30th BACP International Research Conference 2024

Enriching research, practice and policy with lived experience

Abstract Booklet

Keynote Presentations

How lived experience expertise can shape mental health research: exploring concepts and practices

Vanessa Pinfold

McPin Foundation

Many mental health research funders ask research teams to involve the beneficiaries of research in the development and delivery of projects. This is often known as patient and public involvement (PPI) in research but there are also other models. This presentation will explore a brief history of lived experience involvement work in mental health research across the UK as well as drawing on practical examples from the McPin Foundation spanning bio-psycho-social research. This will include research on: loneliness, depression and anxiety; virtual reality therapy for psychosis and social anxiety; youth mental health; inequalities and mental health. What kinds of lived experience are drawn upon to shape research? What skills do lived experience researchers employ and what specific support and supervision approaches need to be put in place? What is the difference between co-production, PPI, participatory action research and peer research? Challenges and opportunities will be reflected upon and as well as a vision for future research agendas.

Bio

Vanessa Pinfold has worked in mental health research for over 25 years, starting as a geographer with a PhD from the University of Nottingham. She has led teams in both university research departments and the voluntary sector particularly researching stigma and discrimination, interventions for psychosis, support for families, recovery and social networks, peer support, public perspectives of inequality and mental health. Vanessa is the co-founder and research director of a UK-based mental health research charity - the McPin Foundation, which recently celebrated its 10th anniversary. McPin champions the role of experts by experience in mental health research and works collaboratively with others to ensure people with mental health problems can best engage with and influence the generation of evidenced based and evidenced informed practices. How research is carried out is as important as the knowledge generated in studies, thus McPin are keen to pioneer new research methods and partnerships. More information about the McPin Foundation is available at www.mcpin.org.

Vision for change: Improving client services within the sight loss sector through lived experience, research, dialogue and collaboration

Dr Mhairi Thurston

Senior Lecturer, Abertay University

This keynote presentation provides a comprehensive overview of a research journey, which began with the profound personal experience of receiving an unexpected diagnosis of an incurable, degenerative sight condition. Describing the transformative impact of this lived experience, the presentation charts how this influenced the development of a research agenda for change and how, from an 'insider' position, collaborative partnerships were formed within the sight loss sector. The combination of lived experience, research, dialogue and collaboration has, subsequently, influenced the provision of counselling and mental wellbeing support for people with sight loss in the UK and in Ireland.

Bio

Dr Mhairi Thurston is a registered, accredited counsellor, a former Governor of BACP and a Senior Lecturer in Counselling at Abertay University. She is interested in the social and emotional impacts of acquired sight loss, and broader themes of disability, equality, and inclusion. Winning the BACP New Researcher Prize in 2009, she sees herself as an 'academic activist,' using research and collaboration to make practical changes for people with sight loss. She developed a Pluralistic model of counselling, tailored for people with sight loss and collaborated with Royal National Institute of Blind People (RNIB) to create an award-winning training course for counsellors. Additionally, her collaboration with Retina UK resulted in a free online resource supporting mental well-being in the visually impaired community. Previously, she served as an Associate Editor for the *International Journal of Disability*, Development, and Education and currently she sits on the Editorial Board of *Disability and Society*. She is current Chair of the BACP Good Practice Committee, Chair of the Vision Impairment Research Network and Past Chair of the BACP Research Committee. Mhairi is severely sight impaired.

Keynote panels

Shaping practice, policy & politics with lived experience

Panelists

Dr Lisa Morrison Coulthard – Director of Professional Standards, Policy and Research, BACP
Niamh Brownlee – Author, mental health campaigner and person-with-lived experience
The Rev. Dr Simon Mason – Chair of the National Action Team, Citizens UK
Rameri Moukam – Founder and clinical director of Pattigift Therapy
Preet Kaur Gill MP – MP for Edgbaston, shadow minister for primary care and public health

With an impending general election, BACP's policy team have brought together voices from across the UK who have worked with us to deliver national and local political support for counselling by harnessing the power of lived experience.

The importance of the inclusion of people with lived experience in the design, implementation and dissemination of research is huge. This has become a major target for funders of research to ensure that projects are designed with the service user voice at the centre and that any outcomes are of the utmost importance of the communities we serve. This inclusion of people throughout the research process then has important implications for how services are designed and evaluated.

The session aims to provide advice to researchers on how they can best utilise experiential learning to develop evidence-based policy which is both informed by, and reflects, lived experience.

The panelists will consider the following questions:

1. What are the benefits of using lived experience, and how has it shaped your work to deliver change?
2. How can lived experience be used to enhance the evidence base and research to help build more compelling arguments that secure change?
3. What are some of the key barriers to engaging lived experience in shaping research, policy and practice and how can these be addressed?
4. How do we avoid being tokenistic in the way we used lived experience?
5. How do we ensure that Government and opposition politicians learn from lived experience and deliver better informed policy solutions?

The role of BACP in maximising the potential of counselling and psychotherapy research in the UK

Prof. Andrew Reeves (chair) – University of Chester
Prof. Michael Barkham – University of Sheffield
Prof. Mick Cooper – University of Roehampton, London
Prof. Divine Charura – York St. John University
Prof. Lynne Gabriel – York St. John University
Prof. John McLeod
Prof. Naomi Moller - The Open University
Prof. Kate Smith – University of Aberdeen

The British Association for Counselling and Psychotherapy (BACP) is the largest professional membership body within the field of counselling and psychological therapies in the UK, but there is a mismatch between research activity and research impact.

To achieve greater impact, changes require adopting research strategies that are less singular (i.e., individually-project based) and more collaborative (i.e., collegial) and developing cumulative knowledge around specific topics. As a principle, the highest value is placed on data that has the potential for informing and improving practice, but equally recognising that data can take many forms. Overall, clarity of research strategy combined with collaborative and collective responsibility from leaders in the field has the potential for realising the full potential of the organisation's research capacity and impact.

This plenary 'town hall' event provides an opportunity for delegates at BACP's Research Conference to contribute to this dialogue about how best we can achieve greater impact from our research, and what might BACP's continued role be in supporting the developments suggested. This discussion aims to further develop ideas outlined in a paper that has been submitted to *Counselling and Psychotherapy Research* journal.

Research Papers

Therapists' perspectives on working with clients taking antidepressants - a qualitative study

Beth Stillings Cohen

Counsellor/Psychotherapist, University of Salford

Correspondence: bettystillings@hotmail.com

Aim or purpose

Recent rises in antidepressant prescribing and lengthening durations of usage mean therapists have become increasingly likely to work with clients who are taking antidepressants. However, very little research has explored therapists' views on working with this client group.

This research aimed to gain insight into therapists' lived experiences of working with clients taking antidepressants and their perspectives on the relationship between antidepressants and therapy.

Design or methodology structure

A qualitative methodology was selected, with the aim of generating knowledge that was is grounded in participants' experiences and allowed for a depth of engagement that would expand our understanding of an under-researched topic.

Semi-structured interviews were conducted with nine UK-based therapists. Participants were from varied therapeutic orientations and ranged from recently qualified therapists to those who had been in practice for many years. Interviews were transcribed using an orthographic notation system. Reflexive Thematic Analysis was used to analyse the interview data. The study was underpinned by a Critical Realist framework.

Ethical approval

University of Salford

Results or findings

Three key themes were identified: 1) "My views are mixed" – Therapists Perspectives on Antidepressants; 2) "We are not medical professionals" – Challenges of working with clients taking/withdrawing from antidepressants and 3) "Let's put it on the table, let's talk about it" – Actions needed to support best practice. These themes were then split into eight sub-themes.

Research limitations

The study was rigorous and transparent, clearly detailing and evidencing the research methods used and the various stages of data analysis. The analysis was plausible, coherent and grounded in the data; elements identified as fundamental to successful qualitative research.

As the study was conducted by a single researcher, there was no possibility of triangulation with other coders. Therefore, it is important to understand the findings as telling a story about the data set that reflects the researcher's interpretative lens.

Conclusions or implications

Key recommendations suggest there is a need for therapeutic governing bodies and training providers to reconsider their responsibilities in how to best equip and support therapists to work with clients taking antidepressants. A need for improved training and more dialogue within the therapeutic fields on this topic is highlighted.

Considerations given to issues of equality, diversity and inclusion

Whilst the sample selected was diverse in relation to participants' age and gender, there was little variation in ethnicity. All the therapists who expressed an interest in participating in the study were White. Hence, the study's findings reflect this demographic. Future research should consider recruitment strategies that would help to ensure the inclusion of Black and Minority Ethnic (BME) participants.

A preliminary RCT looking at the impact of state-mindful self-compassion on sexual function post-breast cancer treatments

Samantha Banbury[1], Amanda Visick[2] & Chris Chandler[3]

[1]Reader in Psychology, London Metropolitan University; [2]Senior lecturer, London Met Uni; [3]Professor of Psychology

Correspondence: s.banbury1@londonmet.ac.uk

Aim or purpose

Limited registered trials have evaluated the use of mindful compassion for sexual functioning, particularly among women post-breast cancer treatment. The current study assessed the effectiveness of an online mindful-compassion intervention among n=52 women aged 18-50 years to improve sexual functioning, well-being and quality of life.

Design or methodology structure

The study comprised a waitlist-controlled randomised study and a content analysis measuring participants' experiences of the intervention. Participants completed assessments measuring mindful compassion, sexual functioning, sexual self-efficacy, well-being, and quality of life at weeks 0, 8 and 12 (follow-up).

Ethical approval

The research was ethically approved by London Metropolitan University Ethics Review Panel, 10/08/2022

Results or findings

Outcomes favoured the intervention in all domains. Sexual functioning varied between the experimental and delayed group, with orgasm, sexual pain and sexual satisfaction. A high African Caribbean cohort contributed to this study. The content analysis of feedback suggested improved self-compassion, sexual functioning, and quality of life. Participants also reported the need to include partners to explore their sexual needs.

Research limitations

Whilst cultural differences may have influenced results, it cannot be ruled out that an anticipatory effect yielded differences between the active and delayed groups in sexual functioning. Recruitment was low, and hence, the small sample in this study cannot be generalisable to the broader population among women post breast cancer. Whilst as a brief online intervention, this appears effective, outcomes might have been more favourable with a longer intervention duration.

Conclusions or implications

This online mindful compassion intervention supported sexual functioning, sexual self-efficacy, well-being and quality of life in women post-breast cancer treatment. Participants in this study provided feedback indicating the need for this intervention to include their partners. Variations in sexual pain, sexual satisfaction and orgasms varied between the active and delayed groups, where possible cultural factors coupled with an anticipatory effect might have influenced outcomes. Future research should re-pilot this intervention among diverse ethnic and cultural groups. We end this study by voicing the needs and opinions of the participants in this study, "We are human, and we have needs. We felt like we had been shut down when the topic of sex was raised (in healthcare). With mindful compassion, our lives are better." Collaboration between NHS psychosexual and oncology departments using this intervention might better support this cohort of women.

Considerations given to issues of equality, diversity and inclusion

African, Caribbean and Pakistani groups were diagnosed with later-stage cancer with more aggressive treatments. Future research must address these implications in bio-psychosocially/sexually supporting ethnically and culturally diverse women with breast cancer.

Disclosing Racial Trauma in Psychological Therapies: Exploring the Experiences of Racially Minoritised People in the UK

Nicole Samuel

Clinical Psychologist, University of Surrey

Correspondence: n.ks.samuel@outlook.com

Aim or purpose

Exposure to racism is repeatedly experienced by individuals from racially minoritised backgrounds, and has a wide range of negative emotional, physical, and social consequences. Though this has been highlighted by prominent global events in recent years, the traumatising effects of racism are under-recognised. Psychological therapists' lack of sufficient knowledge, training and confidence to sensitively manage conversations about racism has important implications for the standard of care provided to racially minoritised clients, including risks of further harm in therapy. In order to meaningfully adapt training, practice and supervision of psychological professionals to better serve racially minoritised populations, we must first understand how they experience the process of disclosing racial trauma in psychological therapies. This study therefore aimed to explore: how do racially minoritised people experience disclosing/attempting to disclose racial trauma in therapy?

Design or methodology structure

Data were collected via a qualitative online survey, advertised via social media. Participants were 28 people who identified as belonging to minoritised racial groups, who had engaged in psychological therapy in the UK. Therapy spanned a range of modalities and providers. Data were analysed using an inductive, reflexive thematic analysis.

Ethical approval

University of Surrey Ethics Committee.

Results or findings

Three superordinate themes were constructed from the data: (1) The Dangers of Disclosure; (2) Holding the Burden; and, (3) Feeling Heard and Held. These demonstrated the range of potential harms and burdens associated with disclosures of racial trauma in psychological therapy, togetehr with examples of meaningful, validating therapist responses to disclosure.

Research limitations

The recruitment strategy and survey design may have skewed the sample in favour of participants who were digitally-enabled, and who were also psychological professionals. However, much of the study's findings support wider literature relating to racially minoritised people's experiences of talking about racism and racial trauma, suggesting that they are less likely to be unique to the current sample as they broadly reflect known racialised social phenomena.

Conclusions or implications

All therapists must take an active antiracist stance through deliberate self-reflexivity and education on issues of whiteness, racism and racial trauma. This should be embedded within the training, practice and policy in the psychological professions to safeguard racially minoritised clients from further racial harm in therapy.

Considerations given to issues of equality, diversity and inclusion

The study centres the underexplored issue racial trauma from the perspective of racially minoritised clients. It highlights therapists' socialisation into systems of racism and whiteness as influencing our ability to recognise and sensitively respond to racial trauma, and calls for a systemic commitment to antiracist action throughout the psychological professions.

![bacp | counselling changes lives]

Beyond Sex Addiction, from Judgement to Compassion: A phenomenological study of group treatment for compulsive sexual behaviour to identify positive mechanisms of change

Alexis Caught[1] & Michael Yates[2]

[1]Psychotherapist, [2]Clinical Psychologist, [1,2]56 Dean Street, Chelsea & Westminster Trust

Aim or purpose

Since 2021 we have been running the "Ceclaim" programme (a group therapeutic intervention, to support gay men experiencing compulsive sexual behaviours/recovering from chemsex) we have seen statistical improvement in patients presentations– but this study was to understand, from the patients' phenomenology, what created this change within them?

Post treatment results were;
• 46% reported a reduction in symptoms to below clinically significant thresholds.
• 65% reported improvements in sexual function, satisfaction and confidence.
• 78% reported improvements in self compassion and reductions in shame.

If we can understand what's making this positive change, we can improve these rates further, and encourage other clinicians to provide similar mental health support.

Design or methodology structure

A secondary study, utilising interpretive phenomenological analysis (IPA) to analyse patient generated data (feedback forms & reflective writing) with thematic analysis

Ethical approval

• Leeds Beckett University Local Research & Ethics Committee
• Local research lead at 56 Dean Street, part of NHS Chelsea & Westminster NHS Trust.

Results or findings

The identified mechanisms of positive change were;
• Explicit positionality of the service provider & group leaders allowed for psychological safety.
• Giving & receiving compassion, began a new (safe) experience of compassion
• Therapeutic relationship was key to developing trust and role-modelling how a positive relationship can be based on trust & authenticity, helping to push back against shame narratives.
• Group therapy, allowed them to hear other similar stories and struggles, fighting aloneness, allowing an extrication of blame.
• Psychoeducation and systemic understanding of how shame is generated, put upon minorities, and how it's experienced both physically and psychologically increased the agency participants felt by improving their understanding, increasing ability to self-regulate difficult emotions
• The improvement in their view of self, allowing them to feel more self compassion & understanding, creating a virtuous cycle

Research limitations

Findings deemed to be reliable and valid, passing assessment by the internal NHS clinical review and being awarded the Dean's Prize into psychological & mental health research by LBU.

Conclusions or implications

Statistically, LGBTQ+ people access mental health care at higher rates than the gen.pop, due to experiencing worse MH, yet receive worse care & report lower satisfaction. Providing culturally specific & nuanced mental health care, is key to patient lead healthcare and that as the psychotherapeutic profession increasingly recognises and respects difference, we have to understand that different populations need different approaches to help them achieve mental health equity.

Considerations given to issues of equality, diversity and inclusion

Research focused on improving equality, diversity and inclusion for gay men's support, which has broader application for working with other LGBTQ+/GSRD patients.

Co-Creation: Developing an adapted model of pluralistic counselling with Boys with Specific Learning Difficulties (SpLD)

Gary Tebble

Senior Lecturer/Counsellor-Psychotherapist, Edge Hill University

Additional authors: Andrew Reeves & Peter Gubi

Correspondence: tebbleg@edgehill.ac.uk

Aim or purpose

The doctoral research aimed to co-create a model of adapted pluralistic counselling when working with boys with SpLD-SEND, to both enhance engagement levels and provide effective mental health intervention. The boy population are often under-represented within counselling/psychotherapy services, or too often fail to have their SpLD needs met within the therapy room. The research positioned the participants (Boys aged between 11-16 years) as active participators within the resaerch/therapeutic work. The research also aimed to develop a transdisciplinary model- pluralistic across profession!

Design or methodology structure

The research was mixed methods (Qualitiative/Quantitive) and utilised a 'case series approach', with four boys recruited who participated as research participants/collaborators and clients.

☐ The qualititive investigation consisted of gathering audio recording data of actual therapy sessions with the boys (participants) and I (researcher/therapist), who undertook 6 therapy sessions.
☐ Desciptive statistics (Quant data) were gathered in the form of YP-CORE forms (every session) and adapted Helpful Aspects Forms (every session), which allowed a significant amount of participant feedback to be extracted, as well as the monitoring of therapeutic effectiveness.

Following a thorough grounded theory analysis (Strauss & Corbin, 1990), an adapted transdisciplinary pluralistic counselling model for therapeutic practice emerged, with a therapeutic, relational, and educational paradigm at its core.

Ethical approval

University of Chester

Results or findings

Four main therapeutic processes were captured within this counselling framework, with phases of empowerment, engagement, expression, and enlightenment, seeming to drive the helpfulness of the framework within the context of each therapeutic session. As with the pre-eminent literature, the development and sustenance of the therapeutic alliance is at the model's heart. The current model subscribed to an intentional linear progression, which set the scene for the engagement,

expression, and enlightenment processes to transpire, creating a solid relational foundation from which to build on.

Research limitations

Whilst this doctoral work was a beginning point for this therapeutic model, applicability and userability are very high. The research also demonstrated a very high level of service user involvement (grounding the data/model in actual feedback/colloboration-lived experience).

Conclusions or implications

Firstly, the message that we can and should actively involve children/young people in mental health research and the development of therapeutic interventions.

Secondly, that we need a therapeutic, educational, and relational counselling approach when working with boys with SpLD and mental health difficulties.

Considerations given to issues of equality, diversity and inclusion

EDI was at the heart of this doctoral piece of research, actively promoting young people from a marginalised background (SpLD) into the research process, as co-creators.

![bacp | counselling changes lives]

Ethical considerations in the use of AI in Counselling and Psychotherapy Training: A student stakeholder perspective

Stuart Gore[1] & Emily Dove[2]

[1]Lecturer in Counselling and Psychotherapy, University of Leeds; [2]Postgraduate Psychology Student

Correspondence: s.gore@leeds.ac.uk

Aim or purpose

This study aimed to explore counselling and psychotherapy students' perspectives on ethical considerations in the use of artificial intelligence (AI) in higher education

Design or methodology structure

This qualitative scoping study used an online questionnaire design. Seven respondents completed the survey. Braun and Clarke's (2019) reflexive thematic analysis was used to analyse the data. There was one quantitative question asking respondents if they think the use of AI tools in counselling and psychotherapy training should be allowed.

Ethical approval

University of Leeds

Results or findings

Four themes were identified. The survey respondents called for ethical guidelines, safeguards for data security and confidentiality, clear parameters for acceptable and unacceptable uses of AI tools, and an emphasis on integrity in the use of AI tools in counselling and psychotherapy training. 43% of respondents were in favour of the use of AI tools, 43% were uncertain, and 14% believed these tools should not be used.

Research limitations

It is important to acknowledge this research was an initial scoping study within one university, therefore, a limited number of participants were involved and the results cannot be seen as transferable. However, the information collected shows some initial themes which are worthy of further exploration, as well as highlighting some considerations for future research which may have been missed in this study due to the homogenity of the sample.

Conclusions or implications

Based on the feedback from respondents, there are several areas that need to be addressed in order to ensure the ethical and responsible use of AI tools. Students should be provided with guidelines in how they can and cannot use AI tools for their studies. Teaching on confidentiality and consent should be expanded to include the use of AI tools. Changes in teaching and

assessment should be considered so that student's engagement is required and work cannot be completed by AI alone.

Considerations given to issues of equality, diversity and inclusion

The use of AI tools in psychotherapy and counselling education has the potential to remove or add additional barriers to accessing the profession. AI tools have the potential to support disabled students through integration with assistive technologies, however, digital exclusion is pervasive, and it is essential to explore the ethical considerations in using AI technologies which may not be accessible to all. Inaccessibility may also impact students with less ability to pay for access to these technologies. The recommendations of this research highlight the need for specific consideration in the ethics of AI technologies in education in light of the potential impact on EDI.

Meanings and standards in the mother identity: An interdisciplinary approach to understand identity and emotions

Anna Kennedy

Senior Research Fellow, BACP

Correspondence: anna.kennedy@bacp.co.uk

Aim or purpose

Although most counsellors work with mothers, there is little written about mothers as clients beyond caregivers. Therefore, scholars have called for exploration of the maternal experience to enhance understanding for counsellors and mental health professionals (e.g., Prikhidko and Swank, 2018; Simmons et al., 2021). This research aimed to explore the experiences of mothers with children in middle childhood, an often forgotten time in motherhood research, to gain insight into the development and meanings within a mother's identity.

Design or methodology structure

Fifteen mothers with children aged between 5-12 years old and living in Northern Ireland participated in qualitative semi-structured interviews via Zoom and written follow up responses. Recruitment was advertised on social media with purposive and snowball sampling utilised. Data analysis was closely aligned with constructivist grounded theory.

Ethical approval

Ulster University Communication and Media (Ethics) Filter Committee.

Results or findings

Using concepts from Identity Theory (Stryker and Burke, 2000), a sociological and social psychological approach to understanding identity, this research found that the societal expectation for mothers to be responsible for the physical, social, emotional and organizational aspects of family life have formed the meanings of 'involved' and 'control' within the mother identity. Identity standards shaped through interaction with society and others result in pressure, worry, fear and stress.

Research limitations

To ensure transparency, a reflexive stance was taken using memo-writing and regular supervision. Lack of diversity within the sample is noted below. As this research takes a constructivist worldview, generalisations are not made.

Conclusions or implications

Expectations from society and others have developed the meanings of 'involved' and 'control' in the mother identity. This research highlights the identity standards to be considered a good mother by oneself and society. An understanding of these pressures and expectations can help

counsellors and mental health professionals support mothers rather than contribute to a sense of pressure and guilt. By supporting mothers in understanding themselves, professionals are also supporting their children.

This paper also draws attention to the idea that the concepts of identity meanings and identity standards can help mental health professionals and clients understand behaviours and emotions.

Considerations given to issues of equality, diversity and inclusion

Diversity within the sample, specifically social class and marital status, was initially aimed for, however this research was conducted during the COVID-19 pandemic which adversely affected recruitment. Snowball sampling was deemed necessary which likely contributed to the relative homogeneity of the sample. Future research will aim for greater diversity.

Exploring the experiences of trainee therapists of colour when working with a BAME therapist

Raenia Soyannwo

Trainee UKCP psychotherapist, Newman University

Correspondence: soya401@newman.ac.uk

Aim or purpose

To explore the experiences of trainee therapists of colour when working with a BAME therapist, specifically for personal therapy.

Design or methodology structure

Four trainee therapists of colour participated in semi-structured interviews via Microsoft Teams. Data were analysed using Interpretative Phenomenological Analysis (IPA).

Ethical approval

Birmingham Newman University Ethics Committee.

Results or findings

Two group experiential overarching themes emerged. Overall, participants benefited from working with someone of the same race as it provided comfort and feelings of being understood. However, there is potential for rupture as a result of assuming perceived shared cultural experiences. Representation of accredited BAME therapists was important yet scarce. Race and culture had a strong impact on the participants' views and emotions regarding their experiences of training and seeking a BAME therapist for personal therapy. Financial effects were figural for all participants.

Research limitations

The current study had a small sample size. Only three participants worked in a same-race BAME therapeutic dyad and one in a cross-race BAME therapeutic dyad. Another limitation of the current research is the lack of race and ethnic diversity among the participants, as three were from the same ethnic background.

Conclusions or implications

Findings imply that psychotherapy might benefit from considering trainee therapists preferences for personal therapy especially if applied to BAME people. It is important to take into consideration trainees' culture and religion and how this may impact their sense of self and limit their commitment/engagement with the course. Finances and how this may impact BAME people accessing therapy or becoming trained and therefore accredited is another issue that needs to be addressed.

Considerations given to issues of equality, diversity and inclusion

Throughout this research, issues of equality, diversity and inclusion were figural throughout and the basis of the research was to focus on, highlight and explore the experiences of trainee therapists of colour.

Supporting the Wellbeing of Helping Professionals through Creative Interventions

Emma Perris[1], Joanna Omylinska-Thurston[2] & Chloe Hird[3]

Additional authors: Vicky Karkou[4] & Jane Hutton[5]

[1]Lecturer in Therapeutic Skills, Edge Hill University; [2]University of Salford; [3]Liverpool University Hospitals Foundation Trust; [4]Professor of Arts and Wellbeing, Edge Hill University; [5]Liverpool University Hospitals Foundation Trust

Correspondence: perrise@edgehill.ac.uk

Aim or purpose

The current study aimed to establish the feasibility of a multi-levelled, evidence-based creative psychological intervention, Arts for the Blues, adapted to support NHS clinical staff affected by COVID-19.

Design or methodology structure

A mixed-methods, feasibility study was designed with three levels of intervention based on findings from a systematic review and meta-analysis of creative interventions with healthcare staff. Levels increased in therapeutic intensity and included drop-in sessions, team workshops, and twelve-session group therapy. Quantitative data was collected via pre- post-intervention outcome measures (Moral Distress Thermometer, PHQ-9, GAD-7, WHO-5, BRCS, PCL-5). Qualitative data was collected via evaluation forms and semi-structured interviews.

Ethical approval

Ethical approval was granted by Edge Hill University and the Health Research Authority.

Results or findings

Quantitative analysis showed a statistically significant decrease in Moral Distress and an increase in wellbeing and resilience. Qualitative findings demonstrate the intervention was welcomed because it uplifted mood, offered opportunities for relaxation, supported team relationships and personal growth. Participants particularly valued creative sharing with others and appreciated its manualised character. Participant retention was good, although recruitment required extensive resources. Participants reported that the outcome measures were appropriate and manageable.

Research limitations

Recruitment was challenging due to time pressures of NHS staff; sample sizes were small, but promising. The Moral Distress Thermometer was welcomed as a measure because it was easy to use and demonstrated statistically significant differences post-intervention across levels.

Qualitative findings indicate that participants across clincial professions regarded the intervention highly however a more targeted approach might establish if the effectiveness of this intervention can be established within specific services.

Conclusions or implications

Qualitative findings demonstrate that Arts for the Blues, adapted for NHS staff, was an acceptable intervention. Quantitative results indicate significant reductions in moral distress and significant improvements on wellbeing and resilience. Recruiting healthcare staff was challenging and this should be addressed in further research alongside focusing on specific professions and effectiveness.

Considerations given to issues of equality, diversity and inclusion

The creative intervention increased the existing offer of talking therapies and widened access to staff who find it challenging to discuss difficulties at work where they might adopt a 'heroic' attitude as a 'helper' and not discuss own problems or feelings. Creative therapies offer a less exposing way of engaging with difficulties experienced in the workplace.

Short, time-limited interventions were offered to clinical staff where time pressures can impede access to wellbeing activities. The interventions were offered across the trust and participants were from a diverse range of professional settings. PPIE consultation considered issues of diversity and inclusion from the outset.

Preoccupied attachment style and Chinese international student adjustment in the UK: A qualitative exploration

Wei Feng

Psychotherapist, DCPsych trainee, New School of Psychotherapy and Counselling

Correspondence: fengweizi1990@gmail.com

Aim or purpose

Previous research indicates that Chinese international students in the UK might encounter multiple difficulties and emotional stress during their adjustment, while their adjustment experience lacks of sufficient attention (Spencer-Oatey & Xiong, 2006). Additionally, it is suggested that there was a positive correlation between adjustment problems and preoccupied attachment style (Lapsley & Edgerton, 2002).

Therefore, the current research aimed to explore the lived adjustment experiences of Chinese international students with a preoccupied attachment style, studying in the UK. Findings can provide guidance for mental health interventions for this group from an attachment perspective.

Design or methodology structure

The study design was qualitative, and ten participants were recruited by word of mouth, as well as by posting research flyers. Inclusion criteria were Chinese international students who were studying at a university in the UK, were older than 18 and were categorised as having a preoccupied attachment style by use of the Relationship Questionnaire (Bartholomew & Horowitz, 1991).

1-hour one-to-one semi-structured interviews were conducted online as well as in person, and were audio recorded anonymously and stored securely. Participants were well informed about the research with information sheets, and consent forms signed before the interview. Participants' benefits and risks were also considered with a debriefing sheet was provided after the interview. Thematic analysis (TA) was applied to the data to identify common patterns across the entire data set.

Ethical approval

Ethical approval was granted by a north London university Psychology Ethics Committee.

Results or findings

Two main themes and seven sub-themes were identified. 'Stressors' and 'Response to stressors' was found to be the main themes, consisting of 'Separation', 'General living issues', 'Academic performance', 'Interpersonal conflicts', 'Cultural differences', 'Dependency' and 'Resist dependency' as the sub-themes under them.

Research limitations

The author's identity as a Chinese international student studying in the UK may have influenced the research process; however a reflective journal was kept to minimise personal impact. Also, improvements could be made on the demographic balance of participants and questionnaire design.

Conclusions or implications

This study may provide guidance for mental health intervention for Chinese international students by illustrating how preoccupied attachment style might be linked with their adjustment experience. It showed that preoccupied attachment style, presenting a negative self-concept and strong fears of rejection and abandonment might explain participants' adjustment problems.

Additionally, because of being worried about not being valued, the participants' resistance to dependency adds more stress.

Considerations given to issues of equality, diversity and inclusion

This study helps to improve understanding of mental health and wellbeing of ethnic minorities and vulnerable groups.

The disenfranchised grief in members of a culturally diverse support group bereaved by COVID-19

John Frederick Wilson[1], Lynne Gabriel[2], Eleftheria Koutsonika[3] & Pauline Straw[4]

[1]Visiting Fellow, Director of the bereavement service at York St John University Communities Centre, York St John University; [2]Professor of Counselling and Mental Health, York St John University; [3]Doctoral student, York St John University; [4]Counsellor, York St John University

Correspondence: j.wilson2@yorksj.ac.uk

Aim or purpose

We explored the link between pandemic loss, associated with disenfranchised grief, and prolonged grief disorder. We asked: Did government controls and restrictions during the pandemic, disenfranchise grief of the bereaved? Did this lead to prolonged grief disorder?

Design or methodology structure

We recruited ten women to a support group for people bereaved of a significant other by or during the COVID pandemic. We had two group facilitators and two observers. The group was diverse in age, ethnicity and educational backgrounds. The group ran on a weekly basis from September 2022 to September 2023. The attrition rate was low. One person left early, and another attended infrequently. We used a theory building case study methodology. Each session included an opportunity for all participants to reflect on their grief between sessions, and a taught element of psychoeducation, including models of grief, grief trajectories (Bonanno and Boerner 2008) and the concept of disengranchised grief (Doka 1989). Sessions were video recorded and transcribed. This rich data was analysed for psychological change over time. We took pre and post measures of each participant's grief, using the AGES scale (Wilson, Gabriel and Stiles 2021).

Ethical approval

York St John University Education, Language and Psychology Cross-School Research Ethics Panel

Results or findings

The COVID-19 regulations, including restrictions on hospital visiting and funeral rites, disenfranchised clients' grieving processes. A major causes of disenfranchisement was the attitude experienced from social media posts which denied the reality of their loss and grief. In spite of this, all clients who remained in the support group showed grief trajectories with lessening symptoms over time. None of them exhibited a chronic grief trajectory indicative of prolonged grief disorder. All of the members were empowered by the psychoeducation element.

Research limitations

We are sure that none of these women experienced prolonged grief disorder, and that their grief descriptors changed positively over time. We cannot be certain how much this was due to the

group. As a cohort of resilient individuals, they may have progressed without our therapeutic input.

Conclusions or implications

We identified potentially complicating grief factors. However, none of our group were affected in this way. Psychoeducation appears to be a powerful tool in mitigating the effects of disenfranchised grief.

Considerations given to issues of equality, diversity and inclusion

Mourning rituals and funeral rites ameliorate grief. Pandemic regulations imposed on families often denied the expression of family, cultural and religious traditions. Mindful that the group represented diverse cultural heritages, we were sensitively, openly proactive in inviting members to talk and to listen to each other.

From Police Officer to Therapist: a phenomenological inquiry into the experiences of those transitioning from a career in policing to counselling/psychotherapy

Carl Flynn

Psychotherapist in Private Practice and Part-Time University Senior Lecturer, Birmingham Newman University

Correspondence: carlflynn1@aol.com

Aim or purpose

To explore the lived experience of those who had made the transition from being a police officer to training and/or working as a counsellor/psychotherapist.

Participants were asked about their motivation for training as a therapist post-policing and how they experienced this major life and career transition. It explored what participants perceived and experienced as the main similarities and differences between these two professions along with how their previous policing experience may have helped or hindered their training and work as a therapist.

Design or methodology structure

The research design was a phenomenological enquiry with the researcher 'bracketing' their own experience as a police-officer-turned-therapist.

Semi-structured interviews were carried out with seven participants which were carried out online (via Zoom).

The interviews were transcriped and analysed using thematic analysis (Braun & Clarke, 2006) to identify key themes that emerged.

Ethical approval

Birmingham Newman University Ethics Committee.

Results or findings

Four meta-themes emerged from the interview data:
  (i)   Increased psychological mindedness – the partcipants were more psychologically-minded than they reported many of their police colleagues to have been.
  (ii)   Police training and experience as a foundation for therapeutic work – many considered their policing expereince to have assisted them as a therapist (e.g., increased resilience and boundaries).
  (iii) Pragamatic choice of therapeutic modality – most of the participants had chosen their modality for very pragmatic reasons, such as the distance they lived from the training institute.

(iv)   Difficulties in the transition from policing to therapy – many also reported having experienced difficulties in the transition, such as experiencing an anti-police attitude during training and fear that clients would not want to work with them if they knew of their previous policing background.

Research limitations

Seven participants is a small number (and there were no 'CBT therapists' within the sample), so findings cannot be generalised. However, they are real lived experiences which highlight key issues for a 'minority group' within the profession.

Conclusions or implications

There are lots of crossovers between the professions of policing and counselling/psychotherapy. However, the transition is often not an easy one and there is an occupational group within counselling and psychotherapy that this research has given voice to.

Considerations given to issues of equality, diversity and inclusion

Issues of sexism and anti-therapeutic attitudes within the police service were highlighted. Also, the experience of participants on the receiving end of anti-police attitudes within the counselling/psychotherapy profession.

One of the participants identified as Mixed British/Asian and the remainder were White British men and women. Future research should look to widen participation to include participants from other ethnicities.

It's like Jenga: A collaborative autoethnography study, into facilitators' experiences of a person-centred community of practice, focused on critical thinking skills for counselling and psychotherapy students

Peter Blundell[1] & Madeline Hall[2]

[1]Senior Lecturer, Liverpool John Moores University; [2]Lecturer, Liverpool John Moores University

Correspondence: p.j.blundell@ljmu.ac.uk

Aim or purpose

Communities and groups based on person-centred theoretical principles are often a core part of counselling and psychotherapy training within this modality, yet no research has been undertaken that considers these groups as a community of practice. Further, no research has been undertaken that explores the impact of these groups when they are run alongside the curriculum. This study explores our experiences of facilitating a community of practice for trainee person-centred/experiential therapists that focused on critical thinking skills in a Higher Education setting. This community was established over a twelve-week period and was attended by students from across three year groups.

Design or methodology structure

"Collaborative autoethnography (CAE) is a qualitative research method that is simultaneously collaborative, autobiographical, and ethnographic" (Lapadat, 2017, p17); ultimately, this means that the research focus, like autoethnography, is on self-interrogation, but it does this collectively and cooperatively within a team of researchers who are also the study participants (Lapadat, 2017). The "subjective and personal nature of autoethnography combined with a collaborative element also illuminates how partners or groups work together" (Blalock & Akehi, 2018, p. 94) which was particularly useful for this research topic - the experiences of facilitators of a virtual community of practice.

Ethical approval

This study was approved by [removed for review] Ethics Research Committee (UREC).

Results or findings

Analysis identified four key themes: (1) Fecund and Fruitful – A Space for Growth; (2); Freedom to Learn; (3) Jenga! – Navigating the Dimensions of Community Facilitator; and (4) Power and Control. Each of these themes overlapped and were interconnected.

Research limitations

CAE aims to address issues of power within research by moving away from research where participants are subjects of the research process, and, instead, calls for them to be collaborators

in the research process, including how the research is designed and data is gathered and interpreted (Chang, Ngunjiri & Hernandez, 2015; Lapadat, 2017). This felt particularly pertinent for this study because these research principles were aligned with the purpose of the community of practice itself, which was to challenge hegemonic notions of power within learning environments.

Conclusions or implications

This study centres the idea of student-centred learning as a way of challenging hegemonic notions of education and learning within Higher Educational settings. These findings could be useful for other facilitators or students wishing to set up and facilitate other communities of practice, in counselling and psychotherapy training, or other disciplines.

Considerations given to issues of equality, diversity and inclusion

The positionality of authors/coresearchers are critically examined and the impact of dual roles within educational spaces explored.

Working with goals in school-based humanistic counselling with young people: outcomes of a feasibility trial

Charlie Duncan

PhD candidate & Senior Research Fellow, University of Roehampton & BACP

Correspondence: charlie.duncan@bacp.co.uk

Aim or purpose

This study aimed to determine the feasibility of a controlled trial design to assess the comparative effectiveness of school-based humanistic counselling plus goals (SBHC+G) compared to SBHC only, as well as preliminary indications of outcomes and clinical change between the two active interventions.

Design or methodology structure

This was a cluster randomised controlled trial design whereby 10 counsellors, representing 68 young people aged 13-16, were randomly assigned (1:1) to either the SBHC+G (n=41) or SBHC only (n=27) condition. Young people in both conditions were offered up to 10 weekly sessions of SBHC, during which they were invited to complete the Outcome Rating Scale (ORS) at every session. All young people were also invited to complete YP-CORE at baseline and end-point. In addition, young people in the SBHC+G were also invited by their counsellor to set up to three personal goals for counselling during their initial sessions using the GBO tool and to rate their progress at every counselling session.

Descriptive statistics on recruitment, retention and measure completion rates were undertaken to assess the feasibility of the study design. Inferential statistics (such as Analysis of Covariance) on the outcomes data is currently underway and will be completed by the time of the conference.

Ethical approval

University of Roehampton (Ref: PSYC 17/262).

Results or findings

Preliminary analyses suggests that the trial design is feasible and acceptable to young people and counsellors, with measure completion rates ranging from 70.7% to 83.8%. Whilst initial analyses indicate that there were no statistically significant differences among the groups in terms of outcomes on the ORS or YP-CORE, a result approaching significance was found for the average number of sessions attended, with those in the SBHC+G condition attending an average of 8.1 sessions and those in the SBHC only condition attending an average of 6.8 sessions (p = .07).

Research limitations

As this was a pilot feasibility trial it is not possible to draw definitive conclusions about differences in outcomes between young people in the two conditions due to insufficient power to detect meaningful change.

Conclusions or implications

High retention and measure completion rates indicate that the trial design is feasible and acceptable to counsellors and young people, providing a good basis for a larger scale replication study. There are also indications that goal-focused work may contribute to improved attendance rates.

Considerations given to issues of equality, diversity and inclusion

A high proportion of participants were from marginalised racial backgrounds and areas of high social deprivation. Where possible, any differences in experiences across demographic factors will be highlighted and discussed.

A Good Fit. What experienced secondary school-based counsellors require from their supervision: a situational analysis of practitioners' description of best practice

Imogen Harries

Systemic family psychotherapist, University of South Wales, Aneurin Bevan University Health Board

Correspondence: Imogen.Harries@Wales.NHS.UK

Aim or purpose

Secondary school-based counselling is widely used throughout the UK. Key professional bodies require that all counsellors receive regular supervision. There is little research into the supervisory needs of experienced therapists, particularly those working in a school context. The purpose of this study was to investigate what experienced secondary school-based counsellors require from their supervision and gain an understanding of practitioners' experiences of best practice.

Design or methodology structure

17 experienced secondary school-based counsellors and /or supervisors participated in semi-structured online or telephone interviews. Recruitment was done via online counsellor networking sites. A constructivist situational analysis grounded theory methodology was used to analyse and understand data.

Ethical approval

Ethical approval was granted by the University of South Wales.

Results or findings

One core category ('A good fit') encapsulates four theoretical categories ('the supervisory relationship', 'understanding the working context', 'safeguarding', and 'the shared supervisory journey'). Threads that weave these categories together are 'the containment and holding nature of supervision', 'safe ethical working regarding the client/therapist and supervisee/supervisor work' , 'self-awareness on the part of both supervisee and supervisor', and 'the co-creation of reflective practice in supervision'.

Research limitations

The researcher was satisfied that grounded theory 'saturation' was reached but due to the self-selecting nature of recruitment, some aspects of the supervision work may not have been present. The researcher interviewed all participants, transcribed the interviews and coded them. Though these were discussed in supervision, a second researcher may have interpreted interviews differently. The researcher kept reflexive memos throughout the process and used researcher skills to be led by the data.

Conclusions or implications

An experienced therapist requires a depth and exploration within their supervision which requires a level of self-awareness on the part of both supervisor and supervisee. The supervisor needs skills in facilitating both in depth co-created reflection, and a collegial relationship where challenge can occur safely. Between the supervisor and supervisee there needs to be a shared understanding of the secondary school as a working context for therapeutic practice. The study also indicates implications for supervisor training and professional development, as well as the adequate funding for supervision at all levels of experience.

Considerations given to issues of equality, diversity and inclusion

This study did not explicitly set out to consider issues relating to EDI, however these issues emerged and were considered in the research findings which also recommends further study in these areas.

The development of the Cognitive Behavioural Social Competence Therapeutic Intervention for Adults with Autism: A mixed methods report

David Tate

Lecturer and researcher, University of Salford

Correspondence: d.tate2@salford.ac.uk

Aim or purpose

The aim of this research was to deliver a newly developed Cognitive Behavioural Social Competence Therapeutic Intervention for Adults with Autism (CBSCTI-A) to five young adults with autism. Research aims were to evaluate intervention feasibility and efficacy by triangulating data findings using a mixed methods approach.

Design or methodology structure

A pragmatic mixed methods approach was used to evaluate the feasibility and efficacy of CBSCTI-A

Ethical approval

Provided by the University of Salford Ethics Panel

Results or findings

Results support feasibility, with CBSCTI-A receiving very high user satisfaction ratings, and adherence to the intervention was high, recorded at ~90%. Fidelity to treatment was high, ranging from ~86% to ~100%. Quantitative findings indicate that young adults with autism experienced significant improvements post intervention in social motivation, non-verbal conversation, emotional empathy, assertiveness, interpersonal relationships and self-control. Thematic analysis of semi-structured interviews revealed four themes: user satisfaction, important components of therapeutic intervention, challenges and critiques, and recommendations.

Research limitations

Limitations of this study include small sample size of participants who were self-referral possibly only representing a subset of adults with autism who have more intrinsic motivations for sociability and are able to better cope without the need for caregiver support. The confederates involved in the social interactions during testing were not autistic, and this could have impacted the quality of the interaction due to the double empathy problem.

Conclusions or implications

Combining brief sessions of individual cognitive behavioural therapy and cognitive behavioural social skill group therapy in a manualised intervention appears to be feasible for adults with

autism. Notably, satisfaction was rated very high and attrition rates were low. Qualitative analysis suggests several participants experienced less anxiety and improved social skills as a result of completing CBSCTI-A. It is possible that improvements in social competencies could, by extension, lead to improvements in mental health symptoms. Logical model appears to be a valuable tool for developing a multimodal CBSCTI-A.

Considerations given to issues of equality, diversity and inclusion

This project adheres to the university of Salford EDI strategy. During development we used an exploratory stage, with the objective of collecting input through consultations with the autism community. The main objectives were to collect project feedback from the autism community to steer intervention development by identifying and defining specific topics adapted for autistic people, consider language, and preference of learning and communication style.

Children and young people's experience of psychoanalytic psychotherapy: a qualitative meta-synthesis

Maryam Javed

Research Assistant, University College London

Correspondence: maryam.javed@ucl.ac.uk

Aim or purpose

Children and adolescents' voices are under-represented in psychotherapy research. In that sense, qualitative research is a useful tool to shed light into the experience of service users, especially concerning their value in providing findings that are clinically meaningful. Recently, there have been considerable advances in qualitative research on children and young people's experiences of psychoanalytic/psychodynamic psychotherapy. However, no investigations to date have synthesised this body of work. Therefore, this study aimed to provide the first qualitative meta-synthesis of empirical studies examining children and young people's experiences of psychoanalytic psychotherapy.

Design or methodology structure

This study is a systematic review following the PRISMA guidelines and adopting the JBI meta-aggregation approach to synthesise findings. A systematic literature search was conducted across three databases: PsychINFO, MEDLINE, and Web of Science. Included studies were published between 1990 and 2023 and comprised of peer-reviewed articles and doctoral dissertations reporting qualitative findings addressing children and/or adolescents' views or experiences of their psychoanalytic or psychodynamic psychotherapy. The search strategy identified 5322 studies, of which 11 were eligible for inclusion: 9 examining face-to-face psychoanalytic psychotherapy and 2 exploring internet-based psychoanalytic psychotherapy.

Ethical approval

Since this paper is a systematic review, no ethical approval was needed.

Results or findings

Following analysis, four synthesised themes were identified: (1) Children and adolescents learn to navigate their role during therapy; (2) The importance of the therapeutic relationship; (3) Psychoanalytic psychotherapy is a 'painful' process; and (4) Perceived impact of psychotherapy varies and is difficult to gauge.

Research limitations

The current review strictly followed PRISMA guidelines and included studies that were rated overall as 'good' quality using the JBI critical appraisal tool indicating high methodological rigour.

Conclusions or implications

While some findings were in consonance with the literature with adult patients and other treatment modalities, other point to some unique features of psychoanalytic psychotherapy for children and adolescents. The findings raise a question about whether there is greater need to help prepare young people for starting psychoanalytic psychotherapy.

Considerations given to issues of equality, diversity and inclusion

The current review addresses a significant gap in psychoanalytic literature – the lived experiences of children and adolescents. As part of the research process, the JBI critical appraisal tool was utilised to highlight whether eligible studies reported participants' ethnicity, geographical location, and the cultural standpoint of the researchers. The authors address these limitations.

The lived experience of Relate supervisors of providing supervision

Belinda Ford

Relate clinical supervisor, Open University

Correspondence: belinda.ford2@gmail.com

Aim or purpose

This qualitative research sheds a phenomenological perspective on the topic of supervision. Although supervision is much discussed in the literature, there is little material which considers the lived experience of supervisors (Theriault and Gazzola 2018). This research helps to fill this gap. I am undertaking the research as an insider researcher being a Relate supervisor myself.

The research questions that underpin the research are:
• How do supervisors define supervision, from their lived experience?
• What is the lived experience of supervisors regarding the functions of supervision?
• What is the lived experience of supervisors with regard to role tension?
• What is the lived experience of supervisors with regard to power relations?

Design or methodology structure

The fieldwork consisted of:
• An online quantitative/qualitative survey which was sent out to all Relate supervisors. The qualitative questions were analysed through reflective thematic analysis.
• Semi-structured interviews which were held online with 10 Relate supervisors who agreed, through the survey and through an email request, to take part. These were analysed through Interpretative Phenomenological Analysis (IPA).

Ethical approval

Ethical approval was given by my academic institution.

Results or findings

Key findings are:
• Out of the functions of education, support and administration participants consider that supporting counsellors is their primary function.
• Participants reflected that they experience tension through having to be the 'policeman', synthesise the three functions of the role and be pulled into supervisee line management.
• Participants recognised the power dynamic between them and their supervisees and considered this is partly casued by supervisees' expectations. They also reflected their preference for working collegially and holding power lightly.

Research limitations

As is typical of qualitative research the project is limited by the nature of the sample, which is relatively small and narrow in scope. The research does not represent the experience of supervisors in other contexts or other key players within Relate.

As IPA is the dominant methodology here the findings have been interpreted through my perspective as I have my own experience of the role. The potential for bias has been managed through the project's structured methodological approach, use of a reflective journal and liaison with academic supervisors.

Conclusions or implications

In shedding a phenomenological light on the experience of being a Relate supervisor, this project brings a different perspective to the literature. There is potential for the research to improve professional practice across the interdisciplinary fields of counselling, social work and nursing through awareness raising and changes to training programmes.

Considerations given to issues of equality, diversity and inclusion

Discussions around power dynamics raise equality, diversity and inclusion issues.

The lived experience of therapists who self-identify as HSP (Highly Sensitive Person)

Elizabeth C. Roxburgh[1]

Additional authors: Mel Wright-Bevans[2]

[1]Senior Lecturer in Psychology, Canterbury Christ Church University; [2]Student, Keele University

Correspondence: elizabeth.roxburgh@canterbury.ac.uk

Aim or purpose

This study explored the lived experience of therapists who self-identify as being highly sensitive persons (HSP), otherwise termed sensory processing sensitivity (SPS). Aron and Aron (1997) describe SPS as an innate personality trait identified by deeper processing of information, being easily overwhelmed by stimulation, having greater empathy/emotional reactivity and being able to sense subtleties in the environment. Of particular interest in this study was how being both a therapist and a HSP impacts on participants' identity, wellbeing, and client work.

Design or methodology structure

Online semi-structured interviews were conducted with a purposive sample of ten experienced practicing therapists who self-identified as HSP. There were nine females and one male, with ages ranging from 34 to 59 years, length of practice ranging from 2 to 15 years, and length of time identifying as HSP ranging from 6 months to 12 years. Interviews were audio-recorded and transcribed, and data were analysed using interpretative phenomenological analysis (IPA; Smith et al., 2022).

Ethical approval

Ethical approval was granted by the Faculty of Science, Engineering, and Social Sciences Ethics Committee at Canterbury Christ Church University.

Results or findings

Participants felt that their heightened sensitivity helped them to establish relational depth with clients quickly and that they had an intuitive understanding of the nuances of clients' issues, which was often an embodied experience. They also spoke about the importance of processing time and setting boundaries to avoid burnout, and how being a HSP therapist could be isolating without a supportive and understanding community. Some participants felt it was easier to work with clients who were also HSP as there was a shared understanding.

Research limitations

This was an in-depth qualitative study with a small sample. Both researchers were counsellors. The first author identified as HSP, and the second author discovered she met the threshold for

HSP post-recruitment. It is possible that other researchers who were not 'insider researchers' might have found different themes.

Conclusions or implications

Several personal experiential themes were derived from participants' data which reflect the lived experience of being a highly sensitive therapist. Findings have implications for therapists' training, practice, and wellbeing, and the development and maintenance of the therapeutic relationship.

Considerations given to issues of equality, diversity and inclusion

SPS is found in a minority of the population but is believed to exist in a majority of clients (Aron, 2010). There were more female than male participants from a predominantly White British ethnicity. Future research should be conducted with more gender and culturally diverse samples.

Exploring 18-25-year-old cis male's attitudes to psychotherapy, what this means to them and how this might inform the psychotherapeutic profession

Stuart Gilmour[1], Sarah Law[1], Rebecca Lynn[1] & Blue Reeves[1]

[1]Student, Lewisham Counselling & Counsellor Training Associates

Aim or purpose

Our aim was to explore 18-25 cisgendered men's attitudes towards accessing and/or receiving psychotherapy. Our purpose is to better inform the psychotherapeutic community of the existing attitudes toward psychotherapy within this client-group.

Design or methodology structure

We recruited four self-identifying cisgendered male participants between the ages of 18-25. Audio-recorded semi-structured interviews took place, and the resulting data was analysed using thematic analysis informed by Interpretive Phenomenological Analysis (IPA) (Smith, Flowers and Larkin, 2021).

Ethical approval

Ethical approval was granted by our training institution's Ethics Board. We adhered to the British Association for Counselling and Psychotherapy's Ethical Guidelines for Research in the Counselling Professions (BACP, 2019). Respondents were offered six no fee counselling sessions if issues arose as a direct result of participating in our research.

Results or findings

It appears our participants specifically associated the need for counselling/psychotherapy with the experience of trauma; yet there seemed to be an underlying confusion as to what actually constitutes traumatic experience. Conversely, it appears our participants were aware of the general mental-health difficulties experienced by others. However, our participants seemed to demonstrate a lack of intrapersonal emotional acknowledgement that was based in gender expectations/attitudes. Rather than seeking therapeutic help it appears our participants tended to dissociate from their emotional/mental difficulties through distractive escapism as a means to cope with their mental/emotional health struggles. Participants also disclosed confusion as to what therapies are available and often professional terminology was misunderstood. It also appears that if our participants had initially sought psychotherapeutic help, the cost of therapy and/or long waiting lists were major deterrents in our participants following through with their preliminary interest.

Research limitations

The scope of the study was small and therefore the generalisability of our findings may be limited by the relatively small number of research participants (McLeod, 2015).

Conclusions or implications

Our findings, based on our participants experiences and disclosures, suggest it appears necessary for practitioners and psychotherapeutic services to better understand the underlying issues existing for the young men who fall into this client group. And to take steps to better inform younger men as to the impact general emotional/mental issues, not simply trauma, can have on their wellbeing and how psychotherapy can help.

Considerations given to issues of equality, diversity and inclusion

The research was open to all cisgendered males between the ages of 18-25, regardless of their creed, race or sexuality. Participants self-selected, thus allowing the autonomy of self-inclusion to be highly present.

Counselling Clients in Financial Hardship – making things better by listening to clients

Elise Ferguson[1]

Additional authors: Mhairi Thurston[2], Alexander Law[2], Neil Kirk[2] and Kate Smith[3]

[1]PhD candidate and MBACP Counsellor, [1,2]Abertay University; [3]Aberdeen University

Correspondence: e.ferguson1900@abertay.ac.uk

Aim or purpose

This study explores the voices of client participants living in financial hardship in Scotland who have sought support for their mental health. As well as having a higher prevalence of mental health disorders than wealthier individuals, people in financial hardship tend to have poorer access to counselling and worse therapeutic outcomes (Knifton and Inglis, 2018, Holman, 2014). Previous studies have identified power imbalances, structural barriers and client/therapist biases which perpetuate these inequalities (Goodman, 2013, Foss-Kelly et al, 2017). However, relatively little recent work has focused on UK-specific issues from the client perspective. This study (the first towards a PhD) aims to develop a theory of best practice for dissemination to counsellors, healthcare professionals and public policy influencers, thereby improving therapeutic outcomes for this client group.

Design or methodology structure

This study is a qualitative analysis informed by grounded theory (Corbin and Strauss, 2015). Data was gathered via two focus groups comprising of clients from two separate Scottish hardship charities who had sought support for mental health issues through NHS or third sector routes. Recruitment was a collaborative process between the researcher and staff of the charities and the groups were held in person at charity venues.

Ethical approval

Ethical approval for the research was given by the researcher's academic institution, Abertay University.

Results or findings

Provisional results confirm and expand upon findings from previous research. The key themes emerging from the analysis include 1) power and agency: how clients experience power differentials between themselves, experts (including GPs/doctors) and the systems in which they exist 2) Living with mental health issues: accessing services, what does and doesn't work 3) People, places and organisations: where you live and where to find support 4) Money and resources: individual and system wide, work and benefits.

Research limitations

There was less ethnic and demographic diversity of the focus group participants than the researcher had initially hoped for – however, this is expected to be addressed in a second interview-based study planned for later in 2024.

Conclusions or implications

Issues relating to power and agency are key for this client group, in particular how power is wielded by GPs/Doctors and others who control access to mental health services. However, it appears that power imbalances are not universally negative and can be supportive, depending on the context.

Considerations given to issues of equality, diversity and inclusion

Issues of EDI are integral to this project, as it involves working with clients experiencing socioeconomic (wealth and class) inequality, disadvantage and stigma.

Peer support interventions for care home staff: a scoping review

Jenny O'Donnell[1]

Additional authors: Noelle Robertson[2] & Fawn Harrad Hyde[3]

[1]PhD Student/Research Fellow, University of Leicester/BACP; [2]Professor of Clinical Psychology, University of Leicester; [3]LOROS Research Associate in Palliative Care and Frailty, University of Leicester

Correspondence: jennifer.odonnell@bacp.co.uk

Aim or purpose

Care home work is physically and emotionally demanding, characterised by high workloads, shift work and staff shortages: all factors which are linked to poor staff mental health. This scoping review aims to explore available evidence on peer support interventions for care home staff. It explores the impact of peer support on staff emotional and psychosocial wellbeing, the usefulness of different types of peer support interventions, and barriers and facilitators to implementing peer support in care homes.

Design or methodology structure

The scoping review followed the Joanna Briggs Institute (JBI) manual framework (Peters et al., 2020).

Searches were performed across six databases: MEDLINE, PsycINFO, CINAHL, Scopus, Web of Science and Cochrane Library in July 2023. Titles/abstracts were screened according to review inclusion/exclusion criteria and full text was sought for relevant articles.

Ethical approval

Ethical approval is not required for a scoping review.

Results or findings

The searches identified 2904 articles. Following screening, 7 articles were included in the review. Included papers comprised diverse peer support interventions including support that delivered face-to-face or online, and single or multicomponent packages. Interventions reported differences regarding peer group size, the role of the attendees and the role of the facilitator. Although study designs precluded consensus on which intervention components were most useful, overall, studies found a positive impact of peer support interventions on social support and staff mental health. Benefits were shown irrespective of the intervention type. The key barriers and facilitators for long term implementation were managerial approval and logistical factors surrounding intervention delivery.

Research limitations

Quality of included papers was assessed using the JBI critical appraisal tools.

Conclusions or implications

Little research exists on peer support interventions for care home staff. The intervention types varied, with all types showing benefits. The importance of managerial support and consideration of logistical factors is crucial for longer term implementation in care homes. Further research is needed to explore how to integrate peer support interventions into care homes.

Considerations given to issues of equality, diversity and inclusion

Psychological interventions for care home staff are an under researched area. Many staff are on a low-income, and a higher proportion of social care staff are from ethnically diverse backgrounds and possess non-British nationality compared to national population statistics. A broad array of search terms were included to ensure inclusion of international literature.

The empirical rationale for applying mentalization-based therapies (MBT) to the treatment of emerging psychosis

George Salaminios

Senior Research Fellow, BACP

Correspondence: george.salaminios@bacp.co.uk

Aim or purpose

The currect research aimed to explore the role of mentalizing difficulties on the presence of emerging symptoms associated with increased risk for the development of psychotic spectrum disorders in a sample of adolescents and young adults.

Design or methodology structure

Eighty-seven community adolescents and young adults aged 14 to 23 years were recruited via written advertisements in public schools, universities and community centres in Geneva, Switzerland. Self-report measures and semi-structured interviews were used to assess mentalizing abilities and psychosis-relevant symptoms. Multivariate logistic regression analyses were conducted to examine the associations between self-reported mentalizing difficulties and psychosis-relevant symptoms.

Ethical approval

The study was granted approval by the Swiss Association of Research Ethics Committee.

Results or findings

Overall, the current findings suggest that mentalizing difficulties are linked to the presence of psychosis-relevant symptoms during adolescence and young adulthood. In addition, results of the study show that mentalizing difficulties may modulate the relationship between schizotypal personality traits and clinical risk for psychosis-spectrum disorders.

Research limitations

The data were derived from a relatively small sample size and further associations between mentalizing and psychosis-relevant symptoms could have emerged with a larger more representative sample. Furthermore, the cross-sectional nature of the study's design prevents us from drawing any causal conclusions about the relationships between the variables studied.

Conclusions or implications

The current findings indicate that mentalizing dysfunction is linked to the presence of clinical risk manifestations relevant for psychosis in adolescence and young adulthood and may contribute to increased vulnerability for illness. Results also highlight that mentalizing abilities may be a worthwhile target of preventative interventions to sustain resilience against the development of psychosis among adolescents who may be at increased risk. These findings with be discussed in

the context of recently published research suggesting that mentalization-based treatments may support better symptomatic and social functioning outcomes for young people on the psychosis spectrum.

Considerations given to issues of equality, diversity and inclusion

Available treatments for individuals who are suffering with psychosis spectrum disorders, or exhibit prodromal symptoms are commonly limited to pharmacological interventions or short-term psychological therapies, such as CBT. While previous evidence suggest that these may contribute to symptomatic improvement, their effectiveness in terms of supporting better functional outcomes, particularly in the domain of interpersonal functioning appears to be limited. The current findings have the potential to inform the application of longer-term psychodynamic approaches with a focus on supporting mentalizing, to the treatment of individuals in the psychosis spectrum, thus increasing the range of available treatments for this client group.

"What the hell just happened?!' Therapists' lived experiences of unlocking creative experiencing – collaborative autoethnography

Urszula Plust[1], Shefali Golchha[2] & Jen Holland[3]

[1]Assistant Professor, University of Nottingham; [2]Graduate, University of Nottingham; [3]Assistant Professor, University of Nottingham

Correspondence: urszula.plust1@nottingham.ac.uk

Aim or purpose

Authenticity has been established as one of the 'ingredients' in therapist factors that contribute to good practice (BACP, 2021). Research found that authenticity has positive implications for subjective wellbeing and psychological functioning (Goldman & Sutton, 2020). This seems important in context of the findings from the recent metanalysis by Lee et al., 2020 with combined sample of 6,844 participants where it was found that the extensiveness of burnout among psychotherapists was 54%–55%.

Factors such as openness to experience or listening to oneself facilitate authenticity as outlined by Joseph (2006) and overlap with those facilitating creativity (Rogers, 1954). Study by Xu et al. (2021) found that openness to experience mediates the authenticity-creativity association. Rouse et al. (2015) also found that therapist's creativity was facilitative to therapeutic engagement.

The aim of this study is to understand the phenomenon of 'creative experiencing' as a facilitative factor in the development of therapists' authenticity and its impact on their professional practice. We will be looking at 'creative experiencing' defined by Glaveanu & Beghetto (2021) as 'novel person–world encounters grounded in meaningful actions and interactions'.

Design or methodology structure

This collaborative autoethnography is designed to explore the experiences of three counsellors from diverse socio-cultural backgrounds and their understanding of the impact of 'creative experiencing' on their personal development and professional practice. The data was collected through focus groups and personal reflections.

Ethical approval

This research has been conducted in line with University of Nottingham ethical guidelines.

Results or findings

The research is ongoing and has not yet reached completion. Initial thematic analysis of findings identifies emerging themes such as: 'safe to be me', '(RE)connection', 'Trusting the organism' and 'Playfully curious'. These themes will be presented alongside vinnetes that encapsulate these experiences.

Research limitations

This qualitative study of subjective experiences cannot be generalised. While the sample is diverse it is not representative of the broader population. The reliability and validity of this autoethnographic research is established through verisimilitude, coherence and reflexivity (Ellis et al., 2011).

Conclusions or implications

Unlocking and experimenting with creative experiencing facilitates self-understanding, openness to encountering others, psychological safety in identifying and following one's own direction and trusting the direction of our clients.

This research calls for facilitation of spaces for creative experiencing, as part of personal and professional development within counselling training. There is also scope for further theoretical development of the relationship between creative experiencing and authenticity.

Considerations given to issues of equality, diversity and inclusion

The co-researchers engaged in a reflective inquiry of experiences of power and oppression in the context of the study.

The impact of clients experiencing suicidality on counsellor wellness

Heather D. Dahl-Jacinto[1], Wendy Hoskins[2] & Brett Gleason[3]

[1]Assistant Professor and Program Coordinator, University of Nevada, Las Vegas; [2]Associate Professor and Associate Chair; [3]Assistant Professor

Correspondence: heather.dahl@unlv.edu

Aim or purpose

Wellness practices work as protective factors and proactive behaviors for mental health professionals to help safeguard and minimize stress/burnout (Kramen- Kahn & Hansen, 1998; Stevanovic & Rupert, 2004). However, wellness promotion may be glossed over in counsellor education programs. Counsellors experience common stressors and lack of personal and professional support (Lawson, 2007); Further, stress is linked to a decrease in wellness, which has a significant association with counsellor burnout (Puig et al., 2012). Ivicic and Motta reported that mental health workers also experience a high level of secondary trauma or vicarious trauma (2017). Training: All presenters have received training in suicide prevention and assessment, and have published in suicide and wellness.

Design or methodology structure

To best understand the lived experience of counsellors, researchers chose a phenomenological tradition with a social constructivist paradigm (Moustakas, 1994) and recruited 11 participants using maximum variation and criterion sampling methods to obtain diversity in terms of cultural identity. Participants included counsellors who have worked with suicidal clients. Utilizing suggested phenomenological data collection methods (Moustakas, 1994), the research team conducted semi-structured individual interviews with each participant (Hays & Wood, 2011; Wang & Burris, 1997).

Ethical approval

This project was approved by university IRB.

Results or findings

Researchers found three structural themes, "Emotional and personal impact of client experiencing suicidality," "Counsellor wellness protective and risk factors," and "Recommendations for the field." These themes explored the nuanced and complicated dynamic that a counsellor works through when managing client suicide risk and their own personal wellness.

Research limitations

Several strategies of trustworthiness were used to meet several criteria of trustworthiness (Hays & Singh, 2012; Lincoln & Guba, 1985). Specifically, the research team will employ the following: (a) audit trail; (b) member checking through follow-up questions and review of interview transcript;

(c) reflexive journaling; (d) simultaneous data collection/analysis; (e) triangulation of data sources, investigators, and theoretical perspectives; and (f) thick description.

Conclusions or implications

As indicated by the three themes that were identified in this study, counsellors who work with clients experiencing suicidality are impacted both personally and professionally, and need strong support systems in place to manage secondary trauma and their personal and professional wellness.

Considerations given to issues of equality, diversity and inclusion

The researchers recognized and infused Equality, Diversity, and Inclusion into the interview protocol using the multicultural and social justice counselling competencies as a framework.

How do trainee integrative counsellors and psychotherapists make sense of heteronormative language within counselling training? An IPA approach

Stephanie Carr

Registered Counsellor and trainee Psychotherapist, Birmingham Newman University

Correspondence: stephanierachelcarr@gmail.com

Aim or purpose

The aim of the study was to explore the impact on students of language in regard to issues of gender, sexual and relationship diversity.

Design or methodology structure

Five participants were recruited through purposive sampling, all of whom are studying counselling and psychotherapy at a university in the West Midlands. Data was obtained through semi-structured interviews and was processed using Interpretative Phenomenological Analysis.

Ethical approval

Birmingham Newman University

Results or findings

The main findings of the study were that trainee counsellors feel that much of the language and structure of their course was unhelpful to their preparedness for working with clients from within the LGBTQ+ community.

Research limitations

This research has been successful in exploring and illuminating the experience of trainee therapists as they navigate the complexity of gender, sexual and relationship diversity through their studies. Participants were deliberately recruited across a number of student cohorts where significant academic and clinical experience had been attained. This added to the depth and richness of the responses explored in the interview process.

The study was limited in. Firstly, all participants were recruited from the same learning institution, and it would be disingenuous to assume that the same results would be replicated across other training organisations. Secondly, the focus on trainees necessarily excluded therapists with more extensive experience in the field and again, it is possible, perhaps likely, that this cohort would report a difference in their experience from participants in the current study. Finally, the researcher acknowledges that many of the points for discussion and implications of this research are concerned with training providers.

Conclusions or implications

Previous research and current findings suggest a need for greater consistency of engagement between the counselling and psychotherapy profession and the LQBTQ+ community. This study demonstrated the concerns of trainee therapists, specifically around issues of gender, sexuality and relationship diversity, as they prepare for client work. The current research challenges the assumption that it is solely the responsibility of individual therapists to equip themselves to work effectively with LGBTQ+ clients. It highlights the link between the trainee experience and their eventual work with individual clients and explores ways in which trainee therapists might become better equipped to work in this area.

Considerations given to issues of equality, diversity and inclusion

Was to consider how the study could be influenced by the lens of a CIS gendered, heterosexual woman conducting research on heteronormativity. A reflective diary was kept to help process the researcher's own preconceptions, facilitate reflection and, through bracketing, minimise the influence of own potential prejudices.

Mothers Who Listen WIth More Than Ears - The Phenomenological Experience of The Non-verbal Communication Between Mothers and their Child with Complex Cerebral Palsy

Miriam Mazal Tasgal

Consultant Lecturer at The New School of Psychotherapy and Counselling, The New School of Psychotherapy and Counselling

Aim or purpose

The aim was to validate and give voice to an otherwise isolated form of mothering—one where mothers communicate effectively with their children with complex cerebral palsy in ways that may only be understood by the mother herself.

Design or methodology structure

I conducted a qualitative heuristic inquiry using a phenomenological approach. Through in-depth interviews with eight mothers who have a non-verbal complex care cerebral palsy child.

Ethical approval

The New School of Psychotherapy and Counselling, affiliated with Middlesex University.

Results or findings

The results produced 7 universal themes: 'The Choice to Communicate', 'Communication OverTime', 'Impediments to communication', 'Certainty and Uncertainty', 'Embodied Communication', 'Being Towards Communication', and 'Being in the World with Others'.

These themes capture the essence of the experience that mothers have when confronted by a baby who is diagnosed with multiple disabilities and unable to verbalise. The findings that emerged are fundamentally existential, they are examined through an existential lens.

Research limitations

The analysis was rigorously checked against interview data and supervised by Dr Charlote Harkness and Naomi Stadlen. The thesis underwent evaluation by the VIVA panel and successfully passed. Through reflective processes, all biases were acknowledged and addressed. The study focused on only 8 mothers with children at this level of complex disability. Other mothers may have a different communication experience of their non-verbal complex cerebral palsy child.

Conclusions or implications

Previous research and current findings suggest a need for greater consistency of engagement between the counselling and psychotherapy profession and the LQBTQ+ community. This study demonstrated the concerns of trainee therapists, specifically around issues of gender, sexuality and relationship diversity, as they prepare for client work. The current research challenges the

assumption that it is solely the responsibility of individual therapists to equip themselves to work effectively with LGBTQ+ clients. It highlights the link between the trainee experience and their eventual work with individual clients and explores ways in which trainee therapists might become better equipped to work in this area.

Considerations given to issues of equality, diversity and inclusion

Was to consider how the study could be influenced by the lens of a CIS gendered, heterosexual woman conducting research on heteronormativity. A reflective diary was kept to help process the researcher's own preconceptions, facilitate reflection and, through bracketing, minimise the influence of own potential prejudices.

Symposia

Symposium 1

Research consortiums as research facilitators: the example of TRaCCs

Naomi Moller[1], Laura Viliardos[2], Andreas Vossler[3] & Kevin Hogan[4]

[1]Professor of Psychology and Psychotherapy, The Open University; [2]University of Salford; [3]The Open University; [4]Glasgow Caledonian University

Correspondence: naomi.moller@open.ac.uk

Aims of the symposium

The aim of this symposium is to showcase the potentials of research consortiums for faciliating counselling research. The Training and Research Counselling Clinics consortium (TRaCCs) is a group of six university-based training and research clinics, nine universities, two professional bodies and several independent researchers, that collaborate for the purposes of conducting research, with the aim to foster and support the building of research competencies in members (staff and students) and creating research outputs with impact.

Contribution of each symposium paper to the overall theme

Paper 1 presents the evaluation of a research and training clinic run by one of the TRaCCs member clinics. The paper discusses the role of TRaCCs in faciliating service design and data planning and management in a manner that allows for the conduct of this kind of research and potentiates multi-clinic large-scale research.

Paper 2 presents the results of a large-scale interview-based study examining client experiences of video counselling that was conducted through the TRaCCs consortium. In its implications, the paper considers the role of research consortiums in potentiating qualitative research with impact.

Paper 3 presents a qualitative study on the lived experience of alopecia and discusses in its implications the role of TRaCCs in supporting student involvement in research.

Implications of the symposium theme for counselling, psychothreapy, coaching theory, research and practice

This symposium argues that research consortiums offer one productive model for doing counselling research. Consortiums based around research clinics (or training programmes or counselling clinics) can provide time-pressurised staff with a way to engage in research that is engaging but manageable as well as opportunities for learning about research by doing, providing research development for both staff and students. In a context where it is difficult to get funding for counselling research, consortiums also offer a non-funded pathway to big-sample quantitative and qualitative research, broadening the impact and reach of counselling research beyond that

achievable by individual teams/institutions. Research consortiums also offer ready-made collaborations for co-bidding for research funding and potentiate Research Excellence Framework (REF) and Knowledge Exchange Framework (KEF) returnable outputs of value for participating institutions/individuals.

Considerations given to issues of equality, diversity and inclusion

The consortium model of research development offers the potential of big enough quantitative datasets that meaningful examination of the implications of diversity for client outcomes and experience of counselling are possible. The opt-in collaborative model and facilitation of researcher development for staff and students in TRaCCs both also support inclusion.

Symposium Paper 1 - Evaluation of a hybrid student placement counselling service

Laura Viliardos

University of Salford

Additional authors: Jeannette Roddy (Daktari)

Aim or purpose

The paper discusses a service evaluation of one TRaCCs clinic. The University of Salford clinic has been collecting client data since September 2021 when all clients were seen remotely. Since 2022, the clinics have provided a hybrid service where clients can be seen face-to-face, by telephone or video link. This research was undertaken to understand the profile of clients accessing the services and to see whether there were any differences in outcome for clients by demographic or mode of therapy.

Design or methodology structure

The TRaCCs collaboration was critical in supporting the establishment of the data protocol used in this research. Advertising material for the counselling service focuses on the client experience and uses non-binary pronouns. Counsellors are recruited from a variety of backgrounds. Clients self-referred, allowing autonomy. Data (CORE-10, PHQ-9 and GAD-7) was collected before each session and at the end of counselling. Analysis of fully anonymised client data was conducted using simple statistical methods.

Ethical approval

As this was a service evaluation, and consent for the collection, analysis and publication of the data was given by clients prior to data collection, no further ethical approval was required.

Results or findings

Overall, the clinic saw 1,042 clients self-refer into the service. Of these, 390 completed all measures for their first and last sessions, 57% in the general clinic and 43% in the domestic abuse clinic. Changes in the demographics and degree of emotional distress of the clients compared to

data presented at the 2023 BACP conference were noted. Some potential gender preferences were noted. A full analysis of data (currently underway) will be presented at the conference.

Research limitations

The completed data set is of a reasonable size and provides insight into the operation of a student training clinic. However, only 37% of self-referred clients completed measures fully. This will limit the validity and reliability of the findings.

Conclusions or implications

A key implication is that engagement in TRaCCs was key in supporting the current project; the unfolding potential of TRaCCs to support multi-clinic/large-scale quantitative research is discussed. Further conclusions will be provided when the data analysis is complete. Early indications are that this TRaCCs clinic offers a good option for any individuals requiring counselling.

Considerations given to issues of equality, diversity and inclusion

The counselling service was set up initially for local communities to access face to face, which potentially restricted those who found it difficult travel. Online/telephone counselling can improve access for people, but requires access to a good quality computer or telephone, which can also be limiting.

Symposium Paper 2 - Client experiences of video-mediated counselling: a qualitative study

Andreas Vossler[1]

Additional authors: Naomi Moller[1], Lynne Gabriel[2], Kate Smith[3], Kevin Hogan[4], Jeanette Roddy[5], Sally Lumsdaine[6] & Laura Viliardos[7]

[1]The Open University; [2]York St John University; [3]Aberdeen University; [3]Glasgow Caledonian University; [4]Daktari; [5]Abertay University; [6]University of Salford

Aim or purpose

Both in the UK and globally, the COVID-19 pandemic changed the way in which counselling and mental health services are offered and accelerated the trend towards flexible hybrid provision. While online counselling has long been recognised as a useful service for certain client groups, it is now provided routinely across all service types and client populations. However, and despite a growing post-2019 literature on practitioners' experiences and perspectives, there is a lack of research on client perspectives on video-mediated therapy. The aim thus of this research was to explore clients' perceptions and experiences of video-mediated counselling.

Design or methodology structure

This project involved TRaCCs members collaborating to conduct a large number of online interviews. Participants (up to 50) were recruited through the involved counselling centres/clinics

and the The Open University participant pool. The interview covered the general experience of receiving counselling online via video- platform, as well as positive and negative instances in this context. Demographic information about participants was also sought to allow understanding of the study sample. For data analysis, a combination of Framework Analysis and Thematic Analysis was used to identify themes and sub-themes.

Ethical approval

The Open University Human Research Ethics Committee (HREC/4477) and ethic committees at each consortium partner institution.

Results or findings

The results from the analysis will be available in time for the conference. Preliminary findings show that participants provided detailed accounts in which they recognized both benefits and challenges of video-based counselling, as well other specific issues related to receiving counselling in an online environment.

Research limitations

The majority of participants identified as White British. The sample may not be representative of the broader population of counselling and psychotherapy clients who have experienced online counseling. The self-reported data from participants can be subject to recall bias or social desirability bias.

Conclusions or implications

Employing the TRaCCs research consortium made it possible to conduct a big (for qualitive research) number of interviews and collect a large set of anonymised interview transcripts. This provided the basis for a significant and insightful study on clients' perceptions and experiences of video-mediated counselling. Challenges of this type of collaborative research are also discussed.

Considerations given to issues of equality, diversity and inclusion

In data collection and analysis, consideration was given to how intersectionality (interconnected nature of social categories) may have impacted the research process and findings. This can help in understanding the unique experiences of clients at the intersections of multiple identities.

Symposium Paper 3 - The lived experience of alopecia

Kevin Hogan[1] & Colette Lewis[2]

[1]Glasgow Caledonian University; [2]Birmingham Newman University

Aim or purpose

This study was conducted by one TRaCCs institutional member with support from TRaCCs. Alopecia is the medical term for hair loss; it affects 1 in 1000 people in the UK (Alopecia UK). Numerous standardised questionnaires have been developed to assess Quality of Life (QoL) among

those living with alopecia (see Thadanipon & Suchonwanit, 2021). These have been criticised for being restricted in scope, negatively biased, and lacking robust validation (Rencz et al., 2016). This study explored the lived experience of living with Alopecia using the repertory grid method (Kelly, 1955).

Design or methodology structure

Participants included 8 females living with Alopecia Areata (AA) (mean age = 37.57 ± 15.26). Repertory Grid analysis was used to explore how individuals interpret their experiences of living with AA. An interview guide was developed following recommendations by Jankowicz (2004) and Fransella et al. (2004). Inductive reflexive thematic analysis was used to analyse the data(Braun and Clarke, 2006).

Ethical approval

Birmingham Newman University ethics committee (S2022-002A).

Results or findings

Frequently the participants reported experiencing social anxiety and feared the reaction of other people. Participants described a range of negative social experiences including being mistaken for a cancer patient who was receiving chemotherapy, questions about their physical wellbeing, and assumptions being made about their femininity and sexuality. Participants described using a range of methods to manage and disguise their hair loss. In some instances, telling friends and colleagues about their alopecia brought a sense of relief. Participants described a need to raise awareness of alopecia and causes of hair loss.

Research limitations

The majority of participants identified as White British. All participants identified as female and all were recruited via the Alopecia UK website.

Conclusions or implications

The role of TRaCCs in supporting this single-institution research project is presented; in particular psychological value of research consortium engagement for encouraging and facilitating research is discussed.

Participants described their experience of living with AA as emotionally challenging. Counselling can help people with AA to process their experiences and the psychological impact of limited understanding within society. For some participants, the visual representation of their narratives provided by the rep grid methodology was helpful in making sense of their experience.

Considerations given to issues of equality, diversity and inclusion

Feedback was received from Alopecia UK to help develop the research methodology and interview questions, however, further involvement from people with lived experience of alopecia in the research may have enhanced inclusion. Since participants were recruited via the Alopecia website, the participants had all received or were engaged with support services.

Symposium 2

Lived Experiences of the Person-Centred and Experiential Psychotherapy Scale

Richard Doyle[1], Rinda Haake[2], Andrea Williams[1] & Emma Tickle[1]

Discussant: Sue Price[3]

[1] University of Nottingham; [2]University of Sheffield, [3]University of Salford

Correspondence: richard.doyle@nottingham.ac.uk

Aims of the symposium

The ten-item Person-Centred and Experiential Psychotherapy Scale (PCEPS) was developed as a treatment integrity measure for use in outcome research. Over the past ten years, it has also been used to assess counsellors applying for accreditation to deliver Counselling for Depression in NHS Talking Therapy (formerly IAPT) services in England.

The primary purpose of this symposium is to explore the lived experience of the PCEPS in different contexts. This symposium aims for a reflexivity of itself as a relational and socially located process for generating and presenting knowledge in the context of the BACP conference. By applying an intersectional lens and situating the PCEPS in the lived experience of racism and white privilege we will explore how the PCEPS could be developed as an anti-racist tool in practice. The hope is that this reflexive heuristic allows for further adaptations that are inclusive of lived experience as a social justice action.

Overall, we aim to appraise the strengths and limitations of the PCEPS, explore future directions and possible revisions, including those relating to Diversity, Equity, Inclusion and Belonging (DEIB).

Contribution of each symposium paper to the overall theme

The first paper examines a large data set of real-world PCEPS assessments by expert trainers rating counsellors in a Person-Centred Experiential Counselling for Depression (PCE-CfD) programme, combining this with a review of survey data exploring the lived experience of professionals using the scale.

The second paper explores lived experience from the presenter's intersectional social location as a black, middle aged, cis-woman encountering PCEA and the PCEPS in multiple roles that implicates responsibility for infusing counselling training curricula with a DEIB agenda.

The third paper explores how a bodily felt sense of white fragility can explicate a 'situational turn' for developing the PCEPS as an anti-racist practice.

Implications of the symposium theme for counselling, psychothreapy, coaching theory, research and practice

The PCEPS is an important measure and is used in high-stakes testing; however, this use has not been supported by sufficient psychometric research. For this reason, an evaluation of the scale is overdue, and perhaps could lead to an improved PCEPS 2.0 that centres DEIB as a universal concern.

Considerations given to issues of equality, diversity and inclusion

Recent increased awareness of issues of DEIB raises questions about whether measures like the PCEPS adequately assess counsellors' sensitivity to the impact of social and cultural context on clients, including the impact of social inequality, exclusion and micro-aggressions. The symposium explores whether a 'situational turn', through focusing on lived experience, is a more authentic and ethical process than a 'bolted on' EDI or Multi-Cultural Competency item.

Symposium Paper 1 - Reviewing PCEPS

Richard Doyle[1] & Rinda Haake[2]

[1] University of Nottingham; [2]University of Sheffield

Aim or purpose

For over a decade, the ten-item Person-Centred & Experiential Psychotherapy Scale (PCEPS) has been widely used in research and educational environments. It is the standard assessment scale used in PCE-CfD courses providing training for humanistic therapists working in NHS Talking Therapy services. In this research, we aim to review and update the scale in response to perceived item redundancy, reliability data and the importance of the extent to which therapists demonstrate awareness of and sensitivity to clients' cultural and social environments.

Design or methodology structure

We used a survey to gather qualitative and quantitative data from a sample of people with personal lived experience of using the scale in training, research and supervision. We captured perceptions relating to accuracy and consistency in scoring; differences between items in terms of relative importance and difficulty in scoring; and impressions relating to potential merging of items in an updated scale. Further, we asked about opinions relating to the revision of items to take into account Diversity, Equity, Inclusion and Belonging (DEIB) issues relevant to the psychotherapy process. Combining these data with an expanded exploratory factor analysis of 500 PCEPS-10 assessments and updated interrater reliability statistics informs our proposed changes to the scale.

Ethical approval

Approval gained from the University of Nottingham School of Education Research Ethics Committee.

Results or findings

Most survey respondents were moderately or very confident in the accuracy and consistency of their scoring, but less confident in consistency more broadly including between different raters at their own or other organisations. Experiential Specificity and Core Meaning were judged on

average to be the hardest items to score, and Clarity of Language was considered the least useful item in relation to the purpose of the scale.

Research limitations

The survey response rate and sample size are reflective of those who chose to respond to the invitation, a subset of the population of people who regularly use the PCEPS-10, hence the study has some ecological validity. The exploratory factor analysis used a large sample size (500 sets of 10 scores) so the findings are expected to be robust for data from the University of Nottingham. We compare the results with previous studies from other organisations.

Conclusions or implications

We discuss a proposed updated PCEPS informed by our statistical analysis and survey data, as well as implications for PCE-CfD and other counselling training.

Considerations given to issues of equality, diversity and inclusion

EDI issues are integral to the project's aims and we explicitly asked questions relating to this topic in the survey.

Symposium Paper 2 - PCEA, PCEPS and Me!

Andrea Williams

University of Nottingham

Aim or purpose

This research aims to provide insight into the lived experience of a black, middle aged, ciswoman, as a student, psychotherapist and a PCE-CfD tutor, with experience of the Person-Centred Experiential Psychotherapy Scale (PCEPS), contributing to the discourse of Diversity, Equity, Inclusion and Belonging (DEIB) within counselling and psychotherapy.

Design or methodology structure

The autoethnographic method allows me to explore my lived experience of being a black, middle-aged, ciswoman encountering the person-centred experiential approach (PCEA) and the PCEPS in three different roles: student, therapist and tutor. This encounter of the intersectional self in context is a creative, embodied, reflexive research process for generating ethical research data that articulates marginalised lived experiences of oppression. Methods such as journaling, conversation with peers and literature are identified as approaches that facilitate focusing on and symbolising my felt sense of how my social location intersects with my lived experience of the PCEA and PCEPS in these distinct roles.

Ethical approval

University of Nottingham School of Education Research Ethics Committee.

Results or findings

Four phases emerged as a heuristic that allowed for an increasingly intricate encounter of the PCEA and PCEPS from my intersectional and situated lived experience. These were:

1) Identifying the roles of student, therapist, and tutor as situations for encountering my intersectional lived experience of the PCEA and PCEPS.
2) Encountering each role separately so as to be with all that is implied.
3) The third phase explored how the three roles interacted or 'crossed' with one another so that each can imply more.
4) The fourth stage of the heuristic was to consider what this research process implied further about the PCEPS in practice in the context of PCEA counselling and practice and what role trainers could take in creating emancipatory contexts for learning.

Research limitations

This research has a small sample size, limiting validation of findings.

Conclusions or implications

Counsellors and psychotherapists should consider the wider social and cultural context in which the PCEPS are situated and engage with DEIB to enhance the effectiveness of the therapeutic relationship.

Ongoing research would help inform educators, students and practitioners regarding the black experience, DEIB and PCEPS. Developing a more inclusive curriculum can lead to a diverse and inclusive profession where all practitioners can experience equity and have a sense of belonging.

Considerations given to issues of equality, diversity and inclusion

The study is EDI compliant, and has explicit EDI aims.

Symposium Paper 3 - An Embodied Critical Inquiry: Situating the PCEPS through an Intersectional Lens

Emma Tickle

University of Nottingham

Aim or purpose

To articulate a Situated Person-Centred Experiential Psychotherapy Scale ('Situated PCEPS') as a response to the contemporary context of multiple social injustices and the author's intersectional lived experience of white privilege.

Design or methodology structure

This is an Embodied Critical Inquiry (ECI), consisting of methods for symbolising and explicating embodied ways of knowing that ethically implicates the researcher's response-ability, or 'next

steps'. The focus is on 'critical incidents' of the researcher's bodily felt sense of limited empathic encounter in relation to race, as a PCE facilitator. This process gave form to the researcher's incongruence of being 'The Good Guy'. Through 'crossing' this 'handle' with other terms, such as 'ally' and 'white fragility', the researcher's intersectional white privilege, and whiteness as an experiential-relational process was implied.

The researcher then adopted the ECI method Thinking at the Edge (TAE) for explicating further patterns that underlie these critical incidents. The systemic TAE process explicated a 'situational sensitivity' or a 'situational turn' as a conceptual framework, that was 'crossed' with other conceptual systems such as the PCEPS, Multi-Cultural Counselling Competencies and decolonialising the curriculum. The researcher then 'crossed' this exploratory conceptual framework of 'situational sensitivity' with their bodily felt sense of 'something falling away', listening to therapy sessions as an assessor using the PCEPS. This move was carried forward through a 12-month process of explicating and 'languaging' this 'situated turn' for each of the ten PCEP items. This 'languaging' was further word-smithed with one of the PCEPS-10 authors

Ethical approval

University of Nottingham School of Education Research Ethics Committee.

Results or findings

The researcher presents a rationale for a Situated PCEPS, infusing the measure with 'situational sensitivity' as a social justice action. This 'situational turn' has been crossed with each item and explicated throughout the entire measure. Situating experiential process necessitates and makes central the inclusion of Social Justice Issues (SJI) and Equality Diversity and Inclusion (EDI) in theory and practice.

Research limitations

The validity of the research is based on a feminist social justice critique that understands all knowledge to be situated, which inevitably limits any claims to universality and objectivity.

Conclusions or implications

This 'situational turn' is a process applicable to other measures and conceptual frameworks as a social justice action. This is as an alternative to 'bolted on' EDI interventions that can remake the marginalisation they seek to redress.

Considerations given to issues of equality, diversity and inclusion

EDI issues are integral to the project's aim of creating a revised PCEPS that is situated in the context of multiple intersecting social and climate injustices.

Posters

What difficulties, if any, have the parents of home-schooled children under 16 years of age experienced in seeking psychotherapeutic services for their children and can this inform the counselling/psychotherapeutic profession?

Lidia Bhaskar[1] & Sarah Craddock[1]

[1]Student, Lewisham Counselling & Counsellor Training Associates

Additional authors: Branimira Dineva

Correspondence: lidia.bhaskar@gmail.com

Aim or purpose

Our research aimed to investigate the experiences of parents of home-schooled children under 16 years of age, in relation to seeking psychotherapeutic services for their children. Our purpose is to inform the counselling profession/practitioners of any issues arising for/affecting this client-group.

Design or methodology structure

Our interviews conducted on-line with three participants were semi-structured, audio-recorded, and transcribed. The resulting data was thematically analysed underpinned by the principles of Interpretative Phenomenological Analysis (Smith, 2022).

Ethical approval

This was gained by submitting an ethical approval application to our training institution's Ethics Board, which was approved. We conducted our research in line with the BACP Ethical Guidelines for Research in the Counselling Professions (Mitchels, 2019). Participants were offered six no-fee counselling sessions if issues arose for them directly due to their participation in our research.

Results or findings

Our participants appeared to face significant challenges when attempting to access psychotherapeutic services for their children. Participants also experienced a systemic lack of information and support from GPs and statutory services; participant's proactive persistence was crucial to their ultimate success in gaining appropriate referral for their children.

It also appeared participants found that their voices and parental expertise in relation to their child's mental/emotional support-needs was often disregarded; unless participants were backed by a professional, such as a school representative.

Additionally, it appears participants often received inappropriate referrals to Social Services, due to the shortage of services for neurodivergent children; leaving participants feeling ignored, mistrusted and under immense pressure, which in-turn impacted on their own wellbeing and sound mental health.

Research limitations

The relatively small participant group may limit generalisability of our findings (McLeod, 2022).

Conclusions or implications

Our research indicates that mental health services, in which counselling/psychotherapeutic practitioners play an active role, need to develop greater awareness of the needs of this 'ignored' client-group. Our participants themselves appeared to define their current/future needs in calling for improved youth services, walk-in or parent appointment-based Mental Health Hubs, and improved, more transparent information from healthcare providers.

Considerations given to issues of equality, diversity and inclusion

Our research gave voice to the experiences of a minority client-group, which in-and-of-itself gives consideration to issues of equality, diversity and inclusion. Our participants, who met the qualifying research participation criteria, self-selected to contribute; thus, we ensured diversity and equality were inherent in the participant selection process, and the opportunity to be included as a participant - within the scope of our research - was protected.

How do members of the Traveller community experience accessing counselling in the UK and what, if any, are the implications for psychotherapeutic practitioners?

Rachel Kraftman[1], Patsy Winters[1] & Sammy Thornhill[1]

[1]Student Counsellor, Lewisham Counselling & Counsellor Training Associates

Aim or purpose

To explore if members of the Traveller Community seeking/wanting to access counselling/psychotherapy experience any barriers in doing so; to better inform practitioners of any barriers experienced by members of this community.

Design or methodology structure

Semi-structured interviews were audio-recorded with four self-identified members of the traveller community who had attempted to and/or had accessed counselling. Interviews were transcribed and data was extracted using thematic-analysis informed by IPA principles (Smith et al 2009).

Ethical approval

Our research was approved by our college Ethics Board. Participants were offered six no-fee counselling sessions should any issues arise from their research participation. BACP guidelines for research in counselling/psychotherapy (Mitchels, 2018) were followed.

Results or findings

Three overarching themes appeared to emerged from our data seemingly impacting on participants' seeking-out counselling services.

Internal community barriers included, limited literacy and IT abilities, hindering participants finding/contacting counselling services. The community's negative attitudes towards mental health problems and participants being unable to talk to about mental and/or emotional issues appeared to lead our participants fearing community-judgement; in-turn preventing them from seeking outside help.

External barriers appeared to rest in the discrimination experienced by our participants from authorities such as the police/other statuary services; evoking feelings of being pushed-out/misunderstood.

Those participants who did successfully access counselling described difficulties within the psychotherapeutic-alliance, due to practitioners' misunderstanding of the Travellers' way of life; apparently leading to participants' growing weariness/reluctance in seeking support from sources outside their community.

Research limitations

The generalisability of our findings may be limited by the relatively small number of research participants (McLeod 2015).

Conclusions or implications

Findings suggest negative attitudes towards mental health issues within the Travelling community played a role in discouraging our participants from engaging in counselling/psychotherapy. It also seems such services are perceived as authoritative; hence a pre-existing lack of trust appears to exist because our participants have experienced discrimination from other statuary services. This distrust appears to have been increased through participants' experienced lack of a of practitioners' understanding in relation to the lived experience of Travellers.

The above suggests practitioners need to develop greater understanding of the traveller community and its experiences. It appears there is a need for proactive engagement from counselling services to communicate with the Traveller community, thus increase trust through mutual discourse/improved understanding.

Considerations given to issues of equality, diversity and inclusion

Consideration was given to support literacy and IT limitations when recruiting participants, gaining their consent during the interview process itself. One participant requested their interviewing-researcher be a member of the Travelling community; this request was accommodated.

How do clients who identify themselves as fat experience the therapeutic alliance when their weight is introduced into the therapeutic frame and how can this further inform psychotherapy?

Julie Davies[1], Julie Prendergast[1], Lesley Tucker[1] & Vincent Vincent[1]

[1]Counsellor in Training, Lewisham Counselling & Counsellor Training Associates

Correspondence: christine.brown@lcandcta.co.uk

Aim or purpose

To explore how clients who identify themselves as fat experience counselling in relation to their weight being brought into the therapeutic frame and how this might impact on the therapeutic alliance itself; to further inform practitioners of any pertinent issues experienced/raised by this client group.

Design or methodology structure

We employed a qualitative research process and followed the 'BACP Ethical Guidelines for Research in Counselling/Psychotherapy' (Mitchels, 2019). Four participants were interviewed using a semi-structured interview process, video-recorded on Zoom. The interviews were transcribed, and resulting data was thematically analysed, informed by interpretative phenomenological analysis principles (McLeod, 2003).

Ethical approval

Before participants were recruited, we presented an Ethical Research Proposal to our institution's Ethics Board, who granted approval for our research to ensue. Participants were offered six no-fee counselling sessions if any issues arose in relation to their participation in our research.

Results or findings

Our findings indicate that any fatphobia/anti-fat bias in the therapist perceived by our participant-clients led our participants to losing trust in the therapist and the therapeutic alliance; this was especially relevant when our participants' weight had been raised by the therapist. Furthermore, any disclosed assumptions made by a therapist about a participant-client's weight, led our participants to feeling judged, unsafe, anxious, filled with shame, and ultimately 'holding-back' in the therapeutic work. Conversely, participants expressed a positive impact on the therapeutic alliance when they experienced their therapist as accepting/non-judgmental.

Research limitations

The small participation sample may restrict generalisation of our findings, and limit representation of the client group as a whole (McLeod, 2003).

Conclusions or implications

It appears when clients experience a therapist's conscious/unconscious weight bias, they feel unsafe and unable to fully embrace the therapeutic alliance. Extension of unconditional positive regard appears vital for clients to trust in the therapist/the therapeutic alliance. It also appears vital for a therapist to avoid offering any intervention that brings clients' weight into the therapeutic frame before the client does so themselves. Also, our findings strongly indicate that therapists must be aware of their own fatphobia/anti-fat bias and work on reducing such bias in themselves to improve their practitioner-effectiveness when working with clients.

Considerations given to issues of equality, diversity and inclusion

Participants self-selected via social media/open forum platforms. Inclusion requirements asked only for participants who had engaged in therapy while identifying as fat, whose weight had been introduced into the therapeutic frame, therefore research-participation was otherwise inclusive.

The power processes involved in the construction of bilingual counsellors' subjectivities in the UK

Ela Altin

PhD candidate, The University of Edinburgh

Correspondence: s2124318@ed.ac.uk

Aim or purpose

In the context of today's diverse world, characterised by immigration and globalisation (Burck 2004; Cenoz 2013), it has become more common for therapists to conduct therapy in their second language and share multiple languages with their clients (Nguyen 2014). Literature suggests that bilingual counsellors' multiple subjectivities by their languages influence their identity construction, career development, and therapeutic work (Kapasi 2013; Rosenblum 2011; Skulic 2007). Given the importance of bilingual counsellors' development for quality service provision (Schouler-Ocak 2020), this research aims to examine discursive formations of bilingual counsellors' languages and therapeutic practices.

Design or methodology structure

I employed Foucauldian discourse analysis as the research design and conducted semi-structured interviews for data generation. I held one-to-one interviews with 11 bilingual counsellors in the UK who provide counselling services in English and one or more other languages. The participants were recruited from various counselling services across the UK, employing a maximum variation sampling strategy by language to ensure linguistic diversity. For practical reasons, I conducted interviews through a combination of online and in-person meetings.

I developed the interview schedule drawing from the literature, applied bracketing interviews, conducted two pilot interviews, and revised the schedule accordingly. The interview schedule covered three main areas: participants' background, their training/supervision experiences in terms of bilingualism, the roles of languages in their counselling practice by considering enabling factors and constraints.

Ethical approval

The ethical approval was granted by University Ethics and Integrity Committee.

Results or findings

This is ongoing research. Full findings will be available in the time for the conference

Research limitations

My position and previous experiences, such as being a researcher, using English as a second language, may influence the interview interaction and the interpretation of findings. Therefore, I practised discursive and intersubjective reflexivity by reflexive journaling and bracketing interviews.

Since the interviews were conducted in English, the study reached solely participants' experiences constructed in English. It's important to note that these experiences might differ from those they would construct in their other languages.

Conclusions or implications

I hope that this research offers critical awareness on the role of language in therapy that could potentially enhance the quality and inclusivity of counselling training and provision in the UK.

Considerations given to issues of equality, diversity and inclusion

This research started with the argument that UK counselling training predominantly follows a monolingual English ideology, lacking awareness of bilingualism (Costa, 2020). So, it seeks to enhance our understanding of linguistic diversity in counselling by recruiting diverse bilingual counsellors and considering how language intersects with culture, religion, and gender.

An interpretative phenomenological analysis of trauma focused counsellor's experience of working with survivors of sex trafficking

Karen Foran

Psychotherapist & Clinical Supervisor, University of Salford

Correspondence: karenforancounselling@gmail.com

Aim or purpose

The aim of this research was to explore the trauma focused counsellor's lived experience of working with sex trafficked clients and to assess the psychological impact on trauma focused counsellors who work with sex trafficked clients.

Design or methodology structure

Three trauma-focused counsellors were recruited who had experience of working with sex trafficked clients. Data was collected through semi-structured interviews conducted using the online video platform Zoom. Interviews were to take place face to face, however, due to COVID-19 an amendment was added to the ethics application and approved by the ethics committee. The interviews lasted approximately 45 minutes. Interview transcripts were analysed using interpretative phenomenological analysis.

Ethical approval

The University of Salford Research Ethics Panel granted full ethical approval.

Results or findings

Four super-ordinate themes and eleven sub-themes were identified; the complexities of client/counsellor relationships; the overwhelming thirst for knowledge; the palpable nature of trauma; the essence of support and what that looks like. Additionally, the study identified clinical implications to develop further requirements for trauma focused counsellors who work with sex trafficked clients. It also highlighted areas in vicarious trauma, learning and support that can assist future counsellors to offer the most appropriate trauma informed practice when working with sex trafficked clients.

Research limitations

Due to such a small pool of counsellors that work with this client group, the participants were known to the researcher who also worked as a trauma focused counsellor with sex trafficked clients, as well as clients who experience sexual violence. It could be argued that due to this relationship between the participants and the researcher it could create bias which could have potentially impacted the findings. However, in contrast to this it could also create a more robust piece of research due to established relationships, rapport and a sense of familiarity that may have put the participants at ease when discussing such difficult content.

Conclusions or implications

This study has met the aims outlined, and findings also highlighted a clear picture of some areas that require further improvements. This was particularly in the area of relationships/interpreters, training, support of trauma focused counsellors, and the importance of supervision. Each of the themes that were developed where further supported by the literature even though there is limited studies in the specific area of counselling sex trafficked clients.

Considerations given to issues of equality, diversity and inclusion

Participants were three females, age range of 35-50, two identified as White British & one identified as White & Southeast Asian. All participants lived and worked in the Northwest of England.

Lived experiences of university students who access campus mental health support

Olga Papadopoulou

Additional authors: Klio Geroulanou

PhD Researcher, University of Bolton, UK

Aim or purpose

Research into the prevalence of mental illness among university students has drawn interest from all around the world. There are currently limited recent data and qualitative studies on what students think and feel about their experiences of receiving counselling from on-campus counselling services. 'What do students feel and think about campus counselling?' is one of the questions this study will address. Do universities offer counselling services that are available to everyone? Which aspects of counselling do students think are beneficial or unhelpful? How can universities improve access to mental health services for students? What steps could universities take to improve mental health services? Students' voices are heard as they share their personal lived experiences of university counselling.

Design or methodology structure

An interpretative phenomenological (IPA) approach will be utilized for this research. IPA is a qualitative research methodology that focuses on examining how people interpret and make sense of their individual lived experiences (Smith et al., 2009). Sampling involves university students who were referred or self-referred to university student counselling services, experiencing mental health difficulties. Participants were recruited via an online study page advertisement and snowball sampling. Materials involve online semi-structured interviews. 12 interviews have been conducted and the study continues with the analysis.

Ethical approval

Ethical approval has been granted for this research from the University of Bolton, University Research Ethics Committee (UREC).

Results or findings

Preliminary themes:
• Counselling was very helpful
• Students felt heard and supported
• Students improved their academic performance
• Limited number of sessions offered
• Too much paperwork to be filled out
• Long waiting lists
• Lack of options in counselling approaches
• Counselling services understaffed and poorly funded
• Students were referred to other services

Research limitations

Since IPA studies often only look at small samples, generalizability cannot be guaranteed. However, the goal is to illuminate the whole by closely examining a small part and putting a light on it.

Conclusions or implications

Students experience counselling as helpful. The lack of an adequate number of sessions being offered, shortage of staff, limitations of counselling approaches offered and counsellor's lack of experience, significantly decreased students' positive experience of counselling and of campus counselling services.

Considerations given to issues of equality, diversity and inclusion

Participants in this research reflect the diversity of our culture and conditions, considering race, ethnicity, gender, age, etc.
Sampling includes:
• 12 university students with a mean age of 24 years
• 6 undergraduate and 6 postgraduate students
• Gender: 8 female, 2 male, 2 non-binary
• Ethnic group: 6 British White, 2 British mixed, 1 British Black, 1 Chinese, 1 Indian, 1 Other white background

Reflections from LGBTQIA+ Individuals of their Past Experiences of Psychotherapy and Counselling and the Use of Creative Therapy - A Qualitative Study

Mark Crummy

Creative Psychotherapist Student, Edge Hill University

Aim or purpose

The aims of the study is to develop a more in-depth understanding of the LGBTQIA+ community in relation to mental health, psychotherapy and/or counselling. The study hopes to reflect on the past experiences of psychotherapy and/or counselling of the LGBTQIA+ community in order to determine what has been helpful and what has not. This study also aims to consider whether creative therapy could be useful for the LGBTQIA+ community when accessing therapy for support in relation to their sexuality and/or gender identity.

Design or methodology structure

Seven participants took part in the study aged between 21-41. They consisted of four gay people and three bisexual, with six of them identifying as cisgender and one as gender non-conforming. Participants were invited to take part in an interview consisting of open-ended questions relating to the topic of interest. Following this, a thematic analysis was completed, leading to a table of themes and subthemes from the data.

Ethical approval

Edge Hill University Ehtics Committee.

Results or findings

The thematic analysis unveiled four main themes, these were 'sexuality and gender within the therapeutic relation', 'desirable characteristics and attributes in a therapist', 'undesirable characteristics in a therapist' and 'creative therapy'. These themes had various subthemes such as 'discomfort around heterosexual male therapists', for example.

Research limitations

It was hoped that a wider variety of the community would be represented, however, the participants that took part and were interested were gay, bisexual and gender non-conforming with only seven participants. Therefore, this still leaves some unanswered questions for other groups within the community like lesbians, intersex, transgender etc., making it not as representative of the LGBTQIA+ community as I would have hoped.

Conclusions or implications

study indicated that the LGBTQIA+ community prefer working with LGBTQIA+ therapists due to a shared lived experience and perceived baseline understanding of each other. It was also found

that context was important for them in therapy, rather than emotion focus, and creative therapy also showed to be useful for the community. From researching this topic, there is a gap in literature exploring the needs of the LGBTQIA+ community in therapy and a lack of cultural competency research in order to help practitioners support LGBTQIA+ clients.

Considerations given to issues of equality, diversity and inclusion

This research is directly related to the LGBTQIA+ community. It is ensured that all correct language and respectful language has been used throughout the research. It addressed inequalities in psychotherapy/ counselling and LGBTQIA+ clients and I can draw from my own experiences in therapy as a gay man.

The role of expressive art therapy and neurofeedback assessments in improving clinical hypnosis adherence among anxiety sufferers

Koo Kian Yong

Hypnotherapist, New Mind Brain Health Centre

Additional authors: Azizah Abdullah

Correspondence: newmindcentre@gmail.com

Aim or purpose

This research intends to generate polyvagal-focused therapeutic guidance in line with anxiety sufferers. This study examines the effectiveness of the Creative Brain Health Intervention (CBHI), which includes expressive art therapy and neurofeedback assessments, as well as clinical hypnosis for anxiety sufferers.

Design or methodology structure

The study utilizes a qualitative method with a grounded theory approach to explore helpful and unhelpful factors of CBHI.

Ethical approval

The research received ethical approval (International IRB EX 15/04/2020/V2)

Results or findings

The results show that mental healthcare can be enhanced by addressing adherence, stigma, and support through a public system and psychoeducation, backed by six domains for anxiety treatment and innovative therapeutic approaches.

Research limitations

In qualitaitive research, trustworthiness is the alternate term for the reliability and validity (Farrelly, 2013). In qualitative research writing, trustworthiness denoted a vital element in ensure quality of qualitative studies (Korstjens & Moser, 2017). In the research context, the guideline prerequisites to develop a trustworthy study was a) credibility, b) transferability, c) dependability and confirmability, and d) reflexivity. All four criteria were further affirmed by the validity methods proposed by Creswell (2009) encompassing a) triangulation, b) member or cross-checking, c) consistent involvement and perception, d) external auditor; e) researcher's bias justification, and f) peer debriefing.

Conclusions or implications

The study recommends early intervention and prevention phases in future research to address stigmas and prevent mental disorder. Resultantly, therapeutic adherence could be enhanced with a polyvagal-focused framework CBHI established for this study. Consequently, the study suggests insights for developing therapeutic guidance to enhance adherence and prevent full-fledged anxiety complexities.

Considerations given to issues of equality, diversity and inclusion

The study focuses on establishing a polyvagal-focused therapeutic guidance-related evaluation instrument due to several gaps in the current mental health care system. Firstly, there is a global mental health concern that needs attention, and the World Health Organization (WHO) highlights the need to increase awareness among the general public for mental health care, especially for subclinical anxiety sufferers who are experiencing poor mental health but have not yet reached a full-blown anxiety disorder status. They tend to be ignored by the system in Malaysia. Thus, this study aims to raise awareness for equality, diversity, and inclusion for this group of individuals with poor mental health in the public health arena.

Life Lessons from Gen Z: on Wisdom, Leadership and Joy of Living

Ruxandra Anghel

Psychotherapist/Counselling Psychologist/Counselling Tutor, NSPC London

Correspondence: contact@theexpeerience.org

Aim or purpose

This research project explored the experience of joy of living during the times of the COVID-19 Pandemic for eight young adults of Generation Z. The exploration also covered the young adult's generational self-identity and their views about the world of today.

Design or methodology structure

Semi-structured interviews were used for data collection and the analysis was conducted using structural existential analysis, a qualitative phenomenological method that helped explore the experience of joy if living in crisis within the four existential realms of the participants (personal, relational, physical and spiritual).

Ethical approval

NSPC and Middlesex University ethical commitees

Results or findings

The findings of this research study hold valuable potential to generate social impact. The results could encourage the young generation and other individuals in their search for joy of living. The results also reveal meaningful insights into generational identity and inter-generational communication. The use of a framework that matches their values and identities seems to be needed to explore the young adults' existential world. The proposed framework is TRIBE and it includes the five domanis that resulted as the most important features of the world of young adults.

Research limitations

The research was a first to study the experience of joy of living for young adults in times of crisis, and hence it requires follow up studies with quantitative components. However, the study had a rigourous methodology which makes it trustworthy.

Conclusions or implications

Inter-generational attunement is much needed in all domains of social life to support the young generation as well as the future of the world.

Considerations given to issues of equality, diversity and inclusion

This research and its findings promote inter-generational inclusion in communities, education, at work and in policy making.

Exploring narratives of black students' perceptions of helpful and unhelpful aspects of the Arts for the Blues workshops (Haslam et al., 2019) with particular reference to four weeks of face-to-face delivery for black university students with anxiety and/or depression: Mixed Method Research

Kathleen Kwakye-Donkor[1] & Dr Joanna Omylinska-Thurston[2]

[1]Counsellor and Psychotherapist, University of Salford; [2]Supervisor

Aim or purpose

The study aimed to assess the effectiveness of expanding the Arts for the Blues workshops into four weekly sessions for black university students with anxiety and/or depression. Initially developed for depression, the workshops' relevance for black students was explored due to a lack of research on creative interventions for this demographic. Conducting the study as a black university student heightened awareness of the potential benefits of these workshops, particularly amidst the COVID-19 pandemic, Black Lives Matter movement, and global challenges.

Design or methodology structure

Using a narrative mixed-method research approach, recruitment targeted four to eight black university students through campus posters and Blackboard. Nine participants engaged in 90-minute face-to-face sessions over four weeks, employing various creative expressions such as sketching, writing, and dancing. Following this, four participants volunteered for face-to-face narrative interviews and consented to recording.

Ethical approval

Ethical approval was obtained from the university before recruitment commenced.

Results or findings

Six themes emerged from the findings, including 1) The Joy of Creative Methods, 2) Helpful Outcomes, 3) Unhelpful Aspects and 4) A Sense of belonging in the black community. 5) Shared Black Cultural Experience 6) Suggestions for future workshops included in-person drop-in sessions with gentle facilitation. Quantitative data indicated a reduction in anxiety and depression symptoms.

Research limitations

Limitations included the workshops' initial design for white participants, prompting suggestions for black facilitators in future sessions. Generalisability was limited due to the small sample size, highlighting the need for further research.

Conclusions or implications

In conclusion, this research explored black university students' perceptions of the Arts for the Blues workshops, indicating potential benefits. Participants particularly appreciated the shared cultural experience and expressed a desire for such services on campus, underscoring the importance of tailored support for black students with anxiety and depression.

Lightning Talks

Exploring the experiences of experts by experience in mental health research: A scoping review

Andrea Anastassiou

Research Fellow, BACP

Correspondence: andrea.anastassiou@bacp.co.uk

Aim or purpose

What is the experience of 'experts by experience' (EBE) in mental health research? Including what motivates them to participate in research in this way, what do EBE perceive as the benefits and challenges of their participation and how can researchers effectively facilitate the involvement of EBE in mental health research.

Design or methodology

This talk will present the preliminary findings of a scoping review which was conducted in accordance with Arksey and O'Malley's (2005) guidelines for conducting a scoping review. Searches of the PsycINFO, EBSCO and Google Scholar electronic databases were conducted, and reference lists of the identified studies were also reviewed to capture any additional relevant investigations. To meet the inclusion criteria, papers had to be written in English and report experiences of EBE who had involvement in the design and/or conduct of research within the field of mental health. Studies only reporting quantitative data or reporting the experiences of EBE involved in the development of services (as opposed to research) were excluded.

Findings from the review were then analysed using Braun and Clarke's (2006) guidelines for conducting a thematic analysis. This process involved initially reading the raw data through multiple times. Following this, codes were generated from the data as per Braun and Clarke's (2006) definition of a code. These codes were then clustered into overarching themes before a codebook was generated.

Ethical approval

N/A – this talk presents the preliminary findings of a literature review.

Challenges

Despite the growing recognition of the importance of EBE in the development of mental health research, there are still relatively few investigations and publications which have reported and reflected on the involvement of EBE. This talk will therefore advocate for greater discussion around the integration of those with lived experience in the research process, as well as consideration for how mental health researchers can most ethically facilitate the involvement of EBE in ways that are meaningful, inclusive and avoid tokenism.

Further to this, a second challenge emerged in relation to the generation of search terms, with the terminologyy in this area evolving and the terms used to refer to people with lived experience greatly varying amongst publications (e.g., Patient and Public Involvement (PPI), Client Involvement, Experts by Experience etc.).

Considerations given to issues of equality, diversity and inclusion

The scoping review inclusion criteria was developed to capture as many different relevant studies as possible, in order to be inclusive of the most diverse range of EBE experience

"That looks cringe." Designing a psychotherapy research study with and about young people

Jo Leather

Counsellor and Doctoral Student, Salford University

Additional authors: Joanna Omylinska-Thurston[1] & Donna Peach[1]

[1]Salford University

Correspondence: j.leather@edu.salford.ac.uk

Aim or purpose

Background: Not enough psychotherapy research gives voice to the views and perspectives of young people. However, if invited, young people do have a lot to say about their lived experience of counselling and psychotherapy. Learning from the experience of 16-18 year olds (late teenage) is important as their transition to adulthood can coincide with high levels of mental health distress. There is currently no evidence-based psychotherapeutic model of any modality developed specifically for late teenagers. The BACP recently issued a call to action for a paid counsellor to be present in every school and college. Psychotherapy services in education settings are a convenient and non-stigmatising alternative to CAMHS, which has long waiting lists. Practice orthodoxy suggests that young people respond to flexibility, creativity and non-verbal communication methods in the counselling room. Therefore, in this study, we will be developing and testing a new Pluralistic Creative Expressive Therapy (CET) adapted from the evidence-based Arts for the Blues creative group psychotherapy model.

Aim: To develop and test an age-appropriate theoretical model of Pluralistic CET for 16-18 year olds for use in colleges and schools.

Design or methodology

An Experts by Experience focus group made of young people aged 16-18 has widely informed the design of this qualitative research project so far, guiding the development of age-appropriate recruitment materials, overall project design and consent pathways.

The researcher is a young people's counsellor and this is a piece of practitioner-research that hopes to influence real-world practice. This project aims to recruit a purposive sample of 1-4 clients to attend 6, 45' weekly sessions based on adapted pluralistic creative psychotherapy (Arts for the Blues) in their sixth form college, beginning in January 2024. Therapist and clients will work as co-researchers to co-produce dyadic Case Studies that demonstrate the techniques and illustrate the experiences as well as helpful and unhelpful aspects of this approach in a college setting.

Ethical approval

Salford University Ethics Panel gave approval on September 18th, 2023.

Challenges

Challenges have arisen from negotiating the opposing needs of young people, the college setting and the requirements of the IRB.

The researcher would like feedback on what kind of research outputs/formats are the most helpful for therapists to be using in practice.

Considerations given to issues of equality, diversity and inclusion

Consideration has been given to addressing the relational imbalances of researcher/participant and client/therapist by enabling participants as co-researchers, encouraging participants to self-select their pseudonym, building in time for member reflections and avoiding existing client/therapist relationships.

Working therapeutically with people who have had spiritually transformative experiences

Christine Kupfer

Lecturer, Abertay University

Correspondence: c.kupfer@abertay.ac.uk

Aim or purpose

The study explored helpful and unhelpful aspects of therapy following spiritually transformative experiences (STEs). STEs refer to profound and potentially life-changing experiences that can include mystical experiences, often characterised by a sense of direct contact or oneness with the 'universe,' 'universal consciousness' or the divine; or other spiritual or magical-type experiences of 'non-shared reality'. STEs have been reported across cultures and throughout history and can occur spontaneously or be facilitated.

Research shows that in psychotherapy, spiritual experiences are often neither discussed nor included in assessment or treatment planning. Not least because of a lack of training in this area, they do not offer it to clients, who have been shown to feel reluctant to share their experiences without being asked about them. First research studies have shown that disclosure of STEs in therapy can be painful or even harmful, and that more research is necessary to inform practice and training.

The study seeks to address these gaps in knowledge and will focus on therapists who have worked with clients' STEs. Through semi-structured in-depth interviews, I explore how therapists have experienced working with clients who have had STEs. I focus on what therapists have found difficult and unhelpful, and what they have found helpful.

This research project aims to explore therapists' experiences of working with clients who have had STEs, enabling deeper and more practical insights into what has been found helpful and unhelpful in therapy after STEs, and into how therapists can best support clients in their integration processes. The research will contribute to facilitating better care for patients presenting with STEs, to supporting therapists in their client work, and to inform therapists' training.

Design or methodology

I am in the process of conducting eight semi-structured interviews with therapists about their experiences of working with clients who have experienced STEs (spiritually transformative experiences). The transcribed will be analysed by using thematic analysis.

Ethical approval

Ethical approval was given by Northumbria University.

Challenges

Lack of knowledge of STEs makes it difficult to recruit counsellors/therapists working in this field. I would like to get feedback on the results and interpretation of these. I will have completed the analysis by the time the conference happens.

Considerations given to issues of equality, diversity and inclusion

This research will have an impact on the inclusion of people with spiritual experiences and experiences of non-shared reality.

Eating Disorders and Psychosomatic Countertransference: Integrative Psychotherapist's lived Experiences

Rhiannon Rees

Psychotherapist

Correspondence: rhiannonreescounselling@outlook.com

Aim or purpose

Psychosomatic countertransference is a common phenomenon in therapy when working with clients with eating disorders (EDs). While there is a breadth of research about this phenomenon in other modalities and settings, there is a lack of knowledge of the experiences of Integrative Psychotherapists. This study aimed to explore Integrative Psychotherapist's nuanced personal experiences of psychosomatic countertransference, how this is understood and utilised.

Design or methodology

Qualitative methodology using semi-structured interviews was undertaken with four participants. The resulting data was analysed using interpretative phenomenological analysis (IPA) which illuminated five emergent themes: defining countertransference, the role of the body and countertransference, warning and threat, the therapist's sense of self and role, and the intersubjective third.

Ethical approval

This research was conducted in accordance with BACP, UKCP and Sherwood Psychotherapy Training (SPTI) ethical codes of practice and research. Ethical approval was granted by the Sherwood Psychotherapy Training Institute.

Challenges

As this research is complete, I am looking to share my work with colleagues to contribute to the existing body of knowledge in the field rather than receive feedback or help with an ongoing piece of work. I would be pleased to report my results which showed that therapists largely interpreted these psychosomatic responses as a countertransference resulting from the client's projection. This was viewed as a form of communication that facilitated the understanding and management of relational dynamics in the therapy. I would be pleased to provide a well-rounded view of the research including limitations of the study including the reliance upon the therapist's interpretation and assumptions of the client's process, thus creating a double hermeneutic, fundamental to IPA. This offered both limitations and benefits to the research. Vivid accounts of emotional and physical feelings suggests that participants have a conscious awareness of the phenomena, which appears to contradict the literature, another point also noteworthy for discussion within limitations.

Considerations given to issues of equality, diversity and inclusion

The term Eating Disorder is white, western medicalised term and therefore participants ascribed to this term. This research acknowledges this as a limitation of applicability to practitioners of cultural or ethnic groups where this terminology and language is not widely utilised for their client group.

In conclusion, this study demonstrated the powerful impact upon the therapeutic relationship and the client's relational needs when psychosomatic countertransference was understood and utilised.

Counsellors' Experiences of Hope When Working with Refugee Clients: Preliminary Insights from Pilot Interviews

Shaima Ahammed Thayyilayil

Psychologist, University of Alberta

Aim or purpose

This study aims to understand counsellors' lived experiences of hope in the context of refugee counselling. In order to guide the interview process, the research question is represented by two subordinate questions –

RQ 1. What do counsellors experience as they witness their refugee clients' hope and hopelessness?

RQ 3. How are counsellors' responses and interventions informed by their observations of refugee clients' hope and hopelessness in therapy sessions?

Design or methodology

The research employs an Interpretive Phenomenological Analysis (IPA) approach. Preliminary data from pilot interviews using semi-structured interviews with counsellor participants were used to refine the interview questions.

Ethical approval

Application for the original study is underway from Human REB – University of Alberta

Challenges

Data from pilot interviews highlighted the importance of understanding the cultural narratives of hope. Feedback would be invaluable towards refining my interview questions to capture the intercultural dynamics of hope in the context of counselling.

Considerations given to issues of equality, diversity and inclusion

Counsellor participants across a range of ethnicities and socio-economic backgrounds will be included in the original study. Potential participants will be identified from two immigrant and refugee settlement organizations. During the interview process particular care will be taken to ensure that questions and interactions are culturally sensitive and do not perpetuate any stereotypes or biases. Any potential biases that arise during the analysis will be discussed and addressed during the Hope Research Group Discussion meetings at the University of Alberta.

Taking myself seriously: an exploration of illness beliefs, empathy and the capacity for change

Kate Ashley

Therapist

Correspondence: kookooburra@hotmail.com

Aim or purpose

Whether acting as if you take yourself seriously can support psychological change.

Design or methodology structure

Autoethnography. I conducted a self-interview and analysed the themes that arose, using myself as an in-depth example of different cultural influences (religion, family values, and geographical location).

Ethical approval

Course director of the MA in Counselling and Psychotherapy.

Results or findings

That while a large part of me remained sceptical of both autoethnography and parts work, I am now able to act differently when I feel ill: recognising my symptoms, and responding with medical attention, treatment, or rest.

This research increased my awareness of my different parts, and their role in my beliefs and attitudes. I demonstrate that I can choose to take my symptoms seriously, whether or not my mind accepts them as wholly valid.

My Practitioner Self is more aware than ever of how my counselling clients minimise, and how I might best bring this into their awareness too

Research limitations

Autoethnography by design focuses on one participant – my findings may not be applicable to others, particularly those from very different cultural backgrounds. However this research does provide a very rich insight into how illness beliefs are developed, and how they may be adapted. Future research questions include: how do other people's illness beliefs compare, and how are they constructed? How much awareness do people have, particularly counsellors, about their beliefs around illness?

Conclusions or implications

Change is possible, and you do not have to wait until every part of you is on board before starting to treat yourself more kindly or take yourself seriously. This research demonstrates the both/and

principle that is central to much of therapy – the more playful I allowed myself to become, the more seriously I could attend to my feelings, and vice versa. One does not preclude the other.

The value I believe this project adds to the field is primarily in greater awareness, particularly in therapists' personal development. Do other counsellors recognise when and how they struggle to care for the self – a key value of the BACP's ethical framework (2018)? Can they bypass stigma to admit that their core beliefs may impact their client work, and take conscious steps to heal?

Considerations given to issues of equality, diversity and inclusion

I am writing from a queer, female perspective, and this research has a key focus on religion. I also acknowledge that further research on how different demographic groups' pain is taken seriously or dismissed would be very valuable.

Conducting a co-operative inquiry in the field of counselling research: critical reflections and learnings from a 'first time' inquirer

Amanda McGarry

Counsellor and Lecturer, University of Chester

Correspondence: a.mcgarry@chester.ac.uk

Aim or purpose

The aim of the research was to explore gendered power dynamics within the therapeutic relationship from the perspective of women and non-binary counsellors. A further aim of the research was to consider the power dynamics in relation to the data collection process, therefore, a co-operative inquiry was established to explore the lived experience of practitioners. Heron (1996) notes that co-operative inquiry, a form of participatory action research, is positioned as a form of inquiry 'which does research with people not on them or about them' (Heron, 1996, p. 19).

Design or methodology structure

This research was conducted from a qualitative perspective using co-operative inquiry. A group of nine co-researchers met on 11 occasions between March – October 2022. Data from the meetings was analysed using constructivist grounded theory.

Ethical approval

Granted by the University of Chester.

Challenges

Challenges in the process are explored in the presentation. Feedback would be welcomed on the aim of the research.

Considerations given to issues of equality, diversity and inclusion

Recruitment for the co-operative inquiry was initially done through groups representing minorities, with little response. Wider recruitment strategies were employed which resulted in a diverse sample in relation to age, gender, religion, and class, however, there was less diversity in relation to race and disability. This has implications for the application of learnings to future groups.

Understanding vicarious trauma and vicarious growth; a new paradigm in therapeutic practice

Simon Wharne

Chartered Counselling Psychologist / Deputy Course Leader for a DCPych Programme, New School of Psychotherapy and Counselling

Correspondence: simonwharne@live.co.uk

Aim or purpose

How should we understand vicarious trauma and vicarious growth; what does the research literature tell us and what does a phenomenological research study reveal?

Design or methodology

A literature review and a phenomenological study. The review sets out findings that are mostly survey based, focusing mainly on psychological therapists, in relation to vicarious trauma and vicarious growth. The reported study explores these phenomena in the context of potential and actual client deaths. This study employed a hermeneutic phenomenological approach to the analysis of transcripts from interviews with seven mental health practitioners.

Ethical approval

NSPC / Middlesex University

Challenges

Some literature suggests that newly qualified practitioners are more immune to vicarious trauma, that the risk is greater at a mid-career point. Some also suggests that practitioners only experience a sense of growth if their clients experience growth, but this was not supported by the phenomenological study. Practitioners can be distressed and experience growth at the same time. They feel strengthened when connected with a sense of what it means to be human. How do mid-career practitioners maintain their wellbeing while they are routinely exploring the distressing experiences of their clients?

Considerations given to issues of equality, diversity and inclusion

The literature review includes research studies across a diverse range of cultural settings, and the phenomenological study included participants with differing personal characteristics. The analysis was conducted in a manner that was open to varying cultural and personal experiences.

Revisioning the Person-Centred approach from the lens of the Caste system of the Indian subcontinent and its diaspora

John Fen Raju

Master's Student, University of Nottingham

Correspondence: fenjohnraju@gmail.com

Aim or purpose

This study looks at the Person-Centred approach from the lens of the caste system of the South Asian communities and its diasporas and investigates if this approach can address the issue of caste both as a social variable and lived experience. There is currently no literature on this.

Design or methodology structure

This research was conducted through a qualitative method of study. Data was collected through minimally structured online interviews with participants recruited using a snowballing method. A thematic analysis has been used to analyse the data.

Ethical approval

The Ethics committee at the School of Education of the University of Nottingham.

Challenges

This research encountered a significant challenge within the South Asian community: the reticence to discuss caste. This reluctance acted as a barrier to recruiting suitable participants. Outreach attempts through various Facebook groups often resulted in bans or flags, suggesting a strong belief that public discourses on caste are inappropriate. However, the study argues that this perceived inappropriateness stems from discomfort with challenging entrenched caste privileges and the unconscious or conscious compliance with this oppressive social hierarchy. It would be immensely helpful to gain feedback on we as practitioners can create more caste-informed spaces within therapy.

Considerations given to issues of equality, diversity and inclusion

The UK is home to one of the biggest South Asian diasporic communities in the world. Yet the lived experiences of South Asian people and their voices have often been underrepresented in the overarching field of academia and more specifically counselling and psychotherapy in the UK. The imbalance in power that stemmed out of the colonial past has led to a cultural hegemony of the Global North over the Global South and has effectively left the Global North in charge of determining which narratives are worth representing in academia. Caste discrimination has infused itself within the social fabric of South Asians to the degree that it has been normalised. The following study aims to address this major gap and draw the attention of the global audiences from the person-centred community to the experiences of South Asians, particularly on the issue of caste discrimination.

A Grounded Theory Approach to Grief Processes of Parents with Sudden Child Loss

Sedanur Caydı[1] & Zehra Erşahin[2]

[1]Research Assistant, Social Sciences University of Ankara; [2]Senior Lecturer in Clinical Psychology, Faculty of Life and Health Sciences, De Montfort University

Correspondence: sedanur.caydi@asbu.edu.tr

Aim or purpose

While it is well understood that each loss has varied repercussions, there is little literature on the nature of sudden child loss. On that note, the purpose of this study is to gain a thorough understanding of the grief processes by exploring the perspectives, perceptions, and experiences of parents who have endured sudden child loss.

Design or methodology structure

Data is collected from 6 to 8 people, aged 18 to 65, who lost a child unexpectedly at least a year ago and do not have a diagnosis of psychosis, using a convenient sampling procedure. The study follows a two-phase methodology, the first of which comprises giving the Prolonged Grief Scale (PG-13) to identify the presence of symptoms of prolonged grief disorder for them to be included in the study. Semi-structured interviews are conducted in-person or online, and recorded. Data is analyzed using Grounded Theory Methodology and Maxqda Software to gain insight into participants' lived experiences.

Ethical approval

The Institutional Ethics Committee of Social Sciences University of Ankara granted ethical approval for this study

Challenges

The most challenging aspect during the research has been reaching participants. The issue of loss is one that is avoided in conversations in Turkey, where the study data was collected. It has been observed that avoidance is even more pronounced when the topic involves the loss of a child. I would like to receive information regarding the research methodology and what the preliminary findings suggest.

Considerations given to issues of equality, diversity and inclusion

Different cultures have distinctive ways of mourning and coping with loss. By offering insight into how Turkish parents experience and deal with a particular type of grief, which may differ from Western or other cultural standards, current research has the potential to advance cultural sensitivity and inclusivity. In addition, this research offers a voice to a perspective that may be underrepresented by examining a particular population, in offering equal and more accessible mental health services.

The marginalisation of psychological contact

Ann-Marie Wilson

Counsellor and Psychotherapist, MBACP

Aim or purpose

This MA research dissertation sought to understand how student person-centred counsellors feel about using Pre-Therapy and Contact Reflections. It came from a particular interest, based on working in health and social care for over 25 years, of how this understanding might relate to attitudes and provision of counselling and psychotherapeutic support of people with learning disabilities. My own professional experience in the learning disability field indicated an inadequate understanding in the wider health care profession of how to identify and support people with learning disabilities with their mental health needs, leading to an over-reliance on medication and/or limited, if any, opportunities for accessing therapeutic support.

Design or methodology

It involved semi-structured interviews with three students from within the UK who had attended a lecture on Pre-Therapy as part of their course. Interpretive Phenomenological Analysis was used to analyse the data generated.

Ethical approval

Ethical approval was granted by the Liverpool John Moores University ethics committee.

Challenges

The lack of uptake in candidates could suggest a gap in the teaching of Pre-Therapy on person-centred approach courses or a reluctance on the part of students to consider using this in their practice, within and beyond training, and bears further investigation. It was reassuring that those who did respond believed that with additional professional support they would feel comfortable to use contact reflections. The main issue appeared to be a lack of opportunity to develop and explore their theoretical and practical understanding of psychological contact, including facilitating a deeper understanding and awareness of its place within the person-centred approach. Alongside this the need for opportunities to explore the ways in which contact is/can be lost and how to respond to it, thus opening out for students a wider range of clients that person-centred practitioners can work with.

Considerations given to issues of equality, diversity and inclusion

This is a client group whose marginalisation in society increases the risk of poor mental health and emotional distress. The research recommendations seek to highlight the lack of variety, flexibility and knowledge of resources to support people with learning disabilities and their mental health which further marginalises them and wonders how far this might relate to a lack of understanding, a possible marginalisation of the centrality of psychological contact in all therapeutic modalities, not only in the person-centred approach.

Between Opaque and Open: Gestalt practitioners' utilisation of self-disclosure

Cara Robin

[1]Counselling & Psychotherapy Student, Newman University

Aim or purpose

The aim of this research is to explore Gestalt therapist's use of self-disclosure (TSD) as an intervention and its perceived implications on the Gestalt concept of the dialogic relationship (Hycner and Jacobs, 1995) and I-Thou meeting (Buber, 2013). It has been noted that TSD may have different aims and outcomes depending on the theoretical lens of the practitioner and that further, modality focussed research is needed (Danzer, G. 2019). Similarly, it has been suggested that TSD should be utilised with a clear purpose and aim within a therapeutic model (Goldfried, Burckell & Eubanks Carter, 2003; Farber, 2006; Danzer, 2019). Therefore, this research seeks to explore the use of TSD within the underexplored gestalt model.

Design or methodology structure

Qualitative thematic analysis using one to one, semi-structured interviews. By applying thematic analysis to transcripts of semi-structured interviews with Gestalt Practitioners, emerging themes will be analysed and reported according to the guidelines provided by Braun & Clarke, (2013).

Ethical approval

Granted by Newman University Ethics Committee, October 2023.

Results or findings

Having begun collecting data, interim expectations are that therapists are making frequent, conscious, and unconscious decisions and weighing up the risks and rewards of TSD within the dialogic relationship – however, this will be updated early next year with completed data analysis.

Challenges

Due to the nature of qualitative research, this study was undertaken with a smalll sample size of only white participants. Therefore additional perspectives, particularly from BAME Gestallt practitioners, on the use and impact of self-disclosure on the dialogic relationship would be an insightful and useful discussion.

Considerations given to issues of equality, diversity and inclusion

The impact of self-disclosure on the power dynamics of the therapeutic relationship will be explored within the concept of I-thou/I-it relationships (Buber, 2013). Unavoidable therapist self-disclosure such as therapist's gender, race and location may have an important impact on the therapeutic relationship. This will be considered within the research and line of questioning.

Attending to Gender: How therapist's experiences of their own gender identity inform therapeutic encounters

Sid Good

Psychotherapy and master's year 3 student, counsellor, Newman University

Correspondence: info@good-therapy.co.uk

Aim or purpose

This study aims to explore how gestalt therapists experience their own gender identity and how this informs the therapeutic encounter. There is a need for more research about how therapists develop their awareness and understanding of their own gender (Ardment, 2008; Borkan, 2017; Hunt, 2011; Johnson, 2014; Kolmannskog, 2014). There is a wealth of research about the clients experience of gender but little about therapists experience of gender (Fallon, 2012; Johnson, 2014; Kolmannskog, 2014).

Design or methodology structure

Semi structured interviews will be used to conduct interviews with 6-8 gestalt therapists which will then be analysed using IPA analysis.

Ethical approval

Newman Ethics Committee, January 2024.

Results or findings

Anticipated findings demonstrated in previous research show that therapists may undervalue the importance of gender in therapy (Arora and Bhatia, 2022; Baumann et al., 2020; Gehart and Lyle, 2001) and that therapists need to understand their own gender identity and privilege when working with clients (Arora and Bhatia, 2022; Baumann et al., 2020; Dalton et al., 2022; Gehart and Lyle, 2001).

Research limitations

Only experienced Gestalt counsellors/pschotherapists were used due to time constraints and the phenomological underpinnings of Gestalt therapy lending itself well to exploring lived experience with IPA. In the future this research could be replicated with counsellors of different theoretical orientations. Due to ethical considerations counselling clients were not recruited but research is needed into how clients gender identity affects the efficacy and experience of therapy.

Conclusions or implications

The anticipated conclusion and implication would be that therapists gender identity is important in the therapeutic encounter and training within psychotherapy and counselling needs to be further considered to give therapists the tools to examine their own gender identity and its implications in clinical practice as well as the skills for working with gender diversity.

Considerations given to issues of equality, diversity and inclusion

Research has found many therapists feel ill-equipped to work with the transgender community and fear getting it wrong (Mollitt, 2022; Rosati, 2022). Due to the politicisation and polarisation of trans identities in the UK, therapists can either not pay enough attention to gender in the therapeutic encounter or inflate the importance of trans identities when a trans client may want to explore other issues (Mizock & Lundquist, 2016). This research has potential implications in helping therapists increase their empathy for working not just with trans clients but clients of a different gender experience to themselves and identifying gaps in which training and further research is needed.

Discussions

An Autoethnographically Derived Theoretical Model of Autistic Self-Actualization

Lucy Button[1] & Jay McCarthy[1]

[1]Psychotherapists working in private practice

Correspondence: lucybutton9@gmail.com

Background and context

Autistic and multiply neurodivergent researcher and person-centered psychotherapist briefly presenting a theoretical model of an autistic actualizing process incorporating person-centered theory, the double-empathy problem (Milton, 2012) and other autism research.

Issues for discussion include the efficacy of person-centered therapy with autistic clients, ways in which autistic thriving may look different, potential relevance and applicability of the model, areas for further research. Debates include the predominance of autism research by non-autistic researchers and what my own and other autistic researchers may add to the field.

Questions and issues to consider in the session

- Why might some autistic people have enhanced conditions of worth?
- What impact does neuronormativity and the double empathy problem have on the development of autistic people's self-structure?
- Why can autistic masking be a cause of psychological distress?
- Can autistic masking be a form of incongruence?
- What are some things to consider as a person-centered therapist working with autistic clients?

Audience

Neurodivergent counsellors and psychotherapists, any counsellors and psychotherapists working with autistic clients, and people who are researching autism and person-centered counselling and psychotherapy are all people who may particularly benefit from attending this session.

This session will be of use to delegates by offering them a theoretical and lived experience-based model for working with autistic people. A model created as part of an autoethnographic MA distinction piece of research by an autistic psychotherapist working with autistic clients.

Considerations given to issues of equality, diversity and inclusion

The discussion is of a model for understanding how neuronormativity and ableism can intersect with autistic processing to lead to masking, incongruence and psychological distress in autistic people. The model is created and presented by me, an autistic researcher and therapist who

works with autistic clients. Presentation of the model includes consideration of how autistic lived experience intersects with other discriminated against identities, with examples given from my lived experience of being both autistic and Queer.

Is there a place for humour in the therapy room?

Micheal Kentish

Postgraduate student, Keele University, School of Medicine

Background and context

In every walk of life, and in virtually every context, humour manifests itself. This is perhaps why *Always Look on the Bright Side of Life* and *Another One Bites the Dust* remain popular choices of music at funeral services. Humour connects, it soothes, it comforts us when we are confronted by the absurdity of our existence.

This discussion topic is inspired by, and follows on from, recent research I carried out during my Master's.

Questions and issues to consider in the session

The two main questions for this discussion are:
1. Is there a place for humour in person-centred counselling?
2. Regardless of the response to the question above, why is humour absent from the academic literature and the syllabi of person-centred training institutions?

While the impacts of mirth and laughter on our physical and psychological wellbeing have been extensively researched around the world, considerably less research has been carried out into the impacts on clients and/or therapists of humour arising in the therapy room. Since 2000, just three primary research studies have been carried out on humour in the person-centred counselling context (Briggs & Owen, 2022; Talens, 2020; Velasquez & Montiel, 2018). It is a subject Carl Rogers himself wrote nothing about. Yet all the research highlights there are significant benefits to both parties in the dyad, and some risks.

It is hoped that these two questions start us thinking about – among other things – what we're supposed do when a client introduces humour into our session (cf. Brown, 2015), or when congruent selves' funny bones start twitching? Should we avoid humour at all costs (cf. Kubie, 1970) or just certain kinds or at certain times? Is humour a tool for the therapist to use? Is there really such a thing as "therapeutic humour" (Franzini, 2001; Sultanoff, 2013)?

Audience

The session should be of interest to any experienced and trainee practitioners who have wondered what place, if any, humour has in the person-centred therapy room, or why it does not feature in training syllabi.

Considerations given to issues of equality, diversity and inclusion

While laughter and humour exist in every human culture, differences in the perception and appreciation of humour vary across cultures (Malik, 2021; Maples et al., 2001; Vereen et al., 2006), between genders (Crawford, 2003) and they evolve over time (for example, *"Ooh, Matron! Why Carry On films refuse to remain dead"*, Heritage, 2019). We might then wish to consider how humour intersects with power imbalances in the therapeutic relationship.

Establishing and managing training and research clinics - Experiences of the TRaCCs consortium

Robert Scruggs[1] & Sally Lumsdaine[2]

[1]Research Fellow, BACP; [2]Programme Lead MSc Counselling, Abertay University

Correspondence: robert.scruggs@bacp.co.uk

Background and context

The value of research informed 'practitioner-researchers' is more clearly documented in clinical psychology (e.g. Borkovec, 2004; Dyason et al., 2019), partly due to the doctoral nature of these qualifications. The value of research in counselling and, with some debate, psychotherapy practice appears to be lower. However, regulatory and policy authorities are increasingly prioritising evidence-supported therapeutic practices. As such, trainees with an appreciation and capacity for understanding and undertaking research will be well equipped for the developing counselling workforce.

Training and research clinics fulfil an important role in providing opportunities to develop these skills, as well as generating vital research data. However, the establishment of clinics is a complex process with many obstacles, with clinics taking different routes to operation and success.

We invite delegates to discuss the establishment and running of training and research clinics with a panel of experienced clinic founders and managers.

Questions and issues to consider in the session

What are the major obstacles to establishing effective clinics, and what are some solutions?
In what ways do we manage relationships with 'parent' universities/colleges?
How can research skills development be more explicitly integrated into clinical practice?

Audience

This session is aimed at those who are are interested in training and research clinics as both a research and clinical activity. This session will appeal to those who are considering setting up a clinic, those with experience to share, and those interested in how clinics can work collaboratively to enhance research output. Those with managerial, financial, administrative and legal expertise to share could also contribute greatly.

Considerations given to issues of equality, diversity and inclusion

Most training and research clinics operate on a free-at-point-of-use or low-cost model, providing therapy to those who typically couldn't afford private practice and are, for one reason or another, inelligible for NHS treatment options. Whilst socio-economic status is an often overlooked aspect of EDI strategy, it forms the backbone of material inequality experienced by all marginalised groups. As such, the provision of low-cost or free therapy is important for providing equal and inclusive access to counselling.

Devolution of health policy in the UK: what are the implications for counselling and psychotherapy?

Susan Hughes[1] & Steve Mulligan[2]

[1]Research Fellow, BACP; [2]Policy and Engagement Lead (Four Nations), BACP

Correspondence: susan.hughes@bacp.co.uk

Background and context

How mental health is addressed in policy influences how talking therapies are organised, funded and delivered (Jenkins et al., 2002). Devolution of social policy in the United Kingdom (UK) has led to disparity in counselling and psychotherapy service delivery (Feltham & Horton, 2012). Availability of counselling services in the UK can be affected by policy matters such as governance of the mixed economy of provision and regulation of therapist training and practice. In policymaking, the participation of people with lived experience of therapy can enable services to be shaped and improved (Glasby & Tew, 2015). It is crucial that a wide variety of talking therapies from public, private and third sectors are supported to ensure individuals from all backgrounds and communities can access support suitable to their individual and cultural needs (Fernando, 2002).

In recent policy documents and consultations, each of the devolved governments has emphasised the importance of prevention and early intervention in healthcare. However, decades of neoliberal government and protracted austerity have restricted the counselling and therapy services that are freely available through the National Health Service (NHS). Many believe the way forward for efficient and well-connected services is the integration of health and social care departments. Northern Ireland is the only nation that has an established integration infrastructure, which was implemented in 1972. Research indicates however, that siloed working continues to be a problem and the full potential of integrated working is yet to be realised (Birrell, 2009).

Questions and issues to consider in the session

1. How does policy shape counselling and psychotherapy across the UK?
2. How has devolution changed counselling services across the four nations?
3. What lessons can be learned from health and social care integration in Northern Ireland and is integration the right direction for other nations to take?
4. How can the voices of those with lived experience of counselling and psychotherapy contribute to policy development?
5. Can citizen participation help to address mental health inequalities?
6. What is the role of research in policy development?

Audience

This session will benefit delegates who are interested in issues regarding policy development and devolution across the four nations, integration of health and social care services or inequalities in regards to counselling access in the UK.

Considerations given to issues of equality, diversity and inclusion

This session will consider health inequalities and the ways in which policy can address issues regarding inequitable counselling access and treatment experienced by marginalised individuals and groups.

A duoethnographic study of how two women over 60 make meaning of a methodology and of life

Kate Diggory[1] & Lois de Cruz[1]

[1]Lecturer, University of Keele

Correspondence: c.j.diggory1@keele.ac.uk

Background and context

This discussion abstract originates from our current duoethnographic study of how two women over 60 make meaning of life after completing a recent PhD. This has been an enriching process for us and one we feel will contribute to an interesting discussion on the lived experience of older female researchers.

In 2020-21 the number of female doctoral students amounted to approximately 52,000 and it is estimated that around 2,600 female students over 51 started a doctorate, although completion dates by age were not identified (HESA, 2022).

Research into non-traditional doctoral degree student (such as female, over 30, studying part-time, with a non-white ethnicity, with caring responsibilities, self-funding and studying for reasons other than pursuing an academic career) is growing (Offman, 2011) but to date very little has been written about older womens' post-doctoral experience.

A literature review identified one doctoral study exploring the experiences of women undertaking a PhD in later life (Kamenitz, 2021). Kamenitz comments on the paucity of research on women starting their doctoral journeys over the age of 50 but she does not comment on their actual post-PhD experience. Significantly, in the field of counselling, many older women come into academic life after professional careers, yet their voices are rarely heard as they seek to develop their academic careers.

Questions and issues to consider in the session

• How might we use duoethnography to enable conversations around the lived experience of older female post-doctorate researchers.
• What might be the experience of completing a duoethography, including any potential therapeutic benefits?
• Why is there so little research interest in the lived experience of older female academics?
• What might be the diverse cultural and societal expectations placed on older women after the completion of their doctorates?
• How do we get further education institutions to recognise and value the experience of these older women academics?

Audience

• Older therapists considering entering doctoral programmes
• Providers of doctoral education programmes
• Therapists and researchers interested in exploring duoethnography
• Researchers interested in the older female perspective of doctoral education

• Counsellors who work with older women and who have a specific interest in older women's social, cultural and health issues.

Considerations given to issues of equality, diversity and inclusion

• Older women need to find a voice
• Older women are often part of the sandwich generation caring for elderly relatives or grandchildren. For example, the researchers writing this paper have both cared for adult children with chronic illness during their research.

Voicing the censored self: A hermeneutic phenomenological exploration of navigating silence and authenticity in South-East Asia

Magdalen Cheng

Existential Psychotherapist, New School of Psychotherapy and Counselling

Correspondence: Info@encompassing.co

Background and context

A key facet of authenticity in many conceptualizations is true self-expression. It has gained reputation in recent times for being synonymous with being true to one-self. Existing empirical cross-cultural research suggests that authenticity is universally experienced in all cultures even if they do not endorse the modern popular conception of authenticity. However, few qualitative studies exist to show the lived experience of navigating self-expression in Asian cultures where group harmony often holds more importance than individual expression.

Applying Van Manen's hermeneutic phenomenological approach, this study captured the ambivalence, complexity and paradoxical nature of Singaporean millennial's voluntary self-censorship, as they navigate their voices in their country. Amidst power imbalance, their experience is made invisible through the disapproving, critical gaze of others. Feeling restricted, constricted and punitive, participants speak of having to tread carefully in their interactions as standing up to specific individuals or calling out wrongdoing could result not only in being silenced; it could lead to negative consequences. Yet, for most of them, there seems to be a continuous dialectical exchange between the processes of self-censorship and self-expression. Just as they engage in self-censorship and self-effacement, equally they creatively enable other spaces where expression and agency can take place. A divided personality is experienced here as they navigate the paradox of individualism that legitimates liberalism and the cultural homogeneity required by its commitment to state and cultural discourses.

Questions and issues to consider in the session

As psychotherapists, it's vital to reflect on how our own beliefs and political stance intersect with those of our diverse clients:

- Self-Censorship Awareness: In what ways do we acknowledge and address the concept of self-censorship in our practice, and how might it impact our clients' therapeutic journey?
- Agency and Empowerment: How does our view of client agency affect the way we support their empowerment and self-advocacy, especially in the context of marginalized or underrepresented communities?
- Cultural Humility: How do we ensure that our practice is guided by cultural humility and a willingness to learn from our clients, particularly those from diverse backgrounds?
- Collaborative Goals: How can we collaborate with clients to establish goals that are in line with their personal agency and aspirations while also contributing to a more equitable society?

Audience

This workshop will be of interest to psychotherapists who work with diverse clients, particularly those from collectivist cultures. It's also designed for those with an interest to cultivate a keen sensitivity to the nuanced intersections of identity issues in therapy.

The Devalued self-forms of social experience

Christopher Steed

Lecturer, Programme Lead in psychotherapy, London School of Theology

Correspondence: christopher.steed@lst.ac.uk

Background and context

We introduce the thinking behind an approach to therapy rooted in an applied understanding of the worth of human beings and what happens when there is deficit in that. We are shaped by the value society places on us. This is a working model in North London but also developed in a new book, 'Finding the Valuable Person' (Cascade 2023). It represents a point of alignment between counselling theories and social realities and was based on auto-ethnography of listening to clients.

Carl Rogers refers to the desirability of counselling students having some knowledge of clients within their cultural setting. "Such knowledge needs to be supplemented by experiences of living with or dealing with individuals who have been the product of cultural influences very different from those which have moulded the student". He did not pursue that thought. Humans do not live in a vacuum. We play out our dramas in our life and times.

Questions and issues to consider in the session

This theoretical approach to working with and appreciating differences in race, gender and categories of disadvantage is an emerging development of the London School of Theology counselling model which seeks to integrate spirituality and counselling theory, alongside a sociological perspective. We will explore both theoretically and experientially:
• How responses to what is going on in the social world of both client and counsellor form part of our identities and therefore impact our therapeutic dialogue.
• How power dynamics, both individual and systemic, can impact the therapeutic relationship and the importance of taking the context of the relationship seriously.
• How our diverse embodied experiences of privilege , oppression, trauma and groundedness can affect our dialogue, both in and out of the counselling room.

Audience

The impact of cultural identity reaches deep down inside. Psychology is the interior logic of sociology. This session will stir up thinking about what this might mean in practice. Theorists and practitioners should benefit from thinking about this.

Considerations given to issues of equality, diversity and inclusion

This approach to therapy is sociologically attuned. Our approach seeks to incorporate issues of race, gender and categories of disadvantage into the heart of the model. It does this through analysing how responses to what is going on in a client's social world form part of their identity. Social scripts merge with inter-personal dramas in a way that is patterned in the unconscious.

"How have child and adolescent psychoanalytic psychotherapists experienced and understood the role of social identity in training, and how might this relate to their practice?"

Nicholas Frealand

Child and Adolescent Psychoanalytic Psychotherapist, Association of Child Psychotherapists

Correspondence: nicholasfrealand@riseup.net

Background and context

Being racialised as non-White, I was particularly disturbed by the role that social identity had in my Doctoral psychotherapy training and the dynamics that ensued.

This qualitative research study utilised Thematic Analysis and aimed to make sense of these disturbances, by examining the role of social identity in the training of 12 child and adolescent psychotherapists, exploring how it has been experienced and understood, and how this role relates to therapeutic practice.

Via an inter-disciplinary framework, I draw on Black Feminist Care Ethics, Social Anthropological and Sociological epistemologies attentive to forms of symbolic violence and the need for 'participant objectivation'.

My results highlighted variation within identity groups and within individuals' understandings and lived experiences of navigating training, on account of their social identities.

The implications of these findings suggest that training and practice would benefit, ethically and epistemically, from authentically reckoning with the legacy of the particular relation to social identity that has long prevailed. This may foster a new relation, less beholden to uncritically embracing normative ideologies and disavowal of vulnerabilities.

Questions and issues to consider in the session

What I am proposing has already been successfully delivered at Roehampton University to 65 therapy placement managers and supervisors. The format I devised worked well and participants engaged and shared their reflections impressively.

Discussion is framed around key quotations from my 12 interviews to stimulate and structure group discussion focused on the following:

How do gender, religion, ethnicity, social class, sexual orientation – as some vital aspects of our identities – collide with the cultural norms and ideologies that we encounter in our professions? How do our formative experiences and understandings of therapy, shape our relations to our professions?

Space will be provided to reflect upon these themes via research and personal experiences relating to interview quotations which cover:

the ideological split between 'internal' (e.g. mental, 'unconscious', transference) and 'external' (e.g. 'concrete', social, cultural, political) factors corporate and institutional Initiatives around 'EDI' and BLM; political performativity and progressivism paralysis, silence, aversion and/or fear (e.g. of difference, of conflict, of critical thinking, of being seen as 'divisive', of being pathologised) conformism with normative psychotherapy ideologies related to psychological transcendence, hierarchy and authority prejudice, discrimination, elitism and symbolic violence regarding social class, racialisation, homophobia, Islamophobia, gender politics and social conventions of gender regarding White womanhood in psychotherapy culture and ideology.

Audience

This discussion would be beneficial to current trainees, newly qualified practitioners as well as those with training and supervision responsibilities.

The medicalisation of counselling and psychotherapy: is there no alternative?

David Murphy

Professor of Psychology and Education, University of Nottingham

Correspondence: david.murphy@nottingham.ac.uk

Background and context

The position taken is one of challenging medical model realism. Arguably, the historical roots of the medical model of counselling and psychotherapy lie in ties to the medical profession and its evolution through psychoanalysis. The credibility of the contemporary configuration of our profession, inasmuch as it establishes itself as an activity distinct to that of a branch of medicine, can be contested. Throughout the twentieth century a gradual shifting away from medicine occurred and this movement culminated with the emergence of humanistic psychology. However, whilst demedicalisation once seemed possible, contemporaneous developments have seen this process 'advancing backwards' and (re)establishing links to medicine.

I will provide examples of the key contributing processes responsible for increasing medicalisation, including a critical analysis of the professionalisation of counselling and psychotherapy; the fact that counselling and psychotherapy have become increasingly regulated activities; use Fisher's concept of capitalist realism of the medical model of distress.

Having outlined the nature of the problem, I shall pose initial and emerging propositions to address 'advancing backwards' towards medicalisation. This includes actions for individual practitioners and institutions within the profession.

Questions and issues to consider in the session

Questions to structure a discussion:
Is there really no alternative to the medical model of distress and can Fisher's concept of capitalist realism inform the counselling profession to finding a way forwards?
What is the role of counselling training institutions in the process of demedicalisation?
Are counselling and psychotherapy really 'healthcare professions'?
What would counselling and psychotherapy 'be' if situated outside the healthcare profession discourse?

Audience

Anyone:
- Involved in counselling and interested in the demedicalisation of distress and looking to challange the dominant healthcare discourse.
- Engaged in demedicalised practice can help develop and refine further your position.
- Involved in training looking for ideas to support discussions with trainees.
- Involved in professional regulation and governance of counselling and psychotherapy.
- Looking to discuss and critically engage with counter arguments to the current direction of the profession.

Considerations given to issues of equality, diversity and inclusion

Who benefits from 'medical model realism'? The position of counselling as an extension of medicine benefits those already in positions of privilege. This discussion allows for an exploration of privileges we may have in regards to medical model realism, in reconceptualising counselling outside of the healthcare system and consider whether this can lead to greater equality, diversity and inclusion for or simply reproduces inequalities. Western healthcare discourse, of which the medical model of psychological distress advances, cannot be the only option.

Self-care and Wellbeing: understanding counsellor perceptions by using creative research methodologies

Alison Woodward[1] & Agata Wezyk[2]

Additional authors: Constantina Panourgia[3]

[1]Senior Lecturer, Psychology Dept. and CTA/Psychotherapist/Clinical Supervisor UKCP accredited, Bournemouth University; [2]Lecturer, Bournemouth University; [3]Principal Academic, Bournemouth University

Correspondence: awoodward@bournemouth.ac.uk

Background and context

During the counselling process, the therapist and client share a deeply intimate therapeutic relationship, involving unconscious processes and exposure to distressing experiences (Kottler, 2022). Without paying attention to their own self-care needs, counsellors can feel overwhelmed from listening to distressing experiences (Iqbal, 2015), which increases the risk of developing compassion fatigue (Stamm, 2010).

The British Association for Counselling and Psychotherapy (BACP) ethical framework highlights that practitioners have a duty to uphold "care of self", through engaging in activities and seeking support to maintain well-being (BACP, 2018, p.27). Thus, engaging with self-care and support is not a personal indulgence, but a professional responsibility, to prevent harm to oneself and clients (Norcross & VandenBos 2018).

To further explore self-care and coping practices among counsellors we conducted a photo-production interview study in 2022 which asked counsellor to bring photos illustrating their professional journey. Interestingly we noticed that the photos used often referred to metaphorical meanings which enabled interviewees to process their own reactions to clients' stories, get new insights and make sense of their professional experiences, and integrate them in their life (Tay, 2017). These initial findings demonstrated the usefulness of creativity when reflecting about the impact of work-related demands such as listening to distressing accounts of clients' experiences. We are curious about the potential to use this method to identify barriers (potentially linked to culture and aspects of difference) to self-care practices potentially linked to the process and mechanism of clinical supervision provision.

This session will discuss the usefulness of this technique and utilise expertise to understand the potential for future studies. We will share the photos collected in our research to stimulate discussion.

Questions and issues to consider in the session

1. What do you think about self-care and about creativity to explore?
2. What barriers do you notice in self-care, particularly linked to issues around difference and inclusion?
3. What do you see in the photos collected?
4. What ideas do you have about how we could use our findings or do any larger-scale research?

Audience

Counsellors / Psychotherapists both qualified and in training. Clinical Supervisors may find it interesting as well as Researchers, Psychologists and Wellbeing Practitioners to help shape future qualitative research and to reflect on own practice.

Considerations given to issues of equality, diversity and inclusion

We are interested in the perception linked to background, difference, culture etc.. Understanding barriers and how to ensure clinical practices (within supervision and reflective practice) embrace issues of equality, diversity and inclusion is a key outcome.

![bacp | counselling changes lives]

The amazing potential of trans-disciplinary research

Nicola Blunden[1], Andrew Reeves[2], Mhairi Thurston[3], Sophia Balamoutsou[4], Julia McLeod[5] & Elise Ferguson[6]

[1]Programme leader, UWE Bristol; [2]Chester University; [3]Abertay University; [4]Private Practitioner; [5]Aberdeen University; [6]PhD candidate and MBACP Counsellor

Correspondence: nicola.blunden@uwe.ac uk

Background and context

Counselling and psychotherapy research has traditionally failed to engage with the complexity of human experience, and its interaction with biological, social, and environmental contexts (Fried 2021). The burgeoning field of pluralistic research offers a foundation for how various perspectives – even those that might initially seem incompatible - can interact to create a more holistic understanding of psychological health and distress (Smith et al 2021). Pluralistic research is mutifaceted, co-productive, socially just, and able to engage with complexity across professional siloes.

Trans-disciplinary research draws from lived experience, diverse professional fields and epistemologies to craft a richer understanding of the subject at hand. Such research aims to be more resonant, relevant, and attuned to the complexities of human experience (Fried & Robinaugh 2020). By embracing trans-disciplinarity, the psychological professions can stimulate a depth of insight that a single discipline might struggle to provide.

This workshop is designed to explore the immense potential of trans-disciplinary approaches in counselling and psychotherapy research.

Questions and issues to consider in the session

The workshop will employ the WorldCafe method, an interactive and participatory approach designed to harness collective knowledge and foster open dialogue. Participants will engage with three pivotal questions about their existing or potential research studies:
1. What challenges or barriers have you encountered / or might you encounter when integrating insights from other disciplines and people with lived experience?
2. What proactive strategies and practices have you employed / or might you employ to collaborate across professions, and with people who have lived experience?
3. In what ways can transdisciplinarity support social justice in counselling and psychotherapy research?

Audience

This session promises value for researchers and practitioners who are curious about expanding their horizons and breaking away from traditionally insular research methods. By exploring the practicalities and potential of trans-disciplinary collaborations, attendees can expect to gain insights and practical strategies to:
• overcome common barriers to trans-disciplinary research,
• forge genuine partnerships across professional and lived experience fields of knowledge,
• leverage the social justice effects of trans-disciplinary research.

The collaborative nature of the workshop also presents an opportunity for networking and forming potential interdisciplinary partnerships.

Considerations given to issues of equality, diversity and inclusion

Facilitators will ensure that the WorldCafe discussions are conducted in an environment where all voices are encouraged and heard, fostering a space of respect and mutual learning. Moreover, we acknowledge the role of trans-disciplinarity in supporting social justice movements, underlining our commitment to EDI not just in principle but in action.

Going Beyond the Tick-box: A new approach to Equality, Diversity, and Inclusion training for Mental Health Professionals

Banjo Aromolaran[1] & Elizabeth Wilson[2]

[1]Senior Lecturer, University of East London; [2]Senior Lecturer / Course Leader

Correspondence: baromolaran@uel.ac.uk

Background and context

In the current socio-political and economic climate, where divisive social injustices are prevalent, mental health professionals (MHPs) can be important social justice advocates for their clients and patients. Developing the cultural awareness of MHPs to take on this social responsibility, as well as recognise the privilege inherent in their role, should begin in a meaningful way during training. However, there are questions as to how much of such training is currently reduced to tick box exercises (Memon, A., et al., 2016; Moodley, R., 2007, 2009, etc.)

Turner, D. (2021), stated that "whilst there are numerous texts within the world of counselling and psychotherapy recognising the politically correct narrative of respecting difference, there has always been a marked paucity exploring the unconscious experience of being the other and of working with difference".

Our discussion is predicated on the need for training programs for MHPs to approach equality, diversity and inclusion issues in a way that takes trainees on a psychologically safe enough reflective journey designed to unpack their personal selves vis-à-vis otherness in the therapeutic setting (Aponte, H.J. 2022; Aromolaran, B and Wilson, E., 2024).

Questions and issues to consider in the session

1. WHO we are will define what we do (Jean, L. 2002)
2. WHAT we do can and will make a difference (Mole, L. 2019)
3. PEOPLE will never forget how what we did made them feel (Angelou, M. 2010)
4. Is there a social responsibility inherent in the role of mental health professionals?
5. Do your current programs give due regard to EDI as it pertains to understanding the Self in relation to Otherness?
6. How well do your current programs prepare trainees to be curious, competent and comfortable professionals around difference and diversity in the therapeutic setting?
7. What responsibility do we have to ensure that our program offers go beyond tick-box exercises to a more reflective approach to EDI?

Audience

Of particular interest to delegates who have responsibility for programme design and development in their organisations such as:
1. Higher Education Course and Training Program Leaders
2. EDI Champions
3. Senior Managers
4. Mental Health Practioners

Considerations given to issues of equality, diversity and inclusion

The focus of our action research questioned how EDI was addressed within our training programs for MHPs.

Sessions were designed and facilitated to meet the diversity of learning needs. Due consideration given to accessibility via learning materials, scaffolding learning to maximize the impact of in and out of classroom exercises. Self-reflection was supported by one-to-one tutorials.

'Living the Curriculum': adopting personalised learning pedagogies towards honouring the lived experience of trainee counsellors

Fevronia Christodoulidi[1] & Paul Galbally[1]

[1]Senior Lecturer, University of East London

Background and context

Personalised learning (Claxton 2006) is a value-based and learner-centric pedagogy that recognises the specific learning style and individual differences of each student and should be considered when designing and delivering training curricula that assist students in expressing their potential based on their readiness, strengths, needs, and interests.

Research focusing on reasons for dropping out of higher education (Lipson & Eisenberg, 2018; Truta, Parv, & Topala, 2018) presents a strong relationship between positive psychosocial environments, students' satisfaction and study completion. Personalised learning entails teaching and learning strategies that develop the competence and confidence of every learner. But what specifically creates such a learning environment and a motivational mindset for students to acquire a committed and dynamic attitude towards their studies?

Two senior lecturers at a London university used the example of a BACP-accredited undergraduate counselling degree as a case study to explore these questions, given that the nature of such discipline often attracts learners who may be unconsciously motivated to pursue such subjects by a desire to resolve personal traumas or answer troubling existential questions (Barnett 2007).

Questions and issues to consider in the session

1. Can you reflect on the idea of fostering intimacy between the teaching team and the students? Does this generate any ethical/professional challenges?
2. How do we facilitate personalised learning that considers learners' ongoing professional identity development?
3. How do we enhance the student experience and support academic progression that is congruent to the development of a new role where the 'use of self' is the main tool?
4. How do we help trainees to be aware of how their challenges and lived experiences can add value to training but avoid being preoccupied with 'fixing' their wounds?

Audience

This discussion interests those who work in higher/further education, counselling students, practising counsellors and those considering returning to education to upskill. We hope that attendees get an insight into how collaborative teaching methods mirror good clinical practice and further understand how students can incorporate their stories to create relevant and representative curriculums.

Considerations given to issues of equality, diversity and inclusion

The focus group participants were of diverse backgrounds within race, ethnicity, religion, gender and sexuality as a way of getting a community of voices that aimed to be representative of both the student body and the local geographical area population. Both co-authors are actively involved in decolonising the curriculum and are adopting a pedagogic style that includes tentative tutor self-disclosure as a modelling practice which invites diverse learners' lived experiences to be heard and validated.

Methods Workshops

Getting out of the way to get to the heart: finding creativity and poetry in writing our research.

Stella Duffy

Psychotherapist and writer, The New School of Psychotherapy and Counselling, Middlesex University

Correspondence: info@stelladuffytherapy.co.uk

Learning outcomes

This session will help you:

• Explore the place of co-researchers/participants/interviewees in your work and allow them to come to the fore as people with lived experience rather than data.

• Offer a flexible and engaging form of qualitative research as a useful addition to more traditional qualitative and quantative research forms.

• Attend to the value of engaging with lived experience as a valid methodological procedure in research, just as it is in our counselling and psychotherapy work.

• Develop your own version of this method in enjoyable, creative exercises.

Structure and overview of content

Getting out of the way to get to the heart; in the same way that we hold space for our clients in counselling, it is possible to hold space for our participants in research.

As researchers, we are the conduit between our participants, co-researchers, or interviewees, and the audience for our work. Most qualitative research forms care about the genuine inclusion of our participants, affirming their input into our work, acknowledging that our work cannot exist without them.

Despite this acknowledgement, the voices of the co-researchers are often reduced to 'data', human beings and their deeply personal lived experience shrunk to tables, their quotes used to ballast our hypotheses rather than allowing them to live on the page. Often this reduction of our interviewees is unintentional, brought about by the pressure of creating and disseminating a finished document.

This experiential workshop connects research and creative writing into creative research writing. It offers a creative and playful way to work phenomenologically with participants' material, using their interviews to generate found poems that offer a sense of the spirit of the co-researchers – getting closer to what it is like to be them.

Target audience

An interest in rather than prior experience of research will be useful for the workshop, along with a willingness to leap beyond traditional research forms that constrain people into data. Delegates might wish to bring their own research interviews to work on in this experiential workshop.

Considerations given to issues of equality, diversity and inclusion

This qualitative research method was developed to allow the voices of a highly diverse group of participants to each sing out from the page. It offers an actively inclusive way to better amplify and focus on voices that are often relegated to the margins; as a practice, it is therefore also useful for researchers who are themselves marginalised.

Creative methodologies workshop - Embracing the visual as well as the verbal in research

Claire Plews[1] & Siouxsie Bytheway[2]

[1]Doctoral student / HE Counselling Curriculum coordinator, University of Bristol / University Centre Weston; [2]Lecturer in Counselling at University Centre Weston, counsellor in private practice and PhD researcher at the University of Gloucestershire.

Correspondence: claire.plews@bristol.ac.uk

Learning outcomes

This session will help you:

- Consider the use of creative methodologies in research design

- Explore when creative methodologies can be a useful adjunct to other methods and promote critical dialogue on a topic

- Understand the process of data collection and analysis and ethical considerations related to creative methodologies

- Distinguish the unique position that creative methodologies can hold in counselling and psychotherapy research

Structure and overview of content

This 60 minute research methods workshop will focus on the use of creative methods of data collection as a standalone method and adjunct to interview methods. This workshop will introduce the presenters doctoral research as an example – 'Exploring adolescent perceptions of mental health provision in education – a codesigned creative project'. The methods used in this project as an example of creative methods included photovoice, make-up self expression, found images and 3D digital rendered images to produce a triptych of images encapsulating young peoples voices on their mental health pre, during and post pandemic.

The workshop will explore these examples and how the data was analysed yielding further/different themes than data from the interviews demonstrating how creative methods can be a useful adjunct to produce rich data on a topic.

Participants in this workshop will also have the opportunity to engage in a small exercise demonstraing how images can give powerful sources of rich information about a participant/phenomena.

This exercise will ask particpants to work in pairs and then to choose a photo from their mobile phone camera roll that captures their eye. The other member of the pair will ask the following prompts:
P: Describe your photo?
H: What is happening in your picture?
O: Why did you take a picture of this?
T: What does this picture tell us about your life?
O: How can this picture provide opportunities for us to improve life?

As a plenary, members are invited to share any observations from this exercise they would like to share.

The workshop will conclude with examples of other creative methods of data collection that are often used in the counselling and psychotherapy world such as creative depiction of timelines/genograms and constellation work and how they could be utilised to create rich qualitative data.

Target audience

Novice and more experienced researchers welcome.

Considerations given to issues of equality, diversity and inclusion

Collaborative, creative methodologies can be seen as promoting EDI as they can provide a voice to marginalised groups, can be non-voyeuristic, provide distance from particularly traumatic material and encourage diverse perspectives.

How to co-produce research ethically

Nicola Blunden[1] & Mhairi Thurston[2]

[1]**Programme leader, UWE Bristol;** [2]**Abertay University**

Correspondence: nicola.blunden@uwe.ac.uk

Learning outcomes

By the end of the session students wil be able to:
1. Understand the benefits of co-producing research with people who have lived experience
2. Evaluate the ethical risks of co-producing research
3. Apply a model of ethical decision-making in co-producing research
4. Identify ethical 'next steps' in terms of their own co-produced research project

Structure and overview of content

This engaging methods workshop will help participants to think through and apply an ethical decision-making model, when carrying out co-produced research with people who have lived experience.

Co-production of research is recommended by research bodies such as the UKRI (https://www.ukri.org/manage-your-award/good-research-resource-hub/research-co-production/) to increase impact and relevance of research, enhance quality, and promote positive change for society. It involves working closely with research beneficiaries throughout the process – from design to implementation, analysis, and dissemination.

Co-produced research amplifies the voices of people usually excluded from the research community, and it results in novel, innovative approaches and striking, rich outcomes. Co-production of research is also radical, because it invites non-researchers to re-imagine research beyond the existing (colonial and patriarchal) norms of society. Because of this, co-production can feel 'messy' or improvisational, and it challenges all co-producers to engage with complex ethical issues from the outset.

The workshop offers a rare opportunity for participants to reflect on ethics in their own co-produced research or potential research projects.

Target audience

This methods workshop will be valuable to researchers who are already experienced in co-producing research, as well as novices who are considering co-production as part of their research approach. It will include detailed, inspiring examples of how ethical co-production is achieved, and will give participants opportunities to reflect on how they can ethically, safely, and co-creatively include people with lived experience in the research process.

Considerations given to issues of equality, diversity and inclusion

Co-production is intentionally anti-oppressive, being a way to include and amplify marginalised and minoritized voices. This will be a central theme of the workshop, and will be made explicit

from the outset. We will contract the session at the beginning to be a safer space, in which we hold ourselves and each other in compassion and openness to difference.

We will also invite participants to share how we can accommodate their personal needs and intentions at the beginning of the session, and this will be done either anonymously (by means of unidentifiable post-it notes) or verbally, as preferred by the participant. We will then adapt the workshop to the specific needs of those present.

Analysing suicide notes: conducting stanza and narrative analysis within counselling research

Amanda McGarry

Counsellor and Lecturer, Univeristy of Chester

Correspondence: a.mcgarry@chester.ac.uk

Learning outcomes

To explore and understand the analytic strategy of stanza analysis.

To locate stanza analysis within the qualitative methodology of narrative analysis.

To engage in the process of stanza analysis.

To consider how stanza analysis might be used within counselling research.

Structure and overview of content

In the first part of the workshop I will provide a theoretical overview of stanza analysis, locating this within narrative analysis. I will also outline my previous experience of completing a stanza analysis using suicide notes. In the second part of the workshop particpants will be invited to complete their own stanza analysis, we will spend time as a group discussing the process, and I will invite you to reflect on the experience of using this analytic strategy. The workshop will close considering what has been learnt by the group and how stanza analysis might be used in counselling research in the future.

Target audience

This workshop is aimed at anyone who is interested in exploring different analytical strategies in research. No previous knowledge is required..

Considerations given to issues of equality, diversity and inclusion

Materials for completing the stanza analysis will be provided. If you require these in a particular format, please get in touch in advance of the conference.

bacp | counselling changes lives

139