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## Dr Nick Midgley

Associate Professor, University College London, and co-director of ChAPTRe

### Keynote presentation

#### What can therapists learn from an RCT?

Many counsellors and therapists are understandably cautious about the value of randomised controlled trials (RCTs). As well as the costs involved, there are concerns that RCTs focus narrowly on building evidence for specific brands of therapy, and tell us little that can be of broader value to practitioners wanting to better understand what makes therapy effective (or indeed, ineffective).

In this paper, I will speak about our experience of working on the IMPACT study, a large, NIHR-funded clinical trial evaluating three talking therapies designed to support young people with depression. By including process research (including the study of therapy tapes) as well as qualitative interviews into the design of the RCT, I hope to illustrate some of the clinical value of the study. These findings allow us to go beyond the question, 'which therapy is most effective?', to exploring questions including how and why therapy works. In doing so, I hope to demonstrate what therapists can learn from a randomised controlled trial.

# Papers

# Robert Elliott

## Paper

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### **The Effectiveness of Humanistic-Experiential Psychotherapies: A Meta-analysis Update.**

**Keywords:** Humanistic-experiential psychotherapies; outcome; meta-analysis; evidence-based treatments.

**Aim/Purpose:** Using current meta-analysis techniques, we updated our previous meta-analysis of outcome research on humanistic-experiential psychotherapies (HEPs).

**Design/Methodology:** We used a systematic, inclusive quantitative meta-analysis strategy looking at three main lines of outcome evidence for humanistic-experiential forms of psychotherapy or counselling (e.g., person-centred, supportive, emotion-focused): (1) pre-post effects; (2) controlled effects vs. no-treatment; (3) comparative studies vs non-HEPs. Starting with more than 32,000 potential sources from 2009 - 2018, we used independent judges to do the final selection of studies, audited all study analyses, and constructed a PRISMA diagram tracking our screening of studies. We looked at both completer and intent-to-treatment designs, focused on primary outcome measures, weighted effects by inverse error, used a random effects model and restricted maximum likelihood analyses, and looked at both main and moderator variable effects. Results were compared to our previous meta-analysis which had covered nearly 200 outcome studies from 1948 - 2008.

**Results/Findings:** We identified 91 recent outcome studies, with the following results: (1) HEPs were associated with large pre-post client change ( $d = .86$ ). (2) In controlled studies, clients in HEPs generally showed large gains relative to clients who received no therapy (.88). (3) In comparative outcome studies, HEPs in general were statistically and clinically equivalent in effectiveness to other therapies (-.08). (4) Overall, CBT appeared to have an equivocal advantage over HEPs (-.26). However, these studies were overwhelmingly delivered by CBT researchers in largely non-bona fide versions.

**Research Limitations:** The overwhelming negative researcher allegiance in HEP vs CBT comparative studies made it impossible to fully control for researcher allegiance. We found a dearth of evidence using intent-to-treat designs and many instances of researchers making misleading claims about these designs. Although we attempted to use state of the art meta-analytic strategies here, we now suspect that evidence reviews such as ours will be insufficient to influence review panels including NICE.

**Conclusions/Implications:** Although our results were slightly less positive than in our previous meta-analysis, the overall picture is that HEPs are effective and need to be included in treatment guidance such as NICE. However, we believe that evidence reviews like this one need to be accompanied by political efforts to influence mental health policy.

# Kimberly-Anne Evans

## Paper

**Professional Role:** Psychotherapist

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**Black Minds Matter: What is the Impact of Colour Blindness in Therapy on Black African and Afro-Caribbean Clients? A Heuristic Study.**

**Keywords:** Colour blindness, black clients.

**Aims/Purpose:** To explore what (in)visibility means black clients in the context of a therapeutic relationship, to give black clients a platform to be seen and heard. Also, to raise professional awareness amongst white person-centred therapists regarding interracial therapy.

**Design/Methodology:** My research was conducted through a heuristic inquiry which is a qualitative methodology. Elements of my design utilised Moustakas' (1990) Stages of a Heuristic Enquiry and my data analysis process was based on Spinelli's (2005) Phenomenological Research Data Analysis Method.

**Ethical Approval:** I received ethical approval from my university tutors through a research proposal and an in-depth ethical approval form, which had to demonstrate how I would meet UKCP and BACP's ethical requirements in each aspect of the work; from advertising for participants to dual relationships and self-care.

**Results/Findings:** African and Afro-Caribbean clients who experience colour blindness in therapy find that aspects of their experience are missed and not fully understood by their therapist. Aspects of the clients' self are unexplored, and there is curiosity about what could come from having open discussions about race. Most clients feel silenced or begin to censor what they bring into therapy and specifically their openness to talk about race is impacted. In addition, some clients feel the impact is minimal when their experience of discrimination and racism in life has been minimal.

**Research Limitations:** Representation was limited in the findings as all the clients were women of Afro-Caribbean descent. And all the co-researchers have varying levels of person-centred therapeutic training, therefore there was some bias regarding language, and them being able to interpret their experience theoretically, which makes them different to 'normal' clients.

**Conclusion/Implications:** For a black client to get the most of their therapy, race needs to be discussed. However, the question is when and how? Conducting my research through a person-centred framework it was clear that not discussing race and racial difference can have an impact on power dynamics and begs us to review the sufficiency of Rogers' six therapeutic conditions. This research also highlighted how nuanced this topic is depending on each client's life experience.

# John Hills

## Paper

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**Doing practitioner research: A case study in the use of subjectivity and the self as research instrument in theory building.**

**Keywords:** Practitioner research, autoethnography, subjectivity, theory building, change processes.

**Aim/Purpose:** The present study provides a retrospective account of the researcher's dual role within their PhD research project: as a therapist researching their own clinical work through the production of a multicase study. The purpose of the project was to generate models of therapeutic change however what also came into focus were epistemological questions about the role of subjectivity in developing theory. A parallel thesis emerged - an autoethnographic account in which the researcher's uses of supervision, personal therapy, dreams and life events, including the death of his father, intersected with formal stages of theory development.

**Design/Methodology:** In the study, the four participant clients received their case reports and made their own commentaries which influenced emerging theory. Other voices in the theory building process included the researcher's clinical and academic supervisors. Rather than committing to one established method 'brand', through the production of 'mini-studies' the researcher sought to demonstrate the use of methods as analytic tools, enriching the quality of the analyses but not usurping the sovereignty of the researcher over their own project.

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

**Results/Findings:** The emergent model centred upon the development of internalised, cognitive maps - of self, others and world - as platforms for therapeutic change. The theory was observed to develop through four chronological phases and in each phase the emergent template was layered onto the previous model. Formal theory was associated with recurrent motifs from the researcher's dreams: of navigation along roads, rivers and in flight, symbolising directionality and the role of therapist as fellow traveller.

**Research Limitations:** Just as the products of this research were embedded within their unique context, so the transferability of this approach to practitioner research will depend on the degree of fit with other practitioners researching their own practices. This is influenced by parameters including the nature of the research question, the therapist's philosophical and theoretical stance, and their practice setting.

**Conclusions/implications:** The study highlights the use of self as research instrument and offers a case study in how practitioners asking questions about their everyday practice might structure their investigations and deliver their findings.

# Kate Hoyland

## Paper

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**The bodily experience of those bereaved through the Grenfell Tower fire: an interpretative phenomenological analysis.**

**Keywords:** Bereavement, trauma, embodiment, body.

**Aim/Purpose:** Stories of the body in traumatic bereavement: learning from the bodily experience of those bereaved through the Grenfell Tower fire. The aim of this research is to explore the bodily experience of some of those bereaved in the Grenfell Tower fire, in order to address a lack of research on the lived bodily experience of those involved in a major incident.

**Design/Methodology:** Data were collected via semi-structured interviews with four women bereaved in the fire and were analysed using Interpretative Phenomenological Analysis (IPA).

**Ethical Approval:** This research gained approval from The Metanoia Institute via Middlesex University Board of Ethics; and the Cruse Bereavement Care Board of Research ethics.

**Results/Findings:** Four Master Themes, comprising nine Subordinate Themes, were found. Findings suggest that traumatic loss can be both experienced and expressed in the body; that issues of proximity and physical location have implications for how trauma is processed; that questions of power and trust in the context of a major incident have repercussions for the body; and that a reconnection with the body may be part of a healing process.

**Research Limitations:** this was by its nature a small-scale study, considering the experience of four participants in depth rather than taking a broad overview. Cultural differences, and the fact no participants spoke English as a first language, were further limitations.

**Conclusion/Implications:** The study concludes that stories of the body need to be taken seriously following any major incident. Further research might explore in greater depth the implications of location, power and trust, and the body's role in recovery.

# Duncan McCaig

## Paper

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### The effectiveness of counselling in private practice

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

**Aim/Purpose:** Regular tracking and feedback on client progress has been shown to improve outcomes and reduce the number of cases deteriorating and/or dropping out of therapy. However, evidence from the private practice sector has been limited. This pilot study aimed to determine the acceptability of using outcome measures in private practice, as well as the effectiveness of counselling on psychological outcomes (i.e., levels of psychological distress, and depressive and anxious symptoms).

**Design/Methodology:** The current project is on-going and, to date, has collected data from 41 therapists about 451 clients and 3739 therapeutic sessions. This includes information on a client's demographics and presenting issue(s). Participating practitioners also ask clients to complete the CORE-10 (a measure of psychological distress) at every session, as well as the PHQ-9 (measure of depression) and/or GAD-7 (measure of anxiety) where clinically appropriate. The resulting data are statistically analysed to investigate the extent to which counselling affects scores on these measures. Additionally, the practitioners are asked to complete quarterly surveys to investigate the acceptability of completing outcome measures for both the practitioners themselves, and their clients.

**Ethical Approval:** This research was undertaken in line with the independent ethical review procedure as outlined in the Ethical Guidelines for Research in the Counselling Professions.

**Results/Findings:** The majority of participating practitioners indicated that: 1) using outcome measures fit with their therapeutic style; 2) they asked their clients to complete outcome measures at every session; and 3) most clients agreed to complete these and to contribute their data for research purposes. By pooling data from all clients who had attended at least six sessions of counselling, a reduction in psychological distress, anxiety and depression was observed between the first and sixth therapeutic session.

**Research Limitations:** As this was a naturalistic study, there was no non-intervention comparison group, making it difficult to know what change could have been expected without an intervention.

**Conclusions/Implications:** Counselling in private practice has the potential to contribute to the evidence-base for the counselling professions, which has often relied on data collected from statutory services. This research can help us to understand whether counselling in private practice meets different client needs to those accessing statutory services, and how outcomes compare across the two sectors.



# Amanda McGarry

## Paper

**Professional Role:** Counsellor

**Affiliation/Institution:** Amanda McGarry Counselling

**Exploring suicide potential and the actualising tendency: A qualitative study of suicide notes.**

**Keywords:** Suicide, actualising tendency, suicide notes, person-centred approach, stanza analysis.

**Aim/Purpose:** The aim of the research was to establish if, within person-centred theory (PCT), suicide could potentially be considered an expression of the actualising tendency (AT). Within the theoretical boundaries of the person-centred approach (PCA) the research raised questions which included the clarity of Rogers' (1959) meaning in relation to 'perverse and unusual conditions' for those that may '...actualise their potentiality for pain or self-destruction'.

**Design/Methodology:** This research was conducted from a qualitative perspective using forms of analysis requiring interpretation by the researcher. A sample of 31 suicide notes were analysed: firstly using stanza analysis; and secondly narrative analysis.

**Ethical Approval:** Granted by University of Chester.

**Results/Findings:** The research concluded that there was potential for suicide to be an expression of the AT. The findings were myriad covering areas of theory, practice and policy. Theoretically it raised questions on the use of the terms 'constructive' and 'destructive' in relation to an individual's behaviour; in relation to practice the importance of supervision was underlined when working with suicidal clients, to provide support with regard to the counsellors own views and any feelings of incompetence which may influence the frame of reference of the work; in relation to policy the research highlighted the complexity for counsellors who are required to practice in line with the Mental Capacity Act (2005), the current government prevent agenda and the fundamental principles of anti-power and anti-expert within the PCA.

**Research Limitations:** Given the interpretative nature of the analysis, the subjective nature of this might have introduced bias. Additionally, the suicide notes - the data for the analysis - were published in 1957 and thus might not represent conceptual and cultural ideas more prevalent today.

**Conclusions/Implications:** The findings of this research have implications for those who work from a person-centred perspective. In particular in regard to the clarification of behaviour as 'constructive' or 'destructive', noting that the 'categorisation' of suicide may not be as clear as may first be perceived. This may require practitioners to thoroughly explore their own position and potential fears in relation to suicide in order to support their clients within a person-centred framework.

# Naomi Moller and Andreas Vossler

## Paper

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**What do we know about online therapy?**

**Keywords:**

In the context of the COVID-19 pandemic and implementation of social distancing measures in many global contexts, face-to-face therapy is neither safe nor possible. As a result, there has been a mass migration of therapeutic practice online, with therapy being conducted through video-conferencing platforms as well as audio-only/telephone and text-based (e.g. instant messaging and email) mediums. Yet few counsellors and psychotherapists will have had training or experience in working online. Further, the literature on online therapies commonly references the suspicion, doubt and disdain for digitally-mediated psychological therapies by practitioners and their concerns around topics such as ethics, therapeutic relationship and confidentiality. In this context, it is apposite to ask, 'What do we know about online therapy?'

This talk will seek to provide some answers to that question, by providing an overview of the research (where it exists) related to five key questions:

- Does online therapy work? (Are therapy outcomes equivalent to face-to-face counselling?)
- How do clients and practitioners experience online therapy?
- What happens to the therapeutic relationship in online therapy?
- What about ethics and risk in online therapy?
- How should online therapists be trained?

The talk will conclude by offering the speakers' perspective on the extant research on online therapy in terms of what it does - and doesn't - tell us about online therapeutic practice.

# Krystal Scott

## Paper

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**Therapist perspectives on the use of congruence with children in school-based counselling.**

**Keywords:** Congruence, children, school-based counselling, insightful congruence, intrapersonal congruence.

**Aim/Purpose:** The concept of congruence and its use within the therapeutic relationship is discussed throughout the counselling literature, but there is no research which looks at how congruence is understood and used with children in school-based counselling. This research aimed to bridge this gap by exploring how therapists perceive and use congruence with this client group.

**Design/Methodology:** This study used phenomenology as a philosophical approach. Semi-structured interviews were conducted with four qualified and practicing person-centred or integrative counsellors. These participants were currently working with children in a school-based counselling service or had been within the last two years. The interviews were analysed using Interpretative Phenomenological Analysis (IPA).

**Ethical Approval:** This study received ethical approval from the university Ethics Panel and also adhered to the BACP Ethical Framework for Counselling Research.

**Results/Findings:** The analysis resulted in two superordinate themes which are: Intrapersonal Congruence and Navigating Dual Terrains in the School Environment. Intrapersonal Congruence was the more dominant theme and was made up of multiple ordinate themes. This paper highlights two of these in detail: Insightful Incongruence and Barriers to Intrapersonal Congruence. The participants identified that whilst it is vital that they are inwardly congruent regarding their inner experience, it is not always appropriate to voice this to children and young people - thus emphasising the significance of intrapersonal congruence. Emerging from this is an element of insightful incongruence - participants chose to withhold strong feelings and emotions or communicate them in a way which was not entirely congruent, owing to the nature of the relationship with the young client.

**Research Limitations:** This is a small-scale study therefore generalisability is limited. This research examined only one of the six necessary and sufficient conditions that relates to person centred theory and practice. Furthermore, the perspective of the children and young people themselves was also missing.

**Conclusions/Implications:** This study contributes to the debate around the communication aspect of congruence and has implications for counselling pedagogy, particularly person-centred training with children and young people. Trainee therapists are likely to benefit from exploring the role of congruence when working therapeutically with children.

# Posters

# Letitia Ash-Lameer

## Poster

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**A journey through bereavement by suicide- an initial exploration using Intuitive Inquiry.**

**Keywords:** Postvention, suicide bereavement, suicide survivor, intuitive inquiry, transpersonal.

**Aim/Purpose:** This research is an initial exploration of data sources and method to assess its suitability for a larger study. It concerns the researcher's personal experience of bereavement through the suicide of her daughter and her subsequent grieving, meaning making, transformation, and growth. The researcher is a practising integrative counsellor using the arts; specialising in bereavement; seeking to draw from her personal and professional life to explore what helped, what hindered and how the bereavement profoundly changed her life.

**Design/Methodology:** Intuitive Inquiry, resonated with the researcher in that it is integrative; drawing as it does on metaphors, images, visualisations, dreams, bodywork and rituals as well as academic literature. Intuitive Inquiry incorporates hermeneutic, heuristic and transpersonal elements. There are 5 iterative cycles: Cycle 1 -clarifying the research topic via a creative process; Cycle 2- reflecting on the topic in the light of extant literature and describing the researchers understanding prior to data collection; Cycle 3 involves data collection, analysis and description of the findings; Cycle 4 refines the researcher's lenses in light of the data gathered; Cycle 5 is an integration and discussion of the implications. The data used will be past personal journals relating to the bereavement and artwork, memorabilia, published literature, clinical experience, a reflexive journal, training courses on working with the suicide bereaved, interaction with peers, supervisors, and the wider suicidology research community.

**Ethical Approval:** Will be sought from the committees of Metanoia Institute and Middlesex University.

**Conclusions/Implications:** There are many factors that influence a person's grief. The researcher has drawn upon her own personal experience. The deep subjectivity of the researcher will influence the results hence the importance of examining perspective and blind spots critically. Nevertheless, it is hoped that an imaginal approach which brings together two ways of knowing, integrating both art and science will bring new insights which will move beyond the personal. The aims of this study are to (1) increase the researcher's self-awareness and clarify her own preconceptions and perspective. (2) pilot the methodology to assess its suitability for a larger study (3) preliminary insights into supporting the suicide bereaved.

# Melody Cranbourne-Rosser

## Poster

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**The role of presence when working with children and young people demonstrating harmful sexual behaviour.**

**Keywords:** CYP, harmful sexual behaviour, presence.

**Aim/Purpose:** To explore the role of 'presence' for practitioners working with CYP demonstrating HSB, focusing on the following research questions: What is the role of presence? What helps practitioners cultivate presence? What influence does presence have on practice and practitioner sustainability?

**Design/Methodology:** Drawing on the qualitative approach of IPA, an ideographic understanding of presence was gained by recruiting eight participants: purposively selected due to their primary employment being based within specialist services for a minimum of one year and completing their core professional training at least two years prior to participating. Data were collected via semi-structured interviews (audio recorded and transcribed verbatim) and analysed through coding cycles and the identification and exploration of emerging themes.

**Ethical Approval:** University ethics board.

**Results/Findings:** Four superordinate and thirteen related subordinate themes transpired from the data: Personal Presence (Ineffability, Readiness, Meta Presence); Being Present with Others (Being With, Co-connection, Autonomous Collaboration, Relational Roadblocks); Presence and Wellbeing (Internal Manifestations, External Indications, Maintaining Wellbeing); Workplace Presence (Ethos, Practitioner Progression, Safe Holding), which enabled the researcher to respond directly to the research questions, plus make future recommendations.

**Research Limitations:** Small sample size, therefore, results not considered representative of the wider population. However, IPA is ideal for gleaning an ideographic perspective of a small, diligently selected population, as opposed to large sample sizes and generating wide-reaching statements. The intention was to capture a rich and deep understanding of participants' lived experiences rather than aim for generalisability and transferability.

Potential researcher bias due to working within the field. Steps taken included: utilising supervision, across-discipline literature, across-transcript analysis sheets, extracts from all participants, plus participants viewing transcripts and regularly returning to data.

Ontological and epistemological challenges posed by utilising the philosophy of Husserl and Heidegger to explore consciousness-related phenomenon (i.e., presence) from both a descriptive and interpretative stance, addressed by drawing on contemporary literature to inform the study.

# Laura Davies and Caroline Dekkers

## Poster

**Other Authors:** Caroline Dekkers, Laura Hemmings and Nurun Nessa.

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**In Clients' experience, is the Person-Centred Approach effective in helping them process their diagnosed/self-diagnosed anxiety disorders/issues?**

**Keywords:** Anxiety, Acceptance, Relationships/Therapeutic Relationship

**Aim/Purpose:** The research aim was to explore if the Person-Centred Approach (PCA) was experienced as effective in helping clients process their anxiety. The research purpose was to better inform practitioners as to what works psychotherapeutically for this client group.

**Design/Methodology:** Four respondents who self-identified as suffering from anxiety were interviewed. Respondents were audio recorded during semi-structured interviews. Resultant data was thematically analysed informed by phenomenological principals (Smith et al, 2009).

**Ethical Approval:** The research proposal was submitted to and approved by the College Ethics Board. Respondents were offered six no-fee counselling sessions if issues had arisen due to their participation in the research, which was conducted according to BACP guidelines for ethical research in counselling and psychotherapy (Mitchels, 2018).

**Results/Findings:** Two overarching themes emerged in the findings. 1. It appears when participants felt anxious their bodies responded with undesirable physical symptoms. These symptoms included: stomach problems, migraines, heart palpitations and exhaustion. 2. It also appeared that difficult personal relationships, with family, colleagues, intimate partners or in social situations were a common underlying cause of our participants' anxiety. An open and trusting relationship with their counsellor emerged as central to a successful psychotherapeutic alliance. Participants cited the counsellors' honesty, acceptance and provision of a space, in which to talk and explore, alleviated both the psychological and physical impact of the clients' anxiety. Conversely when, what appears to be, the above conditions were not experienced by respondents, they were dubious about the overall effectiveness of psychotherapy.

**Research Limitations:** The limited number of respondents may make it difficult to generalise findings (McLeod, 2003) and as the research analysis was rooted in phenomenological principals, the findings may only be relevant to the participating respondents.

**Conclusions/Implications:** Findings suggest that the extension of what appears to be, the 3 Core Conditions (central to the PCA psychotherapeutic alliance) are of utmost importance to the successful outcome of therapy for clients presenting with anxiety. Findings also suggest that if difficult relationships tend to increase this client groups' anxiety, then the PCA, with its focus on the therapeutic relationship as central to psychological and emotional adjustment, is an ideally suited modality when working with such clients.

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## Fiona Desai and Ros Moseley

### Poster

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**‘In the experience of clients who identify as addicts with shame-based experiences, how might counselling help with their recovery?’**

**Keywords:** Counselling, shamed-identity, addiction, judgement, acceptance.

**Aim/Purpose:** The research aimed to identify the effect shame-based experiences had on addicts in recovery and the impact counselling had on their recovery process. The research purpose is to have a better understanding of how counselling might help clients recovering from addiction.

**Design/Methodology:** Three respondents self-identifying as recovering addicts with shame-based experiences, who have undergone counselling, were audio-recorded during semi-structured interviews. The resulting data was thematically analysed informed by phenomenological principles (Braun and Clarke, 2012).

**Ethical Approval:** Submission was made to the researchers’ College Ethics Board and was approved. Respondents were offered six no-fee counselling sessions should issues arise from their participation in the research, which was conducted according to BACP guidelines for ethical research in counselling/psychotherapy (Mitchels, 2018).

**Results/Findings:** Shame was central to all the respondents’ self-identity and all felt their shame-based experiences contributed to their addiction. They also felt they had carried shame their whole lives; tracing this back to experiences in childhood. All participants disclosed using substances from a young age to change the way they felt. Over time active addiction increased their feelings of shame which increased their need to suppress these feelings by using more substances. Respondents had kept their shame hidden for years fearing others’ rejection/judgement. In recovery, counselling, alongside 12 Step Fellowship membership, had offered these clients a safe, non-judgemental environment in which to reveal, explore and understand their shame; where it came from, ‘who it actually belonged to’, and its corrosive effect on their identity. All respondents found counselling to be cathartic and found as they spoke their truth it ‘lightened their shameful load’.

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

**Conclusions/Implications:** It seems, when counselling is offered, particularly within a non-judgemental/empathic alliance, the process is instrumental in facilitating the exploration/understanding of underlying shame-based experiences and their relationship to an individuals’ addiction. This appears to lead to enhanced self-awareness and self-acceptance. Continued support appears central to on-going recovery and counselling, in conjunction with other support such as 12 Step Fellowship membership, may be the most effective treatment in the long-term maintenance of recovery for this client-group.

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# Joanna Griffin

## Poster

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**An exploration of emotional well-being in parents of disabled children.**

**Keywords:** Emotional wellbeing, parent carers.

**Aim/Purpose:** The research explores what supports Parent Carers' Emotional Wellbeing. It is well recognised that parents of disabled children experience increased stressors in their life. Despite this, most parent carers manage to maintain their own wellbeing and cope, on some level, with the increased demands. This study asks Parent Carers to identify what they do, think or feel that helps their wellbeing. Some academic studies in this area either apply interventions to Parents and their family or categorise strategies according to psychological theories. This can sometimes mean understanding is distant and not engaged with the Parents' lived experience. This study goes back to the parents themselves to gain a greater understanding of the phenomenon of maintaining one's emotional wellbeing.

**Design/Methodology:** This qualitative research takes an interpretive-phenomenological stance, involving semi-structured interviews. Twenty participants are sought who meet the following criteria:

- Parent of a child with a learning and/or developmental disability
- Child aged between 2-11 years old
- At least 2 years since diagnosis

The literature review and data analysis used a Template Analysis approach which is ongoing.

**Ethical Approval:** Ethical approval was granted by the joint Metanoia Institute and Middlesex University Ethics Board as part of the DPsych by Professional Studies.

**Results/Findings:** I have conducted five interviews so far. Tentative findings include:

1. Parent carers can provide insightful and rich accounts of what helps their emotional wellbeing identifying what: a. They've found supportive, b. They've discovered and c. They can do to help themselves.
2. Parent carers value having their voices heard
3. Insider research has benefits as well as personal challenges

**Research Limitations:** The sample for the study is small. Due to the topic and time-demands it may attract a limited section of the overall parent carer cohort. As an insider research I need to utilise collaborators (Academic Advisor, Academic Consultant, Critical Friend, Peer Support) to ensure I am not unduly biasing the findings.

**Conclusions/Implications:** Parent carers can identify what helps their emotional wellbeing and their voice is invaluable in research. Services and support for Parent Carers would benefit from Parent Carer involvement. Themes arising from the data analysis, over the forthcoming months, can be shared with other parents and services.

# Gill Harvey

## Paper

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**A Narrative Exploration into Counsellors' experiences of the influence of a fundamentalist religious upbringing on mental health and wellbeing in adulthood.**

**Keywords:** Religion, faith, counsellors, mental health and wellbeing.

**Aims/Purpose:** This research focuses on counsellors' understandings of the influence of a fundamentalist upbringing on mental health. Fundamentalism, distinct from radicalisation or extremism, refers to religious tradition based on literal interpretation of the Torah, Bible or Qur'an, resulting in strict rules for life. Numerous studies suggest that childhood relationships and environment are influential to mental health however, there is sparse UK literature on the research topic. Additionally, findings indicate that counsellors can feel ill equipped to work with religion and would like further training in this area (Christoudoulidi, 2011; Hofmann & Walach, 2011). This research seeks to fill this gap.

**Design/Methodology:** This is a qualitative Narrative Inquiry combining relational-centred reflexivity (Etherington, 2004) with the collaborative narrative approach (Arvey, 2002). Recruitment was through professional bodies, a training college, psychology today and social media sites. Twenty counsellors underwent online preliminary interviews during Summer 2019. Purposeful sampling was then used to gain diversity of representation across the Abrahamic faiths. Eight co-researchers were invited to proceed, data collection being via face-to-face, unstructured interviews. Following transcription, co-researchers will separately analyse the transcript before a joint interpretative interview produces a blended text and 'pen-portraits' (Hollway & Jefferson, 2000).

**Ethical Consent:** Ethical approval for this project has been secured from Metanoia Institute/Middlesex University.

**Preliminary Results/Findings:** To-date all co-researchers recognised some benefits e.g. foundational beliefs and values, knowledge of religious matters and a sense of belonging. Disadvantages identified include a 'them and us' culture, feeling different and imposed rigid rules. All connected mental health challenges e.g. depression, psychosis and nervous breakdowns to growing up in a religious context. Research limitation: This is a small-scale qualitative study and therefore has limited generalisability. Participants are from the Abrahamic faiths and it is imperative to acknowledge that co-researchers from other religions may have produced other results.

**Preliminary Conclusion/Implications:** These suggest that mental health difficulties can be rooted in feeling different, a 'them and us' culture and imposed rigid rules. However, benefits have also been acknowledged e.g. foundational beliefs and values, knowledge of religious matters and a sense of belonging which can aid mental health. UK based research in this area is required with psychoeducation for professionals being regarded as crucial.

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# David Hughes

## Paper

**Professional Role:** Student and volunteer counsellor

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### Understanding shame from the perspective of a therapist

**Keywords:** Shame, person-centred, therapist, IPA, qualitative.

**Aim/Purpose:** This qualitative study explored how Person-Centred therapists understand and experience shame in their counselling practice and considered how such experience related to Person-Centred Theory (PCT). Shame has been described as the ‘master emotion’ and whilst present in current counselling and psychotherapy literature, there is proportionally less discussion within the dynamic of therapeutic work. There are no evident studies that explore shame in connection with the Person-Centred Approach (PCA).

**Design/Methodology:** Semi-structured interviews were conducted with five practicing counsellors who used PCA in their counselling work, exploring their understanding and experience of shame. The interviews were recorded, transcribed and then analysed using Interpretative Phenomenological Analysis (IPA).

**Ethical Approval:** The study was approved by Liverpool John Moores Research Ethics Panel and conducted adhering to BACP ethical research guidelines.

**Results/Findings:** The Person-Centred approach appeared to have a positive effect on issues around shame within a therapeutic relationship facilitating client process, yet therapists are not immune from shame affects, whether their own or that of the client. Two superordinate themes were identified the first being ‘Framing shame’ with sub-themes of ‘Shame sources’ and ‘Knowledge and descriptions of shame’; the second superordinate theme being ‘Shame and counselling practice’ with sub-themes of ‘Impact on practice’, ‘Supervision’ and ‘Therapeutic Keys’. Whilst experience of personal shame was utilised constructively by therapists in how they helped others, the findings supported existing commentators suggesting the topic of shame could be given more attention in training and development.

**Research Limitations:** The findings from this study cannot be generalised from the small sample size. Additionally, this research recognised the challenges for participants in talking about shame given it has the potential to generate this emotion, thereby impacting on what may be disclosed.

**Conclusions/Implications:** Shame is a pertinent concept for Person Centred therapists and their therapeutic work. However, there is a risk of this topic being overlooked in training and development, impacting upon practitioners regarding a relevant area of knowledge and understanding. Therefore, awareness of the nature of shame, combined with reflective practice, may contribute positively to client process whilst enriching therapists in terms of work with clients, their self-awareness and care.

# Tracey Leung

## Poster

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**Where Can They Go? A scoping review of counselling service for refugees and asylum-seekers who have experienced sexual violence.**

**Keywords:** Scoping review, counselling, refugees and asylum-seekers, sexual violence.

**Aim/Purpose:** Prevalence of sexual violence (SV) is high in armed conflicts and on routes to asylum seeking. The need for counselling for refugees who experienced SV should be recognised. Due to their mobilisation, information on available counselling near them would be helpful. Therefore, the purpose of the research is mapping these services in the UK.

**Design/Methodology:** Scoping review (6 non-linear stages) • Identifying research questions: Counselling for refugees and asylum-seekers who experienced SV and their features, i.e. modalities, modes, number of sessions, 'female only' space, language, fees, differences across the UK. • Identifying relevant services by internet and electronic database searches. • Service selection: applying selection criteria to include most relevant services. • Sifting, charting and sorting data • Collating, summarising and reporting results • Consultation exercise: Questionnaires via emails and telephone calls were made to the organisations for further information.

**Ethical Approval:** University of Nottingham.

**Results/Findings:** 162 potential services identified. 69 provided data for all the additional research questions: 46 adopted various modalities; 67 provided individual face-to-face sessions; 21 had at least one alternative mode; 27 provided up to 24 sessions (most common practice); 36 provided 'female only' space; 30 provided interpretation; 13 had bi- or multi-lingual counsellors; and 63 were free of charge. Among the 162 potential services, 147 were in England in which 49 in London, 1 in Northern Ireland, 8 in Scotland and 6 in Wales. Proportionately, London had far more services than other areas. The North West had the second least although it has the third largest BAMER communities and the largest proportion of dispersed asylum-seekers.

**Research Limitations:** Time constraints: the researcher could not follow up all the organisations which did not answer her initial phone calls. Data selection: only included services in the third sector, not statutory services which were assumed known to organisations working with refugees, nor the private sector because it was impractical to inquire all private practitioners. Questionnaire design: could ask follow-up questions about interpreters (professional?); if no interpreters, why. Also, 'gender specific' could be used instead of 'female only' as it is more inclusive.

**Conclusions/Implications:** Counselling for refugees with SV experience is in serious shortage. Interpreters and multi-lingual counsellors can increase their access to service.

## Robelle Mercado and Dorothy Dixon,

### Poster

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**In clients' experiences how effective is counselling in helping those who have been affected by a loved one's narcissistic behaviour'?**

**Keywords:** Isolation, control, gas-lighting, self-esteem, empowerment.

**Aim/Purpose:** The aim was to investigate the experiences of clients affected by a loved one's narcissistic behaviour (defined in the DSM IV, 2013). Our purpose was to highlight how effective counselling is in helping clients in this group recover from any negative impact such behaviour had on their lives.

**Design/Methodology:** Three semi-structured, audio recorded interviews were held with respondents who self-identified as being affected by a loved one's narcissistic behaviour. Respondents were recruited via Social-Media posts. Data was thematically analysed by highlighting recurring themes and anomalies within the data; informed by the principals of phenomenology (Smith et al, 2009).

**Ethical Approval:** The research proposal was submitted to and approved by the researchers' College Ethical Approval Board. Respondents were offered six fee-free counselling sessions if issues arose for them after participation in the research which was carried out in line with the BACP Ethical Guidelines for Research in Counselling and Psychotherapy (Mitchels, 2018).

**Results and Findings:** Findings indicated respondents had experienced abuse/trauma through systematic patterns of coercion and control which isolated them from other relationships with family members and/or friends. Gas-lighting (deliberate distortion/confusion of respondents' reality) by the loved one and parasitic behaviour also damaged respondents' sense of self, affected their mental wellbeing and lowered their self-esteem. For all the respondents, counselling (various modalities) facilitated identification of the specific forms of abuse/how it manifested within the relationship; which empowered respondents to begin to re-trust their own experience. Counselling also helped re-establish respondents' sense of self, sequentially increasing their self-worth and enhanced their psychological wellbeing.

**Research Limitations:** The small respondent sample restricts generalisation of our findings (McLeod, 2003) and our subjective data may only be pertinent to those respondents who took part in our research.

**Conclusions/Implications:** In accord with respondents' experiences we suggest that counselling is effective for those who have been negatively affected by a loved one's narcissistic behaviour/abuse. It further appears counselling, regardless of modality, is specifically useful in facilitating clients' ability to validate their own abused experience/s, re-gain a self-defined self-concept and rebuild their self-esteem. Findings suggest that counsellors would best help clients in this group if the psychotherapeutic interventions focused on these areas within the healing-alliance.

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## Sally Morrison

### Poster

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**Mapping the self. How does Walk and Talk therapy in nature support self-exploration? A trainee counsellor's client experience as autoethnography.**

**Keywords:** Nature, therapy, creativity, play, walk and talk.

**Aim/Purpose:** 'An autoethnographic study exploring aspects of working relationally in nature - why does it feel so good? A trainee counsellor student explores a moment from personal therapy and uses it to reflect on the powerful dynamics of working psychotherapeutically outside, getting lost in theory and creative process on the way' I aimed to identify, through triangulation of personal experience, theory and creative process, why walk and talk therapy might feel so good for me as a client.

**Design/Methodology:** I created an autoethnographic investigation to explore my experience of walk and talk. I used journaling, writing, drawing, printing and making objects to investigate what I was experiencing alongside reading theoretical research about walk and talk, nature therapy, play, body-mind connection, creativity, boundaries and the potential challenges involved in working outdoors.

**Ethical Approval:** University of the West of England.

**Results/Findings:** I identified key points including the health-giving properties of walking outdoors, the focus on breath and grounding, the impact of the environment ON the work...factors outside our control, the impact of a flexible frame for counselling, changes in nature supporting changes in the self, attachment to nature, relationship to the wider world, the mind and body, sensory input, pattern making and play. Working outdoors is a way to integrate mind and body, left and right brain in an experience that is playful, creative and also relational. I also identified the importance of trust in working this way and the value of core conditions in providing a platform for exploration.

**Research Limitations:** The findings are individual and personal, but it might be that other clients might find this beneficial. I can only speak to my own unique experience and wider study might be helpful to understand implications for other clients.

**Conclusions/Implications:** Perhaps sometimes the room is not the best place to work...can therapists find the robustness and flexibility within themselves to support this work outdoors? It would be interesting to read more clients' accounts of working outdoors. It's powerful to work outside with a counsellor who can play, in the here and now, walk alongside clients emotionally and physically. Who might benefit from this in future?

# Christine Ramsey-Wade

## Poster

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**Mindful Eating - Conscious Living™: An acceptability study and non-randomised controlled trial of an 8-week mindfulness programme focused on food and eating.**

**Keywords:** Mindfulness, disordered eating, eating disorders, mindful eating.

**Aims/Purpose:** Mindful Eating - Conscious Living™ (ME-CL) is a mindfulness-based intervention originating in the US which aims to reduce anxiety around food and eating. While the programme is delivered widely, it has never been tested under research conditions. The aim of this study is to provide some acceptability, feasibility and efficacy data for this intervention.

**Design/Methodology:** This paper will report the results from an initial qualitative study and an ongoing mixed-methods efficacy trial. The first stage of the project tested the acceptability or descriptive feasibility of the programme with a UK sample. Three focus groups (n = 12) were held with adult women in the UK with an interest in mindfulness and/or (un)healthy eating. Participants were asked to read an overview of the ME-CL programme and were asked for their views. 21 participants have now been recruited into the mixed methods efficacy trial. Four runs of the programme are planned, each with an initial control period, forming a non-randomised trial with an internal control. Pre, post, mid-way and 1 month follow up data on negative affect, mindfulness, disordered eating, self-objectification and body appreciation will be collected to explore outcomes and potential mediators, alongside qualitative data on the acceptability of the intervention. Ethical approval Ethical approval for all stages of the project was secured from the University of the West of England Faculty Research Ethics Committee before recruitment began.

**Results/Findings:** Results from the qualitative acceptability study indicated that, while some minor changes may be needed to accommodate differences in language, no major changes were felt to be required. However, the data does suggest some useful points of consideration for mindful eating teachers in the UK. This paper will disseminate these results in detail alongside the quantitative results from the first run of the efficacy trial.

**Conclusions/Implications:** Subclinical disordered eating is widespread. Mindfulness in general, and ME-CL in particular, shows some initial promise to address this. This project aims to further explore the potential of mindfulness for disordered eating.

# Ami Sohi

## Poster

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**Ethnicity and culture:** Maximising trainee counsellor learning

**Keywords:** BME, counselling, diversity, ethnicity, training.

**Aim/Purpose:** The counselling and psychotherapy professions are characterised as predominantly White, female and middle-class. Britain is becoming increasingly ethnically diverse. The bridge between the profession and the diverse client base is reliant on consistent translation of ethical guidance into core therapeutic practice. The focus of this research is to explore counsellor learning on ethnicity and culture during training and also consider BME representation.

**Design/Methodology:** Qualitative data gathered from short survey focussing on opinions on learning experience. Access was online and anonymous. Data was analysed using inductive thematic analysis allowing for semantic interpretation. Participation restricted to fellow students on the course.

**Results/Findings:** Data revealed six key themes of relevance to learning about ethnicity and culture. These related strongly to personal perspectives of BME representation in both training and the wider profession. The themes in turn linked to three study areas; student experience, course content and delivery and, professional and practice implications.

The themes are:

Student experience: Being BME - understanding perceived issues; Meeting BME - reacting to BME course participants; Course content and delivery: Learning with BME - learning relationally through peer interaction; Representing BME - exploring BME representation on the course;

Professional and practice implications: Knowing BME - being better informed on ethnicity and culture; Increasing BME - cultivating diversity in the profession.

**Research Limitations:** Small restricted sample (12 respondents), participants known to the researcher, findings may not generalise to other counselling courses/students, question wording and coding may be influenced by personal bias.

**Conclusions/Implications:** The findings suggest an appetite to further explore personal attitudes in relation to ethnicity and culture when discussion arises. More open and honest exploration of racism and ethnicity would be of benefit to trainees, white and BME, and clients we work with. However, in order for this to happen there would need to be structures in place to ensure safety and wellbeing of students. If done sensitively this would go a long way to alleviating the fear of white trainees and the isolation of BME trainees. The findings could also have implications for practice development through influencing the delivery of counselling training; particularly in relation to increasing representation (guest speakers, trainers, BME literature and case studies).



# Afra Turner

## Poster

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**Bridging the gap and continuing to learn professionally: A Mixed Methods Study exploring the impact of CPD on practice.**

**Keywords:** Continuing professional developments, higher education, practice-research gap, students.

**Aim/Purpose:** A preliminary small scale qualitative study, exploring therapists experience of continuing professional development (CPD) in a higher education (HE) (Turner, Goss & Caleb, 2017), found themes pertaining to a perceived lack of accessible and relevant good quality CPD products to support therapists practice needs. The findings provided the incentive for the current research design to further explore the impact of CPD on therapists' practice at a time of unprecedented change, demand and increases in the mental health needs of student and staff. The project received ethical approval by Metanoia Research Ethics Committee in May 2019.

**Design/Methodology:** The project utilised a pluralist, mixed methods approach to extrapolate data from a nationwide survey, using quantitative data analysis (SPSS) and qualitative thematic analysis (Braun & Clarke, 2006; 2013). A purposeful sampling strategy was used to anonymously collect data from therapists at university counselling services, via their professional networks, to explore their views on the impact of CPD on practice in the current climate of UK higher education settings.

**Results/Findings:** Responses from participants (n = 90 - 74.4% female, 23.3% male & 2.2% other) suggest a strong adherence to professional recommendations of CPD (100% reported 30 hours CPD or more). CPD is perceived as essential (94%), ethical (91.2%) and professional (94%) to good practice. Thematic analysis of qualitative data produced a mixed response. Four meta-themes emerged from responses;

- Formal and informal CPD is highly valued
- CPD guidance needed to meet HE competencies
- Cost, geography and time limit access to certain CPD
- Lack of sector specific & practitioner led quality CPD products.

**Research Limitation:** The statistically significant but small sample size (N= 90, 15%) limits reliability and generalisability of findings. Furthermore, the lead researcher is a HE based therapist and supervisor delivering and undertaking regular CPD. Future research could address built-in confirmation bias by using an independent research body. However, the findings contribute to the limited literature on therapists' experiences of working in challenging times, in relation to context-specific tensions and the impact of broader cultural, political and socioeconomic forces, on personal and professional development and practice in university settings.

# Hannah Windows and Stacey Permaul

## Poster

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**In the experience of clients who have body image issues, how has/do their encounters with social media impact on them?**

**Keywords:** Body image, social media, anxiety, shaming, comparison.

**Aim/Purpose:** The research aim was to explore how encounters with social media platforms impact those with body image issues. The research purpose is to inform counsellors how to better understand and work with this client-group.

**Design/Methodology:** Four male/female respondents, identifying as having body image issues, were audio-recorded during semi-structured interviews. Resulting data was thematically analysed informed by phenomenological principals (Smith et al, 2009). We followed BACP ethical guidelines for research in the counselling professions (Mitchels, 2019).

**Ethical Approval:** Submission for ethical approval was made to and granted by the College Ethics Board. Respondents were offered six no-fee counselling sessions, if issues arose, following participation in our research.

**Results/Findings:** Generally, respondents' experienced engagement with social media, adversely impacted how they felt/thought about themselves. Respondents disclosed their negative comparison between their bodies and other social media users. This led participants to make adverse judgements about their own physicality. Additionally, the majority of respondents experienced pressure to look a certain way (like others), which if not attained, resulted in low self-esteem. An anomaly was identified as one respondent felt his low self-esteem and negative body-image came only from his unresolved intra-personal issues. However, his use of social media platforms had also declined. It appears counselling helped respondents explore their self-judgement/need to make comparisons to others and increased their self-acceptance. As a result, respondents felt that their self-esteem improved. Additionally it seems participants decrease their engagement with social media platforms overtime and with personal maturity.

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

**Conclusions/Implications:** It appears for clients in this group, engagement with social media creates unrealistic body image ideals and leads such clients to negative comparisons with others; in turn, this appears to result in low self-esteem. We suggest that clients in this group might benefit from counsellors' encouragement to disengage with/decrease social media use. It also appears that the therapeutic alliance is most effective when it allows clients to explore their need to compare themselves with others, helping them to eruditely understand the negative impact of self-judgement and facilitate greater intra-personal self-acceptance.

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