology?

The findings addressing RQ2 demonstrate the shift from testimonial injustice towards epistemic justice. It identifies how CRP requires intervention at both the psychological and systemic levels. The shift represents a journey where T/EPs recognise and work through projection and consider how CRP can be embedded more consistently. This section draws on data from both focus groups to show the development from barriers (FG1) to possibilities (FG2).

5.3.1 Individual Practices that Support CRP

Participants described individual practices that created openings for cultural conversations when structural support was absent. Self-disclosure emerged as a key strategy. Two EPs described how they use modelling to encourage parents/carers to talk about identity: "I might share something about myself being of dual heritage to kind of model or open something up."- QEP-3. Through self-disclosure, the EP created the conditions for families to share their cultural experience. However, this approach required T/EPs to feel comfortable disclosing their own cultural positioning, creating tension for those who experience their identity as a barrier. For example, TEP-1 shared: "As white women, can we really know what it's like being a young black girl and kind of truly empathise with the mum and what she's experiencing?" TEP-1's identity acted as a barrier to CRP, considering how they would be perceived by the family during cultural exploration. This echoes the Permission Gap's power-ethics paradox, in which individuals could create openings to explore culture and identity but relied heavily on confidence, skill, and a willingness to be vulnerable.

Planning meetings featured prominently in FG2, with TEP-1 and TEP-2 describing how making CRP explicit during planning meetings could set a precedent for cultural enquiry and exploration. Rather than waiting to see whether cultural issues "came up" in consultation,

offering the CRCT in planning meetings made cultural enquiry present from the outset. This shifts the focus from questioning whether to address cultural identity, to creating a strategy to openly offer it. The TEP group also spoke about introducing the CRCT at the beginning of consultation, offering the tool to enact cultural exploration. However, this remains theoretical, with participants from both the TEP and QEP group sharing their future intentions to introduce the CRCT to contract its use during planning meetings, as a form of embedding CRP. This demonstrates how recognition and planning are important steps towards breaking the projection loop, and contracting during planning meetings seemed to be a way to make CRP explicit, with the CRCT acting as a scaffold for in-the-moment exploration during consultation.

Supervision and peer reflection spaces provided containment for practitioners to name their projection and work with discomfort outside consultation. Participants valued spaces where they could acknowledge their avoidance without judgment. QEP-1 shared: “Spaces to pause with groups of EPs are incredibly powerful…if there is a particular tool that increases cultural curiosity…it can be shared”. This quote illustrates how systemic change happens when EPs come together and unify on change that can be implemented beyond themselves. Supervision and reflective spaces were also considered valuable for the emotional containment needed to process the anxiety associated with implementing CRP, and returning it in a manageable form through enactment (Bion, 1962). Participants who could name that they were projecting their own anxieties of CRP demonstrated how, over time, automatic defensive processes could be interrupted (Bion, 1962). Ratheram and Kelly (2023) emphasised the importance of creating safe spaces where practitioners could reflect without fear of judgment when sharing challenging topics such as racism or cultural differences. Their participants valued these spaces, which resonates with my findings. However, safe spaces exist outside consultation, whilst projection operates inside it. Therefore, practitioners

may be able to process defensiveness outside of consultation, whilst still struggling to interrupt it during consultation.

Across FG1 and FG2, I identified a desire among participants to redistribute power as well as their struggle to do so. The participants who used the CRCT described instances of power redistribution, highlighting its ability to support this process. Two participants explained how presenting the tool created conditions for families to share their cultural experiences. This is an example of epistemic justice, whereby the CRCT enabled redistribution of power and allowed consultees to share their cultural testimony. When CRP remains at the individual level, it remains unstructured and risks being avoided.

Sakata's (2021) Culturally Responsive Practice Self-Reflective Framework provides structure for both intrapersonal and interpersonal development. This actively pushes the topic of cultural responsiveness up organisational systems, shifting it from an individual consideration to a systemic act. My findings strongly support this dual focus, as participants valued both individual reflection and relational spaces. Sakata's (2021) framework provides guidance on interpersonal and intrapersonal reflection for EPs to examine their culturally responsive practice, the CRCT compliments this by providing structure to enact CRP mid-consultation.

5.3.2 Systemic Processes that Support Culturally Responsive Practice

Participants described systemic processes that helped to embed CRP. QEP-1 considered how annual reviews encourage reflection on CRP, as it requires EPs to provide evidence of their CRP. At the systemic level, appraisal targets address the question of "whose responsibility is it to initiate conversations?" The system requires EPs to demonstrate cultural responsiveness through measurable outcomes during appraisals. This is echoed amongst

trainees, who are required to meet the competency to work in a culturally responsive way (Competency 1a: BPS, 2022, p5: HCPC, 2023 p13).

Consultation models and frameworks emerged as structural supports when explicitly embedded in practice. Parker et al.'s (2020) interviews with 15 school psychologists highlighted how individual practitioners adapted their consultations to promote cultural responsiveness by drawing on Ingraham's (2000) Multicultural School Consultation (MSC) framework. Participants demonstrated five strategies: involving others (teachers/parents integrating cultural beliefs into interventions), educating/teaching (developing consultee cultural competence), demonstrating support, engaging in ongoing learning, and addressing contextual/power influences (Parker et al., 2020). These adaptations demonstrated skilled SPs successfully embedding CRP. However, this is dependent on individual skill, as each SP adapted based on their expertise, judgement, and commitment to CRP (Parker et al., 2020). My findings suggest that when CRP depends on individual practitioner skill, consistency varies. When the CRCT was implemented, it helped to remove the fear of personal incompetence. The most common hurdle was deciphering when to introduce the tool, and the confidence to use it explicitly rather than implicitly. However, the TEP group showed how tools can become embedded when they are available, and how their flexible application can make implementation more comfortable.

Training programmes were identified as critical embedding windows for tools and frameworks throughout the study. This was reinforced by McGrory-Cooper et al's (2023) findings. Their stage-based training model for culturally relevant consultation evolved through self-assessment, educational readings, case studies/roleplays, practice methods, and fieldwork, with continuous self-reflection in supervision (McGrory-Cooper et al., 2023). Their model recognises that training and CPD are helpful, but CRP implementation decreases post-training (McGrory-Cooper et al., 2023). My findings mirror McGrory-Cooper et al.

(2023), highlighting that training is a key stage for implementing resources that can become embedded and "a part of the tapestry" of EP practice. McGrory-Cooper et al. (2023) also identify training as a common endpoint, as practitioners complete training and enter independent practice. However, the CRCT can be introduced at any stage across contexts. Participants agreed that the best time to implement was during training and then to continue its application during qualified practice, as it remains applicable across contexts and professional stages. This is especially important, as McGrory-Cooper et al (2023) demonstrate how CRP may dissipate after training, but practicing in new contexts, such as Youth Justice or TAC meetings, can reignite the projection loop if no structure is available to help to identify, punctuate, and address discomfort.

Mcgrory-Cooper et al (2023) highlight inconsistencies across training programmes and their approach to teaching consultation. They identified gaps in preservice training regarding the integration of multiculturalism, social justice, and cultural responsiveness in consultation practice. My findings identified differences in the teaching of, and access to, culturally responsive reflective frameworks, teaching sessions, and reflective spaces. The system does not fully support or provide a consistent approach to accessing training in CRP, yet requires individuals to deliver equitable practice upon qualification.

Across the groups, the CRCT emerged predominantly in FG2 as bridging preparation and enactment. Furthermore, the TEPs shared their plans to embed the tool to support CRP beyond consultation. This led me to the think about the tool's function as a transitional object. Winnicott (1951) suggests that the object itself is not transitional, but supports the infant's transition towards something separate from the mother. To parallel Winnicott's (1951) concept of transitional objects, the transition from university-based teaching to placement represents a significant transition for TEPs, and the tool represents the object to support separation. Whilst Winnicott (1951) posits the object or tool is not itself transitional,

Wastell (1999) suggests tools can reduce the demands of a task and provide psychological support from discomfort. The tool acts as both emotional support for practitioners, where implementation support for CRP currently lacks, as well as a practical scaffold (Wastell, 1999). TEPs are transitioning into a practice environment, and to support that transition, tools and frameworks can be carried from their training programmes into their practice. This mentally connects them to the safe, supportive, and nurturing training environment, whilst providing practical support in the field.

TEP-1 and TEP-2 described plans to embed the CRCT at the outset of consultation, making cultural exploration more explicit. However, some participants, predominantly the QEP group, struggled to break away from the projection loop to use the CRCT. This suggests tools alone do not eliminate psychological barriers but instead provide systemic scaffolding to reduce the individual burden that triggers them. When combined with appraisal accountability, explicit contracting, and training, tools can shift CRP from being dependent on individuals to being supported systemically.

5.3.3 Section Summary

Culturally responsive practice is mostly enacted when individuals are confident or have expertise. Training models prepare practitioners for CRP, but in-the-moment implementation seldom persists without structural supports during consultation itself. Tools that can be embedded systemically have the ability to reduce individual barriers by supporting CRP's enactment. The CRCT is an example of how that gap can be addressed, as it is a response to a systemic gap, and supports in the-moment practice.

5.4 RQ3: What are the experiences of using a culturally responsive consultation tool in EP practice?

In this section, I will examine participants' experiences of using the CRCT. The theme 'Russian Doll' captured the tool's generative possibilities with nested opportunities emerging from a single resource. Across three subthemes: 'Inception of a Microcosm', 'One Look, Many Faces', and 'Epistemic Justice', participants described how the tool functioned as an epistemic intervention and transitional object (Fricker, 2007; Winnicott, 1953). This section demonstrates how a tool created for consultation became generative across EP practice, disclosing a gap that present frameworks do not address.

5.4.1 Inception of a Microcosm

The Inception of a Microcosm subtheme captured participants perspectives on how the CRCT could be expanded beyond its original purpose as a consultation tool for EP practice, into the wider multi-disciplinary contexts. QEP-4 described the tool as: "a really helpful sort of vehicle, especially like not just consultation, but you know, like TAC meetings particularly, or, you know, for around exclusions." Each space QEP-4 highlighted, such as TAC meetings, exclusion procedures, and multidisciplinary work, identified how the CRCT does not need to be redesigned for new contexts. This structural consistency and flexibility distinguished the CRCT from approaches needing context-specific adaptation.

Parker et al.'s (2020) finding that individual school psychologists adapted practice based on context, families, school, and identified need, highlighted their flexibility, but also the effort and inconsistency this creates. Proven strategies in one consultation did not automatically transfer to another, and each context required adaptation (Parker et al., 2020). The CRCT's capacity to translate across settings without requiring practitioners to reinvent the approach addresses Parker's (2020) issue of maintaining CRP across contexts. The tool's

structure remains constant whilst its application flexes to context, lessening the cognitive burden of persistent adaptation.

Rogers' (1962) Diffusion of Innovations theory demonstrates how new practices can spread. Diffusion is the process by which a new object, practice, or idea (innovation), is communicated through certain channels over time amongst members of a social system (Rogers, 1962). Rogers (1962) defines 'social system' as a "set of interrelated units that are engaged in joint problem solving to accomplish a goal" (Rogers, 1962, p. 24). Social systems contain diffusion based on factors like the homophily principle, the idea that most individuals in a system interact with those with a unifying identity (Rogers, 1962). In the case of this study, the unifying identity is being T/EPs, or more widely, being members of the helping professions. TEP-3 demonstrated how diffusion of innovation can be applied to the CRCT: "This is kind of the beginning of it, and then the more people are aware of it, I guess it increases like how effective it is, how well known it is, parents may be aware of it before we get in there." This positions the tool as having the potential to spread beyond EP practice into speech and language therapy, occupational therapy, and school environments through professional networks. This could help normalise CRP, with families potentially encountering the same cultural framework from different professionals, making the process more organic. If families have used the tool with their SLT and teacher, the EP introducing it would, in theory, not be unusual and would establish a pattern of explicit CRP.

The tool's design enables unanticipated applications that users recognise organically through affordances (Norman, 1988). Affordances describe the perceived and actual properties of an object that determine how it can be used (Norman, 1988). When objects have a clear purpose, they afford users to intuitively interact or reimagine objects for different purposes (Norman, 2988). The tool's design produces clear affordances. Participants intuitively envisioned how the CRCT could be applied to different settings, including TAC

meetings and exclusion processes. The tool's visual design, flexible application and interactive facets, organically afforded these theoretical, and multiple applications. The CRCT was identified to have a user-centred design which improves its usability across settings, addressing the gap in structural support for CRP in the EP profession (Norman, 1988).

5.4.2 One Look, Many Faces

One Look, Many Faces captured the CRCT's capacity to serve different user groups, including EPs, young people, families, teachers, and other professionals, whilst retaining its design. This addressed a major limitation with existing tools and frameworks. When CRP depended on specific practitioner characteristics, such as expertise, demographic matching, and individual skill, families received inconsistency.

Hobfoll's (2001) Conservation of Resources (COR) theory explains why single tools can effectively support multiple users. COR theory describes how individuals strive to obtain, retain, and protect valued resources (Hobfoll, 2001). There are four COR domains: object resources (tools, equipment), condition resources (relationships, employment), personal resources (skills, self-efficacy), and energy resources (time, attention, motivation) (Hobfoll, 2001). I will demonstrate how these can support the justification for the CRCT as theoretically addressing the gap in structural CRP tools, identified through the data in FG2.

Helping professions (EPs, SLTs, OTs), can rely on the CRCT's consistent structure if they encounter barriers that reduce their capacity to enact (Hobfoll, 2001). The digital format with prompt questions reduces the cognitive load of generating cultural enquiry during consultation (Hobfoll, 2001). The tool also scaffolds skill development, particularly for TEPs 'building their tapestry' by lowering the competency threshold as they build their skills and confidence (Hobfoll, 2001). Lastly, the CRCT supports the consultation relationship by

creating collaborative conditions in which family testimony is expected, reducing relationship strain from perceived intrusion whilst encouraging agency (Hobfoll, 2001). This helps explain the tool's attractiveness across user groups, as it targets various resources (Hobfoll, 2001). QEP-1's observation that the tool spans 'the early years or if you're…in leadership or supporting supervision…tribunals' shows its versatility.

When resources are threatened or depleted, stress can occur (Hobfoll, 2001). In this context, the threat was the absence of structural tools which led to unconscious projections preventing explicit CRP. The absence of tools and frameworks to support CRP put pressure on individual practitioners to pull on their own resources (individual skill, motivation), which addressed individual CRP, but not systemic CRP. Preserving the same structure while serving different contexts reduces practitioner resource pressures, affording the use of the tool to enact CRP (Hobfoll, 2001; Norman 1988).

Young people as users represented a significant extension of the tool's use. TEP-1 envisioned 'if you're using it with a young person…that interactive element might be beneficial, and a young person might enjoy kind of clicking on the different areas themselves and taking ownership of it that way.' The term 'ownership' signals an epistemic shift from young people being talked about to being the ones to share their cultural experiences. This differs from practitioner-mediated frameworks. Sayegh et al.'s (2023) ADDRESSING guides practitioners to systematically explore identity dimensions, yet the psychologist still determines which areas to explore. Even when used responsively, ADDRESSING requires practitioner mediation. The CRCT's digital interactivity encourages clients/consultees to directly select areas and choose whether they want to engage with the prompt questions. This direct interaction represents epistemic redistribution, as consultees/clients are in control of what they feel is relevant (Fricker, 2007). Marriott's (2023) observation that practitioners use eco-systemic and narrative approaches "alluded to but not explicitly named" captures the

implicit-expert problem. Skilled practitioners adapt responsively, but this skill remains dependent on the individual practitioners. The CRCT makes CRP structurally explicit, as the tool's presence signals cultural exploration, making the practice visible, transferable, and independent of individual practitioner expertise.

5.4.3 Epistemic Justice

This section demonstrates how the tool can be used as a method of redistributing power. Redistributing power enabled consultees to be authoritative about their cultural testimony, reducing the reliance on professionals to initiate. Fricker (2007) suggests that by combating testimonial injustice, institutions and individuals can support the virtue of epistemic justice. The Epistemic Justice subtheme was named to demonstrate how the tool externalised CRP, whilst contesting the notion that CRP relies on EP authority.

Both the TEPs and QEPs reflected on how the tool enabled opportunities for power redistribution. TEP-3 reflected that: 'kind of letting the parents or carers lead' made CRP 'more balanced'. This recognised the tool's ability to help practitioners redistribute power and provides an opportunity for consultees, if they wished to share their cultural experiences. QEP-2 reflected on the possibility for families to reflect on 'what is meaningful for them…rather than it being imposed on them'. This highlighted two things. Firstly, a barrier to CRP can be the EPs' recognition of their institutional power and responsibility clashing with their position in the projection loop. This may take the form of second-guessing whether the family would find it relevant or appropriate, or considering the temporal relationship. Next, the use of 'imposed' draws attention to the illusion of choice, feeding back to the view that if an EP brings a topic, it is important and should be discussed. However, offering choice itself can be a way of redistributing power, whether the consultee chooses to respond or not. Epistemic justice in this sense does not rely on an individual sharing their cultural

experiences, but rather on creating the conditions in which race, ethnicity, culture, and identity can be explored (Fricker, 2007).

In contrast to individual CRP strategies, the CRCT addresses the projection loop, shifting the complexities of managing CRP for the group, to introducing a structure that disperses the responsibility across the triad. I understood from the data that T/EPs were perceived to be positioned, and required, to enact CRP. However, it more commonly occurred outside consultation in the form of self-reflection, as opposed to inside consultation. Each participant recognised a need for more CRP during consultation, but either avoided it or did not consistently enact it. Rather than managing ongoing anxiety about what to ask, whether it was harmful, or whether families wanted cultural enquiry, the CRCT supported practitioners to be culturally curious. Consequently, the tool promoted epistemic authority systematically, enabling families to choose what was relevant, rather than EPs judging relevance.

Fricker's (2007) conceptual distinction between testimonial injustice and epistemic justice maps well onto the tool's function by inflating the credulity of the speaker (Fricker, 2007). Prior to using the tool, testimonial injustice operated through projection. For example, the Black young person being 'brushed aside' because professionals' assumed that addressing BLM would cause harm (projection-driven), overrode his testimony about need (Fricker, 2007). The CRCT prevents this pattern by shifting power, removing the need to seek permission, and centres families in this decision. When consultees select areas on the CRCT, they are stating what is relevant from their own perspective, thereby claiming their right to know about their own identities.

Sakata et al.'s (2024) Culturally Responsive Tool (CRT) supports practitioner self-reflection on hot spots, blind spots, and soft spots, promoting 'cultural attunement' through examining 'one's own cultural assumptions and biases'. Combined with Sakata's (2021)

framework, distinguishing intrapersonal (self-awareness) from interpersonal (supervision, organisational advocacy) development, these tools comprehensively prepare practitioners to engage culturally responsively. However, this assumes that culturally competent practitioners will practice responsively. My findings challenge that assumption, as even aware, reflective practitioners experienced uncertainty and projection-driven avoidance. The CRCT builds on Sakata's (2021) and Sakata et al.'s (2024) tools designed to develop practitioner capacity, by redistributing epistemic authority and counteracting power imbalances in communication.

5.4.4 Section Summary

The CRCT makes epistemic redistribution practical by restructuring the notion of power to make the experience more relational. The findings emphasise how different EP practice spaces need to be considered independently. I also considered how cultural responsiveness can be institutionally determined, rather than truly enacted by practitioners per context. I have created a framework to encourage CRP to be translated across contexts. This is to support practitioners to frequently consider their position in the projection loop. Whilst practitioners may successfully integrate opportunities for CRP in one professional context, this framework will help them identify which areas of their practice can be enhanced.

The findings suggest the CRCT supports EPs in taking up their legitimate power, utilising their skills, and holding practitioners through their discomfort. The tool was positioned as a potential container for practitioner anxiety during the transition from training to practice. Furthermore, I identified how the tool can help to contain defensive patterns to support responsive consultation. This can support practitioners to move through their recognition of avoidance to embody the confidence for explicit cultural enquiry. These modalities enable the cyclical movement described by the 4R framework through recognition, rupture, redistribution, and repair.

5.5 Implications for Practice

5.5.1 Recognition, Rupture, Redistribution, and Repair (4R) Framework

To address the gap my research has identified - the expectation that EPs present opportunities for frequent CRP, but lack current supports to embed it during consultation - I have integrated the CRCT into a new CRP reflective framework. The 4R framework is a systems-psychodynamic framework designed to support consultants embed CRP more consistently. I will provide the theoretical rationale behind the 4R framework, before demonstrating its function.

5.5.2 Theoretical Underpinnings of the 4R Framework

Throughout the findings, projection emerged as a central barrier to enacting CRP, a defensive process through which practitioners unconsciously located their own discomfort within consultees. This was done by assuming consultee reluctance, which justified the avoidance of cultural conversations. Freud's (1894) conceptualisation of projection as an automatic defence mechanism helps to explain how this process operates beneath conscious awareness, making CRP resistant to change through self-reflection alone. When practitioners lack supportive frameworks to hold discomfort during cultural conversations, avoidance becomes commonplace. This aligns with Wastell's (1999) application of transitional objects to professional contexts, which suggests that tools and frameworks can reduce defensive responses by providing psychological containment in the face of anxiety. Whilst transitional object theory does not directly inform the design of the 4R Framework, it offers an overarching explanation for why structural tools carry value beyond their procedural function. Transitional objects can provide a holding space for the discomfort that projection would otherwise deflect, supporting the explicit enactment of consistent CRP.

Safran and Muran (2000) proposed that ruptures in the working alliance can only be repaired when intervention is explicit and relational, addressed at the level of underlying meaning, rather than surface behaviour. This suggests that the projection loop requires active punctuation, rather than passive awareness (self-reflection outside consultation). Fricker's (2007) framework of epistemic injustice deepened this understanding by identifying who bears the cost of inaction. The concept of hearer responsibility demonstrates how the speaker's testimony can be received and credited by enacting CRP (Fricker, 2007). Together, these frameworks can address the projection loop, demonstrating how repair occurs when epistemic power is redistributed.

The rupture-repair theory is central to the 4R Framework. Fricker's (2007) conceptualisation alongside the data I generated, highlighted the importance of the redistribution of power within the triad when CRP is absent, and the recognition of projections that act as a barrier to enactment. These form the basis of the 4R Framework.

5.5.3 The 4R Framework

The 4R Framework aims to support practitioners to name key aspects of the projection loop by using the 4R (Recognition, Rupture, Redistribution and Repair) mnemonic to support CRP. The CRCT itself does not interrupt the longstanding projection cycle, but has the potential to support its punctuation during consultation practice. Whilst my findings identify numerous applications for the CRCT beyond consultation, for the purpose of introducing the 4R Framework here, I will confine it to consultation practice only. Table 6 details what each stage addresses:

Table 6

Stages and function of the 4R Framework

Stage	Function
Recognition	This names the defensive patterns explicitly before they can operate unconsciously.
Rupture (preparation) **Rupture (enactment)**	To *prepare* for rupture, explicit cultural enquiry is planned to interrupt patterns of avoidance. To *enact* rupture, the CRCT is used to make CRP explicit.
Redistribution	This can centre client/consultee personal cultural knowledge as authoritative. The goal is for consultees/clients to take up their cultural testimony and give professionals an opportunity to be culturally curious learners.
Repair	This occurs when epistemic justice is enacted. For example, recording consultee testimony during consultation and using it for formulation.

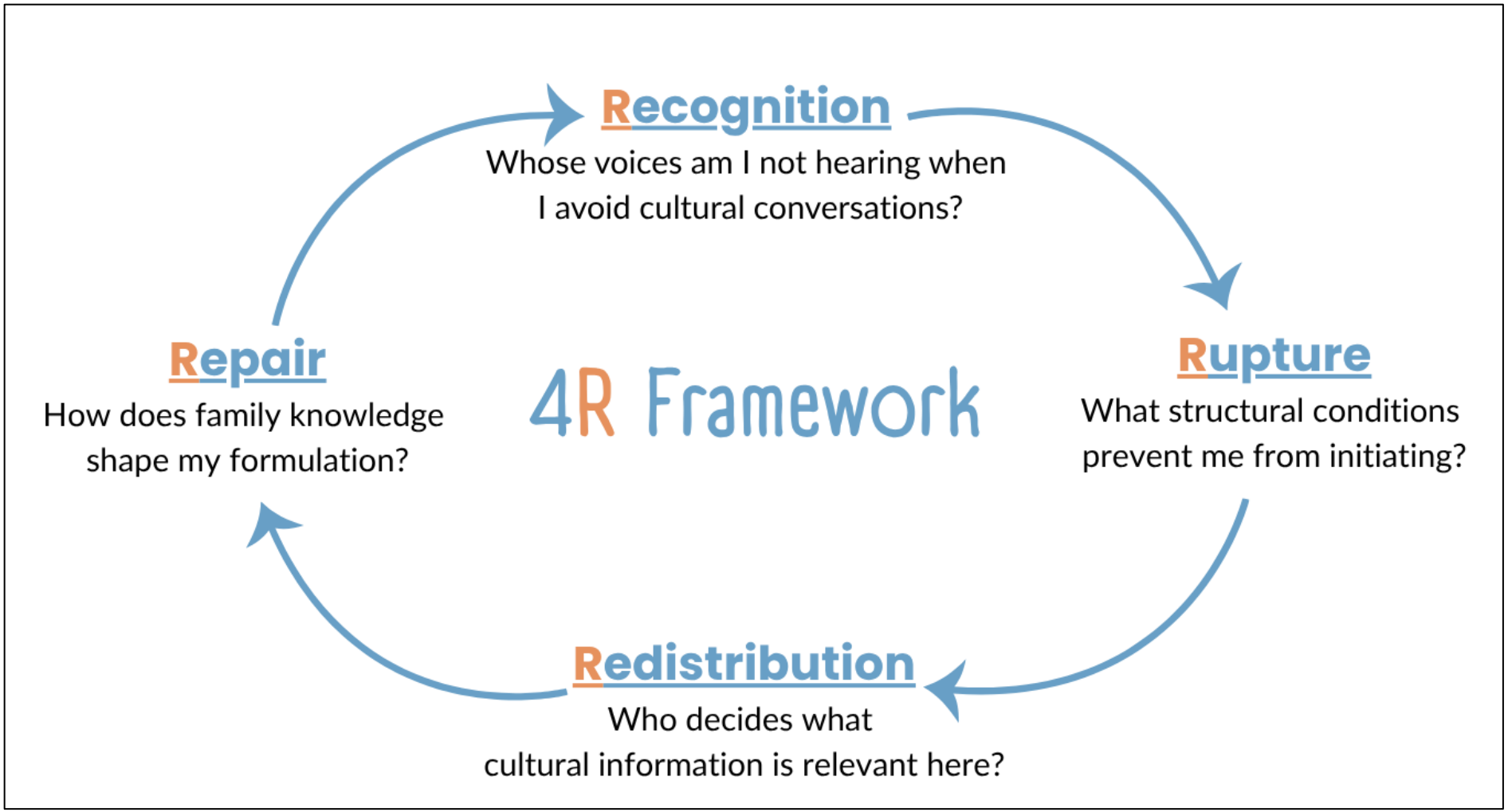
The 4R invites practitioners to reflect on what they can do within their practice to elevate the voices of consultees. It also helps practitioners to redistribute power, enabling consultee cultural testimony to be considered and acted upon (Fricker, 2007). The subthemes within my data (recognition, rupture, repair, testimonial injustice, and epistemic justice)

demonstrated a cyclical journey through which practitioners moved from silencing minoritised voices to centring family knowledge as authoritative. This created an integrated conceptual understanding of the psychological and systemic stages practitioners move through when engaging in CRP. The framework makes implicit defensive processes explicit by bringing CRP to the forefront of consultation. By posing a series of reflective questions, the 4R Framework helps to interrupt defensive processes that practitioners may not fully understand or be conscious of (Figure 12).

The experience of cycling through stages should not be viewed as regression, but responsiveness. It recognises that competence in CRP is context-dependent, not a fixed state achieved through training or tool adoption. Rather, CRP is demonstrated as a lifelong commitment. The framework aims to minimise the trap of claiming to 'be' culturally responsive without noticing the ongoing, context-specific work required. By using the 4R Framework, practitioners can reflect on both intrapersonal barriers (their own projection, discomfort, defensive, and avoidance) and interpersonal dynamics (whose knowledge counts and how power is distributed). The framework punctuates the projection loop by explicitly naming the cycle using the 4R mnemonic:

Figure 12

The Recognition, Rupture, Redistribution, Repair (4R) Framework



The 4R is intended to be used to punctuate the projection loop where CRP is absent in practice spaces. Whilst the CRCT can be used during consultations as the transitional object that contains anxiety and enacts epistemic justice structurally, the 4R framework can be used both before and after consultations to locate practitioners in their journey. Rather than practitioners questioning whether they identify as being culturally responsive, they can evaluate where they are in the cycle and consider what they need to do to move towards repair.

A six-step guide to using the CRCT in consultation practice has been developed to accompany the 4R Framework. The guide, structured around the recognition, rupture, redistribution, and repair stages, offers practitioners a pathway through preparation, tool enactment, and self-reflection (see Appendix R).

Whilst the 4R Framework is introduced here in relation to consultation practice, its application extends beyond the dyadic EP-consultee relationship. In multi-agency contexts, such as TAC meetings or inter-professional supervision, practitioners from different disciplines bring distinct cultural frameworks, institutional assumptions, and relational dynamics that can generate the same projection loops the 4R Framework seeks to address. The 4R mnemonic also offers a shared language through which systems-psychodynamic concepts can be made accessible and practically applicable across multi-agency teams, enabling professionals with different theoretical backgrounds to engage with and reflect on cultural dynamics using a common framework. Inter-professional supervision offers a structured relational space in which Recognition, Rupture, Redistribution, and Repair could be used to name and work with cultural dynamics present across professional roles and hierarchies. The 4R Framework's grounding in systems-psychodynamic thinking makes it well-suited to these contexts, where unconscious processes operating at the group and

institutional level are as relevant as those present in individual consultations. Exploration of the 4R Framework in multi-agency settings therefore represents a meaningful direction for future EP practice and research.

5.6 Dissemination Strategy

This research tackles a key gap in the field of Educational Psychology practice, the lack of accessible, systemically embedded tools for culturally responsive consultation. The findings show that both psychological and systemic barriers shape how cultural conversations occur in EP work. For this research to fulfil its potential, dissemination must occur across multiple channels to reach different stakeholder groups. This includes T/EPs, training institutions, EP services, related professionals, and families themselves. The dissemination strategy integrates academic rigour with practical accessibility, recognising that the most theoretically sophisticated research has limited impact if it remains confined to academic journals.

The findings from this research emerged from exploring the use of the CRCT specifically; however, I identified a systemic gap in how Educational Psychology supports CRP. The CRCT is one example of how this gap might be addressed, but it is not the only solution. Other tools, frameworks, or structures could also help address this gap. Upon understanding how the projection loop functions, practitioners can begin to move away from the notion that they must be independently responsible for the weight of discomfort and create structural resources for consultee cultural testimony. The research has also identified how containing practitioner anxiety at transition points in practice can encourage consistent implementation of CRP. This makes cultural enquiry systemically present and removes the additional cognitive load from the individual. The 4R Framework can be applied to any further tools or resources that address the gap for in-the-moment CRP.

The research findings will be submitted to peer-reviewed journals targeting Educational Psychology and broader psychological practice. Educational Psychology in Practice (EPiP) is the primary UK outlet for research directly relevant to EP practitioners. This makes it a fitting venue for publishing findings on consultation barriers and the use of

CRCT to support the embedding of more consistent and effective CRP. The journal's practitioner readership ensures research is delivered to those who could implement findings immediately. For example, Sakata's (2021) research has been viewed over 2,000 times, and as my research demonstrates, her culturally responsive framework has been adopted and used to support CRP.

The Division of Educational and Child Psychology (DECP) Annual Conference provides opportunities to present findings to UK Educational Psychologists, combining research presentation with practical demonstration of the CRCT itself. A workshop format would allow attendees to experience the tool as consultees would, creating an embodied understanding of how consultee-led selection can enable redistribution of epistemic authority. This experiential element demonstrates the tool's interactive digital format and procedural redistribution of power, which are best comprehended through use rather than description.

The British Psychological Society's Annual Conference provides a broader reach across psychological disciplines, positioning the CRCT as relevant beyond Educational Psychology to clinical, counselling, and forensic psychology contexts where power asymmetries and cultural responsiveness intersect. International conferences such as the International School Psychology Association (ISPA) Conference would extend reach globally, enhancing dialogue with researchers and practitioners confronting similar challenges in different cultural spheres.

The research findings have clear implications for EP training programmes. As a first step, I plan to meet with Tavistock and Portman NHS Foundation Trust programme leads to discuss my findings and implications. This may include a concise briefing to update the CRCT, or co-facilitating a lecture. Co-facilitating a lecture would provide current and future TEPs with access to the CRCT, as the data identified training as the optimal window for embedding tools and frameworks. Training institutions could incorporate the CRCT into

consultation skills modules, ensuring that trainees develop CRP as a foundational, rather than supplementary practice.

Articles in DECP Debate and Educational Psychology Research and Practice (EPRAP) reach practitioners who may not regularly access peer-reviewed journals. These professional publications allow a more accessible writing style, include practice examples, and reach EPs during everyday professional reading. Twitter/X and LinkedIn posts sharing key findings, linking to open-access versions of publications, and demonstrating the CRCT in brief video clips can reach practitioners, training institutions, and related professionals (speech and language therapists, occupational therapists, learning settings) who could benefit from the tool's multi-disciplinary adaptability. With consent, this could include participants who can comment on their experience using the CRCT.

5.7 Limitations

This research examined T/EPs' experiences of enacting CRP in EP consultation, and the impact of using the CRCT. However, this research did not directly measure consultation outcomes or family experiences. Future research could investigate whether families receiving CRCT-supported consultations report greater epistemic justice. This could address whether consultations using the tool produce formulations more aligned with family cultural understandings, whether the tool helps reduce cultural disproportionality in SEND identification, or if it impacts educational outcomes. Future comparison studies could also be undertaken to track services that implement the CRCT versus those that do not, to provide outcome data beyond practitioner self-reporting.

The current study was small-scale and exploratory. FG1 was conducted after a 6-week summer break where consultations did not happen. Therefore, it relied on the participants' ability to remember their previous consultation experiences of CRP for FG1.

Whilst there were strengths linked to my position as a colleague embedded in the service, such as existing relationships which enabled the study, this position may have impacted some of the responses in FG2. Social desirability towards me as co-creator of the tool, and co-worker at the EPS, may have generated responses aimed to please or affirm the tool's usefulness. This is particularly relevant for the trainee EP participants, who may have felt a degree of obligation to participate and to respond positively given their position as trainees within the service. Their unanimous agreement may indicate genuine endorsement but equally may be attributable to social desirability bias. Whilst this research was not intended to generate generalisable data, there is an opportunity for future research to be conducted with a larger sample in different local authorities to reduce social desirability.

Future research could include observational studies of practice, using the CRCT to provide insights for how it is used and experienced in practice. This could be approached through observations of consultation, or other settings that practitioners use the CRCT. The research could also use interviews with parents, SENDCOs, and consultants from different helping professions to gain a deeper understanding the tool's usefulness across the helping professions.

The current research did not examine resistance or negative experiences deeply. Some participants described time constraints that prevented meaningful exploration and understanding of when and why the tool does not work. This matters as much as understanding the tool's successes. Future research could examine which factors are most associated with CRCT effectiveness, including identifying when practitioners should not use it, and why. For example, when the relational foundation is not efficiently established, or when cultural exploration risks causing harm rather than facilitating it, and why practitioners make those judgements.

5.8 Reflective statement

The consultation tool, previously named 'The Consultation Talking Tool', was created for a Year 1 anti-racist project, the 'Promoting Racial Equity Task' (PRET). As part of that project, we discussed the Social Graces (Burnham, 2012) and created a version of the tool with sixteen areas. This was reduced to eight areas, which focus on the lived experiences of race and ethnicity through a Bronfenbrenner (1956) theoretical gaze. As discussed in the introduction, after deliberation, we decided on the A4 print format and held focus groups with parents of children in schools to discuss its sections and whether a tool like this would benefit families. We spoke to families from Bangladeshi, Somali, and Turkish communities to hear about their experiences and anything they deemed important to share with us, as trainee Educational Psychologists, in their children's schools. At that point, I did not have the language to describe testimonial injustice or epistemic justice, but on reflection, the responses from the focus group inspired me to research this area to address the disproportionate power dynamics and testimonial injustice they described.

For this research, I digitalised the tool so the prompt questions, co-created for the PRET project, appear when you select an area of interest, making it interactive. I digitalised the tool for two primary reasons. First, consultants use their laptops to make notes during consultation. This presented an opportunity for the tool to always be accessible on their screens. The second reason was to make the tool more interactive for consultees. Consultees can select areas where prompts appear to guide reflections and cultural exploration. One question during FG2 focused on how to enhance the tool to make it more accessible I did this following FG2 (https://consultationtool.vercel.app/). Adding a language option arose as a key enhancement that would make the tool easier to access for those whose first language is not English. The included languages were based on the most common spoken languages in the

UK, for example Arabic, as well as some emerging languages that are becoming more common through recent migration patterns, for example Sylheti.

When I began this research, I thought I was investigating how other T/EPs navigated CRP using the renamed CRCT. I positioned myself as a researcher-observer, someone who had co-created a tool to address these barriers, using my doctoral research to study its implementation. However, the focus groups made me self-reflect. The projection loop I would later theorise operated fully in my own practice. Recognising this pattern, I shifted my understanding of the research. I was not studying defences happening by other T/EPs; I was documenting dynamics I participated in. I recognised 'Protection in Projection' in my transcripts because I had experienced it. I can recognise times when I could have engaged in cultural enquiry, and I had to face my own barriers when others were describing similar experiences, albeit with their own unique variations.

FG2 included a moment I almost excluded from analysis. Three participants decided not to continue, and three did not use the tool. My initial reaction was defensiveness, rooted in my belief that the tool worked and that this was resistance rather than a tool limitation. This defensiveness surfaced my investment in the tool beyond research curiosity: I co-designed it, wanted it validated, and needed it to work, or my study would have no purpose. Supervision helped me recognise this as my own projection, attributing resistance to the participants when, in fact, I was resistant to the data that threatened the tool's effectiveness. Sitting with the discomfort, rather than defending against it, opened analytical space. Maybe the tool does not eliminate avoidance, because projection operates unconsciously. Tools alone do not guarantee practice change, but addressing the permission gap during consultation can.

Despite these ongoing conflicts and limitations, the research generated hope. Participants' practice had shifted from FG1 to FG2. I saw the generative possibilities

participants envisioned for the tool, their willingness to name barriers honestly and imagine alternatives, which all demonstrated that change is possible, albeit challenging. If the cycle is recognition-rupture-redistribution-repair, then we are not intending to be "culturally responsive" but to participate in ongoing practice. Projection will recur, and gaps will reappear in new contexts. Our relationship with epistemic justice requires constant observation and renewal.

My personal hope lies in the potential for training programmes to supporting TEPs to embed CRP during consultation. If TEPs can integrate tools and frameworks into their developing practice before defensive patterns solidify, the next generation of EPs may be less likely to struggle with these barriers in the same way as current practitioners do, including myself. In this imagined future, CRP becomes a baseline rather than an achievement. This requires training institutions prioritising it, services supporting it, tools facilitating it, and supervisors containing the anxiety it generates. My research documents not just barriers but also pathways through them.

I end the research clearer about what I struggle to deliver, more aware of my limitations, and more aware of the ongoing work required. I am also more realistic about what tools can and cannot achieve. The barriers are understandable, and not individual moral failings. Practitioners want to do better, and the identified systemic gap provides a foundation for re-evaluation.

5.9 Conclusion

This research set out to understand barriers to CRP in EP consultation. The research demonstrated how psychological defences and systemic conditions interact, and how interventions operating at both levels simultaneously, creating pathways towards epistemic justice. This research argued that CRP requires intervention at both the psychological and

systemic levels, as these reinforce each other. Even aware practitioners avoid CRP when there are no practical supports in place, and if CRP is not consistent, it runs the risk of becoming an afterthought. Tools like the CRCT can provide scaffolding and reduce individual pressure to embed CRP. By introducing frameworks before defensive patterns solidify, we can help make avoidance visible and projection addressable.

5.10 Closing reflections

It is not the rejection of the tool that marks CRP's failure, but the absence of an opportunity to engage at all. Systemic change is not a grand gesture; it is slow, cautious, but happening. Across these four themes, the data demonstrated that culturally responsive practice has been reactive and optional. It is available when families initiate it, when practitioners feel ready, or when the system makes space. The CRCT and 4RF's contribution is not that it solves these problems, but that it makes the conversation unavoidably present. By externalising the agenda and offering choice, the tool shifts culturally responsive practice from something that might happen to something that must, at a minimum, be offered. The shift from absence to presence, from implicit to explicit, from reactive to proactive, is the beginning of repair.

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Appendix A

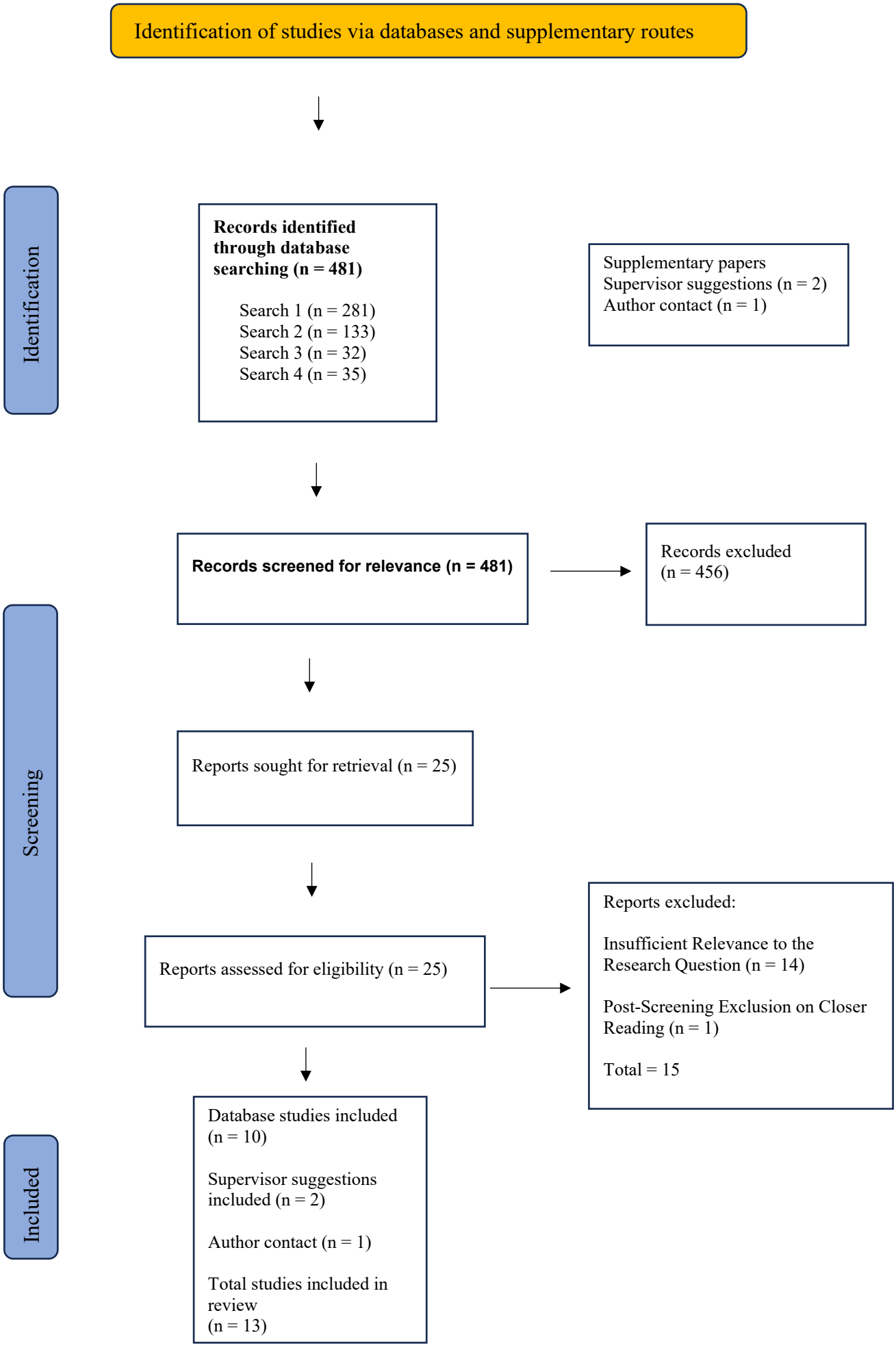
Abbreviations	
AEP	Assistant Educational Psychologist
BEEP	Black and Ethnic Minority Educational Psychology
BLM	Black Lives Matter
BPS	British Psychological Society
BQQRG	The Big Q Qualitative Reporting Guidelines
C&L	Cultural and Linguistic
CoP	Code of Practice
COR	Conservation of Resources
CPD	Continued Professional Development
CR	Culturally Responsive
CRCT	Culturally Responsive Consultation Tool
CRP	Culturally Responsive Practice
CRT	Culturally Responsive Tool
CYP	Child or Young Person
DECP	Division of Education and Child Psychology
DEI	Diversity, Equity and Inclusion
DEIJ	Diversity, Equity, Inclusion and Justice
DfE	Department for Education
EAL	English as an Additional Language
EBD	Emotional and Behavioural Difficulties
EP	Educational Psychologist
EPiP	Educational Psychology in Practice
EPRAP	Educational Psychology Research and Practice
EPRCF	The Educational Psychology Race and Culture Forum
EPs	Educational Psychologists
EPS	Educational Psychology Service
FG1	Focus Group One
FG2	Focus Group Two
HCPC	The Health and Care Professional Council
ISPA	International School Psychology Association
JBI	Joanna Briggs Institute
JIMIS	Jones Intentional Multicultural Interview Schedule
LA	Local Authority
MDT	Multidisciplinary Team
MS Teams	Microsoft Teams
MSC	Multicultural School Consultation
NASP	National Association of School Psychologists
NHS	National Health Service
NQEPs	Newly Qualified Educational Psychologists

OT	Occupational Therapist
PCC	Population, Concept and Context
PEP	Principal Educational Psychologist
PRET	Promoting Racial Equity Task
PRISMA-ScR	Preferred Reporting Items for Systematic Reviews and Meta-Analyses Extension for Scoping Reviews
PRIT	Promoting Racial Inclusion in Training
QEP	Qualified Educational Psychologist
QEP-FG1	Qualified Educational Psychologist Focus Group One
QEP-FG2	Qualified Educational Psychologist Focus Group Two
QEPs	Qualified Educational Psychologists
RMC	Relational Model of Consultation
RQ1	Research Question One
RQ2	Research Question Two
RQ3	Research Question Three
RTA	Reflexive Thematic Analysis
SEMH	Social, Emotional and Mental Health
SEN	Special Educational Needs
SEND	Special Educational Needs and Disabilities
SENDCO	Special Educational Needs and Disabilities Coordinator
SLT	Speech and Language Therapist
SP	School Psychologist
SPs	School Psychologists
T/EP	Trainee and Educational Psychologist
TAC	Team Around the Child
TEP	Trainee Educational Psychologist
TEP-FG1	Trainee Educational Psychologist Focus Group One
TEP-FG2	Trainee Educational Psychologist Focus Group Two
TEPICC	Trainee Educational Psychologists Initiative for Cultural Change
TEPs	Trainee Educational Psychologists
UK	United Kingdom
US	United States
4R	Recognition, Rupture, Redistribution, Repair
4RF	Recognition, Rupture, Redistribution, Repair Framework

Appendix B- Full list of search terms

Date of search	Database	Search terms
27/03/2025		(anti-racism or antiracism or antiracists or anti-racist) AND (practice OR consultation)
27/03/2025	ERIC;CINAHL; APA PsycInfo;	educational psycholog* OR school psycholog* AND (cultural competence or cultural awareness or cultural competency or cultural sensitivity) OR (diversity or inclusion or equity) ANDeducational psycholog* OR school psycholog* AND (cultural competence or cultural awareness or cultural competency or cultural sensitivity) OR (diversity or inclusion or equity) AND (consultation OR practice) AND (framework OR tool) (consultation OR practice) AND (framework OR tool)
26/04/2025	EBSCOHost	cultural humility AND educational psycholog*
04/05/2025	APA PsycInfo	(practice OR consultation) AND educational psycholog* AND (cultural responsive OR cultural humility OR cultural competence)

Appendix C- Prisma



Appendix D- CRCT training

THESIS BACKGROUND

RESEARCH TITLE: WHAT ARE THE EXPERIENCES OF EDUCATIONAL PSYCHOLOGISTS USING A TOOL TO EXPLORE RACE AND CULTURE IN CONSULTATION: A PSYCHO-SOCIAL-SYSTEMIC EXPLORATION.

PURPOSE

- Exploratory research project.
- Identified barriers to including conversations around racial/ethnic/cultural background in consultation

AIMS

- Explore whether the tool will help increase conversations around race/ethnicity

POSITIONALITY

- Relativist
- Social Constructivist

FOCUS GROUPS

- Taking place at 2 time points
- Group for TEPS and group for EPs
- Take place in the office before team meeting (90 minutes)

KEY TERMINOLOGY

Before we examine the tool itself, and the current UK and [redacted]-Specific context, lets revise some key terminology!

CULTURAL RESPONSIVITY

Refers to the ability of people and systems to maintain respect and dignity of individuals from different backgrounds

CONSULTATION

Offers a valuable opportunity to incorporate anti-racist principles in collaborative problem-solving.

ANTI-RACIST PRACTICE

Goes beyond cultural competence to actively identify and challenge racist structures and practices.

EQUALITY, DIVERSITY AND INCLUSION (EDI)

Encompasses the protected characteristics under the Equality Act 2010. Also considers intersectionality and lived experiences.

Demographic Profile

- One of London's most diverse boroughs. Approximately 40% identify as Black, Asian or another Ethnic Minority.
- Over 90 languages spoken in [redacted] schools.
- One of the largest Jewish communities in Europe (approx 15% of residents), as well as large Muslim, Hindu and Christian communities.
- High number of refugee and asylum-seeking families, creating unique educational support needs.

Educational Context

- Over 120 schools serving approximately 60,000 pupils from diverse backgrounds.
- Despite overall strong education performance, persistent attainment gaps exist within certain ethnic groups and children with EAL.
- Increased numbers of children with complex needs.
- 'Resilient Schools' initiative aligns with incorporating EDI principles to practice.

Strategic Relevance

- Corporate Plan 2023-2026 highlights reducing inequalities as key priority.
- Educational Psychology Service identified cultural responsiveness as an area of ongoing development.
- Children and Young People's Plan emphasises support for vulnerable groups.

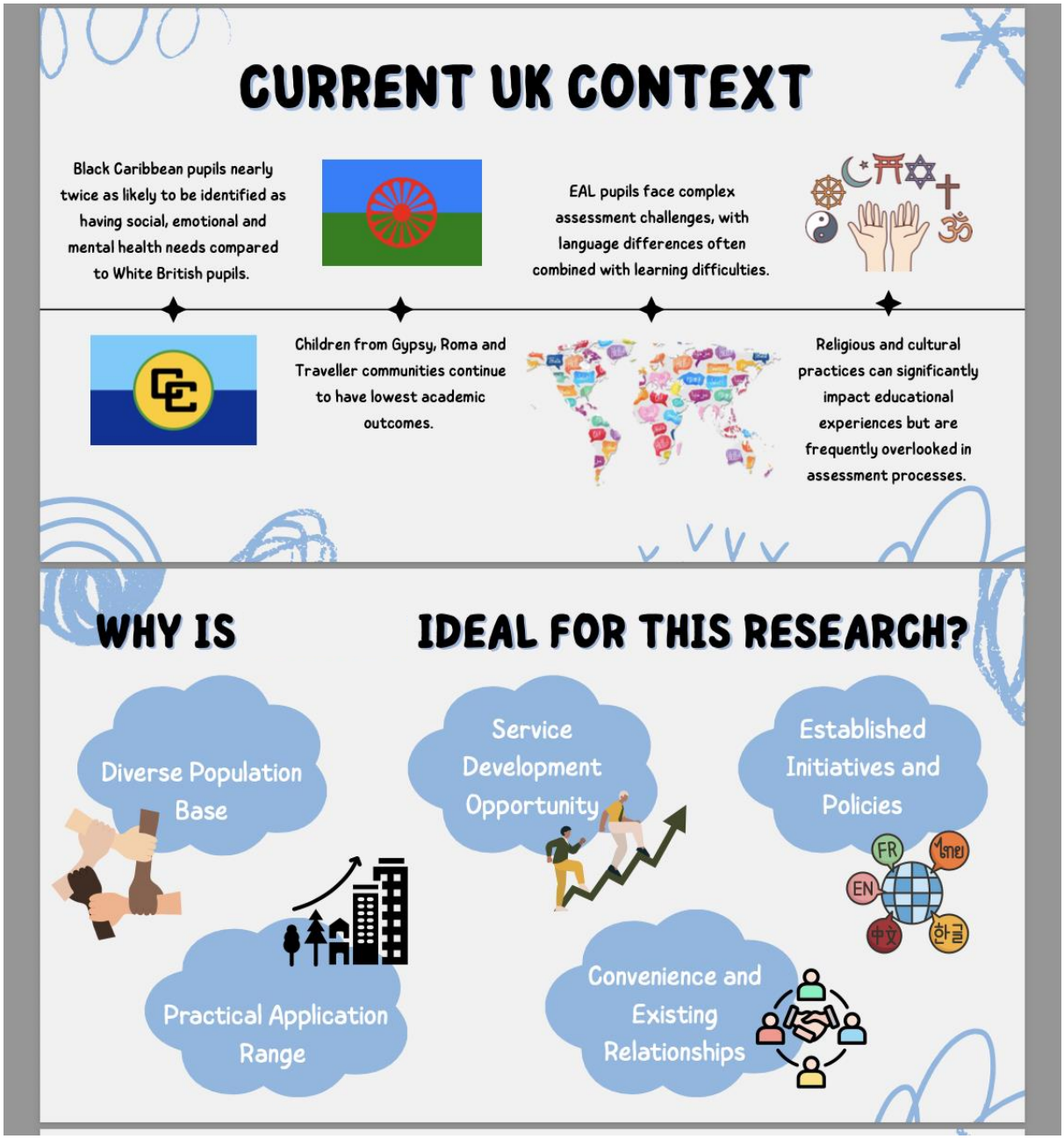
CURRENT CONTEXT

Certain ethnic groups in (particularly Black Caribbean and Somali pupils) overrepresented in exclusion statistics.

Recent community consultations have highlighted concerns around cultural understanding in educational services.

Increasing number of international arrivals, including asylum seekers housed in local hotels, present unique challenges.

'Resilient Schools' initiative provides existing framework to embed anti-racist practice.


CURRENT UK CONTEXT
Black Caribbean pupils nearly twice as likely to be identified as having social, emotional and mental health needs compared to White British pupils.
EAL pupils face complex assessment challenges, with language differences often combined with learning difficulties.
Children from Gypsy, Roma and Traveller communities continue to have lowest academic outcomes.
Religious and cultural practices can significantly impact educational experiences but are frequently overlooked in assessment processes.
WHY IS IDEAL FOR THIS RESEARCH?
Diverse Population Base
Service Development Opportunity
Established Initiatives and Policies
Practical Application Range
Convenience and Existing Relationships
FR
EN
ไทย
한글

THE CONSULTATION TOOL

This consultation tool was developed with several key principles in mind:

ACCESSIBILITY

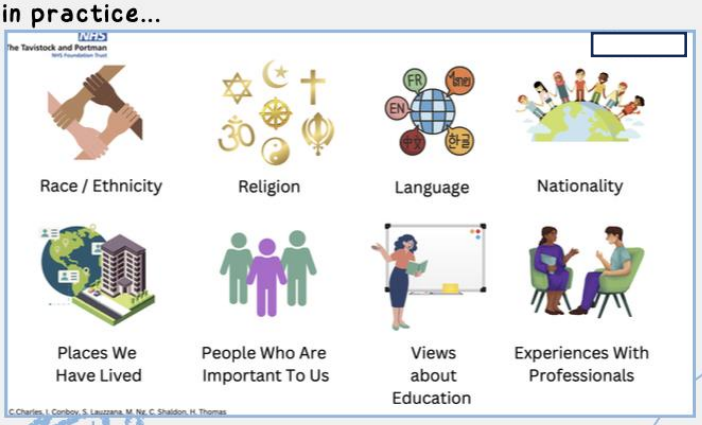
ADAPTABILITY

ACTIONABILITY

ACCOUNTABILITY

ACTIVITY!

With the person/people next to you, have a look at some of the questions adapted from the Palette which can be used to guide conversations when using the tool in practice...



THE CONSULTATION TOOL

Systemic Gaps
Educational outcomes in the UK continue to show significant disparities along racial and ethnic lines.

Practical Applications
EP's feel confident in theory, but struggle with consistent application of anti-racist principles.

Holistic Approach
Identity encompasses race, ethnicity,religion, language, nationality, geographic context and interpersonal relationships.

Why was this Consultation Tool Developed?

Critical Observations

Standardisation Concerns
Traditional tools and practices reflect dominant cultural norms and lack consideration of diversity.

Professional Development Need
EPs wish to engage in anti-ractist practice, but there are few specific frameworks to consistently guide this work.

The Consultation Tool represents a response to challenges. Offering a structured yet flexible approach to ensure equality, diversity and inclusion principles are systematically considered in EP consultations.

CASE STUDY

Lets think about how this tool may be applied in practice with a case study relevant to [ ]:

AGED 9

ORTHODOX JEWISH FAMILY LIVING IN [ ]

CONCERNS WITH SOCIAL INTERACTIONS

RIGID BEHAVIOURS

STRUGGLES WITH UNSTRUCTURED TIMES

'CHALLENGING BEHAVIOUR' DURING TRANSTIONS

ASHER

APPLICATION OF TOOL

How might experiences of being part of minority ethnic group affect his school experience? Antisemitism?

Is Hebrew or Yiddish spoken at home? How might this affect his language development and communicating patterns? Are there opportunities for him to use his community languages at school?

How might religious practices be impacting his school experience?
How accommodating are the school?

Are there intergenerational trauma factors to consider? How do cultural values influence expectations around behaviour and education?

APPLICATION OF TOOL

How connected is he to the local Jewish community in [redacted]? What community supports exist? How might the experience of living in a culturally specific neighborhood affect his adaptation?

What educational values are emphasised in his family and community? How might these differ from mainstream educational approaches? How much time is spent in religious education versus secular education?

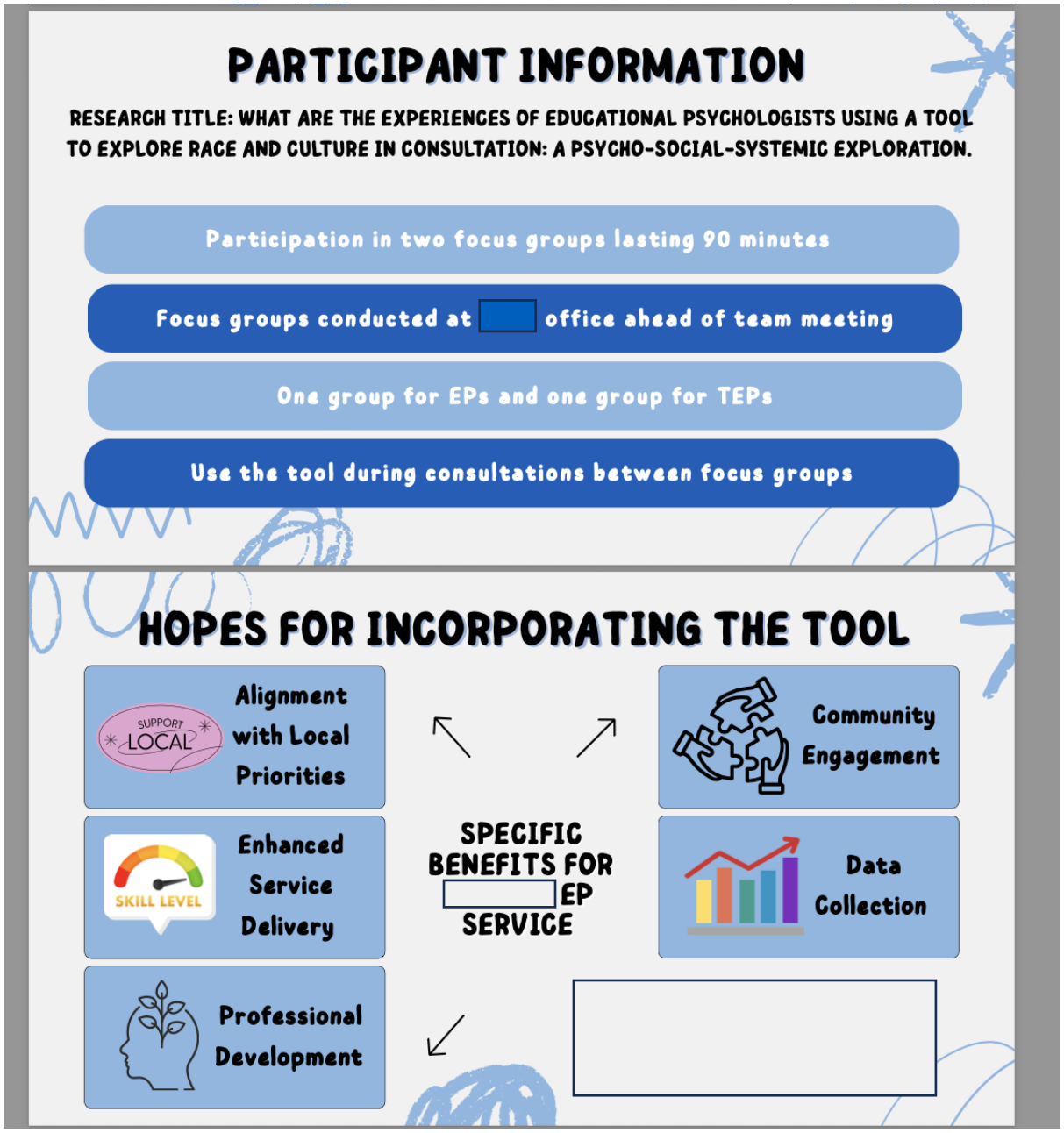
Who are his key attachment figures? What role do extended family and community members play in his life? How much time is spent in religious education versus secular education?

What has been his and his family's prior experience with educational professionals? Is there sensitivity to cultural differences in how behaviours are interpreted?

REFLECTIVE PRACTICE

An essential part of anti-racist practice is ongoing reflection on our own positionality and assumptions. Take a few minutes to consider:

- Which aspects of your own identity influences how you interpret educational concerns?
- What assumptions might you make about families from different cultural backgrounds present in [redacted]?
- How comfortable are you discussing race and ethnicity in consultations?
- Which areas of the consultation tool feel most challenging to you, and why?


PARTICIPANT INFORMATION
RESEARCH TITLE: WHAT ARE THE EXPERIENCES OF EDUCATIONAL PSYCHOLOGISTS USING A TOOL TO EXPLORE RACE AND CULTURE IN CONSULTATION: A PSYCHO-SOCIAL-SYSTEMIC EXPLORATION.
Participation in two focus groups lasting 90 minutes
Focus groups conducted at [redacted] office ahead of team meeting
One group for EPs and one group for TEPs
Use the tool during consultations between focus groups
HOPES FOR INCORPORATING THE TOOL
SUPPORT LOCAL
Alignment with Local Priorities
Community Engagement
SKILL LEVEL
Enhanced Service Delivery
SPECIFIC BENEFITS FOR [redacted] EP SERVICE
Data Collection
Professional Development

NEXT STEPS!

Repetition

This process needs repetition and practice. Expect to refine your approach over time!

Share

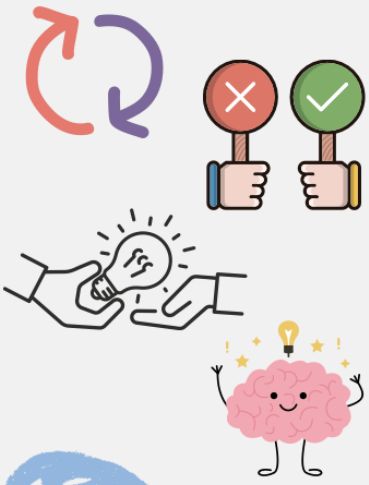
Share your insights and challenges in the focus groups (or elsewhere), supporting collective growth!

Feedback

Seek feedback from diverse stakeholders about the effectiveness of the tool!

Develop Knowledge

Continue to develop your knowledge of specific cultural contexts relevant to [redacted] diverse communities!



THANK YOU VERY MUCH!

Any Questions?

Anti-Racist Practice in Educational Psychology: Consultation Tool Training

Introduction Section Content

Opening Statement: "Welcome to this training session on anti-racist practice in educational psychology. Today we'll be exploring a consultation tool specifically designed to help educational psychologists in the UK incorporate EDI principles into their everyday practice. This tool was developed as part of doctoral research aimed at addressing significant gaps in how we approach diversity and inclusion in our assessment and intervention processes."

Thesis Background:

- Conducting an exploratory study through a psycho-social-systemic framework.
- Seeking to gather the experiences of TEPs and EPs using a culturally responsive consultation tool.
- Exploring whether culturally relevant information is more likely to be collected by using the consultation tool in practice.
- Relativism takes the philosophical position that no universal truth exists and reality can take many forms within a context (Rassokha., 2022). One's awareness of their reality is created through their interaction with the world and others.
- The social constructivist stance posits that learning is a process of constructing meaning, which facilitates individuals to make sense of their experience (Amineh & Davatgari, 2015). Social constructivism emphasises a relational modality, whereby an environment is created through continuous and interactive conversations, but still leaves space for the individual to form their own worldview and experiences.

Key terms:

- Anti-racist practice often encompasses issues of

equality and equity. Equity speaks to the measure of justice that promote improved outcomes for all by raising conditions for marginalised groups, whilst equality promotes sameness across people

- Practitioners who are culturally competent are able to respond to students' cultural needs whilst being able to interact positively and effectively in diverse environments (Johnson., 2013). Johnson (2013) argues that personal reflection and understanding one's own unconscious bias is a pivotal step in cultural responsivity.

Why This Consultation Tool Was Developed:

Appendix E- Ethical Approval

Catherine Charles

By Email

02 April 2025

Dear Catherine,

Re: Trust Research Ethics Application

Title: '*What are the Experiences of Educational Psychologists using a Tool to explore Race and Culture in Consultation: A Psycho-Social-Systemic Exploration.*'

Thank you for submitting your updated Research Ethics documentation. I am pleased to inform you that subject to formal ratification by the Trust Research Ethics Committee your application has been approved. This means you can proceed with your research.

Please be advised that any changes to the project design including modifications to methodology/data collection etc, must be referred to TREC for review.

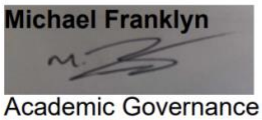
Failure to obtain prior approval for such changes may result in academic and/or research misconduct.

If you have any further questions or require any clarification, please do not hesitate to contact me.

I am copying this communication to your supervisor.

May I take this opportunity of wishing you every success with your research.

Yours sincerely,



Academic Governance and Quality Officer
T: 020 938 2699
E: academicquality@tavi-port.nhs.uk

cc. Course Lead, Supervisor, Research Lead

Appendix F- Invitation to Participate

Sent: 17 June 2025 12:51
Subject: Participation in Thesis Research

Dear all,

I hope you're well.

I have reached the point of participant recruitment for my thesis study, and I would be very grateful if you could consider supporting me by taking part. As you may know, I am looking for trainee and qualified EPs to implement a culturally responsive consultation tool in practice. I am interested in the experience of using the tool and whether using the tool helps T/EPs to enhance their culturally responsive practice. There will be focus groups at two time points via Teams. One focus group will take place before using the tool, and one will take place approximately a term later to allow participants to trial the tool.

The focus groups will provide a space for TEPS and EPs, respectively, to come together to speak freely and explore their experiences, with a particular focus being placed on the experiences of implementing the tool in practice. Whilst I have shared the tool in a team meeting, I recognise this was a while ago, and not all of the team were there. So before participants engage with the tool, I will demonstrate how the tool can be used, although it is intended to be flexible so participants are welcome to adapt their approach to suit their practice.

I have attached a recruitment poster and participant information sheet to this email which presents some key information about the study, alongside my contact details should you wish to take part.

Thank you and Best Wishes,
Catherine

Appendix G- Recruitment Poster

The Tavistock and Portman NHS
NHS Foundation Trust

I am Looking For...

Trainee and Educational Psychologists working in this local authority to take part in a study for my doctoral thesis.

Are you interested in trialling a tool to enhance conversations around race and ethnicity in consultation?

General Requirements:

- **Trainee or Educational Psychologist**
- **Use the CTT in consultation**
- **Two in person focus groups 2025-2026**

For more information or to express your interest, please contact me: ccharles@tavi-port.nhs.uk

Appendix H- Consent for demographic data

Will my views be kept confidential?
Yes. Focus groups will be recorded and transcribed, and these recordings will be deleted after transcription. In the research write up, a pseudonym will be used for each participant and other details which might help someone to identify you will be removed to ensure that your data remains confidential. All records related to your participation in this research study will be handled and stored securely on an encrypted drive using password protection.
Trust data protection link: Trusts 's Data Protection and handling Policies.
Trust privacy policy link: Privacy policy - Tavistock and Portman

Appendix I- Excerpt from reflexive diary

Tue 1/27/2026 5:11 PM

The second TEP focus group was really rich! I'm so happy about it! Two people didn't come and I have a feeling they don't want to be a part of the study anymore although they haven't explicitly said so. Should I just tell them they don't have to do participate or just try and see if they will have a joint interview and if not by this Friday, then just move on? Or should I give them an extra week to decide to join? I'm just conscious about data analysis.

Appendix J- Seeking limitations through questioning

Tool Usage and Implementation

1. How did you incorporate the CTT into your practice? What worked well and what was challenging?

Future Applications

1. What modifications or adaptations to the tool would make it more effective for your practice?

3. What additional support would help you maximise the effectiveness of the tool?

Appendix K- Focus Group Schedule

Focus Group 1 Questions

Current Practice and Experience

1. How frequently do you discuss culture, race and ethnicity in your consultations with students, families, and school staff? What typically prompts these discussions?

2. What aspects of culture, race and ethnicity do you feel most confident exploring in consultations? What aspects do you find challenging to address?

3. Could you describe a recent consultation where culture, race or ethnicity was particularly relevant? How did you approach this discussion?

Process and Methods

1. What methods or approaches do you currently use to gather information about a student's cultural, racial and ethnic background and experiences?

2. How do you determine when it's appropriate to explore culture, race and ethnicity in your consultations? What factors influence this decision?

3. What barriers have you encountered when trying to discuss culture, race and ethnicity in consultations? How have you addressed these?

Impact on Outcomes

1. How does information about culture, race and ethnicity typically inform your assessments and recommendations?

2. In what ways do you incorporate cultural considerations into your reports and recommendations?

3. What challenges do you face in translating cultural insights into meaningful recommendations?

Professional Development

1. What training have you received in culturally responsive consultation? How has this influenced your practice?

2. What additional support or resources would help you feel more confident in exploring culture, race and ethnicity in consultations?

Focus Group 2 Questions

Tool Usage and Implementation
1. How did you incorporate the CTT into your practice? What worked well and what was challenging?

2. How did the tool change the way you approach discussions about culture, race and ethnicity in consultations?

3. What aspects of the tool were most helpful in facilitating conversations about culture, race and ethnicity?

Impact on Practice
1. How has using the tool influenced your confidence in exploring culture, race and ethnicity in consultations?

2. What changes have you noticed in the quality and depth of information you gather about cultural factors?

3. How has the tool affected your approach to writing reports and making recommendations?

Professional Growth
1. What insights about your own cultural competence have you gained through using this tool?

2. How has the tool influenced your awareness of cultural factors in educational psychology practice?

3. What changes have you noticed in your relationships with families and students from different cultural backgrounds?

Future Applications
1. What modifications or adaptations to the tool would make it more effective for your practice?

2. How do you plan to continue incorporating culturally responsive practices in your consultations?

3. What additional support would help you maximise the effectiveness of the tool?

Prompts for Further Discussion
- Can you provide specific examples to illustrate your experiences?
- How did that experience affect your subsequent practice?
- What surprised you most about using the tool?
- What recommendations would you make to colleagues who are just starting to use this tool?

Guidelines for Facilitators

1. Encourage participants to provide specific examples while maintaining confidentiality
2. Allow time for reflection on both personal and professional impacts
3. Create a safe space for honest discussion about challenges and uncertainties
4. Explore both positive and negative experiences with the tool
5. Document suggestions for improvement and adaptation

Appendix L- Email from NQEPs

Hi Catherine,

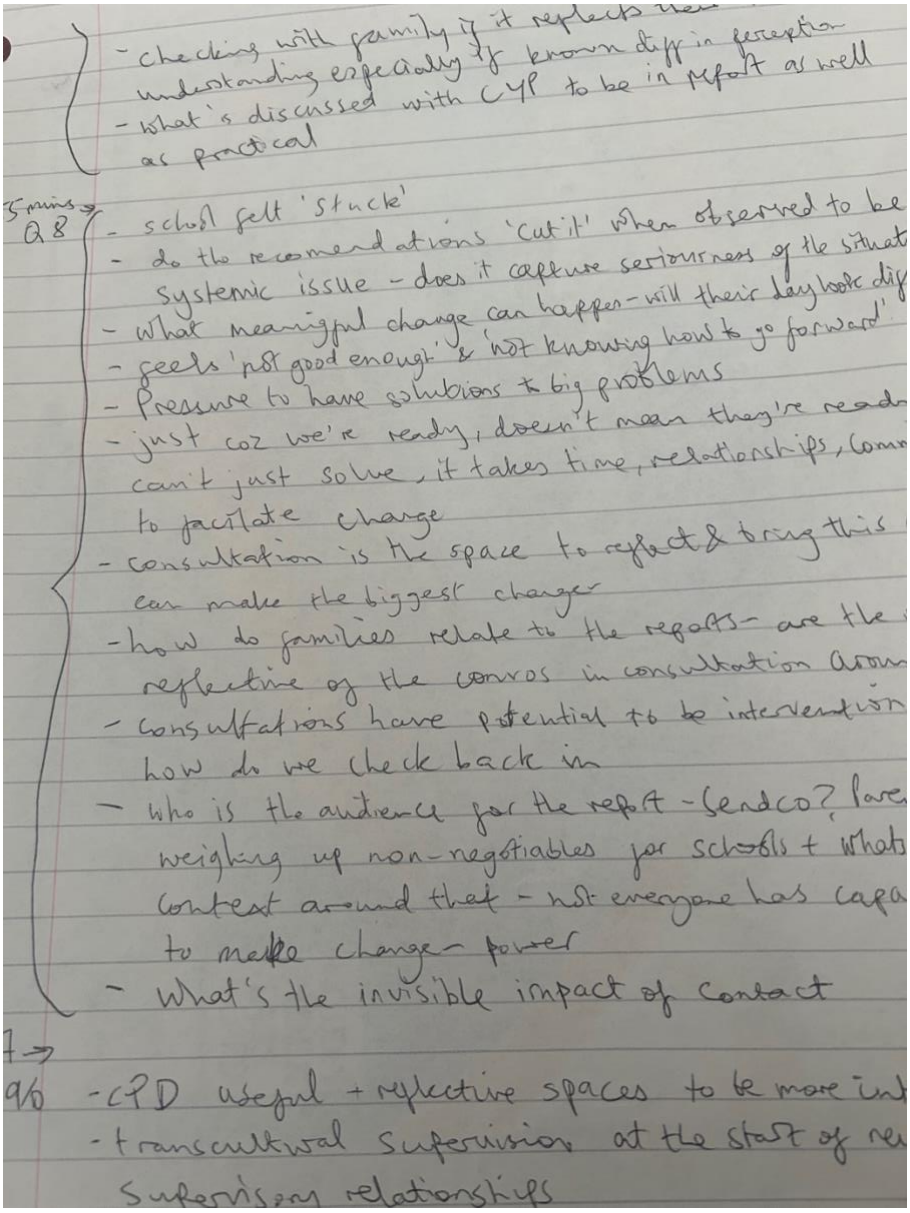
I hope you're well, and thank you again for giving us space to reflect.

1. **Limitations or barriers to using the tool:** I did feel that the tool is a valuable one, particularly because considering all aspects of the social GRACCESSES framework is important for understanding the wider ecosystem around a child. However, the main barrier for me was that using it required an additional step of thinking at a time when my cognitive load was already quite high. Because the tool wasn't part of my first-year consultation training, integrating it now would have meant layering a new approach onto a practice I am still consolidating. That made it feel harder to use consistently.
2. **Thoughts on introducing a tool at this stage of my professional journey:** At this point in my development as an NQEP, I'm very focused on strengthening my core consultation skills, building fluency, and developing confidence. Introducing a new tool during this consolidation phase felt slightly misaligned with where I am developmentally. I think had it been introduced earlier, when my consultation frameworks were still forming, it might have been easier to embed without it feeling like a shift or disruption.
3. **Thoughts and feelings when I realised I couldn't introduce the tool at this time:** I did feel a bit guilty about not integrating it, especially because I believe in the importance of consider all social GRACCESSES dimensions. At the same time, I also recognised that maintaining stability in my developing practice was important for my confidence and effectiveness. So it was a mix of guilt, self-awareness, and relief at giving myself permission to prioritise consolidation.

I hope these reflections are useful, and thank you again for creating a supportive and pressure-free space to share them.

Best wishes,

Appendix M- Reflections on the data



Appendix N- Right to Withdraw

Do I have to take part?

Participation in this research is entirely voluntary. If you do decide to participate but then change your mind, you can withdraw at any time up until the data collection, at which point your participation will have already influenced the findings of the study.

Appendix O- Participant Consent Form

Participant Consent Form

Title of Research: What are the Experiences of Educational Psychologists using a Tool to explore Race and Culture in Consultation: A Psycho-Social-Systemic Exploration.

Name of Researcher: Catherine Charles (Trainee Educational Psychologist)
Name of Principle Investigator: Dr. Lisa Bostock (Academic Tutor and Research Supervisor)

This research is being undertaken as part of the requirements for the degree of Doctorate in Child, Community and Educational Psychology at the Tavistock and Portman NHS Trust.

Please read the attached information sheet before signing this consent form. The researcher will be happy to answer any questions you have.

Please circle as appropriate

I have read and understood the information sheet for the above study, and I have been given the opportunity to ask any questions.	YES	NO
I understand that my participation in this research is entirely voluntary, and I am free at any time to withdraw consent up until the data collection stage, without giving a reason.	YES	NO
I understand that any personal information that I provide to the researcher will not be shared with others, unless they are concerned that I, or someone else, is at risk of harm.	YES	NO
I understand that an audio and video recording will be taken during the group and I agree to this information being held securely by the researcher and the research supervisor.	YES	NO
I agree to being anonymously quoted in the research submission.	YES	NO
I understand that despite my name being removed, other people in my focus group may recognise one of my quotes.	YES	NO
I understand that the results of this study will be submitted as part of a doctoral thesis and may be published in academic journals relevant to Educational Psychology.	YES	NO
I agree to take part in the above study.	YES	NO

Participant Name:	**Date:**	**Signature:**
Researcher Name:	**Date:**	**Signature:**

Appendix P- Participant information sheet

Participant Information Sheet

Research Title: What are the Experiences of Educational Psychologists using a Tool to explore Race and Culture in Consultation: A Psycho-Social-Systemic Exploration.

Who is doing the research?
My name is Catherine Charles and I am in my second year of studying Child, Community and Educational Psychology at the Tavistock and Portman NHS Trust. I am doing this piece of research as a part of my course and I would like to invite you to take part. The research will be supervised by Dr. Lisa Bostock, a University tutor and fully qualified practicing Educational Psychologist.

What are the aims of the research?
The research seeks to explore the experiences of T/EPs, using a culturally responsive consultation tool (CTT). It is hoped that participating will enable T/EPs to share their experiences having conversations around race and ethnicity in consultation in a safe and containing group setting, alongside providing them with an opportunity to reflect on role and contribute to further knowledge and research into the topic area.

Who has approved this research?
The Tavistock and Portman NHS Foundation Trust has given ethical approval to carry out this research.

Who can take part in this research?
Trainee, Main Grade, and Senior Educational Psychologists working within a local authority team.

What does participation involve?
If you agree to take part, you will join two focus groups of up to 8 participants per group. The focus group will last for 60 minutes and will be conducted in person at the local authority at 10:30am ahead of a team meeting. Logistics around exact dates will be arranged once you have contacted me and expressed your interest in the study.

Throughout the session, you will be encouraged to explore questions and topics with the group related to your experiences of using the CTT, in particular your views on how the CTT may contribute to the gathering of information related to a CYP's race and ethnicity and whether this information is useful following the consultation.

Participants will receive a debrief leaflet straight after the focus group, and a summary information sheet will be provided with the main findings once data analysis is complete, alongside an opportunity to discuss the findings with me.

Do I have to take part?
Participation in this research is entirely voluntary. If you do decide to participate but then change your mind, you can withdraw at any time up until the data collection, at which point your participation will have already influenced the findings of the study.

Will my views be kept confidential?
Yes. Focus groups will be recorded and transcribed, and these recordings will be deleted after transcription. In the research write up, a pseudonym will be used for each participant and other details which might help someone to identify you will be removed to ensure that your data remains confidential. All records related to your participation in this research study will be handled and stored securely on an encrypted drive using password protection.
Trust data protection link: Trusts 's Data Protection and handling Policies.
Trust privacy policy link: Privacy policy - Tavistock and Portman

Are there any exceptions?
The only time I would need to share any information is if there was a perceived safeguarding risk, or a disclosure was made of imminent harm to self and/or others.

What are the possible benefits for me of taking part?
Consultation is a core function of EP practice and the BPS and HCPC emphasize the importance of culturally responsive practice. There is very little research into using culturally responsive consultation tools in EP practice. The study will provide a valuable, containing space for T/EPs to implement the tool for culturally responsive consultation then come together and share experiences, something that may be hard to come by in the busy day to day EP role.

Further information and contact details
If you have any questions about any aspect of the research, or you would like to express an interest in taking part, please feel free to contact me: ccharles@tavi-port.nhs.uk

If you have any concerns about the research, then you can contact the Trust Quality Assurance Officer
Paru Jeram: pjeram@tavi-port.nhs.uk

Please note: Recruitment for this study is taking place on a 'first come first serve' basis and it may not be possible to contact everybody where there are more interested parties than can participate. No references to the interviews, data or any

individual’s participation (or non-participation) in the research will be made in future personal or professional encounters.

Appendix Q- Invitation to reflect

Hi both,

I hope you're keeping well.

I just wanted to reiterate to you both that the demands of being newly qualified (I can only imagine) are tough enough without the additional cognitive load of participating in research, and I really appreciate what you both did in supporting me by agreeing to the research and doing the focus group.

There are no hard feelings for not using the tool or participating in the second focus groups and actually it has revealed some interesting insights into the best stages to introduce systemic change (probably as a TEP!).

If you have time/capacity, I would really appreciate your thoughts on the limitations of introducing a tool at your stage of NQEP, it doesn't have to be long (and there is no requirement to do this) but it might be a nice way to gather/share views without the pressure of being in person.

I guess my curiosities are (but not limited to so speak freely): 1) what were the limitations or barriers to using the tool 2) feedback or thoughts on introducing a tool during the stage you're at in your professional journey 3) what were your thoughts/feelings when you realised you couldn't introduce the tool at this time.

If you don't want to provide feedback, that is absolutely fine and again, there is no pressure!

Best wishes 🙂

Catherine

Appendix R- Six Step Guide to the CRCT

The six-step guide includes support for before, during, and after consultation to demonstrate how CRP can transition from a practice requirement to a mid-consultation reality, and ultimately, to practice improvement. The guidance is informed by the findings, drawing on participants' experiences, reflections, and their use of the CRCT in practice. The guidance includes examples of conversations and interactions from my personal consultations. I used these to provide real-life context for the purpose of providing prompts that mirror real-world practice. Similar situations can arise and the examples in the guidance can demonstrate how to carry revelations from the CRCT through consultation and beyond. The examples are anonymised and used to further support practitioners who use the CRCT.

Alongside the theoretical contribution of the 4R Framework, the findings drew attention to a practical challenge that was identified across participant groups; knowing how and when to introduce the CRCT. As discussed in the methodology chapter, the NQEPs who withdrew after FG1 cited the cognitive demands of integrating a new tool during an already complex transition into qualified practice. Similarly, QEPs who did not use the CRCT during the study reflected on the difficulty of incorporating an unfamiliar resource into an established professional repertoire. Even amongst the TEPs, who were most consistently engaged with the tool, uncertainty about how to introduce it remained a shared barrier. These reflections highlighted that the CRCT's potential could not be fully realised without accompanying guidance on its use.

In response, I developed a six-step guide to using the CRCT in consultation practice. Structured around the 4R Framework, the guide offers practitioners a practical pathway through the recognition, rupture, redistribution, and repair stages. It includes guidance on how to introduce the tool, what interpersonal and intrapersonal processes to attend to at each stage, sentence starters to support cultural conversations, and examples drawn from my own

practice. The guide is intended both as a practical implementation resource and as a reflective tool, enabling practitioners to locate themselves within the 4R Framework and identify where further development may be needed.

Using the CRCT: Step by step guidance

USING THE CRCT :

STEP-BY-STEP GUIDANCE

A Practitioner Guide for Culturally Responsive Consultation and Beyond

Catherine Charles
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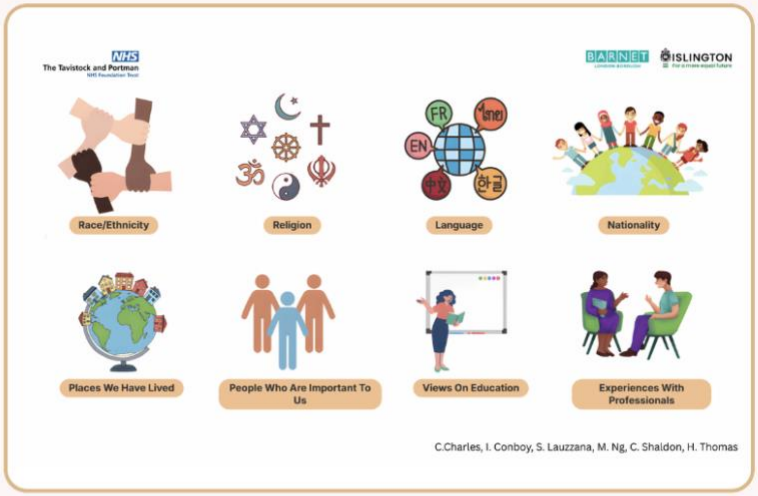


Culturally Responsive Consultation Tool :
Click Here for the Digital Version

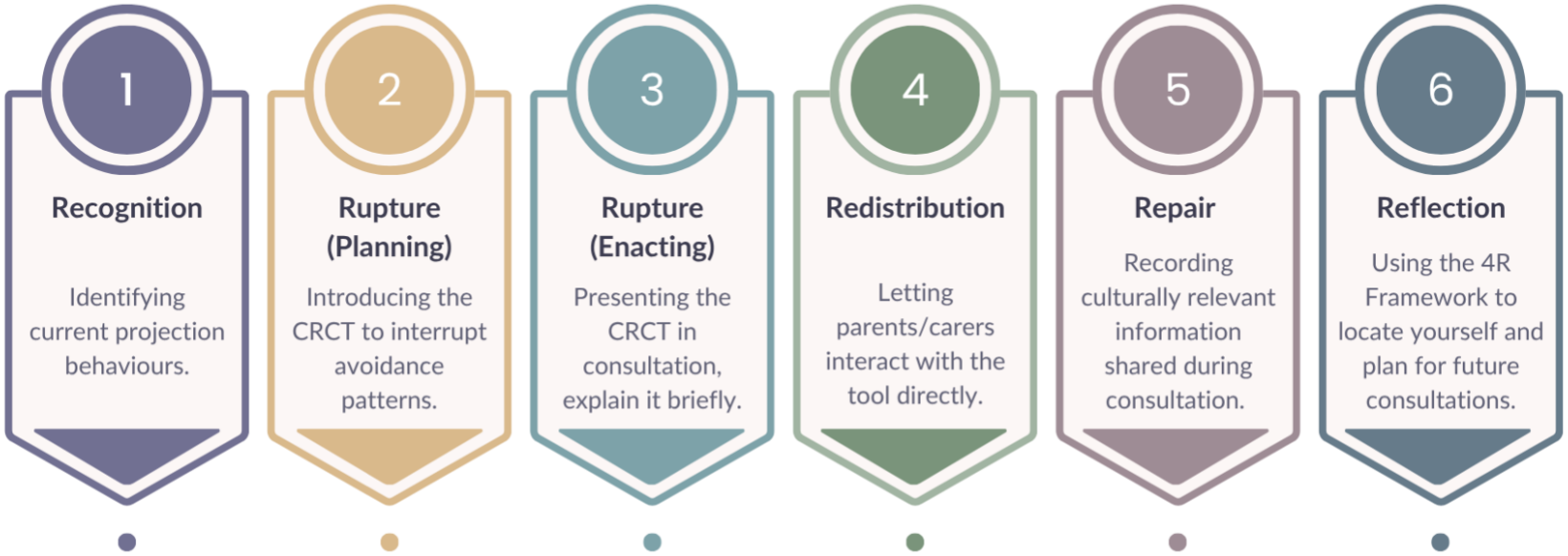
OVERVIEW OF THE CRCT:

The Culturally Responsive Consultation Tool (CRCT) is a digital interactive tool, with a physical sheet format available as an alternative.

The CRCT is designed to redistribute power in consultation-led enquiry for parent/carer-led exploration.

This step-by-step guidance integrates the CRCT's practical use, alongside the: Recognition - Rupture - Redistribution - Repair (4R) Framework for ongoing reflection.

THE 6 STEPS :


1
Recognition
Identifying current projection behaviours.
2
Rupture (Planning)
Introducing the CRCT to interrupt avoidance patterns.
3
Rupture (Enacting)
Presenting the CRCT in consultation, explain it briefly.
4
Redistribution
Letting parents/carers interact with the tool directly.
5
Repair
Recording culturally relevant information shared during consultation.
6
Reflection
Using the 4R Framework to locate yourself and plan for future consultations.

BEFORE CONSULTATION

STEP 1 : RECOGNITION

WHAT TO DO : Use supervision or self reflection to identify current projections.

QUESTIONS TO ASK YOURSELF :

- Am I experiencing anxiety about having cultural conversations during consultation?
- What is my working theory regarding whether parents/carers want cultural exploration? (Check for projections)
- Where is my uncertainty located?
  - Am I questioning my standing?
  - Assuming I know what consultees need?
  - Waiting for consultees to initiate cultural exploration?
- What defensive thoughts am I experiencing?
  - "It's not relevant", "They'll bring it up if it matters", "I don't want to impose".

ACTION : Name the projection in supervision/reflective journal. Recognising patterns reduces its unconscious power.

BEFORE CONSULTATION

STEP 2 : PLAN THE RUPTURE

WHAT TO DO : Plan how you will introduce the CRCT to interrupt any avoidance patterns.

CONTRACTING LANGUAGE OPTIONS :

- "Part of my consultation approach is exploring cultural identity and experience. I have a tool that lets you choose which aspects of culture and identity feel relevant to discuss. Would you be open to using this today?"
- "I use a framework that invites parents/carers to share their cultural background and experiences if they would like. Parent/carers can choose what to explore and how much they want to share."
- "There is a tool I use that has different areas of identity and culture. Parents/carers can select which ones feel important for understanding [child's name]'s experiences. Shalll I show you?"

WHY CONTRACTING MATTERS : Contracting creates a rupture of avoidance patterns (Safran & Muran, 2000). Rather than waiting to see if cultural exploration "comes up naturally", contracting makes cultural exploration structurally present from the outset of consultation. The rupture feels uncomfortable initially, as you are explicitly naming what is often left implicit. This discomfort is expected and not evidence you are doing something wrong.

DURING CONSULTATION

STEP 3 : ENACT THE RUPTURE & INTRODUCE THE CRCT

WHAT TO DO : Show the parents/carers (and SENDCOs, teachers etc.) the CRCT. Explain it briefly and simply.

SCRIPT EXAMPLE : "This tool shows different aspects of identity and culture like race & ethnicity, language, religion, people who are important to us, views on education, and so on. The idea is you choose which areas you feel are relevant for understanding [child's name]'s experiences at school. When you select one, some prompt questions appear to guide our conversation, but you decide how much or how little to share. Does that make sense?"

- Keep explanations brief (maximum 30 seconds)
- Emphasise consultee choice ("you choose," "you decide")
- Normalise not exploring everything ("select what feels relevant")
- Offer an explicit 'opt-out' ("if none of these feel important, that's completely fine")

MANAGING YOUR ANXIETIES : If you feel anxious introducing the tool, remember that discomfort is the rupture. Safran & Muran (2000) describe ruptures as breaks in expected relational patterns that initially increase discomfort, but create possibilities for relating differently.

DURING CONSULTATION

STEP 4 : REDISTRIBUTION THROUGH CULTURAL EXPLORATION

WHAT TO DO : Step back and let parents/carers interact with the tool directly (clicking areas on the digital version or pointing to areas on the sheet version).

YOUR ROLE :

- Facilitate by supporting their exploration.
- Follow their lead. If they select "race and ethnicity", explore that. If they don't, respect their choice.
- Use prompt questions. When using the digital version, prompt questions appear upon selecting an area. Use these to guide conversation, but let parents/carers determine the depth of exploration.
- Don't interpret their selections. If parents/carers select some areas and not others, don't assume you know why. You may ask: "I notice you chose these three, are these the ones which feel most relevant right now?", but accept their answer without probing.

MANAGING DISCOMFORT : If families seem uncomfortable or hesitant, offer an explicit opt-out: "if none of these feel relevant, or you would rather not explore them, that is absolutely fine. We can focus on [presenting need] without using the tool". Redistribution includes redistributing the right to not engage with cultural exploration.

DURING CONSULTATION

STEP 4 : REDISTRIBUTION THROUGH CULTURAL EXPLORATION: CONTINUED

An Example Based on My Previous Experience

Parent/Carer selects "Language and Communication"

Catherine: "Okay, you have chosen language and communication. The tool is asking: "What languages are spoken at home? How does [child] navigate between languages?"

Parent Responds.

Catherine: "That's really helpful. How do you think [teacher/school] understands [child]'s language background?"

School : Shares the child's pride for their home language at school, and Spanish lessons as a time the child shows increased confidence and positive peer interactions.

The Triad : Collaborated a strategy to support peer interaction by nurturing the CYP's enjoyment of languages.

DURING CONSULTATION

STEP 5 : REPAIR - DOCUMENT PARENT/CARER TESTIMONY

WHAT TO DO : Record what is shared in formulation/consultation notes, centring on parent/carer language.

YOUR ROLE :

- Record which areas families chose to explore (this shows what they deemed most relevant).
- Take note of the cultural factors families connected to the presenting concern/need.
- Include the cultural strengths/resources that the parent/carer identified, not just the difficulties.

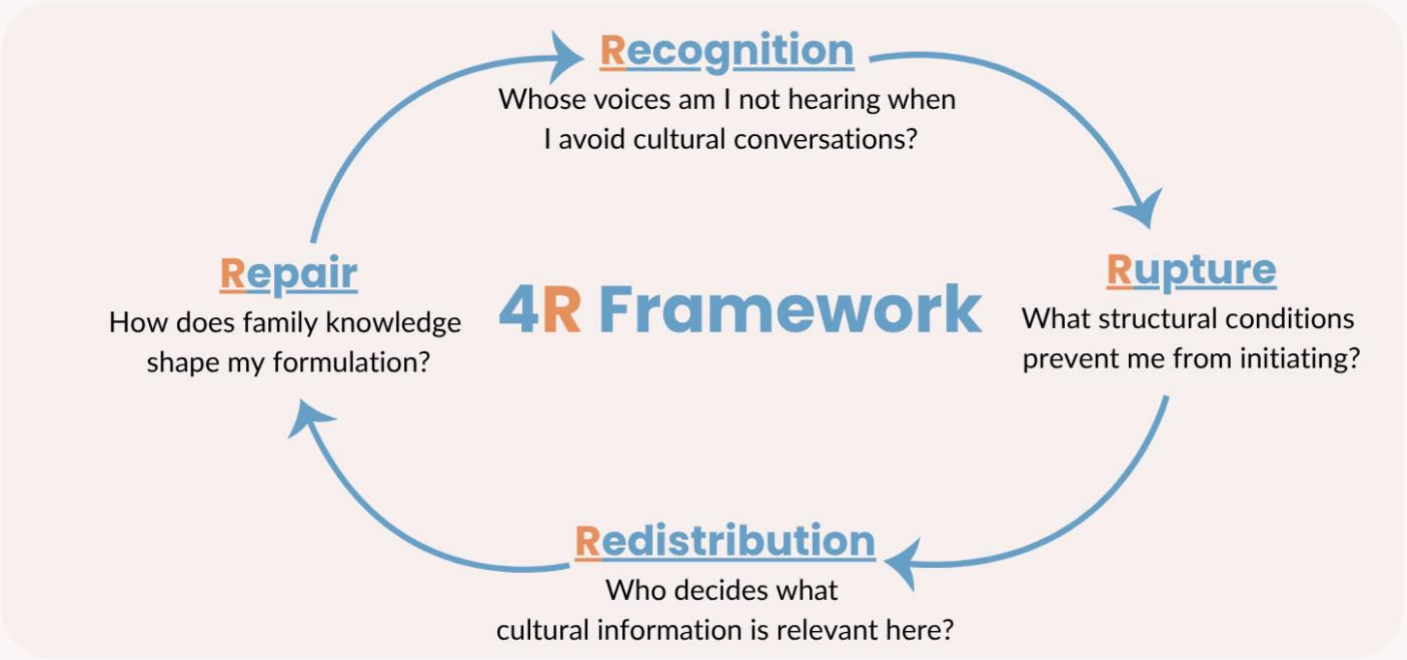
EXAMPLE FROM MY PREVIOUS CONSULTATION:

- **CRCT USED :** Family selected: Race & Ethnicity, Language & Communication, and People Who Are Important To Us.
- **PARENT DESCRIBED :** Family as Black British with Jamaican heritage. Noted [child] is only Black student in year group, and has started to ask about hair difference.
- **HOME LANGUAGES :** English and Patois. [Child] "code-switches" between home and school language; parent wonders if school sees this as "behaviour" rather than language navigation.
- **FAMILY STRUCTURE :** [Child] lives with mum and sees dad fortnightly. Extended family (grandmother, aunts) very involved in care and educational support.
- **PARENT EMPHASISED FAMILY EDUCATIONAL VALUES :** Several family members are teachers in Jamaica. School may not be aware of this cultural educational heritage and how this influences [Child].

AFTER CONSULTATION

STEP 6 : REFLECT USING THE 4R FRAMEWORK

WHAT TO DO : Use supervision or engage in self-reflection to locate yourseld in the 4R framwork cycle and plan for your next consultation



AFTER CONSULTATION

STEP 6 : REFLECT USING THE 4R FRAMEWORK: CONTINUED

FURTHER RELFECTION QUESTIONS FOR EACH STAGE OF THE 4R FRAMEWORK:

RECOGNITION

- Did I recognise projection operating before or during consultation?
- What anxiety did I experience?
- How did I manage it?

RUPTURE

- How did introducing the CRCT feel? (Uncomfortable? Smooth? Awkward?)
- Did I experience the rupture of my usual pattern (e.g., avoiding explicit cultural enquiry)?
- How did the tool help contain my anxiety during that rupture?

REDISTRIBUTION

- Whose knowledge was centred as authoritative during cultural exploration?
- Was I led by the consultee or did I direct their selections?
- Did I accept their choice of which areas to, or not to, explore?

REPAIR

- Did cultural exploration feel integrated into consultation or like an add on?
- How did the relationship feel after using the tool?
- What would I do differently next time to normalise cultural enquiry further?

SPECIAL CIRCUMSTANCES

WHEN FAMILIES DECLINE TO USE THE TOOL

Redistribution includes the right to say no. If parents/carers decline, this does not mean the tool failed. It means you offered the tool and they chose not to utilise it in this moment.

WHAT TO DO:

- Accept their choice without probing ("That's absolutely fine.")
- Proceed with consultation without using the tool.
- Reflect afterwards: Was my introduction anxiety-driven/rushed? Did I inadvertently communicate discomfort, causing them to decline?
- 4R Location: You are still at Redistribution stage (offering choice is redistribution) even if the parent/carer does not engage with the tool, offering choice still matters.

WHEN YOUR PLAN TO INTRODUCE THE TOOL DID *NOT* GO TO PLAN

Avoidance patterns operated and the projection loop remained unruptured.

WHAT TO DO:

- Do not shame yourself, defensive patterns are powerful and the system is currently positioned for them to succeed.
- Recognise it happened (4R Framework).
- In supervision: "I didn't introduce the CRCT and want to explore what I was anxious about with this specific consultation."
- Plan how to introduce it in follow-up contact, or during the next consultation.
- The 4R location is at the Recognition stage, as you noticed avoidance operating.

SPECIAL CIRCUMSTANCES

WHEN CULTURAL EXPLORATION SURFACES DURING DIFFICULT DYNAMICS

The tool is unearthing what has been operating at a systemic level, but has remained silent.

Example: Family shares experiences of racism at school; school staff becomes defensive.

WHAT TO DO:

- Hold both experiences in mind. The parent/carer testimony is authoritative and school staff may have emotional responses.
- Use formulation, "What I am hearing is [child] has experienced [specific incident parent/carer names]. This is impacting [specific ways]. We need to think together about how school can respond."
- Do not minimise parent/carer testimony to manage school staff discomfort or to protect the working relationship (that is projection operating).
- Offer school staff a separate space to process defensiveness (supervision, consultation with you) whilst maintaining cultural testimony as authoritative in formulation.
- The 4R location is at Rupture stage, as it is happening at a systems level (it is not an individual defensive pattern). The school's usual practice (not centring family cultural testimony) is being interrupted and discomfort is expected.

WHEN YOU ARE WORKING WITH YOUNG PEOPLE DIRECTLY

You can adapt how you use the tool. Young people can interact with the digital version directly by clicking areas themselves.

SCRIPT:

"This tool has different pictures and labels to help us explore identity and culture. You can click on ones that feel important for understanding your experiences at school. Do you want to have a look? We can talk through any questions that may not be clear or explore areas together".

This shifts the young person from the object of consultation (adults discussing them) to the subject of direct exploration.