### 2019 Research Conference

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### **Pre-Conference Workshop**

### **Publishing Your Counselling Research**

The workshop will include four speakers:

- 1. **Dr Paula Brogan** (Accredited Counsellor BACP & Lecturer in Counselling, Ulster University) will talk about undertaking research as a practitioner
- 2. **Dr Maggie Long** (Registered Counsellor BACP & Lecturer in Counselling, Ulster University) will talk about the process of writing an article
- 3. **Dr Anne Moorhead** (Senior Lecturer in Health Communication, Ulster University) will talk about the importance of journal submission guidelines
- 4. **Dr Noreen Giffney** (Accredited Psychoanalytic Psychotherapist NIIHR, IFPP, ICP & Founding Scholar BPC & Lecturer in Counselling, Ulster University) will talk about the review process after you submit your article

Target Audience: Counsellors, Psychotherapists and Trainees interested in becoming involved in conducting research in the field. No previous knowledge of conducting research is required. Delegates should have an idea for a research project they would like to pursue, which we will discuss with them at the workshop.

### Dr Ciaran Mulholland

Senior Lecturer, Queen's University Belfast and Clinical Director, Northern Ireland Regional Trauma Network

### Friday Keynote

The Northern Ireland Regional Trauma Network: treating the aftermath of psychological trauma with evidence-based therapies

The 2014 Stormont House Agreement made a commitment to establish a comprehensive psychological trauma service with the aim of improving access to high quality mental health trauma care for victims and survivors. In 2015 the Health Minister announced the establishment of the new 'Regional Mental Health Trauma Network'.

The Aims of the Regional Trauma Network are to: -

- 1. Comprehensively address the mental health legacy of the "Troubles"
- 2. Comprehensively address the mental health impact of all other forms of trauma
- 3. Improve individual, family and community experience of mental health trauma care
- 4. Improve the psychological and social outcomes for individuals, their families and communities who have been traumatised as a result of the "conflict" and all other forms of trauma.
- 5. Improve governance and public accountability of trauma services.

Work has now begun to develop the new service, drawing on world-leading clinical expertise for guidance. The intention is to establish five clinical teams, one in each Health Trust, which will be brought together through a regional structure. The proposed model recognises the need for a collaborative partnership across the community, voluntary and statutory sectors. Each clinical team will work with services provided by the community and voluntary Sector, commissioned, and funded by the European Union through the Victim and Survivors Services. Dr Mulholland will explain the work which is underway to ensure that the commitment made in the Stormont House Agreement is met.

### Dr Kim de Jong

Assistant Professor, Leiden University, the Netherlands

### Saturday Keynote

Using routine outcome monitoring as a feedback intervention to enhance outcomes in routine practice

Aim/Purpose: While routine outcome measurement (ROM) has become a standard in psychotherapy and counselling in many countries (including the UK), the information from these measurements is not automatically used by clinicians in treatment. In ROM, clients' functioning in symptoms and/or wellbeing is typically measured on a session-by-session basis. In the more complex systems, the clients' progress is then compared with a so-called expected treatment trajectory, based on the treatment gains made by former clients.

Design/Methodology: ROM can be used as a feedback intervention when clinicians use the information on their patients' progress to adapt their treatment strategy when they are not progressing well. Research suggests that this use of progress feedback has the potential to improve clinical outcomes, make treatments more efficient, and reduce dropout rates. However, feedback interventions are not equally effective in all cases and the effectiveness seems to be moderated by client characteristics (e.g., initial severity, complexity), clinician characteristics (e.g., openness to use of progress feedback, self-efficacy) and implementation strategies (e.g., training, continued supervision). In this keynote address, Dr. De Jong will discuss why we need progress feedback to obtain good outcomes for our clients, as well as explain the different ways in which progress feedback can be used in routine practice. She will synthesize the scientific knowledge on this topic through the discussion of recent systematic reviews and meta-analyses, which suggest that progress feedback tends to be mostly effective for cases in which the client is not progressing well.

Dr. De Jong will address the theoretical basis of feedback interventions, as well as the potential mechanisms of action. Finally, the way in which progress feedback links to the broader literature of therapist effects and process and outcome prediction will be discussed.

### Professor Sue Wheeler, Professor John McLeod, Dr Andrew Reeves and Dr Caryl Sibbett

#### **Discussion Panels**

#### **Opening Discussion**

The founders of the BACP Research Conference, Professor Sue Wheeler (University of Leicester) and Professor John McLeod (University of Oslo), will reflect on 25 years of research achievement in our field.

They will consider the most significant achievements and discuss the challenges that have been overcome in this period.

They will go on to look at how far the research landscape has changed in this period and debate the extent to which changes in the profession and in public policy have impacted our field.

They will evaluate how far we have come and discuss what they will be looking for at this year's conference.

#### **Plenary Discussion**

Professor Wheeler and Professor McLeod will be joined by Dr Andrew Reeves (BACP Chair) and Dr Caryl Sibbett (BACP Deputy Chair) to review the two days of the conference.

The panel will discuss the presentations and themes that have stood out for them, and they will deliberate upon the most notable and significant issues raised.

They will look forward to the next 25 years of counselling and psychotherapy research, focussing on the pressing issues for research in our field.

### Toni Giugliano Mental Health Foundation Scotland

### Matthew Smith-Lilley and Steve Mulligan BACP Sara Boyce and Kirsty Scott PPR Project

#### **Discussion Panel**

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Opportunities and challenges facing counselling and psychotherapy in primary care across the UK

Keywords: Counselling and psychotherapy, primary care, policy, UK.

**Background and context**: There is a mixed picture when it comes to the delivery of counselling and psychotherapy services in primary care across the UK.

At a time when growing numbers of GPs are reporting that mental health problems are the primary reason for more appointments, an ever-increasing political focus on achieving integration within the healthcare system, and an appetite to achieve parity of esteem between physical and mental health, primary care continues to remain key to the delivery of psychological therapy services.

In England for example, the IAPT programme is coming back full circle and, through the Five Year Forward View for Mental Health, is seeking to reverse the trend seen at its creation whereby counselling services were cut from primary care – and now is expanding the workforce significantly to deliver its approved interventions specifically in these settings. Despite this positivity in England, in Northern Ireland there is a very different story, data shows that GP surgeries only receive £2.29 per head in funding to deliver in-surgery counselling. Whilst across Wales and Scotland a mixed picture exists of services being delivered across primary care.

Coinciding with Mental Health Awareness Week, we want to use the session to unpick the current picture of counselling and psychotherapy delivered in primary care and discuss the opportunities and challenges that exist across the UK.

#### Questions and issues to consider:

- Where regionally is counselling and psychotherapy delivered in primary care across the UK?
- What policy opportunities and challenges exist in developing counselling and psychotherapy in primary care?
- What role can primary care play in increasing access, improving availability and reducing waiting times for people needing psychological therapies.
- What gaps in research and evidence are there preventing us making a stronger case for counselling and psychotherapy?

Who will benefit from attending this session? Counsellors and psychotherapists with an interest in the national healthcare policy landscape and future developments.

# **PAPERS**

### Katarzyna Adamczyk

### **Paper**

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The impact of expanding the self on the ability to work at relational depth

**Keywords**: Person-centred therapy, relational depth, therapist's readiness, configurations of self, accurate symbolisation.

Aim/Purpose: Working at relational depth is considered to be one of the pillars of an effective intervention within person-centred approach. However, there has been little evidence explaining how the therapists can enhance their ability to work at depth. This paper seeks to add to a growing body of literature on the factors that can contribute to the development of this ability.

Design/Methodology: The case study is based on systematic analysis of three sources of data: the therapy session recordings, the client and supervision notes, and the researcher's reflective diary. The analysis was aimed to track down the development process of relational depth. This was achieved by identifying critical incidents from the therapy sessions and matching these with the incidents from the therapist's personal therapy and supervision.

Ethical Approval: The informed consent was obtained from the client, at the start and the end of the therapy, to use the written materials from therapy sessions in submission for publication. This was approved by the University in accordance with the ethical standards of the Health & Care Professions Council and the British Psychological Society.

Results/Findings: The findings from this case study suggest that the therapist's ability to work at relational depth can be developed through the expansion of the therapist's self. The more parts of the self the therapist is able to employ during a therapeutic encounter, the greater the potential he/she has of being able to work at relational depth with their clients.

Research Limitations: The trustworthiness of this case study was sought to be achieved through the analysis of three different sources of data that were systematically cross verified (triangulation). The study design used was the explanatory holistic study.

Conclusions/Implications: The conclusion coming from this case study is that besides discussing the client's readiness to work at relational depth, we also must take into account the therapist's readiness to engage at depth. The meeting at depth requires the therapist to bring their true self with its flaws and vulnerabilities. Thus, the practice of self-exploration, along with a developing capacity for accurate symbolisation, are essential in becoming a better therapist.

### Robyn Allen

### **Paper**

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Institution/Affiliation: University of Leeds

How do relational counsellors' own personal political ideologies impact on their intersubjective relationships with clients?

**Keywords**: Political ideology, intersubjectivity, relational approach.

Aims/Purpose: Current awareness of the role of politics within counselling (Milton, 2018) suggests that the personal politics of the counsellor should not be underestimated or neglected. However, there has been little research into what impact it has.

The aim of this research is to capture subjective understandings from counsellors of the nuances of their practice and how their own political ideologies impact on the relationship with their clients, to understand how counsellors own personal political ideologies impact on the therapeutic relationships with their clients.

**Design/Methodology**: 4 participants were recruited from a local community counselling centre that has a pool of qualified counselling volunteers.

An initial screening process assessed political orientation and the most diverse sample was invited to take part in semi-structured interviews, which were than analysed using Interpretative Phenomenological Analysis (IPA).

**Ethical Approval**: This research was approved by The University of Leeds School of Healthcare Ethics Committee.

Results/Findings: 5 main themes emerged from this research;

- Therapeutic relationships can be maintained even when there are strong and differing personal political ideologies between counsellor and client.
- In some instances, counsellors felt the need to block their own feelings, focusing on the client's frame of reference, when personal politics is brought into the room.
- In others it felt more appropriate to bring the felt difference into the space between counsellor and client by noticing and naming it.
- Counsellors described the benefits of working with openness and curiosity with their clients, regardless of the personal political ideologies they were bringing and whether they matched their own.
- Political ideology is important in counselling yet is still considered taboo.

Research limitations: A limitation of this research is small sample size and the lack of diversity of demographics between the participants. This means the research is not generalizable to the field of counselling. Further research is needed to explore on a larger scale.

Conclusions/Implications: This research shows that political ideologies are still taboo in counselling, lacking conscious thought and, consequently, discussion, both in training and beyond. There are implications to counselling training courses and the on-going personal development of counsellors.

### Jens Bakewell

### **Paper**

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Just about working: writing myself better after a problematic workplace experience

**Keywords**: Burnout, self-care, autoethnography, ethical research, counsellor education.

Aim/Purpose: 'Burnout' is a common occurrence within the counselling profession (Malinowski, 2014) but as it is a taboo subject for individual counsellors (Adams, 2014) there are few first-person narratives available describing the experience. The researcher used their personal experience of a problematic work environment and their related feelings of distress and disillusionment as a starting point to identify cultural factors within the profession and dynamics between self and workplace (Obholzer & Roberts, 1994) that may contribute to burnout.

Design/Methodology: Autoethnography, a qualitative method that combines ethnography, biography and self-reflection, was used to 'write into' the researcher's personal experience, describing and analysing this experience as a way to understand a wider cultural experience (Ellis, Adams & Bochner, 2011).

Ethical Approval: Ethical approval was given by a university ethics panel.

Results/Findings: The act of engaging in autoethnography was found to be transformational for the researcher, uncovering meaning and new identity. The researcher then went on to create a 'story as theory' (Adams, 2015) and has used this in workshops with trainee counsellors, as a means of inviting them to consider how they might adapt to resist burnout and survive difficult experiences. Challenges of responding to the dynamic and ongoing relational ethics (Adams, Jones & Ellis, 2015) involved in a study of this kind were uncovered.

Research Limitations: The researcher met their own criteria for writing successful autoethnography with reference to standards set by Bochner (2000), Richardson (2000) and Adams, Jones and Ellis (2015). As with any autoethnography the results are not intended to be an ultimate 'truth', universal or transferable, rather the aim is to be a turn in the conversation.

Conclusions/Implications: The research highlighted how personal, organisational and professional narratives can resonate and impact on burnout in counsellors. The study demonstrated the relevance of autoethnography as a method in counselling research, by showing that it parallels the therapeutic process and also has the potential to create knowledge products that can be used to inform counsellor education.

### Karen Bateson

### **Paper**

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Now you see me: improving the process of informed consent in the psychotherapy and counselling professions

**Keywords**: Informed consent, autonomy, change processes, risk, transparency.

Aim/Purpose: This research study aimed to identify how UK-based integrative, relational psychotherapists/counsellors understand the process of informed consent in their clinical practice.

Design/Methodology: This project's research design had three elements - a literature review that aimed to identify what informed consent is, how it applies to counselling and psychotherapy and how counsellors/psychotherapists work with informed consent in their practice; a practice review that aimed to identify what informed consent information is available to clients before they undertake therapy; and an IPA inquiry via in depth, semi-structured interviews undertaken with four integrative, relational psychotherapy/counselling practitioners.

**Ethical Approval**: Given by the School of Healthcare Research Ethics Committee (SHREC) at the University of Leeds on 9th May 2018.

Results/Findings: The study found that the key features of the informed consent process are protection, choice, balanced information and autonomous decision-making and that integrative, relational psychotherapists/counsellors in the UK use it to create a safe therapeutic space, to try to share power and to provide choice. In addition, there are clear gaps in the types of information presented to clients via websites.

Research limitations: Limitations of this study include potential selection bias, in terms of gender and ethnicity, and potential weaknesses in the topic guide. Limitations of the practice review section of the research project include the use of a cluster sample and the potential effect of the exclusion criteria used, both of which increase the chances of sampling error and reduce the possibility of generalising the findings to the wider population (Bowling, 2014).

Conclusions/Implications: The informed consent process could be improved by finding ways to help clients understand what therapy could feel like, creating decision aids to help clients make balanced decisions about entering therapy and working on sharing information about benefits, risks and alternatives during all stages of the therapy process, beginning with information presented online. Future research needs to focus on compiling robust evidence about benefits, risks and alternatives and identifying clients' views of the informed consent process.

### Dr Peter Blundell

#### **Paper**

Professional Role: Lecturer

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Responding to boundary issues: a qualitative study

**Keywords**: Counselling, boundaries, Interpretative Phenomenological Analysis (IPA), boundary response, boundary issue.

Aim/Purpose: This study aimed to explore qualified and practicing counsellors' experience of 'boundary' in their practice to help inform counselling pedagogy. Boundaries are an integral part of counselling practice. Counsellors can often acknowledge their importance, but they can also struggle to articulate what they are or how they are used. Boundaries are often described in the literature as being essential for both client and counsellor safety, but it is the client's safety that is often highlighted as the paramount concern. Arguably then, the fundamental aim of boundaries in counselling, according to the literature, is to ensure the safety of clients. However, no research has been undertaken to explore how counsellors understand and experience boundaries within their practice.

Design/Methodology: Seven qualified and practicing counsellors of different modalities were interviewed using semi-structured interviews. The interviews explored how participants understood and experienced boundaries. The interviews were transcribed and then analysed using Interpretative Phenomenological Analysis (IPA).

**Ethical Approval**: This research adhered to BACP ethical guidelines for researching counselling and psychotherapy. This study was also approved by the university's ethics board.

Results/Findings: This paper reports on the second set of findings for this study (the initial findings are reported elsewhere). This study found that describing their responses to boundary issues was much easier for participants than defining boundaries. Analysis identified that participants had specific boundary responses when faced with boundary issues. These responses have been collated to produce the Boundary Response Model (BRM). This model highlights the complex process that exists for participants when responding to boundary issues. Boundary responses were often underpinned by conscious and unconscious thoughts and feelings, which influenced the counsellors' actions. Furthermore, self-protection for the counsellor was a significant theme throughout the responses.

**Research Limitations**: This is a small-scale qualitative study therefore results cannot be generalised. The perspective of the client is also absent.

Conclusions/Implications: This study has important implications for counselling pedagogy by arguing that counsellors and students require greater opportunities for reflection when faced with boundary issues, to ensure that their responses are open, transparent and client-centred. A reflective practice tool is also suggested.

### Emma Broglia

#### **Paper**

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Distress and barriers to help-seeking for UK students: a survey of five UK Higher Education Institutions using the Counseling Center Assessment of Psychological Symptoms (CCAPS-34)

**Keywords**: Student mental health, university counselling, clinical measures, help-seeking behaviour, mixed methods.

Aim/Purpose: The need for campus-based prevention programmes alongside wider investment in student counselling services is substantial, however research on large representative UK student samples is needed to characterise the mental health profile of students and to inform future policy. This study aimed to characterise the mental health profile of UK university students by comparing students who approach counselling services with students who avoid counselling services and with peers in the general student population. This study also aimed to identify barriers to help-seeking for university students with mental health concerns.

Design/Methodology: The study used a cross-sectional survey design in five UK universities. Survey questions included the CCAPS-34 alongside questions on demographics, degree topic, mental health concerns, and willingness to seek help. The CCAPS-34 is a student-specific clinical outcome measure used widely in the US and recently validated for UK use. Survey data were compared to anonymised data from two UK student counselling services as well as data from the CCAPS US normative dataset.

**Ethical Approval**: The study received ethical approval from the University of Sheffield Research Ethics Committee.

Results/Findings: The total dataset comprised 3,108 students (survey = 2,814; service data = 294) from five UK universities. A series of mixed factorial ANOVAs with post-hoc simple effect analyses were used to explore differences in symptom profiles at the university level, faculty level, and self-identified help-seeking level. Thematic analysis was used on 1,011 comments (878 students) to identify barriers to help-seeking. Findings will be discussed across the different student groups, relating to distinct mental health profiles and reasons for help-avoidant behaviour.

**Research limitations**: This is the first UK study to capture CCAPS data on the general student population. Further research should compare a larger representative sample of service data with the general student population and match for a range of demographics.

Conclusions/Implications: Student sub-groups demonstrate different mental health profiles and experience unique barriers to help-seeking, which can be remedied with campus-based initiatives. The UK HE sector needs to support the collection of large datasets on student mental health symptoms to inform policy and foster student mental health initiatives.

### Georgina Campbell-Morrison

#### **Paper**

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Counselling provision in a grammar school within Northern Ireland

**Keywords**: School-based counselling, pupils' perception of counselling, bullying, lack of awareness of counselling, publicity of school-based counselling.

Aim/Purpose: In Northern Ireland counselling services have been established in all post-primary schools since 2007, operated by the Independent Counselling Service for Schools (ICSS) and funded by the Department of Education. The aim of this study was to explore the counselling provision within one particular grammar school in Northern Ireland in order to provide recommendations to enhance the service.

Design/Methodology: The study was qualitative research using semi-structured interviews, in which twelve pupils (aged 12-18 years old) participated. The inclusion criteria were male and female pupils, aged 12-18 years, in the chosen grammar school and whether they had or had not undertaken counselling. Thematic analysis was used to identify several key themes that could potentially enhance the school-based counselling service and clarify the barriers which prevent young people of availing of counselling.

**Ethical Approval**: All procedures in this study received ethical approval first from the university's Filter Committee as a category B research project since children were included.

Results/Findings: The identified key themes were: benefits of school counselling perceptions of counselling; awareness of school counselling; psychological and emotional issues affecting pupils; barriers of accessing school counselling and recommendations for school counselling. These themes suggested the potential importance of school-based counselling, the pupils' concerns relating to bullying and the pupils' lack of awareness about the service and the need for greater counselling accessibility.

Research limitations: The limited sample, the potential biased recruitment of interviewees and the findings of this study are entirely dependent on the pupils' subjective reports.

Conclusions/Implications: This study showed that grammar school pupils are not wholly aware of counselling, there is a high prevalence of bullying within schools, a stigma around attending counselling; a requirement for better accessibility to the service, technology should be integrated into counselling approaches; and publicity of the school-based counselling service needs to be enhanced to ensure that the psychological and emotional needs of every pupil are supported and met. Examples of the recommendations made by the pupils was for provision of school-based counselling outside of school hours, and to have more than one and/or a full-time counsellor on site.

### Zoe Chouliara

#### **Paper**

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Trust as a therapeutic goal in working with complex trauma: a trust-based clinical framework

**Keywords**: Trust, complex trauma, qualitative, framework, therapeutic alliance.

Aims/Purpose: Compromised ability to trust is a key feature in relational/complex trauma. Restoring trust is an important condition for recovering. We know very little about how and why therapeutic trust develops, is maintained, and is occasionally disrupted, especially so in complex trauma. Also, complex trauma does not respond to standard treatment approaches. This study aimed at developing a trust based clinical framework for working with complex trauma.

Design/Methods: Qualitative semi-structured individual interviews were utilised. Transcripts were analysed using Interpretative Phenomenological Analysis (IPA) to identify recurrent themes. A total of 13 participants, working in the field of relational complex trauma, were interviewed. Themes were modelled to identify their situated nature, whereas links between were identified to inform the development of a clinical framework.

**Ethical Approval**: Obtained from a higher institution in Scotland.

Results/Findings: Recurrent themes, which constitute an original theory of therapeutic trust, included: 1. The Nature, 2. The Function, 3. The Components, 4. The Process, and 5. Challenges of trust. A comprehensive definition of trust as a relational mechanism of regulating psychological threat and managing vulnerability, by reducing anxieties, promoting safety and inducing growth based therapeutic experiences is put forward. The first clinical framework of therapeutic trust is proposed, including four cornerstones of trust: 1. Consistency & Gradual Change, 2. Safety & Flexible Stability, 3. Benevolent Presence & Mutual Connection, 4. Transparent Humanity & Balanced Power.

**Research Limitations**. This is a qualitative study within a Scottish context.

Conclusions/implications: Our findings highlight trust as a key therapeutic goal in complex trauma. As per our findings, trust appears able to address the three key features of complex trauma, i.e. poor sense of self/shame, poor emotional regulation, and relational sensitivity. Findings have implications for the development of trust-based interventions for increasing engagement and managing drop outs, when working clinically with severe and/or complex clients. In an increasingly traumatogenic world, more clinicians will be called to work with complex trauma, where disengagement, drop outs and alliance ruptures are highly prevalent. Managing trust and its ruptures is key for service delivery, training and supervision, if we are to provide safe, effective, and responsive mental health services for complex trauma and beyond.

### Dr Elena Coltea

### **Paper**

Other Authors: Dr Aneta Tunariu

Professional Role: Counselling Psychologist Institution/Affiliation: University of East London

Listening to 'listening': what clients say of their experience of 'being listened to' in the psychotherapeutic context

**Keywords**: Listening, psychotherapeutic relationship, readiness, self, transformation.

Aim/Purpose: Listening has long been recognised to be an effective agent for client change and one of the most fundamental counselling skills regardless of the therapeutic modality. Underpinned by practitioners' independent clinical observations, theory considers listening as the heart and mortar of the therapeutic relationship in which the success of the therapy is firmly grounded. However, empirical research on the listening experience per se remains scarce. In response to this, an empirical study exploring clients' experience of 'being listened to' in the psychotherapeutic context has been carried out, and this presentation discusses its key findings and implications for knowledge and practice.

Design/Methodology: A qualitative study seeking in-depth understanding of clients' individual experience and subjective meanings. Narrative transcripts generated via semi-structured interviews with six adult women (recently or currently psychotherapy clients) analysed using Interpretative Phenomenological Analysis.

**Ethical Approval**: The study was ethically approved by the School of Psychology Research Ethics Committee of the University of East London.

Results/Findings: Two master themes were identified; namely 'being listened to': no place to hide and cues to self: the phenomenology of 'being listened to'. Clients' experience of 'being listened to' emerged to be both a process and a product underpinned by dynamic combinations across several distinguishable key conditions.

Research Limitations: The study was designed to capture in-depth and detailed accounts of participants' experience and whilst the findings are transferable to other contexts they are not generalizable.

Conclusions/Implications: According to the participants, certain kinds of listening enrich the therapeutic encounter in ways that optimise deeply transformational experiences for clients. These are the kinds of listening that have the capacity to make visible and bridge the always already separating existential divide between individuals in dialogue. The potential of 'being listened to' is shown to catalyse a powerful sense of specialness in the therapeutic relationship wherein the arrival of 'no place to hide' scaffolds the establishment of a distinct experience of self with existential, inter-personal and social 'legitimacy'.

### **David Cook**

#### **Paper**

Professional Role: Counsellor and work at The Children's Society

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How do adolescent clients experience power in person-centred therapy relationships?

**Keywords**: Person-centred therapy, clients' experiences, adolescent clients, power, interpretative phenomenological analysis.

Aim/Purpose: Person-centred therapy aims to help clients actualise their own power. When working with adolescents, the developmental needs of the client and the power difference between client and therapist may present additional barriers to this. To understand the implications of this, this study sought to understand the power dynamics of the therapy relationship from the adolescent client's perspective.

**Design/Methodology**: Seven adolescent clients in person-centred therapy took part in semi-structured interviews. Interpretative phenomenological analysis was used to explore the meaning they made of their experiences.

**Ethical Approval**: This research was carried out for an MA dissertation. Ethical approval was granted by the University at which I was studying.

Results/Findings: Participants' experiences centred around five themes: 1) feeling my vulnerability entering a relationship with a powerful figure; 2) being invited to express myself; 3) evaluating if I can trust my counsellor; 4) feeling I'm in control in a relationship with boundaries; and 5) exercising my power in the relationship. The validity of this study is enhanced by transparency in describing the process of designing and conducting the interviews and carrying out the analysis. Sensitivity to relationships with participants meant rich descriptions of their experiences were elicited. Analysis of transcripts was rigorous, and themes carefully grounded in the data. This process was audited by a student colleague.

Research Limitations: Limitations include that participants may represent a relatively empowered sample who were able to take part in interviews. Participants did not have the opportunity to validate the results. A small, homogeneous sample allowed for detailed analysis and meaningful exploration of the differences and similarities in participants' experiences, but we should be cautious about generalising the findings.

Conclusions/Implications: Participants were well-aware of, and negotiated, the unequal power dynamic of their therapy relationships. Person-centred therapists need to accept this unequal dynamic and use their power sensitively and actively to invite adolescent clients to use the therapeutic space. The boundaries keeping the therapy relationship separate from the rest of participants' lives were an important factor in them feeling empowered. The effect of therapist self-disclosure on the ability of individual adolescent clients to use the relationship as they wish needs to be considered.

### **Andrew Coon**

### **Paper**

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Supervision - a mandatory requirement for practicing counsellors, from trainee and novice supervisee's perspectives

**Keywords**: Supervision, supervisor, counsellor, novice, trainee.

Aim/Purpose: Supervision is essential and mandatory in counselling practice from training and throughout one's career. However, there is limited research among trainee and novice counsellors. The aim of this study was to explore the experiences of mandatory counselling supervision among trainee and novice counsellors within Northern Ireland.

**Design/Methodology**: In this qualitative study, semi-structured interviews were conducted with a purposive sample of eight trainee and novice counsellors. Participants were recruited from colleges and counselling agencies. Thematic analysis was used to code the data and identify themes.

**Ethical Approval**: This study obtained ethical approval from the Communication Filter (Risk and Ethics) Committee.

Results/Findings: From the transcripts of eight trainee and novice counsellors, six key themes emerged from the data: "gatekeepers to the profession", "supervision is a mandatory obligation", "supervisor qualifications and experience", "characteristics and skills of the counselling supervisor", "the challenges and imbalances of the supervisory relationship" and "the logistics of counselling and supervision". The findings indicated that participants' knowledge of professional bodies was limited, in choosing a supervisor they valued experience and relational building qualities over qualifications and that they were affordable and available within a reasonable travelling distance. Regarding ending supervision arrangements there was consensus on planning and preparation, but a minority found the ending stage difficult.

Conclusion/Implications: Participants' experiences of supervision revealed a mixed response, e.g., supervisors were viewed as agents policing the profession, whilst characteristics most sought in supervisors was, an ability to develop and maintain a safe trusting relationship. Mandatory supervision in the UK, its purpose and role as defined by professional bodies representing practitioners appears little understood by trainee and novice counsellors. Therefore, to improve the overall experience for supervisees, and by default their clients, the purpose and role of supervision must be defined and explained more unambiguously.

### **Annalisa Cortese**

### **Paper**

Professional Role: Integrative Counsellor, Psychological Therapist

Institute/Affiliation: Newham University College

Idiosyncratic psychological processes and social invisibility experienced by intersex people: a

multiple case study

Keywords: Invisibility, intersex, gender X.

Aim/Purpose: Although researchers have analysed intersexuality from a medical, legal and social perspective, these lack consideration of its social-psychological features. Therefore, the following research aims to add to the existing queries, an exploration of intersex participants' inner processes, highlighting the effect that social invisibility has on the creation of their gender identity and coming out experience. Also, this study explores whether introducing a new gender and/or sex marker X could break through the veil of secrecy and invisibility around intersexuality, eventually impacting positively on the participants' inner/outer selves.

Design/Methodology: The employment of a qualitative methodology provided an in-depth analysis of the phenomenon. The methodology follows a multiple case study protocol integrated to grounded theory for the data analysis, thus to guarantee an in-depth insight of each unit of analysis, but also reliability and integrity to the interpretative process. The sample was composed of six adult participants, born intersex, with experience of medicalization. The data were collected through semi-structured interviews, and audio-recorded. The identification-definition-interpretation of coding informed the analytical process. Interrelation between themes was grasped throughout a constant comparative method.

**Ethical Approval**: This study gained ethical approval from Newham University College Ethics Committee.

Results/Findings: Eight phenomena have been individualised: awareness of own diversity, awareness of the incongruence between inner-self and outer-self, social invalidation, secrecy, absence of social recognition, coming out experience and gender X.

**Research Limitation**: Due to the complexity of the study, a second interview would have skimmed data further, contributing to a more generalisable theoretical saturation.

Conclusion/Implications: The findings reveal the idiosyncratic character of each participant's experience. These show how social invisibility impacts on the participants' process of self-integration. Besides, how social stigma/marginalisation obstructs self-expression of true-self and influences the coming out experience. Introducing a new gender marker seems to respond to the individual need for social recognition. Therefore, this could facilitate the process of self-recognition and self-identification. This investigation may increase further practitioner's awareness of intersexuality and the impacts of social constructions on individual well-being.

### **Beverley Costa and Jean-Marc Dewaele**

### **Paper**

Other Authors: Jean-Marc Dewaele Professional Role: Therapist, Supervisor

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The talking cure - building the core skills and the confidence of counsellors and psychotherapists to work effectively with multilingual patients through training and supervision

**Keywords**: Multilingual, training, supervision, linguistic empathy, agency.

Aim/Purpose: Increasing numbers of multilingual people seek counselling and psychotherapy in a system that is rooted in a monolingual ideology. Despite these numbers, there is very little training for therapists and counsellors equipping them to treat multilingual patients. This is strange given that therapeutic treatment is known as the "talking cure". Research with therapists and counsellors about their beliefs and behaviour with multilingual patients (Stevens & Holland, 2008; Costa & Dewaele, 2012) revealed that therapists were anxious about their ability to work with multilingual patients. Mothertongue multi-ethnic counselling service, a small NGO based in the UK, developed and delivered training for counsellors and therapists and culturally and linguistically sensitive supervision groups for counsellors and therapists working in their local NHS Improving Access to Psychological Therapies Service. They also developed and deliver a module on culturally and linguistically sensitive supervision for IAPT supervision courses. An evaluation of these initiatives was conducted, to explore whether they would improve therapists' core skills in working with multilingual clients.

Design/Methodology: An informal evaluation and a formal mixed-methods evaluation were conducted with 88 trainees and supervisees who had participated in these training and supervision initiatives. They completed a questionnaire including closed and open questions related to the impact of the training. Seven of the participants agreed to follow-up interviews which were analysed using NVivo software and Thematic Analysis.

Ethical Approval: Received from Birkbeck, University of London.

**Research Limitations**: Relatively small numbers of participants and range of training organisations were involved. This initiative could be replicated and tested.

Results/Findings: After the training and supervision, the confidence and multilingual awareness of counsellors and therapists improved, and they felt able to use multilingualism as a therapeutic asset in the treatment of trauma and other presenting issues. They began to think of multilingualism as a process/relational issue and not purely a technical issue.

Conclusions/Implications: This type of training and supervision has the potential to change thinking and behaviour of counsellors and therapists, enhance their core skills and impact directly on mental health practice and the reduction of health inequalities.

### Marian Crowley

#### **Paper**

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Borrowed memories: life story research, the experience of living with Dissociative Amnesia

(DA): a pilot study

**Keywords**: Dissociative amnesia, memory, sense of self, knowing yet not knowing, narrative.

Aim/Purpose: The aim is the exploration of the subjective lived experience of the individual with DA. Although dissociation is not a new concept, a review of the literature of both trauma and dissociation speaks little of the experiences of individuals with dissociative amnesia and impact on their sense of self. For survivors of trauma and abuse, motivated forgetting (also referred to as dissociative Amnesia (DV)) offers an important coping strategy. The start of this research journey has been the emerging narrative from a voice silenced with DA. This places the research paradoxically exploring the knowing something without the knowing of it.

Design/Methodology: In life story research, co-construct complex narrative accounts stories are a means by which both the researcher and the storyteller are richly enlightened (Mishler, 1991). Telling stories can serve to enhance knowledge of neglected yet significant areas of human life (Polkinghorne 2007). In keeping with Bruner's (1986) concept of narrative reasoning, the participant's stories support the reader's gaining insight into the individuals and their storied experience. Data was collected using semi-structured interviews allowing the researcher to relationally and reflexively engage with the participant (Etherington, 2004).

Ethical Approval: The study has been ethically approved by Chester University.

Results/Findings: The lived experience of the participant in this pilot study was "the memories I've recalled aren't really mine, I borrowed and found them along the pathway in my life, to make myself feel more normal". The findings in this pilot study demonstrated the longing to belong and the development of coping that included emotional disconnection and borrowing memories. The conflictual world of DA leaves the person in a world that remembers yet not remembering.

Research Limitations: These findings only relate to the pilot study stage of the research. The next stage of the research is to carry out in-depth interviews with ten participants exploring their experience of DA.

Conclusions/Implications: The findings from this research will be used to inform the development of resources that can be used in teaching, it is anticipated this will include published material.

### Heather Dahl, Brett Gleason and Wendy Hoskins

### **Paper**

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How counsellors perceive their training in suicide assessment: a phenomenological

investigation

**Keywords**: Suicide assessment, training, clinical mental health, counsellor preparedness.

Aim/Purpose: Little is known of counsellor perspectives of their training and level of preparedness when working with suicidal clients. Although professional standards and guidelines regarding counsellor competency in this area exists, training may not be occurring throughout a trainee's program, or is occurring inconsistently. The aim/purpose of this phenomenological inquiry was to understand the essence of counsellors' perceived degree of preparedness working with suicidal clients, and to provide clinical and training recommendations in this subject area.

Design/Methodology: Using a phenomenological tradition and social constructivist paradigm, semi-structured interviews were conducted with 10 participants, using maximum variation and criterion sampling with counsellors who had previous experience working with suicidal clients. Multiple trustworthiness strategies were utilized, such as member checking and triangulation.

Ethical Approval: Ethical approval was attained by university approval.

Results/Findings: The results of the study identified four structural themes and 15 textural themes were identified that answered the research questions. Findings highlighted participant insight training preparedness, components of preparedness, assessment and intervention knowledge, and training recommendations for suicide prevention and assessment.

Conclusions/Implications: Master's level training implications for counsellor education programs and post-master's training in the area of suicide prevention and assessment are presented, along with future research directions. Whether or not participants currently felt prepared to work with suicidal clients, there was a desire to increase their master's level training in the area. Training to work with suicidal clients should begin early in a master's student's training and be integrated throughout courses. Specifically, a course that presents training based in a theoretical training program that uses multiple types of training methods, including role-plays, discussion, case studies, lecture, and other experiential activities. Formal training in a specific assessment model or workshop would benefit other programs.

Research Limitations: Sampling for this study was limited to solicitation of participants through online communication methods. It is possible that those who replied to the call for participants felt more comfortable with the topic of suicide, which could have an effect on the overall essence of participant experience. Although member checking was used to increase rigor, responses were limited. Further, not all major race/ethnicity groups were represented.

### **Kate Diggory**

### **Paper**

Other Authors: Dr Andrew Reeves Professional Role: Counsellor

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Self-compassion for carers. Experiences of a short programme for carers of those with a life limiting or palliative diagnosis

**Keywords**: Self-compassion, mindfulness, carers, palliative, training programme.

Aim/Purpose: Phase one of this research explores how carers of those with a life limiting or palliative diagnosis ('carers') experience a face to face delivery of a brief mindfulness and self-compassion programme for carers. The results from this research will influence the content and design of an online version of the programme. Carers are under significant pressure, yet interventions aimed at ameliorating their stress and anxiety are under-researched.

Design/Methodology: This was a predominantly qualitative study. Nine participants, the majority of which were recruited from hospices in the North West, attended four x one hourly 'one to one' sessions in self-compassion and mindfulness with an emphasis on the needs of carers. Data were collected via semi-structured interviews and analysed using thematic analysis (Braun & Clarke, 2006, 2013) from a critical realist approach (Bhaskar, 1998).

**Ethical Approval**: Granted by the Ethics Committee of the Department of Social & Political Science, University of Chester.

Results/Findings: The analysis of data yielded revealed 11 sub-themes organised around four overarching themes: 'This is what people that are self-compassionate do' encompassing the impact on carers of becoming more self-compassionate; A Compassionate Presence, representing the role of the facilitator; On Being a Student, characterising the process of learning new ways of being; and In the Trenches, capturing the pain and frustrations of being a carer.

Research Limitations: Due to the use of an opportunity sampling strategy all the participants were female. This study was not longitudinal and thus the ongoing impact of the training could not be assessed. The researcher adopted a dual role of both teacher/facilitator and researcher (but not counsellor) and her personal relationship with each participant may have influenced how participants reported on their experience of the programme.

Conclusions/Implications: The findings of this study will not only influence the design of an online version of a mindfulness and self-compassion training programme for carers but could have useful implications for individual therapeutic work with carers in terms of interventions for supporting carers and identifying some of their unmet needs.

## Dr Linda Dubrow-Marshall, Ailsa Shaw Parsons and Kerry Nair

### **Paper**

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Arts for the blues: a new creative intervention for depression

**Keywords**: Creative arts, psychological therapies, psychotherapy, multimodal, depression.

Aim/Purpose: The aim was to develop a new creative intervention for depression and to begin to evaluate its feasibility and effectiveness.

Design/Methodology: The design of the intervention is based on a thematic synthesis (Thomas & Harden, 2008) of helpful factors within the NICE recognised therapeutic interventions for depression including CBT, counselling for depression, psychodynamic psychotherapy as well as arts therapies. Two pilot studies tested the intervention at two events at a university providing verbal and creative evaluations. The intervention was also tested with IAPT staff and service users including pre- and post- measures (e.g. PHQ9, GAD7, PANAS) and focus groups. Focus groups are currently analysed using thematic analysis (Braun & Clarke, 2006).

**Ethical Approval**: Ethics Committee of Edge Hill University and NHS Ethics Committee for IAPT groups.

Results/Findings: A framework for a new pluralistic client-led multimodal creative intervention for depression was created. It included activities focused on connecting with the arts and the body (e.g. through images or gestures emerging from a body scan), experiencing and expressing emotions (e.g. using improvised movement or image-making on a specific topic), sharing with others (e.g. using mirroring or interactive scribbling), working with insight (e.g., using imagery, symbolism and metaphor), learning skills (e.g. mindful movement, breathing exercises, use of particular material in art-making), integrating useful material back to one's life (e.g. deriving personal meaning from explorations) (Parsons et al submitted for publication). Responses from the pilot workshops were positive regarding feasibility with the majority of participants reporting overall satisfaction. There was feedback to be mindful of the potentially overwhelming nature of multimodal approaches for people with depression (Haslam et al accepted for publication). IAPT focus groups are currently being analysed and the results will be available for the BACP conference in May 2019.

**Research limitations**: This is a preliminary study which has used pilot workshops to develop a new intervention, so generalisability is limited.

Conclusions/Implications: There is potential for creative interventions to serve as an adjunctive or alternative therapy to clients who do not respond well to CBT or other talking psychotherapies. In the first instance, it is hoped that this intervention could be used within IAPT services.

### Geraldine Dufour and Afra Turner

### **Paper**

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Counselling in Universities and Colleges: gathering outcome measures for the sector, a

feasibility study.

Five Keywords: Mental health, students, university, outcome measures.

Aim/Purpose: In the context of growing concern over high levels of mental health issues in college and university students, the SCoRE consortium was set up with the aim of pooling data from university, FE and 6th form College Counselling Services in order to systematically examine sector-wide student counselling outcomes. The aim of this feasibility project was to establish the suitability of required processes and procedures for this objective. This involves pooling data utilising a variety of outcome measures (CORE, CCAPS, PHQ-9 and GAD-7) as well as non-standardised demographic and session variables. Through this process the intent is to develop data protocols that facilitate pooling data from different services to allow group analysis. A corresponding aim is to clarify the logistics and data sharing agreements for a shared and secure data hub. The overall aim is that the feasibility project will establish a viable template for the next stage pilot project, which will focus on pooling further data from a larger/more diverse group of student counselling services to examine student counselling outcomes.

**Design/Methodology**: This is a retrospective analysis of data collected routinely as part of participating organizations' student counselling service routine outcome data collections.

Ethical Approval: Existing service data was sourced for the purpose of audit and evaluation, therefore all involved university ethics boards determined that ethical approval was not required.

Results/Findings: The results of this feasibility study will hopefully be ready to be presented at the research conference. The intent is to report on both the methodological issues uncovered and the initial findings in terms of student counselling outcomes across the participating institutions.

Conclusions/Implications: In the current funding context it is critical that services work to evidence their efficacy. This project provides an example of how to go about doing this, providing a practice example to other services.

### Charlie Duncan and Gemma Ryan

### **Paper**

Other Authors: Rachel Davies, Naomi Moller, Dave Saxon

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Couples counselling: who attends and how effective is it?

Keywords: Couples counselling, relationship counselling, depression, effectiveness,

demographics.

Aim/Purpose: Although IAPT couple therapy for depression data exists, there is a much larger dataset collected by third sector relationship counselling services, which has not yet been evaluated. Therefore, this study aimed to understand who presents to third sector relationship counselling services in the UK, the issues they bring and the extent to which it is effective in reducing self-reported presenting problems and depressive symptomology and improving relationship communication.

Design/Methodology: This was a retrospective naturalistic study which analysed data from 29,452 individual clients (14,726 couples) who received couples counselling through a national third sector provider between 1st January 2015 and 31st December 2017. Descriptive analyses were undertaken to determine the demographic profile of clients and the extent to which self-reported presenting issues had changed in severity by the end of counselling. Reliable improvement and clinical recovery rates were calculated for Patient Health Questionnaire-9 (PHQ-9) and ENRICH communication scores. Multilevel modelling was used to model predictors of outcome, namely patient pre-post change on PHQ-9 and ENRICH scores at last therapy session.

**Ethical Approval**: According to UK standards, ethical review is not required for a secondary analysis of anonymised, routinely collected data (Department of Health, 2011).

Results/Findings: Statistical analysis is still on-going, and the full results will be available by May. Clients who received couples counselling were mostly white, heterosexual, non-religious, non-disabled and aged 25-54 years. The most common presenting issues were 'communication', 'rows and arguments' and 'managing conflict'. By contrast, 'mental health problems' were identified as an issue by less than half of all clients.

Research Limitations: The naturalistic nature of this study is acknowledged as both a strength and limitation, by being uncontrolled yet also reflective of what happens in everyday practice. There were large amounts of missing data for demographic characteristics including ethnicity, religion, sexual orientation and disability. Client presenting issues were collected using a bespoke questionnaire which raises questions about instrument validity.

Conclusions/Implications: This study presents detailed demographic information for the clients entering this UK third-sector couples counselling service. Results provide understanding of why couples seek relationship counselling and the effectiveness of this treatment for both relationship distress and depression. Implications for counselling practice are discussed.

### Charlie Duncan

#### **Paper**

Other Authors: Mick Cooper, Dave Saxon, Jacqueline Hayes

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Analysing Goals and Expectations in Counselling with Young people (AGENCY)

Keywords: Young people, school counselling, goals, mixed methods, cluster RCT.

Aim/Purpose: School-based humanistic counselling (SBHC) has been found to be effective in reducing levels of psychological distress and enhancing progression towards personal goals. Despite this, there has been no research undertaken which has looked at the associations between monitoring goal progress at every session and outcomes in SBHC, compared to not. The present study aims to address this gap in the literature.

Design/Methodology: A pilot cluster randomised controlled trial (RCT) was undertaken whereby ten counsellors were randomised to an experimental or control condition. Counsellors were able to provide clients with up to 10 weekly sessions of SBHC and collected the Outcomes Rating Scale (ORS; Miller & Duncan, 2000) at every session and the Young Person's Clinical Outcomes in Routine Evaluation (YP-CORE, Twigg et al., 2009) at the beginning and end of counselling. Those in the experimental group also collected the Goal Based Outcome (GBO) tool (Law, 2011) at every session. Multi-level modelling will be used to explore how goal progress may contribute to changes in psychological well-being in data with a nested structure. Semi-structured interviews were undertaken with young people at the end of SBHC to explore how SBHC may help young people to work towards their goals and how the process of setting and monitoring goals may facilitate improved outcomes in SBHC; these will be analysed using thematic or narrative analysis.

Ethical Approval: Ethical approval was granted by the University of Roehampton (PSYC 17/262).

**Results/Findings**: Data analysis is currently underway and preliminary results will be available by May.

Research Limitations: Due to the pilot nature of the study it may not be statistically powered to detect differences between groups, increasing the likelihood of making a type II error (falsely concluding that there is no difference between the groups).

Conclusions/Implications: If rating goal progress at every session improves outcomes then it could be argued that such practice be adopted in SBHC. There is also little known about how SBHC helps young people to achieve their goals and what counsellors working in this environment can do to facilitate goal progress. It is hoped that this research will provide some preliminary understandings of these mechanisms of change.

### Charlie Duncan and Victoria Heydon-Hatchett

### **Paper**

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Engaging private practitioners in research: what we've learnt and why it's relevant

Keywords: Outcome measures, private practice, client management, evaluation, pilot study.

Aim/Purpose: The benefits of regular tracking and feedback on client progress has been well documented and has been shown to improve outcomes and reduce the number of cases deteriorating and/or dropping out of therapy. However, implementing this as part of routine practice poses a range of challenges, including therapist resistance and beliefs that measures may be used as contra-evidence for their efficacy as a practitioner. Hence, this research aims to evaluate the acceptability of an online client management system to practitioners.

Design/Methodology: Since December 2017 recruitment has been underway to secure a cohort of 30 private practitioners to pilot an online client management system which also has the capacity to collect routine outcome measures. Quantitative data on the number of practitioners who express an interest in participating, the number who go on to participate and the number who drop out will be collected. Descriptive statistics and cross-tabulation analyses will be undertaken on quantitative data. Qualitative analyses, such as thematic analysis, will be undertaken on written feedback and semi-structured interviews to explore facilitators and barriers to participation.

Ethical Approval: In line with recommendations in the Ethical Guidelines for Research in the Counselling Professions, this research followed the principles outlined in the independent ethical review procedure. In particular, legal guidance was sought with regards to GDPR and the client consent process.

Results/Findings: Up to November 2018, 75 practitioners expressed an initial interest in participating and 36 completed the eligibility questionnaire, of which 24 were eligible to participate. Recruitment is on-going. Currently, four practitioners are participating and a further one has subsequently dropped out due to incongruence with their practice and the client consent process. Preliminary anecdotal evidence suggests that it is crucial to fully embed the system into everyday practice to make it acceptable to practitioners and clients alike.

Research Limitations: The low recruitment rate to date makes it difficult to draw any firm conclusions about the acceptability of the system to practitioners.

Conclusions/Implications: Understanding how to engage practitioners in collecting routine outcome measures has important implications for the pooling of data from independent sources, which has the ability to contribute to the evidence-base for the effectiveness of counselling.

### Robert Elliott

### **Paper**

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Inferring causality in process-outcome research on counsellor empathy

**Keywords**: Counsellor empathy, outcome, process-outcome research, causal inference, meta-analysis

Aim/Purpose: Empathy refers to understanding what another person is experiencing or trying to express. Therapist empathy has a long history as a hypothesized key change process in counselling. We present the latest iteration of an ongoing meta-analysis project linking therapist empathy to client outcomes, using it as a case illustration of an integrative model of causal inference in counselling process-outcome research, consisting of six conditions: Precedence, Plausibility, Statistical Conclusion Validity, Internal Validity, Construct Validity, and External Validity.

Design/Methodology: A team of four judges reviewed identified and analysed 24 new studies (out of 2,222 sources) not included in our previous meta-analyses, for a total of 82 independent samples and 6,138 clients.

Results/Findings: Empathy was again a moderately strong predictor of therapy outcome: for study level effects, mean weighted r=.28 (p < .001; equivalent to d=.58). In general, the empathy-outcome relation held for different theoretical orientations and client presenting problems, although there was considerable heterogeneity in the effects. Client, observer, and therapist perception measures predicted client outcome better than empathic accuracy measures. Applying our model of causal inference, we found support for four of the six causal inference conditions: Precedence, Plausibility, Statistical Conclusion Validity, and External Validity. On the other hand, our data set did not have enough causal modelling studies to rule out two important Internal Validity threats: reverse and third variable causation. However, the weakest condition was Construct Validity: We conceded any claim that therapist empathy uniquely predicts client outcome in the absence of other therapist conditions.

Research/Limitations: (a) Questionable validity of some outcome measures (e.g. client-rated satisfaction); (b) exclusion of unpublished doctoral dissertations, making it difficult to evaluate the possibility of publication bias.

Conclusions/Implications: Therapist empathy is a widely-supported, moderately-strong predictor of client outcome and meets most but not all the conditions for making valid causal inferences. Better designs and more sophisticated causal modelling research is needed to rule out reverse and third variable causation. However, there is no evidence at all that therapist empathy uniquely contributes to client outcome, independent of other therapist conditions such as warmth and genuineness.

### Valerie Fletcher

#### **Paper**

Professional Role: Private Practitioner and Lecturer in Psychological Therapies

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Therapists' views on the evidence-based guidelines for the treatment of depression in adults.

**Keywords**: Evidence-based, guidelines, depression, treatment.

Aims/Purpose: The purpose of the study was to consider therapists' opinions of working with the Evidence Based Guidelines (EBG) for working with Depression.

Design/Methodology: Structured interviews took place and analysis was done using Interpretative Phenomenological Analysis (IPA) (Smith, Flowers & Larkin, 2009, p49) with a sample of four practising psychotherapists from different modalities who had worked with the Evidence Based Guidelines for Depression.

**Ethical Approval**: The research was granted ethical approval by The Leeds Beckett University School of Health and Community Studies Ethics Board.

Results/Findings: The findings of this study include:

- Positivity was revealed regarding the use of the guidelines as a reference/safety tool.
- There was an underlying anxiety, fear and frustration regarding job security in relation to the perceived limiting nature of the EBG.
- There was a variation in understanding the extent the methodology and the quality of the data used in guideline formulation.
- There was a consensus that the number of sessions recommended for clients, were not adequate.
- The therapists of differing modalities noted conflict within the EBG and questioned their ethical use when considering a diverse population.

Research Limitations: Therapists were selected from a range of modalities and were limited to four, however such a small sample size in accordance with IPA methodology recommendations. There was also a time limitation and it was a requirement that therapists had experience of working with the guidelines.

Conclusions/Implications: Therapists' perspectives on the appropriateness of Evidence Based Guidelines appeared to be linked with whether they viewed them as congruent with the philosophical underpinning of their modality. In relation to the noted anxiety and frustration of the participants view of the excluding nature of the EBG to other modalities, the results are in line with Reeves (2017) who expressed concern for the future of the counselling and psychotherapy if priority is given to RCTs to the exclusion of other qualitative research methodologies. One of the recommendations from this study is that the confidence of psychotherapists with the guidelines could be strengthened by increasing the knowledge of therapists of the research methods and evidence upon which such guidelines are based.

### Tara Fox

#### **Paper**

Professional Role: Therapist in Private Practice and Lecturer

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Therapists' experience of spirituality in the therapeutic relationship: a thematic analysis

**Keywords**: Spirituality, therapeutic relationship.

Aim/Purpose: The broad research aim of this was exploring therapists' awareness of how their spirituality presents within the therapeutic relationship in their clinical practice. The sample was drawn from therapists who identified as spiritual and who worked in secular as opposed to faith-based settings. The overarching question was: How does your spirituality play a part in the counselling process? How does it manifest in the therapeutic relationship?

Design/Methodology: A qualitative methodological approach was adopted with a sample of three experienced counsellors. In-depth semi-structured interviews were used as the method of data collection. The data was analysed using thematic analysis (Braun and Clarke 2006) from a social constructionist framework.

Ethical Approval: This research was as part of the partial fulfilment of the MA in Psychological Therapies May 2018. The research was granted ethical approval by the local research ethics coordinator of Leeds Beckett University School of Health and Community Studies Ethics Board.

Results/Findings: Therapist spirituality manifests as an openness to connection with the client which was described by the participants as containing energy or 'third other'. These experiences are felt to be natural when working with clients. It also emerged that there is a reticence or a fear of being judged for having spiritual experiences or beliefs when working as a practitioner. The development and strengthening of therapist spiritual awareness emerges over time through counselling training and client work. A limitation within training programmes is that spirituality is not theoretically embedded in courses. It was addressed informally only.

Research Limitations: A limitation of this study is the small number of participants who all identified as female. The participants were also all integrative person centred/relational and whilst this meant there was consistency of approach, it limits the exploration/generalisability of experience to a wider range of theoretical orientations.

Conclusions/Implications: It is concluded from this study that therapists' experience and openness to spirituality mean that therapists are competent to working with not just the psychological but also the spiritual dimension and the depth of connection that can emerge in the therapeutic relationship with their clients. The researcher poses a concluding question: Could training providers better prepare therapists for working with spirituality in the therapeutic relationship? What are the self-care implications for working at this depth?

### Helen Gedge

### **Paper**

Professional Role: Counsellor, Play Therapist and Filial Therapist, Part time PhD Student Institution/Affiliation: University of Salford/Hope Street Counselling and Play Therapy Email: <a href="mailto:hgedge@hopestreetcounselling.co.uk">hgedge@hopestreetcounselling.co.uk</a>

Intensive Filial Therapy with Brazilian mothers and their infants, victims of family violence

**Keywords**: Filial therapy, family violence, culture.

Aim/Purpose: This PhD research project introduced filial play therapy to four families living in a shelter home set up as a charity in southern Brazil. The single mother families housed within the two residential homes were escaping situations of domestic and territorial violence as well as homelessness or extreme poverty. The prime objective at the heart of the charity's project is to strengthen the family attachments and relationships thus enabling the children to remain with their mothers and within the family structure. To further promote and accomplish this primary focus, the research study introduced and developed filial therapy within the work of the project. The aim was therefore to assess the effectiveness of filial therapy in strengthening the relationship between parent and child.

Design/Methodology: Qualitative in design and using a multiple case study methodology, evidence was collated to examine the efficacy of this intervention within this context. This included an assessment process with pre and post intervention interviews, the Family Play Observation, the Measurement of Adult Child Interaction tool, case notes, an adapted version of Elliot's Change interview (in McLeod, 2010) and video recordings of filial therapy sessions.

**Ethics Approval**: As a part-time PhD student, ethics approval was granted by the University Ethics Committee.

Results/Findings: Data analysis to date shows an increase in empathy in the mother-child interactions throughout the intervention as measured by the Measurement of Empathy in the Adult Child Interactions (MEACI). The results of the adapted Change Interview following the intervention reveal changes in the mother's understanding of the importance of play and it's benefits for her child, herself and the relationship between them.

Research Limitations: This is a very small-scale study and although its results are promising, further research studies would need to be carried out to investigate short and longer-term effectiveness of the intervention with this client group.

Conclusions/Implications: As supported by other research studies, filial therapy has much to offer this specific client group. A comparison study with a similar client group within UK would offer further insights and understanding.

## Brett Kyle Gleason, Dr. Heather Dahl and Dr. Wendy Hoskins

#### **Paper**

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I really wish our faculty could practice what they're preaching: perspectives from students on wellness promotion in counsellor education

**Keywords**: Wellness, counsellor education, doctoral students, modelling, self-care.

Aim/Purpose: Counsellors experience multiple stressors, which is linked to a decrease in wellness and has a significant association with counsellor burnout (Lawson, 2007; Puig et al., 2012). Wellness/self-care practices work as protective factors for mental health professionals to help safeguard and minimize stress/burnout (Kramen-Kahn & Hansen, 1998; Stevanovic & Rupert, 2004). However, wellness promotion tends to be glossed over in counsellor education programs.

Design/Methodology: This study sought to explore the lived experiences of doctoral-level counsellor trainees regarding their conceptualization of wellness and related self-care practices and to solicit their recommendations for wellness promotion. A phenomenological approach was used to explore three research questions: (1) what are doctoral-level counsellor trainees' lived wellness experiences; (2) what do participants identify as strengths and barriers to wellness and wellness promotion; and (3) what recommendations, if any, do the individuals describe for wellness promotion? Potential participants were recruited utilizing criterion and maximum variation methods. The 12 participants were individually interviewed for 55:36 minutes on average. To address trustworthiness (i.e., credibility, coherence, sampling adequacy, ethical validation, and substantive validation), researchers employed member checking, triangulation, thick description, reflexive journaling, as well as an audit trail (Hays & Singh, 2012).

**Ethical Approval**: The IRB committee at a South-eastern University in the United States gave approval for this study.

Results/Findings: Three structural themes (i.e., components of wellness, program culture, and recommendations) were identified by the research team. Participants that perceived more faculty support tended to express utilization of self-care practices; however, some viewed faculty support as conditional or negligent. Participants recommended: a) relationships that facilitate individualized wellness/self-care needs of trainees, b) structured opportunities for self-care activity integrated into training, and c) counsellor trainers/supervisors modelling appropriate self-care practice.

Conclusion/Implications: The British Association for Counselling and Psychotherapy (BACP) Ethical Framework for the Counselling Professions (BACP, 2018) posits self-care as essential to ethical practice (see Commitment to Clients, 2.d. and Good Practice, 91.a., b., c., and d.). However, BACP doesn't address wellness expectations in the Trainees sections (See 74-83). By taking student recommendations into account, counsellor educators can help promote wellness in their training programs.

### Suzanne Glover

#### **Paper**

Other Authors: Dr. Maggie Long, Professor. Brian Taylor

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Understanding carer resilience in Duchenne Muscular Dystrophy: the role of emotional intelligence and social support

**Keywords**: Duchenne Muscular Dystrophy, resilience, emotional intelligence, social support, carer.

Aim/Purpose: Caring for a child or adult with Duchenne Muscular Dystrophy (DMD) can result in anxiety, depression and isolation 1-3, yet despite these challenges carers appear resilient 4. This research aims to understand carer resilience in families affected by DMD. Factors influencing resilience have been related to constant care demands and timing of diagnosis 5-6. However, there is little in the literature to explain the emotional and social mechanisms contributing to resilience 7.

Design/Methodology: The mixed-method research was completed in two stages with families affected by DMD participating from across the UK and Ireland. Quantitative data was collected using an online survey distributed by charities\* and a Children's Hospice. Carer demographics and Resilience, Emotional Intelligence (EI) and Social Support validated scales were analysed using SPSS v.24. Qualitative data was collected using 8-semi-structured interviews from a sample of survey of 150 participants. Thematic analysis was applied to interview data and analysed within NVivo v.12.

**Ethical approval:** Granted by the University and a Children's Hospice.

Results/Findings: Carers in this sample display a high level of resilience and EI (n=150). EI contributes to resilience and social support (r=.628, n=150, p=<0.000). However, EI decreases over the progression of the condition (r= -162, n=150, p=<0.48). Preliminary thematic analysis (due completion February 2019) suggests carers experience frustration and fear around the time of diagnosis. Carers live with continuous awareness of the progression of the condition. Acquiring social support is often difficult and lacks mutual understanding of the complexities of DMD. Despite this, carers remain resilient and attribute their strength to their son's determination.

Research Limitations: Despite working with a range of charities from across the UK and Ireland, recruitment was subject to selection bias. The first stage of data collection was weighted towards female carers (f-134 m-16) However, this would be representative of estimated gender distribution for parental aged carers 8.

Conclusions/Implications: Resilience appears to be a fundamental component of caring when living with the daily challenges that DMD brings. Counsellors working with families affected by a life-limiting condition should encourage the growth of El skills as they may be facilitative in the development of resilience and fostering of social support.

<sup>\*</sup> Muscular Dystrophy UK, Action Duchenne, Duchenne UK, Duchenne Family Support Group, Muscular Dystrophy Ireland.

### Ali Graham

#### **Paper**

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Exploring Christian privilege in Northern Ireland: experiences of oppression among people with a non-Christian background

**Keywords**: Privilege, oppression, social justice, counselling, Christianity.

Aim/Purpose: To explore how non-Christian people experience Christian privilege in Northern Ireland (NI). This study is located within a transformative paradigm; a central concern is the advancement of a social justice agenda through cultural reflection and change within the counselling profession.

Design/Methodology: This is a qualitative study focusing on how Christian privilege is experienced by people with a non-Christian background. Five mini focus groups and one individual interview were conducted with participants from Hindu, Jewish, Muslim, non-religious and Pagan backgrounds (total n=15). Data were analysed using Braun and Clarke's (2006; 2013) reflexive form of thematic analysis involving initial codes and semantic theme development focusing on explicit or surface content of data. Issues of power were reflected on and attended to throughout.

Ethical Approval: Obtained from the Research Ethics Committee at the University.

Results/Findings: Analysis of data created one over-arching theme and five themes. The over-arching theme of outsider captured how participants were treated as outsiders from the dominant Christian majority. They were considered aliens who did not belong in Northern Irish society. This over-arching theme was expounded in the related themes: systemic invisibility; different and alienated; treated as an enemy; demeaned, attacked and under threat; attempts to force religious conformity. These themes were subsequently utilised to create a list of Christian privileges for future research, which would explore the experience of religious privilege among counsellors with a Christian background.

Research Limitations: This is a small-scale study and findings cannot be generalised. As a person with a Christian background, the researcher may have been viewed by some participants as an oppressor, creating a reluctance to share information for fear of misrepresentation. The researcher's personal positions of privilege were therefore explicitly recognised and their possible impact on the research discussed.

Conclusions/Implications: To varying degrees, the prevalence of Christian privilege in NI oppresses people with a non-Christian background by positioning them as outsiders. There is a need for counsellors working in the socio-political context of NI to critically engage with the phenomenon of Christian privilege to ensure experiences of marginalisation are not replicated within therapeutic practice.

### James Hempsall OBE

### **Paper**

Professional Role: Director, Hempsall's Institution/Affiliation: University of Leicester

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Personal social media use by UK counselling practitioners and the need for a new policy direction

**Keywords**: Personal, social media, policy, boundaries.

Aim/Purpose: The pace and scale of social media's evolution was unforeseen 25 years ago, and use continues to grow at pace across all ages and groups globally. Whilst counselling practitioners carefully consider their boundaries and self-disclosures, personal social media (PSM) has introduced new challenges through its potential for practitioner and client-initiated frame breaks and out of session contact. Little is known about how counselling practitioners in the U.K. are using PSM. This research sought to identify how counsellors were using PSM, and if there was a need and appetite for a new policy direction.

Design/Methodology: This mixed methods research included a focus group of practitioners, and a focus interview with BACP; followed by a specially developed online self-report questionnaire survey completed by 109 experienced and trainee counselling practitioners working in the U.K. The research was granted ethical approval and supervised by the University.

Results/Findings: The research found that PSM's characteristics sit uncomfortably within traditionally-held concepts of the frame, boundaries and self-disclosure. It found ways in which practitioners were using PSM, and a strong demand this should be allowed to continue through informed individual choice and flexibility. However, practitioners were uncertain about PSM functions, and there was an unmet need for support and training to maintain boundaries practice choices, so practitioners can protect self and clients throughout. Whilst professional codes aimed to support ethical practice, they often fell short of offering practitioners adequate information and advice.

Research Limitations: The research used a snowball sample method through social media communications, which may have disproportionately reached PSM users (92% of the sample). The research asked practitioners for their views; further research could ask clients about their experiences in this area such as contacting, or seeking out information about, their counsellor.

Conclusions/implications: This research concluded a new policy direction is required in the U.K. in the form of seven recommended actions for practitioners, organisations, and national associations. These actions should support practitioners' awareness, capability, behaviours, policy, training, choice, and clinical supervision.

## John Hills

## **Paper**

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Interweaving timelines: longitudinal patterns of change over twelve months of a counselling practice and multi-case research study

**Keywords:** Longitudinal change, case study, psychosomatics, practitioner research, subjectivity.

Aim/Purpose: The project began as a multi-case study of counselling with people who presented with embodied distress (e.g. physical symptom) presentations. The researcher was motivated to learn what change looked like and how it was facilitated, and the methodology was situated within the change process research tradition. However multiple tiers of analysis emerged and were formulated along a series of interweaving timelines: change as experienced by the participants, within an evolving counselling practice, and in the lived experience of the researcher.

Design/Methodology: Five clients who each identified somatic symptoms were recruited to the multi-case study. Sessions were audio recorded and coded for qualitative markers that indicated the emergence of novel self-narratives. Greenberg's Task Analysis provided a framework for discerning patterns, and the emergence of idealised models of change. At the end of each client's therapy they received a case report and were invited to provide their own commentaries.

**Ethical Approval:** Ethical approval was granted by the School of Healthcare's Research Ethics Committee.

Results/findings: Therapeutic change was typified by a shifting sense of self and lifeworld, with corresponding change in embodied experience. Cycles of change were made up of stages including contextualisation of experience, identification with relational patterns, and realisation of agency. Further analysis discerned the intersections on those timelines of the therapist's uses of supervision, dreams, personal therapy and life events.

Research limitations: As a longitudinal analysis of one therapist's practice and the experiences of their clients, the study generates hypotheses rather than formally establishing theory. In a complete Task Analysis, the emergent model would then be tested through empirical trial, but this was beyond the scope of the present investigation.

Conclusions/implications: The client's own language and appraisals of their therapies informed the subsequent hypothesis generation. Findings build upon existing theory about the role of illness narratives, cognitive reappraisal and interpersonal repositioning in facilitating change in embodied experience. The longitudinal model may offer a scaffolding for practitioners working with clients with embodied distress in structuring the therapeutic work. The study also highlights the use of self as instrument in practitioner research. The formalising and making explicit of continually evolving change concepts reflect the theory building work of clinicians in their every-day practice.

## Dr. Trish Hobman

## **Paper**

Other Authors: Professor Anna Madill and Dr Bonnie Meekums

Professional Role: Subject Director/Senior Lecturer Institution/Affiliation: York St John University

Is supervision fit for purpose for experienced counsellors?

Keywords: Supervision, experienced counsellors, career-long, ethics, and professional issues.

Aim/Purpose: This research explores the meaning and impact of supervision for experienced counsellors. BACP considers supervision to be a means of enhancing practice, accountability, and professional gatekeeping (e.g., Davies, 2016). However, to-date there has been very little research evidence to support this position. Supervision for experienced counsellors is an underresearched area. This research seeks to address an important gap in the knowledge base pertaining to supervision.

Design/Methodology: Eight experienced counsellors were recruited. Post-qualification experience ranged from 4-25+ years, all were accredited members or members of BACP. Work settings included: private practice; education; third sector agencies; and GP surgeries. Participants were interviewed twice by the first author with a three-month interval between meetings. Transcripts were analysed using narrative inquiry (Frank, 1995, 2012; Riessman, 2008).

Ethical Approval: University of Leeds.

Results/Findings: Three narrative typologies were developed: Relational; Support; and Careerlong. This research suggests that experienced counsellors attribute meaning and impact in supervision primarily through the relationship they had with their supervisor. A particular type of relationship was articulated, and based on the core conditions: congruence, empathy and unconditional positive regard. If the relationship felt safe, and was based on the core conditions, it appears possible to fulfil the ethical requirements inherent in career-long and mandated supervision. The narrative typologies of Support and Career-long relate to professional and ethical issues. Both typologies articulate stories about the impact on experienced counsellors.

Research Limitations: The size of the sample was relatively small, and participants were all drawn from a similar practice orientation. The first author is an experienced counsellor, from the same practice orientation as the participants, and an accredited member of BACP. In keeping with a narrative inquiry reflexivity was utilised at all stages of the research. Thus, meeting some of the criteria by which qualitative research might be judged as having rigour (e.g., Elliot et al., 1999 & Tracey, 2010).

Conclusions/Implications: Participant narratives, and the literature about supervision, raised questions such as: the efficacy of supervision; power in the supervisory relationship; whether what works for a trainee counsellor is fit for purpose for experienced counsellors.

## Yi Zoë Hou

## **Paper**

**Professional Role**: Psychotherapist

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How effective is an integration of contemporary psychotherapy, Buddhist psychology and meditation as a therapy for anxiety: a Hermeneutic Single Case Efficacy Design (HSCED) study

**Keywords**: Compassion-for-others, self-compassion, mindfulness, Buddhism, contemporary psychotherapy.

Aim/Purpose: Acknowledging the current interest in mindfulness-based approaches, this case study drew on the researcher's background in Eastern Buddhism and aimed to explore the effectiveness of incorporating elements of original Buddhist psychology and practice alongside mindfulness and Contemporary Psychotherapy (CP) in working with anxiety.

Design/Methodology: The study employed Elliott's Hermeneutic Single Case Efficacy Design (HSCED) to investigate whether the client's changes were due to the therapy and what in the therapy caused the changes, by collecting rich qualitative and quantitative case records, including session notes, Personal Questionnaire, Change Interview protocol, CORE-OM, PHQ-9, GAD-7, HAT and the Self-Compassion Scale. An adjudicated analysis process followed, in which affirmative and sceptic analyses and rebuttals were presented and finally adjudicated.

Ethical Approval: Serving as part of the researcher's UKCP registration requirement, this research followed UKCP ethical standards. The researcher's training institute approved the research proposal and its ethical protocols. The study was approved and conducted at a BACP accredited counselling centre in West London, following BACP ethical guidelines for research.

Results/Findings: Results from both the qualitative and the quantitative data strongly supported the effectiveness of the therapy, and all changes in scores were significant, reliable and positive. The HSCED adjudication concluded that both CP and Buddhism-based elements were helpful, and that a specific form of Buddhist compassion-for-others meditation, alongside some psycho-education in Buddhist concepts, seemed to be particularly helpful.

Conclusions/Implications: Without further research, it will be difficult to judge from a single case whether and how much the same approach can be generalized to other clients and presenting issues. Given that the therapist/researcher is a (BACP Accredited) East-Asian (Taiwanese) female with a pan-Chinese and Eastern Buddhism background, it is difficult to assess how much this approach differs from other compassion-based therapies, and whether the same approach would have been equally effective if offered by a Western therapist with no background in Buddhism. Nonetheless, it seems that a few key elements of original Buddhist thought and practice, including compassion-for-others meditation, could be understood and applied by Western therapists without much difficulty and with the potential to make a significant difference in offering effective therapy for anxiety.

## Mr Chris Hudson and Dr. Divine Charura

## **Paper**

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Counsellors' and Psychotherapists' learning expectations and experience of engaging with qualitative research methods and primary research whilst in higher education

**Keywords**: Learning, expectations, research experience.

Aim/Purpose: To explore the range of learning expectations and experience of therapists engaging with qualitative research methods and primary research. The authors are university academics offering BACP accredited courses. Drawing on experience and student feedback it is evident that there is a pressing need to understand research learning needs, expectations and experiences.

**Design/Methodology**: Focus groups, (n=3) of final year BSc and MA Psychotherapy students, were the methods of data collection. Thematic analysis is the chosen method of analysis.

**Ethical Approval**: The research was granted ethical approval by the local research ethics coordinator of Leeds Beckett University School of Health and Community Studies Ethics Board.

Results/Findings: The study identifies student's learning expectations, experiences and knowledge acquisition of engaging with research activity. The themes that emerged were: intrinsic motivation and hunger for academic (as opposed to practice orientated) study; instrumental desire to safeguard one's professional relevance anticipating regulatory changes to the profession; a fear of the mystery of research methodological approaches, language, and processes; an expectation and awareness of the relevance of research in their study but also its link to practice and thus their engagement with it, and; the struggle to transition the gap between research skills acquired and independent application of them. In relation to learning, students identified the centrality of a connected pedagogical and practical approach from the outset of the module, as well as importance of early engagement with their supervisor. The findings can inform the motivations and expectations of qualified therapists interested in research or continuing professional development by engaging in further study and enable academic tutors to develop research module curricula that is informed by participants' voices.

Research limitations: The findings are drawn from a sample that is studying within the same academic institution so are not generalisable. A further limitation is researchers' assumptions as the research module and content is embedded in their department. However respondent validation, which allows participants to read through and offer feedback on the data and analyses enables challenging of any assumptions.

Conclusions/Implications: In identifying themes from therapists' learning experiences of engaging with research the implication is that it enables self-critical exploration of current practice and higher education by those designing, delivering or supervising qualitative research methods and primary research.

# Christopher Keech

## **Paper**

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Male survivors' experiences of psychological support following domestic violence: client insights from NHS and Third Sector provision

**Keywords**: Domestic violence, counselling client needs, male victims, counselling service provision.

Aim/Purpose: To investigate the experiences of male survivors of domestic violence when accessing counselling services.

Design/Methodology: A social media campaign was used to recruit 9 men from England, Wales and Northern Ireland who had accessed counselling after surviving domestic violence. Participants confirmed they had completed counselling at least 3 months prior and had access to psychological support services post-interview if required. Two researchers, one male and one female, conducted the interviews with interviewers allocated based on any participant expressed gender preference. Semi-structured interviews lasting no more than 90 minutes were recorded and transcribed. All data was held in a password protected area on the University network. The transcribed data was coded separately by the two researchers, who then then systematically compared and discussed the transcripts, agreeing a coding for each item to produce a final coded transcript for each participant. This reduced the chances of interviewer bias in coding. The resultant data was analysed using thematic analysis, producing themes representative of the participants' experiences as described in the transcript. These findings were shared with participants who wished to review and discuss the results with the interviewers to confirm they reflected participant experiences.

Ethical Approval: Ethical approval was given by the University of Sunderland.

Results/Findings: The findings showed that men generally had trouble identifying support that met their needs. They often tried several sources of psychological support and more than one counsellor or agency before finding a counsellor with whom they could form a therapeutic relationship. Men's experience of the counselling received through the third sector organisations was mostly positive, in contrast to their experiences of NHS services. Several organisational and structural issues were identified, providing an understanding of which aspects of service provision were helpful or unhelpful.

**Research Limitations**: The small number of participants means the research does not provide a fully generalizable evaluation of the types of provision mentioned.

Conclusions/Implications: This study highlights aspects of service provision such as physical environment, appointment pattern and ethos that could be improved to meet the needs of male survivors of domestic violence.

# Vicki Kirby

## **Paper**

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"I could not say it at all." The challenge of working with unspoken erotic feelings in the therapy room: an interpretative phenomenological analysis

**Keywords**: Erotic transference, therapeutic relationship, sexual/loving feelings, IPA.

Aim/Purpose: This research sought to understand therapists' experiences of working with erotic transference, to inform training and supervisory practices. Using a relational psychotherapy framework, it explored how participants worked with erotic transference in the here-and-now, and how they made sense of the impact of their own needs and characteristics.

Design/Methodology: This qualitative research used an interpretivist, relativist paradigm. Participants' experiences were explored in-depth, including how they constructed personal meaning from these. 6 semi-structured interviews were conducted with qualified therapists and an interpretative phonological analysis undertaken.

Ethical Approval: The work was signed off by the University of Greenwich Ethics Committee.

#### Results/Findings:

*Master Theme: The Unspoken and Unexplored;* Therapists avoided here-and-now explorations of erotic feelings.

Embodied erotic transference: clients embodied, rather than verbalised, erotic feelings. Power dynamics; clients (unconsciously) tried to assert power; Therapists lost sight of their own 'power'; Power dynamics not explored.

Therapist's emotional responses: Included physical attraction, personal/professional pride, enjoyment of feeling wanted, feeling deskilled, ashamed, embarrassed; Triggered and reflected therapists' personal needs and vulnerabilities.

*Master Theme: Wanting more:* Clients pushed boundaries; *Real* and *transference* relationships co-existed/merged.

Physical and sexual: Mutual physical attraction, confusion as to real/transference; Clients flirted, attempted seduction, asked personal questions; Triggered shame in therapists. *My only friend:* Clients described therapists as their 'only friend'; Therapists felt warmth and emotional connection, as in a *real* relationship.

Research Limitations: Due to the small sample the findings cannot be generalised to a wider population. The topic was sensitive, and interviews conducted face-to-face, which could have inhibited responses. Despite the diverse participant sample, there was no scope to explore how gender, sexuality or theoretical orientation/training impacted experiences of erotic transference.

Conclusions/Implications: In order to close the gulf between therapists theoretical understanding of erotic transference, and their ability to address it in the here-and-now when primal feeling have been evoked, core training, CDP and supervisory spaces could provide a space for therapists to share, and reflect on, the primal and erotic feelings which emerge within co-created therapeutic relationships, and how these result from the needs and internal conflicts of therapist and client. Such conversations should actively seek to challenge the taboo and shame around erotic feelings.

## Faith Liao

## **Paper**

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Evaluating the person-centred therapeutic relationship competence acquisition for mental health professionals in Taiwan

**Keywords**: Person-centred approach, therapeutic relationship, new technology, quasi-experiment, mental health professionals.

Aim/Purpose: This study aimed to evaluate the effectiveness of a 3-day training on the person-centred therapeutic relationship competence in psychiatric staff and explore the Taiwanese mental health professionals' learning using the person-centred-theory-designed technology mPath.

Design/Methodology: A mixed-method study consisted of a quasi-experiment and interview. A sample of 59 mental health professionals (mean age=24.22, experimental group N=26, control group N=33) from 7 medical schools in Taiwan studying in nursing, occupational therapy, medicine and clinical psychology scored B-L RI:MC Form OS-40 before (T1), at the end of (T2) and two weeks after (T3) the intervention. Mean values and statistical significance tests were computed to compare the results. The de-identified interview transcripts were independently coded into themes, and the categories of the emergent data were refined through thematic analysis.

Ethical Approval: The research ethics was approved by the University of Nottingham.

Results/Findings: The experimental group showed a statistically significant level of competence change (Mean difference= +9.5, P=0.002) at T2 whereas the control group received an insignificant change (N=33, Mean difference= +0.18, P=0.683). An effecting growth curve of the competence in the experimental group continually inclined (Mean difference= +19.423, P=0.000) at T3 while the control group reflected a decline in the competence (Mean difference= -0.515, P=0.812). The central theme "beyond medical knowledge and clinical skills" highlighted the latent factors of acquiring the person-centred therapeutic relationship competence in psychiatric staff: A. redefining therapeutic relationship, B. transferring theory into practice, C. awareness arising through mPath and D. self-growth.

**Research Limitation**: The unequal distribution of the characteristics of the target population could be refined, and the number of mental health professionals' specialty could be recruited equally.

Conclusion/Implications: A person-centred-theory-based workshop with the use of mPath technology supported the initial growth of the person-centred therapeutic relationship competence in the participants. This study provides an evidence-based report on the application of person-centred counselling skills and the integration of learning technology in the psychiatric context enhancing the therapeutic relationship competence for mental health professionals. Cross-disciplinary studies between the implementation of the person-centred approach and medical education are recommended in future.

# Sally Lumsdaine and Zoe Powell Martin

## **Paper**

Other Authors: Zoe Powell-Martin, Julia McLeod, Jennifer Scally and Kate Smith

Professional Role: Teaching Fellow Institute/Affiliation: Abertay University

Analysis of counselling student employment destinations: using action research to enhance the counselling curriculum and improve employability

**Keywords**: Counselling trajectories, employability, training, action research.

Aims/Purpose: This study tracked student employment destinations and explored perceptions around employability and the benefits offered by the existing counselling curriculum. The aim of the study was to enhance the Abertay University postgraduate counselling programme; maintain links with former students who work within the target industry and develop CPD aimed at this group.

Design/Methodology: Information was gathered from student registry and 401 graduates, for whom current emails were known, were contacted and invited to complete an on-line questionnaire about their career trajectory and the relevance and benefit of aspects of the post-graduate curriculum. Participant response rate was high with just under 50% of those contacted responding. Responses (192) were analysed and Student trajectories were tracked. The links between course content and benefits to employability were explored.

Ethical Approval: Ethical approval was granted by Abertay Research Ethics Committee.

Results/Findings: The results demonstrated the breadth and depth of employment undertaken following graduation. Just over 90% of respondents continued to use the skills and knowledge gained either by working as a counsellor or by using embedded counselling skills within their work. The majority of those working as counsellors did this voluntarily with only a small number (23.37%) being paid for the counselling they do. Despite this, however a high percentage of respondents (77.78%) believed that the course(s) studied enhanced employability with an even higher number (91.62%) feeling that studying counselling helped them in their working life in general. Interestingly nearly 92% of respondents indicated that the skills and knowledge gained also helped them in their day-to-day life.

Research Limitations: The questionnaire was disseminated by a senior and well-respected member of staff. The personal nature of this initial contact may have impacted willingness to respond in a negative way, equally only those that had a positive experience on the course may have responded thereby potentially skewing the findings of this research project.

Conclusion/Implications: The findings of this project suggest that the current course does prepare students for employment however further investigation is needed to understand where and how the skills and knowledge gained at university have transferred into the workplace and beyond.

# Julie May

## **Paper**

Other Authors: Academic Supervisors Prof Diane Waller and Prof Nigel Sherriff

Professional Role: Counsellor, Psychotherapist and Supervisor

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What factors influence a client's choice of counsellor/psychotherapist in a private practice setting and the implications for the profession's regulatory status

**Keywords**: Private practice, choice factors, statutory regulation, counselling, psychotherapy.

Aim/Purpose: This study considered how a client chooses a psychotherapist/counsellor working in private practice. It emerged from a desire to know whether clients made informed choices, which factors influenced their selection and the extent to which they were aware of the regulatory status of the profession.

Design/Methodology: 22 participants consisting of ten psychotherapist/counsellors, ten clients and two other professionals were interviewed using semi-structured interviews. This qualitative study was underpinned by pragmatism, and data was analysed using thematic analysis.

Ethical Approval: Faculty of Health and Social Science Research Governance Committee.

Results/Findings: The primary selection factor was recommendation, and where this option was either absent or undesired, selection was made based on internet searching using location, experience of the presenting issues and the perceived ability to relate to the client. Clients assessed these factors using the photograph and rhetoric on the therapist's website or directory entry, as well as during the first face-to-face meeting, largely relying upon unconscious projection and 'gut instinct'. Factors of limited importance in the selection process included qualifications, professional standing and modality. There was an assumption that the profession was already statutorily regulated and that these factors would be obligatorily in situ, before a therapist could practise privately.

Research Limitations: This was a small-scale study and the results cannot be generalised across the profession, or the opinions of participants said to represent the public. The qualitative research process cannot be considered impartial and is influenced by author bias.

Conclusions/Implications: Factors affecting client choice did not include validation of the counsellor/psychotherapist's professional standing or credibility. Together with a lack of information for both clients and recommenders, unprotected titles and an absence of minimum education standards for the profession, the study highlighted an increased risk for exploitation affecting private practice clients. Recommendations included an increase in public education, urgent debate within the profession of the issues highlighted and support for statutory regulation.

## Julia McLeod

## **Paper**

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Integrating deliberate practice into a counsellor training programme

**Keywords**: Counselling skills, deliberate practice, pluralistic therapy, training.

Aim/Purpose: The concept of 'deliberate practice' draws on research into excellence and expertise in sport, medicine and other fields. It comprises a step-by-step model for reflecting on practice, identifying learning goals, formulating a learning plan, and engaging in repetitive rehearsal of relevant skills. At the present time, little is known about the process through which either experienced clinicians or counselling trainees engage in deliberate practice. The present comprises an exploratory and descriptive investigation of the use of deliberate practice in students on the Abertay MSc Counselling programme, which offers training in pluralistic counselling.

Design/Methodology: Students were provided with training a deliberate practice framework for organising their learning of counselling skills. Data were collected through deliberate practice logs in which participants recorded information about the focus, duration and process of each learning episode. Participant experiences of engaging in deliberate practice were explored in focus group interviews.

**Ethical Approval:** Obtained from the Research Ethics Committee, School of Social and Health Sciences, Abertay University.

Results/Findings: Students found deliberate practice both challenging and rewarding and described a range of patterns of engagement with the approach.

Research limitations: The findings refer to the experiences of students receiving training in a model of counselling that is consistent with deliberate practice theory. Data were not collected on the links between engagement in deliberate practice and competence in work with clients. Longitudinal research is required to determine the extent to which students would continue to use a deliberate practice framework for supporting professional development over the course of their subsequent careers.

Conclusions/Implications: The findings of this study suggest that deliberate practice framework for competence development is acceptable to students and provides a valuable structure for organising their learning around the use of practical counselling skills. Further research is required to evaluate the relative effectiveness of different types of learning activity within a deliberate practice model, and the relevance of deliberate practice within training in other therapeutic approaches.

## **Andrew McMurray**

## **Paper**

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Potentials of working online for therapeutic relationships from the perspectives of face-to-face counsellors

Keywords: Counselling, relationships, online.

Aim/Purpose: Research literature indicates concerns about online counselling from face-to-face practitioners. Limited research exists suggesting there is unique potential in developing therapeutic relationships online. The aim of this research was to explore the difficulties and opportunities in developing therapeutic relationships online and face-to-face from the counsellors' perspectives.

**Design/Methodology**: This was an Interpretative Phenomenological Analysis (IPA) study with interviews among six counsellors (5 females and 1 male) currently practicing in a face-to-face modality. The counsellors were recruited from voluntary agencies.

**Ethical approval**: Ethical approval was obtained from the risk ethics committee, of the relevant school at the university.

Results/Findings: Five superordinate themes were found: 1. Face-to-face relationships are unique and valuable; 2. Online counselling relationships: potentially unsafe unknowns; 3. Online widens relationship access; 4. Online assists the relational continuity, and 5. Working online challenges existing skills.

Counsellors perceived several difficulties and opportunities in developing therapeutic relationships online and face-to-face. They viewed working face-to-face as affording the most valuable opportunities for developing therapeutic relationships of authentic depth, through effective early engagement, safety and time. Difficulties in developing relationships were often viewed as clients not being ready. A lack of continuity in counsellor, disrupting early client experiences was also a difficulty face-to-face. The primary perceived opportunity of working online was as enabling access to counselling and subsequent transitioning into a face-to-face relationship, particularly for young and distressed clients. Counsellors viewed the absence of a mutually experienced safe place and text-only communication, as difficulties online. However, they viewed a move to working face-to-face from online as manageable.

Research Limitations: The research is from the counsellors' perspectives that currently do not work online. They worked mainly in voluntary agencies and were predominantly female and person-centred. The researcher's own positive predisposition to the concept of authentic online counselling was inevitably part of the research process.

Conclusions and implications: A conceptual and practice distance was evident between existing online services and face-to-face counselling. However, counsellors were open to the potential of online counselling to extend an early response to distressed individuals, thus widening access, with the possible transition into face-to-face counselling.

## Naomi Moller

## **Paper**

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Perceptions of mental health and individuals with mental health issues in a work context

**Keywords**: Work-place, mental health, qualitative.

Aim/Purpose: Increasing numbers of people struggle with mental health issues in western industrial nations. Both in the UK and Germany, about a quarter of the population will experience mental health problems, with anxiety and depression being the most prevalent. In neoliberal cultures, individuals are often positioned as responsible for their health, including their psychological wellbeing. This is evidenced - in part - by the proliferation of resilience, stress management, mindfulness, etc. courses offered by health centres as well as employers, which focus on teaching individuals how to cope with mental health issues, disregarding potential social, cultural and environmental causes for psychological distress.

Design/Methodology: Considering this, we explored how this individualising of mental health plays out in the context of the work place, in particular in the discourses drawn on in narratives about colleagues who experience psychological illness or distress. We are collecting data using the method of story completion tasks (Braun, Clarke, Hayfield, Moller & Tischner, 2018), asking participants to complete the following story stem, with half of participants receiving the stem with a female and half with a male protagonist: 'Michael/a returns to work after 3 weeks off. In the meantime, word has got around that s/he hasn't been on annual leave but signed off sick with mental health issues. Please continue Michael/a's story.' Participants were individuals working in either Germany or the UK, who completed the task online, via an online survey platform.

**Ethical Approval**: Ethical approval for the project was granted by both the universities of the researchers.

**Results/Findings**: The data collection is ongoing. Results will be analysed using thematic analysis in time for presentation at conference.

Research Limitations: The nature of story completion data is debated and while the method has a number of advantages - in particular for research on sensitive topics such as mental health - it is still a newer way to collect data for qualitative analysis.

**Conclusions/Implications:** The findings will shed light on social perceptions about individuals with mental health issues in the workplace.

# **Brendan Murphy**

## **Paper**

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Having lived sober - a developmental perspective of recovery: literature review

**Keywords:** Recovery messages, self-help groups, Alcoholics Anonymous, lifetime recovery.

Aim/Purpose: To critique the research literature on how members of substance dependence self-help groups assimilate, develop and apply their interpretation of recovery messages, at different progressive decades of membership, into a lifetime of sobriety.

Design/Methodology: A narrative literature review was conducted using a systematic approach following PRISMA guidelines. Search strings derived from keywords and derivations of "Recovery Messages"; "Self-help Groups"; "Alcoholics Anonymous" and "Lifetime Recovery". Databases searched were Medline, PsycINFO, Embase, CINAHL Plus, Web of Science, Cochrane Reviews, ASSIA, Social Care Online, Social Services Abstracts and Google Scholar (first 15 pages). 82 articles were retrieved, and four themes were identified.

Results/Findings: Theme 1. Recovery from alcohol abuse: While up to 78% of alcohol dependent individuals (ADIs) recover without help, 60% experience relapse. Significant cognitive malfunctioning continues for up to one-year post alcohol cessation possibly explaining why post detoxification gains made by treatment programmes tend to be short lived. Alexithymia may also affect the ability to assimilate treatment. Stigmatization and exclusion remain prevalent worldwide. 2. Definitions: While there are no scientific definitions of dependence/addiction or recovery, recent worldwide studies are beginning to explore underlying causes, time frames and beneficial outcomes of new interpretations. 3. Mutual Help Groups (MHG's): While playing significant roles, most MHGs lack substantiating literature. 4. Research on Alcoholics Anonymous (AA), the largest and most enduring of the MHGs, depicts AA from its original perceived suitability, efficacy and effectiveness for ADIs; evolving perceptions of the adequacy of current 'doses' of the programme; broader conceptualizations of what recovery entails; the mechanisms of change including the social networks roles of fellowship/sponsorships; and outcomes of its twelve promised changes.

**Research Limitations**: This systemized narrative literature review was limited to material available in English only.

Conclusion/Implications: Members of substance dependence groups develop their interpretation of their recovery messages into a lifetime of sobriety by listening to how others have coped with experiencing life changing traumas and events. Their interpretations may be enhanced, broadened and developed in this way. Therapists need to take cognisance of early recovery cognitive impairment and their clients' need to adopt developmental lifetime coping skills.

# **David Murphy**

## **Paper**

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Professional Role: Associate Professor

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An evaluation of the effectiveness and acceptability of a new technology system to support psychotherapy helping skills training

**Keywords**: New technology, psychotherapy, skills development.

Aim/Purpose: The aim of this research was to test the effectiveness and acceptability of a counselling skills course that integrated a new online technology system to support students development of competences.

Design/Methodology: We used a mixed methods design. The sample for analysis is N=72 (13=male, 59=female) of master's level counselling students participating in two first year modules for skills development. Three independent groups were tested for between-groups differences on skills development over a 22 weeks period. Group 1 received skills practice only and did not have access to the new software, Group 2 had skills training plus unguided access to the software and Group 3 had skills training plus guided access to software. The outcomes were counselling competency as assessed using the PCEPs Training Version A.

**Ethical Approval:** The research ethics was approved by the University of Nottingham.

Results/Findings: One-way ANOVA showed that scores on PCEPS at the end of the skills training modules statistically significantly differed between groups (F = 5.21, p < .01). Post hoc tests using Tukey-HSD showed the mean differences were statistically significantly higher in Group 3 compared to the Group 1 (2.95, p < .05) and Group 2 (3.27, p < .05) but the mean differences between Group 1 and 2 were not statistically significant different. Qualitative interviews were conducted and analysed. Findings reported that the new software was acceptable to trainees and extended opportunities for reflecting on practice sessions. The integration of demonstration samples supported the development of new skills. There were some user interface difficulties in learning the new system.

Research Limitations: The research is limited because there was no baseline measure for the three groups suggesting that the effects may be attributable to differences within the subjects prior counselling skills.

Conclusions/Implications: The research suggests that new technology systems can be integrated into skills modules. Using the internet for the support of skills development can extend opportunities for practice-based reflections. Using a web-based system opens the doors to international collaboration on skills development that might make counselling training accessible in countries where it is currently difficult to access. The software system also has scope for wider use in professional development of experienced therapists, research and process analysis of counselling/psychotherapy sessions.

# Jo Naylor

## **Paper**

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What is the lived experience of birth mothers who have had their child removed into care and their experience of counselling at the Repeat Removal Project?

**Keywords**: Birth mothers, children, care proceedings, counselling, traumatic stress.

Aim/Purpose: This study focuses on the lived experience of women who have experienced the removal of their children into care, the effect of this on their relationships with family and friends, and the impact of counselling at the Repeat Removals Project run by a local women's counselling service and Home-Start. Birth mothers experiencing child removal into care are a hard-to-access population; as such little research, has focused on the rehabilitation involving counselling of these mothers, making this an important study.

Design/Methodology: This study uses Interpretive Phenomenological Analysis (IPA) (Smith and Osborn 2008) allowing a rich analysis of how mothers make meaning of their experiences, by using semi-structured interviews of three participants from the collaborative project.

**Ethical Approval**: Granted by the School of Healthcare Research Ethics Committee, University of Leeds.

Results/Findings: The findings show: adverse childhood experiences, domestic violence, removal of their children, and adversarial child protection processes all contribute to the mothers' traumatic stress. Not only are relationships with family and friends adversely affected, mothers also experience a threatened identity. Counselling at the collaborative project was valuable to participants in increasing self-esteem, improving relationships with others and enabling mothers to make healthy lifestyle choices.

Research Limitations: Findings of the study are limited to the participants and cannot be generalised. Participants description of their experience is subjective, dependent on their ability to accurately express thoughts and feelings. Participants counselling experience may not be representative of all counselees at the project.

Conclusions/Implications: The main conclusions are: a) there seems to be a general lack of support for vulnerable and at-risk families to prevent the escalation of problems leading to the removal of children, and b) lack of timely access to counselling. The study shows that counselling has a beneficial effect on the lived experience of the mothers following the removal of their children. This dissertation recommends greater availability of counselling in the community to reach this hard-to-access population and further research in this area.

## Paul Nicholson

## **Paper**

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Evaluation of a counselling service embedded within a wider alcohol and drug rehabilitation service for homeless and vulnerable adults in Leeds, West Yorkshire

Keywords: Counselling evaluation, addiction homelessness, counselling.

Aims/Purpose: The project was initiated in consultation with service users. As part of evaluating a pilot counselling service within an organization that supports homeless men impacted by addiction. The aim of the research was to explore the experience of these clients of the counselling and therapeutic relationship. Funding for the project was secured through the Leeds Community Foundation's Leeds Fund Strategic Grants for Mental Health.

Design/Methodology: The research undertaken combined qualitative analysis of individual semistructured interviews with clients about their experience of the counselling received, together with quantitative analysis of the Clinical Outcomes in Routine Evaluation (CORE-18) psychometric tool which clients accessing the service had completed throughout their counselling journey and lastly upon completion of counselling. Structured interviews took place and analysis was conducted using Interpretative Phenomenological Analysis (IPA). Data analysed was drawn from 12 clients who attended between two and over twenty counselling sessions.

**Ethical Approval**: The research was granted ethical approval by the Leeds Beckett University Local research Ethics Coordinator within the School of Health and Community Studies.

Results/Findings: The findings drawing from the voices of the participants highlighted:

- Results and evidence base, as identified by CORE-18, demonstrate reliable and positive change in the participants' well-being.
- Voices of strong appreciation of help offered by those accessing the service and in particular on the impact of counselling and wider interventions offered to this service user group.
- Further insight and understanding of benefit of counselling in helping individuals presenting with complex, multi-layered challenges.
- Recognition of the time needed to engage and complete counselling process.

Research Limitations: As this was a pilot counselling service and a limitation is that there was 1 therapist working with the clients. The researchers however were not involved in the therapeutic interventions.

Conclusions/Implications: The evaluation of the project examined clients' experiences of engaging with the counselling service provided to understand the development of the therapeutic relationship and the impact of counselling on clients. Results will provide practitioners and policymakers with the efficacy of counselling evidence to help inform commissioning decisions and service provision for individuals presenting with homelessness, substance misuse and social isolation.

# Asli Ascioglu Onal

## **Paper**

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Why I am here: the initial experiences and expectations of first year counselling students

**Keywords**: Counselling, psychotherapy, group alliance, counselling trainees.

Aim/Purpose: The early efforts of building rapport form the fundamentals of a supportive learning atmosphere and may function as a preventive factor for managing students' unrealistic expectations in relationships with their tutors and peers. We aimed to explore the initial experiences and expectations of first-year MA students in counselling and psychotherapy.

Design/Methodology: Eighteen MA students participated in the study. The empty chair (psychodramatic method) was used to encourage students to reflect on the reasons for enrolling for the MA, qualities supporting the ability to be a good counsellor and what could make it challenging. Data were transcribed and analysed thematically.

Ethical Approval: The study was approved by the university ethics committee.

Results/findings: Counselling students generally tend to see themselves, their peers and staff as the core influence mechanisms shaping their initial experiences and expectations. Participants expressed their excitement and anxiety relating to starting the course. Our findings suggest that the new beginnings, new people, new environment, fear of failure and changes in living conditions, can negatively affect students' moods or abilities to adapt to changes. Thus, fears were not only related to the training environment but were positively associated with external circumstances and different identities of students.

**Research Limitations**: The study was conducted with only one specific programme's students and influenced by the interventions of the tutors which will have had an impact on the results.

Conclusions/Implications: Giving students a voice might help trainers to understand the personal difficulties and expectations of their students and enable the peer group process, with respect to them articulating their fears and needs of themselves and each other. Counsellor trainers may organise some exercises to discuss similarities and differences between the therapeutic and learning contracts and encourage students to shape their own reflective group contract based on their personal needs and expectations.

## Sheila O'Sullivan

## **Paper**

Professional Role: Integrative psychotherapist, Clinical supervisor, <u>U</u>niversity Lecturer

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An exploration of how childlessness and the decision whether or not to become a parent is understood by psychoanalytic practitioners

**Keywords**: Voluntary childlessness, pronatalism, psychoanalytic practitioners, developmental stage, pronatalism.

Aim/Purpose: The primary aim of this paper is to explore how psychoanalysts and psychoanalytic psychotherapists understand, conceptualise and respond to voluntary childlessness (VC) in the clinical setting.

Design/Methodology: Four psychoanalytical practitioners were interviewed using Interpretative phenomenological analysis. In line with the IPA approach a semi-structured interview and analysis proceeded on a case-by-case basis and the emerging themes led to an initial Master Table of Themes and these were refined during the writing process.

**Ethical Approval**: Gained approval on the 7/11/11 for this research from Ethics Committee at the Centre of Psychoanalytic Studies, University of Essex.

Results/findings: The first finding highlighted the biopsychosocial pressures that the participants felt their patients experienced. Some participants spoke of the professional pressure they experienced from within the psychoanalytic field as a result of the theory that links motherhood and femininity. In the second finding the participants described how they understood why some of their patients chose to be VC. These included VC choices being made on basis of a genetic condition or the patients' childhood did not adequately equip them to become a parent. They also described some patients who were concerned that a mental illness precluded them from having a child or they felt themselves too immature to parent. The final finding highlighted that working with childless patients was both complex and conflictual. The practitioners discussed both their personal professional responses to childlessness in general.

Research Limitations: The limitations of the research are that there are only four participants all of whom are women over 50 living in the South of England. My research may have produced different contributions to knowledge had I interviewed younger female psychoanalytic practitioners. The inclusion of a male participant might have given different results.

Conclusions/Implications: This research highlighted the complexity of childlessness in its different manifestations and suggested that participants were influenced by the competing cultural discourses in society. It is very likely that psychotherapists and counsellors will be equally affected by these messages. It would seem highly pertinent that psychotherapy and psychoanalytic training institutions encourage an open reflection regarding theory that typically views parenthood as normative.

# Caroline Riley

## **Paper**

Professional Role: Freelance Counsellor

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What are the influences on the personal and professional development of person-centred experiential therapists in their first-year post-qualification?

Keywords: Counsellor development, agency, freedom from training.

Aim/Purpose: The last two decades have seen an increasing interest in better understanding how counsellors develop and what positively influences their professional growth (Rønnestad & Skovholt, 2003; Orlinsky & Rønnestad, 2005; Carlsson, Norberg, Sandell & Schubert, 2011). However, there is currently limited research on this topic from a UK perspective. This study's aim was to gain in-depth knowledge about what influenced changes in the early development of UK person-centred experiential counsellors during the year after qualifying from a Postgraduate Diploma in Person-Centred counselling. The year is viewed a critical 'bridge' in the transition from trainee to becoming a competent counsellor.

**Design/Methodology**: In total six participants, graduates from two UK universities, participated in individual semi-structured interviews. Data was analysed using grounded theory and organised into hierarchically structured categories and subcategories.

**Ethical Approval**: The study was granted ethical approval by the School Ethics Committee in the School of Psychological Sciences and Health, University of Strathclyde.

Results/Findings: The central finding that emerged from the data was that initial growth in counsellor development occurs in a dynamic interplay between agency (i.e. taking responsibility for own development and learning) and the freedom experienced from finishing initial training. Furthermore, the study found that the combination of personal life stress and failure to secure paid employment had a negative influence on counsellor development.

Research Limitations: This qualitative study was a small sample and, clearly, is not representative of wider experiences of newly qualified person-centred counsellors. A further limitation to the study is that, inevitably, it will have attracted participants who wanted to talk about their experiences. Participants who were not willing to talk may have agreed to a filling in a questionnaire and thereby providing data which may have contributed to a broader understanding of counsellor development.

Conclusions/Implications: This research project adds to the current limited literature on counsellor development in the UK, particularly in the first post-qualification year and from a person-centred experiential perspective. The findings have implications for how counselling students are prepared for leaving their training courses and for the role of supervisors of counsellors in their first year after graduation.

## Jeannette Roddy

## **Paper**

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Working with survivors of domestic violence: addressing the needs of male and female counselling clients in the UK

**Keywords**: Domestic violence, counselling client needs, male victims, counselling service provision.

Aim/Purpose: The purpose of the research was to determine, from a client perspective, what was helpful or unhelpful when accessing counselling after experiencing domestic violence and whether there were any gender differences in participant experiences.

Design/Methodology: This paper brings together two different research studies. The first study was part of the first author's PhD and recruited 14 female participants via three domestic violence agencies in the north east of England. The second study was a post-doctoral project and recruited 9 male participants via a social media campaign from England, Wales and Northern Ireland. Participants confirmed that they had access to therapeutic services should they be required prior to participating. Both studies used the same semi-structured qualitative interview schedule. The first study used an adapted grounded theory analysis. The second study was analysed using thematic analysis as, due to funding limitations, as there was insufficient time to conduct the analysis and reflection between interviews required for grounded theory. The findings were reviewed with participants who volunteered to provide further feedback.

**Ethical Approval**: Ethical approval was given by York St John University for the first study and the University of Sunderland for the second.

Results/Findings: In line with other research on the therapeutic process, both men and women valued the therapeutic relationship, in particular the acceptance, warmth and understanding of the therapist. Women found accessing therapy through their local DV agency relatively easy, whereas men struggled to access to counselling, with financial and cultural barriers identified. Whilst women seemed to value the opportunity to explore their lives more widely, the men suggested a preference for a more focused approach and valued signposted resources for work between sessions. Identified differences relating to counselling context and gender are discussed.

**Research Limitations**: As these are two small, qualitative research studies, they provide insight into the experiences of this client group but are not generalizable.

Conclusions/Implications: Men and women appear to have slightly different expectations and needs when accessing counselling following domestic violence. Service providers and practitioners offering counselling to both male and female victims may find it useful to consider whether their counselling provision meets the needs of both.

## **Davina Sacks**

## **Paper**

Professional Role: Mental Health Employment Specialist, Leeds Mind, Volunteer Counsellor

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Exploring the countertransferential impact of my primary attachment and developmental experiences on my psychotherapeutic work with clients. From emotionally unavailable relationships to an emotionally receptive profession

**Keywords**: Autoethnography, countertransference, attachment experiences, relational, personal enquiry.

Aim/Purpose: This grounded theory autoethnography is a process of subjective personal enquiry. It investigates the impact of the researcher's primary attachments and developmental experiences on her psychotherapeutic work with clients, through understanding specific countertransference interactions.

Design/Methodology: Data analysis was performed using grounded theory of samples from personal reflective journals, resulting in eight core themes representing the researcher's psychological issues. These themes are compared with specific client interactions which the researcher found most challenging in her psychotherapeutic work. Using an exploration of psychodynamic and Jungian theory, clear patterns emerged and were integrated as findings within a narrative analysis.

**Ethical Approval**: Ethical approval has been given by the School of Healthcare Research Ethics Committee within the researcher's university.

Results/Findings: The findings present a theory over why the researcher was unable to remain relational to her clients, and what it was about the researcher specifically that meant she was hooked into these instances of countertransference. This paper explores ways for the researcher to develop from these challenges and remain relational to her clients to revise and improve her professional and ethical capabilities as a practitioner.

Research Limitations: Since the autoethnographic nature of the project requires the findings to be specific to the researcher, this research is unable to provide empirical results. The project emphasises a responsibility of the practitioner rather than an exploration of the client's processes. The value of this project is the process of subjective personal enquiry. The transparent methodology contributes to the reliability and validity of the paper.

Conclusions/Implications: This study presents a struggle between the authentic self and the academic self of the researcher, reflecting the tension of the psychotherapeutic profession as a whole. The findings illustrate the requirement for the implementation of ongoing self-reflection and exploration in effort to integrate and find harmony, leading to a secure ethical basis for working psychotherapeutically with clients.

# Hope Schuermann

## **Paper**

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Post police shooting trauma: breaking down intersecting traumas following the shooting of Michael Brown in Ferguson, MO

Keywords: Trauma, community trauma, qualitative research.

Aim/Purpose: This research explored the phenomenon of the community climate in Ferguson, Missouri after the police shooting death of Michael Brown, an unarmed Black man. Following the shooting, many people suffered from intersecting traumas, including historical, racial, and community trauma; and re-traumatization from the 24-hour news cycle.

Design/Methodology: A phenomenological approach was used to interview participants across multiple domains, including trauma. Multicultural and Social Justice Competencies were used to build the interview protocol. Participants were 35 participants, including community leaders, protesters, educators, media, police, and pastors. Classic content analysis was used to identify themes.

**Ethical Approval**: This study was approved by the Institutional Review Board at the lead researcher's university.

Results/Findings: Several themes related to trauma emerged through the interviews. These included historical trauma, backed by information about how the city is designed to isolate the Black community living in Ferguson; community trauma, the collective experience of seeing Mr. Brown's body laying uncovered for hours and the fear that this event could happen to anyone in the community; racial trauma, developed through decades of the community targeted by government and police entities due to the color of their skin, and media-related trauma, due to the 24 hour news cycle. These themes will be discussed and examples from interviews given.

Research Limitations: As this was a quantitative study, it captures the experience of some of the community after a traumatic event. Findings cannot be generalized to other communities, even under similar circumstances. The results do, however, give counselors an idea of what types of trauma to consider when treating community members affected by a violent incident. In addition, future research can focus in on treatment intervention to use with clients dealing with intersecting types of trauma.

Conclusions/Implications: This paper will provide an overview of research on intersecting traumas following a violent shooting death, community unrest, and a city's reconciliation process. Researchers and clinicians will learn the importance of building relationship in communities they research, applying a multicultural lens to qualitative research, and learning to apply research findings to fill the research-practitioner gap.

# Susan Scupham

## **Paper**

**Professional Role:** Psychotherapist

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Life after suicide: psychotherapists and allied professionals speak about their experiences of working with suicidal clients and the impact it has on them if their client dies

**Keywords**: Mixed methods, thematic analysis, narrative analysis, suicide, counsellors/psychotherapists.

Aim/Purpose: Research indicates the suicide of a client is the greatest fear practitioners' experience. In light of this the study examines the impact of working with suicidal clients on the practitioner in order to prepare and support them in their clinical work.

Design/Methodology: The convenience sample was gathered from practitioners responding to an advert in Therapy Today and an email invitation. The study used a mixed method approach to examine practitioners' experiences. The first phase of the research was a quantitative survey in which practitioners' (n = 110) provided information on their experiences of working with suicidal clients. The second phase of the study was qualitative and explored via interviews the effects of client suicide on practitioners (n = 16). A narrative and thematic analysis approach was used to analyse the interview transcripts.

**Ethical Approval**: Metanoia Institute/Middlesex University/Berkshire Healthcare NHS Foundation Trust.

Results/Findings: The findings identified that practitioners were unprepared for the emotional impact following the suicide of their client. It was also recognised that practitioners required support at a personal and professional level and that training needed to be fit for purpose.

Research Limitations: Predominantly counsellors/psychotherapists responded to the survey, so the experiences of other professionals were not as well represented. By using a mixed methods approach a significant amount of data was produced. Due to the volume of data five transcripts (from interviews with practitioners whose clients had attempted suicide) were not analysed at this stage due to time constraints.

Conclusions/Implications: Analysis from a mixed methods pluralistic perspective would suggest that there is not a single answer to aiding practitioners when their client dies. The recommendation is made that practitioners would be best supported if the issue of client suicide is recognised as a shared responsibility, between employers, professional bodies, training providers, supervisors and practitioners, and working together to maintain standards of care, support and training. This will aid and prepare practitioners for working with suicidal clients, and should their client die by suicide, practitioners will have a greater degree of support to enable them to negotiate the practical, emotional and professional challenges in the days, months and years which follow.

## **Aaron Sefi**

## **Paper**

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Children and young people's goals in online counselling: who achieves what, and how can the data impact on practice?

Aim/Purpose: There is a growing awareness of the mental health difficulties that children and young people (CYP) encounter. Given the acknowledgement that large numbers of CYP will benefit from additional support, there is increased emphasis on creating accessible services. One area of growth in the UK has been the provision of online therapeutic services. Further, in attempting to make CYP services more youth friendly, goal-based outcome measures are commonly integrated into therapeutic work. This study investigates the types of therapeutic goals set by CYP online and considers how they develop.

Design/Methodology: It makes use of a year of practice-based data generated from April 2016 to March 2017 on the Kooth.com service - a web-based platform that offers synchronous and asynchronous counselling, peer-to-peer support and self-help tools. 3403 goals were reported during this period by 1425 CYP and scored from 0-10. The demographic information of the clients using the online service is reflected upon before this information is considered alongside the change that is reported in goal scores.

**Ethical Approval**: This study received a favourable ethical review at the institution of the third author.

Results/Findings: It is notable that the online service was primarily used by female users during the reporting period (71%), and a majority of the service users were aged 13-16 years (62%). 46.5% of these goals were fully achieved by the cohort, with an average goal movement overall of 6.69.

Conclusions/Implications: The findings contribute to the body of literature that reflect a similar demographic of CYP access online counselling as they do face-to-face counselling. When considering the level achievement of the commonest therapeutic goals, online services can provide an important role in aiding CYP in accessing additional support. Such a view highlights the importance of online services working in conjunction with face-to-face services.

## **Kate Smith**

## **Paper**

Professional Role: Head of Division of Mental Health

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Putting it out there: the mental health implications of sharing on social media

**Keywords**: counselling, social media, narrative, life-story, mental health.

Aim/Purpose: This paper explores the use of social media as a way of representing negative lifestories or narratives of events in a way which can both act as catharsis, but also has the potential to expose the sharer to negative response, and to the crystallisation of a sense of self embedded in a trauma narrative. In doing so it aims to highlight the potential benefits of the practice or social media sharing, but also the possible negative implications.

Design/Methodology: The study undertook a discourse analysis of narratives posted to a mental health support group site on Facebook. Thirty narratives of over 500 words were selected from the open site, and analysed according to their use of timelines, specific events reported, and evaluative statements, as well as the responses evoked as 'comments' from other people.

**Ethical Approval**: This was obtained through Abertay University, School of Social and Health Sciences.

Results/Findings: People share highly personal, but broadly coherent life-stories and narratives, which draw on several societally accepted 'tropes' of survival in the face of adversity, and victimhood. In many cases the responses of commenters relied on simply cheerleading and encouragement, along with like-for-like sharing of personal information. The purpose of sharing stories was rarely discussed, but implicitly was treated as requests for validation and encouragement. Significantly, few stories revealed in any detail negative perspectives on the self, rather poor treatment by others, and elements of blamelessness. The potential benefits and challenges of this pseudo-counselling practice are highlighted in the context of the perceived/imagined or absent therapeutic relationship formed between people posting and responding. These results will then be discussed in the light of McAdams (2008) categorisation of life narratives as providing context and positioning for a sense of self in terms of archetypical stories.

Research Limitations: This study sampled a single site and thus similarities between posts could have resulted from the context of the on-line community, the patterns emerging in discourse cannot be assumed to be representative of other sites and users.

Conclusions/Implications: Social media sharing can superficially appear to overlap with the disclosures of life story events within the therapy room, however there are significant constraints of representation of self within these arenas which are actively removed within the therapeutic relationship. This implies that support within public groups, even when posts are anonymised is influenced by the need to position the self in one of several culturally acceptable stories.

# **Ulrike Speers**

## **Paper**

Other Authors: Dr Anne Moorhead, Dr Maggie Long

**Professional Role**: Counsellor, PhD Student **Institution/Affiliation**: Ulster University

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Perceptions of and barriers to counselling among the Chinese community within Northern Ireland

**Keywords**: Counselling, Chinese community, perceptions, second-hand experiences, barriers.

Aim/Purpose: Despite the existence of multi-cultural counselling, the uptake of counselling is low among the Chinese community. The aim of this study was to explore the perception of counselling among the non-clinical adult population of the Chinese community, and their barriers to counselling services.

Design/Methodology: This was a qualitative, cross-sectional research study, using semi-structured interviews among adults (aged 18 years+) within the Chinese community. An Interpretative Phenomenological Analysis (IPA) approach was used to analyse the data and explore the perceptions and barriers of the Chinese community towards counselling.

Ethical Approval: Ulster University Research Ethics Committee granted ethical approval.

Results/Findings: In total, 30 semi-structured interviews were conducted with participants from the Chinese community. Three recurrent themes were identified: "perceptions of counselling", "factors influencing perceptions on counselling", and "barriers of counselling". Perceptions of counselling covers personal perceptions, societal perceptions and the expectations that participants had about counselling and counsellors. Factors influencing perceptions focused on second-hand experiences, highlighting that encounters with counselling through work, family, friends or media influenced participants' perceptions. Barriers included a lack of information on what counselling is and a lack of trust in counselling.

Research Limitations: This was a qualitative study and does not claim generalisation. Although there was a range of participants, all spoke English and were mostly university educated. The Chinese community who only speaks Chinese and is not as well educated was not reflected.

Conclusions/Implications: The findings indicate that, although there was uncertainty about the use and usefulness of counselling, there was acknowledgement that counselling would be beneficial to the Chinese community. These findings highlight a lack of information on what counselling does and a lack of trust in counselling among the Chinese community.

Health trusts and counselling services need to reconsider how information about counselling can be promoted among ethnic minorities, including providing understanding about the counselling process, what issues can be addressed in counselling, and where it can be accessed. Education to enhance knowledge about counselling is required to contribute toward establishing trust so counselling can be considered an option for mental health care among the Chinese community.

# Sandra Tapie

## **Paper**

Professional Role: Psychotherapist

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A phenomenological study of female therapists' experience of the embodied intersubjective dimension within the therapeutic encounter

**Keywords:** Embodied Intersubjectivity, Embodiment, Body and Psychotherapy, Non-Verbal Dialogue, Phenomenology.

Aim/Purpose: The aim of this research was to study how female psychotherapists experience the embodied intersubjective aspect of the encounter with their clients and how the awareness of this intersubjective embodiment impacts on them and their therapeutic practice. This project is relevant to the field of psychotherapy as this dimension is the ground on which therapy happens. A better understanding of this aspect of the encounter gives us a better understanding of the therapeutic process.

Design/Methodology: A hermeneutic phenomenological methodology was selected for this study. Finlay's and Evans' (2009) relational centred approach was chosen as a method. Unstructured interviews were conducted with seven female psychotherapists from different therapeutic modalities; they all had experience of the phenomenon researched and an interest in the topic. Two methods of analysis were used: narrative and thematic.

**Ethical Approval:** This research received ethical clearance from the academic institution in which I studied.

Results/Findings: Therapists use themselves in the service of clients by allowing themselves to be affected by them, and by bringing as much awareness as possible to their embodied responses. Through their continually changing experience therapists get a sense of their client and of the dynamic relation with them. They access a form of knowledge that is direct and other-than cognitive. In order to trust and use their embodied experience as a compass to navigate the encounter, therapists need to know themselves, their personal ways of inhabiting their body and the world.

Research Limitations: A homogenous and purposive sample was chosen for this research meaning that this project does not account for therapists not working with this dimension of encounters. With the method used, the embodied intersubjective relation between researcher and co-researchers is the main access to understand the other. In such framework, the researcher's bias and assumptions can become a limitation.

Conclusions/Implications: This research shows how therapists use our fundamental embodied interconnectedness in the service of clients. It makes an under discussed way of practicing more visible within the psychotherapy field. Findings challenge current ideas on boundaries in the therapeutic relationship and on the therapist' role and raise important questions that may ultimately influence the development of training and practice.

## **Graham Westwell**

## **Paper**

Other Author: Robert Elliott

Professional Role: Senior Lecturer in Counselling and Psychotherapy

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Understanding independent raters' experiences of learning how to use the Person Centred and Experiential Psychotherapy Scale-10 (PCEPS-10)

**Keywords**: Person-centred experiential therapy, articulating person-centred experiential practice, therapist facilitative conditions, therapeutic relationship, counsellor training.

Aim/Purpose: The PCEPS-10 is a competence and adherence measure designed for Person-Centred Experiential (PCE) psychotherapy. Three independent raters rated segments of client audio within a separate study in order to establish the inter-rater reliability of the measure. This study aimed to understand the raters' experience of using the PCEPS-10, from a phenomenological perspective, for two reasons: (a) doing so may help to understand how to train raters in any future use of the PCEPS-10; and (b) the raters' experiences may offer insight into the construct validity of the PCEPS-10.

Design/Methodology: Seventy audio-recorded segments of therapy sessions were selected from the archive of recorded therapy sessions from the Strathclyde Counselling and Psychotherapy Research Centre. These recordings were then rated independently by three raters using the PCEPS-10. The raters attended over 20 hours of supervisory training sessions during the rating process. Raters were graduates from a PCE training programme. Raters were interviewed on completion of the rating process. Semi-structured interviews were held with each independent rater. The study utilized Interpretative Phenomenological Analysis (IPA) for two reasons: (a) the methodology focuses on personal meaning making; (b) the small sample size within this study is not seen as problematic within IPA. Personal meaning making was crucial given the extended exposure the raters had when using the PCEPS-10.

**Ethical Approval**: University Research Ethics Committee.

**Results/Findings**: A detailed analysis of the following broad categories will be presented at conference:

- 1) General experiences of being a PCEPS-10 rater: (a) learning to do PCEPS-10 ratings; (b) the experience of doing ratings; and (c) the impact of doing ratings.
- 2) Factors that affected the ratings process.

**Research Limitations**: The sample size is small and therefore the results may not be transferable to training other PCEPS-10 raters.

Conclusions/Implications: Process focused training of PCEPS-10 raters helped establish interrater reliability. Process focused supervision of PCEPS-10 raters facilitated raters learning with regards their individual therapeutic practice and therapeutic identity. The PCEPS-10 could be used as an aid for the development of therapeutic practice and identity within PCE counsellor training.

# Fiona Wilby

## **Paper**

Other Authors: Dr Jane Cahill, Suzy Hansford Professional Role: Psychotherapist/Counsellor Institution/Affiliation: University of Leeds

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'Just munching like the herd': an interpretative phenomenological analysis of the impact of intersubjectivity in equine facilitated psychotherapy

**Keywords:** Intersubjectivity, Equine Facilitated Psychotherapy (EFP), interpretative phenomenological analysis, relational working.

Aim/Purpose: To explore the impact working intersubjectively has on therapeutic relationships within Equine Facilitated Psychotherapy (EFP).

Design/Methodology: A background of Equine Therapy was presented, including an analysis of different types of Equine Therapy available in the UK. The identification of Equine Therapies that only involve mental health and equine training, membership affiliation and an adherence to ethical guidelines were used in this research. Four in-depth semi-structured interviews were carried out in the workplaces of the EFP practitioners. Smith et al (2009) Interpretative Phenomenological Analysis (IPA) was chosen as the framework for gathering and processing the interview data, as well as providing a structured framework for analysis. Transcripts were sent to participants for triangulation and were approved by the study participants. For analysis, data was coded and grouped into themes, taking into consideration the researcher's interpretation as well as the participants' experience.

Ethical Approval: The University School of Healthcare Research Ethics Committee.

Results/Findings: Three main themes arose from the analysis: experience, relationship, and language and communication. Within these themes, the development of subjectivity as well as participant motivations for working in EFP were explored, identifying relational findings and ways of communicating that may facilitate intersubjective working in EFP.

Research Limitations: Due to the nature of IPA research, a small sample size of four participants were used, meaning the research data may not be generalized or transferred to other studies. The researcher enjoys working with horses recreationally, indicating a slight bias. Only one researcher was involved in analysis. Participant availability was limited due to the unusual topic of study, participant location and the restricted time frame for the collection of data allocated within an MA project.

Conclusions/Implications: The following conclusions were identified:

- 1. To work intersubjectively in EFP, all participants must be capable of developing individual subjectivities.
- 2. The therapist was suggested as the 'catalyst' for therapeutic change through a secure attachment with the client.
- 3. Verbalising and embodied communication is important for meaning making between client, therapist and the horses. Overall, the research suggests that intersubjectivity has a significant impact on the development of relationships in EFP.

# **POSTERS**

# Dr Asiye Busra Sirin Ayva

#### **Poster**

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Enhancing creative counseling skills of counseling students by adventure therapy

**Keywords**: Creative counselling, adventure therapy, nature.

Aim/Purpose: Adventure therapy is a therapeutic combination of adventure activities and experiential learning principles conducted by mental health professionals (Rotko & Gillespie, 2013) conducted mostly in the natural environment and in a certain form and pattern (Gass, Gillis & Russel, 2012). The purpose of this research is to enhance creative counselling skills of counselling psychologist candidates via adventure therapy approach.

Design/Methodology: In this study, phenemonogical design is used and qualitative data is collected to get a better understanding about the unique experiences of the participants. Qualitative data is obtained through 'creative counsellor diaries' written by the participants following each session. This data is analysed by using content analysis. Participants consisted of 15 volunteer BS students of Marmara University Guidance and Psychological Counselling Department. Experimental treatment is developed by researchers based on the principles of adventure therapy and implemented in a natural environment.

Ethical Approval: This program shows compliance with Turkish Psychological Counseling & Guidance Association Ethical Rules Guide and is approved by Marmara University Ethical Consideration Committee. Furthermore, participants attended the program voluntarily and they gave their written consent to use the creative counselling diaries for academic purposes.

Results/Findings: Results show that adventure therapy programme helps the participants improve their creative counselling skills. Based on the content analysis; awareness, cooperation, nature, creativity, multi-way thinking and analogy themes are found from experiences of participants as their gaining from the programme.

Research Limitations: The participants are volunteers and this may motivate them to change. On the other hand, since the participants had not started to actual counseling yet, the skills they gained about creative counseling do not cover the practical area.

Conclusions/Implications: Based on the findings of this research, it is recommended to develop interventions in which adventure therapy is used as a method in order to develop creative counseling or where both of these methods are used together. In future research, the change in the creative counseling skills of the participants can be evaluated more appropriately through research carried out with people who are actively consulted. For the same purpose, follow-up studies may be required for participants to evaluate the effects of adventure therapy on creative counseling levels.

# Kirsty Bilski

#### **Poster**

Other Authors: Dr Sheila Spong (Director of Studies), Professor Steve Smith,

Dr Deborah Lancastle

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The ethical challenges of researching young people using HSCED Methodology

**Keywords**: HSCED, ethics, young people, sand tray, vulnerable participants.

Aim/Purpose: This paper explores the ethical challenges encountered during the completion of three Hermeneutic Single Case Efficacy Design studies (HSCED) (Elliot 2001; 2002), with three adolescent clients. These cases contribute to the first stage of a PhD research project exploring the efficacy of sand tray as a psychotherapeutic tool, adolescent autonomy, causality and processes of change. Through a quasi-judicial process, it will be decided whether evidence of therapeutic change is due to therapeutic process or external factors. The challenges explored by this paper include: recruiting participants, consent and assent, honouring a protected counselling experience, maintaining confidentiality and anonymity, whilst fulfilling academic expectations to publish and disseminate results.

Design/Methodology: There are few examples of HSCED involving young participants, thus highlighting the importance of this study and the potential learning for researchers. Each participant completed a variety of measures throughout their therapy, along with a change interview. Each therapist also provided a variety of additional information from their perspective. The rich data was collated to form a casebook evidencing the therapeutic experience of each young person. These casebooks were then submitted to a panel of experts for judicial review. This methodology aims to value the 'voice' of each young person by gaining an understanding of their experience of therapy whilst mindfully attending to their vulnerability.

Ethical Approval: University of South Wales.

Results/Findings: Initial findings indicate that all the young participants experienced therapeutic change and attributed this to their therapy, however the outcome of the panel is currently pending.

Research Limitations: The judicial review panel is an independent panel of three experts who will consider all the evidence presented in the casebooks and make an overall 'judgement' of the findings. This process eliminates researcher bias and gives validity to the final outcomes.

Conclusions/Implications: Respecting the safety of vulnerable research participants and adhering to ethical requirements is a challenging balance. Although the judicial process may not be complete prior to conference, preliminary data suggests it is possible to work together with young people in research, that they want to be involved and to make a difference to future therapeutic practice.

# Kim Boyle

#### **Poster**

Other Authors: Dr Maggie Long, Dr Anne Moorhead

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Experiences of parents' raising a child / young person with Down syndrome (DS) and evaluation of the impact of Foyle Down Syndrome Trust (FDST) on the quality of life of these parents

Keywords: Down syndrome, parenting, experiences, psychosocial.

Aim/Purpose: The purpose of the study was to explore the experiences of parents' raising a child / young person with Down syndrome (DS) and to evaluate the impact of Foyle Down Syndrome Trust (FDST) on the quality of life of these parents.

Design/Methodology: A mixed methods approach was adopted with an online survey (n=48), and semi-structured interviews with parents (n=5) and early intervention therapists (n=2). Data from the interviews were analysed together using thematic analysis, and quantitative survey data were analysed using SPSS version 25.

Ethical Approval: This study was granted ethical approval from the University.

Results/Findings: Parents experience stress as a result of communication with medical staff when discussing prenatal screening and immediately after the birth. Raising their child or young person (YP) with DS creates both challenges and uplifts, however, peer support and a positive mental attitude do contribute significantly to the parents' sense of wellbeing. The parents view FDST as a crucial and valuable support which has impacted on their coping ability and positively enhanced their parenting experience and sense of wellbeing. Parents of YP with Down syndrome share similar concerns for the future and acknowledge the necessity of future planning.

Research Limitations: The small sample size for the online survey provided limited power for conducting additional statistical analyses. There is also a risk of selection bias as parents volunteered for the interviews and their views may not be representative of other parents at FDST.

Conclusions/Implications: Raising a child with DS is challenging but presents many uplifts. With the right support, parents can reframe and develop a positive outlook for their child's future, which in turn improves their psychosocial functioning and health and wellbeing. FDST is a unique, bespoke organization that invests in expert and compassionate staff focused on early intervention, it can offer the sector an insight into best practice which may be replicated in other parts of Ireland; which needs to be encouraged by professionals including counsellors.

# Rhianna Broadway

#### Poster

Other Authors: Nellie Ford, Dr Caroline Kitcatt, Richard Doyle

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A person-centred retrospective comparison of the effectiveness of counselling in adult clients with different presentations (using Psychlops data).

Keywords: Counselling, effectiveness, person-centred, data analysis, psychlops.

Aim/Purpose: The aim of this research is to use historical client data collected routinely though counsellor and client competition of the Psychlops measure to identify and categorise the most common client presentations (as informed by the client). Consolidated Psychlops data for each category will be used to carry out both quantitative and qualitative data analysis. Together this data will allow us to draw conclusions about counselling effectiveness (within identified presentations) and help inform service delivery within the centre so it is better able to meet the needs of future clients.

Design/Methodology: Psychlops data for all adult clients that ended therapy in the two years covering 2016/2017 that have a full set of Psychlops scores (to include pre and post therapy scores) was collated (N=100). From this, data will be split into client self-identified categories (no more than 5). We will then use quantitative techniques to draw numerical data results (number of sessions, duration, client start/end Psychlops score) to look for patterns and trends in each category. Qualitative analysis via a thematic analysis of the client feedback and experience (as drawn out in the final session and part of the Psychlops measure) to look at key themes in each category. All data will be triangulated between the research team to ensure accuracy and solidity.

**Ethical Approval**: Ethical Approval was sought from the Centre Board of Trustees. Client consent for the use of Psychlops data was given at intake for counselling. All identifiable data is anonymised to the researchers.

Results/Findings: We are still carrying out the analysis and hope to complete by end of 2018.

Research Limitations: The data sample is limited to clients that saw therapy through to an agreed ending. We can therefore assume a sample bias as clients that ended unexpectedly may have scored differently altering overall findings. Norfolk is also a rural and homogenous population. Therefore, the population taking part may not be representative of the wider UK population especially in more diverse, urban localities.

**Conclusions/Implications**: As above analysis is still ongoing, but we hope to show relationships between presentations at the start of therapy and therapeutic effectiveness.

## Paula Brogan

#### **Poster**

Professional Role: Faculty Partnership Manager, Lecturer in Counselling

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Experience, perspectives and possibilities: exploring key stakeholder engagement in the process of placement assessment for trainee counsellors

**Keywords**: Placement, assessment, counsellor, supervisor, mentor.

Aim/Purpose: Typically, in the UK and Eire counselling training courses require students to undertake clinical practice with clients. Working closely with trainees, tutors, placement mentors and supervisors ensure safe practice, develop knowledge and skills and assess competence (Reeves, 2017). Yet research has focused on the supervisor's role (McNeill and Stoltenberg, 2015) and despite its key importance, the triangulated process of placement assessment involving other stakeholders, remains under-researched.

This study aims to explore the experience and perceptions of key stakeholders in the placement assessment of trainee counsellors, to inform development of a constructively aligned and fully collaborative assessment process. Key objectives are:

- To understand what key stakeholders, expect successful student counsellors to know, be and do in preparation for contemporary counselling roles?
- To understand how key stakeholders experience role and perceive areas for development in assessment of student's practice?
- To explore the nature and process of the relationship between supervisor, student, placement mentor and college as they engage in assessment processes.
- To identify factors facilitating and blocking effective placement assessment.
- To develop and pilot a placement assessment process which is relevant, robust and constructively aligned with stated learning outcomes.

Design/Methodology: A purposive sample of tutors (n=12), supervisors (n=50), counselling students (n=12) and placement providers (N=12), was drawn from across Northern Ireland. A sequential mixed method design in 3 stages was used: Stage 1) Nominal group technique and homogenous focus groups. Stage 2) Development of intervention and pilot. Stage 3: Implementation and evaluation using survey and mixed focus groups. Thematic analysis and descriptive statistics supported by NVivo and Qualtrics packages.

Ethical Approval: Obtained from Ulster Filter Ethical Committee (28 June 2018).

Results/Findings: Preliminary findings indicate: All key stake-holders have consistent expectations of industry requirements, but role in assessment is unclear; Several factors undermine placement assessment: interagency communication, understanding of course content and student stage of development.

**Research Limitations**: Convenient sampling strategy acknowledges bias; Public as a key stakeholder will be engaged in Stage 3.

Conclusions/Implications: Initial findings indicate quality and consistency of placement assessment requires clear processes, triangulated communication strategy and training for all participants. Development of intervention and pilot (Stage 2) ongoing.

## **Christine Brown**

#### **Poster**

Other Authors: Ambi Williams, Vanessa Corley, Lorna Hunt, Angela Diac

Professional Role: Course Director

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In clients' experience, does the way in which they relate to their anxiety impact on their ability to cope with it?

**Keywords**: Anxiety, experience, behaviour, coping.

Aim/Purpose: To explore clients' experience of anxiety, how they relate to it and the impact this has on their lives. More specifically when it is harder or easier to manage anxiety and how this affects their daily lives. Our purpose is to have a better understanding, as counsellors, of how to work with this client group.

Design/Methodology: Four respondents, who self-identified as having experienced anxiety, were audio-recorded during semi-structured interviews. We analysed the resulting data thematically, informed by phenomenological principals (Smith et al, 2009). Respondents were offered six nofee counselling sessions, should issues arise specific to their participation in our research. BACP guidelines for ethical research in counselling/psychotherapy (Bond and Griffin, 2004) were followed.

**Ethical Approval**: Prior to the recruitment of respondents we submitted a Research Application to our college Ethics Board and received approval to engage with our research.

Results/Findings: There were two overarching themes in our findings. It appears that when participants responded 'poorly' to their anxiety their stress levels increased, this in turn impacts on their ability to manage/maintain their physical and emotional wellbeing. During such periods difficulty was experienced in eating well/healthily, sleeping and socialising. Additionally, personal confidence was greatly reduced. Conversely it appeared that when respondents were more organically accepting of their anxiety they could better focus on their singular coping strategies such as, maintaining a balanced diet, following an exercise routine, and in some cases moderate intake of alcohol 'to relax'. At such times stress in relation to their anxiety was greatly reduced, confidence in/engagement with their day to day lives and socialisation increased. Participants varied greatly as to when they found it harder or easier to organically accept their anxiety however, a general sense of participants wanting 'to get on with it - get on with life' did emerge.

Research Limitations: Due to the limited number of respondents it might prove difficult to generalise our findings (McLeod, 2003).

Conclusions/Implications: It appears respondents' relationship with/attitude to their anxiety is integral to their ability to manage it and participate more fully in day to day life. It also appears that organic acceptance of anxiety can encourage suffers to employ singularly affective coping strategies. Therefore, clients might benefit from psychotherapeutic support in accepting their anxiety and in planning personal ways to reduce the stress that anxiety can cause.

### James Costigan

### **Poster**

Other Authors: Booker Woodford, Syreeta Jemmott, Paul Linton, Stefania Panzeri Professional Role: Higher Professional Diploma Student/Counsellor in Training Institution/Affiliation: Lewisham Counselling and Counselling Training Associates

In clients' experiences what impact does their sexual-addiction/hypersexuality have on their ability to form intimate relationships?

Keywords: Hypersexuality, pornography, masturbation, intimacy.

Aim/Purpose: Our aim was to explore any impact sexual-addiction has on clients' ability to form intimate relationships. Our Purpose is to better inform counsellors who may work with this client-group.

Design/Methodology: Three respondents self-identifying as sexual-addicts were audio-recorded during semi-structured interviews. Our resulting data was thematically analysed informed by phenological principals (McLeod, 2001). Our research was conducted according to BACP quidelines for ethical research in counselling/psychotherapy (Mitchels, 2018).

Ethical Approval: Submission was made to and approved by our college Ethics Board before respondent recruitment began. Respondents were offered six no-fee counselling sessions if issues arose due to their research participation.

Results/Findings: It appears respondents had struggled to identify as sexual-addicts and ultimate acceptance of their sexual-addiction was singularly expressed. Common to respondents' experiences their hypersexuality seemed related to an emotional void/need and a lack of self-worth appeared to fuel a necessity for external acceptance/validation/worth through perpetual sexual encounters/experiencing orgasm using pornography as a masturbatory aid. Furthermore, there seemed to be an underlying need to experience being desired/wanted by multiple partners regardless of endangerment/potential consequence to health. Respondents found all the above profoundly inhibited their ability to form/sustain intimate relationships with others. However, respondents expressed a desire/longing for intimate connection with a life-partner but conversely obsessively sort this through sexual encounter with multiple others and/or self; which took respondents yet further away from their desired interpersonal goals.

Research Limitations: Our small respondent group limits the generalisability of our findings.

Conclusions/Implications: Hypersexuality/sexual-addiction is not yet formally recognised as an addiction but taking our respondents experiences into consideration there appears to be profound commonalities in how the NHS describes addiction as "not having control over doing, taking or using something to the point where it could be harmful". It is now known that multiple factors cause addiction and treating such a complex illness is likewise complicated. Counsellors may be advised that psychotherapeutic intervention alone will not help an addict overcome addiction therefore, such intervention may need to be part of a multi-faceted treatment plan including educational relapse prevention, awareness and avoidance of risk-factors when work with this client-group.

### Heather Dahl

### **Poster**

Other Authors: Dr Brett Gleason, Dr Wendy Hoskins

Professional Role: Assistant Professor

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Suicide myopia: seeing suicide through a multicultural lens

**Keywords**: Suicide, cultural, assessment.

Aim/Purpose: The aim/purpose of this study was to attempt to understand the influence that culture has on a counselor's identification of suicide risk, as well as assessment and intervention practices. The research questions for this qualitative study were as follows: (1) How does culture influence, if at all, the clinical decision-making process when working with suicidal clients among counselors and counselor trainees? (2) What impact, if any, does the cultural match between the participant and client have on conceptualization of suicide risk? (3) How does the client's cultural identity influence, if at all, the conceptualization of a suicidal assessment and treatment suggestions?

Design/Methodology: Using an instrumental case study tradition with a social constructivist paradigm with a purpose to better understand a specific issue that is not necessarily specific to one case. Twelve participants who were practicing counselors were recruited and given a case vignette after informed consent was reviewed at the beginning of the session and the author conducted semi-structured interviews. The vignette consisted of a case summary and intake form that was developed based as a composite of suicidal clients that the author had worked with in her experience as an outpatient counselor. Each summary and intake form were identical apart from the manipulation of the gender and race of the client. The case summary and intake form depicted client who could be conceived as currently a high suicide risk, with both past and present risk factors. Multiple trustworthiness strategies were utilized, (e.g., triangulation of theoretical perspectives, data sources, research team members).

Ethical Approval: Ethical approval was obtained through University.

Results/Findings: Thirteen themes were identified and all but one participant specifically mentioned a cultural factor when conceptualizing the client's risk throughout the interview. Among the different themes, the findings indicated that counselors may not fully understand the impact that cultural factors can have on the suicide risk of an individual.

**Research Limitations**: Limitations include the scope the of the vignette, homogenous participants.

**Conclusions/Implications**: Counselor trainees, counselors, and counselor educators interviewed for this study seemed to be unsure of how cultural factors affect the assessment, treatment, and risk of a client.

# Leigh Gardner

### **Poster**

Professional Role: Lecturer in Counselling and Psychotherapy

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An exploration of the impact and effectiveness of counsellors who counsel in English as an additional language (EAL)

**Keywords**: Embodied emotion, EAL, mother tongue, somatic, relational depth.

Aim/Purpose: To explore the impact and effectiveness of counsellors who counsel in English as an additional language (EAL) and to look at any differences or hindrances that counsellors may have encountered in training and practice that may have been due to working in an additional language.

Design/Methodology: A small scale qualitative research project with semi-structured interviews and a review of current and seminal literature. It used three counsellors from different parts of the world -Scandinavia, Greece and Asia. Two counsellors were known to the researcher and the third was a colleague of one of them working in the same young people's counselling service.

Ethical Approval: Ethical approval given by University of Salford Health Research ethics panel.

Results/Findings: There were six major themes emerging across all the interviews with one other theme featuring in one of the interviews as well as the six. What the research showed was the emotional connection to language and how deep that emotional connection goes, especially when looking at the meaning of language in terms of pre-verbal development and memories.

All interviewees were surprised at the feelings the questions brought up for them and how moving the interviews were. What was found was that language, although highly important, is not the only way of communication and that the somatic sense and bodily instinct and feeling could be portrayed without relying too heavily on the 'correct' words.

Research Limitations: As this was a small study it does not represent the vast amount of languages spoken across the UK. All counsellors were female so there is no male perspective. Not all counsellors had learnt English at the same time in their lives. Interviews were conducted in English and not in the first language.

**Conclusion/Implications:** Questions asked were answered in a genuine, congruent fashion by all participants and were given in a spontaneous and authentic manner.

There is far more to communication in therapy than words - there is an instinct, a somatic awareness, synchrony, a felt sense that can transcend words to create deep and meaningful therapeutic and relationships.

# Wendy J Hoskins

### **Poster**

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Internationally relevant approach to grief counselling and wellness

Keywords: Grief counselling, wellness.

Aim/Purpose: On October 1, 2017, the Las Vegas community was devastated by a mass shooting. As one of the largest tourist destinations in the world, individuals worldwide were impacted and sought mental health services to deal with issues of grief and trauma. Unfortunately, there are mass grief related incidents around the world. Self-harm and suicide with intent to harm self and/or others are on the rise. Thus, counsellors and helping professionals are called on to provide grief support both initially and long term. Unfortunately, many training programs do not provide adequate death education. This presentation will review two relevant models to include into counsellor education programs that help clients handle grief and loss issues as well as a wellness-oriented theory for long term client welfare.

Design/Methodology: This presentation reviews two models. First, presenters will review Martin and Doka's adaptive grieving styles and how this approach lends itself to an internationally relevant approach to grief counselling. Allowances for one's cultural and grieving styles are included in this multifaceted approach. Additionally, discussion of a wellness lifestyle and "slow counselling" (Astramovich & Hoskins) will be provided as an additional long-term approach to dealing with grief and related mental health challenges. Seven tenets of "slow counselling" approach will be reviewed.

**Ethical Approval**: Ethical approval was exempt at this time. All future studies regarding efficacy will include IRB approval at the University level.

**Research Limitations**: Presenters encourage counsellors and educators to conduct further empirical research to support efficacy on both models presented.

Conclusions/Implications: A review of literature substantiates increased grief and trauma related counselling issues, and a lack of death education in counselling programs. Research also suggests the need for wellness as a long-term client goal. By improving counsellor education training, clinicians are better prepared to help clients slow down, attend to grief and trauma in individualized ways, and have a greater chance for long term wellbeing.

### Susan Hunter

### **Poster**

Other Authors: Dr Anne Moorhead, Dr Jane Simms, Professor Diane Hazlett

Professional Role: PhD Student

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Teachers have a role in supporting the psychological and emotional health among pupils

**Keywords**: Psychological and emotional health, teachers, pupils, schools.

Aim/Purpose: Although counselling is offered in or through schools, the mental health issues among pupils are increasing. Teachers are in a unique position as they are in contact with young people within schools. The aim of this study was to investigate the role of school teachers in psychologically and emotionally supporting pupils (11-18 years).

Design/Methodology: The research design was an online survey (mainly quantitative), which the questionnaire was designed from our previous research interviewing teachers (n=19). Following a pilot, principals in all secondary and grammar schools throughout Northern Ireland were invited to ask their teachers to participate in this survey. Data were analysed using SPSS version 25 by frequencies, Mann Whitney and Pearson correlations.

**Ethical Approval**: This study obtained ethical approval from the Ulster University Research Ethics Committee.

Results/Findings: In total, 402 teachers completed this online survey, of which 74% were female and 26% were male, aged between 20-60+ years. Majority of teachers (98%) reported that they have a role in psychologically and emotionally supporting pupils but stated they are not adequately trained (86%). They reported that this role should consist of: awareness of psychological and emotional issues (98%), recognise signs and symptoms of pupils' psychological and emotional issues (97%), identify abnormal/uncharacteristic behaviour (97%), provide information on available sources of support (96%), and support pupils in accessing services (89%). Schools access counselling services (92%), which pupils engage with (79%) and have a positive impact (79%), however these services do not meet the current demand (60%). There were numerous significant differences, especially among the Education Boards and years of experience of the teachers (P<0.05).

**Research Limitations**: Teachers self-select to participate in this survey and thus those with an interest in supporting pupils participated.

Conclusions/Implications: This research clearly found that teachers have a role in psychologically and emotionally supporting pupils. This role is focused on identifying issues, communicating and providing resources on psychological and emotional health among pupils. However, teachers require training in psychologically and emotionally supporting pupils. There is potential for teachers and counsellors to collaborate further to support each other in order to support their pupils.

### Richard Knight

#### **Poster**

Other Authors: Prof Lynne Gabriel, Dr Trish Hobman, Dr Hannah Spring

Professional Role: PhD Student and CMHC Clinic Lead

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Just like two blokes sat at a bar: when a disabled counsellor and client met

**Keywords**: Disability, IPA, qualitative, intersectionality, client's perspective.

Aim/Purpose: Recent research suggests that two thirds of the British public feel uncomfortable talking to a disabled person (Aiden & McCarthy, 2014). Research focussing on how clients experience working with a disabled counsellor has so far painted a mixed picture regarding whether counsellors with a disability are preferred or avoided by clients.

Design/Methodology: The current study used a qualitative methodology (interpretative phenomenological analysis) to explore one client's account of working with a disabled counsellor, where the client was also disabled.

Ethical Approval: The Ethics Board gave ethical approval for the project.

Results/Findings: Six superordinate themes were gathered from the data. The themes that emerged highlighted the importance of connection and belonging, and suggest that minority groups, such as disabled people, may benefit from the opportunity to experience therapy with a counsellor who also belongs to that minority community.

**Research Limitations**: By nature of only using a single participant this study is limited.

**Conclusions/Implications**: This research provides a springboard to future exploration and highlights the importance of including disability within counselling research.

# **Billy Lansdell**

### **Poster**

Professional Role: Postgraduate Diploma Tutor, School Counsellor, & Clinical Supervisor

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How do clients view the long-term impact of school counselling?

**Keywords**: School counselling, long-term outcomes, client perspective, retrospective.

Aim/Purpose: To investigate the long-term outcomes of school counselling from the perspective of the client.

Design/Methodology: 3 participants aged 17 and above were identified by staff in Place2Be schools. Participants did not know the researcher and were from different schools. Semi-structured interviews explored the impact of participant experiences of school counselling. A thematic analysis was used to analyse the transcripts and the small sample size allowed in-depth exploration of the findings.

**Ethical Approval**: Ethical approval was given by both the university and partner institution which co-delivered the MA this research was submitted for.

Results/Findings: Long-term characterological changes were reported by all three participants. These were grouped under the themes 'emotional regulation' and 'self-awareness'. Developing these capacities was seen to have a positive impact on relationships. Participants also gained skills in identifying personal goals and engaging in long-term projects in personal, work and educational settings. The therapeutic interventions of listening, consistency, and client expression were identified as major factors in achieving these changes. Participants also valued therapist facilitation and guidance as this enabled new perspectives and organisation of experience. Participants valued the referral pathways of a school-based counselling service. The ongoing presence of the therapist in school enabled supportive management of therapeutic endings.

**Research Limitations**: Due to the small number of participants the findings of this study cannot be applied beyond the context and participants which produced them.

The sample cannot be considered representative as participants are more likely to have had positive experiences of school counselling.

The results have been interpreted and presented by a school counsellor.

Conclusions/Implications: The positive impact of school counselling can continue beyond the end of the intervention and into adult life. Counsellors need to rigorously attend to person centred fundamentals as well as carefully integrating therapist led facilitation and guidance into their practice. The value of a school-based practice goes beyond the counselling sessions. Participants benefitted from the unique referral pathway a school-based service can offer, and the therapist remaining in school after a therapeutic ending.

### **Anne Moorhead**

### **Poster**

Other Authors: Dr Raymond Bond, Professor Maurice Mulvenna, Professor Siobhan O'Neill,

**Nuala Murphy** 

Professional Role: Senior Lecturer Institution/Affiliation: Ulster University

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Potential of mental health mobile applications to support face-to-face counselling

**Keywords**: Maternal mental health, mobile application, counselling.

Aim/Purpose: Mothers with postnatal depression attend counselling and also increasingly access online resources for emotional support. This ongoing research programme is to inform, enhance and evaluate the effectiveness of the Moment Health App in order to improve maternal mental health among mothers and their families, and to make maternal mental health mainstream.

Design/Methodology: This research is technology development and testing, as this app was designed and developed to screen for prenatal and postnatal depression and associated anxieties and includes additional features such as a helpful guide to practical and accessible coping strategies. The app includes easy-to-use tools including an early intervention symptoms checker, a mood tracker, and a location tool so mother and their families they can access local resources. It consists of four key features: 1. tracker, 2. checker, 3. locater and, 4. community.

**Ethical Approval**: This research programme consists of a number of small projects, and receives approval from Communication Filter (Risk and Ethics) Committee, at the University.

Results/Findings: The app has been designed and launched in October 2017, and the premier version in summer 2018. To date there are 6000 users of Moment Health App and growing, with approximately 1000 active users each day. This has created a community support group for mothers, especially the Facebook group. Feedback from users' testimonies of using the Moment Health App, illustrating the positive impact on health and wellbeing are:

"....my own personal checker system.... I now prioritise my mental health and ensure I dedicate a little time every day to check in with myself. (Mother)

"This is the companion you need to help keep your mental health in check from the start of pregnancy all the way into motherhood". (Mother)

Conclusions/Implications: This application is fulfilling the gap in the market for mothers to monitor with the aim to improve their mental well-being, contributing to make maternal mental health mainstream. Further research is required to explore the influence of this app on face-to-face counselling. Counsellors could consider the possibility and potential of mental health mobile applications such as Moment Health for clients to support face-to-face counselling.

# Benjamin Nuss

### **Poster**

Professional Role: PhD candidate and school-based psychotherapist

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Capturing a male-focused narrative of mental health and its implications on the counselling/psychotherapy profession

Keywords: Male, narrative, gender-balance, policy.

Aim/Purpose: This study aims to explore whether, if men perceive the counselling and psychotherapy professions as being female-dominated, does this lead to males being less likely to seek out and engage in counselling and psychotherapy?

Design/Methodology: This research is situated within a qualitative paradigm using narrative inquiry as a methodology. Narrative research seeks to understand and represent experience through stories. By using 3 focus groups consisting of specific age ranges, this project will build an overall narrative from each age group. As this project is focused on capturing a male narrative of mental health, it is imperative to involve boys and men across the age spectrum and capture their perspective across key age milestones. As boys and men from three age groups; 16-18, 35-45, 60+, tell their stories about their perceptions of counselling and psychotherapy, narratives are captured. Narrative inquiry is well placed to provide excellent data because of its ability to elicit the voice of the participants. Therefore, the voice of the male participant and his story of engaging in, or avoiding psychological help, is significant and deserves to be heard.

**Ethical Approval**: This research was approved by Research Ethics Committee, University of Chester.

Results/Findings: The research is ongoing, and a final analysis is yet to be undertaken. However, the intention is for dominant narratives to be captured in a web-based resource, including video presentations representing the primary themes, together with good practice recommendations for talking therapies, developed by the boys and men themselves.

Research Limitations: While the research aims to be inclusive in terms of cultural difference, it is positioned within a particular gendered frame and, as such, may not capture alternative gendered perspectives of counselling and psychotherapy. Additionally, as a qualitative study, the focus will be on small group experiences and may not be transferable to wider audiences.

Conclusions/Implications: The final video resource, which will represent the findings of the study, will be shared with key policy makers and leaders of therapy professional bodies using a Delphi approach to determine the potential for policy and practice development.

### Kanulia Nwandu

### **Poster**

Other Authors: Erin Thompson, Sheryl Emmons, Sandra Fabowale, Neeru Rishi

Professional Role: Student

Institution/Affiliation: Lewisham Counselling and Counsellor Training Associates

In clients' experience what impact did their selective mutism or periods of mutism in childhood have on their growth into adulthood and their adult experience

**Keywords**: Selective mutism, adulthood, childhood, communication.

Aim/Purpose: To explore the impact selective mutism/periods of mutism during childhood had on clients' development and their adult experience/s. Our purpose is to potentially inform counsellors how to effectively support this client-group.

Design/Methodology: Three respondents self-identifying as having experienced periods of mutism in childhood were audio recorded during a semi structured interview. Our data was thematically analysed informed by the principles of phenomenology (Smith et al, 2009). We followed the BACP guidelines for research in counselling and psychotherapy (Bond, 2004).

Ethical Approval: Submission was made to and approved by our college Ethics Board before recruiting respondents; who were offered six no-fee counselling sessions should issues arise due to their research participation.

Results/Findings: Findings indicate that in certain group configurations (e.g. domineering family dynamics/peer-group bullying) respondents felt so disempowered their only safety/defence lay in mutism. Subsequently respondents struggled educationally as childhood mutism negatively affected their higher educational aims and vocational choices as it became generally difficult/stressful to speak in groups. It appears that as adults, if respondents felt any sense of disempowerment, mutism 'kicked-in'. Findings also indicate that as adults, respondents were highly cautious in selecting their social environment(s) and when or who they verbally communicated with. In adulthood some respondents sought psychotherapeutic intervention because of their communication difficulties and the negative impact this had on their lives. Counselling and psychotherapy appeared to help respondents connect to their early sense of disempowerment and why they chose to become mute. This seemed to assist respondents' recognition of their need to feel safe, aim for greater personal achievement/s and have communication choice and control.

Research Limitations: Due to the limited number of respondents it might prove difficult to generalise our findings (McLeod, 2003). Our data is subjective, and our qualitative findings may not be transferable because systematic comparison may be unachievable (Braun and Clarke, 2013).

Conclusions/Implications: It appears that psychotherapeutic/counselling intervention is helpful to this client-group. It appears most effective if counsellors assist clients in identifying early feelings of disempowerment and in identifying why they became mute in certain childhood circumstances/configurations. Such intrapersonal-connection appeared to lead our client respondents to aiming for singular personal achievement and a greater sense of control/safety in verbally communicating.

### Michelle Oldale

### **Poster**

Other Authors: Supervised by Naomi Moller, Helen Bowes-Catton, Rose Capdevila

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Weight-stigma and relational psychotherapy

**Keywords**: Weight-Stigma, relational psychotherapy, clients of size, phenomenological, size-affirmative practice.

Aim/Purpose: This PhD study explores experiences of clients of size in relational psychotherapy. Minimal attention is paid to weight stigma (the 'social devaluation and denigration of people perceived to carry excess weight' (Tomiyama, 2014)) in the psychotherapeutic literature. Size is not a protected factor in the 2010 Equality Act. Davis-Coelho et al (2000) discuss quantitative evidence that implicit weight bias impacts negatively on perceptions of client and therapeutic process. Moller (2014) highlights the importance of a critical stance, challenging key assumptions such as responsibility (for size) and taken for granted links between size and ill health. These, left unchecked, have the potential to lead to stigmatising responses to clients of size.

Design/Methodology: An online (Qualtrics) questionnaire gained 75 responses including 35 detailed qualitative responses from clients of size in the UK, US, Australia and Canada. Questions related to participants' own and therapist response to size, and usefulness/otherwise of interventions. This was supplemented with detail such as gender, sexuality, social class to allow for exploration of the impact of intersectional factors. (Crenshaw, 1989). Participants responded to questionnaire links on social media platforms. Data was analysed using Interpretative Phenomenological Analysis (IPA) (Smith, Flowers and Larkin, 2009). Ethical approval was granted by the Open University Human Ethics Committee (HREC/2956/Oldale).

Results/Findings: Themes included client negative self-response and heightened sense of self-responsibility, self-restriction of material discussed in relation to anticipated therapist responses/privilege, desire/usefulness of processing weight stigma experienced in society.

Research Limitations: The sample of detailed responses was limited in size given the overall response rate. There were limited responses from people of colour and consideration will be given to the development of a more representative sample for stage 2.

Conclusions/Implications: The study is ongoing. Findings from this stage will allow refined questions to be devised to allow for gathering of detailed qualitative data via interviews. It is hoped the study overall will support the production of best practice guidelines for therapists working with clients of size.

References available on request.

# **Nicholas Torry**

### **Poster**

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Early intervention in primary schools: building children's self-awareness and emotional

wellbeing

**Keywords**: Self-referral, counselling, school, early intervention.

Aim/Purpose: To assess how a self-referral counselling service, located on the primary school site, helps schools build children's emotional wellbeing and awareness.

**Design/Methodology**: The research used a mixed methods approach, combining service delivery information from 261 schools in 2016/17 academic year, a thematic analysis of semi-structured interviews with seven Headteachers, and feedback questionnaires with service users.

Ethical Approval: Children's parents/carers are fully informed about the service offered in the school and that anonymised data is used for monitoring and analysis. Parents/carers can withhold permission for children to use the service if they wish. The service operates within and adheres to schools' Safeguarding policies. Interview participants gave informed consent.

Results/Findings: On average, around 33% of the school population use the service at some point within an academic year. Descriptive analysis of the issues discussed by 37,338 children shows that children bring a range of issues, from everyday friendship issues to personal mental health and family problems. In a survey, the majority said they now knew there was someone they could turn to if they needed to. Headteachers of long-running projects reported that the service helped to destigmatise talking about emotions and encouraged children to seek help. The contribution of this to the school's ethos was recognised in Ofsted assessments of pastoral care.

Research Limitations: Currently, there is no routine measure of outcomes for this service and no counter-factual, therefore the effects of the service are not measured in a quantifiable way. However, the mixed-methods data collected can be considered a reliable and valid way to look at how the service is used and give insight into the potential benefits to help explore its effect on emotional wellbeing in the future.

Conclusions/Implications: The service is used widely within schools. Children self-refer for a broad range of reasons and both pupils and school staff report the benefits of using the service. This implies that if a school wishes to promote emotional wellbeing and help-seeking in children, then having a self-referral service as part of the universal mental health provision will be utilised, can have positive social and emotional effects and help build a mentally healthy school culture.

### Clare Whitworth

### **Poster**

**Professional Role**: Psychotherapist

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Male victims of domestic abuse. A hidden problem? How are male victims of domestic abuse presented in academic research?

Keywords: Male victim, domestic abuse, violence.

Aim/Purpose: The aim of this MA research project was to review academic literature about male domestic abuse victims. Specifically, the scope and global reach of the issue and forms of abuse recorded.

Design/Methodology: A narrative synthesis was conducted with papers from five databases. Broad searches returned 517 papers, and from these, eligibility was established through clear inclusion/exclusion criteria. At abstract stage papers were included if:

- Principally about adult male domestic abuse victims.
- Abuse was between intimate partners.

Papers were excluded if:

- Focus was homicide.
- Not a research paper (e.g. book reviews, letters).
- A scenario exploration.

This left 153 papers, which were reduced further to 29 to allow a manageable project. Full breakdown of these decisions can be seen on the poster. Papers were quality assessed using the CASP tool.

Ethical Approval: Ethical approval was not required.

Results/Findings: The synthesis of the data produced several findings. Bi-directional abuse was frequently recorded, and mental and physical impacts were seen to be similar to those experienced by women. Services such as the courts and police played a role, and were also used as an additional form of abuse by female partners (legal-administrative abuse). Little appeared in professional journals, and a greater link between academic literature and dissemination through sources such as these would be beneficial for recognition of the issue.

Research Limitations: Many papers discussed here have small sample sizes. The quality of the conclusions that can be drawn about male victimisation would be improved if more research could be included with larger sample sizes, with studies replicated to see if similar findings emerged. There is also a dearth of UK studies, and more needs to be learnt about the UK male experience.

Conclusions/Implications: This project found several themes forming a jigsaw around the issue of male victims, including 'Usefulness of services', 'Legal and administrative abuse', 'Bidirectional abuse', 'Mental and physical health impacts', and 'Role of stigma'. This dissertation was a first step toward bringing associated literature together, highlighting the scope and range of domestic abuse towards men, and raising awareness of the issue as it may be brought into the room by our therapy clients.

### Mia Zielinska

### **Poster**

Professional Role: Student

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The talking booth: An invitation to get personal in public

Keywords: Casual chat, mental health, resource awareness, non-professional, interpersonal.

Aim/Purpose: Do people find brief, casual chat helpful?

Design/Methodology: The project was set up in the University's main library in a public space. Participants were approached by project facilitators who are non-qualified counselling students. Participants were invited to engage in the project for a 15-minute casual chat followed by a questionnaire.

Ethical Approval: University of Edinburgh, School of Health and Social Sciences.

Results/Findings: 92% of participants felt that brief, casual chat is beneficial to their sense of well-being; over half of the participants found casual talking 'very helpful'; 1 participant found talking with us not helpful at all. No matter how participants felt about casual chat for themselves, all would recommend it for others; 86% of participants found casually talking helpful to them on the day they participated.

Research Limitations: Co-facilitators reported experiencing personal biases during recruitment demonstrated in predominantly male participants. Since the project took place on University grounds, the base population was heavily skewed to under 25 years of age. Participants were mostly approached and asked to volunteer once they understood what they were agreeing to participate in, so results may be skewed towards those who were positively predisposed to casual chat. Survey questions did not define 'casual chat' or 'mental health'.

Conclusions/Implications: The majority of those who engage in brief, casual chat find it helpful. All participants, including those who don't find it helpful for themselves, would recommend casual chat for others. The project itself bears out that those who engage do benefit and that non-professional, brief, casual chat is a service that, if offered, is likely to improve mental health.

# Methods Workshops

### Rod Dubrow-Marshall and Naomi Moller

### Workshop

Professional Role: Programme Leader/Psychologist

Institution/Affiliation: University of Salford Email: r.dubrow-marshall@salford.ac.uk

Setting up a research study and protocol for evaluating the effectiveness of a counselling service - database, methods and analysis

**Keywords**: Database, evaluation, protocol, outcomes, analysis.

**Planned Learning Outcomes**: This workshop will allow participants to gain an enhanced understanding of:

- How to set up a study to evaluate the effectiveness of a counselling service key objectives and stages of the process i.e. a protocol using standardised methods and measures
- The creation of a database with a standardised and verifiable data entry protocol
- The use of specific and robust outcome measurements (e.g. CORE 34/10, GAD7, PHQ7) at particular points (e.g. entry, each session, post-discharge) (quantitative data)
- The use and analysis of audio recordings (with informed consent) and post-session feedback (qualitative data)
- How to perform relevant statistical analysis to evaluate effectiveness of the service (using SPSS)
- Interpretation of statistical analysis and triangulation with analysis of qualitative data
- How to gain ethics committee agreement for a research project of this nature

Structure and overview of content: The workshop will present the stages in the process of setting up a research study to evaluate the effectiveness of a counselling service i.e. a protocol which can be followed to establish and execute a robust study of this type with standardised procedures and use of established reliable and valid outcome measures.

The key objectives of such a research study will be identified and the necessary steps to realise these objectives. In particular the workshop will go into the detail of how to set up a database of client data, the choice of key outcome measures (e.g. CORE 34/10, GAD7, PHQ7) and how data should be entered, verified and securely stored. The parallel use of qualitative data, including audio recordings and post-session feedback will also be covered, as will how to perform a series of statistical tests on SPSS (means, correlations, regression and analysis of variance and covariance) and how to interpret such analyses including in relation to qualitative data and the study objectives. Data protection and ethical issues will also be covered as part of this workshop and as part of the study protocol.

Target audience: Counselling service managers, counsellors and psychotherapists working in counselling services, researchers in university departments. Attendees will not need significant prior knowledge of research methods.

# **Professor Lynne Gabriel**

### Workshop

Other Authors: Rich Knight, Jeannette Roddy, Vee Howard Jones, Kate Smith, Zoe Chouliara,

Sally Lumsdaine, Fran Renwick, Collette Lewis

Professional Role: Director of York St John Counselling & Mental Health Clinic

Institution/Affiliation: York St John University

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Setting up a university-based counselling research clinic: opportunities, challenges and potential solutions

Keywords: Practice-based research, clinics, databases, research methodologies.

Planned Learning Outcomes: The workshop will support participants to identify potential opportunities and challenges in developing a research-active clinic, as well as potential solutions, in setting up a research clinic in their context. The workshop also seeks to establish a peer network for support and advice.

Structure and overview of content: A university-based counselling clinic that provides counselling services to members of the public, while also potentiating research, offers important opportunities. For counselling programme students, a clinic offers an in-house placement, where the model of therapy matches the model students are learning, as well as the opportunity to participate in clinically relevant research projects. For counselling programme staff in HEI contexts, a clinic facilitates meaningful research and hence potential career progression. For a university, a clinic offers a socially relevant means to engage with and contribute to the local community. However, developing a clinic presents challenges; not least in relation to administration, managing client through-flow and staffing of core tasks and services.

In the first part of this workshop, members of the Clinic Consortium (comprised from the university counselling departments based in the institutions at Abertay, Newman, Salford and York St John) will describe how their clinics came to be set up, the challenges they faced as well as how they solved them. In doing so they will elucidate a variety of potential financial, pedagogic and operational models for a university-based counselling research clinic. They will also outline their minimum data set and highlight the challenges and potential rewards of collective data gathering and dissemination.

The second part of the workshop will comprise of a small-group activity, facilitated by the presenters, in which participants use a provided 'checklist of things to consider' to brainstorm how they might go about setting up a counselling research clinic in their own institution.

In the final part of the workshop, the potential benefits and membership conditions for joining the consortium will be introduced and participants will have the opportunity to have a whole-group discussion and to ask questions.

Target audience: No prior knowledge is required for this workshop; anyone (HEI or private) who is interested in setting up a research clinic is encouraged to attend.

# Helen Gedge

### Workshop

Professional Role: Counsellor, Play Therapist and Filial Therapist

Institution/Affiliation: Part time PhD student at University of Salford/Hope Street Counselling

and Play Therapy

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Measuring change in parent-child interactions following family therapy interventions

**Keywords**: Measuring change, parent-child interactions.

Planned Learning Outcomes: Through this interactive workshop, participants will gain an understanding of the Measurement of Empathy in the Adult Child Interaction (MEACI) tool as a method of determining the development of empathy between a parent and child during a therapeutic intervention with the family and at its conclusion. They will have the opportunity to practice using the measurement through an experiential exercise.

Participants will also be introduced to an adapted version of Elliot's Change Interview (in McLeod, 2010) as a method of measuring change following a family therapy intervention.

Participants will be encouraged to consider how these two measurements can be applied within their own counselling and psychotherapy practices.

Structure and overview of content: During my research study introducing filial play therapy to mothers and their children, victims of familial violence, at a shelter in southern Brazil, I incorporated the measurement tool known as the MEACI or the Measurement of Empathy in the Adult Child Interaction. The tool was originally created by Stover et al. (1971) and then further developed by Dr Sue Bratton (1993), both integrating and researching filial therapy in their work with families.

This workshop therefore, aims to introduce the MEACI tool to participants considering, in particular, how it has been integrated into filial therapy practice and research. This will be illustrated through video clips of the researcher's own practice after which participants will have the opportunity themselves to trial its use in response to a video clip. Discussion in small groups and feedback to the main group will be encouraged to further learning.

Alongside the MEACI, my research study also used a self-adapted version of Elliot's Change Interview to explore how the mothers experienced change following the filial therapy intervention. Experiential exercises will help participants to explore change in their own learning and in considering how these two measurements might be applied within their own practices working with families.

Target Audience: This workshop is aimed at both experienced counsellors and psychotherapists who are working with families and those who are in training or interested in working therapeutically with families and who are seeking to learn about possible tools to measure the change occurring through the therapeutic intervention.

# Rachael Klug and Pip Weitz

### Workshop

Professional Role: Lead for CORE-Net, ACTO Board of Directors

Institution/Affiliation: Association for Counselling and Therapy Online (ACTO)

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An evaluation of using CORE-Net with online therapy

Keywords: Pilot evaluation, CORE, online therapy.

Planned Learning Outcomes: We will explore from a research viewpoint why we chose this particular research tool, the methodology of employing CORE-Net in online therapy drawing from evidence gained during the pilot, and why training is essential (the need for high quality data) before using this tool, including demonstrating safeguarding assessments, and feedback for both client and therapist.

From a clinical viewpoint we explore the impact that using outcomes measures has on the therapeutic relationship itself and the significant clinical benefits from using CORE-Net.

We also examine the implications that arise from these benefits for the therapists' self-development and for supervision, following the work of Rousmaniere (2016) on deliberate practice.

We will demonstrate how CORE-Net works in different online formats, such as webcam, virtual reality, and audio, and why online therapy lends itself to the use of an outcome measure like CORE-Net.

Structure and overview of content: In 2018 ACTO and CORE carried out a successful pilot considering the benefits and limitations of using CORE-Net as a tool to evidence online therapy. Subsequently we wrote up a report which recommended that ACTO would purchase CORE-Net as a membership benefit for all professional members. This recommendation was voted on unanimously and CORE-Net has now been purchased for use by ACTO members.

We specifically chose CORE-Net as it has itemised tracking features and because it is pandiagnostic, so we can evaluate a range of clients' symptoms. Importantly, CORE-Net provided us with a digitalised outcome measure which lends itself to online practice.

Our small pilot study found significant and rapid improvement in symptom management and marked benefits for affect regulation as a result of using CORE-Net in online therapy.

Target Audience: This workshop is aimed at experienced practitioners/researchers and trainees alike. As aspects of this workshop are innovative, such as VR therapy, it may have a wider interest.

For more information about either joining ACTO or about ACTO's use of CORE-Net please contact core@ACTO-org.uk.

# Louise Knowles, Emma Broglia and Charlotte Williams

### Workshop

Professional Role: Head of Counselling and Psychological Wellbeing Service

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Embedding research into student counselling services in UK universities: rupture and repair of the researcher-practitioner relationship

**Keywords**: Practice-based research, student counselling services, service development.

### Planned Learning Outcomes.

- 1. Participants will gain an understanding of the practical implications of embedding research into their service/practice including how to involve staff into the design and implementation of research projects.
- 2. Participants will gain an understanding of the relationship between research and practice and how research-based practice can help to shape evidenced based research.
- 3. Participants will gain an understanding of how to frame a research question.

Structure and overview of content: Barriers to accessing psychological therapies is a global issue, which prevents timely and preventative action. Increased demand, reduced funding, dropout and engagement issues are some of the many treatment barriers of traditional psychotherapeutic interventions. These challenges are further complicated when clients have reduced ability to attend sessions, do not feel ready to seek help or would otherwise not have access to support. Embedding research into practice can overcome these challenges, contribute towards the evidence base for psychological therapies and can protect services in the future in terms of securing funding, informing service development and demonstrating effectiveness.

In the first part of this workshop, we will describe the challenges of student counselling services and the strategies used to overcome these. We will also present the experiences of a postdoctoral researcher and head of service in our journey to embed research into the service. In doing so, we will present the methods used to identify the practical research needs of the service.

In the second part of the workshop, participants will be encouraged to reflect on the potential research questions they would like to answer to inform their service and/or practice. Activities will be used to help participants to consider the implications of embedding research into their service/practice and how to include their wider therapeutic team in the design and implementation of the research projects. This will include the consideration of sharing good clinical practice, forming practice research networks and special interest groups, linking with external services.

Target Audience: As similarities with other sectors will be made throughout, this workshop is aimed at anyone who is interested in the relationship between practice, practiced based research and evidenced based research.

# **SYMPOSIA**

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### Symposium - Susan Stephen

# Susan Stephen, Laura Bell, Ruth Love, Rebecca Moran and Emily Price

#### Overview

Professional Role: PhD Candidate

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Deterioration as an outcome of therapy: a systematic case study group investigation

**Keywords**: deterioration, therapeutic outcome, person-centred therapy, case study, hermeneutic single case efficacy design.

Aims of the Symposium: Deterioration as an outcome of counselling and psychotherapy is an under-researched area. In this group investigation we conducted a systematic case study series to explore the outcome of therapy for eight clients who accessed person-centred therapy at a UK-based university counselling research centre: four whose outcome data, measured using the Strathclyde Inventory (SI; Freire, 2007), suggested that they had reliably improved by the end of therapy ('improvers') and four whose SI data suggested that they had reliably deteriorated ('deteriorators').

Each individual case was examined by a researcher using the adjudicated Hermeneutic Single Case Efficacy Design (HSCED; Elliott, 2014). For the first time, researchers used an adapted form of the adjudicated HSCED method for those clients whose SI scores indicated deterioration during therapy. Following the completion of the eight case studies, a metasynthesis of the case study series was carried out to identify and compare general and typical features of the therapeutic relationship, process, and outcome of therapy for the two groups in order to better understand the factors that may have contributed to the apparent deterioration at the end of therapy experienced by the group of 'deteriorators'

The aims of this symposium are to present what we have learned about deterioration as an outcome of therapy and to discuss the potential implications of our findings for practitioners and service providers.

### Contribution of each symposium paper to the overall theme:

In Paper 1 we will introduce the adapted HSCED method used in this investigation, illustrating the method with the case of Sofia.

In Paper 2 we will discuss the challenges of evaluating therapeutic outcome for a client who appeared to have deteriorated in therapy, illustrating the process with the case of Luke.

In Paper 3 we will present the key findings of our metasynthesis of the case study series, identifying key features that may offer an explanation for the different outcomes experienced.

Implications of the symposium theme for counselling and psychotherapy theory, research and practice: This symposium highlights the complexity of therapeutic outcome. It emphasises the need for practitioners and researchers to increase understanding of aspects of therapy that can be experienced as difficult by clients and therapists leading to loss of hope and incomplete therapeutic processes.

### Symposium - Susan Stephen

### **Emily Price and Rebecca Moran**

### Paper 1

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Developing the Hermeneutic Single Case Efficacy Design (HSCED) method to investigate deterioration in therapy: the case of Sofia

**Keywords**: deterioration; therapeutic outcome; person-centred therapy; case study; hermeneutic single case efficacy design

Aim/Purpose: This case study is one of a series of systematic single case studies conducted to investigate post-therapy deterioration, an area which is rarely explored in counselling research. In this group investigation we aimed to explore the mediator and moderator factors that contribute to client deterioration over the course of therapy using an innovative method, the Hermeneutic Single-Case Efficacy Design (HSCED; Elliott, 2014), designed to evaluate the efficacy of therapy on a case by case basis. Previous HSCEDs have evaluated post-therapy improvement; this case developed the method to consider client deterioration.

Design/Methodology: Drawing on a legal model of presenting arguments, the HSCED allows the researcher to analyse a large volume of qualitative and quantitative data and gain insight into the complexity of the client's therapeutic journey. The researcher organises the data into a 'rich case record' then analyses this data to develop two competing cases: that the client did deteriorate by the end of therapy, as a result of their therapeutic experience (affirmative case); and a counter-argument that the client did not deteriorate as a result of therapy (sceptic case). These cases are then adjudicated by a panel of three judges. We will illustrate the method with the case of Sofia, a client who, after 20 sessions of PCT, showed reliable deterioration and therefore was selected for inclusion in this series of case studies.

**Ethical Approval:** University Ethics Committee.

Results/Findings: The judges decided that the client showed "slight-moderate" deterioration over the course of therapy and that this was "slightly-moderately" due to therapy. During her time in therapy, the client experienced a change of therapist and several negative extra-therapy events which the judges also held somewhat accountable for client deterioration.

Research Limitations: Limitations include biases when considering client data. Furthermore, it is difficult to account for client deterioration. As this is a new development to the research, further investigation is required into how this should be measured.

Conclusions/Implications: Results suggest that both mediator and moderator factors can prevent clients from becoming "fully functioning" (Rogers, 1963). However, this does not necessarily detract from the efficacy of PCT but rather suggests that other factors can negatively impact its effectiveness.

### Symposium - Susan Stephen

### **Ruth Love and Laura Bell**

### Paper 2

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Challenges in adjudicating a Hermeneutic Single Case Efficacy Design (HSCED) investigation into deterioration in therapy: the case of Luke

**Keywords**: Deterioration, therapeutic outcome, person-centred therapy, case study, hermeneutic single case efficacy design.

Aim/Purpose: This case study was part of a group investigation into deterioration in therapy. In this paper we will highlight the particular challenges for the adjudication panel when evaluating deterioration using a newly adapted version of the Hermeneutic Single Case Efficacy Design method (HSCED; Elliott, 2014).

Design/Methodology: HSCED is a legalistic framework which utilises quantitative and qualitative data to determine therapy efficacy in single cases. The case of Luke, a client who attended 55 sessions of person-centred therapy, was investigated using an adapted version of the adjudicated HSCED method to ascertain the degree and causes of his apparent deterioration over the course of therapy. A Rich Case Record and affirmative and sceptic cases were prepared and adjudicated by three judges, who were peers of the researcher also conducting HSCED investigations into the experience of clients whose outcome data suggested that they had improved in therapy.

Ethical Approval: University Ethics Committee.

Results/Findings: The judges concluded that Luke had not substantially deteriorated, and that any deterioration was moderately, but not substantially, due to therapy. They determined that his personal attributes and circumstances played a significant role in his apparent deterioration in particular his inability to engage verbally and emotionally in therapy. Therapist impatience and frustration in seeking to engage the client resulted in inconsistent therapeutic practices that occasionally appeared potentially harmful. Despite this, the judges noted that the client showed signs of improvement during the second half of therapy, finding his own way to engage and express his experience within the process.

Research Limitations: This study was written and adjudicated by trainee person-centred therapists, therefore the element of bias cannot be ignored. Despite the effort to be open to any conclusion, faith in the person-centred approach possibly led to attributing deterioration elsewhere. Furthermore, the judges had been investigating improving clients, which might have led them to have a greater focus on signs of improvement.

Conclusions/Implications: As is typical in HSCED studies, the adjudication process found the client's outcome to be complex. This study offers some hope into cases that initially appear bleak and highlights aspects of therapy that could be hindering or damaging to clients.

# Susan Stephen, Laura Bell, Ruth Love, Rebecca Moran and Emily Price

### Paper 3

Other Authors: Maha Kahn, Hannah Macintosh, Melanie Martin, Brigid Whitehead

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What features of therapy may contribute to a client's deterioration? Metasynthesis of a systematic case study series

**Keywords**: Deterioration, therapeutic outcome, person-centred therapy, case study, metasynthesis.

Aim/Purpose: The purpose of this study was to increase understanding of deterioration as an outcome of therapy by identifying features of the therapeutic experience that may have contributed to the deterioration in outcome data at the end of therapy.

Design/Methodology: We conducted a metasynthesis of a series of eight hermeneutic single case efficacy design (HSCED) studies to compare the process and outcome of therapy for clients who improved or deteriorated by the end of person-centred therapy at a UK-based university counselling research centre. The metasynthesis was carried out using grounded theory analysis in which meaning units were extracted from HSCED records for the eight case studies then organised using open coding into a hierarchical system of categories and sub-categories. We labelled each meaning unit as originating from either an 'improver' or 'deteriorator' case study in order to identify general, typical, variant and unique occurrence within the developing categories.

Ethical Approval: University Ethics Committee.

Results/Findings: Based on the HSCED records, it was typical for the 'deteriorators' to experience their therapeutic relationships as safe, warm and supportive. Nevertheless, they experienced discomfort in opening up and in finding their own direction in the process. All four 'deteriorators' experienced a hindering change of therapist, typically occurring at an unfortunate time for the client. In contrast, the two 'improvers' who experienced a therapist change found the experience positive and without impact. Another key difference was that, while the improvers appeared able to integrate therapy into their life, typically the 'deteriorators' were not. Finally, although 'deteriorators' did in fact improve in key difficulties, noting increased self-awareness, self-understanding and sense of agency, none of them expressed a readiness to end therapy but instead appeared to lose hope resulting in an incomplete therapeutic process.

Research Limitations: The findings may be limited by missing data and bias, subjectivity and inconsistency within the analysis and interpretation of the data both at the case study level and within the metasynthesis itself.

Conclusions/Implications: A variety of difficulties for client and therapist may contribute to delay and disruption in the development of the therapeutic relationship, resulting in loss of hope and incomplete therapeutic processes.

### Jennifer Holland

### Overview

Other Authors: Cecelia Bayless-Conway, Jackie Colley, Jessica Hunneybun Professional Role: PhD Student (BACP Studentship), Psychotherapist

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Understanding psychological growth within a person-centred clinical setting

Keywords: Growth, empathy, authenticity, wellbeing, masculinity.

Aims of the Symposium: This symposium presents a series of research projects conducted within The Human Flourishing Project, which is a person-centred research clinic connected to The University of Nottingham. This is one of the first psychotherapy research clinics to focus measurement on psychological growth that occurs within person-centred psychotherapy. This is achieved by using a mixture of existing and familiar person-centred measures, as well as incorporating new measures from the field of positive psychology.

Contribution of each symposium paper to the overall theme: Our first paper looks at the introduction of a new measure of wellbeing, the Scale of General Wellbeing, which is a positive psychology measure of wellbeing, developed for this purpose as a state clinical measure. The second paper focusses on the relationship between client ratings of empathy and observer depth of experiencing and links to improved outcomes. The third paper examines the extent to which the therapeutic relationship facilitates authentic growth. The final paper looks at the relationship between hegemonic masculinity and levels of experiencing for male clients in person centred therapy.

Implications of the symposium theme for counselling and psychotherapy theory, research and practice: Clinical research is a critical area of development for person-centred therapists, in order to demonstrate its efficacy and ensure its future. The Human Flourishing Project is a new research clinic, that looks beyond the traditional medical model conceptions of distress and focuses on measuring psychological growth. These papers mark the beginning of a stream of new research that will be produced by post graduate students and academics linked to the HFP.

### Jennifer Holland

### Paper 1

Professional Role: PhD Student (BACP Studentship), Psychotherapist

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Validation of the shortened scale of general wellbeing (SGWB) as an outcome measure of human flourishing in person centred psychotherapy

**Keywords**: Wellbeing, measurement tools, positive psychology.

Aim/Purpose: The aim of this paper is to present the findings of a two-part study looking into the validation of the SGWB as a state measure of wellbeing in clinical practice. The SGWB is a growth measure, developed by positive psychologists, adapted as a state measure for the purpose of this research. It is hoped that it can be utilised as a clinical measure for humanistic therapists, wishing to understand and measure psychological growth.

Design/Methodology: Forming a two-part study, Study one comprised a survey-based study was carried out to understand the dimensionality of the SGWB, in relation to other more established scales, as an adapted state version of the original trait measure developed by Longo, Joseph and Coyne in 2017. The data set compiled 544 respondents, correlational analysis was completed to compare the results of the SGWB-S with the Authenticity scale and the Warwick Edinburgh Scale of Wellbeing. Study two identified and reported five good outcome mini case studies, using client data collected from the Human Flourishing Project, specifically examining the use of the SGWB-S scale as a clinical measure of human flourishing. Both studies received ethical approval from the University if Nottingham.

### **Ethical Approval:**

Results/Findings: The findings indicated that the SGWB-S is a satisfactory measure of wellbeing in relation to other measures traditionally used in this context. The case study research identified that the SGWB-S was successfully able to sensitively track state changes to positive functioning longitudinally.

**Research Limitations**: Lack of clinical measures for comparative purposes, small case study sample.

**Conclusions/Implications**: This research provides further validation to the proposed use of the SGWB-S as a congruent clinical measure of human flourishing in person-centred therapy.

### Cecelia Bayless-Conway

### Paper 2

An exploration of the facilitative and predictive effects on the person-centred experiential relationship on client authentic growth

**Keywords**: Relational depth, empathy, relationship, authenticity.

Aim/Purpose: The aim of this research study was to build upon existing literature suggesting strong links between authenticity and psychological wellbeing through an exploration of aspects of the person-centred experiential relationship, to understand the facilitative and predictive effects of such on authentic growth in clients attending therapy.

Design/Methodology: A quantitative, longitudinal, non-experimental design was utilised. A clinical sample of 46 participants who had completed a minimum of ten sessions of personcentred experiential therapy was attained through the Human Flourishing Project.

Participants completed a series of questionnaires measuring outcome and relationship between client and therapist over time. The Authenticity Scale was utilised to measure client authentic growth. In order to measure aspects of the therapeutic relationship, the Barrett-Lennard Relationship Inventory (BL-RI), Relational Depth Inventory (RDI) and Agnew-Davies Relational Measure (ARM-5) were completed by all participants.

Correlational analysis, multiple regression analysis and cross-lagged correlational panel analysis was used to analyse the data.

#### **Ethical Approval:**

**Results/Findings**: Participant authenticity scores increased over time, with positive correlations found between all relational variables and authenticity.

When controlling for authenticity scores taken at intake session, significant associations were yielded between BL-RI scores and Authenticity scores at every time point, further supporting Rogers' 1957 hypothesis that the therapeutic relationship, inclusive of the core conditions, leads to significant authentic client growth.

Research Limitations: The main limitation identified is the sample size. A sample of at least 70 participants would be preferable for greater generalisability of results. The study would have also greatly benefited from a longer time period of at least 20 sessions to provide greater depth to understanding of change over time.

Conclusions/Implications: Results attained from this study significantly contribute to understanding around the significance of concepts within person-centred theory and how this manifest in practice. Practitioners can gain valuable insight into the importance of the therapeutic relationship, inclusive of the core conditions, relational depth and therapeutic alliance in facilitating authentic change in their clients.

# Jessica Hunneybun

### Paper 3

What is the relationship between hegemonic masculinity, experiencing levels and authenticity in person-centred experiential therapy with male clients?

**Keywords**: Hegemonic masculinity, authenticity, experiencing levels.

Aim/Purpose: This paper presents the findings of a crossed-lagged correlational study examining the relationship between hegemonic masculinity, experiencing levels and authenticity in male clients in person-centred therapy.

Design/Methodology: Audio-recorded data of ten male clients were taken from the Human Flourishing Project (HFP), run by the University of Nottingham, this formed the sample for the study. The Experiencing Scale (Klein et al., 1969) was applied to an eight-minute segment of sessions 5 and 10, these ratings were cross validated by a second researcher whose sample and theme overlapped those of this project. Clients from the HFP complete standardised measures including the Authenticity Scale; data from sessions 5 and 10 using the Authenticity Scale was used in this study. A third scale, the New Observer Rated Masculinity Scale (NORMS), was produced for the purpose of examining levels of hegemonic masculinity in this study and was also applied to an eight-minute segment in sessions 5 and 10. The research design allowed for the data to be examined both cross sectionally and longitudinally; a cross-lagged correlational analysis was applied to the data to determine if the hegemonic masculinity had a causal effect on experiencing and authenticity or vice versa.

#### **Ethical Approval:**

Research/Findings: The results provided support for the validity of the Experiencing Scale and the Authenticity Scale and for the person-centred approach. Nonetheless, the study did not find that decreasing levels of hegemonic masculinity caused increasing levels of experiencing and authenticity as predicted. However, the study did find that as participant hegemonic masculinity levels increased so did levels of experiencing. Overall, the study has provided a basis for future research to explore the relationship between hegemonic masculinity, experiencing levels and authenticity.

**Research Limitations**: The sample size for this study was too small for the research to provide meaningful results; the NORMS is a new and as yet unvalidated measure.

Conclusions/Implications: The findings provide an opportunity for further exploration into the relationship between hegemonic masculinity and experiencing levels in male clients in personcentred therapy. There is an opportunity for future research to develop the NORMS into a valid observer rated scale.