Therapists as Research-informed Practitioners (TRP) Metanoia Institute, London.

Chair: Dr Sofie Bager-Charleson **sofie.bager-charleson@metanoia.ac.uk**
Research team: Dr Sofie Bager-Charleson, Dr Alistair McBeath, Professor Simon du Plock, Dr Biljana can Rijn, Dr Marie Adams and Alan McPherson, Metanoia Institute

Description.

There is an increased emphasis on research in the field of counselling and psychotherapy. Previous studies* suggest however a strained relationship between psychotherapy research and psychotherapy practice, with therapists often mentioned at the margins of the research community. The TRP group has developed in response to this critique, focusing on opportunities for psychotherapists and counselling psychologists to develop into confident research practitioners. An overarching aim of the group is to contribute to a deeper understanding of how therapists experience the transition from therapists to researchers. What are the opportunities and obstacles, personally, professionally, and academically? The TRP aims to enhance research training for counsellors, psychotherapists, and counselling psychologists by providing learning and professional development events, supporting research and best-practice developments, and making policy recommendations to promote effective and sustainable research training for therapists.

Outcome and impact so far

- A narrative thematic inquiry into counsellors' and psychotherapists' engagement with research (p.2)

- A mixed methods exploration of practitioners' views on the relationship between psychotherapy practice and research (p.4)

- A mixed-methods inquiry into counsellors' and psychotherapists' engagement in academic writing (p.8)

- Becoming a Research Practitioner. A meta-synthesis into therapists' transitions in postgraduate research (p.10)

- A Mixed-method study into Research Supervision (p.13 and p. 18)

- The challenges and experiences of psychotherapists working remotely during the Coronavirus pandemic (p.20)

Ongoing projects:

- Attitudes to Mixed Methods Research in Counselling and Psychotherapy: An Online Survey Diversity in Research Supervision. Principle Investigator Dr Alistair McBeath, with Dr Sofie Bager-Charleson

- A Mixed Methods Study into Socio-Cultural Obstacles and Opportunities in Research Supervision of Psychotherapists. Dr Sofie Bager-Charleson, Professor Divine Charura, Professor Keith Tudor and Dr Biljana van Rijn

- Making the transition from therapist to research practitioner: The role of reflective writing in postgraduate research. Principal Investigator Dr Marie Adams

- The Silent Practice: a mixed-methods exploration of the absence of practicing humanistic and integrative counsellors and psychotherapists' contributions to research, Principal Investigator Alan McPherson, PhD project.

More detailed information about completed projects:

- **Project 1: "Therapists have a lot to add to the field of research, but many don't make it there". A narrative thematic inquiry into counsellors' and psychotherapists' engagement with research (Bager-Charleson, du Plock, McBeath 2018).**

The study was based on doctoral dissertations (n = 50), interviews (n = 7) and research journals (n = 20) across 19 cohorts and years from one professional doctoral programme. The study identified three stages of therapists' embodied engagement with research including "feeling overwhelmed," "developing coping strategies" and "feeling illuminated, personally and professionally" through research.

The "data analysis" stages involved typically a high level of stress, often coupled with shame and confusion; "*I underestimated the data- analysis*," said one therapist, '*you're desperately trying to find themes and codes and things but, actually, this is somebody's life.*"

Several therapists described becoming unwell during their data-analysis work with unexplained pain, hypertension, palpitations, chest pains, panic attacks and difficulty sleeping being some of the self-disclosed symptoms recorded. Associated with somatic disturbances was a feeling expressed by many therapists of 'excessive immersion' whilst attempting to analyse their data. One therapist stated that, '*I really did eat, sleep and breathe the research'*. One therapist expressed feeling unprepared for the lack of self-care in research, suggesting that 'the literature on qualitative research emphasises the importance of protecting the research participants. There is not much on protecting the researcher'.

Most therapists aimed to keep a relational focus and to draw from their embodied and emotional responses as sources of knowledge, as in clinical practice. 'the impact of the written word' could be 'very disorientating'. Again, moving from a clinical training which focuses on emotional content, the therapists describes a lack of means to express their findings. The same therapist says:'*… words on the written page… they're very personal… so rife with emotional content and splitting, and polarities and mess…What do you do with that? How do you find an expression*?'

Feelings of being lost, isolated, and emotionally vulnerable were often referred to. 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'

For several therapists, research **s**upervision was described as a crucial coping/support strategy, through its opportunity to explore the emotional aspects of their research work. One doctoral researcher and therapist captured its value with these words,

'The research tapped into my fears around failing, and [emotionally attuned] research supervision helped me to understand and contain those feelings'.

Many expressed surprises over how little value this epistemic positioning appeared to have in the general discourse about "research,"

Some therapists who felt that words couldn't fully capture the responses and meaning from research participants found alternative mediums with which to process their engagement with data. One doctoral researchers and therapist described her approach with these words:

'You could find words, of course you could, but somehow they felt inadequate, a blunt instrument. I found other mediums actually allowed for actually going to places you wouldn't go to… I used music, drawing and cooking'.

Embracing transformative learning was a significant aspect of coping, one therapist expanded on this.

'[I became] overwhelmed by the material coming in, by its sheer volume, and also by the existential challenge much of what I was reading presented to my own understanding of who I am and how I had come to think of myself in the way I did. About 15 months into the [programme] I began to have heart palpitations…'

Sharing initial palpitation, panic attacks and shame, the participant continues to describe transformative learning, with him becoming 'aware of how easily we/I seek solid ground to live on, when actually there may be no such solidity'.

The therapist continues to describe research as 'learning to live with uncertainty and possibility', concluding:

> *'...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, 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'.*

The accounts highlighted in this sense tangible effects of transformative learning, including strong somatic and emotional responses as part of the process of abandoning previous understandings and existing temporarily in a no-man's land as part of generating new knowledge.

- **Project 2: 'The Relationship Between Psychotherapy Practice and Research: A Mixed-Method Exploration of Practitioners Views' (Bager-Charleson, McBeath, du Plock 2019).**

This study reflected an expansion of previous research to include participants across training institutes, modalities and countries. The survey presented here is a mixed-method study into both novice and senior therapists' more general experiences from research, across different training programmes within and outside the UK, gaining data from an online-survey(n=92) and interviews (n=9) based narrative- thematic analysis are presented

Some key questions were; How do therapists describe their relationship to research; What amount of formal research training do therapists have; what extent do therapists feel that their own research is valued; How do therapists perceive research—what sort of activity is it; To what extent does research inform therapists' clinical practice?

In summary, not feeling valued as a researcher was, regretfully, a recurring theme; our survey suggested that among the research active, only 2% answered that their research as valued "to a large extent" by colleagues. This offered a background to the critique of therapists' comparative low involvement in research. With parallels to our earlier study (Bager- Charleson et al., 2018) research active therapists described a sense of *homelessness*. Some even chose to keep their interests in research to themselves; one therapist described being actively discouraged at work from making herself "overqualified" for her role as a counsellor. Another described how, "all my colleagues are scared of research." The findings suggested that more systematic efforts are required to understand and foster psychotherapists' engagement in research activities.

Our survey and interviews resulted in the following themes:

Theme 1: "**Experimenting with ideas and then finding new knowledge is fascinating**"

In our survey and interviews participants spoke generally enthusiastically about "research". One therapist said: '*Everyday I talk about research, I have become really passionate about the process, the exciting process about not knowing anything and then finding out, experiment with ideas and then finding new knowledge*'.

The survey (n-92) also reflected an overall positive view to research, 48 % describing their relationship to research as 'friendly' (fig 2:1)
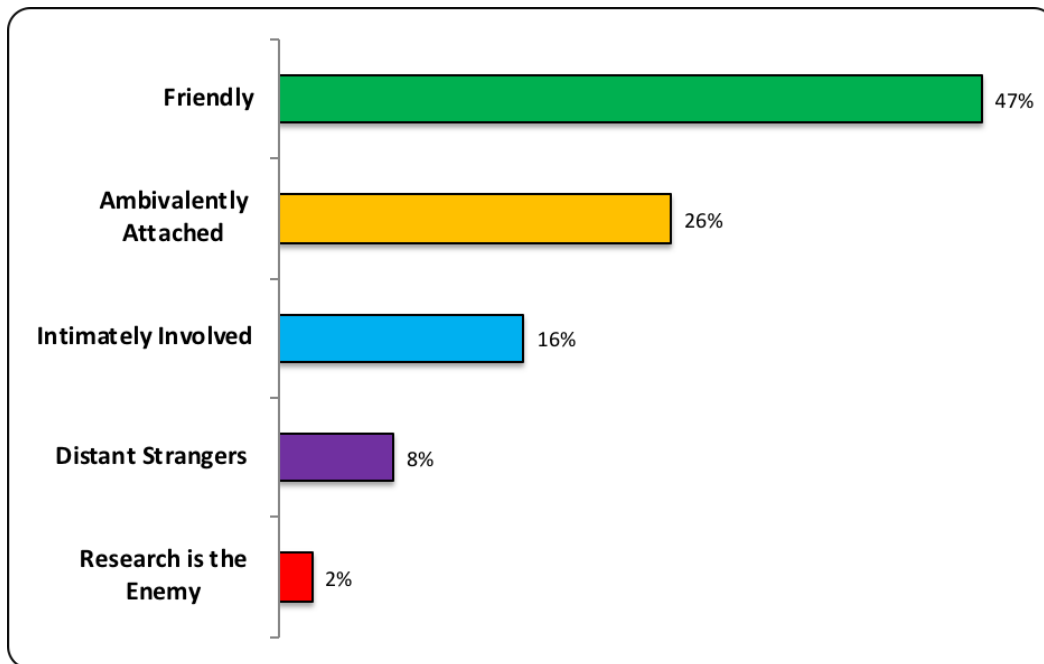
(fig.2:1) Attitudes to research

Theme 2: "As a therapist I am feeling homeless with my research"
However, similar to in our first study, many spoke about a sense of homeless and about feeling unsupported as a research practitioner. One said '*I have done research training, and I always spend time on learning extra about my clients… But when I ask my manager [about doing more research] she says, you're already overqualified for [being] a counsellor…" She makes me feel that wanting more training is a bad thing … an escaping from work*'.

**Theme 3: "Research is a lonely and unsupported process"**
This is an expansion from theme 2, referring to how many therapists refer to psychotherapy as an unsupported discipline. Peter, a doctoral researcher and psychoanalytic therapist who works at a hospital describes therapists as 'second class citizens' within the NHS. He says: '*The largest upset is to not find research which reflects what I work with. Being a psychotherapist can feel like being a second- class citizen in the NHS. 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'.

**Theme 4: We need a broader "structure" for research**
Again, resonating with previous theme, the way we construe research is often referred to as too narrow. Eva, the doctoral researcher and Gestalt therapist in Sweden says, *'we need a broader "structure" for research. I feel frustrated always needing to struggle to explain our theories. I want to do more research, but I want research training which helps us to research the things that we actually work with... I mean what it's about to be human'.*

The emphasis on the value of embodied, emotional and unspoken forms of knowing was reflected in the survey responses too (fig 2:2).
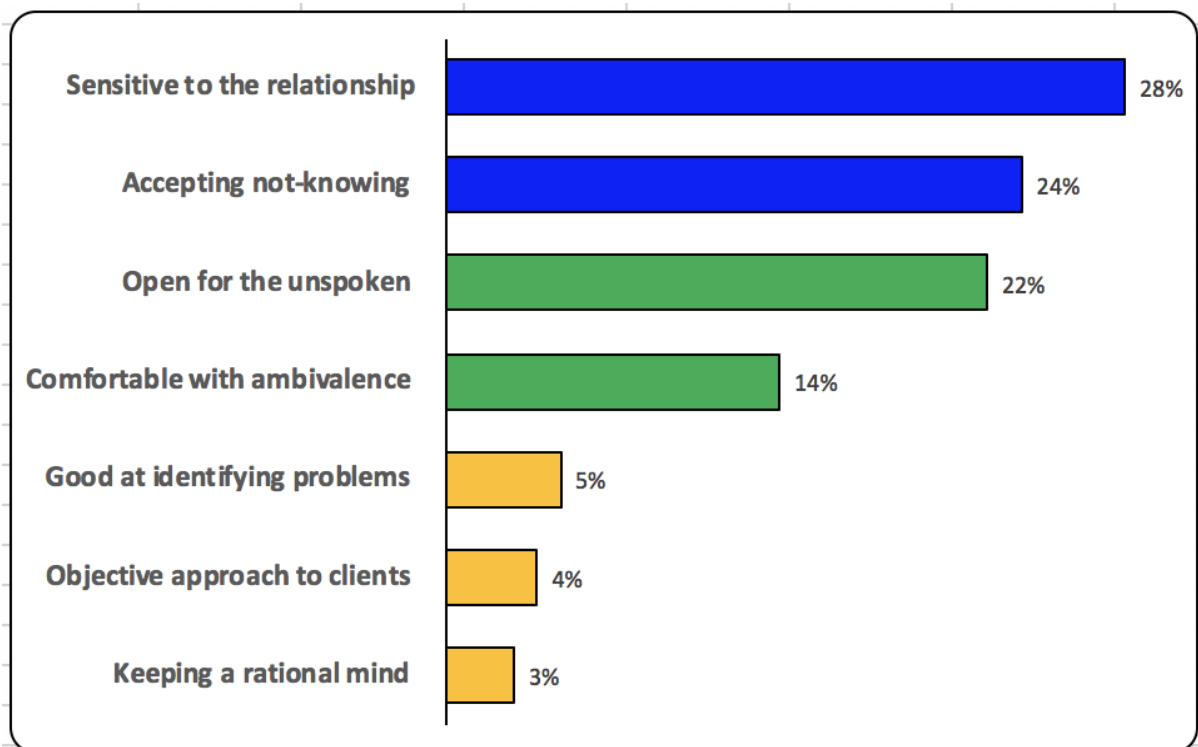
(Fig. 2:2). Key sources of knowledge in clinical practice for therapists

This resonated in turn with the survey respondents favoured choice of methodology (fig. 2:3).
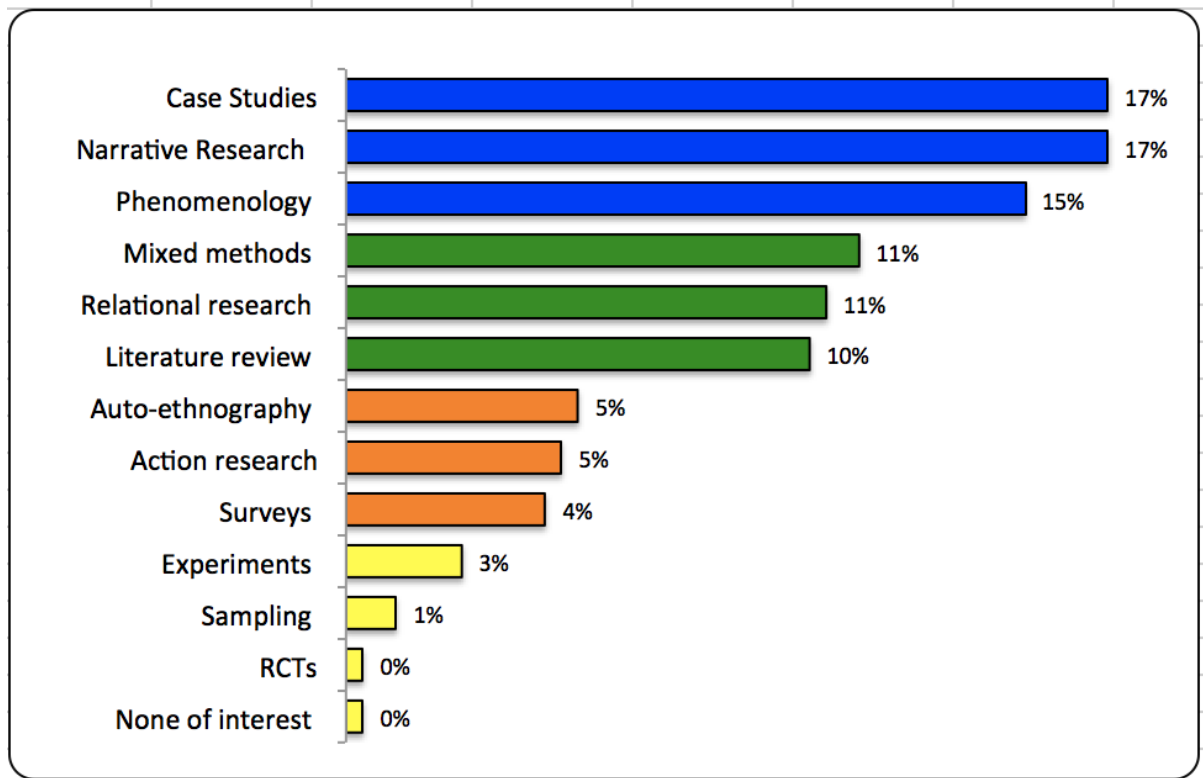
(fig. 2:3) Favoured research methodology

In the interviews, therapists echoed with the earlier sense of "homelessness' as researcher. One said:

'*My training didn't involve much research at all, it was about being experiential and working with embodied processes in therapy. It doesn't fit in with the evidence-based framework. […] Measuring won't help us to understand what it's about to be a person, a human*'

   Theme 5: "Research is too little too late, in clinical training"

Only two participants spoke in positive terms about research as part of their original therapy training, and interestingly both had undertaken research training elsewhere as part of their social work degree before therapy training. The others expressed a feeling of "too little too late": A trainee at the end of her Integrative training, refers to the research training as poorly- timed; the research units felt like unwanted "add-ons" at a busy period of the training:

'*I came from a medical background and had looked forward to the research, but the timing made it feel like a burden alongside the other projects we needed to do. Most people on my course do not know anything about research apart from as personal development. It is an uphill struggle to make people believe that more research will be beneficial, I do not know why it has to be like that in therapy*'

Another resonated with the experience of a narrow training, saying 'we only really heard about autoethnography, didn't read about anything else'

Another doctoral researcher and therapists said, in turn, interestingly:
'I say I don't like survey, but to be honest I don't know anything about it'.

- **Project 3: "Therapists in the Public Domain. A mixed-methods inquiry into counsellors' and psychotherapists' engagement in academic writing**", by McBeath, A., Bager-Charleson, S. and Abarbanel, A.

Therapists are expected to be updated about ongoing research in their field, and ideally engage in research to evaluate their own practice. Our research indicated however so far that therapists were under-represented in the general research community, especially in peer reviewed publications. Our literature review (Beutler, Williams, Wakefield, & Entwistle, 1995; Barrom, Shadish, & Montgomery, 1988; Cohen, 1979; Cohen, Sargent, & Sechrest, 1986; Prochaska & Norcross, 1983; Morrow-Bradley & Elliott, 1986, Safran et al 2011, Beutler, Williams, & Wakefield, 1993; Darlington & Scott, 2002; Boisvert and Faust 2005; Castonguay et al 2010; Tasca 2015; Henton 2012, see more Bager-Charleson et al 2018) had for instance suggested that:

- Therapists do read research 'but not as often as other researchers do';

- Therapists' knowledge around research tends to be 'patchy' and in-depth knowledge is associated with topics of personal interest;

- Therapists are more informed by clinical experience, supervision, personal therapy, and literature than by research findings;

- Therapists' research often stems from an unstructured integration of knowledge gained from workshops, books, and theoretical articles;

This next study was the first among the TRP studies not specifically targeting therapists in research training. It was conducted as a mixed method focusing on therapists' engagement in academic writing, arranged around a survey disseminated across Europe with the help of the European Association for Integrative Psychotherapists. The survey (n248) focused on key issues like:

• Psychotherapists' confidence around academic writing
• The key elements of good academic writing
• An audit of psychotherapists' academic output
• Whether academic writing should be a taught skill for therapists
• The key reasons for academic writing
• The extent to which clinical practice is informed by published work.

The survey included open questions, providing free text comments. Both sources of qualitative and quantitative data suggested a low degree of own involvement in academic writing.

'Can't meet the standards'
Many therapists had, firstly, never engaged in academic writing at all before; this reason accounted for 22% of all responses. A further 20% accounted fear of rejection, and another 20% claiming 'can't meet the standards' combined with 'lacking writing skills' and 'not knowing what's involved' as shown in Figure 3.1.
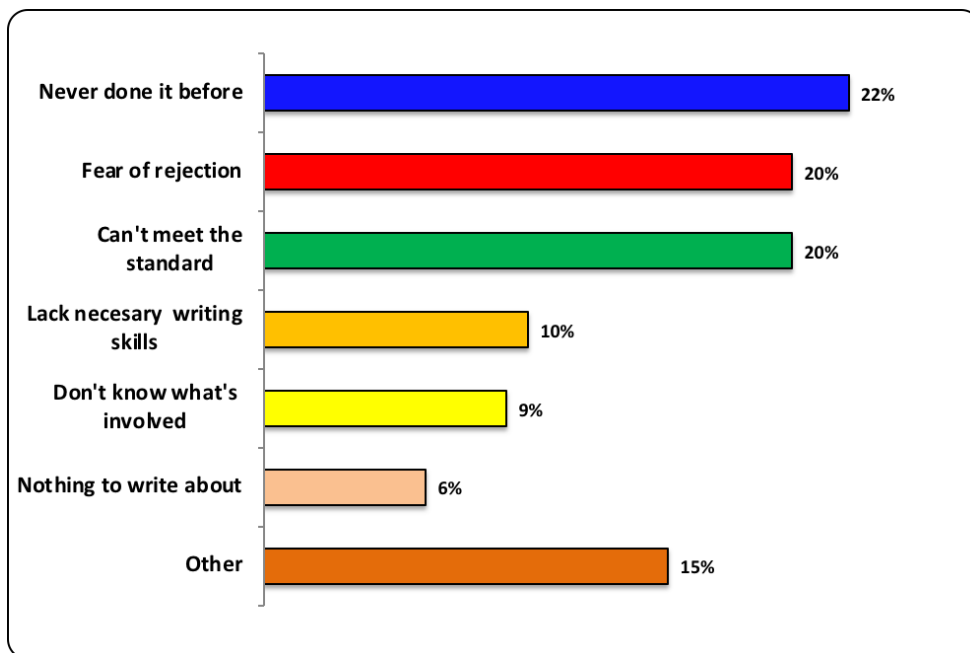

Figure 3:1 Why are you not confident about writing for research journals?

Figure 3:1 highlighted, in short, how therapists firstly not typically engaged in academic writing themselves – implying to us a lack of training with poor research literacy in result. The 26 free text comments offered some key features about what therapists perceived as 'good' academic writing. These included 'evidence of reflexivity' which in turn reflected our earlier findings about therapists' leanings towards qualitative research. Others were 'being creative/original in presenting ideas' and 'effectively disseminating knowledge'. Some mentioned the importance of clear ontological and epistemological positionings in academic writing.

 Five main themes were created from the data:

• writing style
• difficulty in accessing academic writing
• the academic-practitioner gap
• fear and lack of confidence
• lack of knowledge and support

There was an interesting distinct perception of the psychotherapy profession having become 'too concerned' with research. Triggering the title 'once upon a time psychotherapy practitioners and researchers were the same people' was a contribution

from one of our survey contributors*. The survey responses referred overall to research journals being either 'too academic', 'technical' or 'laden with statistics'. A diminished focus on the development of clinical skills was referred to as one of the consequences of this. The approach and style of research writing within psychotherapy seemed in this sense to act as a divisive factor, perceived -paradoxically, as inhibiting the dissemination of knowledge amongst therapeutic practitioners

*McBeath, A., Bager-Charleson, S., and Avigail Abarbanel. Therapists and Academic Writing: "Once upon a time psychotherapy practitioners and researchers were the same people". *European Journal Qualitative Research in Psychotherapy*, Volume 9, 103-116. Vol. 9, 103-116

- **Project 4: Becoming a Research Practitioner. A meta-synthesis into therapists' transitions in postgraduate research, Bager-Charleson, du Plock, McBeath and Adams (2020)**

Our meta-synthesis followed three analytic phases, namely revisiting and reviewing the original findings (meta–data analysis), considering the original methods (metamethod and metatheory phase) and discussing, comparing and contrasting the primary research (the synthesis phase) by "digging deep to generate new knowledge about the phenomenon under study" (Paterson, 2007:76). Our re-search was triggered by an upcoming conference about transition, opportunities and access in higher education. Interpreting earlier research (Bager-Charleson, du Plock, McBeath 2018; Bager-Charleson, McBeath, du Plock 2019; McBeath, Bager-Charleson, Abarbanel 2019) with a new transdisciplinary audience, contributed to new perspectives (Table 4:1).

(Table 4:1) On becoming a practitioner researcher, personally, professionally and educationally

Personal	Clinical practitioner	Researcher
• **Stage 1 Losing sense of personal self**	• **Stage 1 Losing sense of professional self**	• **Stage 1 Not finding research identity**
I was feeling removed, detached, disembodied I had played in the words so much I lost sight of the body I read and read and read I really did eat, sleep and breathe the research'	I don't tell my colleagues about my research	desperately trying to find themes and codes and things but, actually, this is somebody's life.
Experiencing Pain; Hypertension; Palpitations; chest pains;	…research is sort of about showing how clever you are, wanting to show off and all my whizzy little ideas. [I'm a counsellor and] it's in my DNA to help those who are marginalized	end-result was very nicely polished [but didn't show] how it really played itself out, and how difficult it became'

panic attacks; insomnia; excessive immersion; I began to have heart palpitations. These were extremely alarming …I didn't talk to with anyone in case they would think I was being ridiculous … an incredible tightness across my chest and a heavy 'band like' feeling across my forehead. [I had] literally no idea of how [to] shape the literature [into] a coherent, elegant, 'whole'.		
It's been horrific, I've agonised so much, feeling like a fraud, so stupid [It was] shaming [that] simply reading books was giving me such high levels of stress.	[counselling practice] can almost be a race to the bottom to work near all those who we help... not writing articles and stuff!	words on the written page… they're very personal… so rife with emotional content and splitting, and polarities and mess…What do you do with that? How do you find an expression?
…as a woman, who identifies as being black [in a self-sacrificing counselling profession] I would only go so far	All my colleagues as scared of research 2% answered that their research as valued "to a large extent" by colleagues	You could find words, of course you could, but somehow they felt inadequate
	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 …	Measuring won't help us to understand what it's about to be a person, a human' 'I had completely lost the body as a route to knowledge.
.	My training didn't involve much research at all, it was about being experiential and working with embodied processes in therapy over	A sole practitioner is effectively a nonentity in the scholarly domain of our field'
	when I ask my manager [about doing more research training] she says, you're already overqualified for [being] a counsellor…"	the whole world of research and being with all these well-spoken, articulate, bright people

	The largest upset is to not find research which reflects what I work with. Being a psychotherapist can feel like being a second- class citizen in the NHS.	(32%) expressed a lack of confidence about writing for publication. The following responses where offered to this: Lack of access to academic journals Lack of opportunities to publish qualitative write-ups Fear and shame. This was a particularly significant sub-theme.
Stage 2: Positioning self in research different sentences in each transcript, it was like a sword going through me, right there where my heart is, where my soul is, and then the tears would come and sometimes it's quite unexpected.	**Stage 2: Linking practice with research knowledge** I work with being human, working with embodied processes in therapy doesn't fit in with the evidence-based framework	**Stage 2: Linking research with practice** Self-care and reflection in research felt important. Not only did I need supervision in dealing with writing a doctorate, working with challenging material, but also I needed personal therapy to separate out my issues from those of the victims.
Reflexivity and looking at myself in the research helped me to understand my own reactions	Sensitivity to relationships (30%), accepting not knowing (27%) and openness to the unspoken (25%) are more important than a rational mind (2.5%) as sources of knowledge in clinical practice	My supervisor grounded me, she was on my side other mediums actually allowed for actually going to places you wouldn't go to… music, drawing and cooking'
Stage 3: Finding new sense of self I learn so much, on so many levels. The research tapped into my fears around failing, and supervision helped me to	**Stage 3: Renewed, strengthened professional identity** Therapy is about always learning something new 80% of participants indicated that their clinical practice is	**Stage 3: A strong, multilayered research identity** I have become really passionate about the process, the exciting process about not knowing anything and then finding out, experiment with

understand and contain those feelings	informed by reading published material	ideas and then finding new knowledge' Research is just so exciting!
'anxiety, dread and shame' are there to honour our participants and to remind us that our research is both about and by real people'	My research lead to a lasting research mindedness, I understand the clients better… each encounter with the data illuminated something new.	undertaking research into areas which are deeply meaningful and important to us as people, not just as academics, lays us open to challenge and struggle at very deep levels

Three personal, professional, and educational transitional strands stood out with three stages represented for each. Each transitional strand reflected to us a

- loss,
- re-positioning and
- re-integration – of self, research and work.

When extending our literature review, we resonated with McPherson, Punch and Graham (2017) and Meyer (2019) about how transition into post graduate research almost invariably involve pressure points and phases of disorientation, self-doubt and anxiety. To us, psychotherapy and counselling psychology researchers seem however particularly challenged and often disadvantaged. Stereotypes around self-important researchers versus self-less counsellors; epistemological discrepancies between practice and research; limited (if any) prior research training; fear of doing harm; fear for peer judgment; not being able to publish (often qualitative) research; no access to academic journals after training; lack of support at work to pursue research training; lack of research opportunities to research after training were often referred to obstacles – across all our earlier studies (Bager-Charleson, du Plock, McBeath 2018; Bager-Charleson, McBeath, du Plock 2019; McBeath, Bager-Charleson, Abarbanel 2019) as highlighted below.

- **5: A Mixed-method study into Research Supervision, Bager-Charleson and McBeath.**

Background: Research often refers to research supervision as fundamental for student progression (Amundsen & McAlpine, 2009; Gardner, 2009; Platow, 2011; Masek 2017; Roach, Christensen and Rieger 2018) whilst at the same time suggesting that institutional guidelines for supervision remain scarce (Lee 2018; Taylor 2019; Erikson 2019). Holmberg's (2006) research refers for instances to perceptions of research supervisors range from acting as 'coaches' to 'mothers', resonating with Bruce and Stoodley (2013) asserting that 'little is known to date of the teaching lenses adopted by supervisors as they go about their supervision' is being made. Research supervision tends often to, as Lee (2008) suggests, be conceptualised as something 'naturally built on the supervisor's own experience'. Petersen (2007) echoes with this, arguing for a 'more explicit theorising of postgraduate supervision'.

This mixed methods study pursued queries raised in the literary review whilst also building on our previous studies into 'therapy and research'.

Aims, purpose and methodology

The study approached research supervisors and doctoral students and graduates (present and past supervisees) within and outside of the UK, to gain a deeper understanding into the supervision experience on psychotherapy and counselling psychology doctoral studies. *What makes constructive versus non-constructive, unhelpful research supervision on doctoral programmes for therapists? What might supervisors learn from supervisees' experiences of supervision, and vice versa?* These questions permeated the study which included an online survey (N=226) which generated 558 comments and 10 follow-up interviews analyse by reflexive thematic analysis influenced by narrative research (narrative thematic inquiry).

The findings showed, firstly, an unequivocal appreciation of research supervision, as in figure 5:1.
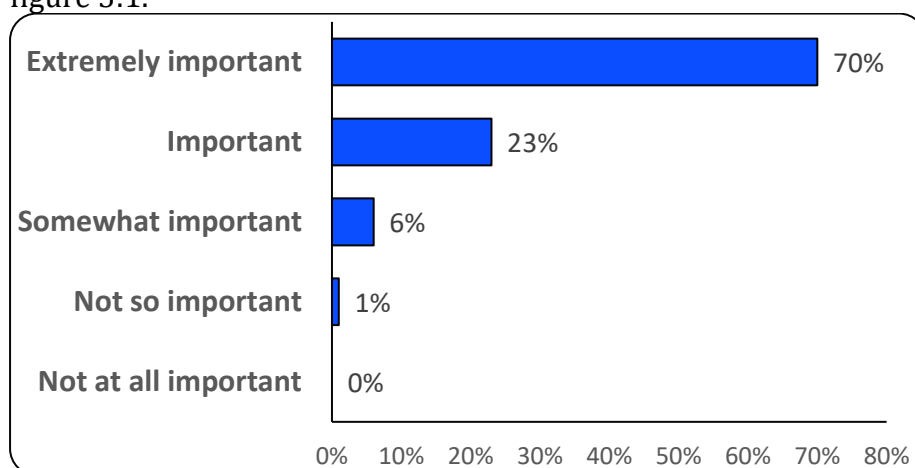

Figure 5:1: How important is research supervision

Interestingly, the **supervisees** valued 'empathy' almost as much as supervisory 'research experience' as shown in fig. 5:2.
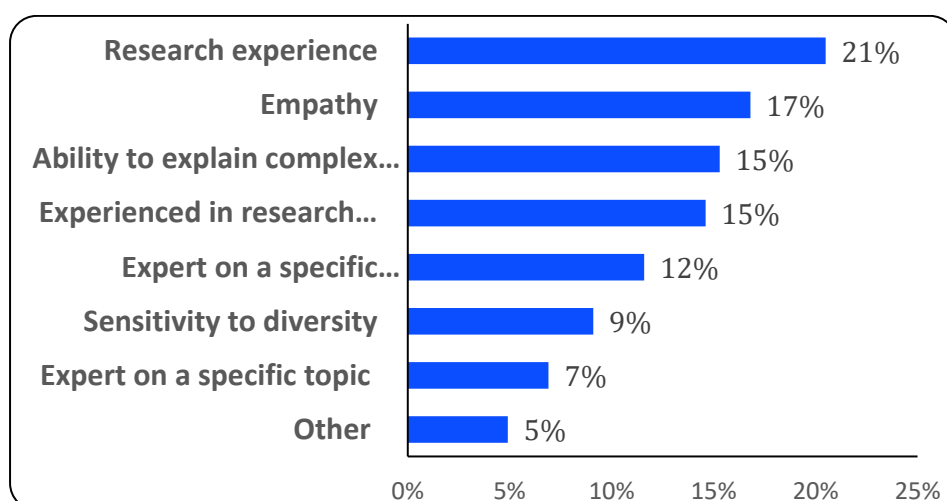
Figure 5:2: Supervisees on key attributes of effective supervisors

Research **supervisors** perceived, in turn, supervisees' needs revolving around 'methodology', and then 'being overwhelmed' and 'not comfortable with academic writing' as in fig. 5:3.
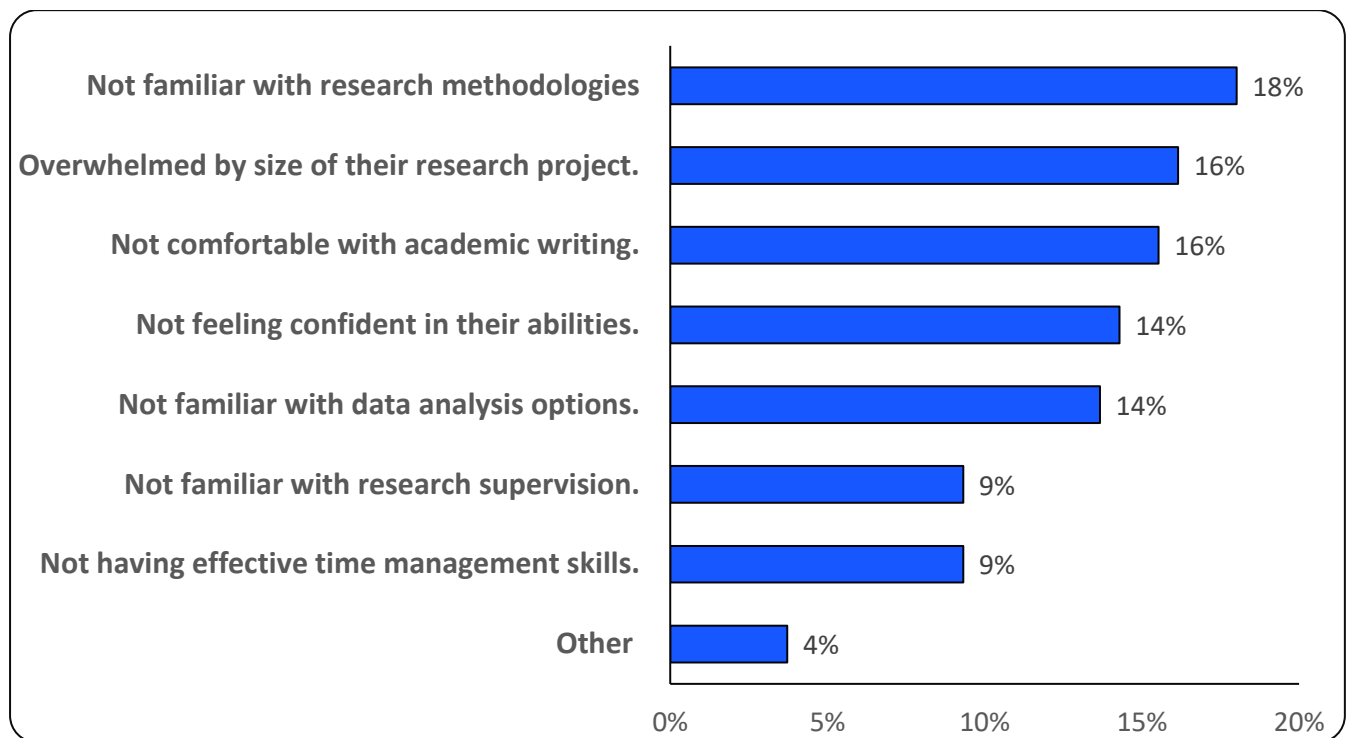

Figure 5:3: Research supervisors' views of main challenges facing supervisees.

The interviews captured, further, how supervisees experienced research as daunting and often 'frightening', with references to supervisors as containing and reliable 'guides' depending on research topic and confidence, as shown in figure 5:4.

Sailing instructor	Like a Telescope
A helpful supervisor 'is in the boat with you, with a light hand on the tiller'	My supervisor is my telescope, navigating. I need freedom, but also the telescope; is it too far? Have I been looking in the wrong direction?
Seesaw	Mountain leaders
My supervisor was [knowledgeable], always there and slowly allowing me to even things out, reaching a point when I felt more in control. She'd still be there, but I could both hold my feet on the ground and be up in the air and trust my work.	Supervisors can be like mountain leaders, guiding through challenging, complex uncharted landscapes – emotionally as well as socio-culturally, whilst supporting in 'not getting lost'.

Figure 5:4. Supervisees' choice of metaphors to capture 'good' research supervision

Supervisors emphasised -in contrast, an importance of supervisee agency, self-direction, and trust in their *own* thinking. In the free text comments, one supervisor referred to herself as a 'midwife', saying *'I can't think **for** my supervisees, my role is to think **with** them'* to deliver their ideas and new knowledge. Resonating with this, supervisors referred in the interviews to their roles in terms of 'facilitators'. One particularly illustrative example (fig. 5:5) was when one supervisee described her supervisor as her 'telescope' – helping her to navigate and see far – whilst a supervisor chose a 'stethoscope' to describe how he regarded it his role to support each student to connect 'inwardly' and build their own relationship with research.

Figure 5:5. Contrasts in the views of helpful supervision

The qualitative findings suggested in this sense a gap in expectations, which we believed would be helpful to address and discuss within supervisory teams.

Some common features were however also noted across both groups and types of data. This was, firstly, the shared generic emphasis on constructive research supervision being 'relational', combined with a shared emphasis on the key qualities containment, compassion, and clarity - which we refer to as the 3 C's' in figure 5:6.
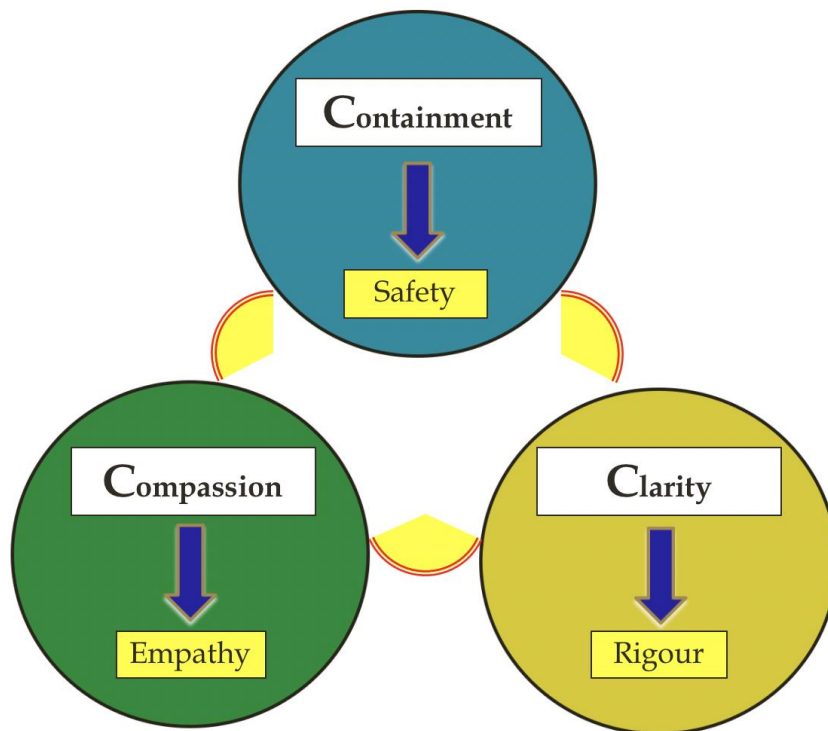
Figure 5:6. Supervisor and supervisee views of constructive or 'good' supervision: the '3 C's'

- **6: A training Guide for Research Supervisors and Supervisees,** by Bager-Charleson, S., McBeath, A.G., and van Rijn, B.

The research supervision research has also resulted in an interactive study guide for supervisors and supervisees, accessible on thee link below, illustrated in fig. 6:1 and fig 6:2.

[Relational Research Supervision for Doctoral Psychotherapy Research (metanoia.ac.uk)](metanoia.ac.uk)

The Guide addresses key areas for potential supervisory benchmarks, covering four areas:

- Regulations around doctoral research and supervision
- Others' research in the field of research supervision
- Counselling, Psychotherapy and Counselling Psychology as 'disciplines' positioned between art and science
- Relational Research Supervision - research into how supervisees and supervisors experience 'constructive' supervision in therapy-related research
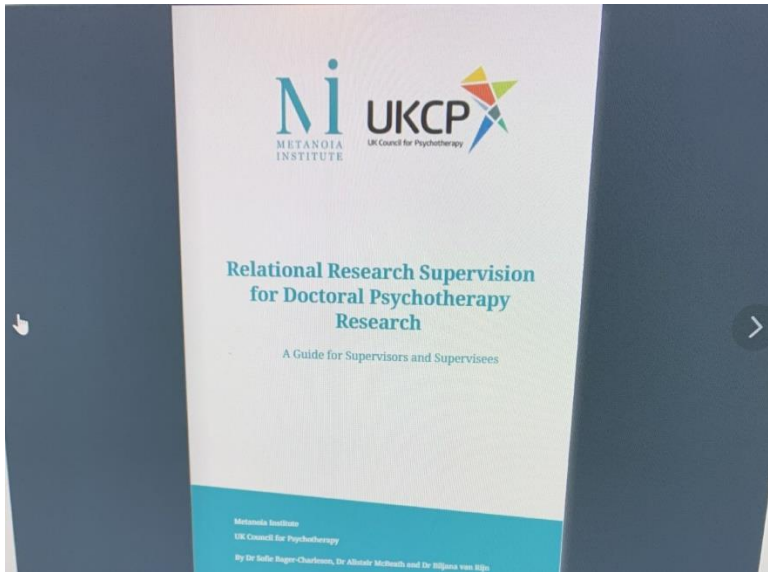
Figure 6:1. The interactive guide accessible on the link above

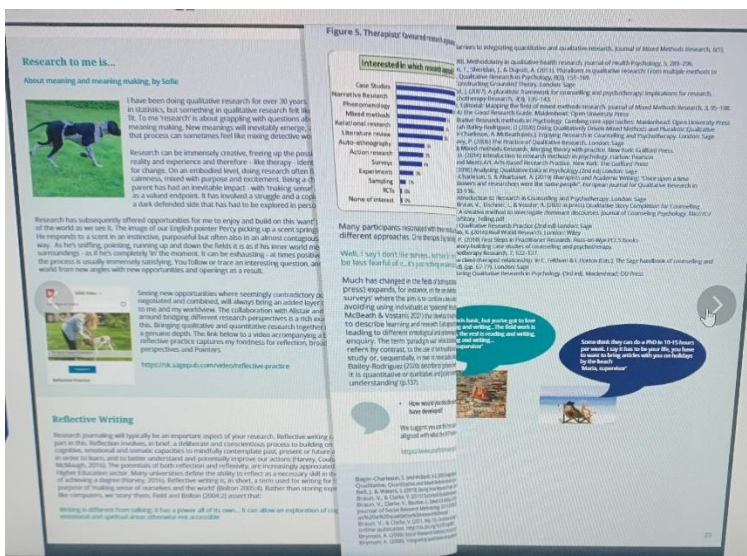**Figure 6:2. Examples, further of the interactive guide accessible on the link above**

- ## 7. Conferences
Research Academy 2022 "Enjoying Research"

Some of the research findings are presented at the next Research Academy on the 25th of February 2022, with general information on the main site:
[Research Academy 2022 (metanoia.ac.uk)](#)

There is also a link leading to seminars and speakers:

https://metanoia.ac.uk/researchacademy22/speaker-and-seminar-content/

Other Research

The TRP group also focuses on upcoming issues and contextual changes for therapeutic practitioners and their knowledge**.**

The challenges and experiences of psychotherapists working remotely during the Coronavirus pandemic, By Dr McBeath, A., Prof du Plock, S., and Bager-Charleson, S., Metanoia Institute

The experiences and challenges of psychotherapists working remotely during the Coronavirus pandemic were explored using a mixed methods approach. An on-line survey completed by 325 psychotherapists produced both quantitative and qualitative data with the latter being subject to a Reflexive Thematic Analysis. Large numbers of therapists were using video-link platforms and the 'phone to conduct client sessions. A majority of therapists felt challenged by remote working, with reduced interpersonal cues, feelings of isolation and fatigue, and technical issues frequently cited concerns. At the same time, most therapists considered that remote working had been effective and that clients were comfortable with the process. Two-thirds of therapists indicated that remote working would now become core business for them. The great majority of therapists thought that remote working skills should be part of formal therapy trainings.

Survey respondents were asked how challenging they had found working remotely with clients. The response pattern is shown in Figure 3.

Figure 3.

How challenging has remote working been ?

Extremely challenging 3%

Challenging 32%

Somewhat challenging 45%

Not challenging 14%
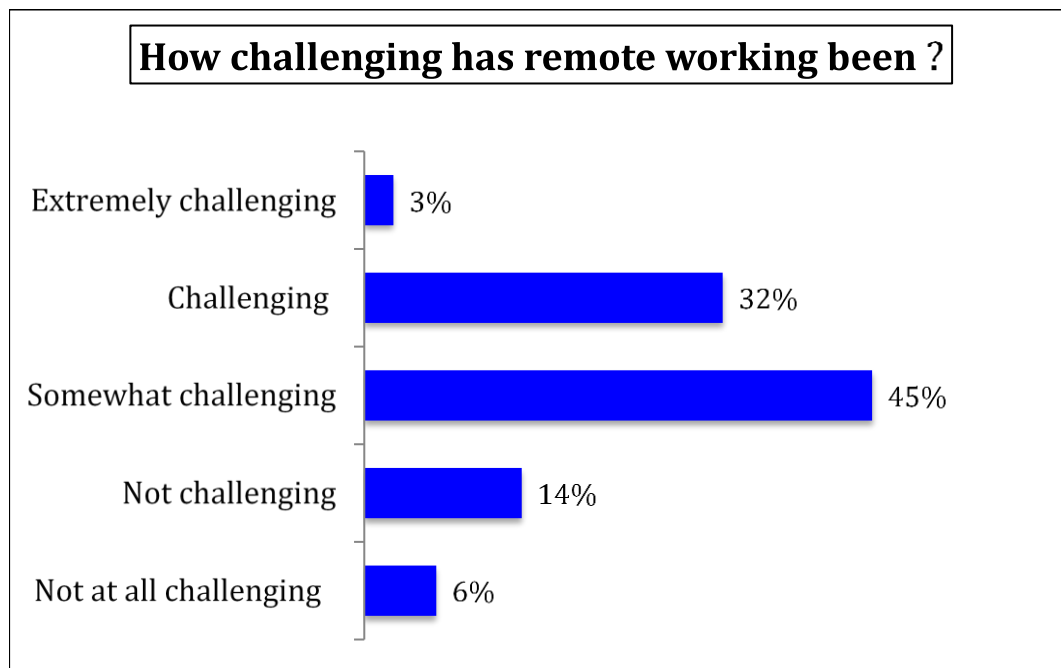
Not at all challenging 6%

Figure 3: How challenging has remote working been.

Figure 3 shows how 35% of therapists found remote working with clients to be either extremely challenging (3%) or challenging (32%). A further 45% responded with the response category somewhat challenging. Only 20% reported that they found working remotely with clients was not challenging. The survey offered options for free comments, which 230 responded with rich data to. This was analysed with thematic analysis (Braun and Clark 2006). In summary, the main and the sub-themes reflected an overwhelming positive attitude. Emerging from the free comments were:

Adaption issues
•   Not same job satisfaction
•   Getting used to
•   Adapting gradually, developing coping strategies

New Opportunities

•   Practical with home office
•   Less inhibitors
•   Heightened sense of connection
•   Equal relationship
•   Clients more empowered
•   Greater 'intimacy' working from each other's home environment
•   New interesting framings of practice

Challenges/Limitations

- Technical
- Finding private space to talk
- More tiring; intense
- Screen with disembodied clients
- Difficult to make sense

Project 7: Making the Transition from Therapist to Research Practitioner: The role of Reflective writing in postgraduate research.

Project leader: Dr Marie Adams

Research team: Dr Marie Adams, Professor Simon du Plock and Dr Sofie Bager-Charleson

This is a phenomenological study into therapists' experience from reflective writing as part of their research training and practice.

Aims and purpose:

The potential of reflection, and reflexivity, in supporting academic learning, skills development and lifelong learning are increasingly understood in the Higher Education sector. Many universities now include the ability to reflect as a necessary skill that graduates are expected to acquire in the course of achieving their degree (Harvey, 2016). Other benefits – less tangible, but perhaps more profound – are associated with learning to reflect. These "soft" or professional skills help students build cognitive bridges between classroom learning, and practical application of that learning in an unpredictable, all-too-human world (Harvey et al, 2014). This, in turn, increases their resourcefulness, mental and emotional flexibility, problem solving skills, and ability to critically interrogate complex issues and questions. Reflection may be argued to be of particular value for doctoral candidates in their journey from therapeutic practitioner to research practitioner identity because it helps to ground them and empower them to identify and trust their own insights. Reflective learning can help to foster an emotional, somatic and whole- of-body practice in ways which regrettably academia often neglects.

This project explores the experience of reflective writing in postgraduate research. Reflective writing is a term used for writing for the purpose of 'making sense of ourselves and the world' (Bolton 2005:4). The project aims to explore reflective writing from the perspective of therapists during the doctoral research. How might reflective writing impact – if at all, their transition during their post-graduate research development; and how might – if at all, this impact their research?

References:

Adams, M. (2014), The Myth of the Untroubled Therapist, London, Routledge.

Adams, M. (2012). Placing Ourselves in Context: Research as a Personal Narrative. Personal Development in Counselling and Psychotherapy. S. Bager-Charleson. Exeter: Learning Matters.

Bager-Charleson, S. & McBeath A.G (2022 in press) Containment, Compassion and Clarity. Mixed Methods research into Supervision during Doctoral research. *Counselling and Psychotherapy (CPR) Journa*l. Volume 1, January. 2022.

Bager-Charleson, S., McBeath, A.& van Rijn, B. (2021) Relational Research Supervision for Doctoral Psychotherapy. London: Metanoia institute [Relational Research Supervision for Doctoral Psychotherapy Research (metanoia.ac.uk)](metanoia.ac.uk)

Bager-Charleson, S. & McBeath, A (2021) What support do therapists need to do research? A review of studies into how therapists experience research. *Counselling and Psychotherapy Research.* Volume *1, Issue3, 2021 Pages 555-569*

Bager-Charleson, S. & A.G. McBeath (Eds) (2020) *Enjoying Research. Qualitative, Quantitative and Mixed methods Research.* Palgrave: MacMillan

Bager-Charleson, S., du Plock, S., McBeath, A and Adams, M. (2020). Therapists as research practitioners. A qualitative meta-synthesis through the lens of transition. *European Journal Qualitative Research in Psychotherapy*. EJQRP (2020) Vol. 10, 93-109 Spring issue. file:///D:/Bager-Charleson,%20McBeath,%20du%20Plock,%20Adams%202020.pdf

Bager Charleson S. (2019) "She was on my side and grounded me when I needed it:" Research supervision in the field of therapy, based on counsellors' and psychotherapists' views on their engagement with research. *Counselling and Psychotherapy Research*. 2019;19:358–365. https://doi.org/10.1002/capr.12258

Bager-Charleson S, McBeath A, du Plock S (2019). The relationship between psychotherapy practice and research: A mixed-methods exploration of practitioners' views. *Counselling and Psychotherapy Research.* 2019;19:195–205. https://doi.org/10.1002/capr.12196

Bager-Charleson, S., du Plock, S., McBeath, A (2018) "Therapists have a lot to add to the field of research, but many don't make it there". A narrative thematic inquiry into counsellors' and psychotherapists' embodied engagement with research. *Journal for Language and Psychoanalysis,* (7) 2018, http://www.language-and-psychoanalysis.com/article/view/2603

Bager-Charleson, S., Dewaele, J., Costa, B. & Kasap, Z. (2017) A Multilingual Outlook: Can Awareness-Raising about Multilingualism Affect Therapists' Practice? A Mixed-Method Evaluation. *Language and Psychoanalysis*, 2017, 6 (2), 56-75

http://www.language-and-psychoanalysis.com/article/view/1900

Beutler, L. E., Williams, R. E., Wakefield, P. J., & Entwistle, S. R. (1995). Bridging scientist and practitioner perspectives in clinical psychology. American Psychologist, 50(12), 984994. http://dx.doi.org/10.1037/0003-066X.50.12.984

Boisvert, C. M., & Faust, D. (2006). Practicing psychologists' knowledge of general psychotherapy research findings: Implications for science–practice relations. Professional Psychology: Research and Practice, 37(6), 708-716. https://psycnet.apa.org/doi/10.1037/0735-7028.37.6.708

Castonguay, L. G., Nelson, D. L., Boutselis, M. A., Chiswick, N. R., Damer, D. D., Hemmelstein, N. A., & Borkovec, T. D. (2010). Psychotherapists, researchers, or both? A qualitative analysis of experiences in a practice research network. Psychotherapy: Theory, Research, Practice, Training, 47(3), 345–354. https://psycnet.apa.org/doi/10.1037/a0021165

Darlington, Y., & Scott, D. (2002). Qualitative research in practice: Stories from the field. Buckingham: Open University Press. https://doi.org/10.1080/02615470309135

Du Plock, S. and Barber, P (2016). Facilitating high achievers to tell their stories of professional entrepreneurialism: lessons from the doctorate in psychotherapy by professional studies. In Goss, S. & Stevens, C. *Researching for change in the theory and practice of counselling and psychotherapy.* London: Routledge

Du Plock, S. (2020) The vulnerable researcher: harnessing reflexivity for practice-based qualitative inquiry. In. Bager-Charleson, S. *Reflective Practice and Personal Development in the field of Therapy.* London; Sage

McBeath, A.G. (2020). Enjoying Quantitative research with Statistics. In S. Bager-Charleson & A.G. McBeath (Eds). *Enjoying Research in Counselling and Psychotherapy. Qualitative, Quantitative and Mixed methods Research*. Palgrave: MacMillan

McBeath, A.G. (2020). Doing Quantitative research with a Survey. In S. Bager-Charleson & A.G. McBeath (Eds). *Enjoying Research. Qualitative, Quantitative and Mixed methods Research.* Palgrave: MacMillan

McBeath A. (2019). The motivations of psychotherapists: An in-depth survey. *Counselling and Psychotherapy Research*, 19(4), 377-387. https://doi.org/10.1002/capr.12225

McBeath, A., Bager-Charleson, S., & Abarbanel, A. (2020) Therapists and Academic Writing: "Once upon a time psychotherapy practitioners and researchers were the same people". *European Journal Qualitative Research in Psychotherapy,* Volume 9, 103-116. Vol. 9, 103-116

McBeath, A., du Plock, S., and Bager-Charleson, S (2020) The challenges and experiences of psychotherapists working remotely during the Coronavirus pandemic, *Counselling and Psychotherapy Research,* Volume 20, Issue 2.

Morrow-Bradley, C., & Elliott, R. (1986). Utilization of psychotherapy research by practicing psychotherapists. American Psychologist, 41(2), 188-197. http://dx.doi.org/10.1037/0003-066X.41.2.18

Norcross, J. C., & Prochaska, J. O. (1983). Psychotherapists in independent practice: Some findings and issues. Professional Psychology: Research and Practice, 14, 869–881. https://psycnet.apa.org/doi/10.1037/0735-7028.14.6.869

Rutten, A., and Hulme, J. (2013)Learning and teaching in Counselling and Psychotherapy. York: HEA Higher Education Academy file:///C:/Users/Sod/AppData/Local/Packages/Microsoft.MicrosoftEdge_8wekyb3d8bbwe/Temp State/Downloads/HEcounselling-report-final_1568036905%20(1)%20(1)%20(1).pdf

Tasca, G. A., Grenon, R., Fortin-Langelier, B., & Chyurlia, L. (2014). Addressing challenges and barriers to translating psychotherapy research into clinical practice: The development of a psychotherapy practice research network in Canada. Canadian Psychology/Psychologie Canadienne, 55(3), 197-203. http://dx.doi.org/10.1037/a0037277