ON BECOMING A CONSULTANT: THE TRANSITION FOR A CLINICAL PSYCHOLOGIST

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Many clinical psychologists have been finding that consulting is a rewarding, interesting, and challenging undertaking, often changing careers to become full-time consultants. However, the role of the consultant is, in a number of ways, different than that of the clinician, requiring a dramatic change in perspective. This article by 2 consultants who made the leap discusses many of these differences. We begin by discussing some of the steps in preparing to be a consultant. In this context, we stress self-assessment and ethical considerations, along with a suggestion for acquiring basic and advanced training and note educational opportunities for the psychologist making the transition to consulting. A review of different consulting settings leads to a discussion of reframing basic assumptions to which clinical psychologists are subject. An orientation to consulting suggests that 2 topics, organizational systems and culture, can contribute to the transition process and assist in the reframing process. A table compares some issues faced by clinicians and consultants.

Keywords: from clinician to consultant, preparation and difficulties, reframing some basic assumptions, culture, organizations as systems

The theory and practice of clinical psychology has influenced the understanding of numerous aspects of business. The acceptance of psychology by many business circles has provided a pathway for clinical psychologists to choose consulting either as a career or as an adjunct to their practice. Psychology has entered the consulting field via a variety of pathways, and, in many cases, clinicians have followed along, applying their clinical skills to coaching managers and executives (Levinson, 2002, 2006), modifying their clinical orientation to comport with the specific requirements of the situation (e.g., integrating systems theory and family therapy to analyze organizational behavior as Palazzoli et al., 1986, has done), expanding the range of decision theory beyond the study of rational thinking (Kahneman, 2011), contributing to behavioral economics (Ariely, 2009; Thaler & Sunstein, 2009), and viewing self-identity through a broad lens that includes context (Proshansky, Fabian, & Kaminoff, 1983), among other amalgams. Each of these expansions into new ways of thinking and doing have significantly enhanced and informed the consulting of the authors. The field of


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consulting can be endlessly challenging and exciting, and frequently more financially rewarding than the clinical field. Industry and business understand the value the field of psychology brings to the table and welcomes its practitioners. Additionally, the public’s interest in psychological understanding of business mishaps (National Public Radio, 2012, fraud as an example) places psychology experts in demand, enhancing the allure of the consulting field for psychologists. In brief, becoming a consultant can be a very rewarding undertaking leading to a very rewarding career.

However, what clinical psychologists may not fully appreciate is that the practice of consulting is not equivalent to the practice of clinical psychology, and in the many instances where there is some apparent overlap, that is, when being “clinical” appears called for, danger lurks.

The primary audience for this article is psychologists who are thinking about or have decided on becoming consultants, either full or part time. The authors are two psychologists who have walked the path from clinician to consultant and whose appreciation for the scenery may be of interest and use to this group. We offer some basic observations about the preparation and difficulties accompanying the transition, suggestions for addressing them, a self-assessment around psychological areas that are generally unique to the consulting arena, a recommendation to engage in reframing some basic assumptions that clinicians tend to have, and sources of additional input pertinent to the transition process. Two subject areas in particular, culture and organizations as systems, are introduced to aid in the reframing process—two areas that clinical psychologists making the transition may be less familiar with because their education did not stress it or their clinical practice require it.

**Preparation**

**An Introduction to the Field**

We would venture to guess that most transitions to becoming a consultant for psychologists come about through invitations by organizations who feel that having a psychologist as consultant will add a needed perspective to their functioning. After all, organizations are composed of people, and who better to recognize and appreciate their behavior than psychologists? Another common entry point to consulting is applying for and securing a position with an existing consulting firm that then takes on the process of acculturating the clinician to the world of consulting. Both doorways open into a marketplace different from what you, the novice consultant, are familiar.

As a clinician, your client base originated for the most part through referrals who did not generally require or expect you to present a therapy plan of action, much less a proposal. In the consulting world, selling your services, even to referrals, is a frequent expectation. Presenting a proposal is a form of selling in that it includes what you see as the problem, what you intend to do about it, and how will you go about doing it—in the process convincing the client that you know what you are talking about. Proposals and reports are action items and not an opportunity to demonstrate your knowledge that may not be directly relevant to the situation at hand; they are meant to demonstrate your understanding of the client’s perception of the reason for consultation and to present a strategy for action. Also, the proposal is not a declaration of how great you are, although it does invite a review of your successes in similar situations. In addition, it is not the time to prejudge the situation (e.g., by implicitly or explicitly taking sides) before a preliminary comprehensive analysis.  

One of the very first questions that you might ask yourself, then, is the degree to which you are comfortable with leaving your office and selling to strangers, with networking among not only colleagues but business groups and organizations, and with asking these various contacts for referrals. One of the most successful ways of building a practice is to nurture relationships with contacts and business associates. Of course, this issue leads to one about your comfort level with rejection. Usually a therapy practice comprises more than several patients; the impact of one leaving

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1 Novices hired by consulting firms may not be expected to compose proposals and scout for client prospects early in their careers but are generally expected to do both as they gain experience.
your practice is lessened by this. A consulting practice is usually dependent on far fewer clients; one rejection is much more impactful.

Treating patients does not often require a background search on a patient, though during the course of therapy background information will be sought and discussed but within the confines of the clinical office. Though the various consultation opportunities presented will vary and the preparation for each differ, the one generalization that is best honored is the advice to do homework, not only about the business or organization hiring you (e.g., to get a sense of the internal and external challenges facing the firm) but also to explore its industry—its language, unique characteristics, general goals and direction, and so forth. This suggestion applies to virtually all consulting opportunities.

A consultant might profitably read general business newspapers (e.g., the Wall Street Journal) and business magazines (e.g., Harvard Business Review) as well as those for a specific industry. The transition might entail attending network meetings, learning basic business principles—profit-and-loss statements, strategy, manufacturing processes, and so forth. This does not necessarily mean becoming a business expert, but it does suggest getting on “speaking terms” with the language used by people in the organization. It will inform the work that you perform. The same suggestion applies to the nonprofit world—for example, it would behoove an education consultant to learn the basic issues with which educators are concerned. The road to this learning is to read the education literature, attend relevant conferences and meetings, and so on.

There is a significant benefit in your becoming familiar with the language of the industry within which you are operating, over and above its contribution to your understanding. The more conversant and familiar you are with the industry’s language, the more you are seen as someone to be listened to rather than as someone who has been dropped deus ex machina-like and foisted on a doubting audience. Further, that you know the language indicates that you are willing to learn about the organization and not simply to pontificate. This is not a guarantee, but it supports the assumption that you have bothered to do your research.

One area where therapy and consulting share a common approach is in seeking out mentors, experts, consultants, or supervisors, particularly when first entering the field but also later. Seeking consultation from experts in the field provides occasions to discuss questions about a particular case, to seek advice on difficult and unique situations, and to learn where landmines might be in the work being done. Mentoring is particularly helpful when unexpected or unintended consequences develop. The experienced consultant has no doubt encountered these events and can provide a reality check on their developments. Given that this kind of help can be extremely valuable, you might early on seek out a compatible mentor after interviewing several to determine fit. Novices in consulting firms are quite fortunate to have this type of mentoring readily available.

Self-Assessment

Perhaps the most important aspect of preparation in becoming a consultant is to assess your strengths and weaknesses, as well as your motivation in wanting to become a consultant.

Being a consultant places you on a stage in which there is a larger (and in some cases, a much larger) audience than a clinician normally entertains. This can prove seductive and can excite any histrionic or grandiose tendencies to which you might be subject. Consider the following two examples:

One of the authors witnessed a management meeting being facilitated by a psychologist/consultant in which the CEO would refer many issues to the consultant who would then make the final decision as to how the situation should be resolved. Rather than dealing with the CEO’s behavior and the management team’s negative reaction to their CEO deferring decision-making authority to the consultant, he stepped into the role of decision-maker without hesitation.

Another consultant relished the opportunity to take up precious management time to lecture the team about various topics of interest to him without tying the content to either the dynamics of the team or to the various challenges confronting the business.

One situation that can and does place the consultant in a decision-making role is when he or she is asked to evaluate the relative merits of offspring to run a family business (Liebowitz, 2011). After
utilizing a variety of measures (e.g., 360 feedback, assessments, having the candidates present a strategic plan), you as consultant might be expected to recommend one or the other as a potential successor or, if neither is suitable, to suggest an alternative course. This situation can be very seductive for a consultant—you are literally holding the future of the firm in your hands. How you deal with this expectation can be either constructive or negative. The consultant who relies solely or primarily on a gut feeling, without concrete evidence bolstering the recommendation, is asking for trouble.

A similarly seductive motive is the need to run the ship and command a battalion, and a business or organization can provide the opportunity. You might be sitting near the seat of power occupied by the CEO and be offering advice and support. The success the firm experiences can be an elixir—you can feel that you had a significant influence on the outcome, and you may well have. The danger to look out for is not the pleasure in either the client doing well or in your being part of its success but rather in the tendency to push the executive into a direction or into a decision that may not be in the best interest of the organization. As a new consultant, you can easily confuse your wanting the organization to do well with your thinking you know better than the executive the direction to go.

Another situation where self-assessment is warranted is when one group (e.g., an individual or a department) becomes the “enemy,” and the other side welcomes your intervention. It takes only a little push to take sides and become identified with the welcoming committee and to overlook what is involved in the situation that produces such a negative turn of events. Everyone enjoys being liked and accepted, but allowing that need to interfere with the assessment of the situation is counterproductive.

Perhaps the most insidious outgrowth of inattentive self-assessment is agreeing with and acting upon management’s assessment of the situation when you really disagree with it. Among the many motives for this tendency, the one that borders on the unethical—agreeing with the client in spite of your divergent assessment—is the wish to retain the client. What makes this a very difficult situation in which to maneuver for any consultant is that in many instances disagreeing with the prevailing understanding of the situation can indeed lead to the dismissal of the consultant. How to present disagreements, how to convey different ways of looking and interpreting, how to introduce a different viewpoint becomes a skill that consultants should learn early on in their careers. Here again, utilizing a mentor to discuss the situation is imperative and instructive.

Ethical Considerations

Ethical considerations in consulting raise issues not usually encountered in the clinician’s office. Fuqua, Newman, Simpson, and Choi (2012) have discussed many of the ethical challenges that arise in consulting, particularly around issues of setting initial and ongoing ground rules for the project. Also, as we discuss throughout this article, particularly in the section on self-assessment, there are challenges facing you that can border on ethical considerations. It behooves you to read carefully the American Psychological Association Ethical Principles of Psychologists (American Psychological Association, 2006) and Code of Conduct, including amendments (American Psychological Association, 2010), particularly Section 3.11, this time not as a clinician but rather from the perspective of a consultant.

We want to underline two ethical considerations that we have seen breeched often enough by novice consultants to warrant attention. One of these has already been reviewed, that is, being attuned to awareness of self and potential conflict-of-interest situations arising from internal psychological temptations. It is often the clinician with years of experience and success in the clinical field who may be tempted to overlook this step, not recognizing nor acknowledging that the consulting playing field poses psychological challenges (noted throughout this article) not experienced in the clinical arena and, therefore, easily overlooked. The second lapse, a failure to pursue the training necessary to update one’s knowledge about consulting, frequently occurs again for the same reason affecting the first lapse—a belief that one’s clinical training is sufficient to make the transition successfully.

Involving experienced consultants early in one’s career can aid in developing self-awareness, as mentioned above. Also, there are several ways of securing training. One way is by taking the course
offered by American Psychological Association Division 13, titled The Consulting Skills—Basic and Advanced Series. A fellowship in consulting psychology is offered by the Veterans Administration. There are numerous books that may be helpful in the transition, such as Block (2011); Freedman and Zachrison (2001); Kilburg (2000); and Lowman (2002). Another source of knowledge that can prove invaluable to training in the field can be found in material on newer developments such as heuristics (Kahneman, 2011) and behavioral economics (Ariely, 2009; Thaler et al., 2009). We have found both to be extraordinarily important in organizational strategic planning, executive leadership, and team-building. Knowledge about organizational design (Galbraith, 1995), such as how information flows through an organization, has informed conflict-resolution strategies in many situations.

The Consulting Settings

The Range of Settings

The domain of the consulting psychologist covers a broad range of organizations large and small, each with its own set of goals, structures, and governing bodies, along with differing life cycles, roles, and role requirements, as well as differing expectations for their consultants. As an example, only at the edges do the economic priorities of a for-profit business overlap the goals of a nonprofit hospital whose aim is to enhance patient care and longevity. Even the responsibilities of a hospital’s executive director overlap only to some limited extent with a for-profit CEO around goals, function, challenges, and strategy.

In addition, to talk about the for-profit enterprise as a unitary entity is misleading. The realm of the for-profit business itself covers a range of different undertakings—entrepreneurial firms, family-owned businesses, closely held enterprises, publicly traded undertakings—each with different though clearly overlapping and, in many instances, sharply divergent strategic goals. A closely held firm backed by investment capital might be looking to sell when the price is right, as opposed to a family business whose intent is to institutionalize family succession (Liebowitz, 2011). The short-term horizon of the former business may result in a different orientation (e.g., minimal investment in training) from a firm intending to become a family heritage (e.g., providing management-development training for a potential successor).

The size of the organization itself provides its own set of issues to confront. As an example, the larger the organization, the more complex it becomes. The more complex the organization grows, the more unexpected and unintended events distal to the immediate focus of attention occur.

The fact that many organizations, both large and small, are international in scope presents significant challenges for the experienced consultant—even more so for the newly minted consultant who has to consider both his or her consulting and international inexperience. Lowman (2012) has even suggested international consulting skills as minimal competencies for consultants because “specific locations even in isolated and would-be quiescent organizations in rural areas can still experience the impact of having to contend with internationally influenced issues” (p. 339).

To illustrate, Leonard et al. (2012) described how counterproductive it would be for a Western educator who is presenting in an Asian country to utilize “a Socratic style involving students through questions that encourage reflection, exercises to demonstrate and practice concepts, and individual and team projects to involve students” (Leonard et al., 2012, p. 262). It would be going against culture in this type of situation to insist on engaging students in American-style pedagogical approaches.

These cultural misunderstood assumptions can even appear closer to home—between an American and German partners where the cultural distance is assumed to be small. One of the authors was surprised when his German joint-venture partner was incensed that a new non-German client was brought aboard as a client. The partner’s unstated assumption was that the joint venture would consult only to German firms in the United States; the author’s (unstated) assumption was that any firm was welcome if it led to the growth of the venture. The partner pointed out that his understanding of the agreement was written down—that is, working with German ventures housed in the States—but the author indicated that there was no stated prohibition against engaging
non-German firms and doing so could add to the venture’s bottom line. In Germany what is written is holy writ, and much paperwork accompanying projects is expected to be precisely followed. The partners succeeded in negotiating through this (and similar) issues, but it underlines how even apparently closely matched cultures can be a breeding ground for conflicting assumptions.

Also, one of the authors had an international assignment in a Latin American organization. When the employee population found out the consultant was a psychologist, they were not eager nor culturally comfortable to participate in the training. It took about 6 months for the psychologist to establish “trust” before they were willing to be engaged in the training.

Another organization feature facing the consultant is workplace diversity. Each population segment brings to the workplace views shaped by ethnicity, age, race, cognitive style, education, background, and gender, among other differences. These identity factors will affect workplace features such as interactions, communications, and adaptability, but it is the cognitive aspects of these identity factors that highlight the benefits of diversity. These benefits frequently outweigh the difficulties a diverse workplace might present, particularly if the consultant knows how to manage it appropriately.

Page (2012, p. 1) suggests that “differences in how people think contribute to collective performance in a variety of contexts, including how differences improve prediction and problem solving and how they make systems more robust. . . . Optimal teams, groups and societies require diverse talent, and in order to perform well, they must promote diverse ways of thinking.” Page (2012, p. 234ff) even suggests that a diverse group in many situations can outperform a group whose members are selected on the basis of ability. He presents numerous anecdotal instances supported by mathematical models of how and where diverse groups do better than homogeneous groups.

However, as Ely and Thomas (2001) have indicated, the empirical results on the benefits of diversity are contradictory. They offer a theory, based on their research, about the conditions under which diversity enhances or detracts from workgroup performance. Their research suggests three perspectives that characterize how diversity is implemented and utilized: integration-and-learning, access-and-legitimacy, and discrimination-and-fairness.

The integration-and-learning perspective on diversity takes the position that “the insights, skills and experiences employees have developed as members of various cultural identity groups are potentially valuable resources” (Ely et al., 2001, p. 240) and that the workgroup recognizes and values this component of diversity. The access-and-legitimacy perspective is based on the view that, since the organization’s markets and constituencies are diverse, the organization should be as diverse in order to match and subsequently enter these markets and appeal to their constituencies. The third perspective, discrimination-and-fairness, appears as a moral imperative, that is, that the workplace should be diverse as a means of promoting justice and fair treatment for all members of society. Not surprising, their conclusion is that only the first perspective, integration-and-learning, is associated with the benefits of diversity.

In the late 1990s, IBM provided one example of an exemplary implementation of this research finding. IBM elevated diversity to be a basic strategic direction for the firm (Thomas, 2006). It created eight task forces, each devoted to a different group (e.g., Asian, African American, and lesbian); the goal was to uncover and understand the differences between the groups, utilizing this learning to broaden responsiveness to both employees and customers. In the opinion of many senior managers, one result of these efforts was the successful resurgence of IBM as a key player in the IT world.

The novice consultant might well keep this finding in mind when working with diversity and diverse groups: It is the appreciation, valuing, and utilizing of the differences among people of different races, gender, ethnicity, and so on that underlies benefits.

The Range of Services

Within each of these different types of organizations you as a consulting psychologist might be invited to work with individuals, small and large teams, departments and divisions of organizations and businesses, as well as the entire organization itself, in a variety of different projects (e.g., executive coaching and assessment, team-building, organization change and redesign, and strategic
planning). Quite often the original invitation, for example, to conduct coaching sessions with individuals, might and often does lead to other organizational assignments. As Fuqua et al. (2012) have indicated, this broadening of services raises additional ethical challenges (e.g., including additional personnel under the blanket of informed consent; negotiating with prospective participants about their roles and participation; defining with the client the limits of the expanded areas of intervention and participation; and deciding with the client the additional resources that might be required).

You will have to contend not only with varying organizations that require your attention, and with differing combinations of people and segments within these organizations, but also with different goals and expectations for these people and groups within the same organization.

One prominent and frequently observed example of this is the recurring battle that often characterizes the relationship between sales and production. The goal of sales is to entice customers into the fold, retain them, and then to sell more to them. They expect production to provide product and services when and as needed. Production has to consider product quality, manufacturing dependencies, delivery of parts, sourcing of parts, among many other concerns. Consequently, coordinating the goals of the two departments can be problematic. Individual coaching of the two departmental heads may well be unsuccessful unless a working agreement between them can be negotiated, which would then allow the coaching focus to revert back to the original consulting goal of personal development. Consider the following example:

A very creative product-design firm in financial trouble was looking for a new president/CEO. After extensive interviewing of a number of candidates by senior staff, two were recommended for testing. Each candidate was supported by approximately half of the senior staff. One candidate was an innovative thinker but with little financial acumen—the other, an experienced manager with a wide background in financial matters and a style that allowed for divergent thinking. The consultant, one of the authors of this paper, recognized that the firm needed to embrace serious financial constraints immediately and recommended the candidate with the broad financial background be hired but also strongly suggested that a search be instituted for a “vice president of innovation” who understood financial considerations at a minimum and could work within those boundaries. Staff accepted the recommendations, thereby avoiding a conflict among management that could have impaled the firm.

Each of these consulting opportunities mentioned above (and their permutations and combinations) require of you different skills, different approaches, and different mind sets other than for what your clinical training prepared you. This situation is the norm, not the exception (Table 1).

Reframing

Given the variety of business types, their differing concerns, and the many diverse consulting assignments that could arise, is there some common theme a novice consultant might utilize to begin traversing this landscape? Our experience suggests that learning to reframe basic assumptions is one of our best guides. A frame is what literally holds a picture; even such a minor adjustment as changing the frame from wood to metal gives a totally different cast to the picture. Similarly, by changing some basic presuppositions and assumptions that support the clinical frame, the consulting picture and how it is viewed changes.

Coaching and particularly its variant, executive coaching, is the area of consulting that is most similar to what most clinicians do in their current practice (Gray, 2006; Hart, Blattner, & Leipsic, 2007; Kampa-Kokesh & Anderson, 2001). This similarity between clinical work and consulting may mistakenly seduce new consultants into continuing their clinical orientation while coaching. However, the differences are dramatic and require the novice coach’s attention.

For example, the goals of coaching may include the improvement of the executive’s work performance and interpersonal skills. Because there will be a discrepancy between how the executive thinks he or she comes across to others and how others see that person, one major function of the executive coach is to fill this gap by providing feedback to the executive, feedback informed
Table 1
A Comparison of Clinical and Consulting Psychology

<table>
<thead>
<tr>
<th>The clinical psychologist</th>
<th>The organizational consultant</th>
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<tbody>
<tr>
<td>The roles</td>
<td>The consultant focuses on such workplace issues as assisting firms in changing their culture, succession planning, developing leaders, matching people and jobs, coaching of individuals, finding ways to reduce workplace stress, reducing conflict, studying people’s motivation and job satisfaction, and other issues that confront organizations.</td>
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<td>Consent</td>
<td>It is advisable to provide an informed consent form. However, the consultant often faces difficulty in defining the client at the outset because (1) the eventual client might be identified after preliminary investigation; (2) additional information gathered during the investigation might expand the range of services to be provided and thereby include additional personnel; and (3) situations apparently unrelated to the initial request for service might reveal additional clients. The consultant discusses with the eventual client(s) and supervisors not only what processes and procedures (including assessments) will be used but also clarifies confidentiality issues (e.g., sharing of information, with whom and under what circumstances) both within the organization and external to it (e.g., providing the name of the client organization as a reference). This discussion is ongoing since circumstances change and can do so rapidly.</td>
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<tr>
<td>Common ethical concerns</td>
<td>Multiple relationships often develop (e.g., consultant is both coaching a client and also recommending him for advancement). Confidentiality issues arise (e.g., when organization requires information about a coaching client that has been privileged).</td>
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<tr>
<td>Use of assessments</td>
<td>The instruments consultants utilize fall generally into two camps: those designed to assess organizational issues (e.g., culture, climate, employee morale, and organizational effectiveness) and those oriented to individual growth and development issues (e.g., what would allow an individual to become more strategic). There may be overlap between the clinical and consulting testing of individuals.</td>
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<tr>
<td>Diagnosis</td>
<td>Uses assessments and interviews to gather information that can aid in determining where and how to intervene and what tools (e.g., simulations and group discussions) to use in the process.</td>
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(table continues)
by 360-degree instruments, leadership inventories, interviews with colleagues and contacts, obser-
vation of behavior in meetings, and so forth. Further, the coach is often expected to be more
directive, particularly with respect to the executive’s behavior. Coaching need not go as deep into
the psychological aspects of issues facing the executive as a clinical psychologist might. These
differences can make the relationship between coach and executive more collegial and informal than
is experienced in therapy.

In general, you have to lay aside (reframe) a style generally assumed in therapy and taught in
school of being analytic and interpretive, going “deep” into issues, remaining at a therapeutic
distance from both client and his or her friends and family, and depending on the client’s self-reports
to assess progress. Success in coaching, in contrast, is evaluated by behavior change as witnessed
by either the referring party, HR, the boss, or colleagues. Additionally, your exposure to business
issues such as leadership, decision-making, and strategic thinking, to augment your appreciation for
what the client is experiencing, is extremely important. Therapy rarely requires such input about
situations in the real world in which the client might find himself or herself. Therapy may well deal
with the decision-making a patient entertains (e.g., as it reflects how biased it is by psychodynamic
considerations), but only infrequently, if at all, will therapy go into the effects the decision will have
on others.

Accepting and dealing with organizational paradox, a very common occurrence in consulting,
can be unnerving for the novice consultant. To illustrate, it is not uncommon for the consulting goals
of executive coaching and those of organizational consulting to be similar, but their processes and
approach can run counter to and negate each other. Within the same company, a coaching
assignment might focus on developing the leadership skills of a manager, whereas a newly
appointed CEO might want a consulting psychologist to assist in bringing aboard the CEO’s own
top management team, notwithstanding the proven talents of the current crop of executives. The
processes of executive coaching and onboarding a whole new management team are at odds in this
company (management development of existing talent vs. replacing executives with outsiders),
although the ultimate goal of each is similar (having an outstanding management team). The new
consultant might then have to deal not only with the confusion and its impact on company morale

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<th>Table 1 (continued)</th>
<th>The clinical psychologist</th>
<th>The organizational consultant</th>
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<tr>
<td><strong>Termination</strong></td>
<td>Clinicians involve the client in a termination plan. They know the difference between</td>
<td>Termination is determined by the organization. If consultation is not</td>
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<td>termination and abandonment (Ethical rule 10.10). Utilizes his/her knowledge and</td>
<td>achieving the expected results, it is the</td>
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<td>assessment of the patient’s psychological and behavioral changes to recommend</td>
<td>responsibility of the consultant to discuss</td>
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<td>termination of treatment. Also, the clinician may refuse to provide treatment or may</td>
<td>this with the client and to determine next</td>
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<td>terminate treatment at some point if a conflict of interest arises that cannot be</td>
<td>steps.</td>
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<td>corrected nor its effects eliminated. A patient can terminate at any time. State laws</td>
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<td></td>
<td>differ regarding committed patients and their rights about termination.</td>
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<td><strong>Evaluating outcomes</strong></td>
<td>Evidence-based practice in clinical psychology advocates for improved patient outcomes</td>
<td>Evaluating the outcome of consultation is usually provided by the organization, but</td>
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<td></td>
<td>by informing clinical practice with relevant research.</td>
<td>sometimes (e.g., when the outcome is not</td>
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<td>what was desired or expected by the client)</td>
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<td>it is the best that can be achieved given the</td>
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<td>circumstances. In some situations, the outcome can be objectively measured (e.g.,</td>
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<td>by an increase in sales or profit).</td>
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Note. Refer to American Psychological Association (2006, 2010) for many of the issues raised here.
that could result but also with his or her own confusion and dent in confidence. The reframe for the coach here is to learn to accept and deal with different approaches coming from many directions from different people, whereas in therapy contradictory goals reside in one individual, the patient, with whom the therapist is quite familiar.

The transition also requires a comfort with emergent, unanticipated, and unexpected events that characterize systems. Whereas in individual therapy the behavior of an individual patient is fairly predictable over a brief span of time, organizational systems inevitably highlight how little control you have over the results of your change efforts. A team-building process emphasizing openness might result in the group leader, who had ostensibly wanted more “straight talk” and had contracted for the consultation, summarily and prematurely ending the project without notice precisely because there was too much “straight talk,” that is, direct and unguarded sharing of opinions and perceptions previously hidden and disagreements about procedures that were previously not expressed.

An organizational redesign that a management team had approved and that the employee staff had seemingly bought into turns out to be a failure; the very people who had originally sought the change were the ones dragging their heels and undermining the project in the process. An individual referred to one of the authors for executive coaching with the goal of becoming more strategic in his thinking is terminated precisely for becoming more strategic in his thinking, that is, insisting that the management team reconsider its strategy, which was being championed by the president of the firm.

There are, of course, reasons for each of these unexpected developments and ways of putting these change efforts back on track, if not anticipating them. Anticipating and learning to deal with these unintended consequences is another reframe the novice consultant might consider. The point to be made is that this is the norm rather than the exception. As an aside, if the experience of the authors and that of several colleagues suggest a significant failure rate for organizational-change efforts, any explanation might take these examples into account.

A further difference between consulting and therapy that faces the novice consultant is that an individual is no longer the identified patient, and the goals are no longer only and simply his or her enhanced functioning. Consulting requires that a broader view be taken and that the organization’s enhancement become a basic focus. It is the success of the organization and not only the growth of the individual that is paramount—another reframe to entertain. Executive coaching, the nearest parallel to the individual therapy undertaking as noted above, has as its outcome the betterment of the organization through the enhanced functioning of the individual. To quote an admonition frequently heard within coaching circles to the point of becoming a moral imperative, “The company is paying the bill!” and, therefore, should be the ultimate beneficiary of any consultation. This does not mean that confidentiality can be violated by the company. Client/coach confidentiality is sacrosanct; individual observable behavior is or should be the only concern of management, not what transpires in the coaching office.

Thus, consulting of any flavor entails having a third party looking over your shoulders, either passively or more intrusively than otherwise. It is a challenge (a reframe) with which you have to learn to deal.

You will often be expected to be more assertive and direct than a clinician might be, as indicated above. Your suggestion that the firm hire a marketing consultant, that a strategic plan be pursued, or that a better way of downsizing the firm be implemented (among many other possible proactive recommendations) may be just what the organization requires to avoid disaster. Given that a basic commitment is to the organization, putting forward suggestions that may go beyond your immediate area of expertise but reflective of your accumulated and growing body of experience is expected and valued. Implementing these activities need not be your responsibility unless you have developed a skill in these areas, but being and becoming knowledgeable about the forces that move businesses and organizations is a basic requirement of you as a consulting psychologist. Becoming aware of these forces provides additional material that informs your reframing efforts.

To repeat, the one constant in this welter of consulting opportunities and challenges confronting you as a clinically oriented psychologist entering the consulting field is the need to reframe your
clinical orientation and a willingness to consider other possible approaches, theories, and perspectives.

A dramatic example of the need to reframe involved a referral of a family that one of the authors received (Liebowitz, 2011, p. ix–x). The referral source was a therapist who had been seeing a family and its members for many years, individually, in dyads, or as a whole. The therapy had been at an impasse for a long time. Because the family was in business together, the therapist thought that perhaps a family-business consultant might be of assistance. A very important business issue had not been a focus in therapy: the possibility of the son becoming the firm’s CEO and succeeding his father. When asked why this conversation had not gone beyond a cursory mention, the father insisted that his son was not ready; in the past this had stopped any further discussion. Upon being asked to amplify his remarks, the father did mention the criteria the son would have to meet were he to become the firm’s CEO. In the process of the consultant pursuing this topic, the son acknowledged the criteria and indicated that he could meet these standards. Within 6 months, he did in fact meet the performance standard. The second session with the family had been scheduled around this 6-month period and was characterized by a great deal of anger. Father had reneged on his promise to promote his son were he to fulfill the criteria. Extensive questioning about the reluctance to have his son succeed revealed that the father was terrified of having nothing to do and no one to manage were he to relinquish his seat in the business. Questioning of the mother also revealed a concern that succession would result in her husband being underfoot and depressed; consequently, she never pressed the issue. After establishing a significant role (dealing with acquisitions and banking relationships) for the father postsuccession, the transition proceeded. The relationships among the family members improved considerably.

The transition you make requires an expansion of your clinical training beyond that of individual or family psychodynamics per se, as this example illustrates. Succession had not been on the clinical agenda of this family’s therapist and, consequently, had resulted in a therapy stalemate.

A psychoanalyst once remarked in the presence of one of the authors that working with a couple or a group was not therapy. She insisted that doing therapy entailed listening to and focusing on only one person at a time, the designated patient. Family or group therapy from her point of view yielded no information that might help her in understanding or treating her patients. Though a dramatic example of an inability to reframe one’s clinical orientation, it does sharply reflect how one’s training and investment in that training might hinder a transition.

In many instances, crossing the bridge to consulting means adding skills that graduate school never provided, such as assessing strategic planning, learning how an organization’s structure and design either impede or facilitate information flow, and appreciating the concerns of a CEO who is considering whether to expand the firm’s customer reach. This entails not only continual education but also the willingness to expand your comfort zone beyond that provided by your clinical training and experience. Even in the situation where you as a consultant limit your activities to coaching, your awareness of business-related issues is required. Consider the following example:

A senior executive was referred for coaching because she had alienated a portion of her team. Simultaneously, an extremely important project for which her team was responsible was failing. It soon became obvious that the executive not only did not understand, much less appreciate, project management considerations but had not tied the goals of the project to the firm’s overall strategy. The frustration she was experiencing took the form of a condescending attitude toward her team. The morale of the team and the continuing problems of the project were distractions in coaching that inhibited focusing on basic personal issues such as her need to be seen as entirely competent. From her perspective, this meant not asking for help or advice but rather simply plunging in headfirst without knowing how to swim and blaming others when and as events became troublesome. Early on in coaching we focused a great deal on project-related issues and, when these were becoming better controlled, we were able to concentrate more pointedly on her style of management.

Overall, the transition to consulting from clinical psychology can be daunting. There are many changes in style that the novice has to consider. Some major ones include accepting of paradox and
unexpected emerging events and learning to deal with them, accepting the presence of the “third party,” that is, the organization, being more assertive and direct, and being willing to learn more about business and business-related issues. These changes entail a need and acceptance of the need to reframe one’s orientation.

Possibly the best way of learning to reframe is through association and networking with other more experienced consultants; they can be supervisors or mentors or people you interact with in professional associations. It is in these situations where ideas are raised, batted about, thought about, and argued about that one’s orientation is challenged and reframing is encouraged.

The Influence of Cultures and Systems

Are there any additional aids that can assist in the reframing process? One means of discovery is to consider consultations that have failed outright, that have not been as successful as intended, or that have not made any impact positive or otherwise. The criteria for consulting success or failure are nebulous at best, but in our experience there are two (at least) elements that underlie all engagements. The awareness and understanding of these two elements increase the odds of successful reframing and subsequent consulting success (as defined by clients for whom we have worked): an appreciation of the culture of the organization and an understanding of how the organization as a system functions. In our experience, these elements are the least understood or appreciated by clinicians because their services as clinicians do not require a grounding in either.

Not having an appreciation of organizational culture and an understanding of how the organization functions as a system can hamper any consulting endeavor. In many instances, unfortunately, you will be far removed from being able to ascertain their impact or even being aware of them, much less having the ability to influence them. Being unaware of these factors, either because of obliviousness or because of being too far removed, can nevertheless have a strong impact on your change efforts.

The Culture of the Organization

The study of organizational culture has a history dating back to at least the 1930s with the Hawthorne studies (Marrewijk, 2010). It gradually grew in importance for organizational theorists until in the early 1980s, when the works of Peters and Waterman (1982) and Deal and Kennedy (1982) took hold, spawning a flurry of research and discussion. Organizational culture has since become a key ingredient in the understanding of organizational dynamics, shedding light, for example, on the introduction of innovation (Hogan & Coote, 2014), problems arising in mergers and acquisition (Walter, 1985), climate (Ashkanasy, Wilderom, & Peterson, 2000), differences between and among organizations internationally (Hofstede, Hofstede, & Minkov, 2010), and change and issues related to organizational success and failure (Deal et al., 1982; Peters et al., 1982). Since the culture of an organization casts a very wide net over the services consultants offer and frequently determines the success and failure of our efforts, the novice consultant has to develop a deep familiarity with the concept.

The succinct phrase, “the way we do business around here,” would be how an employee might summarize what corporate culture is. A more comprehensive definition would include the observable and unobservable assumptions, values, and beliefs on the basis of which norms are developed for expected behavior. Schein (1992) and Hogan et al. (2014) see organizational culture as existing in layers, with values serving as the firm’s bedrock from which norms are derived. Values provide standards for work and behavior, whereas norms translate values into social expectations. The third and more accessible layer of culture consists of customs, rites and rituals, ceremonies, stories, and physical artifacts (e.g., trophies and the firm’s logo) that are tangible expressions of the organization’s values, beliefs, and norms (Beyer & Trice, 1987).

To illustrate, rites of degradation—for example, firing and replacing executives—may involve behaviors such as taking the office key away and replacing the locks, giving the executive an hour to remove his belongings, replacing his name on the door, gossip about who will be the replacement,
and saying goodbye—in other words, stylized behavior and procedures. How this is handled (with discretion and empathy or coldly) suggests a value system. On the other hand, rites of enhancement—for instance as practiced by the Mary Kay organization—honor key contributors in periodic company gatherings where their success is celebrated in different and very public ways.

Another definition of organizational culture is offered by Ravasi and Schultz (2006, p. 437): “a set of shared mental assumptions that guide interpretation and actions in organizations by defining appropriate behavior for various situations.” They point out that scholars have considered two broad and overlapping attitudes or mental models among employees and staff about their culture and personal identities, especially apparent when the firm is threatened by external forces (e.g., competition, decline in sales, and technology bypassing the firm). The “social actor perspective” emphasizes the stability of how people should and do act and behave and provides a coherent guide that preserves consistency and coherence over time. In this view, the organization’s culture stresses continuity, coherence, and stability, characterized by a certain degree of inertia.

The second broad attitude scholars take in explaining organizational perceptions of itself, “the social constructionist approach,” is based on “sense-making” (Seel, 2000; Smircich, 1985; Weick, 1995) in which beliefs, norms, and behavior are subject to revision and reinterpretation as events and experience warrant, particularly as the environment changes. Thus, in place of formal claims about what the culture is and claims to continue to be, a shift in attention occurs toward a stance that includes “placing of items into frameworks, comprehending, redressing surprise, constructing meaning, interacting in pursuit of mutual understanding, and patterning” (Weick, 1995, p. 6). Scott and Davis (2007) frame the distinction as a reliance on formal control systems (the “social actor” approach) in contrast with an appreciation of a continuing development of common beliefs, understandings, and norms in response to environmental and internal events.

These two overlapping theoretical positions can be a challenge for consultants to reconcile. In working with an organization, do we tend to see the organization as a stable structure resisting change even in the face of environmental stress and strain, and do we see employees as embodying that motif? In contrast, is the organization continually trying to make new sense out of experience, trying to find new meaning in an ever-changing environment, while its employees are trying to make “sense” of its experiences and history? How we approach a consultation can and will affect the outcome of our endeavors.

To illustrate, in working with a team that is satisfied with itself and sees no need to change despite environmental evidence (e.g., slipping market share or a customer base going to another product) to the contrary, how do we react? Do we only see the resistance to change, or do we try to elicit the sense of what the team is struggling with?

Morgan (2006) has integrated both the cultural aspects of organizations with their related structural components (e.g., how information flows through the firm) into a typology of organizations, such as “machine,” “organisms,” “brains,” and “political systems.” The values of these types is that each contains a host of cultural features that, when taken together, may be more meaningful than when a cultural feature is taken alone. Consider the following example:

A very successful and long-term executive was referred for executive coaching because she had become negative and condescending toward her colleagues and superiors. However, the reason for the referral as presented to her by her superior and HR representative was so convoluted, indirect, and innocuous-sounding that the consultant ended up feeling confused as to the problem. It turned out that the firm prided itself on being “civilized,” that is, not being overly critical of others, hiding any symptoms of conflict, and being polite. It was as if the purpose of the referral was to get the consultant to tell the executive to stop being “bad,” that is, anyone being overly direct was “bad” on the face of it. The executive did know this was the culture of the firm, but the division she was heading was being negatively impacted by several corporate decisions. Since her “nice” attempts to alter these decisions did not work, she became more confrontational and, hence, the referral. Interestingly enough, the firm had few females in senior and executive positions. All the more, then, that an “aggressive” woman would be seen as “impolite,” whereas male colleagues being “out of line” was more acceptable, or at least didn’t require coaching.
This machine organization didn’t deal well with feelings, disagreements, and outbursts, though it made exceptions for male employees. Management expected the firm to operate in a predictable, routinized, efficient, reliable way (the basic definition of a machine organization), which essentially meant that emotional displays were frowned upon if not punished. But consider this example:

In another organization, major decisions, especially those involving financial expenditures, were frequently delayed, postponed, and often subsequently forgotten. Because this organization had few serious competitors in its industry, it remained successful. However, the appearance of serious competition occasioned the call for consultation around a cultural reshuffling. Needless to say, many early meetings were being cancelled at the last minute despite the consultant’s expressed concern of how counterproductive this was to the goals of consulting. The consultant began to charge for canceled or delayed meetings as a way of stressing how the firm’s very culture was interfering with even getting started on the path to change.

This firm might be seen as an organism (in Morgan’s listing of cultures) where individual concerns and motivations are paramount, even when their consideration might best be given less importance in planning. The fear on the part of senior management of doing something wrong prevented decisions from being made, and this fear at the top had major repercussions throughout the firm. The flavor accompanying many decisions made anywhere in the firm was fear of being wrong.

Every organization has a culture, and it is necessary for you to learn about your client’s culture as soon as you can in your assignment, if at all possible. It will seriously affect the intended goals of the consultation. For example, when coaching in a machine culture, quieting an executive who has a legitimate disagreement with policy is a matter of learning how to disagree “politely,” and the difficulty an organism culture presents when attempting to change its way of doing business is itself the major obstacle to change.

One way of discovering a firm’s culture is to appreciate how a referral is framed. In the first example above, the supervisor and his HR representative were very unclear about the problem, indicating an avoidance on their part of any emotionally tinged issue. The indecision in the second example was clearly demonstrated in the cancelations and postponing of meetings and start dates.

One of the authors failed to recognize the need in another firm to go slow on all matters and to be deliberate. His proposal to include a team-building program for senior management was therefore rejected. Ownership and management needed first to “know” him before proceeding, an oversight on his part that ended the relationship. He had failed to recognize that the firm’s style was to depend on personal relationships and trust, which require time to establish before embarking on any significant project.

Asking questions of the person or persons presenting the problem or opportunity about the firm can be useful. We have found posing the question in a way that does not reference the presenting issue tends to be more productive. For example, asking how a newspaper article about the firm was experienced by employees can be illuminating, as opposed to jumping to the presenting problem immediately and getting all the related details.

A third source of information about a firm’s culture is to interview employees and to ask. Many times that is not possible, but when the opportunity does exist, taking advantage of it can be very informative. As a rule, the person or persons the authors seek out are the “spanners,” that is, employees who belong to (span) several internal networks, thereby being privy to information coming from different directions within the firm rather than just from one department or section.

Noticing whether the organization surveys its employees on a regular basis, shares these results with employees, and attempts to rectify the problems that are unearthed gives a sense of the management’s concern about its culture. Access to this information is not always granted to consultants, but when it is, it can yield invaluable information to the consultant.

Last, quite a different perspective comes from interviewing clients, suppliers, customers, as well as other consultants. The viewpoint they provide can add entirely new information about the firm that often is not known or, if known, is denied by insiders.
Organizations as Systems

That organizations, be they businesses or families, are systems is a widely accepted truism. For our purposes, a simple definition of system thinking is provided by Sterman (2000, p. 4): “the ability to see the world as a complex system in which we understand that ‘you can’t just do one thing’ and that everything is connected to everything else.” Another way of putting it is Russell Ackoff’s (1997, p. 23) statement that “the first fundamental principle of systems thinking is that management should be directed at the interaction of parts and not the actions of parts taken separately.” In brief, a system is a collection of parts that interact with each other to function as a whole.

Further, systems can be graded on a scale from simple to complex as a function of their diversity (the parts of the organization being different from each other), how interconnected they are (the more interconnected, the greater their complexity), their interdependence (how dependent the parts are on each other in order to function), and their level of adaptation (how adaptable the system is to its environment; Page, 2009).

What ties the parts together to function as a whole are intertwined feedback loops (Senge, 1996) that convey information about the relationship between and among the parts. Feedback loops are linked to each other with multiple time delays (e.g., change efforts may take time to have an impact), by nonlinearities (e.g., there may not be a direct nor “logical” connection between an initiative and an unanticipated outcome), and by accumulations (e.g., events building up until a tipping point that triggers a reaction is reached). One result of any one or combination of these features is the appearance of unintended consequences, that is, outcomes that are not planned for or necessarily desired. From your perspective as a novice consultant, it is important to note that any intervention, be it one-on-one executive coaching or a focus on a departmental change, can have an impact on the greater organization, but it may not be the one intended.

Another aspect of organizations as systems that you need to be thoughtful about is the organization’s structure (Galbraith, 1995). The design of an organization (e.g., who reports to whom, which department is subsumed under which division, and channels of communication) structures how and what information courses through the organization. For example, sales information may not be directly and immediately conveyed to operations because of an absence of cross-functional teams. Consequently, operations develops its products on a different time schedule than sales thinks necessary, thereby leading to the well-known contretemps between sales and production (or their equivalents) in many firms. Consider the following two examples:

A company was sitting dead in the water with little apparent growth in an industry that was leaving them behind. A consultant was hired to do both team-building of the sales staff and coaching of several senior executives. The firm was structured in typical fashion, that is, by function such as sales, production, and engineering. Decisions about which products to manufacture were made by production and engineering. It was sales department’s task to sell these products to their customers. However, the firm’s customers were never asked what products they wanted, and input from sales that might have shed light on customer needs was either minimized or disregarded. After determining that the firm had essentially three different types of customers, each with their own needs now and into the future, the consultant helped redesign the firm so that a cross-functional team, consisting of representatives of each department, was assigned to each customer type. This allowed the voice of the customer to be heard, the input from production and engineering to be considered, and the concerns of customer service to be given an audience. The original request for consultation, that is, executive coaching and team-building, turned out to be unnecessary.

A large and growing infertility medical practice was experiencing complaints from patients and their spouses, problems with staff, and quality problems (e.g., patients kept waiting and late test results). Team-building was the ostensible consultation request. Based on interviews with the entire staff and workflow observations, it was clear that there was a serious rift between the finance/business and the clinical departments. People in one department complained bitterly about people in the other. A basic problem was that the medical practice wasn’t clear who their customer was—the woman, her husband, or both. After considerable discussion, the management team decided that both wife and husband were in fact their “patient.” To carry this off required that the
entire company be placed under the clinical department after a director with the requisite skills (both clinical and financial) and background was found. Patient care of both wife and husband became preeminent. For example, the receptionist (a clinical function) had immediate access to basic insurance information that patients sought. Previously a patient seeking relevant information talked to at least three people before obtaining the data he or she needed. The design of the offices, which earlier had been a function of what the business section deemed prudent, became a clinical decision, resulting in much more inviting and pleasant surroundings. The business functions (e.g., billing, collections, and financials) were redesigned so that any information needed about patients was immediately accessible by any department that needed it (marketing, clinical, etc.). In addition, programs to ensure the comfort of the patient couple were introduced.

A distinction should be drawn between these structural miscues and cultural mishaps such as turf battles between departments where information is jealously hoarded. There usually is considerable overlap between culture and the system as these examples demonstrate, but considering where change efforts can be most effective is an important consideration. In turf battles between departments, it may be that members from these various departments who belong to cross-functional teams are instructed not to share certain departmental information with their colleagues on the team, despite these cross-functional teams being originally formed to expedite information-sharing. This is not so much a structural problem as one more related to cultural issues or perhaps personal idiosyncrasies; but even in this instance, the line between culture and structure is very dim and would require considerable perceptiveness on the part of the consultant to disentangle. For example, in the example above of the firm that was “dead in the water,” even after the reorganization, suspicion between departments persisted for a period of time and inhibited information-sharing between departmental representatives on the cross-functional teams.

In Summary

The field of consulting has become a magnet attracting many clinical psychologists into its fold. However, the field of clinical psychology is not organizational consulting. This career transition requires a basic shift in approach from clinical work to the practice of consulting (e.g., learning to sell one’s services, doing homework on prospective clients, and dealing with rejection). This shift requires a self-assessment along lines that do not appear in clinical work but are revealed when consulting. These behaviors when not recognized can border on the unethical (e.g., dealing with grandiose tendencies that might lead the company astray; misusing the influence that might determine the fate of succession in a family business by not preparing an objective report; being near the seat of power in an organization and going beyond one’s mandate as a consultant; and taking sides among organizational personnel). Both seeking consultation from experienced practitioners and engaging in training must serve as guides for the novice consultant.

Dealing with the many different types of organizations is further complicated by the size of organizations, their international character, and their employee diversity. Within this vast variety, the consultant might be called upon to work with individuals, teams, departments, and the organization itself. What complicates an already complicated situation is that the goals of the participants may be at odds.

What can help the novice consultant is to learn to reframe basic assumptions, that is, to see the field from a different perspective. Providing feedback to clients in the coaching situation, being more direct and active, focusing more on behavior than going “deep,” accepting and learning to deal with organizational paradox and unanticipated consequences, and accepting having a “third party” looking over your shoulders—all of these frames are foreign to the novice consultant. Reframing the arena in which the consultant is operating is helped by considering that organizations are systems within which all parts interact and have an effect on each other through feedback loops. This effect is mediated through the organizational structure and design that control the flow of information. The system in its entirety is also governed by the organization’s culture—its “way of doing things around here.” Understanding a firm’s culture can in many instances explain what and why a consultant is seeing what he or she is seeing and can lead to successful change efforts.
We stress throughout this article that to deal with this complexity, to succeed in making the transition and reframing one’s orientation, a self-analysis is necessary, starting with acknowledging the new psychological challenges that systems offer, working with experienced consultants, taking formal and informal training courses, and reading extensively in the field.

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