

A Therapist's Perspective of a Financial Planning Course: Implications for Financial Therapy Education and Trainings

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This paper presents the autoethnography of a doctoral Marriage and Family Therapy (MFT) student studying finances in a graduate course. A dataset in the form of field notes was created through recording observations and reflective journaling during a 15-week financial planning course. This data set included observations and insights on various skills and knowledge that would be helpful for conducting financial therapy, the professional and personal growth of a therapist integrating finances into her clinical work, and evaluations regarding how financial courses can be beneficial for therapists and planners who are interested in the interaction between relational and financial issues. Based on the first author's experiences, reflections, and conversations with the second author, four themes were developed. The themes were: (a) Seeing the Unnoticed: Challenging Implicit Assumptions, (b) Critically Examining My Own Money Scripts, (c) What Can Therapists Learn From the Financial Discipline, and (d) What Financial Planners Can Learn from the Clinical Disciplines. Implications for the burgeoning field of financial therapy are discussed, with special attention given to cross-discipline education and training.

Keywords: financial therapy; family therapy; financial planning; collaborations; autoethnography; training; qualitative

Growing up, I (first author) remember seeing and hearing my parents argue about money. They fought about purchases only one of them felt was necessary, how much to spend on vacations, and not having enough money. My own marriage has experienced similar fights, and at times it feels like my husband and I see money in completely different ways. My parents and my own marriage are not unique in this way. Money is the most commonly reported argument-starter and a top-rated problem area for couples (Miller et

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al., 2003; Stanley, Markman, & Whitton, 2002; Storaasli & Markman, 1990; Papp, Cummings, & Goeke-Morey, 2009). In fact, money has been named as one of the main catalysts for divorce (Dew, Britt, & Huston, 2012).

Some couples reduce financial and marital strain by consulting with a financial planner and improving their joint financial management (Knuckey, 2003). Other couples benefit from couple's therapy focused on increasing communication skills and learning more effective ways to cope with their financial strain. Couples experiencing distress could also spend the time and money consulting with both a planner and a therapist separately to deal with each issue (Falconier & Epstein, 2011). As an alternative, couples could choose to engage in "financial therapy" and kill two birds with one stone. Financial therapy is a model that integrates treatment aspects from mental health interventions with financial planning techniques (Grable, McGill, & Britt, 2010). Financial therapy may be a possible anecdote to the relationship between financial strain and marital distress we have seen in the literature. Yet, there is still not consensus on how one actually does financial therapy: (a) do clinicians refer clients out to a financial professional, (b) provide co-therapy with someone trained in financial planning, or (c) should clinical and financial advising practitioners receive alternative training ourselves (Falconier & Epstein, 2011)? As a student at the University of Georgia, I was presented with an interesting opportunity to explore and learn about financial therapy first-hand.

I am a therapist who works in the University of Georgia's interdisciplinary clinic, the ASPIRE Clinic. The ASPIRE Clinic provides individual, couple, and family therapy, financial education and counseling, nutritional education, home environment and design consulting, and legal problem solving services. These services are offered independently or conjointly depending on clients' needs and/or wishes (Gale, 2012). As a family therapist at ASPIRE, I have had the opportunity to work alongside financial planning students both in sessions and in supervisory teams. It was easy to see how much this benefitted my clients. In termination sessions, clients reported a decrease in financial strain and an increase in the ability to talk about money in most cases. While I enjoyed working alongside the planning students, problems arose when conducting financial therapy. I had a lack of financial knowledge, unclear expectations of how financial therapy should be conducted, and difficulties even discussing money with others. Therefore, I decided that I was going to face these three issues directly and improve my skills by enrolling in a financial planning course. I utilized the qualitative methodology called autoethnography to record and analyze my experiences (Ellis & Bochner, 2000). The goal of this autoethnography was to examine what personal and professional changes would occur for a therapist trying to become a financial therapist.

Autoethnography as a Research Approach

Ethnography is the study of social exchanges, actions, and perceptions that occur within individuals, groups, and communities (Reeves, Kuper, & Hodges, 2008). In traditional ethnography, the researcher embeds themselves in the field and studies "the other," whether that is a native tribe, people of a different socio-economic status, or any

group that is different from himself or herself (Patton, 2002). Whereas in traditional ethnography, the researcher's personal experiences with and reactions to the group are carefully removed from the study in an effort to accurately represent what the culture is really like (Vidich & Lyman, 2000). An autoethnographic approach is a form of ethnography that focuses on the lived experience of the researcher through journaling and introspection (Ellis & Bochner, 2000). It is different from an autobiography, as an autoethnography is focused on a specific phenomenon, which is embedded in a certain context assessable by the researcher. Autoethnographies have been heralded as just as rigorous and justifiable as any other form of qualitative inquiry (Duncan, 2004; Wall, 2008). Furthermore, an important part of qualitative inquiry is the intentionality or transparency of the researcher in relation to their research.

In addition to being transparent about their beliefs and values, an autoethnographic perspective highlights the stories surrounding the researcher's personal struggles and experiences that led to their research interests, which is a legitimate research endeavor in and of itself. This struggle is seen as an integral part of the research process. Autoethnography was developed as an approach that allowed the researcher to study a group to which he or she belonged, while allowing his or her experience with that group to be a central focus of the study (Ellis & Bochner, 2000).

Though autoethnographic research can take the form of poetry, short stories, or even fiction, the purpose is usually the same: to explore a social phenomenon present in the researcher's own group, using his or her personal experience with that phenomenon. On a personal level, I am processing the growing pains I experienced in becoming a better financial therapist and changing my relationship around money. I have learned to shine light on the fears and anxieties I had to conquer in my personal life and in my clinical development. On a professional level, this autoethnography also exemplifies the growing pains of a field finding itself. What should financial therapy look like, what are the obstacles to doing financial therapy, and where do financial therapy trainings need to develop in the future? What follows is the story of how I began my journey as a financial therapist.

Self of the Researcher

Since an autoethnography addresses the personal responses of the researcher, it is necessary to critically and reflectively examine one's own views and values. This requires a transparency and openness of one's own processes, even when they are embarrassing. This section on self of the researcher presents these personal reflections. Let me begin with the beginning of my journey into financial therapy. I knew after my first financial therapy session I had no idea what I was doing. I felt like I was not a financially literate person. After all, I didn't budget, I didn't save, and rarely did I even think about money. When I got married a couple years ago, I happily handed over my finances to my husband because I hated all tasks related to money (e.g., paying bills, making financial decisions, etc.). After reading the research on money scripts conducted by Klontz, Britt, Mentzer, and Klontz (2011), I discovered that I was a perfect example of a *money avoider*. I had an unhealthy relationship with money. It caused feelings of anxiety that were often expressed as

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frustration and anger. Therefore, when I decided that I wanted to do better financial therapy, I knew I needed to start at square one, myself. I wanted to take an introductory class to finances that would help me put my toe in the proverbial water. In deciding what course to take, I spoke to a financial professor. He recommended Family Financial *Counseling*, but I mistakenly signed up for Family Financial *Planning*, further demonstrating my lack of financial literacy. The Family Financial Planning course is a 15-week split-level, capstone course for undergraduate and graduate students studying financial planning. The course addresses advanced financial topics and the development of a comprehensive financial plan. The course also covers financial regulation, certification, and legal and ethical requirements for financial planners. As a doctoral family therapy student, I was given permission by the instructor to take the course even though I had not completed any of the six financial planning course prerequisites. The other students in this class were financial planning students with significant course experience and many had completed internships in the field. I had several initial reactions after the first day of class, including: (a) feeling unprepared, (b) recognizing how little I knew about finances, (c) anticipating how stupid I was going to sound, and (d) feeling overwhelmed as the content in this class was *much* more than I wanted to learn about finances. After that flurry of thoughts, I wondered why I never thought about these aspects when I was in the therapy room assessing clients' financial stressors. This question was a large part of my decision to stay in this course. I decided it was time to become a more competent financial therapist.

When I told my mentor (second author) about my decision to stay in the class, he was incredibly supportive. He suggested that I keep a journal of my experiences and conduct an "autoethnography" (Ellis & Bochner, 2000). He wanted me to rigorously and critically examine my experiences in order to: (a) further develop my skills and knowledge; (b) explore how a therapist transforms into a financial therapist; and (c) gather insights about how to effectively teach/learn financial therapy. Throughout my journey and without clear guidelines of what one needs to learn about financial therapy, I encountered and overcame many obstacles. The insights I gained serve as exemplars for both clinical students and financial students as they seek to become financial therapists. This paper is also meant for educators of financial therapy to assist them in considering the student perspective. As new courses are created and as the field continues to grow, it may be beneficial to apply some of the lessons I learned to the development of educational standards for future financial therapists.

RESEARCH METHODOLOGY

Rationale and Research Question

The rationale for this study is to provide a first-hand student perspective of becoming a financial therapist. Such accounts are important because they allow for a greater understanding of the students' perspectives and highlight the growth areas for training in financial therapy. As such, the research questions to be addressed in this study were:

1. What impact would taking a financial course have on my clinical work?

2. What impact would taking a financial course have on my relationship with money?
3. What courses would be helpful to planners and therapists who want to be trained in financial therapy or would be needed to create a “financial therapy degree?”

It is the study of the phenomenological experiences of a family therapist learning to develop as a financial therapist, and as such, addresses both personal and professional aspects of her life. Phenomenological research is the study of a phenomenon through empirical observations (Daly, 2007). As a phenomenological experience, this study is connected to the personal lived experiences of any individual learning and developing in a new profession. Therefore, the findings can be extrapolated to other professionals learning and developing in a new profession.

Data Collection

Throughout the course, my research approach consisted of observation and reflective journaling to produce a personal dataset in the form of field notes. I noted specific events, conversations, thoughts, and emotional reactions from my experiences in the financial course. In class, I would jot down brief notes, which I expanded after each class to produce a more detailed account. These details helped me process and critically analyze my experiences. Once a week, I reflected upon what I was learning in class and how it was influencing my clinical work. During my weekly reflections, I also recorded my personal experiences around money. I described changes in my spending habits, how my husband and I talked about money, and the evolution of my feelings around money.

Trustworthiness

To ensure trustworthiness within this study, the authors followed the suggestions outlined by Anderson (2006). These suggestions included: (a) complete member researcher status, (b) analytic reflexivity, (c) narrative visibility of the researcher’s self, (d) dialogue with informants, and (e) commitment to theoretical analysis (Anderson, 2006, p. 6). I was immersed in the financial course and experienced it first-hand, fulfilling Anderson’s first guideline. Steps two and five, analytic reflexivity and commitment to theoretical analysis, were completed by thoroughly reviewing class notes and purposely stimulating recall through attention to detail, leading to additional recollections and insights even after the course was completed (Emerson et al., 1995). I also periodically discussed my notes and observations with my mentor as a way to reflect on the larger themes present in my writing. He challenged my assumptions through offering different perspectives, interpretations, and rigorous questioning; all of which allowed me to critically examine each theme and refine my thoughts. The third guideline, narrative visibility of the researcher, is addressed in the “self of the researcher” section of this paper. Narrative visibility of the researcher relates to the fact that the autoethnographer has a dual role as both a researcher and a member of the group being studied. Due to the dual role, autoethnographers should be open to sharing their insights, experiences, thoughts, and feelings to “reveal themselves as people grappling with issues relevant to membership

and participation in fluid rather than static social worlds” (Anderson, 2006, p. 384). Finally, my dialogue with colleagues in the course, and my husband at home, fulfilled Anderson's fourth guideline.

Data Analysis

Preliminary data analysis occurred simultaneously throughout the data collection process. After completing the course, re-reading my notes, and purposely stimulating recall through attention to details and emotional recall led to additional recollections and insights (Emerson et al, 1995). Also, both during and after the semester, every few weeks I discussed my notes and observations with my mentor, as a way to reflect on the larger themes present in my writing. He challenged my assumptions through offering different perspectives and interpretations that allowed me to thoroughly and critically examine each theme. This rigorous questioning was effective in helping me clarify and refine my thoughts and develop themes clearly grounded and demonstrated in my notes.

Following the completion of the course, and the notes organized and expanded, I conducted a thematic analysis whereby I categorized the data into emerging themes and patterns (Emerson et al., 1995). I chose to write my autoethnography in the form of themes that developed in my journal. Through using themes, I was able to conceptualize my change over time. The themes describe the insights that led to behavioral changes for me in the therapy room and in my home life. The many themes noticed throughout the semester were eventually collapsed into four main categories. First was the uncovering of assumptions and biases I had held about financial planning; this theme was called “Seeing the Unnoticed: Challenging Implicit Assumptions.” Many of them were positive stereotypes about financial planning, but all of them had the potential of negatively influencing my work with clients in financial therapy. The second theme was called “Critically Examining My Own Money Scripts,” which focused on the knowledge I gained around financial literacy and more about my own money scripts. The third theme addressed what planners could teach therapists and was entitled, “What Can Therapists Learn from the Financial Discipline?” The fourth theme, “What Can Financial Planners Learn from the Clinical Disciplines?” refers to what therapists can teach planners. The themes are all based on my first-hand experiences from class, therapy, and personal experiences during the 15-week period, intertwined with supporting literature.

RESULTS

Theme 1: Seeing the Unnoticed: Challenging Implicit Assumptions

As I read through my journal, the first theme that developed from my experiences was the assumptions I had unknowingly held toward financial planners. For instance, one class focused on how financial planners create goals in their planning sessions. During this class, I became impressed by the financial planners' desires to shield the clients' feelings during the goal-setting process. The financial planning professor and the other financial planning students discussed ways to protect their clients with language that is neither

blunt nor accusatory. They talked about their intrinsic desire to remain focused on the clients' dreams for the present and the future. During this class, they also discussed the recent economic downturn and its impact on planning. The planners wanted to make sure that, despite the economic state, their clients still felt that their needs would be met. For instance, in one case study used in the class, the couple enjoyed luxury cars. Instead of focusing on how to take away luxury cars from them because it was not an essential, the class focused on how it was something important to the couple. This truly challenged my assumption and bias that financial planning's main goal was simply to protect the bottom line and help their clients make and save money.

This same class session also addressed my stereotype that the common personalities of financial planners would be cold and logical. I thought the financial planners' job was to have their clients invest properly based on equations, rather than assessing their emotional needs and wishes. I do not think I would have been able to eradicate this stereotype until I witnessed the client-centered perspective that financial planning students were being taught in the class. I also wonder and hope this is true for other training programs for planners. I also hope that financial planning organizations continue working against this misconception that planners do not care about anything except for the bottom line. This may prevent clients from expressing their dreams for the future with their planners, because they worry that those dreams are not financially acceptable.

The professor addressed the next misconception in a class lecture. I believed that financial planners could fix all money problems. She said in class that there is a very common misconception held by the general public (myself included) that financial planners are able to find money out of thin air. In fact, I know from a personal experience that I perpetuated this misconception in one of my first referrals to financial therapy when I told a client that the financial planner was going to join us in therapy to fix their financial situation. The clients at the time had more money going out in debt payments than coming in through income. There was no quick fix to this situation and I perceived they were disappointed with the process. I also found myself frustrated that the planner did not just fix the situation because I did not have the knowledge of what the process of financial planning truly looked like. While I was in class, I realized how this misconception could be incredibly detrimental. Instead of allowing the planner time to work with the clients and create a plan of action that would eventually remedy the situation. I expected them to find immediate solutions. I remember thinking, "why can't you just fix their problems," instead of actively participating in the process of changing patterns of behaviors around money. I cannot help but ruminate about how my previous sessions would have been different if I had not placed unrealistic expectations on the process. In this particular case, the couple quickly became frustrated with the lack of progress in treatment and quit attending sessions.

My final misconception about financial planning was about the actual logistics of planning. I came into the class with the false belief that there would be a formula for every possible financial situation. I realized that there is a certain amount of uncertainty in

financial planning. It also is nearly impossible for planners to know everything about finances in every possible context. I had a very similar experience when I started doing therapy. I remember thinking that there would be a checklist of things to assess within a family and that a formulaic approach to resolving the ascertained issues existed. Therapists are often racked with the anxiety of what to do next and lost on how to intervene. I do not know why I expected financial planning to be different. Because we both work with the complexities of human life, there are no quick solutions.

Theme 2: Critically Examining My Own Money Scripts

The assumptions I held before entering this class showed me how little I knew about financial planning initially. I wish those had been my only blind spots, but I could not possibly name the countless times in class where I was completely ignorant of financial strategies, pitfalls, and problem areas. My sense of inadequacy around money is true in the classroom, in my personal life, and in the therapy room. For instance, taxes were an especially weak area for me because, despite submitting state and federal taxes for the past 15 years, the fact is that I have never completed my own tax return. My parents prepared my taxes until my husband took them over. If my husband left me tomorrow, I would be completely helpless in this area and would most likely resort to asking my mother to take it over again. As a woman who values female empowerment, it pains me to admit my financial dependence and acknowledge how ignorant I was about my financial situation as a whole. I do not think my situation is unique. In fact, Summers, Ironfield-Smith, Duxbury, Hudson, and Keasey (2005) found that many women have significantly less knowledge about financial matters than men. Numerous other studies have indicated that women (compared to men) are more risk averse and have less confidence in their ability to make economic decisions around employment, investing, and retirement planning (Anthes & Most, 2000; Bajtelsmit & Bernasek, 1996; Grable 2000; Jianakoplos & Bernasek, 1998; Loibl & Hira, 2007). However, I wanted to start with becoming more comfortable with money myself. The realization of my limitations made me want to learn more. I began bringing my work home from class and talking about it with my husband. We began to make decisions in investments and future planning together. These discussions not only helped me become more informed about our own financial situation, but I also think my husband had held onto some stress from making financial decisions unilaterally. I decided to ask him directly.

I interviewed my husband about the changes that he observed in me around money. We started the discussion around the financial communication skills I had developed from the course. He said he enjoyed talking to me more now that I had increased my knowledge around money. He recalled times in the past where I would become frustrated in our conversations because I felt like he was talking down to me when he really was just trying to explain concepts. He appreciated that I had begun to add to our conversations based on things I learned in class. For instance, we talked about the need for us to save more money. In the past, our budget talks had not been very productive because I felt like he was attempting to regulate my spending. In our budget discussions after the class, I spoke of the need for our savings accounts to become named for what we were saving for at the time. It became easier for me not to buy a coffee from Starbucks when I focused more on saving for

vacations, student loans, or our future children. When we spoke about our budget then, I relayed how important an entertainment budget was for me. I do not splurge on clothes, but I do splurge on having dinner with friends. Through having a new understanding of the spending plan, with the addition of the named savings account and adjusted spending categories, we were able to create a new budget together and actually enjoyed the process. It felt like we were co-creating a game plan for the future, rather than him telling me how to spend our money, although that was never his intention.

My husband was also surprised by some of the spending habits that changed in me over the course of the class. He acknowledged that I never overspent on big items, but I did have a habit of buying coffee, snacks, and so on throughout the week. Because I came into the class as a money avoider, I did not see these small items as a big deal. I used my card and never gave it a second thought. I used to rationalize it too. I would say, "I can buy this \$3 coffee because I went to Great Clips for my hair cut." However, by creating a spending plan for a hypothetical couple, I started to be more interested in where my money was going. I realized that the \$3 coffee was not congruent with my values and decided that I would rather be putting that money away for things that were more important to me. Yet, the primary change that occurred was that I gained a new tolerance for financial discussions. I found that I did not get frustrated as easily, felt more like an equal to my husband, felt more optimistic about the future, and began to see money as a vehicle for happiness, rather than an obstacle to avoid. The change I saw in myself can be summed up as a shift away from money avoidance.

In conclusion, I feel that if I had taken one of the money beliefs or attitudes scales, I would have been identified as a money avoider (see Klontz, Britt, Mentzer, & Klontz, 2011). I had an unhealthy relationship with money. It caused feelings of anxiety that were often expressed as frustration and anger. Taking this class benefited me immensely because it not only improved my relationship with money, but it also helped my relationship with my husband. I suspect other mental health practitioners taking financial classes and examining their relationship with money may also find personal and professional benefits as well.

Theme 3: What Can Therapists Learn from Financial Courses?

I started out in the course with little knowledge about financial planning and what I did think I knew was flawed at best. Thinking back at the end of the semester, I can still remember the excitement I felt when I journaled about my last class. We had an abbreviated review of the components of the comprehensive plan that we had worked on the entire semester. I was proud of my new gained confidence. I never would have thought back in the beginning that I would be comfortable writing a financial plan for a couple. I still knew my limits actually providing financial advice alone to couples, having gained an understanding of the complexities of planning. However, I know now that if I was sitting in a financial therapy session, that I would recognize the red flags that can arise in a couple's financial story, and I can better collaborate with a planner or refer clients to an appropriate one in their area.

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This new knowledge created an awareness that changed how I behaved in my clinical practice. On the very morning of the last class, I had a relational financial session and I realized that I was paying attention during the financial information gathering. When I first began conducting financial therapy, I often stopped paying attention when the financial planner was talking to the client(s). Initially, I saw the gathering of information as the planner's territory, but on this particular morning, I listened to their financial story and understood their issues and problems in a new light. I now realize that even though I was in the room with a planner during financial therapy sessions, we really were not working collaboratively. Instead, we were still working parallel to one another. Therapists do not need to know everything I learned in this course (i.e., tax laws, probate issues, etc.), but requiring a class on the "red flags" of financial distress would be incredibly beneficial to all therapists. After all, even if therapists are not doing financial therapy, financial issues will often arise in the therapy room (Aniol & Snyder, 1997; Miller et al., 2003). It is even more important for therapists that are interested in financial therapy because therapists need to begin understanding financial planning so that we can unite our fields. I am not the first to recognize the need for more than a superficial understanding of the disciplines. Falconier and Epstein (2011) called for financial planners and therapists to take sufficient time to understand each other's approaches in order to not practice outside of their scope of competence. I pushed this boundary through doing financial therapy without much competence in finances because I relied so heavily on the planners I worked with.

I believe that my professional development in financial planning has helped my clinical clients tremendously because it has allowed me to make referrals more efficiently, be present during financial therapy, and be less avoidant of money topics. Despard and Chowa (2011) interviewed social workers and found that they too wanted to gain personal finance knowledge and skills to better help clients with financial concerns, determine how personal finance is related to emotions, mental health, and relationships, and learn more about personal finance for themselves. I believe that I was able to learn a substantial amount about how to help my clients and myself with financial concerns and practices in this course. I am also planning to take a second course (i.e., the course I was originally supposed to take), which will focus more on how personal finance relates to emotions, mental health, and relationships. I have heard people say that it is unrealistic to expect family therapists and financial planners to take additional courses to conduct financial therapy. However, I believe it is possible to add six hours of coursework to most mental health training curriculums without prolonging graduation.

Theme 4: What Can Financial Planners Learn from the Clinical Disciplines?

It is important for financial planners to be able to attend to more than just money in their planning sessions. Approximately 30% of couples who seek financial counseling also have relationship problems (Gable, Britt, & Cantrell, 2007) and 25% of planners' contact with clients is devoted to non-financial issues (Dubofsky & Sussman, 2007). However, financial planners often have very little training in how to help clients with the emotional and relational factors associated with finances and destructive financial behaviors (e.g., compulsive buying or gambling) (Klontz, Kahler, & Klontz, 2008; Archuleta & Grable,

2010). The financial planning students in my class seemed to intuitively recognize the emotional and relational factors and demonstrated a clear desire to learn ways to effectively aid clients and encourage a change in behavior when needed.

My classmates and I were lucky because our lecturer was very interested in the aspect of goal planning within the financial planning process. For instance, she executed a role-play of what it looked like to be a bad planner versus a good planner. I thought it was remarkable how much time she spent getting to know the clients and listening to their wishes, dreams, and aspirations. She demonstrated many of the skills that beginning family therapists learn, such as joining, reflective listening, and empathy. Attention was given to creating a safe space for clients to share their thoughts and feelings with her. Through learning more therapy techniques and strategies around joining, empathy, tracking, and active listening, planners could be more effective in their approaches.

The instructor's role-play also was interesting for me because the planner in the role play did not actually tell the clients to just stop spending money, instead she showed them how their money was being spent and asked them if that was congruent with their goals. The choice of the planner to *not* tell the clients what to do with their money reminded me of Code 1.8 in the American Association of Marriage and Family Therapy Code of Ethics, which requires that therapists "respect the rights of clients to make decisions and help them to understand the consequences of these decisions" (American Association for Marriage and Family Therapy, 2001). The planner in the role-play eventually showed the clients different action steps that they could take to improve their financial situation, but it was much more of a collaborative process than I had originally anticipated.

This class helped me to consider how difficult it is for planners not to make assumptions about what their clients should do with their money and how little practice students have in understanding their overt biases and assumptions. This is true for the therapy field as well. In most training programs, there is an expectation that therapists "examine how issues (e.g., past and current family roles, unresolved interpersonal conflicts, and coping styles) influence the course and outcomes of therapy and supervision" (Todd & Storm, 1997, p. 206). When we hold covert assumptions and beliefs in the therapy room unconsciously, without acknowledging their existence they may affect our interventions. Aponte (1982) created the "person-of-the-therapist model" for training clinicians in the use of their selves in therapy. The goal was to create an ability to be able to manage assumptions, beliefs, and experiences in a way that transference did not occur. A "person of the financial planner" course may help beginner planners understand when they are triggered to make recommendations based on their own beliefs rather than their client's desires (e.g., the client has substantial wealth, but does not plan to leave an inheritance and the practitioner believes that is greedy and selfish). This course could help financial planners learn how to make their covert assumptions, beliefs, and experiences more manageable.

Another component of the family therapy curriculum that could be incredibly helpful for financial planners is our "mechanisms of change" course. This class focuses on

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introducing models of change, factors related to change, and interventions related to change. The class introduces a new way of looking at client resistance. For instance, when a client is not following through with a planner's suggestions, the goals may not be achievable (e.g., too big, too difficult, etc.) or the goals may be imposed by the practitioner, rather than the client (i.e., client-centered). Resistance to change is not solely found in the therapy room, it is also present in the planning process. For example, during class a large debate broke out amongst students about what to do if clients do not make changes that are suggested. Half of the class felt like reiteration was the "right" thing to do, while the other half of the class felt like there must be an underlying reason for them to not listen to the recommendations. A course like "mechanisms of change" would provide new insights and interventions for financial planning students in their future practice and give new clarity to this debate.

Finally, as a therapist I believe that financial planners would find a lot of practical use in learning more about systems theory. Systems theory was the first theory that did not focus on the elements of a system in isolation, but rather the interrelations of the elements (Sameroff, 1994). In terms of couples and families, systems theory believes that one cannot separate an individual family member from the context of the family and environment. Families have rules, boundaries, hierarchies, and patterns that control individuals' actions (Minuchin, 1985). An understanding of systems theory positively affects my work as a family therapist because it allows me to reconsider dysfunctional behaviors from the perspective of patterns of behavior. Instead of simply trying to get a person to stop a behavior, I try to help change a pattern. For instance, if a financial planner meets with a couple where the husband overspends, their response may be simply to tell him to stop spending so much. However, from a systemic perspective they may see that the husband's behaviors are tied into family of origin issues and couple power dynamics (e.g., perhaps he feels powerless in other ways).

Addressing the relational power dynamics around money may be a more useful strategy than simply addressing the overspending. I suspect that even one or two classes focused on individual, couple, and family dynamics may increase a planner's effectiveness in their practice. Furthermore, if relationships were created between the faculty in both disciplines, professors would not hesitate to give permission for cross-discipline attendance by students.

DISCUSSION

At the beginning of this autoethnography, I stated that I wanted to explore the phenomenon that can occur as a family therapist seeks to become a financial therapist. I assessed my experiences using three research questions:

1. How would taking a financial course influence my clinical work?
2. How would taking a financial course influence my relationship with money?

3. What courses would be helpful to planners and therapists who want to be trained in financial therapy or what courses would be needed to create a “financial therapy degree?”

The next section presents how my study addressed these three questions.

Influences on my Clinical Work

I am incredibly thankful for the opportunities I have found at the University of Georgia. Few schools provide therapists the option to be trained in financial therapy. Even fewer programs provide therapists with the option to work alongside financial planners. My journey to becoming a financial therapist is not over. I plan to continue expanding my financial knowledge through courses, trainings, and conferences. I still have moments of insecurity of what to do in financial situations, but my practice has changed so much since I began this journey. The most striking example of how my clinical practice has changed since taking this course happened on the morning of the last day of class.

As noted previously, I conducted a relational financial session and I realized that I was now attentive and responsive during the financial information intake. I realized that my previous relational financial sessions were not collaborative sessions, but rather parallel sessions. While my theoretical approach has not changed, I am more present in the therapy room and working closer with the financial planners to systemically address emotions, relational issues, and finances in the therapy room. I cannot respond to all of the financial questions, but that is what makes the team approach so valuable in financial therapy. The financial planners have more skills and knowledge in financial decisions, while I bring to the process knowledge of human behavior from a systemic perspective. This balance of skills is where the need for financial therapy is evident, as we support each other's strengths and weaknesses. I hope this autoethnography encourages other therapists to begin their journey into the burgeoning field of financial therapy, and encourages training programs to incorporate financial therapy into their curriculums.

During the class, the 2011 Financial Therapy Association annual conference occurred at my university. At the conference, another attendee asked me if I thought that a financial therapist could be just one person. My response was, “I do not think so!” In fact, it would be unethical for me to do financial therapy without a financial planner because I currently do not have enough specialized education in finances (yet). The American Association of Marriage and Family Therapy (2001) Code of Ethics includes code number 3.11, stating “marriage and family therapists do not diagnose, treat, or advise on problems outside the recognized boundaries of their competencies.” The practice of financial therapy needs to be collaborative between a financial planner and a therapist because we bring a different set of skills to the table for our clients. The only caveat to this statement is if someone has training in both areas. The amount of training needed to meet ethical and professional guidelines is unclear at this time and should be a focus of future research.

Impact on My Own Relationship with Money

I began this journey as a money avoider and I still do not enjoy thinking about my finances or talking about money with others, but now I have hope. I no longer view money as an obstacle to overcome, I see it as a tool for goal attainment. My husband and I have our money conversations focused on (a) how we are going to buy our first home together, (b) how we are going to afford to raise our children, and (c) what we need in place to travel to the places we always dream of together. This reframe had positive effects in the therapy room as well. Before, I assumed that my clients all felt the same anxiety I had around money. Therefore, I would wait until *they* brought up money in session. I now ask about their financial well-being in the early assessment period because I know it is another tool that can be used to make my client's life easier.

Courses Needed

Maton, Maton, and Martin (2010) share my own view that there is a need for some common body of knowledge that is shared, but that planners and therapists each excel at some—but not all—of the skills. Each will have areas of experience and expertise in different aspects of the integrated planning process. The relationship between finances and negative mental health outcomes has shown the need for therapists to increase their training in areas of personal and family finance (Aniol & Snyder, 1997; Miller et al., 2003). However, Durband, Britt, and Grable (2010) found that few marriage and family therapy programs offered courses in the area of financial competency and none required a personal/family finance course. Therapists would benefit from the ability to assess financial difficulties in couples because it is such a prominent problem in relationships. Therapists need to assess (a) if the couple has experienced a financial crisis (e.g., bankruptcy), (b) poor money behaviors (e.g., not having a budget), or (c) simply an inability to talk about money (e.g., different money scripts, values, and beliefs). Also, my hope is that this manuscript encourages financial programs to consider incorporating the courses I described earlier. My hope is that one day our field actually develops training programs that will teach skills that are both financial and therapeutic to a generation of financial therapists.

For the time being, I strongly recommend that practitioners interested in becoming financial therapists seek education in both disciplines. It is not enough to take a few continuing education courses. Find a way to actually take two to three courses at a local university or online. I have no doubt that the financial growth I experienced will be similar for other family therapists, and I believe that financial planners will experience new mechanisms of change for their clients and themselves as well. Furthermore, practicing financial therapy without training in both disciplines could put practitioners at risk for a lawsuit due to practicing outside of their scope of competence. If a professional is not adequately trained, conjoint therapy with a practitioner from the other discipline may be the only ethical choice.

LIMITATIONS

Like other research, limitations exist in this study. Although journal reflections and detailed field notes were kept, the full lived experience of the class and time with students included much more than what was documented. There are nuances and memories of the experience still shaping me that I have not fully appreciated yet. Second, from the perspective of other research approaches, there is not a single prescribed methodological approach for conducting an autoethnographic study (McIlveen, Beccaria, du Preez, & Patton, 2010), which can be seen as a limitation. For an autoethnography, this is a strength that allows for individual accommodation to the situation. Also, to minimize the impact of this limitation, my mentor and I met on a regular basis for dialogue around the results. The mentor aided the analysis process through questioning, offering counter explanations, and generally challenging me to carefully and reflectively examine her ideas. As an experienced qualitative researcher, the mentor helped uncover any potential blind spots or assumptions that I may have held that needed to be critically unpacked. Third, the data was collected from a financial course that was taken without the suggested prerequisites. Therefore, the difficulty of the class itself could have been a confounding variable that could be a distraction from the experience of taking such a financial course. Many of my frustrations, polarized thoughts, and anxieties could be derived from simply feeling inadequate within the setting. It is my belief that the intensity of the course simply magnified the experiences that would have been present regardless, yet it is important to note this limitation.

The findings of this study are not intended to be generalizable to all financial therapists. We acknowledge that this study is the subjective portrayal of one experience. As such, others entering the world of financial training, from marriage and family therapy or other disciplines, may not hold the same assumptions, biases, or money scripts. Finally, because the definition of financial therapy is still not well-defined, learners may take different paths to financial therapy education and achieve different outcomes. Regardless of how financial therapy is operationally defined by each of us, the field needs to start talking about what it is, how to develop and receive training, and how to implement it in practice.

CONCLUSIONS

After I completed this autoethnography, I enrolled in a second financial course, "Family Financial Counseling." As I acquired more skills and knowledge, I found my perspective on the field of financial therapy continuing to change. When I initially began developing this study, I felt sure that I would never have the time to dedicate to learning the financial skills and knowledge that would allow me to conduct financial therapy without a planner. Yet, my second financial course provided tangible interventions that I began to utilize in sessions without a planner (e.g., ways to increase credit score, ways to decrease minimum payments, ways to consolidate debt). This led me to start questioning my assumptions about the ethical boundaries around financial therapy are. For example, I have asked myself: (a) what areas of finances are inappropriate for me to discuss with

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clients; (b) are there times when I come close to combining the skills from both disciplines in my work; and (c) how will I know if I am doing financial therapy? The more I learn about and experience financial therapy, the more it seems that I encounter questions about what financial therapy could look like. These questions do not make me want to give up on pursuing the integration of finances into my therapy work. After all, the research supports financial therapy helping individuals, couples, and families (Maton, Maton, & Martin, 2010; Falconier & Epstein, 2011). On the contrary, these questions should encourage us to more clearly define financial therapy to ensure we are practicing it appropriately and ethically (Gale, Goetz, & Britt, 2012). My hope is that this autoethnography spurs others to utilize qualitative methods to carefully and rigorously analyze their experiences in becoming financial therapists.

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