What support do therapists need to do research? A review of studies into how therapists experience research.

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Abstract

This paper addresses therapists' experiences when 'doing research', with a special interest in their needs for support. It involves revisiting earlier studies into opportunities and obstacles - personally, professionally, and academically for psychotherapists and counselling psychologists (therapists) when transitioning to and from postgraduate research. How do therapists experience research; what motivates them to undertake doctoral research; how do they chose to generate knowledge and why; how will expectations meet outcomes? This 're-search' approaches earlier studies with an interest in research support. It highlights significant personal, professional, and academic obstacles for therapists transitioning into research. Shame, isolation and poor opportunities to research and engage on academic platforms are some of the areas being referred to. Consistent with such needs, our pilot study into research supervision showed how supervisees rated 'empathy' as highly as 'research experience' for 'constructive' supervision. Our review involves a 'hybrid meta-synthesis' that combines autoethnographic and secondary analysis aims. It draws on own experience of grappling with methodological options as examples of how mixed methods study may 'come about' or develop as part of team research practice.

Introduction

Research is often described as vital for therapeutic practice. This paper fcouses on how therapists might experience research.What motivates, for instance, some to undertake doctoral research; how do their expectations meet outcomes - and what support to they need and/or experience? These are some of questions guiding this meta-synthesis of 4 earlier studies [Bager-Charleson, du Plock, & McBeath, 2018;. Bager-Charleson, McBeath, & du Plock, 2019; McBeath, Bager-Charleson, & Abarbarnel 2019) into opportunities and obstacles - personally, professionally, and academically for psychotherapists and counselling psychologists (therapists) when transitioning to and from doctoral research.

Positioning ourselves in the study

We have followed therapists in clinical practice and research for soon 30 years as lecturers, research supervisors and programme leaders witnessing a growth in doctoral training for therapists. We are also psychotherapists and clinical supervisors with long-standing interests into the personal and professional development of therapists in the field of clinical practice (Bager-Charleson 2010; Bager-Charleson 2020, McBeath 2019). How – and why, do people chose to become therapists; how do subsequently certain specialties and modalities develop; and how might new, further learning develop and with what impact? These are questions which we have explored in context of clinical practice from contrasting epistemological angles [Bager-Charleson 2010, 2020; McBeath 2020). In 2016, we decided to approach therapists' transition into research with a similar interest into their subjective experience and motivations. We work with doctoral students and research supervisors on both PhD and Professional doctorates in the fields of counselling, psychotherapy and counselling psychology. Our studies include participants from both 'modern' (Lee 2018) professional doctorate and traditional PhD programmes within and outside of the UK. The studies explored here have been ethically approved by the [Anonymous. Details omitted for blind reviewing] and conducted under the umbrella of the [concealed] research group which aims to strengthen therapists' research involvement through research, training and policy development.

Aim and purpose

This paper 're-searches' 4 earlier studies into how therapists' experience 'doing research'. What can we learn from the accumulated studies in terms of obstacles and opportunities for therapists transitioning to and from post-graduate research; what areas for

support stand out; what might therapists need to progress and what might in turn those supporting them need to provide that appropriate support?

Method

We will draw on a 'hybrid' for re-visiting earlier studies, using the guidance of a 'meta-synthesis' in a broad sense, as suggested by Paterson et al 2001. Our 'hybrid' combines meta-synthesis with earlier autoethnographic aims (Bager-Charleson & Kasap 2017) of drawing from own experience as part of generating knowledge. Bager-Charleson & Kasap (2017 revisited experiences from of acting as co-researcher within a cross-disciplinary team through an autoethnographic lens to explore 'similarities and continuities' between own experiences and those of others with regard to 'how it feels to be emplaced in particular ways' (Pink, 2009, p. 63) in the research. We are also influenced by what Heaton (2008) refers to as 'secondary analysis', which involves the use of existing data, collected in earlier studies, to pursue a research interest distinct from the original purpose in terms of an alternative perspective on the original question (Heaton 2008, Hinds, Vogel and Clarke-Steffen 1997, Szabo and Strang 1997).

Previous studies, revisited

"Meta-synthesis" reflects according to Paterson & Thorne (2003) a process whereby findings from several research studies are synthesised to produce a new and expanded understanding about the topic of inquiry. In our case, these earlier studies consist of

- one narrative research study based on doctoral dissertations (n=50), interviews (n=7) and research journals (n=20) across 19 cohorts on one professional doctoral programme;
- one mixed-methods study with findings from a survey (n = 92) and interviews (n =9) gained via training institutes and therapist member organisations across Europe covering both professional doctorates and PhD programmes; and
- one survey (n=222) distributed in UK and Europe into therapists' with and without doctoral research experience around their experience of academic writing, and
- one yet unpublished pilot study (n=49) distributed to research supervisors and research supervisees across 4 doctoral programmes into the experience of 'good' supervision in therapy related research.

Our meta-synthesis covers three analytic phases of revisiting and reviewing firstly original findings (meta–data analysis) the secondly original methods (meta-method and meta-theory phase) with an aim to, thirdly, synthesise and 'generate new knowledge about the phenomenon under study" (Paterson, 2001, 2003, 2007, p.76). We use the term 'findings' – as part of the meta-synthesis, in a lose sense; revisiting (similar to Heaton 2008) both 'data' and 'conclusions' as of potential relevance. Incorporating our own experience as a subject for enquiry, we retrace methodological connodrums and how a mixed methods study may develop as part of team research practice.

Study 1: A narrative thematic inquiry into counsellors' and psychotherapists' embodied engagement with research.

The first TRP study focused on therapists' experiences [Bager-Charleson, du Plock & McBeath 2019) from doctoral research as told in doctoral dissertations (50), research journals (20) and interviews (7) by doctoral graduates across 19 cohorts on a professional doctorate for accredited psychotherapists.

Literature review capturing therapists at the margins of the research community

We searched, firstly, for general references to "Psychotherapists and Research" or "Psychotherapy Research" through regular search engines such as EBSO, leading onto PsychInfo, PsycARTICLES/Psychology and Behavioral Sciences Collection, with few responses, compared to Psychology and Psychiatry. Some of the themes for therapists' engagement with research were:

- **There is an infrequent and unstructured approach to research within therapy**
- **Therapists hold negative attitudes to research**
- **Psychotherapy is homeless in context of disciplines**
- **Psychotherapy practice builds on embodied and emotional sources of knowledge**

An infrequent and unstructured approach to research

The literature captured a problematic dynamic between psychotherapy practice and research, suggesting for instance that therapists rarely initiate research (Prochaska & Norcross, 1983), or that therapists 'read research but not as often as researchers do'(Boisvert

and Faust 2005; Morrow-Bradley & Elliott 1986; Beutler, Williams, & Wakefield, 1993) and when they do, their 'research' often stems from a seemingly unstructured integration of knowledge gained from workshops, text books, and theoretical articles (Prochaska & Norcross, 1983, Morrow-Bradley & Elliott, 1986, Darlington and Scott 2002, Safran, Abreu, Ogilvie, & DeMaria, 2011; Silberschatz. 2017; Tasca, 2015; Taubner, Klasen, & Munder, 2016).

Therapists hold negative attitudes to research

Long and Hollin (1997) found that "a number of [therapist] clinicians hold negative attitudes towards research, which is portrayed as irrelevant to practice and ranking below more pressing service commitments" (p.77). This was echoed twenty years later by Henton (2012) in a word-association experiment where psychotherapists described research as "objective, hard, cold, scientific, factual, time consuming, difficult, prestigious, tedious, expert" (p.11).

Psychotherapy is homeless in terms of disciplines

Psychotherapy is often positioned between arts and science, without being a fully accepted member of either discipline. Psychotherapy is indeed 'a very particular kind of relationship and a very particular kind of space' as Bondi (2009, p.4) concludes. It builds for instance often on what McGinley (2015) defines as 'embodied understanding' which includes the knower's 'moods, affect, and atmosphere' (p.88) as sources of knowledge.

Psychotherapy practice builds on embodied and emotional sources of knowledge

The for clinical practice typically significant attention to emotional and embodied sources of knowledge is often neglected in research accessible via general platforms such as EBSCO related search paths. Our own search for this kind of research confirmed the earlier referred to perception of therapists turning to text books, theoretical articles and small scale qualitative studies. Finlay (2016) and Etherington (2004) contribute significantly in the field theory about embodied research. Finlay (2006) develops, for instance, a theory about a Reflexive Bodily Analysis involving 'bodily empathy', 'embodied self-awareness' and 'embodied intersubjectivity' at different stages of the research, including the data analysis stages. Finlay's (2016) data analysis is an 'attuned inquiry' characterised by stages of 'empathic dwelling' where she uses 'bodily experience as a way of tuning into … participants so as to achieve both a kinaesthetic and emotional sensing of the other' (p. 23). Boden, Gibson,

Owen and Benson (2016) offer an overview of literature in the field of feelings in research, suggesting that *'Without the emotional dimension of a personal story, understanding becomes difficult, spoken words become separated from what the listener understands […] to understand human experience, we must understand emotional experience …* ' (p. 178). A focus on emotions is more often mentioned during interview stages than in the context of data analysis. Denzin (1984/2009), Orange (1996, 2009), Spry (2001), Josselson (2011, 2013, 2016), Willig (2012), and Rennie and Fergus (2006) offer however different perspectives to explore researchers' relational, emotional or embodied response during research, including during the data analysis stages. Within the framework of Grounded Analysis, Rennie and Fergus (2006) refer to 'embodied categorization' as 'an approach to interpretation in which subjectivity is drawn on productively' (p. 496). Van Manen (1990), Todres (2007), Anderson and Broud (2011), Gendlin (1997, 2009) and McGinley, P. (2015) contribute with further theory about how to incorporate emotional and embodied into research. Gendlin (1997) writes about the significance of 'staying with' the 'body-feel' as part of generating new knowledge. Tordes (2007) emphasises paying attention to a 'felt sense' as part of the analysis and writes about 'participatory experience' with an interest in how emotions are being evoked in the researcher. Ellington (2017) builds on feminism and post-structuralism to develop theory about 'embodiment in qualitative research'. She writes:

> *"Research begins with the body. Although some researchers remain unconscious of it (or deny it) embodiment is an integral aspect of all research… I am a body-self making sense with, of, and through other embodied people and our social worlds' (p.196)*

Spry (2001) asserts that a historic dualist approach to knowledge acquisition continues to '*sever the body from academic scholarship'* (p. 724). Spry's feminist framework refers to 'enfleshment', suggesting that the *'the living body/subjective self of the researcher ... as a salient part of the research process'* to study the world from the perspective of the interacting *individuals (p.711).* This added an interesting backdrop to references to a strained relationship between psychotherapy research and psychotherapy practice, with therapists often referred to at the margins of the research community.

Methodology: drawing on therapists' narratives.

This first study focused, as mentioned, on how practitioners described their 'responses' to research. We expand in more detail about how we use the term 'narrative research' elsewhere [Anonymous. Details omitted for blind reviewing]. In summary, we regarded narrative research helpful to

- explore how the participant organises experiences and events into a story;
- explore how narratives convey and produce personal, social and cultural values and beliefs about self and others.
- communicate and capture pace, emphasis and rhythm of the spoken words.

The study focused, as mentioned on one professional doctorate programme across 19 cohorts for accredited counsellors, psychotherapists and psychologists. In addition to drawing from dissertations already in the public domain students and graduates from the doctoral programme were invited to contribute their own experiences. The literature review had, in turn, turned our attention to their emotional and embodied responses during research, for instance questions like:

- *How would you describe your embodied responses and emotional entanglement during your research?*
- *What did you feel during your data-analysis – and how might that have impacted on your research?*

Findings in study 1

Giving 'transformative learning' a face. We had, firstly, expected greater disparities between our three different sources but found the official accounts highlighting similar areas to what was raised in interviews as well as research journals. Participants were offered choice between interviews of contributing in writing, through earlier research earlier or retrospective reflective vignettes. One therapist ('Peter') contributed with free associative writing, describing an overwhelming 'shame' during his research when faced with 'not knowing' as old understandings failed to make sense.

'…At first, I read and read and read [thinking] how could I ever retrieve, synthesise, analyse this mass of thinking? […]I didn't want to tell anyone, I felt ashamed. (Peter)

He referred to palpitations, sleeplessness and panic attacks during this level of stress.

> "…an incredible tightness across my chest and a heavy 'band like' feeling across my forehead. I was sat in my study, with hundreds of quotes/cards strewn across the floor […] I remember groaning out loud at the prospect – as though I was involved in heavy physical labour" ('Peter')

'Peter' reflected on his responses in context of transformative learning where letting go of previous frameworks involved periods of disorientation followed by self-examination. He referred to "learning to live with uncertainty and possibility" as a reward and benefit of the research:

> The palpitations, amazingly and much to my relief […] stopped and have never returned. For me, they attest to the reality that undertaking research into areas which are deeply meaningful and important to us as people, not just as academics, it lays us open to challenge and struggle at very deep levels. To my mind, they represent an existential struggle with fundamental concepts or building-blocks of what it means to be human; a far-from-easy letting go of aspect of life which have felt like certainties and an opening up to anxiety and learning to live with it without the need to simply resolve it" ('Peter')

To [Sofie], Peter's rich account provided a 'face' to transformative learning. His description moved us beyond theories in higher education, communicating what transformative learning actually may *feel* like – and how narratives about research and researchers both convey and produces values and beliefs about self and others.

We felt unprepared for both the degree and the frequency with which physical suffering was being referred to - both in the dissertations, journals and in the interviews. We had also expected differences between dissertation accounts and interviews or vignettes, but with exception of two dissertations all referred to some level of suffering. Several therapists described, worryingly, how they had become seriously unwell during their data-analysis work, experiencing for instance

- palpitations,
- chest pains,

- panic attacks and
- difficulty sleeping

  This high level of stress was, in turn, often coupled with confusion and shame; therapists chose to keep their experiences to themselves – because, as one therapist said; 'people wouldn't understand how you could feel so bad from just sitting in your room reading'.

Glass ceiling for therapists. 'Peter's' story could be argued to follow a regressive-progressive story line, moving him as researcher through challenges but towards a happy ending. 'Moira', a middle-aged counsellor expressed in contrast a 'progressive-regressive' plot line, moving away rather than towards research satisfaction once she had graduated and returned to work. She practices in the charity sector with sexual abuse and referred to "a sense of a glass ceiling" in the counselling profession. She described her experiences from being a black female counsellor as almost incompatible with being a researcher:

> It's in my DNA to help those who are marginalized, [to be in] a race the bottom to work near all those who we help. [R]research is sort of about showing how clever you are, wanting to show off and all my whizzy little ideas. [There are] barriers, of racism, of hitting a ceiling … There's a glass ceiling […][for me as a woman, who identifies as being black [in] the world of research …with all these well-spoken, articulate, bright people ('Moira')

This progressive-regressive plot-line echoed, worryingly, with other participants representing Black, Asian and Ethnic minorities. 'Almas' said:

> Research and learning … I need it like breathing, to feel alive. That's how we learn about our clients, our work. When I came to this country I continued to look for this childhood passion for learning and escape from my lack of identity. Learning was the only solution for me. Helping as a counsellor fitted in with this, everyone accepts that. But researching is different [it's more common for men], they say – why do you always study? ('Almas')

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Research supervision played a significant role at different stages, one being to balance containment with guidance and broaden perspective. 'Iris' who researched into racism and generational trauma captures this:

> I had a very inspirational research supervisor. Having her allowed me to internalise her voice and take risks. She contained and inspired. When research is good, it feels like being in an ultimate flow state of complete absorption, there's a sense of absolute presence and contact with something inside yourself and the other. Good psychotherapy is like coming alive, and research is the same.

To communicate what stood out to us both within and across the different stories in terms of plot lines or trajectories, we have gathered some main narrative linkages or overarching themes in table1 below.

Table 1 Main Narrative strands and narrative linkages to feelings and issues

All Consuming	**Need for Coping Strategies**	**Personal & Academic Illumination**
Uncertainty to the level of anxiety and illness	Reconnecting with Practice from new angles	Less discomfort with uncertainty
I can only as a woman, who identifies as being black that, go so far	Confidence building. Expanding epistemology.	Life changing, both personally and professionally
Archetypes of being female counsellor are nurturing, giving, sacrificial	Supervisor, someone on your side	Research is incredible, tapping into my self as the explorer - helping to make sense of life on all levels.
I was feeling totally lost	writing research journal	Personally liberating, and changing my view of work
Feeling removed, detached, disembodied	connecting with embodied and/or unconscious processes like in therapy	Thoroughly Illuminating
Over Immersion	Supervision	Linking research and practice
Emotionally Vulnerable	Personal Therapy	Understanding the client better
Disorientation	Embrace Discomfort	Alive-Making
Painful Feelings	Develop other Mediums	Research is Exciting

In summary, it was clear from all sources that the process of research was experienced as both profoundly enriching and unsettling on many therapists. The feelings of being lost, isolated, and emotionally vulnerable were elaborated upon and prompted some to seek a supportive coping strategy. A number of discrete coping strategies were identified; these included,

- Reconnecting with therapy practice
- Research journal
- Supervision
- Personal therapy
- Embracing discomfort
- Developing 'other mediums' to help to go 'where words wouldn't go'

The findings also highlighted excitement, exhilaration and as one participant put it; 'that's how we learn about our clients, our work'. The obstacles for practicing the research skills outside of the doctorate were however reported as limited.

Re-research reflections

Engagement with workplaces to secure research opportunities for therapists appear a significant area for support, for the future. How might opportunities and links to research be strengthened? To what extent may prejudices about therapists as self-less listeners come to play? These were areas of support which we started to consider during he research. Another aspect which stood out was therapists' transparency and efforts to reflect on their own responses. Self-reflection was offered in dissertations as well as as in research journals and vignettes, signifying an openness about difficulties during postgraduate research which possibly other disciplines less seldom allows for.

. Lee (2018), Fillery-Travis et al (2017) and Fell, Haines, and Flint (2011) refer, to the concept 'modern doctorates' to describe doctorates focusing on practice. Lee (2018) describes modern doctorate for programmes 'where the focus is on practice [and] might generate a licence to practice professionally such as the Psych D [can] allow research methods that other programmes might deem unacceptable […] Sometimes it will consider alternative forms of presentation to a straightforward thesis and therefore might also include some doctoral programmes in creative practice where the principal item for assessment could be an artefact

such as a musical composition, work of art or a film'. This view within the academic community of professional doctorate highlights a seldom addressed distinction between research students and is consequently something which therapists on professional doctorates might both be unprepared for and need support to conceptualise and relate to.

Mixing methods

Our next stage represented a methodological crossroad and challenge. Should we aim for a deepened understanding of qualitative research, for instance with embodied, emotional means of generating knowledge in mind?

Mixing methods (Frost & Bailey-Rodriquez 2020) in research involve typically the use of both qualitative and quantitative approaches and methods in one study or sequentially in two or more studies [reference concealed]. Having focused on one doctoral programme, across 19 cohorts, opened for interests into how others reasoned on other programmes. Bartholomew and Lockard (2018) provide a good source for readers interested in mixed methods in psychotherapy research. They assert for instance how '[whilst] exploratory sequential design is not new…it is incredibly well-suited to research needs in psychotherapy. Researchers can use an initial qualitative strand to identify areas of needed additional exploration in psychotherapy, thereafter collecting quantitative data that can be integrated to enhance understanding' (p. 1705). Working in teams as 'critical friends' pushed -to our minds, opportunities to mix methods in a 'dialectical' ways allowing for each position to be influenced by the other. Alistair (McBeath, 2019; McBeath 2020) brought strong own research experience from quantitative studies, and as a team we negotiated a adapted survey along the interests expressed by Braun, Clarke, & Gray (2017) and Braun, Clarke, Boulton, Davey & McEvoy (2020) describe in terms of surveys offering a potential 'wide-angle lens'; especially through a so called 'qualitative surveys' which 'not only collect qualitative data, but prioritise qualitative

research values alongside qualitative techniques' (p.2)

Such priorities include attention to participants' subjective experiences as expressed through 'narratives, practices, positionings, and discourses" by encouraging them to respond "in their own words, rather than selecting from pre-determined response options' (Braun, Clarke et al 2020, p.2). We also resonated with Braun, Clarke et al's (2020) idea of 'wide scope' advantages in surveys in terms of a aiming for a "maximum heterogeneity [and] maximum variation […] which emphasise diversity rather than typicality" (p.3). This can also help to "circumventing the risk, which can occur in the typically smaller samples of interview research, that a participant who speaks from a particular non-dominant social position gets treated as 'spokesperson' for their particular demographic or back- ground, rather than just an individual" (Braun, Clarke et al 2020, p.3). Our own survey became, in summary, a hybrid of a 'qualitative survey' mixing closed and open questions together with optional follow-up interviews.

Study 2: The Relationship Between Psychotherapy Practice and Research, A Mixed Methods Exploration of Practitioners' Views

Points made by 'Moira', 'Almas' and 'Peter' in terms of how personal motivations could clash with academic and professional opportunities became, then, a starting point for a next study. To what extent might earlier findings be shared by others? Our survey retained the earlier focus on therapists' views on the relationship between research and clinical practice, through questions like 'what sort of relationship do therapists feel that they have with research? What amount of formal research training do therapists have? To what extent do therapists feel that their own research is valued? To what extent does research inform therapists' clinical practice?' The survey was distributed across Europe through the support or the European Association of Integrative Therapists, offering follow-up interviews. The number of findings were small, but resonating with earlier findings. The survey was publicised to a variety of therapy training institutes, both UK and European, as well as the BACP Research Network. It received a modest response rate (n = 92) and including both

fixed and multiple response with space for free text comments (n=68) with optional follow-up interviews (n =9).

Findings in study 2:

The survey showed, firstly, that 55% described their practice as influenced to a large extent of research in their practice. 26% described 'every session as a piece of research', whilst others were more cautious; 15% referred to 'a degree of overlap' between their clinical practice and research, and 16% replied that 'there should be more linkage than there seems to be in reality'. (Fig 1) shows how therapists understood the links between research with practice.
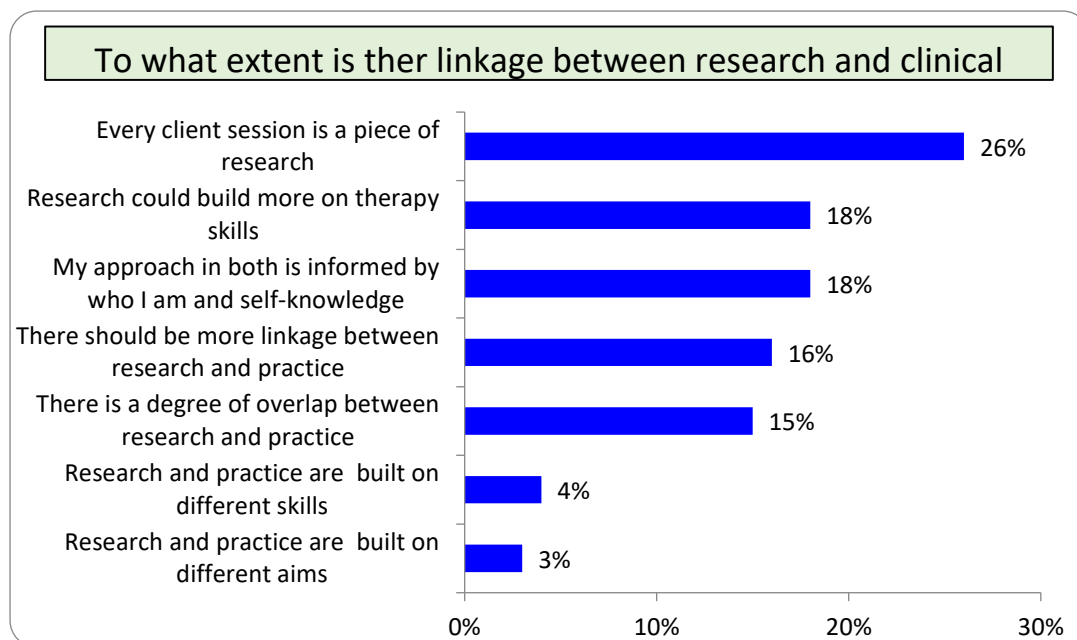

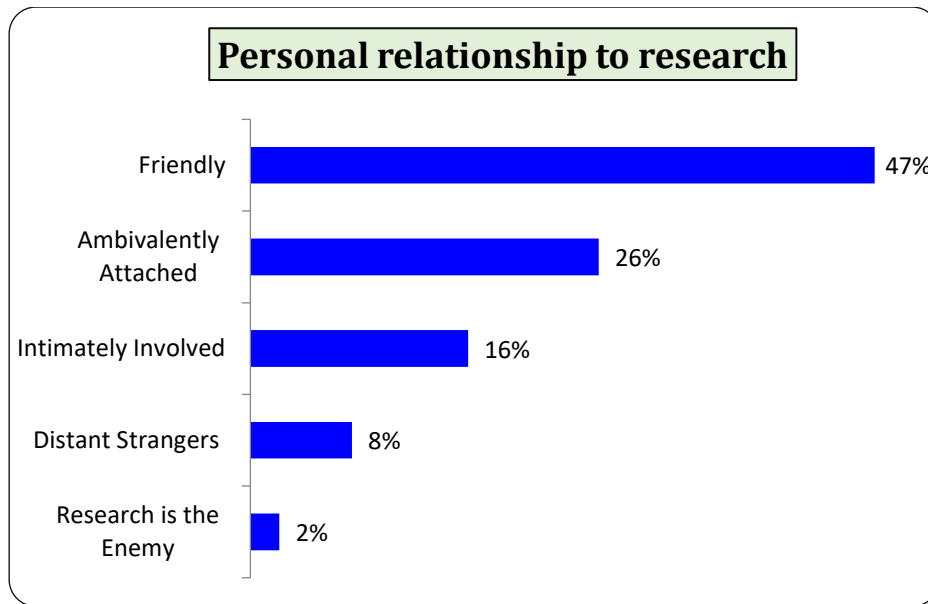Figure 1. Perceived linkage between research and clinical practice

Personal relationship to research

Friendly — 47%
Ambivalently Attached — 26%
Intimately Involved — 16%
Distant Strangers — 8%
Research is the Enemy — 2%

Fig 2: 47% described their relationship to research 'friendly'.

Figure 3 highlights, in turn, what kind of research approach the respondents favoured. Resonating with our earlier study, case studies, narrative research and phenomenology were rated higher than survey and RCT.

Interested in which research approach ?

Case Studies — 17%
Narrative Research — 17%
Phenomenology — 15%
Mixed methods — 11%
Relational research — 11%
Literature review — 10%
Auto-ethnography — 5%
Action research — 5%
Surveys — 4%
Experiments — 3%
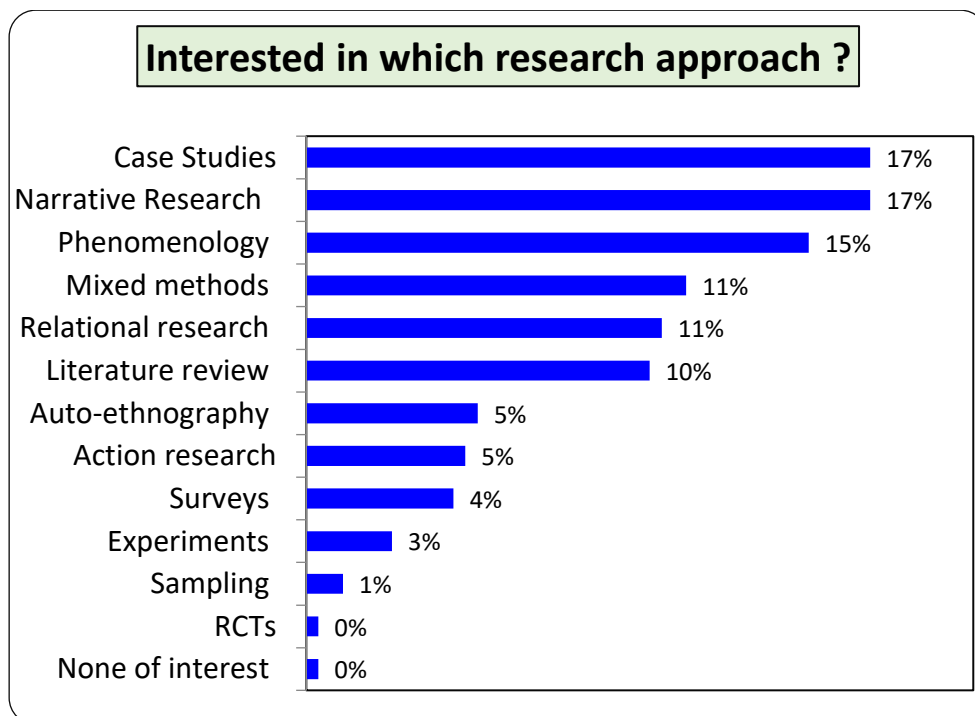Sampling — 1%
RCTs — 0%
None of interest — 0%

Figure 3: Favoured research approach (p 11)

The chosen research approaches seemed to resonate clinical priorities. Fig 4 shows, for instance, how therapists rated 'relational knowing' highest (28%) and referred to 'not knowing' (24%) as more relevant than 'keeping a rational mind' (3%):
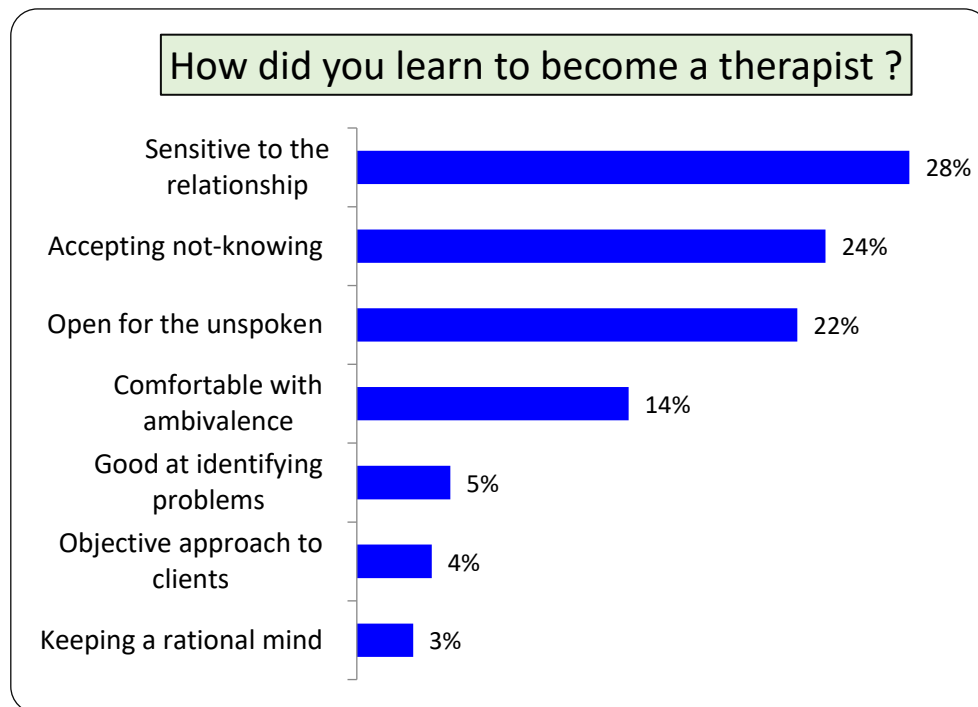

Figure 4: Knowledge in clinical practice (p 12).

Interviews

We interviewed 9 therapists from the UK (Wales and England), Malta and Sweden, using the qualitative method of narrative-thematic analysis. The participants included 8 women and 1 man in ages ranging from 40-55. Two participants were still in training and 7 had worked as psychotherapists for between 8 and 20 years. The participants were trained to work within psychoanalytic (1), Systemic (2), Gestalt (2), Integrative (1) Transactional Analytically (2) and Play therapy (1). Our original interests in narratives remained, with the hope to capture tone, emotions and ways of making sense of self and others when talking about research. A therapist and doctoral student 'John' described feeling lonely and detached from research at work, and referred to his role a psychotherapist in the NHS as being a 'second class citizen':

Being a psychotherapist can feel like being a second- class citizen in the NHS. I can't research which reflects what I work with. Cognitive, neuro, biological, outcome measures – there's a whole bunch of people I can contact and speak to. But I'm not

> working within those approaches … I struggle with the idea that emotions are measurable, and that I need a scientific practice. Signing up for a doctorate has made me think about how long I have felt lonely in the NHS as a therapist, and it has shown how a sense of community is important ('John')

Whilst own emotions carried an important epistemological significance in clinical practice, another therapist and doctoral student 'Elsy' highlighted how little guidance there was in research with regards to this:

> To read verbal words on the written page as you read particularly when they're very personal… so rife with emotional content and splitting, and you know, polarities and mess and shame, and, you know… What do you do with that? How do you find an expression? Supervision was essential for this. ('Elsy')

Study 3: Academic writing

Our third study (Anonymous 2019. Details omitted for blind reviewing]. expanded on an interest into research opportunities and access. We wanted to learn more about therapists' experiences of accessing others and sharing own research findings on platforms such as academic journals. This survey was distributed widely for more responses. A purposive sampling method was used to identify potential survey respondents with the social media platform LinkedIn being the primary source. We also used our existing academic networks, the European Association for Integrative Psychotherapy (EAIP) to identify suitable survey participants.). The selection criteria for survey participants required them to be post-qualified and working clinically as a practitioner or academic. A total of 222 individuals completed the survey. The gender breakdown of respondents which was female (71%) and male (29%), resonating with the gender breakdown reported in the 2016 UKCP membership survey where the figures were female (74%) and male (24%). A diverse range of self-reported modalities was reported, with the largest grouping identifying themselves as Integrative (53%). Next were those identifying as Psychodynamic (11%). Other modality groupings were Person Centred (7%), Existential (4%), Transactional Analysis (4%), Cognitive Behaviour Therapy (2%), Gestalt (2%), Pluralist (2%) and Cross-cultural (0.5%). The 'other' category (14%)

included Systemic, Psychoanalytic, Acceptance and Commitment Therapy, Arts therapy, Transpersonal and Humanistic.

Findings in study 3:

Of all our studies, this study highlighted problems relating to shame, lack of access and failing support most clearly. One survey participant provided such an elaborate survey response that we decided to invite her as a co-author to our write-up. Addressing fundamentals like actual online library access, [concealed] volunteered:

> Even if I did have access to scholarly resources and even if my research methods were accepted as rigorous, chances are that I would not be able to get my work published in prestigious, well-respected academic journals. This is because I am not affiliated with a university or mainstream research institute. A sole practitioner is effectively a nonentity in the scholarly domain of our field. (concealed p.4).

The survey results echoed with earlier sense of homelessness for psychotherapists with regards to their research interests. 22% had, for instance, never published academically, as highlighted in fig.5.
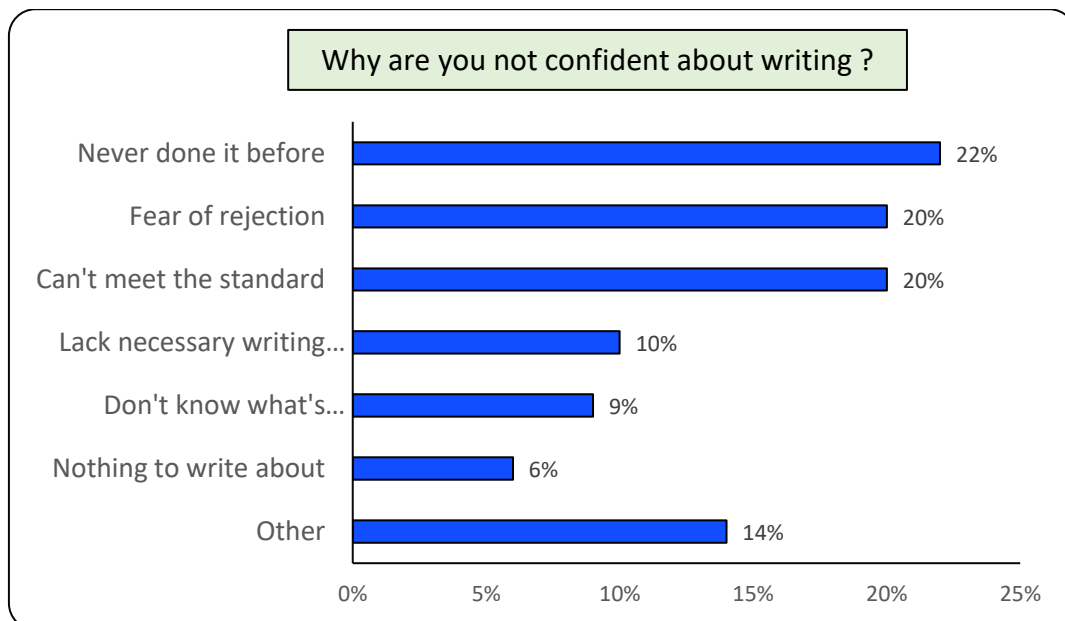

Figure 5:

Therapists' confidence in academic writing.

The open questions captured, however, a further range of obstacles - with 'fear' being a dominating factor. The therapists referred to different kind of fears, for instance:

• Fear of negative evaluation

• Fear of criticism

• Fear of doing harm

• Fear of being found out to be a rubbish therapist

• Fear of being rejected

• Fear of failure

• Fear of peer judgement

The responses resonated with those in our previous study, for instance with 'John' who referred to therapists as 'second class citizens' in the NHS.

Re-search reflection: Supervision

As mentioned initially, the point with this study had been to revisit our own earlier research experience and documented findings - guided by a focus on areas of support, either as explicitly or implicitly addressed by participants (eg at the time missed by usTo our mind, participants across all studies highlighted the complexity involved in both psychotherapy practice and research. Research supervisors play potentially a critical role on different levels. Like Lee (2008), we see the supervisor role spanning from enculturation to emancipation, with gaining confidence in research approaches as essential. For researchers within a practice which moves between arts and science, both 'enculturation' and 'emancipation' take a different meaning than for researchers within specific disciplines. Our participants highlight obstacles ranging from prejudices at work in society surrounding therapists as 'self-less helpers' to epistemological challenges. Therapists are trained to draw on embodied, emotional sources of knowledge, and are likely to benefit from research supervisors who both are familiar with this and knowledgeable in negotiating such knowledge with more traditional forms of knowledge. Reaching out, was another underpinning problem; therapists reported keeping 'the research interest to themselves' which seems astonishing. Difficulties to

research at work and to reach out and communicate across a broader academic community seem a further area of support for research supervisors to keep in mind.

Study 4: Research supervision

In response to earlier findings, our fourth -and for this paper final, study has been guided by an interest into research supervision. This section relates to our recent pilot survey (n=49) distributed across four doctoral programmes (3 professional doctorates and 1 PhD) within one training institute for counsellors, psychotherapists and counselling psychologists.

Literature review in study 4

A brief literature into research supervision via EBSCO captured supervision as an under-researched area; Bruce & Stoodley (2013, p.5) assert for instance that"little is known to date of the teaching lenses adopted by supervisors as they go about their supervision". Armstrong (2004, p.134) refers to research supervision as "an aspect of teaching and learning that has been seriously overlooked" and that "high failure rates for research dissertations in the social sciences have been partly attributed to student dissatisfaction with supervision and poor student supervisor relationships" . Metcalfe, Wilson, and Levecque (2018) conducted interviews with key staff and postgraduate researchers at ten Higher education institutes (HEIs) found the academic culture emphasising high-achievement high work load in ways where displaying weaknesses often was construed as a sign of failure, and concluded that "for HEIs to provide a safe working environment for PGRs that supports their wellbeing and mental health the whole sector needs a systemic culture shift" (Metcalfe et al. (2018, p.41) Research supervisors are uniquely positioned "to notice when their postgraduate researchers slip the wrong way on that spectrum as spotting subtle signs of distress", which in turn requires a balance of general academic support with "knowing what is 'normal' for [each] particular person" assert Metcalfe et al (2018 p.30). Stephenson (2016) and Kleijn, Meijer, Brekelmans & Pilot's (2015) resonate with this and stress the importance of 'adaptive

research supervision' to meet students' needs in light of the goals of their different tasks. It is however still, as Lee described in 2008, often understood as simply 'naturally built on the supervisor's own experience [from own prior supervision]'. There was a general consensus research supervision 'lacking benchmarks' - not just within psychotherapy but across most disciplines, as Taylor (2017, 2018) asserts.

Our own study into research supervision started, then, with a pilot survey including alternative question paths for supervisor and supervisees respectively. It included questions like '*how important is research supervision'; what is most valuable about supervision; what are the key attributes of a good research supervisor; what are the key attributes of a good research supervisor; what are the key factors in becoming an effective supervisor; what are the main challenges facing supervisees in research?*'

Findings in study 4:

Research supervision is extremely important.

The survey showed that over 90% of research supervisees rated research supervision as important, with 74% rating it as extremely important (fig. 6)

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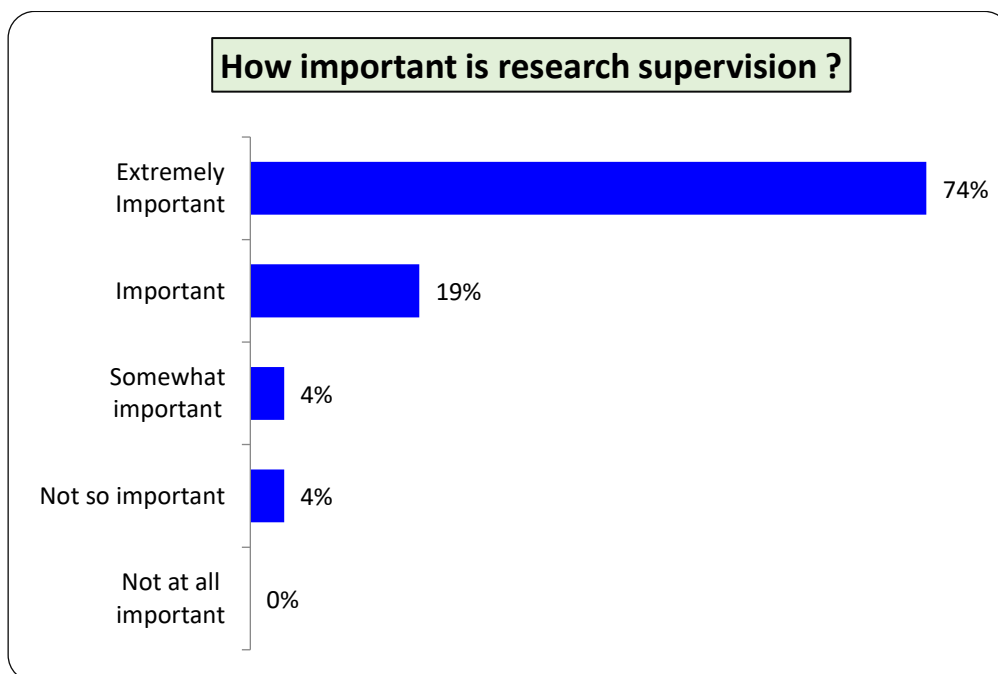
(Fig. 6) The importance of research supervision

The pilot survey (Fig 7) showed, further, that 'empathy' as highly rated as supervisors bringing 'research experience'. 17 % rated empathy as a key component, compared to 7% rating topic expertise as most significant.

Supervisees View of Key Attributes of Effective Supervisors

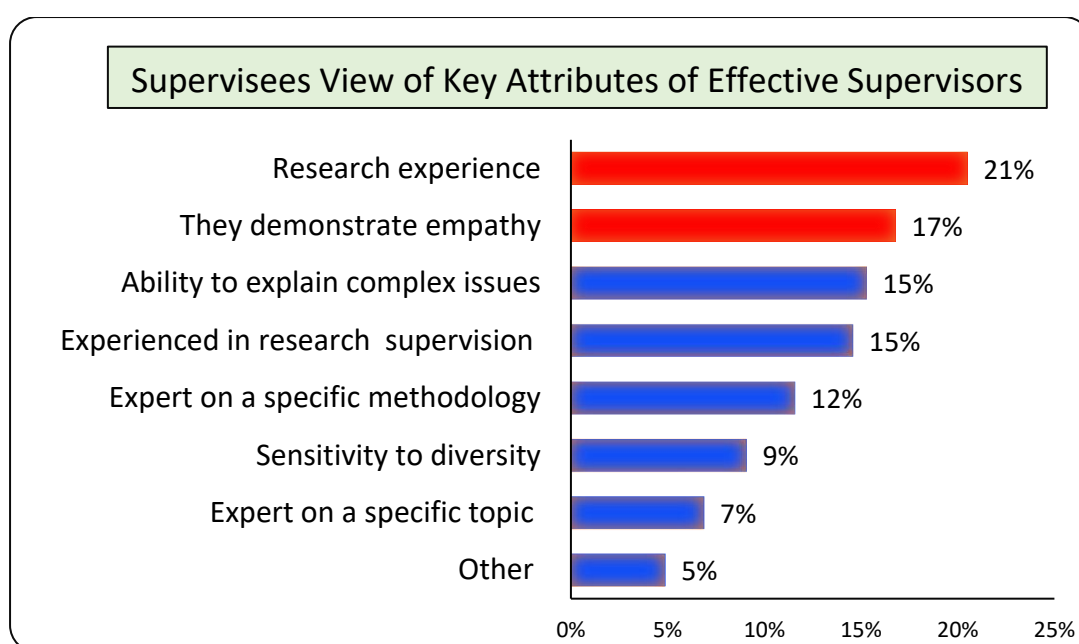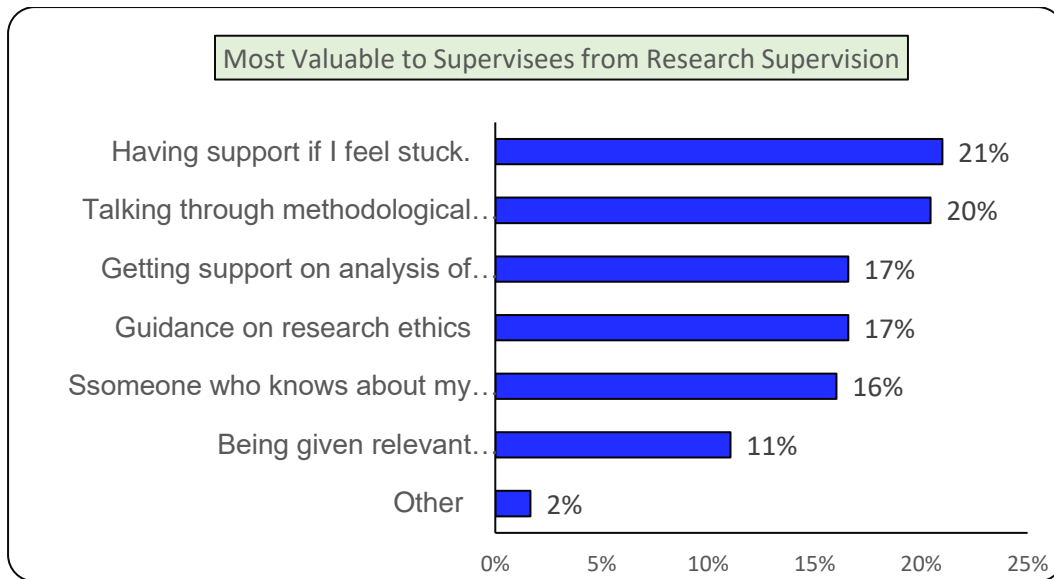| Attribute	Percentage
Research experience	21%
They demonstrate empathy	17%
Ability to explain complex issues	15%
Experienced in research supervision	15%
Expert on a specific methodology	12%
Sensitivity to diversity	9%
Expert on a specific topic	7%
Other	5%

Fig. 7. What does supervisees describe as constructive research supervision?

Empathy was also emphasised in the free text comments. One supervisee responded for instance that *'I have found that when working with a supervisor that demonstrates support, empathy and encouragement, the supervision experience is invaluable'*.

'Talking about methodology' was rated important, but having 'support if stuck' was even higher rated (fig. 8) in the survey.

Most Valuable to Supervisees from Research Supervision

Having support if I feel stuck.	21%
Talking through methodological…	20%
Getting support on analysis of…	17%
Guidance on research ethics	17%
Ssomeone who knows about my…	16%
Being given relevant…	11%
Other	2%

F   Figure 8. What supervisees value most from a supervisor

Resonating with our literature review, research supervisors (n=22) rated in turn their own earlier supervision experiences as particularly significant (22%) for becoming an effective supervisor (fig. 9). The responses from our pilot study suggests that research supervisors are aware of the significance of balancing emotional and academic holding.
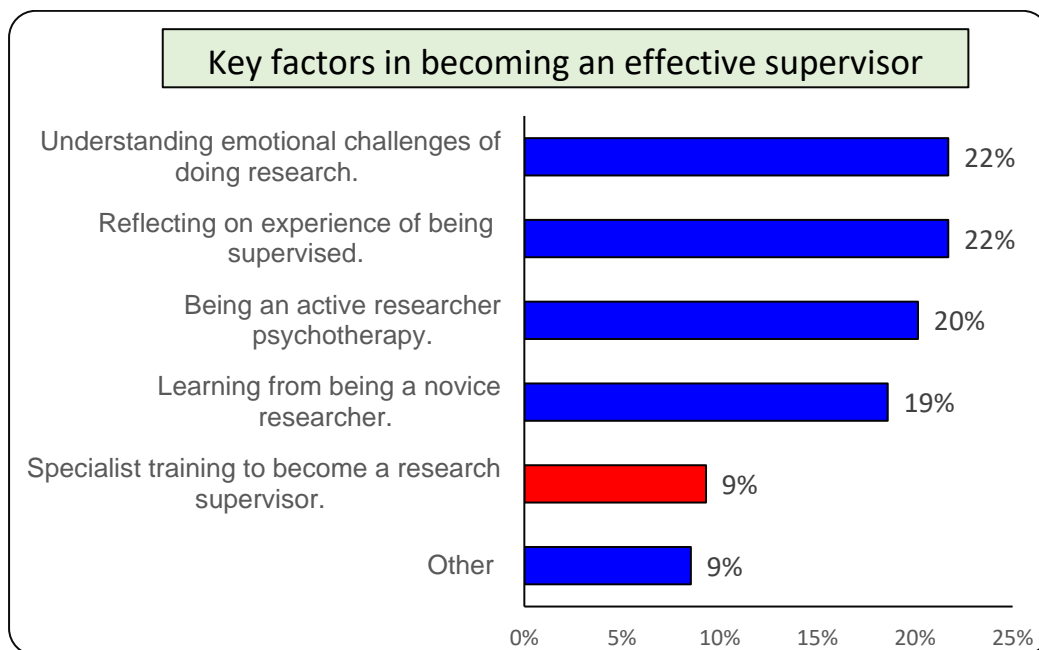
Key factors in becoming an effective supervisor

Understanding emotional challenges of doing research.	22%
Reflecting on experience of being supervised.	22%
Being an active researcher psychotherapy.	20%
Learning from being a novice researcher.	19%
Specialist training to become a research supervisor.	9%
Other	9%

Fig. 9 Supervisors on becoming a good supervisor

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Focus group. The pilot study findings were presented for a group of research supervisors (n=21) as a 'focus group' involving supervisors at an in-house training event. The participants had been asked to add input to the final survey as part of discussing and planning a trading event for themselves. A lack of benchmarks for research supervision was highlighted as a reoccurring theme at the training event, triggering questions about 'how to develop knowledge and practice in research supervision'. Questions raised included 'how do supervisors know 'how much' to help students, how much support is the 'right' amount?' and 'what happens when although the relationship with a supervisee is good, and they seem engaged with the research, the work doesn't progress?' The questions resonated largely with the pilot study findings which also raised questions about methodology, research process, workload and expectations of postgraduate research as shown in (fig. 11) below.

(Fig.10) Main challenges for supervisees
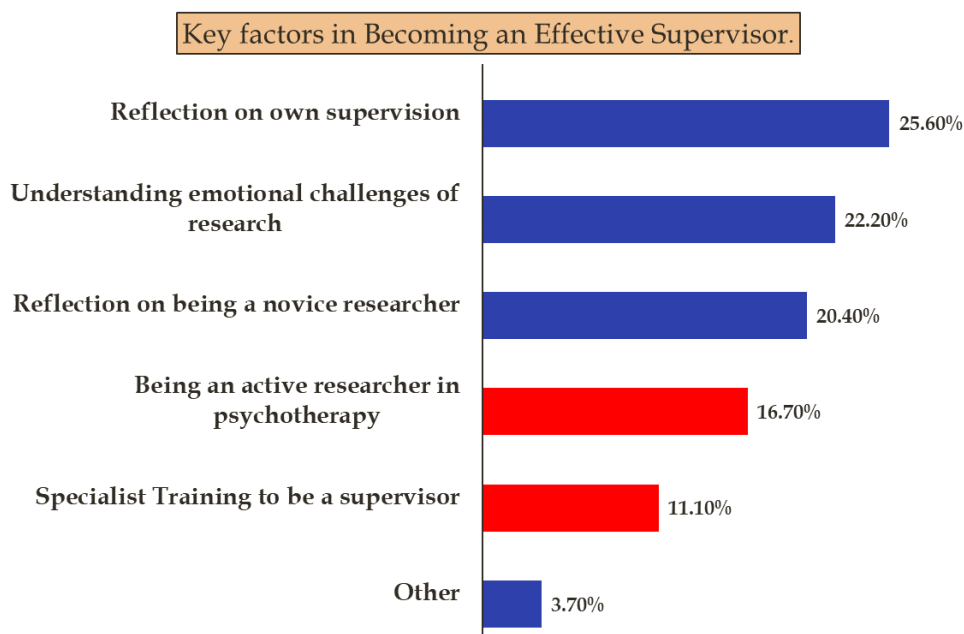
Synthesised re-search reflections

Mixed methods: dialectical engagements across research perspectives

Our re-searching followed the stages of the TRP studies, starting with a qualitative (narrative) study, resonating with the logic of what Creswell & Clarke (2006) refer to in terms of a an 'exploratory' sequential mixed methods design. This starts typically starts with a qualitative phase and is followed by a quantitative phase, to result in a final phase of integration where findings from the two strands of data collection and analysis are reflected upon.

In reflection, we resonate with Frost & Bailes-Rodriquez (2020) and Hesse-Biber (2015) who refer to mixed methods and pluralistic research as something which can either fuel conflicts of create bridges across disciplines Hesse-Biber's emphasises 'lose boundaries' in mixed methods studies, with options to genuinely and respectfully integrate different knowledge-building processes for an as broad and deep exploration as possible. We have found this essential to consider. Hesse-Biber (2015) writes:

"Dialogue and reflexivity within and across research inquiry communities of sameness and difference can provide the ground for coming together to identify, challenge, and negotiate the range of out across methods and methodological differences and thereby providing the possibility of innovation and negotiation and a vibrant mixed methods community of practice."

To us, this is especially relevant in context of the 'homelessness' that the participants have referred to across our studies. Hesse-Biber (2015) raises questions about who's 'reality' is being represented, and why; what discipline speaks loudest, and which/who's knowledge building processes may be silenced as a result of that? Hesse-Biber (2015) writes

"Who gets to carve out and determine what knowledge becomes legitimated?
To what extent does this process serve specific ends? What is lost?
Who gets to challenge and reframe or rename a given concept? (p.175).

For psychotherapists who's work sometimes is described as an art and sometimes as a science, this homelessness can become an almost inevitable aspects of research. The potential to move 'dialectically' (Bager-Charleson, McBeath & Vostanis 2020) between qualitative and quantitative research can to our mind benefit and even suit psychotherapists with interests in moving between across traditional arts and science borders. Whilst mixed methods may be

relatively widespread in many areas, qualitative research has traditionally – and for reasons elaborated upon here, attracted therapists. Mixed methods can ideally both help to combine deep and broad knowledge and support therapists in engaging with other disciplines and multiple outlooks.

Limitation of the study

This is a re-search of earlier studies, viewed from 'inside' by the lead researchers of the projects. The findings are therefore clearly limited to the lenses of the viewers, and might have been described along a different narrative trajectory of outsiders. Our aim has however been to invite to discussions both about our research, but also to model ways for other researchers to return to when reflecting upon earlier multiple studies.

Future areas for research

   Our literature review highlighted the importance of research supervision, but also how this is a surprisingly neglected and under-researched professional area. Our pilot study reflects the start of a more extensive project With this in mind, we are delighted to by the time of publication for this journal have received funding from the UKCP (United Kingdom Council for Psychotherapy) to expand our research supervision study into a wider, international, cross-disciplinarian study. This new UKCP research fund supports research endeavours in the 'often undervalued – and misunderstood field of psychotherapy research'*. We regard this as a clear indication of that member-organisations for psychotherapists share our concern and interest into developing research supervision to forward psychotherapy and counselling psychology as a thriving discipline among others within the broad field of emotional well-being and mental health.

*https://www.psychotherapy.org.uk/about-ukcp/research/ukcp-research-fund/

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