

**32<sup>nd</sup> BACP International Research Conference 2026**

# **Collaboration for a just society**

**Abstract Booklet**

# Keynote Presentations

## Why does research matter?

### Rachel Tribe

**Professor of Applied Psychology at the University of East London and at Queen Mary, University of London**

In a world where clinical time is precious and pressures are ever-increasing, why should research still matter? This presentation will explore the real-world value of research for those working in psychological and therapeutic services and for those we work with. Examples of relevant research will be interspersed throughout this presentation.

The presentation will take a critical look at the arguments for and against engaging in research, unpacking the barriers that often prevent psychotherapists from getting involved and identifying practical ways to overcome them. Beyond the challenges, the presentation will highlight the opportunities that research creates not only for psychotherapists, but also for clients/ service users, service providers, managers, civil society organisations, the NHS, within service provision and in society as a whole.

One theme will be co-production: how involving service users in shaping and evaluating research strengthens its impact, relevance, and ethical foundation. Drawing on a series of diverse research studies conducted by the presenter and colleagues, the presenter will explore how collaborative, cross-disciplinary work can break down silos and build bridges across professions with real examples of how these collaborations were initiated and sustained.

The presentation will also reflect on the ethical and professional responsibilities that underpin all research activity, including how issues of social justice and discrimination can shape both our methods and our outcomes. These complexities demand that we continually question how research contributes to fairer, more equitable clinical practice.

Ultimately, this presentation will argue that research is not an optional extra, it is a cornerstone of ethical, evidence-informed practice. Through research, we define best practice, promote professional integrity, and ensure that social justice remains at the heart of what we do.

## The ECID project in Barcelona: implementation and evaluation of a multidisciplinary mental health intervention with high-risk adolescents

**Mark Dangerfield**

University Institute of Mental Health at Ramon Llull University in Barcelona

This presentation will describe the development and implementation of the ECID Project (*Equipo Clínico de Intervención a Domicilio* - Home Intervention Clinical Team) in Barcelona, an in-home, mentalization-based treatment (MBT) multidisciplinary mental health team working with extremely high-risk, non-help-seeking adolescents who are at risk of social exclusion. The ECID Project is part of the Mental Health NHS clinical services in Barcelona, and it was conceived as an adaptation of the AMBIT (Adaptive Mentalization-Based Integrative Treatment) model, designed to enhance coordination and reflective practice within the team and across the professional networks involved in the care of these young people.

Drawing on clinical vignettes and team experience, the presentation will illustrate how the AMBIT principles have been integrated into everyday clinical practice. Particular attention will be given to the challenges of sustaining mentalization within fragmented systems and emotionally charged contexts, as well as to the value of using the team itself as a secure base for thinking and collaboration.

In addition to the clinical perspective, the presentation will include findings from an ongoing research project evaluating the ECID intervention. Preliminary results will be presented that support the effectiveness of the approach in improving engagement and producing a clinically meaningful reduction in symptom severity and improvement in functioning after 12 months.

Through this experience, the ECID Project offers a concrete example of how Mentalization-Based Treatment for Adolescents (MBT-A) delivered within an AMBIT framework, can be successfully translated into local mental health services, supporting both professionals and adolescents in making sense of complexity, fostering collaboration, and strengthening the network's capacity to think together.

# Discussion Panels

## From Silos to Systems: The Potential for Counselling and Psychotherapy in Multidisciplinary Collaboration Across the NHS

**Matthew Smith-Lilley<sup>1</sup>, Matthew Leavesley<sup>2</sup>, Anna Maratos<sup>3</sup>, Jessie Emilion<sup>4</sup>, Natalie Creary<sup>4</sup>**

<sup>1</sup>Policy and Engagement Lead, BACP; <sup>2</sup>High Intensity Therapist and Clinical Supervisor, NHS Talking Therapies, Senior Lecturer in Counselling, York St John University; <sup>3</sup>Group Analyst in private practice, Trust Head of Psychotherapy, joint-CPPO, CNWL FT; <sup>4</sup>Vice President, BACP

This discussion panel will focus on how integrated care pathways can bring about more informed, joined-up service models in the NHS. How counselling and psychotherapy can be part of transforming the NHS workforce over the duration of the plan. What would need to happen to ensure that the implementation of national policy leads to focus on collaboration amongst all parts of the system and helps to reduce health inequalities.

# Pre-Conference Workshops

## *Are the Facts Friendly? An Updated Review of Research Findings in Counselling and Psychotherapy*

**Mick Cooper**

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Based on the principles of narrative review, this paper presents an accessible synthesis of contemporary evidence on the effectiveness of counselling and psychotherapy and the factors that determine change. The review—conducted for the second edition of the BACP supported text, *Essential research findings in counselling and psychotherapy: The facts are friendly* (Sage, 2026)—draws on data from thousands of recent research studies, including large-scale trials, meta-analyses, and qualitative and quantitative process-outcome research. The paper will highlight particular developments and insights since the first publication the book in 2006.

Research demonstrates that psychological therapies are robustly effective, typically producing medium effect sizes ( $d \approx 0.3-0.8$ ) and rates of reliable improvement around two-thirds. Gains are usually maintained at follow-up and are cost-effective compared to medication. The findings affirm that therapy works—but not equally for all clients or practitioners.

Client factors are consistently shown to be the most important determinants of outcomes, contributing to approximately 30% of variance. Outcomes are better for clients with higher attachment security, readiness to change, and social support—illustrating a “rich get richer” effect.

Approximately 7% of variance in outcomes is attributable to therapist effects. More effective therapists tend to exhibit higher emotional wellbeing, self-acceptance, mindfulness, and professional humility—balancing confidence with reflective doubt. The therapeutic relationship, contributing around 15% to outcomes, remains a powerful contributor to change, though not the sole one; techniques, frameworks, and orientations provide additional, incremental benefits.

Matching therapy to client preferences and characteristics yields modest outcome gains and substantially reduces dropout, supporting collaborative, client-directed practice and equality and diversity initiatives. Emerging data also suggest that culturally adapted, spiritually accommodative, or disability-sensitive approaches enhance engagement and outcomes among marginalised clients.

The paper concludes that evidence and empathy need not be opposing forces. Rather, research can serve as a friendly ally to practitioners—strengthening confidence, fostering reflexivity, and supporting equitable, person-centred care. Implications include the integration of research literacy into supervision and training, the systematic use of outcome feedback, and continued development of individualised algorithms that tailor therapy to the unique needs of each client.

## Working for 'free' or 'paying to work': rethinking therapy training and placements in the UK

Mariya Ivancheva<sup>1</sup>, Jennifer O'Neil<sup>2</sup>

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This workshop will present and engage the participants in discussion around the findings from a BACP-funded project on the free labour and precarity endemic in the therapy training, especially with regard to therapy placements.

Through interviews with trainee counsellors, and representatives of education and placement organisations and professional regulating bodies, the project explored the increasing reliance of UK mental health services on unpaid trainee-therapist labour. The key findings of the project suggest that a mixture of austerity in the public and not-for-profit sectors, as well as pressures to commercialise higher education, have produced a system in which a growing portion of mental health provision relies on the prescribed, and at times coerced voluntary efforts of trainees doing placements as part of career entry. Besides being subject to education fees, as part of their training, trainee therapists are also obliged to provide free labour by mental health services, especially in the charitable sector. In order to function, the latter are pressured to off-set costs, outsource risk, and substitute paid secure labour positions through placement schemes. Thus, in contrast to successive government rhetoric of improving mental health provision, our research brings definitive evidence that under deepening austerity the UK 'frontline' workforce functions by outsourcing public services to unpaid trainees. Trainee therapists increasingly not only work for free, but pay to work for extended periods of time, including during ever more extended and uncertain transitions to paid employment.

We will kick-start the workshop by presenting some key findings of the research and open up discussion tables to elicit participants views on what-is-to-be-done. Using the world cafe format, we will ask participants to join four discussion tables to discuss the following topics:

- 1) Red Lines: What are red lines in therapy placement - from participants' experience in different roles (providers, educators, trainees, regulators) - and what is needed to avoid them?
- 2) Training Experience: What makes a good training experience for therapists: from classroom, to placement, to supervision and career launch?
- 3) Good Placements: What makes a good placement - sharing best practices in therapy placements - from the UK and beyond?
- 4) Alternative/Innovative funding models: How can experiential learning in therapy be funded and resourced? (e.g NHS-type-clinical placements; apprenticeship model; others)

On the basis of our findings and some of the discussions at the pre-conference workshop, we will compose a policy brief, which will be shared with participants and the BACP community, and can be used for further advocacy around the reorganisation of therapy training and placements.

Equality, Diversity, Inclusion: This conversation strikes at the heart of our sector that seeks to address the complex needs of a broader population, including by providing equal opportunities for training to therapists from diverse backgrounds.

## Making your research matter: publishing and disseminating your research

Rachel Tribe<sup>1</sup>, Clare Symons<sup>2</sup>

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Doing research as part of practitioner training or at doctoral level can be a huge undertaking that requires considerable independent work. While doing the research can lead to huge personal benefits in learning, skills, employability and development of practice, it can also feel lonely, anxiety-provoking, challenging and gruelling. Perhaps it's no wonder that for some people, once the dissertation or thesis is complete, marked and passed, it can feel very tempting to let it sit on a shelf, forgotten and gathering dust.

This workshop aims to encourage you to blow the dust off that research and think about how you can communicate your research to a relevant audience. We'll consider options for disseminating research (such as at conferences like this!) and will focus primarily on writing for publication. While we'll talk about the process of writing from having produced a dissertation or thesis, we encourage you to think about the dissemination possibilities irrespective of the research stage you are at - from developing your research question to recovering post-doctoral viva and wanting the important messages from your research to influence practice.

The workshop will cover the following areas:

- The reasons to write for publication and to disseminate your research - benefits to you, other practitioners and the wider profession
- Differences between writing for academic assignments and writing for publication
- How to choose an appropriate publication to approach and how to maximise your chances of getting published
- Hints and tips for overcoming your writing demons

We will be encouraging small group discussion and personal reflection throughout.

# Pre-Conference Student Showcase

**New stories from the training room: how are Global Majority counselling and psychotherapy trainees experiencing therapy training? A Participatory Narrative Inquiry**

**Briony Martin**

University of Chester

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**What role does the counsellor's imagination play in the therapeutic process?**

Using interpretative phenomenological analysis the research aims to understand the role that the counsellor's imagination may play in the therapeutic process. It will explore the experiences of counsellors to understand the relationship between imagination and the core conditions of person-centred counselling to enrich professional knowledge.

**Laura Sayles**

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**An exploration of the experiences of autistic women with the criminal justice system as victims of sexual violence**

**Saira Mahmood**

City University of London

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## **A Reflexive Thematic Analysis Of Grief Following The Loss Of A Close Family Member Among Afghans Born In The UK**

**Menha Mohammed**

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## **Exploring the experience of Disordered Eating Behaviours (DEB) and body image concerns among adults with a long-standing diagnosis of Type 1 Diabetes (T1D)**

**Fatema Zavery**

City St George's, University of London

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## **How do non-professionals experience helping displaced people in community-based settings? An IPA study**

**James Tolley**

Keele University

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## **Holding Up The Virtual Mirror: An Interpretative Phenomenological Study Exploring Integrative Psychotherapists' Experiences of Self-View in Remote Psychotherapy**

**Shanta Hamelijnck**

University of Warwick

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## **The Therapist's Response to the Child in Distress: an Exploration of Identity within the Therapeutic Relationship**

**Lataetia Mcevilly-Duncan**

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## **Exploring the Narratives of Creative Afrocentric Psychotherapy (CAP) for Black women who have experienced sexual abuse in the Pentecostal Churches in the United Kingdom (UK)**

**Kathleen Kwakye-Donkor**

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## **How is a sense of "us" managed in therapeutic dyads?**

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## **A Re-imagination of Psychotherapeutic Trauma Care Strategies in the Context of Perpetual Violence and Denied Justice: A Palestinian Focus**

**Naima Mokhtari**

University of East London

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## **Exploring Emotionally based school non-attendance (EBSNA) from the perspective of school-based councillors': A reflexive thematic analysis**

**Viv Evans**

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## **Exploring the Therapist's Use of Profanity in Therapy with Adolescents: A Grounded Theory Study**

**Rahul Balaji**

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## **Counsellors' perceptions on the ideal therapy room for children and young people**

**Caroline Dyson**

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## **The psychotherapeutic conditions that facilitate post-traumatic growth and resilience in individuals recovering from Religious Trauma**

**Rebekah Woodhouse**

Birmingham Newman University

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## **Understanding Obsessive Compulsive Processes through a Person-Centred Lens**

**Lisa Perry**

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## **The Voices of Resilience: The Personal Stories and Narratives of Female African, Asian and Caribbean Adult Survivors of Child Sexual Abuse in the Criminal Justice System**

**Shilla Patel**

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## **Mental Health Act Reform: Exploring the experiences of racialised people within culturally appropriate advocacy services**

**Simone Gubbins**

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## **How Psychotherapists Adapt Relational Therapeutic Practice When Working With Clients Over the Age of 65: Toward an Age-Attuned Competency Framework**

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## Livity Embodied: Exploring Healing Approaches with African and Caribbean Communities in Britain using Interpretative Phenomenological Analysis (IPA)

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# Research Papers

## Becoming an Adult Orphan: Exploring Bereavement Counselling After Premature Parental Loss

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### Background

While bereavement is universal, the premature loss of both parents in adulthood, here defined as adult orphanhood, remains under-researched. Most literature has focused on childhood orphanhood, single parental loss, or general adult bereavement, with little attention to the relational, developmental, and identity impacts of losing both parents before the normative UK life expectancy. This challenges the belief that, as adults, parental guidance is no longer required. This study is inspired by personal experience, though it is not autoethnographic.

### Aims

This study explored the experiences of adult orphans in the context of bereavement counselling, examining both the emotional consequences of such loss and the perceived influence of therapy.

### Purpose

The purpose was to address a gap in bereavement literature by giving voice to adult orphans and examining how counselling may shape grieving and identity reconstruction. In doing so, the research seeks to inform therapeutic practice, enhance recognition of this under-explored group, and contribute to broader understandings of grief, identity, and support in adulthood.

### Design

A qualitative study using reflexive thematic analysis, drawing on semi-structured interviews with adults who had accessed bereavement counselling.

### Methods

Five participants were interviewed online, and data were analysed using Braun and Clarke's (2006) six-phase approach to identify patterns of meaning across narratives.

### Findings

Four overarching themes were identified: (1) Response to Parental Death - immediate and ongoing emotional reactions including shock, disbelief, existential questioning, and aloneness; (2) Experiences of Support - informal and formal sources, barriers to help, and searching for

connection beyond loss; (3) Motivation for Therapy - driven by trauma, intense grief, isolation, and identity disruption; and (4) Experiences of Therapy - what helped and what did not, including therapist fit, therapeutic approach, timing, and the value of identity and role reflection. Limitations The small, homogenous sample limits transferability, and the focus on counselling excludes perspectives of those who did not access therapy. All participants described supportive parental relationships, narrowing the range of experiences captured. The study was also constrained by the parameters of a Master's project.

## Conclusions

Adult orphanhood is a distinct and under-recognised bereavement experience with implications for practice and theory. Counselling can provide validation, identity exploration, and relational support, though effectiveness depends on therapist attunement, timing, and contextual factors such as social support and cultural norms. This study contributes to bereavement scholarship, informs therapeutic practice, and calls for greater recognition of adult orphanhood in research and clinical contexts.

**Keywords:** Adult orphanhood; Parental bereavement in adulthood; Premature parental death; Identity disruption; Disenfranchised grief; Bereavement therapy

## How does psychiatric diagnosis and the language of 'disorder' shape humanistic counselling practice? A reflexive thematic analysis

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### Background

Humanistic approaches to counselling traditionally adopt a nonpathologising stance whereby distress is understood in the context of client subjectivity, rather than standardised diagnostic criteria; yet medicalised language and labels increasingly accompany clients into the counselling room and frame how many people understand their experience. Existing research exploring the influence of psychiatric discourse upon attitudes and approaches of mental health professionals does not include humanistic counselling professionals, despite clear tensions between humanistic and psychiatric paradigms. This study sought to address this gap by exploring the interplay between humanistic counselling practice and psychiatric discourse through the lived experiences of humanistic counselling professionals in Ireland.

### EDI

Participant interviews were held online in order to enable participation from therapists across the island of Ireland rather than recruiting a city-centric sample.

### Method

Using reflexive thematic analysis, this qualitative study conducted semi-structured interviews to explore the attitudes and approaches of (N = 7) humanistic counselling professionals in Ireland towards psychiatric discourse and working with clients given a psychiatric diagnosis. This research was explored through the lens of critical realism.

### Findings

Four themes are reported in this paper: (i) therapist attitudes, (ii) therapeutic approach, (iii) training, knowledge and understanding, and (iv) therapist resistance to psychiatric discourse. Evidence of incongruent, suspicious and pessimistic attitudes among participants towards clients presenting with a psychiatric diagnosis was identified within the data. These attitudes may be shaped by stigma and stereotypes associated with a client's diagnosis. Participants described directive and cautious approaches to working with clients diagnosed with a 'disorder', and at times appeared to prioritise management over the meaning of 'symptoms'. Counselling education may play a role in counsellors' attitudes and approaches to psychiatric discourse. Attempts to resist the dominance of psychiatric discourse in practice were evident throughout the data.

## Conclusion

Findings of this study suggest that psychiatric language may threaten the integrity of humanistic counselling practice through incongruent attitudes, focus on 'fixing' and pessimism among therapists when clients are viewed in terms of psychiatric 'disorder'. The results of this paper invite therapists to reflect critically upon their relationship with psychiatric discourse. This includes consideration of the influence of any taken-for-granted knowledge of psychiatric 'disorder' and how this may shape their attitudes and approach to counselling practice. Further research might examine the hidden assumptions that therapists hold with regard to psychiatric discourse.

## How Can Therapists Recognise Subtle Abuse of Women of High Educational and Socioeconomic Status in Intimate Heterosexual Relationships?

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### Background

There is a lack of literature defining subtle intimate partner abuse (IPA). In addition, there is no literature on how psychological therapists might recognise clients who are unknowingly experiencing subtle IPA. Existing literature indicates women attending psychological therapy can be misunderstood by therapists, who cannot help them to identify the abusive relationship. This can lead to the continuation of the abuse and its detrimental mental and physical health consequences.

### Methods

A Patient and Public Involvement informed, qualitative research study using semi-structured interviews was conducted with 15 participants purposively sampled from two groups; 1) heterosexual women of high educational and socioeconomic status (HESES) who reported experiencing subtle IPA from intimate ex-partners (n=11), a previously unstudied group within the UK, and 2) psychological therapists who had worked with similar women who had experienced subtle IPA (n=4). Interviews were analysed using reflexive thematic analysis.

### Findings

1. By combining the findings from groups 1) and 2) an overarching theme of incongruence was identified. Incongruence occurred for the victims both interpersonally and intrapsychically, and for the therapists when working with victims of subtle IPA.
2. Seven subthemes were identified:
  - a. Abuse is conducted on a subtle level
  - b. The perpetrator's ongoing self-centred attitude
  - c. Disconnection and loneliness - unseen and unheard
  - d. Women thought they were to blame
  - e. Try harder
  - f. Shame
  - g. Therapist countertransference
3. Therapists need to pay attention to countertransference to identify subtle abuse of clients.
4. Women of HESES experienced shame and used coping strategies such as intellectualisation aligned with their population group.

### Limitations and EDI

The study deliberately recruited a homogenous group in terms of sexuality, education and SES to begin to understand subtle IPA experiences of heterosexual women of HESES, whose unique experiences of IPA in the UK have not previously been explored. Volunteers were also unintentionally homogenous in terms of ethnicity. Data on ability was not collected. Further research is indicated with other population groups to develop our understanding of subtle IPA.

### Conclusions and recommendations

Subtle IPA and its effects were described by both women victims and therapists. Given the paucity of literature to support therapists in this sphere and in order to educate therapists and minimise the effects of therapist misunderstanding, it is recommended that findings from this study be disseminated as therapist teaching materials.

## **Social And Psychological Support for Families of Members with Substance Use and Substance Use Disorders (Suds): A Systematic Review of Family-centered Interventions**

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### **Aim or purpose**

Substance use (SU) and Substance use disorder (SUD) are global health issues across the world. Being a substance user, which, if left untreated, can progress to SUD, not only affects the concerned person but also causes harm to the family members. Affected family members (AFMs) caring for people who use drugs (PWUD) faced significant financial, psychosocial, mental, and physical challenges in their daily lives. However, there are limited empirical studies in terms of psychosocial support and interventions for AFMs. This systematic review aims to assess the quality of the social and psychological interventions provided to AFMs and synthesise the results of the studies.

### **Research Design or methodology**

This systematic review followed the Preferred Reporting Items for Systematic Reviews and Meta-Analyses guidelines (Page et al., 2020).

Google Scholar and BMC database were searched using the PEO framework and Boolean Operators. Only papers published in English Language and between 2010 to 2025 were selected. A comprehensive screening of titles and abstracts was conducted to select relevant studies. Eligibility criteria included the social and psychological support and family-centred interventions provided to AFMs.

Ethical approval is not required for a systematic review

### **Results or findings**

Following a thorough search, 6200 studies were identified. Following removal of duplicates, review of abstract, quality assessment, 11 studies were selected and included in the review. The results suggest that Community Reinforcement and Family Training (CRAFT) (Meyers et al., 1998), Stress-Strain-Coping-Support model (SSCS) (Orford et al., 2010), Care4carers (Swanepoel et al., 2023), Self-Management and Recovery Training (SMART) (Rushton et al., 2024), and Supporting addictions-affected families effectively (SAFE) (Nadkarni et al., 2019) are family-based interventions for AFMs that are provided to family members of PWUD. The results varied from low

to no primary benefits to AFMs functioning, decreased psychological distress, and more effective coping strategies.

#### Research limitations

The study has limitations, including different study designs of selected studies, small sample size and selection of only papers published in English Language.

#### Conclusions or implications

Family-centered interventions for affected family members (AFMs) have received limited investigations. Social and psychological support should be expanded through family-centred interventions to AFMs to assist them in tackling systemic barriers to care and stigma. Professionals working in this related field and policymakers should emphasise the necessity of family-centred interventions for the welfare of AFMs.

#### Considerations given to issues of equality, diversity and inclusion

An international search was conducted in this systematic review from a diverse range of cultural and economic backgrounds. The under-representation of marginalised groups warrants more inclusive, culturally sensitive family-centered intervention studies.

## An Exploration of Recently Qualified Counsellor Experiences of Preparedness for Working with LGBTQ+ Clients in the South West of England

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Research shows that LGBTQ+ individuals experience high levels of emotional and mental distress, often due to experiences of marginalisation (Thompson, 2016), suggesting the need for a counselling workforce well prepared to work with this client group. Nevertheless, LGBTQ+ issues are often inadequately addressed in counselling training, despite ethical framework/professional bodies commitments to social justice, equality, diversity and inclusion (Carrington & Sims, 2024). This can result in counsellors entering the workforce unprepared to work with LGBTQ+ clients, and risks repeating marginalisation (Ahmed, 2006). It is therefore important to understand how counsellors entering the profession experience preparedness to work with LGBTQ+ clients and to make recommendations to address these shortcomings.

This study employed a queer-informed phenomenological approach (Ahmed, 2006) to explore how recently qualified counsellors experienced preparedness to work with LGBTQ+ clients. Four semi-structured interviews were conducted with counsellors who had qualified within the past two years in the South West of England. Interviews focused on experiences of preparedness, inclusion/exclusion within training, and reflections on working with LGBTQ+ clients. Braun and Clarke's reflexive thematic analysis (2022) was used to analyse the data to identify the patterns, relational dynamics, and tensions in participants' experiences.

From the data, three key themes emerged: gaps in training, assumptions that person-centered values and personal identification with the LGBTQ+ community were sufficient, and a lack of preparedness in others. Participants described gaps in formal training such as limited/superficial LGBTQ+ focused content, and assumptions of counsellor neutrality were found to inadvertently cause harm. Additionally, there was an over-reliance on LGBTQ+ identifying people delivering LGBTQ+ content.

The findings suggest that preparedness to work with LGBTQ+ clients should be embedded within training/organisational culture, and be viewed as an ongoing, relational process with a commitment to cultural humility, reflective practice, and systemic awareness, rather than a fixed skill set.

While limited by its small sample, the study aligns with broader literature on LGBTQ+ inclusion within counselling, providing insights into systemic barriers affecting trainees, counsellors, and clients (Levitt et al., 2017). By focusing on a rural area - under-researched compared to city-based areas - the study offers a valuable perspective on how geographical context influences preparedness and inclusion.

By foregrounding participant voices, the study contributes to re-imagining preparedness as a relational and socially responsible process, offering practical implications for

educational/organisational practice. Embedding LGBTQ+ inclusive approaches within counselling training could support a more inclusive profession and deliver more equitable client experiences and outcomes.

## Into the Deep: A Person-Centred Counsellor's Autoethnographic Exploration of Childhood Bereavement

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This study presents an autoethnographic exploration of childhood bereavement and its personal and professional impact. Drawing on reflective writing, memory fragments, dream work, creative expression, and artefacts I revisited the experience of losing my younger brother in childhood and considered how this shaped my self-concept, relationships, and emerging identity as a counsellor.

Autoethnography provided a means of connecting individual experience with broader cultural narratives of silence, stoicism, and gendered expectations. My research integrated foundational grief theories (including Kübler-Ross's stages of grief, Stroebe and Schut's dual process model, and continuing bonds theory) with person-centred concepts, mindfulness practices, and post-traumatic growth.

Through thematic analysis, five core themes were identified:

- unspoken grief;
- control and the legacy of loss;
- the protector and the price;
- circles and seasons; and
- emerging wholeness.

These highlight how bereavement can fracture a child's world, foster protective roles and silences, and yet also generate meaning-making and eventual integration. By situating lived experience within both personal and professional frames, this work contributes to an expanded understanding of how grief is carried across the lifespan and how counselling practice can accompany it with sensitivity and compassion.

Ethical considerations included confidentiality, safeguarding of family relationships, and self-care, with reflexivity supporting my dual role as researcher-participant. Ethical approval was provided by my institution - an FE college whose course is externally validated by Middlesex University.

While not generalisable, the study offers resonance: bereaved children may internalise conditions of worth, carry adult-sized responsibilities, and find themselves silenced by cultural norms. Yet continuing bonds and cyclical renewal point toward the possibility of post-traumatic growth when grief is encountered with compassion. The urgent and vital relevance of supporting bereaved children and young people with a genuinely person-centred approach emerged clearly from my work.

Limitations include the reliance on one autobiographical case and the interpretive challenges of working with memory. Nonetheless, the study contributes to practice by underscoring the need for relational spaces where children's grief is validated; for sensitivity to cultural and societal narratives that shape loss; and for creative, reflective practices that support integration of fragmented experiences.

Consideration of equality, diversity and inclusion was central. The research identified how western cultural norms and gendered expectations contributed to silenced grief, and highlighted the importance of creating inclusive, empathic counselling spaces that honour varied cultural contexts of bereavement.

## “I don’t want to speak with her about anything!”: Exploring perceptions of fat therapists using story completion

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Research on perceptions of fat bodies in therapy has predominantly focused on fat clients, with only a handful of studies examining perceptions of fat therapists. Understanding clients’ preferences for therapist characteristics such as body shape is important, as clients’ fat bias may shape their engagement in the therapeutic process and negatively impact the therapeutic alliance. The current study extends this small body of literature to explore perceptions of fat therapists using the creative method of story completion (SC). In SC research, participants are invited to complete a story based on a hypothetical scenario - in this case a first therapy session where the client notices that their “therapist is fat”. We approached the research from a fat studies perspective where the term “fat” is understood as a neutral descriptor of body shape rather than a pejorative. We use SC within a “social perceptions” framework where it is assumed to capture the range of social meanings participants have access to (Moller et al., 2021). One-hundred-and-thirty-nine psychology and psychotherapy students completed a story stem featuring either a fat female or fat male therapist. A gendered lens is important because research shows that fat women are perceived more negatively than fat men. We analysed the data using reflexive thematic analysis with the goal of developing themes and retaining something of the storied character of the data, as well as exploring any gender differences. We present four themes that broadly capture the structure of the stories: (1) Bad fat, bad fatty; (2) Fat therapists are flawed; (3) Fatness versus the therapeutic relationship; and (4) And the moral of the story is... These themes capture the sometimes explicit but more commonly implicit ways fat bodies were viewed negatively, with the therapist perceived particularly negatively when they embodied the “bad fatty” archetype, and the ways a fat therapist was understood as psychologically flawed (which was sometimes welcome but mostly not). In some stories, fatness overwhelmed the therapeutic relationship but more often the therapist and client formed a connection overcoming the initial barrier of fatness. Stories that ended positively often contained moralising that conveyed the importance of not judging others based on appearance. Fat female therapists were portrayed as matronly, desexualised and non-threatening; there was no equivalent for fat male therapists. We discuss the implications of the analysis for therapists of all body shapes and highlight the importance of a weight inclusive approach to counselling and psychotherapy.

## How do male victims of intimate partner abuse experience what keeps them in the abusive relationship and how can this inform psychotherapeutic practice?

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We aimed to explore the lived experiences of male victims of intimate-partner abuse as to what kept them in such relationships. Our objective was to better inform psychotherapeutic practitioners.

Four self-identified male victims of intimate-partner abuse took part in semi-structured interviews that were recorded then transcribed. Findings were extracted from our data using Thematic Analysis informed by the principals of Interpretative Phenomenological Analysis (IPA) (Smith et al, 2009). We submitted to our training institution's Ethics Board for approval to conduct our research, which was granted prior to participant recruitment. BACP ethical guidelines for research in counselling/psychotherapy (Reeves and Bond, 2021) were followed throughout our research. Participants were offered six no-fee counselling sessions should issues arise from their research participation. All participants in the study presented as self-identified white, heterosexual men who had fathered children with their abusive partners. Our participants were all from the same demographic therefore, our findings may only apply to victims who fall into this demographic. Additionally, our small sample size and the qualitative nature of our analysis may result in our findings being ungeneralisable (McLeod, 2003).

Findings appear to indicate participants' introjected views of what it means to be a man, an obligation to their children, maintaining a family unit and manipulation by the female perpetrator kept them in the abusive relationship. Additionally, participants also disclosed there was no accessible/common, societal/cultural outline with which to identify as a male victim of intimate-partner abuse; participants' perceptions of males in relation to abusive behaviour was rooted in views of toxic-masculinity and of being perpetrators not victims. Most participants feared losing access to their children if they were to leave the relationship; concern for their children's safety, if 'abandoned' to their aggressive/violent mothers, was also a disclosed motivator to 'stay-put'. A sense of male duty to maintain a family unit, with some participants expressing their desire for the stability this could offer, was also a participant disclosed motivator to stay. Coercive control exercised by the perpetrator - predominantly with threats of suicide - was also disclosed as a reason our participants stayed in these abusive partnerships.

Our findings indicate that, while the knowledge men can be victims of female intimate-partner abuse has increased over recent years, this remains uncommon knowledge. Being informed descriptively - not prescriptively - into the apparent cis male experience of being a victim of intimate-partner abuse may assist psychotherapists in better facilitating clients in this group.

## The Epistemic Trust, Mistrust, and Credulity in Psychotherapy Coding System (ETMCP-CS): Assessing Epistemic Stance in Psychotherapy

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As part of the Repairing Epistemic Mistrust and Securing Engagement in Therapy (RESET) study, funded by the BACP secondary data analysis grant, the Manual of the Epistemic Trust, Mistrust, and Credulity in Psychotherapy Coding System (ETMCP-CS) was developed to operationalise epistemic stance—how patients position themselves toward the others' communication of knowledge—within psychotherapy sessions. Grounded in research linking epistemic mistrust and credulity to developmental trauma and engagement difficulties, the ETMCP-CS offers a structured, observer-rated framework for identifying expressions of epistemic trust, mistrust, and credulity as they manifest in the patient’s verbal and behavioural communication.

The ETMCP-CS was developed through iterative empirical testing within the RESET study. Two independent raters (EL and SOK) have applied draft versions of the coding system to seven randomly selected psychotherapy sessions, followed by four joint consensus ratings completed across meetings (EL, CC, and SOK). These eleven sessions provided the empirical foundation for refining behavioural anchors, rating rules, and distinctions between epistemic trust, mistrust, and credulity. Throughout this period, all authors (EL, NM, CC, PL, and SOK) met regularly to discuss, refine, and reach agreement on the conceptual formulation and operational definitions within the manual, ensuring that empirical observations were grounded in shared theoretical understanding. The resulting manual now represents a pre-validation version ready for reliability testing.

The system codes three parallel domains of epistemic functioning: 1) Epistemic Openness, assessing willingness and safety in disclosure; 2) Mentalizing, assessing reflective engagement with self and others’ mental states; and 3) Integration and Reapplication of Social Learning, assessing receptivity to and generalisation of interpersonal learning beyond therapy.

Each system is rated globally per session on a five-point scale (0-4), where 0 indicates severe epistemic disruption (through mistrust or credulity) and 4 represents high epistemic trust with minimal disruption. Coding focuses on the patient’s stance, not therapist technique, allowing systematic analysis of within- and across-session change.

The forthcoming validation stage will test inter-rater reliability using 56 psychotherapy sessions (28 adolescent cases; one early and one later session per case) drawn from the IMPACT trial, which includes Short-Term Psychoanalytic Psychotherapy, Cognitive-Behavioural Therapy, and Brief Psychosocial Intervention for adolescent depression.

Developed with equality, diversity, and inclusion (EDI) principles in mind, the ETMCP-CS emphasises communicative function rather than content, enabling culturally sensitive adaptation. The manual will be freely available for non-commercial academic research under a Creative Commons Attribution-NonCommercial-NoDerivatives 4.0 International License and hosted on the UCL Psychoanalysis Unit and Anna Freud Centre websites.

## Advance view: BACP's Adult Trauma Counselling Competence Framework

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**Topic relevance to counselling/psychotherapy:** Qualified, experienced counsellors and psychotherapists need easily accessible, evidence-based guidance on the knowledge, skills and professional attributes that support them to safely and effectively help adults process trauma. This research presentation will share insights into the production process and some of the anticipated content of BACP's Adult Trauma Counselling Competence Framework, which will be published towards the end of 2026.

The framework is geared for practitioners, trainers, supervisors and service providers to inform model-neutral practice standards for adult trauma therapies. It can also help practitioners and supervisors determine where additional training might support practitioner development. BACP competence frameworks are not intended to be prescriptions for practice, and practitioners are expected to account for the needs of people using their services. All BACP's specialist competence frameworks and curricula are freely available here: <https://www.bacp.co.uk/events-and-resources/ethics-and-standards/competences-and-curricula/>

**Research aims, purpose and method:** The research was conducted using a PRISMA ScR-informed scoping review methodology, followed by a collaborative thematic synthesis carried out by BACP researchers in consultation with an external consultant, an Expert Reference Group of academics and practitioners (ERG), and a panel of people with lived experience of counselling for trauma (LEAP). The synthesis enabled us to define trauma counselling competences and organize them into a coherent framework. Ethical approval was not required for secondary research.

Results: Ten domains (and 57 subdomains) of knowledge and skill were organized over two superordinate sections:

- A. Essential knowledge and skills
- B. Four recursive phases of therapy

Within the essential knowledge and skills domain, we included a subdomain on socially just trauma therapy which provides guidance on working with people whose trauma experiences are compounded by intersectional social or developmental disadvantages.

**Limitations:** As with all evidence-based practice guidelines and competence frameworks, what we can clearly assert based on practice-based research evidence and expert consensus is limited by the state of knowledge reviewed at the time the work was produced.

**Equality, diversity and inclusion considerations:** In this presentation two of our LEAP advisors will outline their contribution process and reflect on their experiences of working with BACP's Competence Development Team and the wider ERG.

## Structural Mechanisms Impacting the Assessment of Counselling Students' Personal Qualities

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The personal qualities (PQs) of the counsellor are critical to therapeutic efficacy, requiring robust methods for assessing students' personal development (PD). This research contributes to the evidence base by investigating the underlying causality behind educators' assessment approaches. The study specifically addressed the transcendental research question: What are the causal mechanisms impacting educators' approaches to assessing counselling students' personal qualities? The investigation was philosophically grounded in Critical Realism, acknowledging that social reality is complex and layered, requiring analysis that moves beyond observable events (empirical data) to uncover deeper, explanatory causal mechanisms.

A collective case study methodology was employed, drawing on 30 in-depth semi-structured interviews with counsellor educators and supervisors and secondary document analysis from 10 Australian counsellor education programs. Data were analysed using grounded theory coding, followed by abductive reasoning and retroduction to theorise causal explanations for observed phenomena.

The analysis identified seven key PQs (self-awareness, openness, interpersonal skills, emotional stability, professionalism, cognitive complexity, and personal maturity) and revealed two distinct assessment approaches: explicit (e.g. clear, formal processes) and implicit (e.g. informal observation). Key structural mechanisms influencing the reliance on explicit approaches were the clarity of the program's counselling philosophy and the intentionality of counselling educators regarding PD assessment. Other influential, yet context-dependent, mechanisms included challenging institutional philosophies and priorities (e.g., transactional views of education and economic pressures) and constraints imposed by higher education regulatory frameworks.

These findings highlight the critical importance of educator agency, suggesting that intentionality needs increased training and clear institutional support. Implications include the necessity for professional bodies to mandate that programs clearly articulate their philosophy and operationalise and standardise PQs terminology. Furthermore, mandatory mapping of personal development goals is recommended to enhance assessment clarity and coherence for accreditation.

A major limitation was the sample restriction to programs founded on humanistic or integrative philosophies. This confines the exploration of how other theoretical orientations handle structural Equality, Diversity, and Inclusion (EDI) concerns regarding PQ assessment. Although assessing emotional stability raised specific discrimination concerns related to inherent requirements, explicit EDI factors like race and ethnicity, learning style, and education level did not emerge as major influences on assessment approaches in the interviews. Future research should investigate if distinct counselling philosophies prioritise different personal qualities, such as cognitive

complexity, potentially creating more varied and inclusive assessment pathways for students from diverse EDI backgrounds.

## **Making Sense of the Model: EMDR Practitioners' Experiences of Understanding and Applying the Adaptive Information Processing (AIP) Framework - An Interpretative Phenomenological Analysis**

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This paper will present the final findings from a qualitative study exploring how EMDR-trained therapists understand, experience, and apply the Adaptive Information Processing (AIP) model in their clinical practice. The AIP model underpins Eye Movement Desensitisation and Reprocessing (EMDR) therapy, yet little research has examined how therapists make sense of it as a theoretical and experiential construct. Aligned with the 2026 conference theme Collaboration for a Just Society, this study foregrounds collaboration between practitioner and theory as a vital dimension of inclusive, practice-informed knowledge-building.

Fifteen semi-structured interviews were conducted with thirteen EMDR-trained practitioners (twelve female, one male) based in the UK, Australia, and New Zealand. Two participants took part in follow-up interviews for clarification and depth. Interviews were recorded via Zoom, transcribed verbatim, and analysed using Interpretative Phenomenological Analysis (IPA) following Smith, Flowers, and Larkin (2009). A critical realist, interpretivist epistemology guided the analysis, with attention to reflexivity and the “triple hermeneutic” of therapists making sense of their clients’ experiences while the researcher interprets their accounts.

The analysis is currently in progress. Final findings will be ready for and included in the conference presentation, comprising three or four superordinate themes that illuminate how EMDR practitioners relate to, adapt, and apply the AIP model in diverse clinical contexts. Early patterns suggest a complex and dynamic relationship between theory and practice, characterised by both confidence and uncertainty, creative integration, and interpretative flexibility.

The study contributes to professional conversations about how practitioners collaborate with theoretical models and across modalities of therapy; actively reshaping and reinterpreting them within pluralistic practice environments. This reflective engagement fosters ethical flexibility, inclusivity, and practitioner empowerment; principles that resonate strongly with the theme of collaboration for a just society.

Ethical approval was granted by the University of East London School of Psychology Research Ethics Committee (May 2025). All participants gave informed consent, and the research was conducted in accordance with the British Psychological Society Code of Human Research Ethics (2014) and UK GDPR (2018).

By amplifying practitioner voices, this research aims to strengthen dialogue between theory, training, and lived experience, promoting collaborative and socially just knowledge-making in counselling and psychotherapy.

## The Lived Experiences of Eating Disorders Among British Indian Women: A Psychodynamic Exploration

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### Aim and Purpose:

This study explored the lived experiences of eating disorders among British Indian women through a psychodynamic lens, addressing their underrepresentation in research and therapy. It aimed to develop a culturally and psychodynamically informed understanding of how identity, culture, and emotion intersect in their experiences. This approach addresses a critical gap in the literature, as only one published journal to date has focused specifically on this group (Channa et al., 2019).

### Method:

A qualitative, psychodynamically informed design was employed, using semi-structured interviews via MS Teams with three British Indian women. Transcripts were analysed thematically, drawing on psychodynamic theory to explore unconscious, relational and intergenerational processes within cultural and familial contexts. Research approval was obtained from Goldsmiths University of London Ethics Committee.

### Results:

Four key themes were identified: Shamed into Shape highlighting intergenerational transmission of body shame and moral worth; Patriarchy on a Plate with a serving of Maternal Control, describing how food functioned as care and control; Rituals as Restraints, illustrating how religious fasting can become morally sanctioned form of restriction; Caught Between Cultures, Caught Between Castes, unravelling conflicts between collectivist expectations and Western ideals of individualism.

Findings indicate that eating disorder experiences among British Indian women cannot be fully understood through Western-centric models but must be situated within cultural, familial and moral frameworks. Psychodynamically, eating disorders may represent both compliance with and resistance against external demands, highlighting intrapsychic struggles between authenticity, belonging and social approval.

### Limitations:

Recruitment proved challenging, and the small sample size limits the generalisability of the findings. The inclusion of two sisters among participants may have influenced the data. Their shared experiences could have produced overlapping accounts, limiting the range of perspectives captured.

### Conclusion and Implications:

Eating disorders among British Indian women are shaped by relational, moral, and cultural systems. The findings highlight the need for sensitive approaches that validates culturally meaningful behaviours and addresses parental influence while acknowledging experiences of guilt or its absence in culturally expected context. Clinicians are encouraged to adopt a culturally responsive model that honours both the individual psyche and the collective religious, spiritual, and social contexts shaping experience.

EDI considerations:

Historically framed as affecting young, white, middle-class women, eating disorders are now recognised across ethnicities (Beat Eating Disorder, 2022). This study amplifies the underrepresented voices of British Indian women, challenging universalised theories while highlighting the importance of cultural sensitivity, inclusivity, and representation.

## Can integrative counselling support adoptive parents who may, as a result of their ‘lived experience’, have mental health needs?

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**Aim/Purpose:** Limited research explores mental health in parents who care for adopted children. This research has two core aims: to explore the ‘lived experience’ of adoptive parents, specifically whether these experiences have influenced parental mental health; and to apply counselling theory and practice to interview findings with the aim of improving support for adoptive parent mental health.

**Design/Methodology:** Semi-structured qualitative interviews were conducted with seven adoptive parents who responded to an advertisement in the Derbyshire (Local Authority) Adoption Newsletter. All participants self-reported a change in their mental health after a child was adopted. Interviews were recorded, transcribed and coded in line with grounded theory methodology.

**Results/Findings:** Data revealed significant mental health challenges among adoptive parents. Participants’ experiences centred around seven themes: 1) loss of the ‘dream’ of a biological family; 2) loss of sense of self; 3) feeling unprepared to parent their adopted child; 4) facing violence and abuse from their child; 5) fighting for justice; 6) facing an uncertain future; and 7) experiencing mental health problems. The validity of findings is enhanced by transparency during data analysis and grounding of themes in data.

**Research Limitations:** Participants come from one rural county only and the sample size of seven is small.

**Equality, diversity and inclusion:** Adoptive families are often treated within services as if their needs and relational dynamics are “normal”, yet adoption is inherently non-normative and shaped by trauma, loss and complexity. This assumption renders the mental health needs of adoptive parents largely invisible. Many feel silenced by shame, fear of judgement or re-scrutiny by social care, and a lack of professional understanding. I argue that current interventions not only overlook these dynamics but can inadvertently reinforce the systemic failings that contribute to parental distress.

**Conclusions/Implications:** All participants experienced significant adverse changes to their mental health after adoption. A targeted second literature review applied existing counselling literature and knowledge to the results; this resulted in the development of a Counselling Intervention Framework that may be used by practitioners working with adoptive parents. These findings aim to increase understanding of the counselling needs of this unique group and influence future service provision.

## The international climate responsive counselling initiative: a survey of counselling organisations globally

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Climate change and its effects such as population displacement, migration, loss of livelihood, and food and water insecurity are affecting the physical and mental health of people across the world. Effects can be direct, due to exposure to extreme weather events such as droughts, floods and wildfires, or indirect through growing awareness of the climate and ecological crisis. There are unequal effects on the mental health of individuals and communities compounding pre-existing mental health inequalities. Poorer countries, often most exposed to the impacts of climate change whilst being the least responsible for carbon/greenhouse gas emissions, are most likely to be negatively impacted. Those with pre-existing health conditions, children and young people, Indigenous peoples, and others who tend to be underserved in their society, are also disproportionately affected.

Counsellors and psychotherapists are uniquely positioned to hear, understand and respond to the climate emergency's impact on people's mental health. However, research into how talking therapies might support the mental health needs of people globally is emergent, with a very small number of notable studies. This is an area of growing research interest, but more is urgently needed.

This international collaborative project explores the work of counselling organisations globally to understand climate change challenges faced by their members (and their clients) and how they seek to support them. A global online survey of counselling/psychotherapy organisations explores their climate-related initiatives (e.g. training, policy statements, awareness-raising and ethical guidelines) as well as challenges raised by members such as the impact of climate change on clients, practice, standards, advocacy, training needs and research opportunities.

The survey will be circulated by the International Association for Counselling by email to its contacts for completion by relevant post holders within each organisation. Responses will be analysed to produce descriptive statistics about the organisation including membership size and location, and thematic analysis used for open-ended responses.

Data collection will begin by December 2025. Full findings from analysis of the survey will be available in time for presentation at conference in May 2026.

Findings from the project will be used to co-ordinate a digital hub for organisations to share information, resources and best practice regarding culturally appropriate counselling approaches in the face of ongoing and escalating challenges of climate change. Additionally, participating

organisations will be given the opportunity to indicate interest in further collaborative research and climate responsive counselling initiatives in the hope of further building on this work.

## The influence of national/cultural norms on psychotherapy practice: An international survey

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### Study aims

Cross-national psychotherapy research often focusses on how to adapt without fundamentally changing Western-originating models/approaches that have been transplanted to non-Western national/cultural contexts. By contrast, this study takes a decolonising approach (Tudor & Rodgers, 2021) by being curious about how local national/cultural norms related to interpersonal communication necessarily shape psychotherapy practice in different parts of the world through their influence on ‘marginal’ but significant aspects of practice, such as how psychotherapists dress, greet clients, or how direct they are in their communication.

### Methods

The study uses an anonymous online survey distributed to psychotherapists through the international Society for Psychotherapy Research ‘Culture’ listserve and snowballing via professional networks. The survey includes both multiple-choice and free-answer questions. Multiple-choice items will ask participants’ views on whether local norms in their country/culture would lead to specific psychotherapist behaviours being judged as ‘professional’ or ‘unprofessional’. The questions focus on psychotherapists’ appearance and dress; drinking, eating and self-care in sessions; greeting of clients; use of touch in sessions; emotional and verbal expression; disclosures in terms of personal feelings about the client; direct inquiry related to potentially sensitive topics and behaviours related to gifts. Quantitative data will be subject to descriptive and statistical analysis to understand national/cultural differences in perceptions of psychotherapist behaviour as ‘professional’ versus ‘unprofessional’. Reflexive thematic analysis will be used to analyse responses to the two open-ended questions.

### Results

The study is ongoing; data analysis will be complete by the time of the conference.

### Implications

If “to challenge is to offend” in Samoan culture (Ioane & Tudor, 2017, p293) and discussion of death is taboo in Chinese tradition (Li et al, 2024), how does this shape practice in those countries? While there is lots written about how to adapt practice for specific national/cultural populations, the question of how psychotherapy practice in different countries is shaped by national/cultural norms is, in comparison, neglected. Yet obviously there are significant cross-cultural differences in social norms - e.g. around directness (Grainger, 2023), that likely impact

therapists' use of disclosure or how directly they inquire about socially-sensitive topics. Therapist directness but also less obvious aspects, like responses to client gifts, matter because they influence the therapeutic relationship and frame. Critical awareness of Western psychotherapy models as 'colonizing' and acknowledgement and valuing of (especially non-Western) cultural influences on the discipline however evokes curiosity about what might be learned from understanding more about the impact of local national/cultural norms on 'marginal' but significant aspects of practice.

## Co-Creating Life Stories About Pervasive Traumatic Stress: The Experiences of Indian Women

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Discourses about trauma centre around the diagnosis of PTSD, which is individualistic and reduces recovery to either processing trauma events, or trauma reactions. This study proposes the concept of Pervasive Traumatic Stress (PvTS) which specifically looks at the intersection of intergenerational and complex trauma to broaden our frame of understanding and fill important research gaps.

The aim of this research was to explore the experiences of individuals who have gone through PvTS, and to figure out possible resources and support systems needed by them. Delhi, India was chosen as the site of study since the researcher has deep cultural knowledge of this region, and India in general is under-represented in the mental health literature. The following research questions were answered:

1. What are the experiences of Pervasive Traumatic Stress in India?
2. What are the needs of individuals living with PvTS, and how can they be met?
3. How can these experiences be talked about in marginalised Indian communities in accessible ways?
4. How can dialogue between communities be fostered to promote understanding and reduce the isolation of traumatised communities?

Ten participants were selected using purposive sampling. All of them were women with diverse cultural backgrounds. Photo-based life story interviews were used to collect rich data that represented both verbal and non-verbal aspects of experiences using a collaborative approach. The data was analysed using Wiltshire and Ronkainen's (2021) Realist Thematic Analysis. This method divides the analysis into three forms of themes, allowing researchers to simultaneously understand first-person viewpoints, abstract patterns, and underlying generative mechanisms.

Currently, only preliminary findings are available since the researcher is still analysing the transcripts. Initial themes suggest that PvTS is essentially a relational process, with betrayal and loneliness as two main poles of experience. The location of trauma lies not inside the individual but in-between the mind and the world, inherently implicating the physical, socio-political, economic, and historical factors into the traumatic process. Implications for practice include a proposed shift of focus in recovery processes from trauma events or reactions to trauma processes, which subsume both and might even precede them.

The limitations of the study include the lack of cis-men, trans, or non-binary participants. The original study design included focus group discussions with community members; this could not take place due to time constraints and emotional reticence from potential participants. This limits the study's ability to answer the last two research questions.

## Exploring the power dynamic in clinical supervision

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**Research purpose:** I completed doctoral research into the lived experience of Relate supervisors between 2020 and 2025. At that time Relate was a UK-wide charity providing relationship counselling. Relate National merged with Family Action in 2025 and the federated centres are now independent. I was a Relate supervisor myself at the time of the study, and completed the research as an insider researcher. It was my experience of the role that motivated me to study it as I was interested in understanding the views of other supervisors. Although there is much discussion of clinical supervision in the literature, there is little material which takes a phenomenological perspective.

**Methodology:** The research was underpinned by a phenomenological methodology and, to facilitate comprehensive understanding, a mixed methods quantitative/qualitative approach was taken. Firstly, an online survey was sent out to all Relate supervisors. The qualitative questions were analysed through reflective thematic analysis. Secondly, semi-structured interviews were held online with 10 Relate supervisors and analysed through interpretative phenomenological analysis. Ethical approval was given by the open university.

**Results:** A key finding of the study was the recognition by participants of a power dynamic between them and their supervisees. Power, they considered needs to be understood, acknowledged and discussed with supervisees to ensure it is not taken for granted as it could be used unwisely. Whilst recognising the power dynamic participants expressed a preference to hold power lightly and work collegially.

**Research limitations:** The project was limited by the nature of the sample, which was relatively small in scope. The experience of supervisors in other contexts was not explored and neither were the views of other key players within Relate, such as supervisees, managers or clients.

In addition, although all supervisors at Relate had the opportunity to be involved those who chose to take part were self-selected. This might have influenced the results. The cohort might, for instance, have been overly negative or positive about the organisation and the role. Neither scenario appeared however, to be the case.

**Conclusions:** My research has given a voice to supervisor practitioners and has brought this generally unheard but essential perspective to discussions about the delivery of supervision, specifically in relation to the power dynamic. Opportunities to improve professional practice across the fields of counselling, social work and health supervision, have been identified. Issues of equality, diversity and inclusion: Discussions around power dynamics raise equality, diversity and inclusion issues.

## **‘Bearing the Flag’: The Experience of Black Psychotherapy Trainees in Process Groups - An Interpretative Phenomenological Analysis**

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This study explores the lived experiences of Black psychotherapy trainees within process groups, which form part of their training. Black trainees are underrepresented in psychotherapy training programmes and may face unique challenges relating to visibility, representation, and inclusion. These factors may present issues in engaging with, and sourcing positive outcomes from the process group learning activity, which is already known to have unique emotional and relational challenges. There is little to no research into the experiences of underrepresented trainees in psychotherapy and counselling training programmes, and how these experiences shape their future psychotherapy careers. This study asked the following question: How do Black psychotherapy trainees, who are underrepresented in their course cohort, experience process groups? The researcher hopes to provide further insight into the perspectives of Black psychotherapy trainees in these settings, and highlight implications for cultural awareness and understanding for psychotherapy training programmes and process group facilitation. Using Interpretative Phenomenological Analysis (IPA), this study investigated how trainees made sense of their experiences in these group settings. It explores the subjective accounts of Black trainees who are underrepresented in their course cohort, examining their emotional responses, behaviours, attitudes, and meaning-making in the process group space. Three experiential group themes were identified: Navigating the process group space: ‘Learning to swim’; Being different: ‘A heavy blow’; and Representational burden: ‘Bearing the flag’. The results demonstrated that participants faced significant challenges within the process group space due to lack of representation, Eurocentric-dominated frameworks, and experiences of racism. The implications of these findings are key for training programmes in ensuring that the needs of Black trainees are met and that learning activities are culturally inclusive. This research was undertaken by a white-identifying psychotherapy student motivated by witnessing racism within their own process groups. This positionality is considered and managed with a reflexive approach, in keeping with qualitative methods. Limitation and recommendations for future research and process group facilitation are discussed.

## Access before Engagement: Co-produced insights from women living with HIV on navigating psychological support in the UK

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### Background / Rationale:

Women living with HIV (WLWH) in the UK continue to face inequities when seeking psychological support. Many navigate a fragmented mix of NHS specialist and generic care, specialist third-sector services, and peer/community support. This study asks: How do WLWH experience accessing any form of psychological support? And what can service and practitioners learn from this? The topic sits within counselling and psychotherapy research and multi-disciplinary mental health practice.

### Method:

Qualitative study using Reflexive Thematic Analysis (Braun & Clarke, 2022) of semi-structured online individual interviews with 12 WLWH across the UK. WLWH were recruited via collaboration with HIV specialist charities. A co-produced approach involved peer-support workers and women with lived experience, who contributed to the design and development of the findings.

### Findings:

Four interconnected themes show how access is shaped before, during and around encounters with services:

- When the system controls the terms, structural determinants of access preconfigure who can seek support and how.
- Public stories and identity positioning: dominant societal narratives influence how legitimate or visible women feel even before entering a room.
- Self at war to self-becoming: the psychological consequences of structural constraints, with journeys from self-protection and shame to acceptance, growth, and self-advocacy.
- People as bridges or barriers: the relational ecology of access. Partners, family, peers, and professionals can either facilitate or hinder pathways to psychological support.

### Study-specific limitations:

Recruitment through HIV community networks may mean that women least connected to services were under-represented. Conducting interviews online and in English could have excluded participants with limited digital access or different language needs. The absence of detailed demographic data restricted in-depth intersectional analysis.

### Conclusions and Implications for Practice:

Access to psychological support is not a single referral event but an ongoing relational and structural process shaped by systems, individual experience, and social context. Access improves when therapists and other professionals collaborate across different settings to reduce fragmentation and develop an intersectional, women-sensitive pathway. Practitioners can: (1) challenge structural barriers by co-developing clear referral pathways and low-barrier entry points with community organisations; (2) foster identity safety by making HIV literacy, confidentiality, and inclusive language visible; (3) work with ambivalence using trauma-informed approaches that normalise readiness fluctuations, supporting women to move at their own pace, and (4) embed relational bridges by involving peers, families, and multi-disciplinary professionals to support continuity of care. These steps move the focus from individual responsibility to systemic change, promoting greater equality, diversity, and inclusion in counselling practice.

## Relational Depth as a Predictor of Psychotherapy Outcomes: A Longitudinal Random-Intercept Cross-Lagged Panel Models Study

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### Background and Purpose

The quality of the therapeutic relationship is a well-established predictor of outcomes in therapy. However, traditional alliance constructs may capture more stable, trait-like relational factors, limiting insight into dynamic in-session relational processes. In addition, research on the relationship-outcome association has tended to use single time points, limiting causal inferences. This study, using assessment at multiple time points, aimed to examine whether the frequency of relational depth (RD) across sessions predicts subsequent changes in client distress, depression, and anxiety, and how RD relates to alliance when modelled within-person over time.

### Methods

A naturalistic, longitudinal design was employed in a UK psychotherapy training clinic with 1,086 clients (46 % female; mean age = 39.7) treated by 373 trainee therapists. Data were collected at eight time-points (every four sessions: T0-T7) using the Relational Depth Frequency Scale (RDFS), the 5-item Alliance (ARM-5), the CORE-10 (general psychological distress), the PHQ-9 (depression) and the GAD-7 (anxiety). Analyses were conducted using random-intercept cross-lagged panel models (RI-CLPM) to disaggregate within-person change from between-person variance and to test temporal precedence of RD and alliance in relation to outcomes.

### Results

Within-person increases in RD frequency significantly predicted subsequent reductions in depression ( $\beta = -0.060$ ,  $p = .010$ ) and anxiety ( $\beta = -0.050$ ,  $p = .037$ ). In contrast, the alliance measure did not significantly predict or follow changes in outcome. Additionally, RD frequency predicted later increases in alliance ( $r = .103$ ,  $p < .001$ ). Effects became more evident from approximately session 12 onward.

### Limitations

Findings are drawn from mild-to-moderate severity clients treated by first-year trainee therapists in a training clinic. Attrition over time and the retrospective nature of RD reporting should also be noted. Though RI-CLPM improves inference of temporal order, causality cannot be definitively established.

### Conclusions and Implications for Practice

The results suggest that fostering relational depth—moment-by-moment deeply engaged therapeutic contact—may be a distinct mechanism of change in counselling and psychotherapy, especially for depression and anxiety. Practitioners and training programmes may benefit from emphasising relational-depth-enhancing interventions, supervision and reflective practice. These findings challenge the primacy of traditional alliance alone as a mechanism of change and highlight the importance of process-oriented relational training in therapeutic education.

### Equality, Diversity & Inclusion (EDI) Considerations

This research monitored demographic variables including gender, age and ethnicity. The research was approved by the Metanoia Research Ethics Committee. Participants gave signed consent and could withdraw at any point in time.

## Associations between schizotypal traits, mentalizing dysfunction and borderline pathology in help-seeking adults presenting with Borderline Personality Disorder (BPD)

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**Background and Aims:** Schizotypal manifestations, including hallucination- and delusion-like phenomena, are common in people suffering with borderline personality disorder (BPD) and associated with greater clinical severity and worse therapy outcomes. However, the nature of associations linking specific schizotypal features to borderline pathology remains unclear. Furthermore, our understanding of the links between schizotypal features and psychological factors relevant for the development and treatment of BPD, such as mentalizing dysfunction, is limited. The current study recruited a large sample of individuals awaiting treatment for BPD in order to: (a) assess the effects of schizotypal features and mentalizing difficulties on borderline pathology; and (b) explore whether mentalizing dysfunction mediates the effects of schizotypal features on borderline pathology.

**Methods:** Five-hundred and sixty adults ( $M_{age} = 31.60$ ) presenting to UK personality disorder clinical services with either formally-diagnosed or clinically-suspected BPD were assessed for schizotypal features, mentalizing abilities and borderline pathology. Multivariate logistic regression analyses were conducted to examine linear associations between the studied variables.

**Results:** Statistical analyses indicated that schizotypal features pertaining to suspiciousness and disorganized speech accounted for mentalizing difficulties. Furthermore, schizotypal suspiciousness and disorganized speech, as well as mentalizing difficulties accounted for the level of borderline pathology. Finally, mentalizing dysfunction mediated the effects of schizotypal suspiciousness and disorganized speech on the level of borderline pathology.

**Discussion:** Current findings suggest that schizotypal features that instil a sense of mistrust (i.e. suspiciousness), or impede meaningful interpersonal communication (i.e. disorganized speech) are associated to greater levels of borderline pathology, at least in part, due to mentalizing dysfunction. Mentalizing appears to be a worthwhile therapeutic target to attenuate experiences of mistrust, sustain effective interpersonal communication and support better mental health outcomes for help-seeking adults presenting to therapy services with BPD. Study findings will be further discussed in the context of recent clinical conceptualizations highlighting the importance of fostering epistemic trust in therapy with people suffering with BPD.

**Limitations:** The cross sectional nature of the study prevents us from drawing causal conclusions about the relationships between the studied variables. Furthermore, whilst all participants presented with clinically-assessed BPD, we cannot preclude the possibility that findings were confounded by the inclusion of participants with comorbid schizotypal personality disorder.

Consideration to issues of equality, diversity and inclusion: Data for the current study were derived from a large sample presenting to routine clinical practice, which included participants from diverse ethnic, cultural and socio-economic backgrounds, as well as sexual orientations and gender identities.

## Examining counsellors working with jurors in the UK - What are counsellors' experiences and perceptions of supporting former jurors?

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Psychological Impacts of Jury Service: Counsellors' Perspectives on Jurors' Stress, Trauma, and Support Needs

Jury service is a cornerstone of civic justice, yet growing evidence highlights that being a juror can lead to significant psychological strain. Despite this, structured support for jurors in England and Wales remains limited, and no formal guidance or training exists for counsellors working with this population. This study explored counsellors' perspectives and experiences of supporting jurors, with the aim of identifying counsellors' understandings of the challenges faced by jurors, perceived psychological impacts, ethical considerations, and recommendations for effective support provision.

A qualitative design was employed. Semi-structured interviews were conducted via Microsoft Teams with six qualified counsellors (aged 31-68 years; professional experience ranging from 1 to 30 years), some of whom had personal jury experience, who were recruited via adverts on the BACP online research noticeboard. All trainee and qualified counsellors in the UK and registered with the BACP were eligible to take part. Questions focused on the counsellors' practical approaches to working with jurors, the challenges they believed that individuals may experience due to jury service, and their knowledge of relevant legal, practical and ethical challenges of working with this client group.

Data were recorded, transcribed, and analysed using reflexive thematic analysis (Braun & Clarke, 2006, 2021) to identify recurrent meanings and patterns. The participants believed that jurors may experience significant stress, intrusive memories, and delayed trauma responses, often worsened by a lack of preparation and post-trial support. They indicated that counselling interventions must be inclusive, culturally sensitive, and accessible to individuals of all identities and abilities. Themes will be discussed in detail.

This study is the first exploration of how counsellors work with jurors as clients. The research contributes to theoretical understanding by positioning jurors as a distinct group at risk of secondary trauma and highlights the role of inclusive, trauma-informed counselling in strengthening psychological support within the justice system. Moreover, the findings underline the need for training for counsellors on the legal, practical and ethical considerations involved in working with jurors as clients, and the challenges faced by jurors as a distinct client group. Future development of juror support services should prioritise equitable access and responsiveness to differences in language, education level, and socio-economic circumstance. We consider the role of government, professional organisations, and academic researchers in developing and sharing effective guidance for counselling practice with this overlooked client group.

## From Freshers to Finals: A Longitudinal Mixed-Methods Study of Mental Health Trajectories in Higher Education

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### Aim

The transition into higher education is a critical developmental period during which students face new academic, social, and personal challenges. Despite rising awareness of student mental health concerns, few studies have explored these issues longitudinally. This study examines baseline mental health, wellbeing, and psychosocial factors among students, identifies demographic and psychological predictors of poorer mental health, explores awareness of and attitudes toward counselling services, and plans to link survey data to counselling records to understand how mental health trajectories, demographics, and self-stigma influence service engagement and outcomes over time.

### Methodology

Participants (n ≈ 500) completed an online survey measuring mental health and wellbeing indicators, including depression (PHQ-9), anxiety (GAD-7), overall psychological distress (CORE-10), wellbeing (WEMWBS), academic adjustment (SEAM-10), loneliness (UCLA), and self-stigma of help-seeking (SSOSH). The survey also included a 'Counselling Services Section' assessing knowledge of available support, perceived accessibility, and attitudes toward seeking help. Demographics were collected across 23 variables to capture the diversity of the student population, focusing on underrepresented groups such as LGBTQ+ students, ethnically minoritised students, and those with disabilities or caring responsibilities. Descriptive and inferential statistics in R will identify baseline patterns and demographic differences. Qualitative reflections on wellbeing will be analysed using natural language processing. Ethical approval was obtained from the University of Sheffield Research Ethics Committee.

### Results

Preliminary descriptive and cross-sectional analyses will be presented at the conference. Early findings are expected to show variations in mental health and wellbeing across demographic groups, alongside differing awareness of counselling services. The study aims to explore differences in distress and service awareness across student populations. These results will provide an initial snapshot of the challenges students face upon entering university, highlighting groups at greater risk of poorer mental health or lower engagement with support services.

### Limitations

As baseline data from an ongoing longitudinal study, causal inferences cannot be drawn. Voluntary participation may introduce self-selection bias, with students experiencing greater mental health concerns more likely to take part.

### Conclusions and Implications

This study provides insight into the mental health landscape of students entering higher education. Identifying groups at greater risk of distress and lower wellbeing will inform targeted interventions, early support initiatives, and inclusive counselling practices to promote mental health equity within university settings.

## Therapy with higher-weight clients: prioritising the human in the context of societal weight stigma

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This research explores psychotherapists' understandings of the processes involved in their work with clients who have a high body weight. The aim is to ultimately contribute to recommendations for best practice, through exploring the challenges, strengths and approaches described by therapists who have experience with this client group. This topic is relevant to all psychotherapists, with around two-thirds of the UK population deemed either 'overweight' or 'obese' (Baker, 2021). Weight is determined complex processes, which relate to physical (metabolism, illness, disability), psychological (trauma, mental illness), and societal factors (inequality, deprivation) (BPS, 2019). These factors are often neglected or not understood by professionals, resulting in unhelpful attitudes towards weight; and placing 'blame' on the individual and perpetuating negative stereotypes. Working with high weight has relevance to multiple disciplines including psychology, sociology, and medicine.

Nine psychotherapists from a variety of backgrounds and settings (including private practice, eating disorder and weight management services) were interviewed. Recruitment was as inclusive as possible, with representation from therapists of different genders, ages and years of experience. Reflexive thematic analysis (Bruan & Clark, 2022) was used to co-create themes from the transcribed data. Analysis is currently in progress, however initial findings highlight four important areas relating to the research question: Working with Shame, Therapist Weight-Related Material, Political Passion; and Humanism vs. The Medical Model. Findings and conclusions will be finalised ahead of the conference.

Initial headline recommendations for practice include the importance of therapists having an informed understanding (via access to evidence-based training) of the biopsychosocial factors influencing weight, the flaws in public health discourse around weight, as well as the damaging impact of societal weight stigma on mental health. Due to the therapeutic barrier that shame can present, guidance around weight-related language used and non-shaming approaches to discussing weight will also be important. Additionally, the necessity of understanding weight through an intersectional lens, as well as the impact that a therapist's body-related identity can have in the therapy room is highlighted.

There are limitations to this study. Participants mostly had a strong interest in this area and therefore represent a very high level of understanding around working with high weight clients. This neglects experiences of therapists without this expertise which may highlight additional areas for development. Additionally, there is lack of a representation from clients themselves, which will ultimately be essential for understanding best practice.

## Co-constructing Inclusive Practice: Integrating Faith into an Acceptance and Commitment Therapy (ACT) Framework to Inform Guidance for Therapists Working with Muslim Clients

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### Background:

Muslim communities in the UK continue to face significant inequalities in mental health care in terms of engagement and outcomes, often shaped by cultural, religious, and systemic barriers. Faith frequently underpins how individuals understand and respond to psychological distress, yet therapeutic models rarely engage with clients' religious frameworks. This qualitative study explores how faith can be meaningfully integrated into therapeutic practice through ACT, and how such integration can inform future guidance for therapists working with Muslim clients.

ACT was selected because its principles of acceptance, value-based goals, and psychological flexibility align closely with Islamic concepts such as patience (*sabr*), surrender (*tawakkul*), and living meaningfully in accordance with one's faith. Its flexibility provides an evidence-based platform for integrating an indigenous view of the Islamic self – the *nafs* (lower self), *qalb* (heart), *'aql* (intellect), and *ruh* (Divine spirit) – without compromising therapeutic integrity (Khan et al., Culture, Medicine and Psychiatry, 2025).

### Methods:

This study uses semi-structured interviews with 6-9 mental health practitioners (NHS and non-NHS) and 7-10 Muslim participants with lived experience of psychological distress in Tower Hamlets and neighbouring boroughs. Reflexive thematic analysis will be used to interpret data. A patient and public involvement (PPI) advisory group and faith advisors are embedded throughout to ensure that lived experience and cultural insight meaningfully shape the research process and interpretation.

### Results:

Full findings are expected in April 2026 and will be included in the conference presentation. The study aims to produce guidance for therapists in two key areas:

1. How faith can be incorporated into ACT-based therapy and what this may look like in practice.

2. How a therapist's own faith (or lack thereof) may influence therapeutic delivery.

Impact:

This co-produced study unites clients, practitioners, and community members to develop a more inclusive form of therapy rooted in the Islamic tradition. Findings will inform more culturally responsive counselling and psychotherapy practice, supporting equity, trust, and belonging in mental health care, and will contribute to future intervention development and clinical evaluation.

Limitations:

Despite efforts to achieve diversity, the sample is expected to be predominantly Bangladeshi Muslims, reflecting local demographics. Those who value faith in therapy may also self-select into the study, limiting perspectives from less observant or non-religious Muslims. These factors will be considered in analysis and guidance development.

## The psychosocial consequences of Long COVID: A Scoping Review

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**Background:** Long COVID has been defined as experiencing persistent symptoms or developing new symptoms three months following a COVID-19 infection. Long COVID not only limits a person's day-to-day life, but it can also significantly affect an individual's psychosocial wellbeing. This scoping review forms the first stage of a PhD programme that has an overarching aim of developing a model of support for people with Long COVID. Guided by the pluralistic framework, this programme of work aims to draw together multi-disciplinary insights from health psychology, rehabilitation and counselling research to explore how professionals working within mental health can respond to the needs of people with Long COVID in practice. The purpose of this scoping review was therefore to comprehensively map what has been reported on the mental health, emotional and social factors associated with Long COVID.

**Methods:** This scoping review was undertaken following the JBI scoping review and Cochrane rapid review guidelines. A comprehensive search strategy was implemented across seven databases (Medline, CINHAL, Cochrane, PsycArticles, AMED, PTSDpubs, NIHR Health Technology Assessment) covering literature from January 2020 to August 2024. A search of gray literature and the reference lists of included reports were also searched to identify additional sources. The review protocol was pre-registered and published on the Open Science Framework (OSF). Data extraction captured study characteristics and relevant findings related to mental health, emotional and social factors associated with Long COVID.

**Results:** Preliminary findings indicate that the included reports predominantly reported mental health factors. Categories identified across the literature include, but are not limited to, anxiety, depression, sleep problems, emotional distress, coping with Long COVID, identity disruptions and stigmatising experiences. Data analysis will be complete in time for the BACP research conference.

**Limitations:** Although the search strategy did not place any restriction on geographical location, language, or participant age, initial findings suggest that most reports were undertaken in western cultures and primarily focused on adults with Long COVID. This review highlights the need for more inclusive research across diverse cultures and age groups to address this gap.

**Conclusion:** These findings contribute to the emerging evidence illustrating the profound psychosocial impact that Long COVID has on people living with the condition. The findings will inform the subsequent phases of a doctoral programme that will explore how counsellors, psychotherapists and professionals working within related fields can better respond to the emerging needs of clients living with Long COVID.

## Advance view: BACP's Relationship Counselling Competence Framework

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Topic relevance to counselling/psychotherapy:

Though intimate relationships can provide safety and comfort in stressful times, they can also be the cause of distress and insecurity, and partners in troubled relationships have been shown to be at increased risk for developing a range of mental health difficulties. BACP surveys conducted in 2021 and 2022 found our members reporting a rise in working with relationship pressures and breakdowns following the Covid pandemic, and an increasing number of enquiries for relationship therapy.

BACP have undertaken a project to develop an evidence-based competence framework for qualified therapists to deliver effective relationship counselling. It may be used by practitioners, supervisors, trainers and course providers to inform standards, training and development.

Research aims, purpose and method:

The aim of the project was to synthesise existing research and guidance on therapeutic competence in relationship counselling. The research was conducted using a scoping review methodology informed by PRISMA ScR checklist, followed by thematic analysis. BACP staff conducted the work alongside an external consultant with subject matter expertise. Work was overseen and supported via analytic consultation by an Expert Reference Group (ERG) of trainers, researchers and practitioners within the field of sex and relationship therapy.

Results:

We are currently completing the final stages of mapping the framework content and will be presenting emerging themes and organisation of the framework alongside with reflections on process and challenges. Initial analysis indicate superordinate themes such as Professional Practice, Core work and skills, and Gender, Sexual, Erotic and Relational Diversity (GSERD) and Anti-oppressive practice (labeling subject to change). Specialist topics identified at subtheme level include working with infidelity, working with partners who parents, and working with sex.

Limitations:

As with all evidence-based practice guidelines and competence frameworks, what we can clearly assert based on practice-based research evidence and expert consensus is limited by the state of knowledge in the field at the time the work was produced.

Equality, diversity and inclusion considerations:

The rationale for producing a competence framework for Relationship Counselling was grounded in the understanding that a contemporary framework must ensure a broad focus and inclusive terminology. ERG members were invited to contribute to the project based on their skills and knowledge in research, practice and training in relationship counselling, as well as expertise in matters relating to gender, sexual, erotic and relationship diversity (GSERD). A noteworthy aspect of this new framework is its coverage of GSERD and anti-oppressive practice.

## Group Chat Generation: “It’s Just How We Communicate” Exploring the Young Adult Experience of Participating in Group Chats - A Phenomenological Exploration

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This study explores how young adults make sense of their experiences within group chats.

Existing literature suggests that participation in group chats may be significant for adolescents and young adults from both a developmental perspective and from the standpoint of overall well-being (e.g. Aizenkot & Kashy-Rosenbaum, 2021; Kreuder et al., 2024, Latina et al., 2022, 2023; Lin et al., 2025). This literature, however, is largely quantitative, focuses on negative outcomes and does not explore the lived-experience of being in group chats.

Findings will provide a psychoeducational tool for counsellors working with younger clients (in line with Gallo et al. (2016)). This is significant in light of a recent BACP report (BACP, 2022), which found that 80% of therapists are 45 or older, which raises the possibility of a generational “technology gap” between therapists and younger clients. Such a gap might limit empathy and understanding.

### Method, Findings & Practice Implications

Semi-structured interviews were conducted with five young adults (aged 18-25) and produced a rich dataset. The researcher used Interpretative Phenomenological Analysis methods to analyse and interpret the data, revealing four over-arching Group Experiential Themes: Cornerstones of Connection; Overloaded & Overwhelmed; Safety, Risk and Power; and Digital Self-Awareness.

Participants' accounts portray group chats as an integral part of their relational lives. Group chats are not experienced as mere communication tools; rather, they form a fundamental part of participants' relationships and provide meaningful sources of connection, belonging, and support. This widely felt, positive experience of group chats contrasts with an equally widely acknowledged experience of group chats as sources of cognitive, emotional, and sometimes relational strain. Navigating the downsides of participation seems to, at times, require exhausting levels of vigilance and emotional investment. For therapists, this demonstrates the importance of exploring how online experiences in general, and group chat participation in particular, might influence young clients' lives, either positively or negatively.

### Limitations

The sample was small and limited to university students in the UK, who were already fluent in mobile communication; findings may not generalise to individuals with different educational backgrounds, with less access to technology or to other age groups.

Participant accounts suggest that individual psychology shapes group chat experiences (e.g. tendency towards overthinking). Future research could examine how individual factors (e.g. gender, attachment-style, mental health) might influence these differences.

## How would people with a Learning disability shape talking therapy? An adapted Participatory Theme Elicitation

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Abstract- An easy read abstract is available here- [https://liveabertayac-my.sharepoint.com/:w:/g/personal/0406904\\_uad\\_ac\\_uk/ERkIG55f4oNHmJcYtPyilukB4040WnT\\_bP\\_XpqImCcZnjQQ?email=research.conference%40bacp.co.uk&e=TihQah](https://liveabertayac-my.sharepoint.com/:w:/g/personal/0406904_uad_ac_uk/ERkIG55f4oNHmJcYtPyilukB4040WnT_bP_XpqImCcZnjQQ?email=research.conference%40bacp.co.uk&e=TihQah)

### Background and relevance

22%- 40% of adults with a learning disability also have a mental health condition (Cooper et. al 2007). In their 'Matrix' NHS Scotland (2025) identify that 'social marginalisation, stigma and discrimination are common experiences and may make it more challenging for people with learning disabilities to engage with health and social care services and find the help they need'.

This paper presents an analysis of the application of an adapted Participatory Theme Elicitation (PTE; Best et al., 2022) method as part of a co-created research project undertaken by a PhD candidate and researchers with lived experience of having a learning (intellectual) disability. The wider study explores how people with learning disabilities would shape talking therapy, contributing to inclusive and participatory approaches within counselling and psychotherapy research.

### Aims and purpose

The aim of this stage of the research is to examine the feasibility and effectiveness of an adapted PTE approach for generating meaningful themes from qualitative data collected in collaboration with co-researchers with learning disabilities.

### Method

Data were generated through group discussions in which participants explored different aspects of the counselling process. The adapted PTE analysis followed three stages: (1) training of co-researchers; (2) individual sorting of data extracts; and (3) group discussions to reach consensus on key themes. Adaptations were made to enhance accessibility, including the use of simplified language, visual supports, and extended time for discussion and reflection.

### Preliminary findings

The project is currently at the stage of refining and validating the final themes, with completion anticipated by the end of the calendar year. Preliminary analysis suggests that co-researchers are identifying distinctive perspectives on therapeutic relationships, accessibility, and communication within counselling. Final findings will be included in the conference presentation.

## Limitations

Key limitations relate to adapting the PTE protocol to ensure accessibility while maintaining methodological rigour. Scheduling and maintaining consistent engagement among co-researchers also presented logistical challenges. Power imbalances inherent in participatory research were recognised and addressed through relationship-building, valuing of lived experience, and iterative co-learning processes (UKRI, 2025).

## Implications for practice

Findings from this analysis will inform the co-creation of draft practice guidelines to support counsellors and psychotherapists working with people who have learning disabilities. These guidelines will be evaluated in future studies.

## Equality, diversity, and inclusion

Equity, diversity, and inclusion are central to this project. All materials are provided in accessible formats, with easy-read documents as standard and other formats available on request. The research design reflects a continuing commitment to flexibility, accessibility, and the active inclusion of an often-marginalised group.

## It's a Kind of Magic: A Heuristic Study into Relational Depth in Person-Centred Therapy

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Relational depth has long been understood within the Person-Centred Approach as processual and emergent, yet it is frequently represented in literature as an isolated event. This small-scale heuristic study re-examines its lived continuity in practice. The research explores how Person-Centred practitioners experience and understand relational depth not as isolated peaks but as a sustained, co-created process of mutual presence, illuminating how such depth emerges, is maintained, and what it reveals about the collaborative heart of therapeutic growth.

Guided by Moustakas' heuristic method, five experienced Person-Centred therapists engaged in in-depth interviews and reflexive dialogues. Analysis followed the six heuristic phases, integrating immersion, incubation, illumination and explication to trace the unfolding of meaning across participants and researcher. Ethical approval was secured through the college research ethics process, and each participant offered informed consent.

Five core themes emerged: (1) Psychological Contact as Continuum, (2) Relational Depth as Process, Not State, (3) Mutuality and Reverberation, (4) Cosmic or Spiritual Resonance, and (5) Differentiation within Connection. Together, these portray relational depth as an evolving, embodied field of co-presence in which therapist and client engage in a form of collaborative attunement that can ripple beyond the dyad itself.

The findings suggest that relational depth may embody a microcosm of social relational justice – a lived ethic of equality, co-creation and inclusion. Participants described depth encounters as dissolving hierarchy, honouring difference, and fostering a sense of shared humanity. While based on a small, self-selecting sample, the study seeks experiential resonance, depth and transferability. The research contributes interpretive richness to Person-Centred understandings of how sustained, authentic meeting supports healing.

Implications include re-envisioning training and supervision to emphasise field awareness, dialogical reflexivity and the cultivation of safety within difference. The study invites practitioners to consider relational depth as an emergent process of collaborative presence, resonant with wider movements toward inclusion and compassion in mental-health practice. Ethical statement

Ethical approval was obtained through the South Hampshire College Group Research Ethics Committee, validated by Middlesex University. All participants provided informed consent, with confidentiality and right to withdraw upheld throughout. The study was conducted in accordance with BACP Ethical Guidelines for Research in Counselling and Psychotherapy.

## From Embodied Wounds to Therapeutic Attunement: How Wounded-Healer Therapists Make Meaning of Client Aggression

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This qualitative study explored how therapists with personal histories of trauma (“wounded healers”) experience and make sense of working with children and young people who display aggressive behaviours. While the wounded healer concept has been widely theorised since Jung (1951/1966), little empirical work has examined how such practitioners negotiate embodied countertransference, professional identity, and meaning-making in complex, demanding therapeutic contexts.

Six qualified mental health practitioners participated in in-depth semi-structured interviews about their experiences of in-session aggression and its emotional aftermath. Using a Critical Realist-Interpretative Phenomenological Analysis (CR-IPA) (Fletcher, 2017; Smith et al., 2022), the study examined how participants’ subjective meaning-making was shaped by both lived history and the systemic contexts in which they practised. Ethical approval was granted by the University of Roehampton Ethics Committee.

Four interrelated experiential themes were identified:

1. Evoked wounds and embodied activation - client aggression reawakened early relational trauma, often experienced somatically through fear, shame, or paralysis.
2. Reconstructing professional identity - participants sought stability in professional roles and competence, revealing the profession’s function as a redeemer of personal vulnerability.
3. Reparation and restoration through support - supervision and collegial containment facilitated regulation, integration, and reflective practice.
4. Reframing aggression through empathy and meaning-making - by staying with their countertransference, therapists reframed aggression as communication rather than threat.

The study highlights how collaborative, trauma-informed supervision and training structures can legitimise embodied and emotional ways of knowing, supporting both practitioner well-being and ethical practice. Through a multidisciplinary lens, it bridges counselling psychology, trauma studies, and educational systems, highlighting how lived experience can be integrated into reflective and regulatory processes across professions.

The study explicitly examined how power dynamics, institutional norms, and early adverse experiences intersect to shape belonging within professional spaces. Findings advocate for greater epistemic inclusion—recognising experiential and relational knowledge as valid forms of expertise

alongside academic and procedural ones.

Rather than proposing systemic “healing,” the study calls for systems of care and training to engage in reflexive collaboration—cultivating organisational cultures that recognise the human conditions of power, vulnerability, and love that underpin psychological practice. This positions love not as sentimentality, but as an ethical and epistemic stance that fosters justice, compassion, and sustainability within counselling and psychotherapy. However, given that the participants were female and of White ethnic backgrounds, such a finding necessitates further testing within diverse groups wherein power, vulnerability and love may be experienced differently.

## A qualitative study of Afrofuturist art as applied to the self-esteem and identity of Black women

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‘When I discover who I am, I’ll be free’ - Ralph Ellison

There is no liberation without self-esteem, and Black communities have had remarkable success affirming their worth, identity and culture despite the aberrations of enslavement, racism, and systemic oppression. Black women in particular have found unique ways to thrive, asserting their existence through cultural references like #blackgirlmagic, and spearheading global movements for change such as ‘Me Too’ and ‘Black Lives Matter’. The lives of Black women in the diaspora are filled with everyday acts of heroism as they resist erasure, challenge gendered and racialised norms, and confront the toxicity of white beauty standards. These systematic attacks on self-esteem not only impact the mental and physical health of Black women but also diminish their capacity for a liberatory and joy-filled existence.

Afrofuturist visual art offers an emergent epistemology with the potential to turn pain into power by transforming how Black women conceptualise themselves and their Blackness. Afrofuturism provides a framework that embraces imagination, mysticism and liberation, offering new ways to reconfigure identity and self-worth beyond colonial and patriarchal definitions. The intent of this study was to explore the potential of Afrofuturist artwork in a focus group setting and, through Interpretive Phenomenological Analysis (IPA), examine its effects on the self-esteem and identity of Black women.

Two focus groups, each consisting of three participants, engaged with selected Afrofuturist artworks. The analysis revealed that these images evoked reflections on identity, race, gender and futurity, allowing participants to locate self-esteem not only within themselves but within a broader collectivist vision of Blackness. Afrofuturist art was found to stimulate a collectivist form of self-esteem that enshrines Black futurity in community, the cosmos, and the natural world. Participants described the paradoxical experience of being simultaneously marginalised and powerful, embodying Africanness as both mystical and grounded, and finding liberation through intimacy, ancestry and connection to land.

The study suggests that Afrofuturist art can be a therapeutic tool, enabling Black women to confront oppression while cultivating new possibilities for self-esteem through imagination, temporality and embodiment. It provides a container to process racialised trauma while affirming agency, resilience and collective belonging. In doing so, Afrofuturist art illuminates pathways for both personal and communal liberation, redefining self-esteem as something that transcends individual worth and instead flourishes in shared visions of freedom, ecological entanglement and intergenerational hope.

# Symposium

## Exploring men's mental health and community engagement through active participation in order to improve help seeking, mental wellbeing and suicide reduction

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This symposium presents findings from a 17-month co-produced research project with Menfulness, a UK-based male suicide and mental health charity, exploring innovative approaches to engaging men in mental health support. Men are historically less likely to access counselling or psychotherapy due to masculine socialisation, stigma, and perceptions of services as feminised. This symposium is highly relevant to counselling, psychotherapy, and mental health practitioners, highlighting practical, evidence-based strategies for promoting male engagement, informal help-seeking, and addressing mental health inequalities, reflecting the conference theme of “Collaboration for a Just Society.”

Paper1 presents a scoping review examining challenges preventing men from seeking counselling or psychotherapy. It identifies themes of masculine identity, male behavioural norms, and service-level barriers, offering insight into why conventional mental health approaches often fail to engage men.

Paper2 explores men’s experiences of listening several Menfulness in house produced mental health podcasts. Using semi-structured interviews with nine male listeners, the study highlights benefits of listening such as understanding other men’s lived experiences, reducing isolation, facilitating male intimacy, and promoting flexible masculinities that encourage male reflection and informal help-seeking.

Paper3 investigates public-space, community-based mental health support via Menfulness groups. Focus groups with 24 men revealed the importance of relaxed, nonjudgmental, and flexible environments where men can build social ties, access peer support, and develop emotional vulnerability, reinforced by the use and application of digital platforms. Together, these studies illustrate a continuum of male engagement: from understanding systemic barriers, to media-facilitated informal support, to structured community-based interventions.

Methods across the studies include scoping reviews, thematic analysis of interviews and focus groups, and survey data collection, with ethical approval obtained for both human participant research projects. Preliminary findings show that multi-level, male-centric approaches can improve engagement, reduce isolation, and enhance wellbeing, with implications for counselling practice, suicide prevention, and male mental health policy.

Limitations include small sample sizes and limited diversity, highlighting the need for further research with broader demographic representation.

Equality, diversity, and inclusion were central to project design. The research recognises how gender norms, social class, and cultural factors influence men's mental health experiences and help-seeking behaviours. Interventions are inclusive, flexible, and sensitive to men who may not access traditional clinical services. By co-producing the research with men with lived experience and exploring diverse engagement pathways, this symposium offers transferable insights for counselling, psychotherapy, coaching, and multidisciplinary mental health practice, demonstrating collaborative approaches that enhance accessibility, inclusion, and effectiveness for male populations.

## Symposium Paper 1 - The challenges preventing men from seeking counselling or psychotherapy

Gary Shepherd<sup>1</sup>, Sam Watling<sup>2</sup>

<sup>1</sup>Senior Lecturer & Research Lead, York St John University; <sup>2</sup>Trustee of the Menfulness charity

### Background

Traditionally men have been reluctant to engage in counselling or psychotherapy at times of mental distress. Such reluctance may be partly explained through masculine socialisation and masculine hegemony theory. This scoping review aims to extract, review and summarize research recommendations to help researchers understand the main challenges preventing men when contemplating or seeking counselling or psychotherapy.

### Methods

Six electronic databases (PsycINFO, PsycARTICLES, CINAHL, MEDLINE, SocINDEX and Google Scholar) were searched for articles published between 2002 and 2021. Of the 2,306 articles identified, 45 met the inclusion criteria. Forty articles used a qualitative methodology, whilst five studies employed mixed methods methodology.

### Results

Analysis revealed three interconnected themes which contribute towards reluctance to engage with mental health services (a) masculine identity; (b) male behavioural norms; (c) psychological services and therapists.

### Conclusion

We would recommend hegemonic men re-establish their links to male centric communities in order to counteract some of the barriers preventing access to psychological services. We envisage the establishment of local community-based networks of men who can share their lived experience, develop a language of help seeking and find new ways to experience their masculinity.

This literature review underlines the structural and cultural forces that deter men from accessing counselling, showing how professional practices sometimes reinforce barriers. By surfacing these systemic challenges, the paper provides a critical foundation for rethinking therapeutic engagement with men. It argues that counselling and psychotherapy must move beyond a deficit model to incorporate community-led, male-centric approaches that recognise men's lived realities. This perspective resonates with BACP's theme by promoting collaboration between counsellors, community organisations, and policy-makers. The insights encourage practitioners to

co-design services that feel accessible, culturally attuned, and aligned with men's own definitions of connection, resilience, and wellbeing.

## Symposium Paper 2 - What do men gain from listening to men's mental health podcast episodes?

Gary Shepherd<sup>1</sup>, Sam Watling<sup>2</sup>

<sup>1</sup>Senior Lecturer & Research Lead, York St John University; <sup>2</sup>Trustee of the Menfulness charity

### Background

Although men are more likely to die by suicide than women, they are less likely to seek help when feeling suicidal. Masculine socialisation leaves men feeling stigmatised for their mental health problems. Researchers consider podcasts an efficient way to promote health information and offer social support to individuals who are unable to access services.

### Methods

Nine male listeners of a UK based men's mental health podcast series were interviewed using semi-structured interviews. Participants discussed their reflections of six podcast episodes and what they gained from listening. Interviews were recorded, transcribed and analysed using thematic analysis.

### Results

Five interconnected themes were identified which described listener's reflections: understanding other men's lived experiences; facilitating male intimacy; combating male isolation; learning how to seek help and reflecting on a culture of positive masculinity.

### Conclusions

The podcasts promote more inclusive, flexible versions of masculinity which encourage reflection on an individual's lived experience. Listening to men's mental health podcast episodes may provide a vehicle for men to initiate new ways of seeking informal help, reducing feelings of loneliness and fostering male intimacy. Recommendations on how the findings of this research can assist podcast creators develop episodes promoting flexible masculinity are discussed.

This paper expands the conversation about help-seeking by considering how men use podcasts as a flexible, private entry point into support. It demonstrates that digital media can serve as an important bridge between silence and counselling, offering safe spaces where men feel less judged and more open to vulnerability. The findings illustrate new collaborative possibilities for mental health professionals to work with digital creators in shaping content that normalises reflection and help-seeking. Aligned with BACP's emphasis on lived experience, this study highlights how informal, peer-led narratives can complement counselling practice and diversify routes into therapeutic engagement for men.

## Symposium Paper 3 - Using public spaces for male community mental health support

Gary Shepherd<sup>1</sup>, Sam Watling<sup>2</sup>

<sup>1</sup>Senior Lecturer & Research Lead, York St John University; <sup>2</sup>Trustee of the Menfulness charity  
Titles

Mental health services have traditionally found men a difficult group to reach. Many men are reluctant to seek help when their mental health declines, often feeling stigmatized and responsible for their symptoms. Most men view conventional mental health support as feminized and unhelpful, preferring the company of other men to support their wellbeing. This research used focus groups to explore the experiences of 24 men attending four nonclinical community-based mental health support services held in public spaces—a public house, football stadium, sports centre and village hall. Our findings demonstrate the importance of offering varied male community spaces with welcoming environments where men encounter positive masculine role models. These environments encourage men to challenge attitudes and behaviours around help seeking and mental wellbeing. We suggested policy development in three areas: referral pathways, male-friendly mental health spaces and multi-tiered group and digital peer support platforms.

The paper highlights how men thrive in relaxed, peer-driven environments promoting both casual connection and deeper disclosure. Its policy implications stress collaboration between practitioners, charities and statutory bodies to design inclusive, sustainable infrastructures. For BACP, the significance lies in showing how counselling practice can intersect with grassroots, peer-led spaces to broaden reach, enhance accessibility and respond to the barriers men face in seeking support.

A constructivist-interpretivist methodology underpinned the study, recognising men's accounts as socially situated and co-constructed through group interaction. Consistent with this epistemological position, the focus groups were treated as collective units of meaning rather than as aggregates of individual accounts. Data were analysed using reflexive thematic analysis involving transcription accuracy checks, iterative immersion in the dataset, double-coding of 20% of transcripts, and reflexive discussions around power dynamics within the research team. Codes were developed into themes through recursive comparison across groups and peer review, ensuring that themes reflected both shared patterns and context-specific meanings embedded within different public spaces.

The analysis generated five interlinked themes capturing men's pathways into public mental health spaces, their early impressions, the development of relational bonds and, for many, movement toward emotionally vulnerable disclosure. A final theme showed how digital interaction sustained dialogue beyond physical meetings, illustrating how these spaces normalise help-seeking and support relational depth.

Limitations include a demographically homogenous sample—white, heterosexual men aged 30-60—and pre-existing relationships between some researchers and participants, which may have shaped disclosure. Nonetheless, the design captured group dynamics effectively and highlighted the socially constructed nature of men’s help-seeking.

## Building therapist capability to engage in research-informed practice: challenges and opportunities around the development of counselling and psychotherapy research skills and knowledge

Clare Symons<sup>1</sup>, John McLeod<sup>2</sup>, Julia McLeod<sup>3</sup>, Kate Smith<sup>4</sup>, George Salamnios<sup>5</sup>, Robert Scruggs<sup>6</sup>, Sofie Bager-Charleson<sup>7</sup>, Divine Charura<sup>8</sup>

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There is a broad appreciation within counselling and psychotherapy that research-informed practice represents a fundamental dimension of its commitment to accountability, provision of services that are inclusive of the needs and worldviews of all individuals and communities, and the responsible use of new technologies. Barriers to the effective development, maintenance and application of research skills and competencies in students undertaking primary training as well as experienced practitioners, include time pressures limiting sufficient depth of research teaching within already pressurised training curriculums, and a perceived lack of clinical relevance of many published studies.

This symposium presents three studies offering key perspectives in relation to the wider goal of establishing multidisciplinary networks to sustain appropriate, critical, social justice-oriented research competence in counselling and psychotherapy.

Paper one presents a mixed method survey of BACP-accredited training programmes, around how they teach research skills and knowledge, contextual factors that shape what they can offer, and their suggestions for enhancing this area of their work. Survey responses received from staff responsible for research teaching within these institutions indicated a wide diversity of learning approaches, contrasting levels of resources available to staff, and many examples of innovative practice.

The second paper focuses on the perspective of doctoral students and research supervisors, regarding their satisfaction with the degree to which issues of diversity and inclusion are addressed within the supervision, using a mixed method dialectical survey approach. The majority of respondents believed that diversity and inclusion did not receive sufficient attention within their research supervision context. Participants described being concerned about the capacity for research being undertaken to inform work with clients around these key aspects of contemporary therapy practice.

The third study used interviews to investigate the meaning of research-informed practice from the perspective of different stakeholders when working with gender violence and child sexual abuse, focussing in this paper specifically on therapists. By researching the experience of those active in a specific area that is associated with a strong tradition of evidence-based practice, this study offers new insights into the strategies used by practitioners to reconcile research findings with the

needs of specific clients.

The symposium will include opportunities for participants to engage in dialogue with the presenters around not only the findings and implications of each study, but also wider issues around the kinds of training and other resources that might facilitate effective practitioner engagement in research-informed practice.

## Symposium Paper 1 - Survey of research teaching on counselling and psychotherapy training programmes in the UK

**Clare Symons**

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Research skills and knowledge represent an important area of counsellor and psychotherapist competence. The ability to access and critically evaluate relevant research evidence contributes to therapist understanding and responsiveness in relation to client needs.

The objectives of this study were to map out aspects of current research teaching practice and to allow those delivering research teaching to identify ways in which BACP might support them in this work.

The study used a mixed methods anonymous online survey distributed to tutors/course leaders delivering research teaching within BACP-accredited counselling/psychotherapy training courses. Descriptive statistics were produced and responses to open-ended questions were analysed using thematic analysis. The survey was sent to 67 institutions representing 70 BACP accredited training courses and explored: course information including academic level and theoretical orientation; institutional research context; details about research curriculum, delivery of teaching, assessment of research learning. Open-ended questions explored: good practice, including in relation to EDI; challenges experienced by tutors/trainers; ideas about how BACP might support research teaching; interest in developing collaborative research opportunities.

The survey received responses relating to 14 courses (20% response rate) representing therapist trainings at DipHE, foundation degree, PGDip and Masters levels; delivered within HE, FE and independent training institutions. The average number of students ranged from 12 to 80 per cohort, and the number of research teaching contact hours ranged from 8 to 200. Thematic analysis yielded 4 superordinate themes. Responses described successful and creative ways that courses sought to develop skills that bridged research and practice, drawing on students' existing skills and acknowledging barriers, as well as highlighting concrete challenges relating to time, money and support needs.

Study limitations are the small number of responses and that the survey is focussed solely on BACP-accredited courses. EDI considerations were integrated into the survey, however, future studies should explore whether specific barriers and blocks are experienced by marginalised groups within counsellor training in relation to research teaching.

Although small-scale, this project demonstrates a need for additional development and resource for trainers and courses to support the effective delivery of research teaching, building on the creative input, energy and good practice already evident. Future research might seek to extend this survey to all counsellor/psychotherapist trainings within the UK, and to link up with colleagues in cognate fields such as social work and nursing to better understand the variety of approaches that might overcome the challenges of delivering effective research teaching that prepares practitioners for career-long research-informed practice.

## Symposium Paper 2 - The importance of diversity and inclusion within the research supervision relationship: the views of research students and supervisors

Sofie Bager-Charleson<sup>1</sup>, Divine Charura<sup>2</sup>

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Whilst clinical supervision is a well-explored area, research supervision remains relatively under-theorised in counselling and psychotherapy. Although typically described as central for student progression and welfare, studies highlight how institutional guidelines for supervision remain scarce (Erikson, 2019). Additionally, an increasing amount of research addresses how the difference in socio-cultural background, (dis)-ability, age, gender and sexual orientation are shown to have an effect on doctoral candidates' progress and successful completion.

Research supervisors are uniquely positioned to recognise student abilities and needs. This study therefore set out to explore how research supervision can support counselling, psychotherapy and counselling psychology doctoral students in their development of new knowledge, with diversity-related opportunities and challenges in mind.

Guided by 'dialectical pragmatism', a semi-qualitative online survey was developed combining standard Likert scale questions with open-ended questions and a 'story completion' question (Reflective Online Practitioner Survey - ROPS; McBeath, 2020). The survey hyperlink was distributed through the researchers' academic networks throughout the UK, Europe and North America as well as on social media platforms.

The survey received 105 responses, with 45 coming from research supervisors and 60 from research students. Only a minority considered their own research supervision team to be diverse, and two-thirds of respondents did not see matters relating to diversity and inclusion receiving sufficient emphasis in published research. Both quantitative and qualitative data addressed unequal representations in terms of gender and sexuality, ethnicity and heritage, (dis-)ability and social class. Many described 'diversity being left out of research' with consequences on the capacity to meet clients' need in clinical practice.

The small number of responses is a limitation of this study, perhaps reflecting the small population sizes of the groups involved. The purposive sampling method used to target potential respondents and the position of the researchers as 'insiders' might also be considered a limitation associated with a risk of obtaining a biased sample not representative of the wider population.

This study suggests that it is time to challenge the traditional and historic research culture within counselling and psychotherapy and to be mindful of how research has marginalised or excluded

certain groups, with impacts on theory and practice in mental health. This is a challenge where research supervisors can make a vital contribution through promoting a supportive, empathic and democratic research supervision relationships and being sensitive to such critical issues such as intersectionality and cultural humility. However, to do this also requires systemic changes in terms of supervisor training and organisational support.

## Symposium Paper 3 - Therapists' experiences of evidence-based practice when working with survivors of child-sexual abuse

**Kate Smith**

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This study investigated the use of evidence based practice (EBP) and its perceived value through the perspectives of Child Sexual Abuse (CSA) practitioners at the forefront of therapeutic interventions to children in need. The aims were to explore typical interventions and the extent to which these are EBP; the perceived value of EBP; factors that facilitate and hinder the use of EBP, and practitioner preferences and choices in adopting new methods.

Nine UK-based CSA practitioners (counsellors, clinical psychologists, and CBT-therapists) were recruited through social media platforms, with practice experience ranged from 11 to 24 years. All participants were female and worked in both community settings and private practice. Semi-structured interviews were conducted online, exploring practice experience, approaches to practice and the influence of research in providing appropriate interventions for their clients.

Thematic analysis was undertaken on the interview transcripts. Five themes emerged from participants' responses: Typical therapy methods; willingness to try new therapy methods; Meaning of EBP in practice; Promoting EBP, and Role of others in enabling EBP.

Practitioners drew on a range of methods and modalities in practice in a way that responded to the individual, and the need for a good therapeutic relationship which allowed the child to engage with the work. Confidence in adopting new ways of working or conceptualising practice came from knowing research supported it, however the impact of this was mediated by the translation of research into meaningful frameworks for practice and training and the ability to align the approach with current beliefs and experiences with client, rather than wholesale adoption - they didn't 'go by the book' as this rarely fit with the fluctuations of real-life practice.

While all practitioners expressed the need for keeping up with research, this was often through indirect means due to constraints on time and access and the need to 'filter' for relevance. Most had not had any contact with researchers in the field.

The results underline the complexity of combining practice-based evidence and evidence-based practice and the need to facilitate and empower practitioners to have the research knowledge to evaluate EBP interventions, and be supported within their organisational and professional context.

Limitations of the research include the absence of cultural and gender representation, all participants were females identifying as white or mixed race British, aged 40+.

## The Understanding Preferences in Counselling (U-PIC) Form: Development of a Therapy Preference Measure for Young People

Mick Cooper<sup>1</sup>, Emma Garavini<sup>2</sup>, Andrea Anastassiou<sup>3</sup>, Charlotte Zamani<sup>4</sup>,  
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### Background and Rationale

Mental health difficulties affect approximately one in seven young people aged 11-16 in the UK, with rising prevalence. Psychological therapies can be effective, but dropout and limited treatment engagement remain challenges. Evidence from adult populations shows that assessing and accommodating clients' therapy preferences can improve retention and outcomes (Swift et al., 2019). However, no reliable, developmentally appropriate measure currently exists for assessing therapy preferences in young people (YP). This symposium presents key stages in the collaborative development of the Understanding Preferences In Counselling (U-PIC) Form, funded by the British Association for Counselling and Psychotherapy (BACP).

### Aims

The overall aim of the U-PIC project was to co-design, develop, and validate a measure of therapy style preferences for young people aged 11-18 that can be used internationally to support collaborative decision-making and preference-sensitive therapy.

### Methods

Seven iterative stages were undertaken: (1) collaborative design with a Young People's Advisory Group (YPAG) supported by McPin Foundation staff; (2) item generation through literature review and 22 interviews with child and adolescent therapists; (3) refinement of an item pool; (4) expert and youth item rating by 21 raters; (5) cognitive interviews using the Three-Step Test with seven young people; (6a) exploratory factor analysis (EFA) of 45 items with a representative UK sample of 430 young people; (6b) confirmatory factor analysis and validity testing; and (7) qualitative interviews on lived experiences of therapy preference and fit. In this symposium, we present a 'deep dive' into the methods and findings of Stages 1, 5, 6, and 7.

### Results

Through these seven stages, we will collaboratively develop a measure that satisfies standard psychometric criteria (internal reliability, test-retest reliability, cross-demographic stability, convergent validity, divergent validity), as well as face validity and user satisfaction. The measure is freely available for use with young people across a range of settings.

### Limitations

The sample, while nationally representative, was UK-based; cross-cultural validation is planned. Some item content may reflect Western assumptions about therapy practices.

### Ethics and EDI

Ethical approval was granted by the University of Roehampton Ethics Committee. The study integrated EDI principles through YPAG involvement (diverse by gender, ethnicity, and background), inclusive recruitment, and sensitivity to accessibility and cultural variation in language.

### Conclusions and Implications

The U-PIC is a novel, co-produced tool for assessing therapy preferences in young people. It has the potential to enhance shared decision-making, improve engagement, and inform more personalised, preference-responsive counselling and psychotherapy practice.

## Symposium Paper 1 - Involving and Collaborating with Young People with Lived Experience to Create and Design the Understanding Preferences in Counselling (U-PIC) Form (Stage 1)

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### Background and Rationale

Lived experience (LE) involvement of young people (YP) in mental health research is an essential and valuable aspect to mental health research. There is increasing published work documenting the processes, impact, and value that this involvement brings. This paper reports the approach used for involving and collaborating with a group of YP with LE to create the Understanding Preferences in Counselling (U-PIC) Form.

### Aims

To document, and assess, the involvement of a Young People's Advisory Group (YPAG) to inform, co-create, co-design, and shape the U-PIC form.

### Method

The U-PIC study was informed by a YPAG which consisted of 10 YP aged 14-21years old. The YPAG was formed from the long-standing YPAG at the McPin Foundation. All members of the YPAG had LE of mental health issues and/or LE or an interest in talking therapies and were all UK based. The YPAG met online four times throughout the study, with ad hoc involvement activities in-between meetings. YPAG members joined the Study Steering Group meetings. The YPAG was facilitated by the McPin Foundation.

### Results

Key benefits of involving the YPAG included: advising the research team what to focus on; ensuring the key dimensions of the U-PIC reflected young people's concerns; informing the measure to be inclusive and sensitive to young people's needs; deciding the name and format of

the form; advising on how best to ensure young people's engagement with the form; voicing queries, concerns, and changes that best reflect young people's wishes. The value placed on the YPAG's involvement by the wider team was a key ingredient to meaningfully embedding the YP's voices throughout the project.

### Limitations

Working to four set online YPAG meetings restricted time for relationship building and a sense of sustained involvement throughout the study, this was aided by email updates, polls and opportunities for written input in-between meetings.

### Ethics and EDI

Ethical approval was granted by the University of Roehampton Research Integrity and Ethics Committee. The study integrated EDI principles through YPAG involvement (diverse by gender, ethnicity, and background), inclusive recruitment, and sensitivity to accessibility and cultural variation in language and examples.

### Conclusions and Implications

Working collaboratively with the YPAG allowed the U-PIC form to be created embedding the LE and preferences of YP. LE involvement requires sufficient time and adequate resources which often need to be pre-planned and facilitated to ensure they are meaningful for the YP, research, and team.

## Symposium Paper 2 - Testing the Understanding Preferences in Counselling (U-PIC) Form with Young People: Insights from the Three Step Interview Method (Stage 5)

**Andrea Anastassiou**

**Research Fellow, BACP**

Additional authors: Eva Asiedu-Addo, McPin Foundation; Mick Cooper, University of Roehampton; Gina Di Malta, The Open University; Clara Garavini, McPin Foundation; Emma Garavini, McPin Foundation; Patricia Joyce, Independent Practitioner; Brett Raymond-Barker, University of Roehampton; Rachel Rodrigues, University of Roehampton; Zhuang She, Nanjing University; Charlotte Zamani, University of Roehampton; John C. Norcross, University of Scranton

### Overview and Aims

This presentation will report on the novel application of the Three-Step Test Interview (TSTI) with young people (YP) as a key stage in the development of the U-PIC form. This multi-stage, mixed method project has been co-developed with young advisors with lived experience of counselling and psychotherapy. The public, non-proprietary tool is based on the Cooper-Norcross Inventory of Preferences (C-NIP), developed in 2015 and now used globally to identify adult clients' preferences for therapy.

### Method and Participants

The TSTI technique is an observational tool for pretesting and assessing the quality of self-completion questionnaires. The method consists of three stages: (1) a concurrent think aloud phase, where participants are asked to vocalise their thoughts as they complete the questionnaire; (2) a focused interview aimed at exploring and filling gaps in the observational data obtained in the first step; and (3) a conventional semi-structured or 'debrief' interview, allowing researchers to explore specific elements of the questionnaire (such as wording, format and design). Originally introduced by Hak, Van der Veer and Jansen (2008), the method has since been used to assess and develop a variety of different scales and measures amongst adult populations, including, most recently, the Relational Depth Frequency Scale, a six-item scale measuring therapeutic relational depth (Di Malta et al, 2020). This presentation will report on the novel application of TSTI with eight young people to identify potentially problematic items and capture YP's experiences of using the tool. The sample consisted of a diverse group of YP (aged 11-18 years) in terms of their demographics and mental health/therapy experiences.

### Outcomes and Limitations

Sixteen out of the initial 62 items were removed from the questionnaire (and one item reworded), indicating that, following adaptations, the TSTI can be an effective method for pretesting questionnaires with young people. Data from each of the consecutive three stages of the interviews will also be presented, in addition to the ways in which the TSTI was adapted based on feedback from the panel of young advisors and a pilot interview. The limitations of this work, including the small sample size and the effects of conducting the TSTI online via Microsoft Teams will also be explored.

### Ethical Approval

This study was reviewed and approved by the University of Roehampton Research Integrity and Ethics Committee, with parental consent and YP assent for those YP involved.

## Symposium Paper 3 - Psychometric Validation of the Understanding Preferences in Counselling (U-PIC) Form (Stages 6a and 6b)

**Mick Cooper**

**Professor of Counselling Psychology, University of Roehampton**

Additional authors: Brett Raymond-Barker, University of Roehampton; Andrea Anastassiou, Research Fellow, BACP; Eva Asiedu-Addo, McPin Foundation; Gina Di Malta, The Open University; Clara Garavini, McPin Foundation; Emma Garavini, McPin Foundation; Patricia Joyce, Independent Practitioner; Rachel Rodrigues, University of Roehampton; Zhuang She, Nanjing University; Charlotte Zamani, University of Roehampton; John C. Norcross, University of Scranton

### Background and Rationale

In adults, matching therapy processes to clients' preferences can improve retention and outcomes, yet no validated measure of therapy preferences exists for young people. The Understanding Preferences in Counselling (U-PIC) Form was developed to fill this gap. This presentation focuses on Stages 6a and 6b—the psychometric validation phases of the project.

### Aims

To identify and confirm the factor structure, reliability, and validity of a newly developed measure of therapy preferences for young people aged 11-18, suitable for use in research and practice internationally.

### Methods

Following earlier stages of collaborative design, item generation, and refinement, a 45-item U-PIC was administered by a polling agency to a representative UK sample of 430 young people (215 female, 215 male; 24.7% from minoritised ethnic backgrounds; 39.8% with previous therapy experience). An exploratory factor analysis (Stage 6a) was conducted to identify the underlying structure using principal axis factoring with oblique rotation. Items were retained based on factor loading, reliability contribution, and absence of cross-loading, skew, or kurtosis. Items were further tested for consistency across demographic subgroups.

Stage 6b, currently underway, comprises confirmatory factor analysis (CFA) on an independent dataset, assessment of test-retest reliability, and evaluation of convergent validity with existing measures of therapeutic orientation and alliance. Cut-points for “strong” and “weak” preferences will also be established to support clinical interpretation.

## Results

The exploratory factor analysis yielded a four-factor solution—Working with Feelings, Nonverbal Activities, Focused Challenge, and Therapist Directiveness—accounting for the majority of variance and demonstrating good internal reliability ( $\alpha = .69-.72$ ). The factor structure appeared stable across gender, ethnicity, and therapy experience. Preliminary CFA results, along with convergent validity and stability data, will be presented at the conference.

## Limitations

Although the Stage 6a sample was demographically representative of the UK, further validation is needed across cultural contexts and languages to assess cross-national applicability.

## Ethics and EDI

Ethical approval was obtained from the University of Roehampton Research Integrity and Ethics Committee, with parental consent/YP assent for those YP involved. Equality, diversity, and inclusion (EDI) were integral to design and analysis: demographic balance was monitored, and subgroup stability was tested.

## Conclusions and Implications

Findings from Stages 6a and 6b indicate that the U-PIC is a psychometrically sound tool for capturing therapy style preferences in young people. Once final validation is complete, it has potential to support shared decision-making, enhance engagement, and inform evidence-based, preference-sensitive psychotherapy.

## Symposium Paper 4 - A Qualitative Study on the Lived Experiences of Young People Using the Understanding Preferences in Counselling (U-PIC) Form (Stage 7)

**Charlotte Zamani**

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### Background and Rationale

Incorporating therapy preferences is an essential element of evidence-based practice, and is known to enhance therapy outcomes and retention. Although adult client preferences is an established research area, there is restricted insight into young people's experiences. In this study, therapists will trial the U-PIC form in therapy settings with young people, after which participants will be interviewed to co-create insight into what it means for young people to choose preferences in therapy using the U-PIC form.

### Aims

Through deep and interactive dialogue, this study asks, 'What are the lived experiences of young people using the U-PIC form?' As part of this question, we aim to ask 'Are there helpful and/or unhelpful aspects in using the U-PIC form?'

### Method

Eight to twelve UK participants aged 14 to 18 years will be recruited. A pre-interview for participants will begin an open and connected relationship between participants and the researcher (McConaughy & Whitcomb, 2020). Two data collection points approximately four weeks apart will capture the lived experiences of young people using the U-PIC form. Data will be analysed using interpretative phenomenological analysis (IPA, Smith et al., 2022).

### Results

Preliminary findings, analysed using IPA, will be presented.

### Limitations

Limitations include the small number of participants and self-selection bias. Participant age-range begins at 14 years old, as opposed to U-PIC's age-range from 11 years old. This is to support

homogenous data, as indicated for IPA.

### Ethics and EDI

Ethical approval was obtained from the University of Roehampton Research Integrity and Ethics Committee, with parental consent/YP assent for those YP involved. The power imbalance between adults and young people is a primary ethical factor, requiring strict ethical adherence and a cautious approach. Study exclusions included participants without English-speaking capabilities. However, similarly to the adult counterpart C-NIP (Cooper & Norcross, 2016), the U-PIC form will be translated into various languages.

### Conclusions and Implications

Choosing preferences may increase the value of therapy for young people. Alternatively, it may help young people to learn about their unique qualities and characteristics. Through the U-PIC form, therapists may increase personalisation skills for greater engagement. It is hoped that results help to direct future research in helpful and unhelpful aspects of therapy preference work for young people.

## Developments in Pluralistic Counselling and Psychotherapy: Advancing a Collaborative Agenda

Mick Cooper<sup>1</sup>, Kate Smith<sup>2</sup>, Christine Kupfer<sup>3</sup>, Briony Martin<sup>4</sup>, John McLeod<sup>5</sup>, Leo Muckley<sup>6</sup>

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This symposium, *Developments in Pluralistic Counselling and Psychotherapy: Advancing a Collaborative Agenda*, brings together four interrelated studies that advance pluralistic practice through rigorous research and innovation. Each paper explores different facets of collaboration, client preferences, and the co-construction of therapy, offering evidence-based contributions to theory, practice, and training. Collectively, these studies demonstrate how pluralism provides a framework for tailoring therapy to clients' unique needs—an approach that aligns closely with BACP Research Conference themes of integrating research, practice, and client voice.

The symposium aims to: (1) present new empirical and conceptual developments in pluralistic counselling and psychotherapy; (2) demonstrate how pluralism operationalises collaborative, client-centred principles across diverse contexts; and (3) identify implications for practice, training, and future research. The four research teams have collaborated closely within an international pluralistic research network, ensuring conceptual and methodological coherence while representing diverse institutional and national perspectives.

Murphie and Smith's development of the Pluralistic Therapy Integrity Scale (PTIS) offers a practice-grounded framework for assessing the enactment of pluralism in therapy, strengthening both research validity and practitioner reflection. Kupfer et al.'s qualitative meta-analysis of clients' experiences of preference accommodation deepens understanding of collaboration from the client's perspective and develops client-led recommendations for improving practice. Cooper et al. report on the revision and validation of the Cooper-Norcross Inventory of Preferences (C-NIP v.2), a psychometrically robust, cross-culturally sensitive tool for assessing client preferences across seven dimensions. Finally, Muckley's interpretative phenomenological analysis of pluralistic practitioners' experiences with actively suicidal clients addresses one of therapy's most ethically and clinically complex areas, highlighting pluralism's capacity to integrate safety, compassion, and shared decision-making.

Together, these papers provide a coherent, multi-method exploration of pluralistic practice, moving from scale development to meta-analytic synthesis, psychometric validation, and phenomenological inquiry. Each study embeds equality, diversity, and inclusion (EDI) principles in recruitment, design, and analysis, ensuring accessibility, cultural sensitivity, and the amplification of underrepresented voices—especially clients'.

The symposium contributes to counselling and psychotherapy research by evidencing how pluralistic approaches can enhance responsiveness, collaboration, and inclusivity in practice, offering a comprehensive, research-informed model for future development across the field.

## Symposium Paper 1 - Development of the Pluralistic Therapy Integrity Scale (PTIS)

**Kate Smith**

Professor, University of Aberdeen

Additional authors: Marie-Clare Murphie, Doctoral student, Abertay University

### Background and Rationale

Pluralistic practice is a flexible co-creative approach to therapy grounded in an enactment of an ethic of care. Because of the flexibility and the wide-ranging adaptations made by therapists in practice the use of the pluralistic framework cannot easily be evaluated. Previously, the Goals, Activities, Processes, and Preferences (G-APP) scale has been used to define key features but no systematic exploration of the realities of practice has been undertaken.

### Aims

To explore pluralistic practitioner experiences of practice and the key features of the approach with the objective of creating an integrity scale drawing on the use of the approach rather than theoretical understandings.

### Method

A critical realist methodology was used in the development of the scale. Study 1: Thematic analysis of four practitioner surveys incorporating free text and ratings of proposed key features; Study 2: An IPA analysis of seven semi-structured interviews with pluralistic practitioners to explore their experiences; Study 3: content analysis of interviews with the originators of the approach. A metasynthesis of the results led to the design of the integrity scale items through a collaborative consensus building process.

### Results

The Pluralistic Therapy Integrity Scale (PTIS) incorporates twelve defining features of collaborative practice within two domains: The building of the collaborative relationship (e.g. 'Explicit facilitation of active involvement of the client in how therapy is undertaken'; 'Therapist broaches differences'), and the collaborative process (e.g. 'Shared decision making'; 'Making use of preferences').

### Limitations

Pluralistic practice incorporates a wide range of ways of working therapeutically, due to the sampling methods the breadth of practice approaches could not be captured in their entirety.

#### Ethics and EDI

Ethical approval was granted by Abertay University, with informed consent procedures for participants. Equality, diversity, and inclusion (EDI) principles were used in the selection of participants, the design of the survey instruments and the scale by enhancing accessibility in terms of language use.

#### Conclusions and Implications

The development of an integrity scale which draws on the realities of practice, as opposed to a top-down approach guiding how therapy interventions are prescribed, reflects the pluralistic philosophy and incorporates the realities of practice. The scale will be completed by therapists, clients, and observers to triangulate their perspectives on the therapy and will be used in training and practice to test the application and effectiveness of a pluralistic approach in future research.

## Symposium Paper 2 - Clients' Perspectives of Preference Accommodation in Therapy

Christine Kupfer<sup>1</sup>, Briony Martin<sup>2</sup>, John McLeod<sup>3</sup>

<sup>1</sup>Senior Lecturer in Counselling, University of Aberdeen; <sup>2</sup>Student and DProf in Counselling and Psychotherapy Studies, University of Chester; <sup>3</sup>Emeritus Professor of Counselling, University of Abertay

Additional author: Hanne Oddli, Professor, University of Oslo; Betul Tatar, Bournemouth University

### Background and Rationale

While quantitative research has shown that accommodating client preferences in therapy improves engagement and outcomes, qualitative studies offer deeper insights into clients' lived experiences. This presentation draws on a qualitative meta-analysis that explores how clients perceive and experience it when their preferences are either accommodated or not accommodated.

### Aims

We carried out a meta-analysis to synthesise qualitative research on how clients experience preference-accommodation in therapy. We explored client perspectives on being consulted about preferences and the impact of accommodation or lack thereof. This can help us to identify client-generated frameworks and recommendations for improving preference work in therapeutic settings.

### Methods

A qualitative meta-analysis was conducted using a discovery-oriented approach. Studies were selected through structured Boolean searches across various databases. Inclusion criteria focused on peer-reviewed qualitative studies involving adult clients. Data is analysed using thematic synthesis following Timulak's descriptive-interpretative framework, with quality checks to ensure rigour.

### Results

The study will be completed within this year, so we will be able to share results then.

### Limitations

- Potential publication bias due to exclusion of non-English and unpublished studies.
- Variability in methodological quality across included studies.
- Lack of data from child and adolescent populations.

### Ethics and EDI

As this research did not involve working with humans but only literature, Aberdeen University did not require ethical approval.

Equality, diversity, and inclusion (EDI) principles informed the selection of the topic of the research, as clients' preferences are understudied, while therapists' and researchers' perspectives dominate. We will review the study for gender neutrality, cultural sensitivity, and linguistic accessibility.

Reflexive positioning and methodological transparency are maintained throughout.

### Conclusions and Implications

We will summarise clients' perspectives on the accommodation (and lack thereof) of preferences in therapy. This includes showing what areas are better researched than others. We hope to develop a client-led frameworks for collaboration. We will point towards implications for researchers and practitioners in collaborative dialogues and the accommodation of preferences.

## Symposium Paper 3 - Revising and Revalidating the Cooper-Norcross Inventory of Preferences (C-NIP v.2)

**Mick Cooper**

**Professor of Counselling Psychology, University of Roehampton**

Additional authors: Gina Di Malta, The Open University; Brett Raymond-Barker, University of Roehampton; Tomáš Řiháček, Masaryk University; Zhuang She, Nanjing University; John C. Norcross, University of Scranton

### Background and Rationale

The assessment and accommodation of clients' preferences significantly increases engagement, alliance, and outcomes. The Cooper-Norcross Inventory of Preferences (C-NIP v.1) has been widely used as a brief measure of such preferences, with translations in more than 15 languages. However, internal reliability of some dimensions has proved suboptimal, and v.1 was based on data from the UK/US.

### Aims

To update and refine the C-NIP for use by:

1. Revising the items, and subscales, to maximise reliability and validity of client scores;
2. Improving item clarity and cultural accessibility; and
3. Establishing updated cut-points for clinical and research application.

### Methods & Results

**Item rating:** A total of 95 items were rated by 18 mental health professionals and lay people across seven dimensions: therapist directiveness, between-session activities, emotional intensity, past vs present orientation, warm support, focused challenge, and awareness vs action. A total of 89 items (including v.1) were taken forward.

**Exploratory Factor Analysis (EFA):** The selected items were administered to a sample of 1,789 adults, drawn from across the UK, US, China, and Czech Republic. EFA using parallel analysis with principal axis factoring (oblimin rotation) identified seven underlying dimensions. 45 items were retained based on factor loadings, contribution to internal consistency, absence of cross-loading, and item statistics.

Confirmatory Factor Analysis (CFA): Independent representative samples totalling 602 adults (split UK/US) completed the revised scale. Test-retest stability and convergent validity with allied constructs were also evaluated. Following further item reductions, a 7 factor/25 item CFA demonstrated a good-to-excellent model fit across major indices (CFI = .96, TLI = .96, RMSEA = .036, SRMR = .038). Test-retest reliability was moderate (abs. agreement  $\geq$  .5) to good (avg. agreement  $\geq$  .75).

Invariance: Configural and metric invariance were supported (CFI = .948-.944; RMSEA = .042); and all subscales demonstrated good internal reliability ( $\alpha \geq$  .7) across all samples. Scalar invariance was not supported, as national samples differed in preferences.

### Limitations

Ethnically, the study sample remained primarily white European.

### Ethics and EDI

Ethical approval was granted by the University of Roehampton Research Integrity and Ethics Committee. Participants provided informed consent. Equality, diversity, and inclusion (EDI) principles informed recruitment, item wording, and analyses. The revised measure was reviewed for gender neutrality, cultural sensitivity, and linguistic accessibility.

### Conclusions and Implications

The C-NIP v.2 provides an updated, psychometrically sound, freely available measure of client preferences for adult individual psychotherapy.

## **Symposium Paper 4 - Pluralistic Psychotherapists' and Counsellors' Experiences of Working with Actively Suicidal Clients: A Qualitative Interpretative Phenomenological Analysis**

**Leo Muckley**

PhD Student, University of Chester

### Background and Rationale

Clients presenting as suicidal has been widely recognized as one of the most challenging presenting issues for psychotherapists and counsellors. There is a wealth of literature exploring risk assessment, collaboration, goals, tasks, methods, shared decision making, and client preferences employed in therapy with this presenting issue. Yet, no literature explicitly explores combining these approaches or provides a framework that integrates them. Working with actively suicidal clients as a pluralistic psychotherapist and counsellor (PCP) has not been thoroughly examined to date.

### Aims

To interpret and explore PCP's experiences of working with actively suicidal clients.

### Methods

A qualitative interpretative phenomenological analysis (IPA) of PCP's work with actively suicidal clients was conducted via semi-structured recorded interviews with four purposively recruited PCPs.

### Results and Discussion

Four themes were constructed: Human, Meet Human (Subthemes: The Importance of Connection, A Question of Forms?); The House That Pluralism Built; Whose Therapy is it Anyway?; and, The Gift of Pluralism. PCPs perceived their practice as a robust, holistic, and safe approach to actively suicidal clients. The results point towards the need for further research into PCP practice with actively suicidal clients, in line with recommended best practice from the client's perspective.

### Limitations

This research was carried out by a single researcher who has experience of working with suicidal clients and lived experience of the impact of suicide. Researcher and participants were allied to a pluralistic approach. Every effort was made to reduce researcher bias including the use of a reflective journal. Some of the interview questions could have been further conceptualised to focus on practitioner experience and less on knowledge or understanding of the practical applications of PCP.

## Ethics and EDI

Ethical approval was granted by IICP College and IICP College Ethics Committee, Dublin, Ireland; with informed consent from participants. Equality, diversity, and inclusion (EDI) principles informed recruitment, item wording, and analyses. The study was reviewed for gender neutrality, cultural sensitivity and linguistic accessibility.

## Conclusions and Implications

PCP with this client cohort is perceived as maintaining ethics and values while promoting client autonomy through collaboration, preference exploration, feedback, and empirically based outcome measurement. Engaging client preferences and cultural resources fosters deeply human and authentic connections in the therapeutic relationship. PCP practitioners did not report the fears, burdens, and lack of felt-safety working with this cohort as has previously been reported in the literature. Policy could be improved through engaging in a pluralistic approach to suicide.

## Can AI be ethically integrated into psychological services? A symposium of multidisciplinary stakeholder perspectives

Charlie Duncan<sup>1</sup>, Terry Hanley<sup>2</sup>, Rosalín Agnew<sup>3</sup>, Merly McPhilbin<sup>4</sup>, Christopher Brook<sup>5</sup>

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Traditional clinical mental health settings are struggling to meet the rising demand for psychological support (Baker & Kirk-Wade, 2024). Digital technology and, more recently, Artificial Intelligence (AI) have been offered as solutions to reducing practitioner workload and offering more timely and accessible support, particularly to digitally native children and young people (CYP, Götzl et al., 2022). However, there is widespread concerns raised by various stakeholders in psychological services about the ethicality of AI's integration to a field that fundamentally requires human connection, sensitivity, confidentiality, and scientifically supported information. The use of AI in psychological services provokes valid concerns regarding risks to data security, misinformation, "hallucinations", and "black-box" decision making that reduces service-user autonomy. This symposium aims to present perspectives from stakeholders spanning multiple disciplines, including but not limited to psychological practitioners, service users, service managers, and data scientists, on the costs and benefits to integrating technology and AI to psychological services. The first presentation will report on the outcomes of a mixed-methods survey exploring counselling professionals' use of, perspectives on, and perceived competence in the use of technology and AI in practice, exploring perceived benefits and ethical considerations surrounding its integration, as well as highlighting areas for further training and guidance. The second presentation will explore results from a systematic review of qualitative literature exploring barriers and facilitators to the implementation of responsibly innovated AI-driven tools in digital youth mental health services. The final presentation will provide us with an in-depth understanding of CYP's perspectives of the use of AI in digital mental health services. Together, these presentations will capture contemporary multi-disciplinary perspectives how AI might be integrated into psychological services in a way that can provide ethical, equitable, and inclusive support to service users. This symposium will be of interest to any conference member curious about the ethics of AI's increasing integration into psychological and mental health services.

## Symposium Paper 1 - Exploring the use, perceptions and ethics of technology and artificial intelligence (AI) in therapy

Charlie Duncan<sup>1</sup>, Terry Hanley<sup>2</sup>, Rosalín Agnew<sup>3</sup>

<sup>1</sup>Senior Research Fellow, BACP; <sup>2</sup>Professor of Counselling Psychology, University of Manchester; <sup>3</sup>Research Fellow, BACP

**Background/Aims:** As technology becomes more integrated into practices where human connection is deemed vital, concerns about its risks emerge (Richards, 2024). AI is increasingly entering healthcare, including the counselling professions (Aktan et al., 2022). Addressing ethical issues such as informed consent, confidentiality, and impacts on therapeutic relationships is essential (Fiske et al., 2019). In addition, understanding what therapists perceive to be the benefits of technology and AI in therapy should be understood. This study aims to understand counselling professionals' use of, perspectives on, and perceived competence in the use of technology and AI in practice, exploring concerns and ethical considerations surrounding its integration, as well as the perceived benefits. The study also aims to highlight areas where further training and guidance is required, to support the development of such materials.

**Method:** A synchronous explanatory mixed methods, anonymous survey has been developed to assess BACP members' awareness, perceptions, perceived competence, and use of technologies, including AI. The survey will be distributed in February 2026. Quantitative data will be analysed descriptively, with inferential statistics being used to explore whether the use and perceptions of technology and AI in therapy are related to demographic characteristics, such as age, gender and ethnicity. Qualitative data will be analysed using thematic analysis.

**Ethical considerations:** Respondents will be required to provide informed consent to participate in the survey anonymously. Due to the anonymous nature of the survey, respondents will be unable to withdraw their data once a response has been submitted. Any identifiable data contained within qualitative responses will be removed/anonymised prior to analysis to protect the privacy of respondents.

**Results:** The survey has not yet been disseminated, but results will be available for presentation by the time of the conference in May 2026.

**Conclusions/Implications for Practice:** The findings from the survey will highlight the use of, perceptions, perceived competence, risks, and benefits of the use of technology and AI in therapy. This will facilitate the development of training materials and guidance for counselling professionals.

**Considerations given to issues of equality, diversity and inclusion:** The survey will explore differences in responses by respondent demographic characteristics, as well as how the perceived risks and benefits of technology and AI may address EDI issues. Furthermore, the survey will be made available in different formats (e.g. online survey platform, screen-reader accessible word document and option to complete over the phone) to increase accessibility.

## **Symposium Paper 2 - The barriers and facilitators influencing the implementation of responsibly innovated AI-driven tools in digital youth mental health services: a systematic review**

**Merly McPhilbin**

PhD researcher, University of Manchester

**Background:** Digital mental health platforms, such as mental health apps and online moderated mental health platforms, are increasingly being recommended to CYP by schools and healthcare providers (Lupton, 2021). Many of these platforms are wanting to enhance platform user and practitioner experience by implementing tools driven by Artificial Intelligence (AI). Methods for responsible innovation of AI tools call for reflective and anticipatory deliberation across diverse stakeholder groups to promote ethicality, legality, social permissibility, and acceptability in the tool's design and development (The Alan Turing Institute, 2024). However, there is a dearth of research collating the technological, organisational, ethical, cultural, social, and relational factors acting as barriers and facilitators to their implementation.

**Aims:** This research aims to identify the barriers and facilitators influencing the implementation of responsibly innovated AI-driven tools in digital youth mental health services.

**Methods:** A systematic review of published peer-reviewed qualitative research will be undertaken according to the latest PRISMA guidelines (Page et al., 2021). Included research papers will contain qualitative data of digital youth mental health service stakeholders, such as practitioners and young people, on the adoption of AI-driven tools to existing digital mental health services for CYP. Literature will be extracted from database searches spanning multiple disciplines related to psychology, health science, and computer science and technology. Included papers will be quality assessed using the Critical Appraisal Skills Programme (CASP) checklist for qualitative research (Critical Appraisal Skills Programme, 2024) and analysed using thematic synthesis (Thomas & Harden, 2008).

**Results:** Prospectively, results will refer to technological, organisational, ethical, cultural, and social factors influencing the implementation of AI-driven tools in digital youth mental health services. The systematic review has not yet been completed, but the researcher aims to present the full results at the conference.

**Conclusions:** This systematic review will collate multi-disciplinary insights into the barriers and facilitators to the implementation of responsibly innovated AI tools to digital mental health platforms. These results will shed light on how multidisciplinary teams involved in creating AI tools for such platforms overcome barriers to providing safe, ethical, and equitable mental health services for CYP. This will be useful for any digital mental health service provider wanting to implement ethical AI tools to their platforms that benefit their users and practitioners.

## Symposium Paper 3 - AI in psychological therapies: the service user perspective

**Christopher Brook**

PhD student, University of Manchester

**Background:** As the capabilities of AI tools increase, AI is being used more frequently in therapeutic settings. Ongoing research efforts are focused on the feasibility of using AI in client-centred forms of therapy (Thieme et al, 2023) and studies to investigate the possibility of a Therapeutic Alliance with AI are also ongoing (Henson et al, 2019). Research is also investigating possible ethical issues with automated or AI therapy including potential blind spots to risk, vulnerability of client data and the possible use of unsuitable therapeutic models (Fiske et al, 2019). The connection of mental wellbeing to workplace productivity has also been identified which will only be compounded by more accessible AI therapy tools (Nopper & Zelickson, 2023). Practitioner attitudes towards AI are therefore divided and diverse (Prescott & Hanley, 2022).

**Aims:** The purpose of this study is to examine the perspectives of a service user demographic who are likely to be offered the use of AI for mental health support.

**Methods:** The chosen participant group is young adults aged 18-25, the oldest of the “digital native” generation, with prior experience of accessing mental health support. Participants are being recruited via advertisement through universities and relevant support services. Participants will take part in semi-structured interviews which will discuss their perspectives on the suitability of AI to therapy and the potential for therapeutic connection with AI, according to guidelines set out by Katz-Buonincontro (2022). The goal of this research is to distil the themes discussed and provide an overview of the participants views. Data will therefore be analysed via Reflexive Thematic Analysis (Braun & Clarke, 2012).

**Results:** Results will highlight attitudes towards technology and mental health within the chosen demographic. It is also expected that there will be a range of diverse views on the required components of effective therapy. A preliminary analysis of results will be presented at the conference by the researcher.

**Conclusions:** The goal of this research is to analyse the views of a user base who may be offered AI therapy due to the current perception of AI as a scalable tool to address a lack of accessible mental health support. The research will inform practitioners of possible future responses to the adoption of these technologies. It is also hoped that the data gathered will highlight the aspects of therapy that are sought after by service users, information valuable to the development new therapy programs and services.

# Posters

## Provision of counselling and psychotherapy for boarders and ex-boarders from UK independent schools: a scoping review

**Virginia Sherborne**

Private practice counsellor and EMDR practitioner (BACP Accred.), Independent researcher

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### Background

The psychological impact of attending independent UK boarding schools is of increasing interest to counsellors and psychotherapists. However, little academic research has explored the provision of interventions for supporting current and ex-boarders.

### Objectives

This scoping review aimed to capture the existing evidence by identifying studies investigating the provision and effectiveness of therapeutic interventions for this population.

### Methods

Included items had to be journal articles in English, from any date, peer-reviewed, presenting empirical studies conducted in the context of UK independent boarding schools. Types of studies included were qualitative, quantitative, mixed methods and structured case studies. Included studies had to focus on the provision/experience of delivering or receiving counselling or psychotherapy for current or ex-boarders. Searches of ProQuest, PsycINFO and EBSCO databases happened on 25/10/2024. Data charted from included studies were citation, aim, methodology, participant population, key findings. Reflexive thematic analysis was used for data synthesis.

### Results

Most excluded items concerned non-UK contexts. Two considered special schools. Eight were not peer-reviewed empirical studies. One did not focus on counselling and psychotherapy. The two articles eligible for inclusion concerned the experience of providing psychoanalytic interventions. Three themes were developed: 'Feeling safer inside'; 'Power and position'; and 'Time: suddenness and continuity'. These highlighted how some issues for current and ex-boarders may present strong challenges for therapists; awareness is essential for providing continuity within a robust therapeutic relationship.

### Limitations

Only articles written in English were included. The author was not psychoanalytically trained, so may have misinterpreted concepts. A solo researcher carried out the review without benefitting

from others' insights. However, her insider/outsider status plus experience of conducting reviews helped provide transparency and rigour.

## Conclusions

Future research is recommended into how and by whom counselling and psychotherapy are provided to children, young people and staff in UK independent boarding schools, as no evidence is available. To inform best practice, research is also needed into the efficacy and accessibility of different interventions for adult ex-boarders. Regarding EDI, individuals from different groups of ex-boarders (e.g., women, gay men, Black men) deserve research-informed therapeutic support which meets their needs. Ex-boarders exert societal and political power greatly out of proportion to their numbers. This cohort's perceived privilege may explain the lack of academic research interest, constituting an epistemic injustice. It is vital to build a robust evidence base for interventions to address their psychological needs.

## The way Trainee Counsellors Engage in their Personal Development

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The literature review examined the trainee counsellors' engagement in their own personal development (PD) during their training sessions. In effective therapeutic practice, self-awareness, interpersonal skills, and emotional growth are essential. These variables are encouraged through personal development (Murphy & Schofield, 2023). This review aims to define the methods, benefits, and challenges related to personal development in the context of training. Moreover, it also highlighted the existing literature gap and recommended the area for future development. The review also investigates the experiential learning techniques, i.e., cultural immersion and personal development groups, specifically seen in their role in increasing self-reflection and multicultural competence (Kuo et al., 2023; Daldorph & Hill, 2022).

The qualitative research method was employed; studies from 2019 to 2025 were collected through the Science Direct and Google Scholar databases. Thematic analysis was performed on six peer-reviewed research articles published in reputed journals of Elsevier, Wiley, and Routledge. Significance of cohesion in personal development groups, need for spiritual integration in training to enhance cultural competence and self-awareness, and during personal development activities, the problem trainee faced emotional discomfort or unresolved issues (Kivlighan et al., 2019; Murphy & Schofield, 2023; Hunt, 2024).

Outcomes highlighted that in emotional growth and self-awareness, personal development groups significantly contribute. It also seems that trainees engaging in personal disclosure experience discomfort. Furthermore, the lack of a structured training program by integrates religion and spirituality is identified as a significant gap in the literature. In enhancing empathy and intercultural competence, cultural immersion programmes have seen an effective way (Kuo et al., 2023).

Alongside the following benefits, the research also underlines the need for enhanced support structures throughout training to address the interpersonal and emotional barriers encountered by trainees (Daldorph & Hills, 2022). The study recommends that in the future, scholars should focus on personal development methods' long-term effects, integrate spiritual frameworks, and develop diverse training models that support a broader range of trainee needs.

The conclusion underlines the transformative nature of personal development in counsellor training, stressing the need for more sustainable and comprehensive approaches to emerge from religion with its spirituality in training programmes (Murphy & Schofield, 2023; Kuo et al., 2023).

The future research will focus on exploring these variables to enhance inclusive and culturally competent practices.

## An autoethnographic research across our diverse cultures in relation to how our cultural experiences helped and/or hindered our recovery from trauma, and how this might inform psychotherapeutic practice

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We aimed to explore how culture might positively or negatively influence individuals' experiences of recovery from trauma; to inform psychotherapeutic practice as to how general cultural factors, constructs and/or views might help or hinder individuals' healing from trauma. An autoethnographic study (Cooper & Lilyea, 2022) was undertaken with six participant-researchers who self-identified as cis or gender-queer women from diverse cultural backgrounds/heritages. Semi-structured interviews were audio-recorded and transcribed, then Thematically Analysed supported by the principals of Interpretative Phenomenological Analysis (Smith et al., 2009).

Ethical approval was granted by our training institution's Ethics Board, and we worked steadfastly within BACP research guidelines (Mitchels, 2018). As participant-researchers we gave informed consent, were aware of our right to withdraw, and were supported throughout by personal therapy. Appropriate steps were taken to manage any participant-researchers' overlapping overidentification/bias, but our study was limited by its small, largely cis female participant pool, possibly prohibiting generalisability (McLeod, 2013).

Findings have been participant and culturally anonymised. Most of our participant-researchers experienced mental health issues were stigmatised within their cultures of origin, in-turn disclosing they were actively discouraged from seeking psychotherapeutic/ psychological support to process their traumatic encounters. In such cultures, across varied contexts including, minimal freedom to be emotionally expressive and/or needy, mental health struggles were disregarded, even shunned. This led our participant-researchers to also experience their families of origin as unsupportive and unsafe.

The above profoundly hindered our participant-researchers' recovery from their internalised trauma. Conversely, those cultures in which mental health issues were accepted as 'normal' within the gamut of human experience, and specifically as this related to our research, where traumatic-reaction to traumatising experience was accepted, greatly facilitated our participant-researchers' recovery from trauma. Empathic friendships, creative outlets, spiritual practices, faith-based groups and sub-minority support groups, also played a significant role in our participant-researchers' healing processes.

Participant-researchers found psychotherapy to be most effective when therapists demonstrated cultural awareness; such practitioners were especially valued for their implicit understanding. Findings indicate promoting knowledge of trauma-response/mental-health awareness in schools

and public domains may reduce the stigma inherent in certain cultures. We suggest it is imperative a continued, focused drive to recruit counsellors/trainees from diverse cultural backgrounds is vital in creating a psychotherapeutic-workforce that organically reduces cultural-stigma around trauma- response. Findings also indicate that clients benefit from alliances with counsellors/psychotherapists who are educated in relation to the cultural heritage of their clients and avoid lapsing into cultural- assumptions or stereotypical-assessments/judgements.

## The Efficacy of a Weight Bias Reduction Intervention of Counselors in Training

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Weight bias, or sizeism, is a form of discrimination that harms both psychological and physical health. Research specific to the professional counseling field has observed weight bias among practicing counselors as well as counselors-in-training, and the factors contributing to weight bias among professional counselors. Given the harmful effects of weight bias, Nutter et. al. (2018) and Alberga et. al. (2016) proposed that counselors' commitment to social justice necessitates action to reduce the harmful impacts of weight bias and to improve care for individuals in larger bodies. Weight bias education is a correlate of reduced levels of weight bias among licensed counselors (Christensen, 2021). A variety of studies across disciplines have demonstrated the effectiveness of weight bias education at reducing weight bias (Brochu, 2020; Moore et al., 2022; Oliver et al., 2021). The present study presents the main findings from a dissertation study which sought to understand the efficacy of a weight bias reduction intervention for counselors-in-training utilizing a quasi-experimental pretest posttest design with a test group and control group. Participants were master's level and doctoral level counselors-in-training enrolled in two sections of a course focused on multicultural counseling (n = 35). This study examined the impact of an educational seminar about weight bias at reducing weight bias among counselors-in-training as measured by the AFAT (Lewis et al., 1997). The weight bias reduction intervention in this study was a 3-hour educational seminar covering information about weight controllability, the harmfulness of weight bias, and options for size inclusive care within the counseling field. The results revealed that the effect of time for the test group significantly impacted AFAT scores ( $F(1, 17) = 22.53, p < .001$ ) and demonstrated a statistically significant interaction between time and group ( $F(1, 33) = 8.11, p = .008$ ). Further, this study evaluated the extent to which weight controllability beliefs impacted other negative beliefs about higher weight people. The results revealed that weight controllability beliefs, as measured by the WCB subscale of the AFAT, significantly predicted social/character disparagement beliefs as measured by the SCD subscale of the AFAT ( $\beta = .60, p < .001$ ) and physical/romantic unattractiveness beliefs as measured by the PRU subscale of the AFAT ( $\beta = .63, p < .001$ ). Implications, limitations, and directions for future research will also be addressed.

## Can a nature prescription be as effective for treating anxiety and depression as traditional talking therapy? A phenomenological study into the thoughts of those who have delivered both

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This qualitative research study, undertaken as part of an MA in Integrative Counselling and Psychotherapy at Roehampton University, aimed to examine the lived experience of accredited counsellors and psychotherapists, who also delivered nature therapy, to compare the effectiveness of both types of interventions for clients with depression and/or anxiety. This research is multi-disciplinary in that it considers nature in itself as a tool for improving mental health, either as an alternative, or as a powerful addition to talking therapy. There is increasing evidence showing the benefits of being in nature for mental health, however nature therapy or nature-based prescriptions are not currently prescribed as standard by the National Health Service (NHS) in the UK for depression or anxiety. Three participants, who were both trained psychotherapists and nature guides from the mental health nature-based charity Dose of Nature, undertook semi-structured interviews and the data was analysed using interpretative phenomenological analysis (IPA), paying particular attention to their lived experience. What was revealed were four phenomena deemed unique that made a nature prescription effective; namely nature itself, the fact nature prescriptions involve the body, the specialness of the client-guide relationship and that nature prescriptions can feel low pressure and involve an element of joy or play. Factors deemed unique to talking therapy and part of its efficacy included the training, theory or expertise of the therapist, the emotional depth possible to reach with clients and the potential feeling of safety of being indoors for some clients. Overall, participants seemed to feel or sense that a nature prescription could be as effective as traditional talking therapy for treating depression and anxiety but that perhaps it would depend on individual client factors, including the types of issues they were presenting with and potentially the severity of depression or anxiety. Some participants suggested that nature prescriptions could form part of a pathway for treating anxiety and depression within the NHS, either as a foundation/precursor to talking therapy, instead of talking therapy, or in addition to it. This thus has clinical significance for how the NHS, or counsellors and psychotherapists in general, may look to support people with anxiety and depression in a multi or trans-disciplinary way. Equality, Diversity and Inclusion is also discussed, particularly with regard to how neurodiverse clients, such as those with autism spectrum disorder, may respond to the low-pressure aspect of nature prescriptions that for instance involve less eye contact and relational intensity.

## Mental Health Professionals' Knowledge, Attitudes, and Practices Related to Nutrition in Mental Health Care: A Scoping Review

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### Background

Extensive nutritional psychiatry (NP) literature indicates that healthier dietary patterns are associated with better mental health outcomes. Despite this, nutritional education remains largely absent from psychotherapy training, and the extent to which mental health professionals (MHPs) implement NP principles into practice remains unclear. In the context of rising global mental illness and overburdened mental healthcare systems, understanding how psychotherapists and other MHPs engage with NP research is significant, as it may offer an additional, evidence-backed way to support client wellbeing. This review builds on earlier work by the author, which explored psychotherapists' use of nutrition within therapy.

### Aims and objectives

To date, most NP research has focused on biological mechanisms of food, with little attention given to implementation. This scoping review seeks to bridge that gap by providing the first comprehensive mapping of psychotherapists' and other MHPs' knowledge, attitudes, and practices (KAP) of the integration of NP into clinical care. The poster presentation will share the completed review findings, key themes, and recommendations from the literature, with the aim of advancing understanding and providing foundational support for the integration of nutrition within psychotherapy practice.

### Methodology

This scoping review follows the Joanna Briggs Institute (JBI) methodology and is reported in accordance with PRISMA-ScR guidelines. Two researchers conducted systematic searches across electronic databases to identify studies for inclusion. Findings were narratively synthesised and categorised using inductive coding.

### Findings and implications for practice

The review identified a limited but growing body of literature examining MHPs' knowledge, attitudes, and practices in relation to NP. Findings indicate that psychotherapists and other MHPs recognise the importance of nutrition for mental health and express interest in integrating it into practice; however, knowledge and confidence are often limited, and integration remains inconsistent. Mapping the evidence highlighted key barriers and facilitators, particularly in relation to training, support, and scope of practice. As with all scoping reviews, findings reflect the scope and quality of the available literature, which remains limited in scale and methodological consistency.

### Conclusion and relevance

This review is the first to map psychotherapists' and other MHPs' KAP regarding nutrition in psychotherapy and mental health care. By exploring the current evidence base, including facilitators and barriers, it highlights an underexplored but potentially valuable area of practice with implications for training and client outcomes. Findings provide a foundation for future research and support more inclusive, interdisciplinary approaches to mental health care.

## The Burnout Blueprint: What can we learn from expert practitioners treatment of Chronic Stress and Burnout

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Bridging the Gap: Specialist Integrative Practitioner Strategies for the Successful Treatment of Chronic Stress and Burnout.

Chronic Stress (CS) and its untreated conclusion, Burnout, are two of the most prevalent mental health complaints of modern times, causing significant adverse effects to an individual's physical, cognitive, and economic health. While the high incidence and impact of these conditions warrant improved understanding and treatment, the practical application of treatment by mental health practitioners is often overlooked in research.

This qualitative study, grounded in an interpretive epistemology, aims to generate novel, primary data on the successful treatment of these conditions by exploring the expertise of a small sample of specialist integrative practitioners who primarily treat CS and Burnout. Through inductive and latent thematic analysis of four in-depth, semi-structured interviews, the research processed over 400 data tokens to capture crucial elements for successful treatment. The findings reveal that although many of the interventions and ways of being employed by our participants are foundational to contemporary therapeutic practice, specialist practitioners make specific adjustments to them to best support clients suffering from these conditions. These findings could be adopted by the wider community of integrative therapists, and provide the beginnings of some best practice guidance for the treatment of clients presenting with CS and Burnout.

The research resulted in four clinically relevant superordinate themes:

'Orienting the Chronically Stressed Client' (strategies for initial engagement and psychoeducation)

'A Diverse Tool Kit' (specific, flexible intervention methods)

'Focusing on the Individual' (tailoring treatment to client context)

'Navigating Knowledge' (practitioner use of models and reflective practice)

This research offers valuable, directly applicable insights that inform the clinical practice of the therapeutic community. It contributes to the vital conversation regarding how research can better inform and enhance real-world counselling practice, providing practitioners with empirically grounded strategies to improve client outcomes for Chronic Stress and Burnout. The discussion on this research features implications for further studies, limitations (including considerations around EDI), and applications for the findings.

## What are the experiences of professionals who have worked with clients and/or patients who suffer, have suffered from addiction to pornography, and how might this better inform psychotherapeutic practice?

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Keywords: Pornography-addiction, shame, secrecy, psychotherapy, therapeutic relationship

We aimed to explore how pornography-addiction impacts sufferers' lives as perceived by a small respondent group of multi-discipline professionals. Our purpose is to illuminate how psychotherapists might better facilitate this client-group.

Semi-structured interviews were conducted with a General Practitioner MD, Criminal Barrister and a Psychotherapist. Interviews were audio-recorded then transcribed; data was extracted using Thematic Analysis underpinned by the principles of Interpretive Phenomenological Analysis (Smith et al., 2009). Our training institution's Ethics Board granted permission to proceed prior to the recruitment of participants, who were offered six no-fee counselling sessions should intrapersonal issues arise from their research participation. Our research was open to any 'helping-professional' who wished to take part, but not to the wider public. Our small respondent sample may limit generalisability (McLeod 2015). However, we adhered to BACP ethical research guidelines (Mitchels, 2018) and the Research Paper submitted by Hicks, et al (2025) appears to provide some triangulation to our findings.

Numerous overarching themes emerged in our data. Respondents experienced shame leading to secrecy was more profound in their 'porn-addicted' clients/patients than in their clients/patients who suffered from other addictions. Such clients/patients also appeared to be engaged in intense intra/interpersonal emotional struggles, and patterns of self-isolation appeared to follow the deeply experienced feelings of shame and guilt. The breakdown of romantic relationships often occurred as these clients'/patients' life-partners' were inconsolably damaged by a sense of rejection and betrayal. On a professional level, the impact of publicly exposed 'porn-addiction' led to destroyed reputations and job loss. Escalation of the addiction was linked to clients '/patients' accessing more extreme or illegal pornographic material, then criminal prosecution, imprisonment and registration as a sex offender often followed. In other instances, suicidal-ideation and self-harming was prominent. A worrying lack of specialist psychotherapeutic support and inadequate practitioner training emerged as an issue for this client-group according to our respondents. However, conversely when clients/patients were able to access psychotherapeutic help, the extension of a highly non-judgemental therapeutic space proved to be vital for such clients/patients, allowing deeply rooted shame and shameful actions to be disclosed and the underlying root causes of their addiction to be processed.

Our findings appear to highlight the complex impact of pornography-addiction; intra-personally and inter-relationally. Psychotherapy can play a vital role in addressing the hidden shame, secrecy, intra-isolation and relationship-breakdowns suffered by this client-group however, the need for enhanced practitioner training/awareness and non-judgemental practice appears paramount.



## How do therapists with ADHD understand and experience the impact ADHD has on their clinical work and therapeutic relationships?

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This research explores the lived experiences of therapists with Attention Deficit Hyperactivity Disorder (ADHD) and how this influences their therapeutic relationships. There is very little research written from the perspective of neurodiverse therapists. The researcher is a therapist who works in a University and in private practice, who is conducting this research as a part of their Interdisciplinary Psychology Masters. The course promotes a multidisciplinary approach, drawing on psychoanalytic theory, social psychology, critical psychology and psychotherapy, which align with the researcher's aims for this project, which hopes to explore varying perspectives and understandings of neurodiversity, promoting greater inclusion and justice.

The research aims to explore:

- (1) How integrative therapists with ADHD understand the diagnosis and how they navigate diagnosis in their therapeutic encounters.
- (2) How ADHD experiences present themselves in the therapeutic relationship.
- (3) How therapists' ADHD affects their practice and professional identity.

Interviews were conducted with three therapists diagnosed with ADHD. The interviews were semi-structured, but Free Association Narrative Interview's (FANI) (Hollway & Jefferson, 2000) principles were emphasised to elicit depth and create room for meaningful exploration. A reflexive thematic analysis (Braun & Clarke, 2006) was used to interpret the data and generate the core themes.

Being a therapist with ADHD themselves, the author's reflexive awareness of their position was essential to the interpretation and analysis and is woven into the research. For example, one theme explores how ADHD therapists may be drawn into certain roles in therapeutic relationships, the researcher explores how and why they enact a similar dynamic in the interviews, and how that affects the research.

Preliminary findings suggest that participants experience their ADHD as both a challenge and as something that affords unique therapeutic attunement.

Core themes include:

- i) Challenges, e.g. rejection sensitivity, time blindness, over-identification.
- ii) Positives, e.g. creativity, intuition, empathic attunement, flexibility.

iii) How ADHD experiences shape practice, e.g. modality, identity, CPD.

Final findings will be complete and ready prior to the conference.

Research limitations are the small homogenous sample, and the influence the shared lived experience of the author could have had on the process.

Findings do not shy away from what ADHD therapists find difficult, but they also highlight the positives, contributing to the growing research movement of counter-narrating and re-storying the deficit-based understanding of ADHD. Accepting ADHD as difference, not disorder, and a difference that can enhance relational practice, advocates for future ADHD therapist voices and inclusivity.

## Screening Emotions: Using Film Therapy to Enrich Learning and Well-being in Counselling Students

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This study explores the pedagogical potential of film therapy in counselling education, focusing on its capacity to enhance empathy, emotional literacy, and student well-being. Funded by a University of Lincoln Pedagogical Innovation Grant, the project builds on emerging evidence that film offers authentic emotional insight and relatable narratives (Hamilton, J. (2024). Movies on the couch: The MOVIE model of film therapy. *Counselling and Psychotherapy Research*, 24, 385-389.) yet remains underexplored in counsellor education (Hamilton, J. & Kemp, H. (2024) Watch and Learn. *Therapy Today*, 35(1), 32-35.). This project was awarded the University of Lincoln Pedagogical Innovation Grant to explore learning through film. Two students from the research cohort joined the research team, contributing to planning, peer engagement, supporting data collection and co-leading focus groups.

Sixteen counselling students from the University of Lincoln participated in a mixed-methods study involving a 3-hour teaching session. The session included a screening of *Inside Out 2*, an introduction to the MOVIE model of film therapy (Hamilton, 2024), and data collection. Quantitative data was gathered using the Empathy and Reflective Learning from Film-Watching Scale, a 12-item Likert instrument developed for this study by Hamilton and Kemp. Qualitative data was collected via focus groups co-led by student researchers, guided by the MOVIE model.

Statistical analysis revealed increases in perceived competence and empathy in working with anxiety ( $p = .041$ ), confidence and empathic understanding toward clients ( $p = .010$ ), and self-perceived competence in anxiety-related practice ( $p = .052$ ). Thematic analysis of focus group data identified six distinct learning pathways, including learning through empathy, reflection, visual representation, relationship, emotional process and wellbeing benefits.

The study demonstrates how film therapy can be an engaging and adaptable teaching method, with implications for counselling education and practice. Future research is recommended with larger, more diverse samples and across disciplines to further explore the pedagogical value of film in therapeutic education.

## What Will People Say? Exploring The Life Stories of South Asian Women Survivors of Sexual Violence

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#### Research aim and purpose:

This study explored the life stories of some South Asian women survivors of sexual violence. It aimed to gain an increased understanding of the multifaceted impact of sexual violations upon South Asian women. The perceptions, experiences, disclosures, honour and shame, personal journeys and support pertaining to sexual violence were also explored.

#### Methodology:

This qualitative research encompassed individual interviews with three participants whom were recruited via a purposive sampling strategy. The women were of diverse demographics. The majority of interviews were conducted in English, with some participants' sporadic dialogues in Arabic, Punjabi and Urdu.

The methodology was thematic analysis. Seven main themes were identified via thematic analysis of the data. The theoretical framework included a humanistic approach.

#### Findings:

The psychological and emotional impact of sexual violence, and subsequent traumas, was intense and immense. The sexual violations occurred during childhoods, adolescences and adulthoods. Some of the participants were exposed to threefold toxic constructs; toxic masculinity, toxic femininity and toxic parents.

The concepts of honour and shame were embedded within the sexual violence phenomena for South Asian communities. There were negative outcomes for females perceived to have dishonoured and shamed themselves, and their families.

An astounding finding was one perpetrator's belief he had the prerogative to have sexual contact with any females whom were not descendants of his male bloodline. Another striking finding was a religious belief that in the Hereafter, the deceased will be resurrected by their biological father's name on the Day of Judgement. Hence, a participant's desire to detach her name and identity from the male parent perpetrator was impossible to achieve in the Hereafter due to her religious beliefs.

#### Limitations:

The COVID-19 pandemic contributed to a delay in eliciting the data, which resulted in two participants disengagement from the study. The findings cannot be extrapolated to all South Asian women survivors of sexual violence as they derived from a very small sample size, which is a limitation of this research.

#### Conclusions and implications:

The impact of some professionals, including therapists, questioning the evidence of abuse or applying pressure on the survivors to report it was catastrophic. It is recommended that practitioners undertake training in areas of cultural competencies, domestic abuse, sexual violence, and honour and shame.

The participants human spirits did not die. They survived. They gave detectible hope to other victims and/or survivors of sexual violations.

#### Equality, diversity and inclusion:

This study intended to fill the void in existing literature on South Asian women survivors of sexual violations.

## A heuristic inquiry into becoming a kink aware therapist working with transgender and gender diverse clients

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In 2025, LGBTQ+ communities face rising hate and political hostility. This decade, there has been an increase in visibility of transgender and gender diverse (TGD) people and BDSM/kink practices and identities have also become more visible. This research sits at the intersection of these two stigmatised identities. Furthermore, recent legal changes are fuelling a controversy in wider society and the counselling professions relating to gender-affirming therapy.

This study's objectives were to explore the experiences of kink-aware therapists and their TGD clients to advance knowledge, and to create performance poetry to encourage counsellors and other audiences to reflect on experiences of marginalisation, gender and sexuality. The poetry brings together the fields of psychotherapy and performance art, was co-created with other kink aware therapists working with TGD clients and is designed to easily disseminate social justice messages that are relevant for counsellor training and development. The lead researcher's experiences were included.

Data was collected using interviews and self-dialogue, and this was analysed using heuristic theme illumination and identification, foregrounding person-centred unconditional positive regard. This culminated in a creative synthesis poem called Unconditional Possible Girl, which explores the following themes: danger; safety; thinking about kink; knowing and learning; trans joy. Sub-themes included: professional threat; neurodiversity; perception; marginalisation; advocacy. The poetry from this research is available at [www.unconditionalpossiblegirl.com](http://www.unconditionalpossiblegirl.com).

Key insights included: TGD clients feeling increased threat due to legal changes that contravene TGD best practice, leading to increased marginalisation; cis therapists reflecting on their gender and sexuality marginalisation to enable deeper connection with TGD clients; nuanced gender identity can be experienced by clients that do not identify as TGD; LGBT communities, including kink communities, can offer great support to people who are marginalised; a potential link between neurodiversity and TGD and kink identities. The implications, findings and limitations of this study, are discussed. Suggestions for future research are discussed, and these include exploring and understanding the sexual and non-sexual motivations for practising kink for TGD clients.

## Exploring the Narratives of Creative Afrocentric Psychotherapy (CAP) for Black Women who have experienced sexual abuse in the Pentecostal Churches (PC) in the United Kingdom

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### Background

Black people have embraced the Christian faith since the early 17th century, as they found hope and redemption during slavery (McKinney, 1971). However, according to the Independent Inquiry into Child Sexual Abuse (IICSA), sexual abuse happens a lot in religious settings, and many cases go unreported. The Catholic Church alone had over three thousand complaints, and IICSA posits that it will even be higher after over fifty years. Music and dance movements attract many Black people to the Pentecostal Church (PC) more than other denominations because of their cultural significance (Kabongo, 2000).

Black women are more likely to struggle with mental health issues in the UK than white women. One significant contributing factor to poor mental health outcomes is sexual abuse, particularly when it occurs in spaces perceived as spiritually safe, such as the church. Many counselling and psychotherapy trainings in the UK remain informed by Western and European paradigms. The Western and European approach to psychotherapy is more structured, individualistic and pragmatic, and many Black clients are not used to it.

In contrast, many Black people deem storytelling as a therapeutic relationship and believe in collectivism and spirituality. Living together relates to Ubuntu's philosophy: "I am because we are." This research will explore the new model of Creative Afrocentric Psychotherapy (CAP), thereby contributing to the existing knowledge of the Afrocentric worldview in counselling and psychotherapy, which will benefit both counsellors and clients in the therapeutic relationship. The objectivism (quantitative) will build on the Warwick-Edinburgh Wellbeing Scale, which will reveal the organismic element of the participants' experience. The subjectivism (qualitative) of the ontological phenomenon will be embodied in the narratives of the participants after the workshop. The new CAP, a pluralistic approach, consists of eight elements, primarily aiming to enable participants to experience Wholeness through evidence-based Afrocentric psychotherapy. The interventions will allow participants to explore their spiritual and human aspects, including self-acceptance, overcoming challenges, and building strong relationships. The study's main aim is to explore the Narratives of CAP intervention for Black women who have experienced sexual abuse in Pentecostal Churches (PC).

### Methodology

I will use a mixed-method research (MMR) approach to explore the Narratives of CAP for Black women who have experienced sexual abuse within the PC. Participants will narrate their stories about their experience participating in the CAP intervention.

Findings: The findings aim to fill the gaps in knowledge of storytelling, collectivism, and spirituality within the Afrocentric worldview in counselling and psychotherapy.

Keywords: Black Women; Afrocentric Psychotherapy; Sexual Abuse; and Pentecostal Church.

## Being human(e): Decolonizing Pioneering Counselling Education in Cambodia and Re-learning 'within' Diversity'

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My PhD research explores the impact of counselling training with former students, who were in fact trailblazing pioneers in the counselling profession within the post-Genocide nation, Cambodia. The project explores both past and present lived experience of both researcher and participants, living with and in, shared narrative (Bocher and Ellis, 2016.) The research gained ethical approval in 2023.

Within this research project, mixed method sequential methodology was chosen in an attempt to deconstruct some of the hierarchical structures within the research process, and in doing so, dilute researcher power-over participants (Smith, 2021). The act of deconstruction also challenges the “unquestioned and often invisible” white supremacy which is still in existence to date (Menakem, 2021, p.79). The project explored how “naming something that has been repressed”, may “break the cycle” (Welch-Moring and George, 2025, p. 43). By naming white supremacy and looking through multiple lens to foster a space for all concerned to learn, we may re-centre meaning (Kriete, 2003) and work collaboratively to escape the “molasses swamp” of oppression (Anah, 2025).

Multidisciplinary collaboration underpinned the project and most crucial was the acknowledgment of working ‘within’ and not ‘with’ diversity (Kahn, 2023). As an expatriate, my minority status led to me facing my own white privilege (Barnett, 2025; Saad, 2020; Diangelo, 2018) and identifying a need to create an accessible learning space for individuals who may otherwise remain marginalised (Khan, 2023).

The key focus of this project explores decolonising of the curriculum and identifying the impact of power and privilege within the intersectional learning space. Working in collaboration with a small focus group of former students as researchers, encapsulates what the participants perceive are the barriers and opportunities to consider in the future. Interwoven throughout are the social justice issues of intersectional power and the toxicity of perpetual racism through colonialism (Rementeria, 2024; Casillas-Martinez et al, 2023; Mullan, 2023).

The research concludes with participatory action research, elevating former student voices toward a crescendo; an empowering and humanizing experience on which the Cambodian counselling profession may further develop a culturally sensitive program (Hardy, 2025; Ortiz, 2025) and a training program offering a socially-just future. This pluralistic research has highlighted the need for collaborative pluralism and culture-centred counselling education (Lang and Gardiner, 2014). As well as the importance of learning which responds to local needs, embraces responsive pedagogy, “acknowledges multiple ways of knowing” (Ortiz, 2025, p. 125) and “decolonizes minds” (hooks, 2003, p.40).

# Lightning Talks

## Exploring the experience of living with secondary infertility: a qualitative study

**Mairi Smith**

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As a qualified counsellor and lecturer in counselling, I have an avid interest in the wellbeing of individuals and particularly in supporting those struggling with fertility related issues. I have been a volunteer with Fertility Network UK (FNUK) since 2019, facilitating monthly support group meetings online and I also work as a bank counsellor with a national fertility clinic, providing psychological support for individuals experiencing a range of fertility issues.

In 2020, I completed the research year of a MSc in Psychotherapeutic Counselling. Through autoethnographic inquiry readers were provided with the opportunity to enter and explore my world as I focused on my own experience of living with secondary infertility, a condition which impacts individuals who are unable to conceive after 12 months of unprotected intercourse after a previous pregnancy resulting in either a live or still birth (Sormunen et al. 2018, p.336). Statistically more common than primary infertility, (Simons, as cited in Burns and Covington, 2000), it is estimated that in 2010, approximately 10.5% of women globally experienced secondary infertility, in comparison to 2% of those who experienced primary infertility (Mascarenhas et al., 2012).

I am now a first year PhD researcher at the University of Staffordshire, looking to extend my research further to explore the experiences of women with secondary infertility and the psychological impact of this condition on them, their existing family systems and social worlds through heuristic inquiry. I am currently conducting a systematic review of the literature which to date, appears to indicate a lack of awareness and understanding of secondary infertility, not only in society and culture but in the medical community and throughout the field of counselling and psychotherapy. Therefore, the overall aim of this lightning talk is to understand both counsellors and researchers' perceptions of this condition and area of research. I would also like to ask counsellors how they would consider working with individuals impacted with secondary infertility in the counselling room.

In terms of equality, diversity and inclusion, secondary infertility impacts individuals from all cultural and ethnic backgrounds and does not discriminate between class, gender, sexual orientation, age or ability. Although only half of the individuals experiencing secondary infertility seek medical assistance, the widespread landscape of secondary infertility is changing as more conceive their first child through IVF treatment or adoption before returning to treatment with the hope of expanding their family (Simons, as cited in Burns and Covington, 2000).

## Defining Relational Safety in Psychotherapeutic Relationships - Using Photo - Elicitation to Examine Client and Trainee Experiences

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Relational safety is a component of therapy that most therapists and researchers agree is significant in achieving positive therapeutic outcomes. However, there is little in Irish or international literature regarding the definition of relational safety.

Following ethical approval from the Research and Ethics Committee of Technological University of Shannon (TUS), the first phase of this research, presented last year at the BACP research conference, examined the creation of a definition of relational safety using the Delphi method from the perspective of qualified and experienced therapists.

The next phase of the research aims to explore the experiences of members of the general public and trainee psychotherapists. A key objective is to compare and contrast the therapists' experiences with those of the clients and refine the existing definition where applicable. It is hoped that this stage of research will provide a roadmap for therapists in the future, a "how-to" for creating and maintaining relational safety.

Photo-elicitation and individual semi-structured interviews have been employed as the method. It involves using participant photos to guide and reveal how the participants view and understand the world and their experiences in therapeutic relationships (Torre & Murphy, 2015). This method allows for symbolic representation of processes that may be difficult to verbalise and put words on (a theme that was present repeatedly in the initial research with therapists). Using photos makes the research process more accessible for those who find it harder to express their views verbally, including neurodivergent individuals. It allows for the possibility of bringing the unconscious into the foreground and making the unconscious conscious. This is a process that, in some ways, mirrors therapeutic processes, whereby unconscious feelings/responses are brought into conscious awareness. Photo-elicitation is used more frequently in social science and education settings and less frequently in psychotherapeutic research, particularly in Ireland. Using this method adds an innovative aspect to the research and allows for a diverse range of experiences to be heard.

Data has been collected from 24 participants, and data analysis is currently being undertaken using reflexive thematic analysis. The process, thus far, will be discussed, including the challenges of using participant-led photo-elicitation.

Having a definition of relational safety from all perspectives will help nurture an environment where therapists reflect on and take greater responsibility for understanding clients and recognising their varied needs.

## Exploring Integrative Counsellor and Coach Approaches to Working with Black and Brown People

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This research explored if and how integrative counsellors and coaches of all racialised identities work differently with black and brown clients. It sought to specifically understand use of a ‘colour blind’ ideology versus a colour conscious approach. Extensive existing literature advocates for and demonstrates the need for counsellors and coaches working with black and brown people to take an informed and considered approach and it is important to see if this occurs in practice. This research aimed to inform the delivery and content of qualification programmes, CPD options and membership organisations around working with race by sharing examples of current practice and recommendations for systemic change and support for new and existing practitioners working with black and brown people.

I completed this research through an online qualitative survey of 7 questions. As a brown researcher, I chose this method in consideration of the level of openness that participants would have about their attitudes to working with brown and black people in my presence. I used a critical realist lens on Reflexive Thematic Analysis to analyse the data.

Ethical approval was gained via UEL ethics board in March 2025.

I established three themes in this research: that race and racism is in the counselling and coaching room, process and relationship; that practitioners reflect on their individual identity and approach to working with black and brown clients; and that experiencing or witnessing racism and personal beliefs impacts on counsellor-coach approaches. This includes the unexpected result of practitioners taking an overwhelmingly colour-conscious approach. This research includes a range of examples of ways of working with black and brown people which practitioners have developed individually rather than through intentional systemic support structures. While highlighting the gaps in training around working with race, this study brings optimism to counsellors and counsellor-coaches aiming to take a colour-conscious approach and to clients seeking practitioners who will see their colour.

I used an online survey which creates broader access and a higher number of participants than semi-structured interviews. This helps include people from a range of racialised identities, locations across the country and approaches to practice. As part of dissemination of the survey I provided signposting to support for people who may be digitally excluded. I also used lay language as much as possible in my research and publication of findings, as I would like this work to be accessible to researchers, practitioners and clients alike.

## An Exploration of the Utility of Discourses of Poor Perinatal Mental Health Experiences for Women in the UK: A Foucauldian Discourse Analysis

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**Rationale and Aim:** 1 in 5 women experience problems with their perinatal mental health (WHO, 2022). However, women's health is often misunderstood and poorly researched (Cleghorn., 2021; Graham, 2023). Consequently, the discourses available for women to construct an understanding of their experiences of poor perinatal mental health are limited and often fail to consider lived experiences of women, particularly those with additional intersecting marginalised identities (Foster et al., 2021). This study aims to explore how women construct their understanding of poor perinatal mental health experiences through available discourses in the UK, and how this understanding enables or delimits their perceived 'recovery'.

**Method:** Foucauldian Discourse Analysis, through a feminist, intersectional lens, was chosen to analyse up to 15 unstructured interviews with women who self-identify as having experienced poor perinatal mental health. The analysis developed namely from Ussher and Perz (2014), and Willig (2024), will have six stages which will aim to identify discourses, understand subjective positioning in relation to the discourse and finally, how this positioning impacts actions, subjective experience and perceived 'recovery' from poor perinatal mental health experiences.

**Learning and development of study:** Initially this study was designed using constructivist grounded theory (Charmaz, 2014), with the intention of developing a model of perinatal mental health support informed by lived experience. However, highlighting the hermeneutical injustices evident in women's health, it became clear that women had little access to any non-pathologising explanations of their perinatal mental health and recovery, thus risking the reinforcement of pathologising discourses of their experiences. With this in mind this study was redesigned to try and capture the power and agency available for women within these available discourses and the impact of this on their recovery.

**Challenges:** Taking into consideration equality, diversity and inclusion, a broad aim of the research is to explore and address the impact of epistemic injustices in perinatal mental health. An exploration of lived experience was chosen in response to testimonial injustices (Dotson, 2012, Scruton, 2017), Feminist Standpoint theory and an intersectional approach in response to hermeneutical injustices (Dotson, 2012, Tuana, 2006) and contributory injustices (Dotson, 2012, Carbera et al., 2020) when designing this study. Eight interviews have taken place, and preliminary analysis has taken place. However, all current participants have similar demographics to each other, and to the researcher, and initial attempts to recruit more diverse participants have so far been unsuccessful. With issues such as epistemic exploitation in mind (Okoroji et al., 2023), this presentation aims to discuss how researchers might respectfully work to engage with participants who are different to them, or with those who might perhaps see the research as an 'outsider' (Yanto and Pandin, 2023).

## The Paradox of Achievement: Exploring Impostor Phenomenon (IP) in Counselling Psychology Doctorate Students

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The focus of this study is an exploration into the lived experience of what has been conceptualised in academia as Impostor Phenomenon (IP), commonly known as Impostor Syndrome, among UK-based doctoral Counselling Psychology students. It has been noted that doctoral students are generally perceived as highly capable, and yet many report persistent feelings of intellectual and professional fraudulence. By exploring the experiences of IP in Counselling Psychology doctoral students, in the context of their uniquely reflexive and rigorous training environment, as well as the interplay of socio-cultural factors, this study would address a critical population gap in the literature. The salience of the study of IP within this underrepresented demographic is further enhanced by IP's noted effects, both negative and adaptive, on wellbeing, academic performance, and the development of professional identity. This is important as CP doctoral students navigate research and theoretical skills as well as confidence in clinical decision-making and responsiveness to client needs. Researcher positionality is central to this study. As a current DCPsych student with a strong interest in intersectional identities and context-sensitive perspectives, I am particularly curious how experiences of IP might intersect with personal, academic, and professional identities among this demographic. To this end, a predominantly qualitative online survey will be employed, targeting CP doctoral students who self-identify as having experienced IP (without resorting to IP scales). The survey will combine multiple-choice social demographic questions with an open-ended reflection section and a story completion prompt to capture subjective, nuanced, and contextualised perspectives. Due to the potentially sensitive nature of the topic, ethical considerations will include full informed consent, the right to withdraw, anonymisation of responses, and secure data management compliant with GDPR standards. Inclusion of optional or "prefer not to answer" demographic responses will reflect commitment to equality, diversity, and inclusion, by ensuring the participants can represent themselves authentically without pressure. The raw data will be analysed using descriptive statistics for demographic trends and reflexive thematic analysis to identify any recurring themes within the qualitative reflections. The reflexive thematic analysis will be supported by critical awareness of researcher assumptions and potential biases. By conceptualising this phenomenon within the demographic of CP doctoral students, it will contribute to the understanding of how personal, contextualised, psychological experiences might shape trainee wellbeing, professional identity, and the quality of psychological practice. I would welcome discussion with the audience around the strengths, weaknesses, and challenges relating to using story completion.

## The pedagogy of vulnerability in humanistic counsellor training in higher education

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The pedagogy of vulnerability is a term first coined by Brantmeier (2013) but has its roots in earlier work such as Freire (1970) and hooks (1994) who encouraged a more dialogical approach to teaching. It invites vulnerability and mutual disclosure and sees students and tutors as co-learners (Brantmeier, 2013). My research explores the pedagogy of vulnerability in humanistic counsellor training in higher education (HE) and is informed by heuristics (Douglas & Moustakas, 1985; Moustakas, 1990; Sultan, 2019). Having taught counselling at different HE institutions, I use my autobiographical experience as data (strand a), employing heuristic methods such as tacit understanding, indwelling and self-dialogue (Douglas & Moustakas, 1985; Moustakas, 1990; Polanyi, 2009). Strand b) of the research, an unstructured online interview with a past tutor group, is in process and I am currently carrying out heuristic analysis of the interview data, including immersion, incubation, and explication (Moustakas, 1990). Themes are starting to emerge such as how tutor vulnerability may influence future counsellor practice and self-disclosure. Strand c) will be interviewing other HE humanistic counsellor trainers and strand d) will involve humanistic counsellors creatively depicting their past tutor's vulnerability, perhaps pictorially or as a poem. As a creative counsellor, I see the value of expressive methods in research as well as therapy (Reavey & Johnson, 2017).

The research will add to the current understanding of this pedagogy in HE, and I hope it will help inform future counselling training. I aim to examine how vulnerability can be experienced by both tutors and students exploring its benefits and downsides. EDI is central as what it means to be vulnerable may have cultural variations, and there will be greater threat to marginalized tutors when sharing themselves (Aleman, 2020; Page, 2020). Christodoulidi (2023) has also written about the pedagogy of vulnerability in creating spaces to teach about diversity, essential learning for counsellors in training. Heuristic studies invite equality between co-researchers who share lived experience of the phenomenon and diversity will be considered in participant selection. It is hard to eradicate power, especially when interviewing a previous tutor group, and I hold this in my awareness. I would like to present the initial findings of my research; I am sure many in the audience will have had their own experience and thoughts on this phenomenon and I welcome feedback.

This research gained ethical approval from the Social and Political Science Research Ethics Committee, University of Chester, on 14th May 2025.

## Textiles And Continuing Bonds in Bereavement: A qualitative study into how the intact and refashioned textiles of the deceased facilitate a continued relationship - a snapshot of the literature

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Grief is a universal experience; often the catalyst for emotional reflection, it regularly presents in the counselling room. Similarly ubiquitous, textiles wrap around us literally and figuratively throughout life, signalling identity, safety and story. No wonder griever turn towards - or away from - the textiles left behind, often due to their potent ability to embody the deceased.

My PhD research is studying the ways textiles facilitate this continuing bond (Klass et al., 1996), with a secondary focus on refashioning textiles into quilts, toys, garments etc.

This qualitative research project will have three data collection strands. First, a website collecting stories/images of everyday experiences of textile-based continuing bonds, to be analysed using Reflexive Thematic Analysis (Braun and Clarke, 2022); second, semi-structured interviews with people who have experienced a continued relationship via a refashioned textile and a second set with people who undertake refashioning for others, to be analysed using Interpretative Phenomenological Analysis (Smith et al., 2022); the proposed third data collection method will be a sewing group in which bereaved individuals will be supported in creating a new object out of their significant textiles.

Using a variety of data collection methods aligns with EDI principles in ensuring fair access to participation which, it is hoped, will allow the capturing of varied lived experience. The sewing group will be rooted in collaboration with participants, and the anticipated implementation of a Patient and Public Involvement group will allow a range of voices to inform the research from the ground up.

My early research focus has been on the gap in academic literature, which exists despite many grey literature and anecdotal practice examples indicating that interacting with textiles, including refashioning, is common in grief.

As a research focus, continuing bonds and textiles is richly interdisciplinary. A contributing factor to the literature gap is that while the term 'continuing bonds' is familiar within the bereavement research community, it is less used elsewhere. Consequently significant accounts may be overlooked from the disciplines of fashion, art, literature, design, consumer psychology and more, notably describing grief responses which reflect those deemed to demonstrate a continuing bond without using that term.

My lightning talk summarises my literature review findings, bringing together interdisciplinary accounts to share what is known about textiles and continuing bonds, offering tentative signposts to help practitioners' awareness of how textile-based continuing bonds present themselves in the counselling room, such as for meaning making and identity work.

## Understanding Disabled People's Perceptions and Experiences of Counselling and Psychotherapy: A Scoping Review

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Those who identify as disabled encounter greater mental health challenges and difficulties accessing counselling and psychotherapy compared to those who identify as non-disabled. Disability is defined in the UK Equality Act (2010; Amendment Regulations, 2023) as having “a physical or mental impairment that has a ‘substantial’ and ‘long-term’ negative effect on their ability to do normal daily activities, including the ability to participate fully and effectively in working life on an equal basis with other workers”. Despite facing greater mental health challenges, little is known about what evidence is available to understand disabled people’s perceptions and experiences of counselling and psychotherapy, the barriers and facilitators to accessing therapy, and whether therapy is adapted appropriately by practitioners to meet their needs.

To address this gap, this scoping review aims to identify and synthesise existing evidence with the aim of informing practice, research and policy to allow for more inclusive psychological therapy and to reduce barriers for disabled clients seeking therapy.

This scoping review will follow the methods outlined in the Joanna Briggs Institute (JBI) manual scoping review framework (Peters et al., 2020) and the PRISMA-ScR guidelines (Tricco et al., 2018). The databases searched include PsycINFO, CINAHL, Medline and EBSCO Psychology and Behavioural Science. Eligible studies are limited to those published between 1st January 2016 to 28<sup>th</sup> April 2026. Titles and abstracts will be screened according to inclusion/exclusion criteria, and full texts will be sought for relevant articles. To ensure the voices of disabled people are integrated throughout the research, this scoping review is being co-produced with a panel of four People with Lived Experience (PLE), and the research team is made up of disabled and non-disabled researchers. Data will be extracted from the included papers, and a narrative synthesis will be performed to address the research questions.

An initial challenge has been developing a search strategy that yielded a manageable number of results for the team to review, whilst also achieving the study aim. Initial searches returned 70,000 results, so reconvening the PLE panel to rework the search terms was essential. Co-ordinating a team of nine (five researchers and four PLE) also brings logistical challenges. The findings of this review will provide insights into the issues facing disabled people when accessing and receiving therapy, and how practitioners can adapt their practice to make it more suited to their needs.

## Workplace counselling for staff in nursing and residential care homes: a qualitative study

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Nursing and residential care home work is emotionally and physically demanding, which can involve staff shortages, high workloads, and resident deaths. These factors are linked to poor emotional health in care home staff. Psychological interventions for care home staff are an under researched area. Limited research shows the usefulness of specialised forms of therapy for stressful incidents, such as acceptance and commitment therapy (ACT) and eye movement desensitisation and reprocessing (EMDR). Workplace counselling typically adopts a more integrative approach, and evidence for its effectiveness is shown in sectors such as healthcare, transport and postal services. However, the extent of workplace counselling being delivered to care home staff is unclear. To address this gap, part of this PhD research explores care home staff and manager views of including talking therapies in their workplace setting, perceptions of need, acceptability, and barriers and facilitators for delivery and access. Semi-structured interviews will be conducted with 20 care home staff and 10 care home managers. Staff are primarily being recruited through local Enabling Research in Care Homes (ENRICH) networks, the British Society of Gerontology (BSG) network, and social media channels. The research aims to recruit staff across various demographic characteristics, in a variety of roles, and care homes varying in CQC ratings, and size of care home provider. Furthermore, it aims to recruit staff from care homes that do not currently include workplace counselling, and care homes that do offer this service. Thematic analysis of interviews will be conducted in NVivo, using the Braun and Clarke (2021) methodology. From an equality, diversity and inclusion perspective, this research is valuable because of its focus on a marginalised group who are largely on a low-income. A higher proportion of care home staff are from ethnically diverse backgrounds and possess non-British nationality compared to the national population. Recruitment has been challenging in terms ensuring that recruited staff are from diverse backgrounds according to demographic characteristics, and types of care homes. This involves including a mix of smaller, independent care homes and large chains, and a mixture of care homes who have workplace counselling such as EAPs, and those who do not. This presentation will also discuss the challenges surrounding the process of conducting the interviews. The findings from this research will allow us to learn about care home staff and manager perceptions of workplace counselling as a psychological intervention for staff in nursing and residential care homes.

## The experience of psychological interventions from the perspectives of ADHD adults - Preliminary Findings of a Systematic Review

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Attention-deficit and hyperactivity disorder (ADHD) is increasingly recognised and diagnosed in many parts of the world. There is growing recognition that non-pharmacological treatments play an important role in supporting adult clients who present with ADHD (Nazarova et al, 2022). However, little is known about how adults with an ADHD diagnosis experience psychological interventions.

The overall objective of the systematic review (SR) is to establish from the existing literature how adult clients presenting with ADHD experience interventions which have a psychological and relational element to them (such as psychotherapy, counselling, coaching and cognitive behavioural approaches).

In keeping with the Joanna Briggs Institute's (JBI) guidance for meta-aggregative reviews, this review will consider studies utilising any type of qualitative research methods (such as interviews, focus groups, qualitative surveys) that generate themes which can be extracted for synthesis. The general search strategy will follow JBI's recommendations for a three-step process. The first step, during the protocol stage, is to start identifying 'seed references' (studies that generally meet the inclusion criteria) and 'harvest' them for key words and possible index terms. The second step entails a focussed search of the databases and data extraction as described above. The third step deepens the search by supplementary searches for grey literature, citation searching, and hand searching.

At the time of writing, the first step has been completed, and the author is in the process of screening papers for inclusion (part of step two). It is expected that at the time of presenting, preliminary results can be shared with the audience. As this is the author's first time conducting a SR, any feedback on the approach and process of conducting the review are appreciated. The author is also keen to hear attendees' response to the preliminary findings.

The author will share her experience of conducting a SR with the audience, as well as sharing the voices of ADHD clients identified through the analysis. The lightning talk may be of interest to those who are working with neurominorities and/or SRs as a method.

Understanding the needs of clients with diverse range of neurotypes is critical to providing support. This review aims to contribute to the understanding of the needs of ADHD clients as a neurominority and thus to the development of more neuro-affirmative and inclusive approaches to counselling and psychotherapy.

## Suppressed voices? the influence of child sexual abuse on the life narratives of adults in later life

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Experiences of adults in later life are underrepresented in sexual abuse research. This study aims to help address this gap, giving attention to barriers older adults may experience in accessing research opportunities, and particularly those within the sexual abuse field. A narrative qualitative methodology is used to investigate how adults age 65 and over, who were sexually abused as children, have made sense of their lives, including any perceived influence of the sexual abuse on the lifespan.

Additional aims of the research

- Investigate how participants have made sense of their lives and to understand if / how sexual abuse has influenced their experiences, narratives, and views of themselves over time.
- Investigate how life narratives have changed over the lifespan and what may have influenced these changes.
- Identify the influence of societal and community narratives throughout time on the way participants have made sense of their lives.
- Identify factors influencing non-disclosure or disclosure throughout the lifespan.
- Where participants have accessed talking therapies, to understand if this had any influence on their life narratives and understanding of why the abuse happened.

Narrative interviewing and timelines are used to support the participants' narration to encourage participant autonomy in their ability to 'control what they share' (Josselson, 2007, p.523). The Listening Guide (Gilligan, 1983) is used to support analysis, including identifying the different voices in each narration and changes in voice over time.

The outcome of this research will be used to raise awareness for organisations and professionals working within the sexual violence and older people's sectors (including counsellors, psychotherapists and other professionals) about the experiences of older adults who were sexually abused.

Challenges & areas of learning (recruitment)

Not surprisingly, many sexual violence services in the third sector are struggling to survive due to reduced funding (CSA Centre, 2024) so supporting this (and other) research is difficult. Some national organisations were willing to support recruitment via their websites and social media.

Approaching organisations supporting older adults in relation to recruitment was unsuccessful. Older adults were viewed as a vulnerable group unsuitable for or requiring protection from the research.

The barriers faced in recruiting from older adult organisations highlights the need for awareness raising around the prevalence and influence of non-recent child sexual abuse in older adults, which it is hoped this research will support. Parallels can be drawn between the barriers that older adults may experience in accessing support following non-recent child sexual abuse and access to research opportunities.

\*Ethical approval was received by Leeds Beckett University on 16th January 2024.

## Beyond the theory: Insights on the use of intersectionality theory among counselling practitioners in India using case-study approach

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A growing body of literature highlights that mental health is deeply influenced by social identities like gender, caste, class, religion, race, socioeconomic status as well as systemic and structural inequalities. Historically, the field of counselling and psychotherapy focused on the intrapsychic processes of individuals, while feminist and multicultural perspectives emerged to address the complex social realities of clients, they remained one-dimensional. The Intersectionality framework overcomes limitations of single-axis approaches by showing how multiple social identities interact with each other and larger sociopolitical systems to shape the experiences of individuals. India's social stratification further informs context, recently some practitioners in India are moving towards therapeutic practices rooted in intersectionality to better understand and address the sociopolitical realities of their clients.

This study seeks to look beyond the theoretical, analytical and methodological understandings of intersectionality. By employing a qualitative case-study methodology, the pilot project aims to explore how mental health practitioners in India understand and integrate intersectionality in their therapeutic practice, this pilot was also undertaken to assess the feasibility of PhD research. Data was collected through in-depth semi-structured interviews. Reflexive Thematic Analysis was used to identify and compare the themes across two participant cases, Reflexive analysis of the data emphasised on the positionality and the power dynamics of the researcher and the participants.

The findings reveal the following primary themes: definition of intersectionality within mental health context, therapeutic outcomes associated with using an intersectional lens and the challenges or the limitations encountered in applying the lens, broadening therapy scope emphasizing practitioners lived experiences, applying intersectionality to conceptualise and address client concerns and recognition for an urgent need for intersectionality-informed practices in India. A converging theme across the two cases draws attention to the tensions between traditional counselling practice versus intersectional- awareness practice highlighting further how practitioners navigate identities, social structures, power, oppression and marginalisation pointing out the complexities and the gaps between theory and everyday realities of clients and practitioners. Overall, the findings reveal the complexity and the possibility of using an intersectional lens in practice.

Discussion points- In what ways can the field of counselling draw on interdisciplinary perspectives like intersectionality theory to broaden our understanding of clients' social world and to better support clients in India?

The challenges encountered during pilot study and learnings on reflexivity, research feasibility and building relationship with participants.

## School counselling in the real world: a mixed methods evaluation

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**Aims/purpose:** In September 2024, Brighton & Hove City Council launched a two-year pilot project to provide school-based counselling to students in years 7-11. This study aims to evaluate the outcomes of the counselling, as well as understand young people's experiences of school-counselling.

**Methods:** This study uses a mixed methods design, looking at pre-post change on a measure of psychological distress (YP-CORE) and personal goals (Goal Based Outcomes [GBO] tool). It also assesses young people's experiences of school counselling using the 'Experience of Service Questionnaire' and post-counselling interviews with young people. Data collection and analysis is on-going, but preliminary analyses have used descriptive statistics (counts and percentages) and t-tests to assess outcomes. Thematic analysis will be used to analyse interview data.

**Preliminary findings:** In the 2024/2025 academic year, 168 young people accessed school-based counselling, with 29 (17.3%) young people and a parent/carer giving consent for their data to be used for research purposes. Among these, 26 had paired YP-CORE data, showing an average reduction from 22.1 to 12.5 points (from a total of 40;  $p < .01$ ). Twenty-three of the 29 clients set a total of 47 personal goals, with goal ratings increasing on average from 3.0 to 6.1 (out of 10;  $p < .01$ ). These findings indicate meaningful improvements in both psychological distress and goal progress among participants. Interviews have been undertaken with 8 of the 29 (27.6%) eligible young people.

**Challenges and areas for learning:** Due to the ethical requirements, consent from the young person and a parent/carer are needed for their data to be used for research purposes, but less than 20% of participants have given consent and only just over a quarter have participated in an interview. This presentation will cover some of the challenges associated with getting parent/carer consent in a naturalistic setting, and some of the attempts the research team have made to secure interviews, including setting up a project webpage and offering more flexibility.

**Considerations given to issues of EDI:** Whilst the project was not specifically designed to focus on EDI, we have collected data on whether a young person has SEND (Special Educational Needs and Disabilities) status and proxy data on socioeconomic status (eligibility for Free School Meals). Data analysis will assess the extent to which these are reflective of the broader school context and national averages.

## The experience of Post Intensive Care Syndrome patients with counselling and psychotherapy: understanding access and efficacy

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Post intensive care syndrome (PICS) can affect patients who have survived periods of hospitalisation and mechanical ventilation in the intensive care unit. The syndrome describes symptoms of cognitive, physical and psychological impairment specific to the period of hospitalisation, and I will be focusing on the psychological impact. Patients with PICS experience psychological distress including but not limited to symptoms such as flashbacks, sleep disturbances, anxiety, depression, nightmares and night terrors.” The risk of developing psychological disability after discharge from intensive care, ranges from one to sixty two percent (%) in the form of depression, anxiety, and post-traumatic stress disorder” (Gunter, Rawal, Kumar, 2025) “up to 80%” (Scwitzer et al, 2025) patients leave ICU with PICS symptoms. Currently in the UK, there is no provision for patients to uniformly receive psychological aftercare following a stay in the ICU, and therefore any psychological support will need to be sought out by the patient themselves. This study will set out to understand the experience that PICS patients have had in their psychotherapeutic aftercare, how effective the interventions were, and what provisions there are for patients to access the necessary care.

It is worth noting that my research has just concluded and the completed article with it’s findings will not be ready for publication until January. However my preliminary findings are that the current pathway for discharge of patients who have survived ICU is unsafe and in fact causes ongoing harm to those sufferers. Without any kind of treatment plans, patients are abandoned at their most vulnerable to deal with symptoms of ongoing psychological distress including psychosis, flashbacks, and suicidal ideation. Others speak of being left in a state of active grief, for their old life, and old selves, who no longer exist either physically or emotionally. This study is evidencing that rather than the pandemic having been a period of awakening for these issues, patients are continuing to suffer in the most isolated of situations, finding that what they have experienced is not in fact processed cognitively as a “dream” of “ICU delusion” but as events that have really happened to them. As such patients are being discharged having experienced true traumatic events, however fantastical they may sound upon recount - and my study is evidencing that these survivors are left to fend for themselves in a landscape where mental health support is unknown, unreachable and unaffordable.

## Counselling as a recovery process among young adults in drug rehabilitation in Romania

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Keywords:

relational recovery; counselling; young adults; substance use; harm reduction; Romania; therapeutic relationship

Background:

Drug addiction is often linked to medical, corrective, or punitive discourses, but no attention or little attention to relational and psychosocial dimension. The policies in Romania tend to emphasize criminalization and abstinence, while harm reduction and counselling remain peripheral.

Research objective:

The objective of this research is to explore how counselling can facilitate reconnection, emotional regulation, and hope among young adults in recovery from substance use. On one hand I will explore how counselling relationships facilitate emotional reconnection, self-awareness, and hope among young adults and on the other hand I will identify the processes that psychologists, counsellors and social workers do within the Romanian rehabilitation context.

Methodology:

For collecting the data I will use semi-structured interviews and reflexive field notes. I will conduct 8-10 semi-structured interviews with clients aged 18-30 enrolled in outpatient rehabilitation or harm-reduction programmes, and 10 interviews with counsellors and social workers to examine collaborative efforts and relational challenges.

General conclusion:

Counselling can be not merely a technical intervention but an act of dignity, resistance to stigma, and relational repair, where being genuinely heard, seen, and valued may be as transformative as behavioural change. It can be both therapeutic and socially reparative – a counterbalance to stigma, disconnection, and punitive systems. It will prove that recovery can be a mode of reconnection rather than correction and for sure can develop practical and policy implications.

## Counselling Without Boundaries: A Thematic Analysis of Counsellors' Experience of Unconventional Boundaries in the Hestia Overnight Hotel Counselling Service for Survivors of the Grenfell Fire

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Hestia's Overnight Hotel Counselling Service for survivors of the Grenfell fire was set up in response to a disaster and therefore most of the 'normal rules' of counselling boundaries could not apply. There is a gap in the literature regarding counselling in times of disasters and the ethical dilemmas that come with it. This deficit is especially great in the UK.

Using a thematic analysis, this study explores how nine counsellors experienced working within unconventional counselling boundaries in this service.

The fire occurred just before 1.00am on 14th June 2017 killing 72, injuring many more; rendering survivors homeless. By September 2017, many survivors were housed temporarily in hotels across West London; with reports of increasing emotional distress amongst residents including suicide attempts of which one was reported successful.

There seemed a desperation for an alternative to conventional counselling and psychotherapy provision which was hardly being engaged with. The community was reeling with anger at, and distrust of the local authority, which itself was staggering under acute criticism.

The local authority subsequently commissioned a counselling service to be taken to the community, and at the times when they suffered most: 8.00pm to 3.00am daily. Hestia, an established local charity was tasked with running the service.

Hestia recruited a diverse team of counsellors. Two counsellors were assigned to each participating hotel every night. They would typically set up in the hotel lobby/bar/restaurant and engage with residents who approached them.

As one of the counsellors who worked on the service, I was interested in how colleagues had experienced the work, and what, if anything, they had taken back into their 'regular' practice. Additionally, I hoped to discover what could be beneficial for the training and practice of counselling and psychotherapy, especially in responding to disasters wherein counsellors and services would need to be flexible and strive to engage meaningfully with individuals and community.

Findings indicate that the challenges encountered, and outcomes experienced, fostered a questioning of many of the rules assumed about counselling and psychotherapy especially regarding boundaries. Furthermore, they seem to validate the common factors' view on the importance of the therapeutic relationship for successful outcomes, even within an

unconventional framework.

The study raises some questions for practice, training and research such as preparedness for disaster counselling; diversity in service provision and developing further the concept of community counselling: by a community of counsellors with a community of clients in community settings.

## **In the lived experience of individuals addicted to pornography, what are the emotional and relational impacts, and how might this inform psychotherapeutic practice?**

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We aimed to illuminate the lived emotional/psychological and relational experiences of those recovering from the compulsive use of pornography. Our objective is to better inform psychotherapists who may encounter such clients.

Data-security, and participant-wellbeing were prioritised in-line with BACP research ethics (Mitchels, 2018). Our training institution's Ethics Board granted research approval prior to participant recruitment. Semi-structured interviews were conducted with four cis males who had experienced problematic/addictive use of pornography. Participation was open to all persons regardless of their self-identified gender, social-economic and/or cultural background; however, only self-identified cis males responded. Interviews were conducted using non-assumptive/inclusive language, then audio-recorded and transcribed. Data was extracted by employing Braun & Clarke's (2006) six-phase model of thematic analysis, supported by the principles of Interpretative Phenomenological Analysis (Smith et al., 2009). Respondents were offered six no-fee counselling sessions if issues arose in relation to their research participation and informed participant consent was obtained.

We relied upon participants' self-reporting which may have included unconscious-bias/emotional filtering, and our small participant group may limit generalisability (McLeod, 2003). However, the paper submitted by Ambrose (2025) might provide some triangulation to our findings.

Numerous apparent overarching themes emerged. Participants described experiencing intense shame and post-use guilt; the latter was often tied to moral or religious beliefs which in-turn fueled perpetual cycles of strict avoidance followed by compulsive relapse 'when life became overwhelming'. Participants disclosed an intense fear of exposure and judgement leading to prolonged periods of emotional withdrawal (self-isolating). The unaddressed addiction led to escalating, compulsive use which disrupted routines and contributed to a sense of lost control. All participants disclosed an emotional and physical disconnection from partners as their addiction progressed resulting in romantic relationship breakdowns. The use of pornography use was frequently described as a coping strategy to manage difficult emotions such as anxiety or inner loneliness. Our participants expressed they'd had a desire to change, also emphasising the value of being in a healing-environment in which empathy was prominent and judgement absent. Thus, allowing our participants to explore and understand the roots their addiction without over-inhibiting fear and shame blocking their process.

It seems therapists need to be highly aware of the internalised shame, emotional avoidance, and relational damage experienced by clients in this group. A non-judgemental, empathic alliance appears vital to encourage such clients to heal. Further research encompassing a wider gender-diverse participant group from differing cultural, religious and sexual-orientations might prove beneficial.

## What impact, if any, does Seasonal Affective Disorder (SAD) have on sufferers' social interactions and how might this inform psychotherapeutic practice

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We aimed to illuminate how SAD might impact on sufferers' social interactions during seasonally depressed periods, and how this might better inform psychotherapeutic practice.

Four self-identified/diagnosed sufferers of SAD engaged in semi-structured interviews which were recorded then transcribed. Our data was analysed using Thematic Analysis informed by Interpretative Phenomenological Analysis (IPA) principles (Smith, Flowers and Larkin, 2021). Ethical approval was granted by our training institution's Ethics Board before participant recruitment began, and BACP guidelines for research in counselling/psychotherapy were followed (Reeves and Bond, 2021). In considering diversity of participation, our study was open to any member of the public who suffered from SAD and elected to take part in our research. Our participants self-identified as either cis male or cis female and differed in age-range. Informed consent was obtained from participants who also received a debriefing form after interview. We included an option for participants to access six no-fee counselling sessions if issues arose due to their participation in our research. Our small sample size and the use of Thematic Analysis informed by IPA principles, which favours qualitative analysis over more quantifiable analysis, may mean our findings are not generalisable (McLeod, 2022).

Our findings appear to highlight that SAD negatively affects sufferers' social interactions in various ways. Our participants disclosed they profoundly struggle with social pressures during their seasonal depression. And it appears our participants are highly prone to self-isolate and limit their physical social interactions during such seasonally depressed periods. Our participants also disclosed the strain they experience when attempting to reconcile themselves with the reduction in their desires for social activity and the pressure they then experienced in finding ways to communicate this to members of their social circles. Conversely, those participants who had strong, empathic social networks found this helped ease the symptoms of SAD, providing stable interpersonal connections for finding alternative ways to socially engage. For example, it eased our participants distress to shift to the use of digital/virtual socialising-platforms rather than strive to engage in physical person-to-person or group contact.

Findings suggest that goal-orientated/behaviour-changing modalities might be the most effective paradigms for SAD sufferers, facilitating the identification then adaptation of clients' behavioural patterns during seasonally depressed periods. However, it may prove beneficial for practitioners to be aware such clients can derive great benefit from pre-existing strong/empathic networks, where understanding of their seasonal need to employ alternative ways to socialise is accepted and supported.

## Exploring Imposter Phenomenon in Counselling Students Through a Trauma-Informed Lens

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This qualitative study explores how counselling students experience and make sense of imposter phenomenon throughout their professional training. Drawing on a trauma-informed, person-centred framework, the research investigates emotional, relational, and systemic factors that shape students' sense of belonging, confidence, and emerging professional identity. Rather than viewing imposter feelings as individual pathology, the study positions them within broader cultural and institutional contexts.

Eleven participants from UK counselling programmes are being interviewed via Microsoft Teams, using a semi-structured format designed to foster emotional safety, autonomy, and accessibility. Interviews are conducted in private, participant-chosen settings, encouraging reflective dialogue around identity, coping strategies, and placement experiences. The interview guide was iteratively developed to support nuanced disclosures and reduce power imbalances. Data is being analysed using reflexive thematic analysis (Braun & Clarke, 2006), allowing for layered interpretation of meaning across diverse narratives.

Preliminary findings suggest that imposter phenomenon is often relational and systemic in nature. Participants describe how emotionally unsafe pedagogical practices, hierarchical power structures, and underrepresentation within training environments contribute to feelings of inadequacy and disconnection. These experiences are shaped by intersecting identities, including trauma history, class, race, and neurodivergence, and evolve over time in response to relational dynamics and institutional culture.

While online interviews may limit non-verbal nuance, they can also foster greater emotional safety and openness. Participants often report feeling more comfortable disclosing sensitive experiences in familiar environments, with reduced social pressure. Wakelin et al. (2024) note that online platforms can “offer a valid research tool that differs to that of in-person interviews,” particularly in terms of participant comfort and accessibility.

By reframing imposter phenomenon as a systemic issue, this study contributes to multidisciplinary conversations on equity, mental health, and ethical practice. It calls for support strategies that honour emotional safety, reflexivity, and lived experience – aligning with BACP's commitment to inclusive, socially just counselling. Findings will be finalised prior to dissemination and presented in full.

Ethical approval was granted by Leeds Beckett University's Research Ethics Sub-Committee (Application ID: 486018, Ref: CRN18785). Data is securely stored and anonymised in accordance with BPS and GDPR guidelines.

Keywords:

Imposter phenomenon, counselling students, trauma-informed, qualitative research, emotional safety, systemic equity, ethics

## Knowing It Doesn't Care: Perceived Empathy in AI-Generated Counsellor Voices

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Recent advances in generative artificial intelligence have made it possible for conversational systems to simulate the tone and language of counselling interactions with striking fluency. Yet the notion that an AI “therapist” might convey empathy seems paradoxical: a machine cannot care, and awareness of this fact should, in principle, diminish any sense of genuine understanding or warmth. The present study tested that assumption directly.

A between-subjects experiment ( $n = 150$ ) exposed participants to eight short empathic reflections typical of human counselling practice, all produced by a realistic AI voice generator (two younger and two older male and female voices). Participants were randomly assigned to one of three information conditions: told that the voices were generated by AI, told that they were human, or given no information. After each excerpt, participants rated the “counsellor” on competence, warmth, perceived caring for the client’s wellbeing, perceived ability to help clients achieve goals, and likelihood of choosing them as one’s own therapist (100-point scales).

Contrary to predictions, disclosure that the voices were AI had minimal effect on participants’ impressions. Ratings of warmth, competence, helpfulness and therapist preference did not differ significantly between conditions. The only significant effect was on the perception that the counsellor “cared about the client’s wellbeing,” which was lower in the AI-information group. In other words, although participants explicitly recognised that an AI cannot care, they nonetheless rated its empathic reflections as sounding just as competent, warm and therapeutically viable as those attributed to a human.

These findings suggest that the experience of empathy in counselling communication may depend more on the linguistic and paralinguistic qualities of empathic delivery than on assumptions about the speaker’s underlying capacity for care. The results invite further examination of how authenticity, relational expectation and technological mediation shape therapeutic perception. Follow-up studies now underway will compare human and AI-generated voices across more emotionally charged material.

This research was approved by the Abertay University Ethics Committee.

# Discussions

## To be or not to be: the case for being sociologically informed when researching in the counselling professions

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**Background:** The call to engage with multi/trans-disciplinary research within the counselling professions has grown. Proctor and Vu (2019, p. 271) note ‘real world problems are not confined to a single discipline’ and that by collaborating, experts in different disciplines can understand an issue in potentially new ways. This discussion focuses on the disciplines of counselling and sociology. Sociology is the study of society (Mohan, 2022), and as counselling is contextualised by the society it sits within, with an ever-increasing focus on social justice, there are clear links between the disciplines. Whilst each discipline has its own ways of understanding the world, theory and knowledge (Proctor & Vu, 2019), both disciplines sit within the social sciences and by bringing these perspectives together can bring more than the sum of each part.

**Discussion:** This session will be chaired by three people: a counsellor who has recently completed a sociologically informed piece of counselling research; a sociologist who works within an academic department that comprises both sociology and counselling; and an experienced counselling researcher and doctoral supervisor who has supervised many multidisciplinary research projects. The discussion will begin with a brief presentation of the recently completed research highlighting the specific sociological links and how these elevated the overall research. Following this, the audience will be asked to consider the opportunities within their research area/project to incorporate a sociological lens, and how their research projects might benefit from being sociologically informed. Participants will also be invited to consider what additional opportunities sociology might offer in sense-making around social justice and inclusion within counselling research.

**Audience:** Those who are curious about taking a sociologically informed approach and/or those who are planning or conducting research which could be informed by sociological literature.

**EDI:** Working from a multidisciplinary perspective, away from siloed disciplines, encourages collaboration which invites a wider diversity of people and values a diverse way of thinking. Multidisciplinary working questions the idea that one discipline holds the answers, consequently challenging the idea that one social group or identity has the right to define norms. Overall, working from a multidisciplinary perspective promotes EDI across disciplines, through diversifying who contributes to knowledge, how that knowledge is produced, and whose voices are heard.

## Relational and Psychodynamic Perspectives on Community Mental Health Transformation: Exploring a Multidisciplinary Mental Health Hub Model

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UK mental health providers are currently piloting multidisciplinary community “hub/centre” models aimed at bringing radical shifts in how care is organised and delivered. Inspired by international models such as Trieste (Mezzina, 2014), these mental health hubs aim to embed services within communities and neighbourhoods, strengthen authentic co-production, and foster collaboration across statutory and voluntary/community agencies. The York Clarence Street prototype Hub brought together NHS clinicians, social workers, social prescribers, peer support workers, and coproduced voices from the community, with an explicit emphasis on cultural change, relational working, and community involvement in service design.

This doctoral study explores the experiences of those involved in the first York hub’s development, using ethnography and qualitative interviews with additional arts-based research methods as a case study of frontline perspectives on systemic change. Participants described complex organisational and emotional dynamics arising in practice: anxieties about shifting roles, loss of or changing professional identity, unconscious defences against uncertainty, and ambivalence about partnership across institutional boundaries and cultures, the joy of involvement in and learning from service development and improvement, but also burnout and workforce pressures.

To interpret these dynamics, the study draws on psychotherapeutic theory concerning organisational and system psychodynamics (Menziés Lyth, 1960; Obholzer & Roberts, 1994; Armstrong, 2005). This theoretical lens highlights how unconscious processes and institutional histories shape relationships not only with clients but also between staff, teams, organisations, and communities. In turn, it suggests that psychodynamic and humanistic traditions in counselling and psychotherapy (Cooper, 2009; Spinelli, 2005) may have much to offer when thinking about collaborative practice, professional identity, and cultural change at a systemic level. Importantly, as these hub models expand nationally, counsellors and psychotherapists will become integral or interconnected members of their multidisciplinary teams, making it vital to anticipate both the opportunities and challenges their professional traditions may encounter in this context.

This 30 minute session comprises of a 15 minute presentation of the doctoral study journey and findings, after which delegates are invited into a structured discussion to explore:

- Opportunities and challenges counsellors and psychotherapists may face when working within or alongside community-based multidisciplinary hubs.

- How counsellors and psychotherapists may contribute to and influence wider systems thinking and community collaboration.
- How psychotherapeutic theories of unconscious dynamics, systems thinking, and relational practice inform multidisciplinary collaboration and organisational change.

It will also highlight equality, diversity and inclusion as both a live theme in the research and a challenge in collaborative system reform.

## How do we maximise the potential of advisory boards in counselling research?

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Advisory boards are increasingly used in health and mental health research to enhance relevance and ensure that studies are shaped by stakeholder perspectives. For example, Ferra et al., (2023). Yet, their use within counselling research remains minimal. A search of literature revealed only one counselling-specific example, describing advisory committees in counselling education programmes (Arnekrans, 2025) and no published studies examining project advisory boards in counselling research, although Spong (2015) explored community-based participatory research. This discussion explores the potential of advisory boards within counselling research, drawing on the authors' experience of working with a project advisory board in a 14-month study of the mental well-being of patients receiving treatment for neovascular age-related macular degeneration (Dunlop, Thurston & Lumsdaine, under review 2025). It identifies both benefits and challenges of advisory involvement, reflecting on lessons learned about the formation of the advisory board, its composition and its uses. This session aims to stimulate discussion about how counselling researchers might use or adapt advisory-board models to the relational, qualitative, and ethically sensitive nature of their work.

Discussion points for the audience to consider

- What are your thoughts and experiences of using advisory boards in counselling research?
- What image/metaphor comes to mind when thinking of an advisory board?
- What are the barriers to recruiting an advisory board for your counselling research project?
- How do you decide who needs to be involved? How do you mitigate bias and maximise equality, diversity and inclusion?
- What is the best way to maximise the potential of an advisory board in counselling research?

This session will mostly be of interest to researchers, students and those with lived experience who value participation and co-produced approaches across counselling and psychotherapy research.

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## The elephant in the room: Erotic transference and countertransference

### Kirsty Oxley

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#### Aim

To explore the subjective experience of a therapist when erotic transference and countertransference are present in the therapeutic relationship.

#### Discussion points

- What is your knowledge of the phenomenon?
- Was it discussed in your training?
- Do you feel able to discuss it in supervision?

#### Background

Erotic transference is the romanticised and sexualised desire of the client transferred into the therapeutic relationship. The erotic countertransference is the therapist's attraction to the client (Lans & Oka, 2020).

It is not wrong for a client to have eroticised feelings towards their therapist. Nor is it wrong for a therapist to feel this towards their client. Mann (2022) discusses that "erotic transference, in particular the love components, are as real as experienced outside of the analytic setting". However, when it is acted on it ceases to be erotic transference and countertransference and becomes abuse.

#### Prevalence

Vessentini et al (2022) found that 70% of therapists reported experiencing sexual attraction to at least one of their clients. Broughton (2025) discusses a 24% increase in complaints of sexual misconduct to the BACP between 2020 and 2022.

It is not a case of if the phenomenon will appear in the therapist's career, but when it will appear.

#### Guilt and shame

Previous research found that therapists felt guilt and shame when they experienced erotic transference and countertransference (Luca, 2018; Rodgers, 2011; Spilly, 2008). This could suggest why, the phenomenon is not openly discussed.

It is important as a profession that we discuss the phenomenon to help dispel the shame and guilt that therapists feel. This will help therapists feel more confident in acknowledging the phenomenon in practice, contributing to a deeper understanding of the therapeutic relationship. Building on the current research, it will contribute to a better understanding of the phenomenon in training courses. Exploring the phenomenon through the subjective experience of a therapist, it is hoped that the topic will feel more relatable and approachable to therapists.

#### Audience

This presentation will be beneficial for all members of the BACP, from trainee therapists to established practitioners and supervisors. It will be relevant to all practitioners regardless of modality.

#### EDI

The research intends to recruit participants from any gender, ethnicity or religion. This research will also be inclusive to participants with disabilities by offering online interviews, providing the interview schedule prior to the interview and allowing extra time in the interview to process information.

## Working together: seizing opportunities, overcoming barriers and maximizing impact in collaborative research groups

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Collaborative research partnerships have long been considered to have the potential to improve the relevance, value and viability of research as well as its impact on practice and policy (Garland & Brookman-Frazee, 2013).

Research knowledge is more relevant to the people it affects when those people are directly involved in its production (Smith et al., 2021). Consequently, participatory and co-productive approaches to research aim to include diverse voices through collaborative relationships between practitioners, people with lived experience, and academic researchers, sometimes spanning multiple disciplines (Soklaridis et al., 2024; Millar et al., 2024). The involvement of those directly impacted by research also promotes more just and equitable research practices and outcomes, creating real-world opportunities to contribute to knowledge and policy (Bourke et al., 2024). In addition to improving relevance and justice, collaborative research approaches can also yield novel, valuable findings and provide personal benefit for research participants (Izzidien et al., 2024).

BACP's research strategy emphasises collaboration, capacity-building and impact. Yet questions remain about the appetite among researchers and practitioners to form networks that extend beyond immediate professional or methodological interests. Effective and sustained collaboration cannot be manufactured; it emerges organically from genuine shared purpose, as seen in initiatives such as the SCORE group and TRaCCs consortium. Such endeavours demand not only shared commitment, but also sustained research expertise, administrative support, and coordinated effort to maintain momentum.

This session will be of interest to researchers, practitioners, and those with lived experience who value participatory and co-productive approaches across counselling, psychotherapy and collaborative disciplines. Attendees will explore how authentic collaboration enhances research relevance, equity, and impact, and consider what conditions enable sustainable partnerships that strengthen evidence, inform practice, and influence counselling policy.

As we consider how best to strengthen collaboration between therapists and researchers, several key questions emerge for discussion. How can we create spaces where meaningful dialogue and shared curiosity can flourish? What kinds of support, whether organisational, financial, or relational, are needed to make such partnerships viable and sustained? How might we extend our reach beyond counselling and psychotherapy to form multidisciplinary research groups that pool expertise and resources for greater impact?

## Closing research-practice gaps with research methods learning and teaching

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Research-practice gaps describe the causes and effects of research failing to penetrate practice. Such gaps have been described across several disciplines with a practice focus, such as human resources (de Frutos-Belizón et al., 2021), law (Rudd & Beidas, 2021), education (e.g. Grima-Farrell, 2018; McGann et al., 2020; Runesson Kempe, 2019), and psychology (e.g. Bearman et al., 2015; Keegan et al., 2017), including counselling and psychotherapy (e.g. Fernández-Álvarez et al., 2020; Owen, 2017; Schwarzbach et al., 2025). Wheeler and Elliott (2008) identified three primary applications of research skills: informed consumption of research evidence, evaluating practice, and carrying out research. 17 years on, where are we?

In the US and elsewhere, counselors [sic] are typically trained to a minimum of master's level (ACA, 2025), allowing more consistent application of curriculum requirements for research learning and teaching. In the UK, the wide range of qualifications permitting professional registration, from National Qualification Framework (NQF) level 4 to 8, poses challenges for positioning research skills within the profession.

Internal counselling frameworks, such as SCoPEd (SCoPEd Partnership, 2024) and professional bodies' criteria for accrediting courses, and external frameworks regulating tertiary education such as the NQF and the Research and Teaching Excellence and Knowledge Exchange Frameworks (REF, TEF & KEF), create a complex landscape in which learners and educators must navigate and position research pedagogy.

This session will provide an opportunity to discuss the contentions in teaching and learning research methods in counselling/psychotherapy training. We may wish to consider: 1) the student experience of research methods education; 2) the tensions between various regulatory frameworks; 3) the political aspects of knowledge generation and transmission; 4) the challenges faced by educators to be pedagogists, researchers and practitioners.

This discussion is suitable for all participants - by its nature the conference is research positive, so those new to negotiating the challenges of research skills are welcome, as are those with experience of both learning (i.e. students) and teaching research skills.

Intrinsic to this conversation is the considering of how power and privilege express themselves in research production, consumption and education. Who is included and excluded from accessing and participating in research (production)? How do third-sector services, starved of resources, afford to stay research informed? Can research methods instruction empower marginalised groups and, if so, how?

## Collaborative and inclusive working between counselling, housing, and progression teams in a hostel setting

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The YMCA St Paul's Group is part of the YMCA and covers some areas in London. Although the charity was founded as part of a Christian movement, its values of being loving, person-centred, community-focused, holistic and hopeful extend to people of all faiths and none.

The counselling service offers free counselling to residents. Residents have regular assistance from a housing support officer, and access to progression coaches and a chaplain.

The hostel implements PIE framework as part of the 2022 NICE guidelines on Integrated Health and Social Care for People Experiencing Homelessness - our new building in Wimbledon was designed to be a Psychologically Informed Environment.

Our teams at Wimbledon work together to provide compassionate care, echoing West (2019) on what makes an effective team in health and social care. This collaboration helps to overcome barriers in accessing counselling for some young people who have experienced homelessness (Chaturvedi, 2016).

### EDI Considerations

People have varying backgrounds and reasons to need a home at the YMCA - street homelessness, asylum, estrangement from family.

Our counselling team considers access to technology - whether residents have the means to have an online session, and a private space for remote sessions.

We consider clients' language, and work with housing officers if there is a need for translation or interpreting services.

We offer walk-and-talk therapy for residents where the intensity or power dynamic of indoor face-to-face sessions is challenging, where there is social anxiety or isolation and they might benefit from having sessions outside (Davies, 2024).

### Discussion points

How do we navigate differences between various fields' priorities and ways of working (e.g. practical, financial, growth and development, mental and physical health), and still come together to provide the most person-centred support we can for a client?

How do we hold our own, widely varied experiences of EDI, whilst supporting clients who have different experiences of inequality and inclusion from us?  
What if our experiences appear to be similar?

#### Audience

Counsellors who work in multidisciplinary settings such as hospitals, schools, universities, hospices, prisons.

Counsellors who work with client groups that could benefit from additional support, where there's a need to signpost or refer to other services or teams.

Counsellors who work with client groups where there is a wide range of differences (age, gender, sexuality, socio-economic background and current situation, ethnicity, religion, family/social network, language).

## **Integrating Within, Between, and Beyond: Can We Develop a Multilevel, Multidisciplinary Framework for Conflict Transformation in Psychotherapy, Interpersonal Relationships, and Peacebuilding?**

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Conflict pervades human experience at intrapersonal, interpersonal, and inter-community levels: from internal struggles of shame, to relationship ruptures, to entrenched group divisions (Burton, 1990). Yet conflict is not only a source of suffering—it also holds generative potential for growth, innovation, and healing. This discussion invites practitioners, researchers, and multidisciplinary professionals to interrogate how conflict transformation can be re-conceived through a systemic, multilevel lens: bridging individual psychological processes, relational dynamics, and societal structures.

Drawing on systems theory (Capra & Luisi, 2014), Harris and Cooper will begin the discussion with recent work developing new integrative frameworks that map how intrapersonal, interpersonal, and inter-community conflict processes mirror, shape, and feed back into one another (e.g., Cooper, 2023). In these models, parallel conflict development—and transformation—processes are conceptualised. Examples from fieldwork in high-stakes conflict zones will illustrate how these models are grounded in lived, practice-based insights from real-world conflict transformation contexts. In addition, these models examine processes across levels: for instance, how individual identity tensions (intrapersonal) influence relational patterns of rupture or repair (interpersonal), which in turn influence—and are influenced by—community narratives and power dynamics (intercommunity).

The discussion will explore three key questions:

1. In what ways do conflict and cooperation show analogous processes across the three levels – and what insights do such parallels afford for multidisciplinary practice?
2. How might interventions designed from a multilevel perspective differ in nature, scope, and outcomes compared with traditional level-specific approaches?
3. What are the ethical, methodological, and practical implications of designing therapy, mediation, or community programmes that purposefully transcend levels?

Attendees will be invited into interactive reflection: drawing on examples from their own practice or research. We will work together to map scenarios in which intrapersonal healing, relational

repair, and community-level transformation converge.

By exploring conflict in this way, the discussion aims to equip counselling, psychotherapy, and multidisciplinary professionals to engage with conflict more holistically, promoting sustainable transformation beyond discrete silos. The discussion thus seeks to spark new pathways for integrating inner work, relational repair, and community-wide healing in a unified approach.

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## **‘Brave and meaningful research’: Opportunities and Challenges for Student Counselling Researchers**

**Briony Martin<sup>1</sup>, Marie Jefsoutine<sup>1</sup>, Jordan Jones<sup>2</sup>, Wendy Miller<sup>3</sup>, Viks Winstanley<sup>3</sup>, Rachael Parker<sup>3</sup>, Emma Killey<sup>4</sup>, Susan Thorndale<sup>5</sup>, Lollita Masuku<sup>6</sup>, Sheryl Root<sup>6</sup>, Carolyn Gray<sup>6</sup>, Shanta Hamelijnc<sup>5</sup>**

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This 60 minutes student-led Discussion will facilitate an exploration of the challenges and opportunities of student counselling and psychotherapy research.

A recent Warwick counselling graduate described their research journey as ‘brave and meaningful’: brave because it takes courage to face the cultural and confidence barriers inherent in academic writing; meaningful because student research, often focused on deeply personal themes, can represent the culmination of the student’s personal and professional journey.

Student engagement with research is a Scope of Practice and Education (SCoPEd) framework Level B competency (BACP, 2022; Rost et al., 2025). It is widely argued that it is essential in equipping trainees to meet evolving client needs in a fast-changing society (Cooper, 2008; Vossler & Moller, 2015; McLeod, 2025). Presenting at a conference responds to Sreenan, Smith and Frost’s (Voller & Moller, 2015, p.253) top tip for students: “Pushing yourself to talk to people about it is good.” For many years Warwick counselling tutors have been developing ways to engage mature undergraduate students in research. Our annual student-led research conference enables graduating students to disseminate their ‘brave and meaningful’ work and discuss their honest experience of the research journey, leading to increased enthusiasm and engagement in upcoming cohorts. We would like to share this experience with BACP peers.

In collaboration with tutors, a group of Warwick students with lived experience of undertaking undergraduate counselling research, will present snapshots of their work in progress, share reflections on the research process and how it contributes to therapist professional development, and facilitate a discussion around the issues raised with the in-person delegate audience. This Discussion will appeal to student conference attendees, as well as therapy educators, and has potential to inspire and build confidence amongst students to engage with and in research.

Discussion points:

How do you experience ‘research’ as a counselling student?

What barriers to engaging in research have you faced?

What are the joys and opportunities of research as a student counsellor?

What do you need from your training, and from the wider profession, to support you to become active in research?

Research snapshots will explore therapist experiences across a range of topics, many with an explicit focus on equality, diversity and inclusion. Including student voices in conference presentations is itself a collaborative and inclusive practice and widens participation in a power-holding aspect of the counselling profession.

## Stepping down from the ivory tower: how does our profession best combat the impact of social inequalities on mental health?

**Banjo Aromolaran, Elizabeth Wilson**

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The case for social justice to be considered the fifth force among counselling paradigms, by acknowledging a connection between issues of power, privilege, and oppression and their negative impact on mental health, is strong (Toporek, et al, 2006; Fouad, et al, 2006; Smith, et al, 2009, etc.) as current paradigms have tended to focus on the individual without regard for environmental factors (Ratts, 2009; Aromolaran & Wilson, 2024, etc). This paradigmatic shift places the onus on mental health professionals to expand their role to include advocacy as a way of addressing environmental and contextual social inequalities (Lewis & Bradley, 2000; Lee & Hipolito-Delgado, 2007; Vera & Speight, 2007). In developing effective interventions, we need to evaluate barriers to authentic and meaningful inclusion (Bansal et al, 2022; Bleich et al, 2012). One such barrier is the woeful lack of inclusion of service users in policy (consulted in only 16% of decisions, (Lowther-Payne et al, 2023). Others include stigma, shame, fear, denial as well as broader systemic issues such as long wait times and accessibility (Schlaffer et al, 2022).

As psychotherapists, we wished to combat mental health inequalities in one of the poorest boroughs in the UK, by offering mental health services, including counselling, via the university where we work. First, we engaged the local community in a social mapping exercise to investigate key barriers to access and to discover what services the local community wanted rather than what we assumed they needed. The results were sometimes surprising and raised questions as to how our profession, not noted for its diversity, should best combat inequalities:

1. How can we engage with our local communities to find out what is needed in terms of mental health provision and what people want?
2. How can we recognize and remove barriers to access?
3. How can we develop an attitude of collaboration and co-creation of mental health provision within marginalised communities which guarantees legacy rather than superficial and fleeting provision?
4. How useful can social mapping be to community engagement in the development of services which meets local needs?

We anticipate this discussion will interest not just policy makers and those (like the authors) who have access to facilities which could be used by the local community, but to all colleagues who wish to give back to their community, improve mental health for all and combat social injustice wherever they find it.

## Discussion: Nutritional Psychiatry in Psychotherapy: Evidence, Experience, and Ethical Practice

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In recent years, the emerging field of nutritional psychiatry has highlighted the significant bidirectional link between diet and nutrition and mental wellbeing. While research increasingly demonstrates positive associations between better diets and better mental health outcomes (Jacka et al., 2017; O'Neil et al., 2024), the translation of this evidence into psychotherapeutic practice remains limited and inconsistent (Terry & Reeves, 2015; Leonard, 2023). Psychotherapists frequently report client questions about food and mood, yet few receive formal training or guidance on how to address these issues ethically and effectively within their scope of practice.

This discussion draws together findings from several related works, including the author's earlier study exploring psychotherapists' use of nutrition in therapy (Leonard, 2023), preliminary insights from the author's ongoing PhD project involving international focus groups with mental health professionals, and a forthcoming scoping review mapping knowledge, attitudes, and practices regarding nutrition in mental health care. Together, these studies highlight both interest in, and uncertainty around, NP integration in psychotherapy, raising questions about training, professional boundaries, and ethics.

The session will begin with a brief overview of NP research relevant to psychotherapy, followed by a structured discussion exploring the following:

1. How might psychotherapists/counsellors ethically incorporate nutrition-related discussions into therapeutic work?
2. What training, competencies, or interprofessional collaborations are needed to support this?
3. How can the integration of NP approaches promote (or possibly threaten) equality, diversity, and inclusion in therapy, given differences in cultural food practices, socioeconomic barriers, and the lived experiences of clients?
4. What research priorities should the psychotherapy community consider to guide evidence-informed and inclusive practice in this evolving area?

The discussion will be of interest to psychotherapists, counsellors, educators, and researchers engaged in lifestyle-based approaches to mental health, as well as professionals interested in interdisciplinary collaboration between mental health and nutritional sciences.

Issues of equality, diversity, and inclusion (EDI) will be addressed throughout the discussion by considering nutrition in the context of cultural identity, financial inequality, and accessibility of dietary guidance. The session aims to facilitate critical reflection and shared learning around how

NP can inform, complement, and potentially support psychotherapeutic practice in an evolving mental healthcare landscape.

# Methods Workshops

## How I Learned To Stop Worrying and Love Heuristic Research

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### 1. Topic

This workshop offers an introduction to the fundamentally collaborative world of heuristics - the qualitative methodology pioneered by Clark Moustakas. The heuristic approach aligns strongly with counselling and psychotherapy, with its direct engagement, valuing of participants as co-researchers, and reliance on intuitive, reflective, processing - all natural aspects of working with clients.

### 2. Learning outcomes

The session will help participants:

understand the qualitative methodological tradition of heuristic research;

distinguish heuristic research from other qualitative traditions;

identify methods of data collection, analysis, and rigour unique to this approach;

appreciate the distinctive value and importance of heuristic research in counselling contexts.

### 3-4. Activities and structure

This interactive workshop will combine experiential activities, reflection, and discussion, drawing on the facilitators' own recent research, publication, and research supervision experience as well as contemporary developments in the field (eg: Ings & Tudor, 2025). After an initial introduction, framing heuristic research as a qualitative tradition distinct from IPA and other approaches, we will:

Invite attendees to notice a "felt-sense" area of curiosity they could not easily bracket off. Paired and group reflection will link this experience to Moustakas' notion of initial engagement and to the centrality of immersion in heuristic research.

Outline the stages of heuristic inquiry (immersion, incubation, illumination, explication, creative synthesis) in a presentation interwoven with attendees' reflections.

Demonstrate creative approaches to analysis and presentation (eg: cut-up techniques, poetic synthesis) to illustrate how heuristic work activates both analytic and imaginative processes.

Discuss issues of rigour, trustworthiness, and ethics, situating heuristic research within a “Big Q” qualitative paradigm (Braun & Clarke, 2006; Vossler & Moller, 2014), which emphasises transparency and authenticity.

Invite attendees to engage with a second exercise focused on transforming their initial reflections into a new form (e.g. poem or image), offering a first-hand taste of heuristic creative synthesis.

## 5. Audience

This workshop will appeal to anyone seeking an immersive approach to qualitative research, particularly when they cannot easily bracket themselves off from a chosen topic. It will also interest practitioners curious about methodologies that explicitly value creativity, subjectivity, and personal engagement.

## 6. Consideration of EDI

Heuristic research draws on values resonant with multiple indigenous and non-Western traditions and avoids privileging a white, Western epistemology. It requires engagement with our own biases and positionalities without the pretence of neutrality, creating an inclusive space for diverse voices and perspectives.

## Relational, Embodied, and Qur’anic Methods in Heuristic Enquiry: A Workshop for Integrating Islamic and Western Psychotherapies

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This workshop introduces participants to innovative methods used in heuristic enquiry, focusing on relational, embodied, and Qur’anic-informed approaches to understanding self, experience, and therapeutic practice. Drawing on my PhD research into the lived experience of being ‘Alaq’—a Qur’anic metaphor for a clinging, evolving form—the session demonstrates how reflective transcription, relational embodiment, and Tadabbur (deep Qur’anic reflection) can be applied to psychotherapeutic research to explore inner experience, identity, and spiritual integration.

Participants will be guided through experiential exercises, including:

- Practicing relational and embodied transcription, attending to transference and countertransference through, thought, emotional response and somatic cues during narrative reflections.
- Engaging in guided Tadabbur as a method to explore personal and co-researcher experiences in dialogue with text.
- Reflecting on ethical considerations, including co-construction, relational justice, and culturally sensitive engagement in research using the Gestalt 2 chair method with research resistance.

The workshop demonstrates how these methods foster co-constructed meaning-making and ethical engagement with participants, offering practical tools for researchers and practitioners seeking to integrate spiritual, embodied, and culturally grounded methods into counselling and psychotherapy research. Each activity will include facilitated reflection and discussion on methodological strengths, limitations, and adaptations for different populations or research questions.

Learning outcomes: Participants will be able to

1. Apply relational, embodied, and Qur’anic-informed methods in heuristic or other qualitative research designs.
2. Understand ethical and relational considerations in co-constructed research with spiritually and culturally diverse participants.
3. Critically evaluate the strengths, limitations, and applicability of these methods for interdisciplinary psychotherapy research.

Audience: Suitable for researchers, trainees, and practitioners interested in qualitative methods, heuristic enquiry, spiritually-informed psychotherapy research, and culturally responsive methodological innovation.

Ethical considerations: The methods are presented solely as teaching tools; no data collection will occur. Examples are drawn from anonymised research materials with prior participant consent. Ethical principles of co-construction, reflexivity, and relational responsibility will be emphasised throughout the session.

## Developing good practice in conducting a qualitative meta-synthesis

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Learning outcomes:

The session will help you:

- Understand the rationale, purpose and potential of qualitative meta-synthesis (QMS) as a method for secondary analysis of qualitative research;
- Identify and practise the core steps in conducting a systematic review and QMS, from question formulation to synthesis and interpretation;
- Gain familiarity with practical tools for screening, extraction, and quality assessment, and consider international standards for reporting;
- Critically reflect on the strengths, limitations and ethical considerations of synthesising qualitative studies in counselling and psychotherapy research.

Structure and overview of content:

The aim of this workshop is to support counselling and psychotherapy researchers to develop good practice in conducting systematic reviews with focus on qualitative synthesis of primary research studies in specific fields of inquiry. After a brief overview of the key aspects and steps of systematic reviews and qualitative synthesis, participants will engage in hands-on exercises using excerpts from the facilitators' own recent systematic reviews/QMS. These practical tasks will invite participants to:

- Focus a research question (small-group mapping exercise);
- Explore screening and data extraction (simulation task in pairs);
- Identify patterns and higher-order themes (hands-on coding and synthesis task)
- Assesses study quality and trustworthiness (mini group debate using an appraisal checklist).

The workshop will be flexible and responsive to participant questions, allowing adaptation to different levels of experience. It will conclude with a plenary discussion on the strengths and limitations of systematic reviews and qualitative synthesis in counselling and psychotherapy research, encouraging reflection on how these approaches can inform evidence-based practice.

Target audience:

The workshop is designed for counselling and psychotherapy researchers, practitioners, and postgraduate students interested in conducting or critically evaluating qualitative meta-syntheses. Equality, diversity and inclusion considerations:

All activities are optional and designed to support a range of learning preferences and access needs. Participants will have opportunities to engage through written, spoken, and small-group modes. Materials will use inclusive examples and language, recognising diversity in research topics, participant populations, and researcher positionalities. The workshop will encourage reflection on how issues of identity, privilege and marginalisation may shape both primary research and synthesis interpretations. Participants are invited to contact the facilitator in advance if any additional accommodations would enhance their participation.

## Developing as a Reflective and Compassionate Lived-Experience Researcher

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This methods workshop explores how lived-experience researchers can integrate reflective practice and compassion-focused approaches into their work, supporting both research integrity and researcher wellbeing.

Learning outcomes:

By the end of the session, participants will:

- Understand the importance of reflection in lived-experience research.
- Identify specific challenges and ethical tensions faced by lived-experience researchers.
- Explore how compassion-focused approaches (Gilbert, 2014) can enhance engagement and wellbeing.
- Apply reflective practice to balance compassion for self and others throughout the research process.

The workshop draws on the researcher/presenter's dual perspective as a long-term recipient of disability research and evaluations (over 30 years) and a clinician-researcher with 20 years' experience, drawing on a PhD that applied co-production with military veterans. Through this work, the researcher developed the 7Ps framework, a reflective tool designed to her as a lived-experience researcher in navigating the unique pressures of participatory research. The seven elements: Purpose, Principles, Positioning, Power, People, Places, and Pressures, emerged in response to tensions and insights during co-production, and complement existing toolkits that primarily support organisations.

Rooted in Compassion-Focused Therapy (Gilbert, 2014), the framework can also integrate the three-circle model of emotion, threat, drive, and soothe, to explore how internal and external factors (e.g. power dynamics, inclusion/exclusion) influence compassionate flow during research. Recognising and reflecting on these patterns enables researchers to take action that supports ethical engagement and personal wellbeing.

Workshop structure:

The 60-minute session will intersperse brief presentations with experiential and reflective exercises. Participants will:

1. Reflect individually or in pairs on their lived-experience in research or service engagement using the compassion model.

2. In small groups, apply the 7Ps framework to consider their own researcher context and potential threats, drives, and soothing strategies.
3. Share insights to co-create a set of practical strategies or a “mini-toolkit” for compassionate reflection in lived-experience research.

Throughout the session, participants will be encouraged to consider how their own lived-experience, positionality, and the interplay of equality, diversity, and inclusion (EDI) may influence and challenge compassionate flow. The workshop welcomes trainees, practitioners, and researchers in counselling, psychotherapy, and related mental health fields who engage in co-production or participatory research. EDI principles underpin the approach, valuing every participant’s experience and fostering a psychologically safe, inclusive learning space.

Ethical approval for the PhD was granted by Leeds Beckett University Local Ethics Committee.

## A new, integrated research methodology for therapists: Linking the philosophies of Cognitive Analytic Therapy and qualitative research

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As a practitioner-researcher, this is the qualitative research framework you have been looking for.

This workshop explores the philosophical foundations of Cognitive Analytic Therapy (CAT) (Ryle and Kerr, 2022; Brummer et al., 2024) and their resonance with qualitative research paradigms. While CAT is often viewed as a model of clinical practice, it is underpinned by a framework of relational epistemology—that is based in social constructivism (Vygotsky and Cole, 1978), symbolic interactionism (Mead, 1934) and intersubjectivity (Bakhtin, 1986) all of which emphasise the co-creation of meaning. These same philosophical principles underpin many qualitative approaches to knowledge generation, offering a concrete way to bridge therapeutic understanding and research methodology.

CAT's emphasis on reciprocal roles, dialogical self-processes, and reformulation reflects a view of human experience as relationally constructed and context-dependent. Likewise, qualitative research traditions are based on a relativist or subjective ontology which states that reality is created by the meanings individuals or groups assign to the phenomena and is constantly changing. Hence, this methodological approach offers an ontologically and epistemologically grounded research methodology which has the acknowledgment and importance of difference and diversity at its core.

This workshop invites participants to examine how CAT's philosophical stance can deepen our understanding of qualitative inquiry as a relational and ethical practice.

Through theoretical input, with examples from Rosemary's recent doctoral research (Parkinson, 2024 <https://ueaeprints.uea.ac.uk/id/eprint/98420/>) and including active participatory opportunities for small group self-reflection, participants will explore:

- How CAT's philosophical roots in Vygotskian, Bakhtinian, and dialogical traditions align with interpretivist and constructivist research paradigms.
- The implications of CAT's relational ontology for researcher reflexivity, participant engagement, and co-construction of meaning.
- Researcher reflexivity as a reciprocal and reformulatory process that parallels therapy itself.

By the end of the workshop, participants will have a clearer understanding of how CAT's philosophical assumptions offer not only a therapeutic model but also a framework for engaging in ethically grounded, relational, and meaning-oriented research.

This session is aimed at counsellors, psychotherapists, supervisors, and practitioner-researchers who are interested in conducting qualitative research. In particular it offers practitioner-researchers an off-the-shelf methodology aligning with their therapeutic philosophical stance allowing them to conduct, analyse and write-up research in an authentic way.

## **Bridging Phenomenology and Causality: Introducing Critical Realist-Interpretative Phenomenological Analysis (CR-IPA)**

**Prajna Mohan Jois**

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This workshop introduces Critical Realist-Interpretative Phenomenological Analysis (CR-IPA)—a methodological integration developed through doctoral research exploring wounded-healer therapists’ experiences of working with traumatised young people. Drawing on Fletcher’s (2017) influential articulation of how Critical Realism (CR) can be used as a method of qualitative inquiry, this workshop extends CR into the domain of counselling and psychotherapy research by bridging sociologically focussed critical-realist methodology with psychologically focussed Interpretative Phenomenological Analysis (IPA). CR-IPA thus enables psychology to engage in multidisciplinary and interdisciplinary dialogue, situating lived experience within the structural conditions that cause and shape it.

In line with the conference theme of collaboration for a just society, CR-IPA values participants’ subjective voices while analysing the contextual forces that influence them, thus enabling interdisciplinary dialogue (Wiltshire, 2018). The approach integrates the stratified ontology of CR - distinguishing the “empirical”, “actual”, and “real” layers of reality - with IPA’s idiographic commitment to understanding the meaning of lived experience (Smith et al., 2022). Analysis proceeds through the identification of demi-regularities (tendencies or recurrent experiential patterns), followed by abductive reasoning - the theoretical re-description of data through relevant psychological concepts - and retroduction, the inferential move toward underlying causal mechanisms (Bhaskar, 1978; Fletcher, 2017).

The workshop combines short presentations with experiential exercises. After a brief overview of philosophical compatibility between CR and phenomenology, participants will be introduced to a seven-stage CR-IPA process: (1) Establishing philosophical positioning; (2) Forming explanatory research questions; (3) Conducting data collection sensitive to both lived and contextual layers; (4) Idiographic coding of experience; (5) Identifying demi-regularities across cases; (6) Engaging in abductive and retroductive analysis; and (7) Synthesising findings through reflexive evaluation. Using anonymised transcript excerpts, participants will practise moving from descriptive codes to explanatory interpretations.

Learning outcomes:

1. Understand the philosophical and methodological coherence of CR-IPA.
2. Practise abductive and retroductive reasoning within phenomenological analysis.
3. Recognise how CR-IPA supports epistemic and relational justice by linking individual experience to systemic context.
4. Reflect on reflexivity and positionality when adopting a critical-realist stance.

Equality, diversity and inclusion: CR-IPA promotes epistemic justice (Fricker, 2007) by legitimising diverse ways of knowing and by locating participants' narratives within structural and cultural conditions that shape experience and interpretation.

This workshop equips participants to design and analyse qualitative research that is both phenomenologically sensitive and critically explanatory.

## Introducing Post Qualitative Inquiry (PQI)

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Participants in this workshop will be introduced to Post Qualitative Inquiry (PQI). Concepts will be illustrated. Examples from our research will encompass—human, non-human, and more-than-human—encouraging attendees to consider their own inquiry.

Experiences will prompt participants to consider research from alternative view(point)s. Attendees will be asked to (re)imagine collaboration for a just society.

It is open to those seeking a fresh perspective on research and curious about non-traditional methodologies.

Key Questions we will explore in this session:

- What is data?
- Where do we find our findings?
- Who participates in research?
- What don't we see in research?
- What if therapy research was not client centred?

Workshop Structure

- Time, Space, Artifacts and Us
- A bit about us
- Experiences: Participants will be asked to view the world through different lenses by engaging with key ideas and concepts related to PQI.
- (Post)Everything - Theoretical Groundings
- Post-Intentional-Expression - Art/Expression & Philosophical Concepts
- Hello and welcome...

This workshop makes no promises about how you will experience it.