This is a repository copy of Using a model of group psychotherapy to support social research on sensitive topics.

White Rose Research Online URL for this paper: http://eprints.whiterose.ac.uk/1643/

Article:
Corden, A., Sainsbury, R. orcid.org/0000-0002-1217-6818, Sloper, P. et al. (1 more author) (2005) Using a model of group psychotherapy to support social research on sensitive topics. International Journal of Social Research Methodology. pp. 151-60. ISSN 1364-5579

https://doi.org/10.1080/1364557032000119571

Reuse
Items deposited in White Rose Research Online are protected by copyright, with all rights reserved unless indicated otherwise. They may be downloaded and/or printed for private study, or other acts as permitted by national copyright laws. The publisher or other rights holders may allow further reproduction and re-use of the full text version. This is indicated by the licence information on the White Rose Research Online record for the item.

Takedown
If you consider content in White Rose Research Online to be in breach of UK law, please notify us by emailing eprints@whiterose.ac.uk including the URL of the record and the reason for the withdrawal request.

The *International Journal of Social Research Methodology* is available online at: [http://journalsonline.tandf.co.uk/](http://journalsonline.tandf.co.uk/)

Open URL link to the article:


**Title:** USING A MODEL OF GROUP PSYCHOTHERAPY TO SUPPORT SOCIAL RESEARCH ON SENSITIVE TOPICS

**Authors:**

Anne Corden  
Roy Sainsbury  
Patricia Sloper  
Bernard Ward

**Contact:**

Anne Corden  
Tel: 01904 433 608  
Fax: 01904 433 618  
E-mail: pac2@york.ac.uk
Abstract
This article describes exploratory use of professional therapeutic support by social researchers working on a sensitive topic. Talking to recently bereaved parents about the financial implications of their child’s death was expected to be demanding work, and the research design included access to an independent psychotherapeutic service. Using this kind of professional support is rare within the general social research community, and it is useful to reflect on the process. There are likely to be implications for collection and interpretation of data, research output and the role and experience of the therapist. Here, the primary focus is the potential impact on researcher well-being.

(103 words)

Introduction
In 1999 the Social Policy Research Unit (SPRU) at the University of York was approached by the children’s hospice movement to undertake some exploratory research into the financial implications for parents of the death of a child. Hospice staff were finding that some parents face significant financial problems in the period following a child’s death. They wanted better understanding of issues contributing to parents’ financial problems, to guide their approach in the support service offered to bereaved parents.
The Joseph Rowntree Foundation agreed to fund a study which included depth interviews with parents whose child had recently died. During their work, the researchers used professional therapeutic support for themselves. This kind of support for staff engaged in demanding work which might be risky to emotional health is relatively novel within social research. This article reflects on what happened, whether the approach was valuable and how this kind of support might be developed for future use. Accounts of the overall research findings have been published elsewhere (Corden et al. 2001, 2002).

The need for support

The researchers’ perspective

The three researchers involved were senior and experienced members of SPRU and all had previously worked on sensitive topics. Talking to recently bereaved parents about financial problems was expected to be particularly demanding emotional work, however.

The researchers had followed the growth of interest in relationships between the social researcher and the research subject (Oakley 1981, Finch 1984) and the place of emotion in social research (Gilbert 2001). Hubbard et al (2001) identify ‘emotional labour’, the emotional work undertaken during involvement in the research, as one important domain of the research process. The emotional effort and involvement of both the researcher and research subject creates potential emotional opportunities and risks on both sides but, until recently, the impact on the research subject has drawn most attention. The researchers were already strongly committed to protecting parents taking part in the research from dangers perceived by the research community such as intrusion, loss of privacy and confidentiality, anxiety or distress (Lee 1993, Brannen
However, researchers and interviewers also face emotional opportunities and risks (Arksey and Knight 1999). Lee-Treweek and Linkogle (2000) identify emotional danger among the risks which qualitative researchers must negotiate, alongside physical, ethical and professional danger. Potential emotional risks include identification with people who have bad experiences or pain, which goes on to produce in the researcher feelings of sadness, anger or depression (Kleinman and Copp 1993). The SPRU researchers had read published accounts of research staff who found themselves much affected by their work on sensitive topics. Rothman (1986) described personal pain and anguish in talking to women who had faced decisions about termination of pregnancy, and her feelings of ‘survivor’s guilt’ in the knowledge that her own baby was alive and well. Dunn (1991) believed that interviewing women who had suffered abuse led to her own serious sleep disorders and psychosomatic complaints requiring medication and therapy. Davis (2000) described the impact of observing death and intensive care in a public hospital setting, and the strength of her need to talk through her experiences. Such accounts suggest that the impact of qualitative work can come some time after completion of fieldwork, and in unexpected ways (Rowling 1999; Melrose, 2002).

The growing number of such first-hand accounts led the SPRU research team to consider carefully how best to manage their own emotional risk. Lee-Treweek and Linkogle (2000) suggest that the researcher’s sense of self is particularly likely to be challenged when the topic relates to the researcher’s personal biography, or when the topic is generally considered sensitive, such as disability. Research on loss situations,
according to Kitson et al. (1996), is potentially most risky when researchers meet people of the same age as themselves, or perceived to be in similar circumstances to themselves or their children. The three SPRU researchers acknowledged potential risk to themselves. They all had children of their own, all had their own life experiences of loss, and recognised that their personal situations might change during the lifetime of a research project. They were confident about undertaking the research, but realistic in acknowledging that they could not anticipate what the impact of the emotional encounters might be.

The three researchers expected to share responsibilities for interviewing and reporting. They already felt a collective responsibility for achieving a positive outcome for each other, an aspect of project management to which Hubbard et al. (2001) attributed considerable importance in managing risk. They already knew the value of working closely together, with frequent debriefing and informal discussions. Some authors who have suggested strategies for helping researchers manage their feelings of anger or distress emphasise the importance of training and supervision, especially for less experienced staff (Gilbert 2001, Wincup 2001). However, the three researchers working on this project were already among the most senior supervisory staff in SPRU.

Gilbert (2001) and Kitson et al. (1996) suggest that group support meetings moderated by a counsellor or clinician can provide a useful structure within which staff can explore and share their feelings and reactions to work. Hubbard et al. (2001) also see a useful role for professional counselling among formal mechanisms for building support for a research team.
The SPRU researchers decided to explore the possibility of some professional support to help them manage feelings which might be evoked as a result of research with bereaved parents. The research funders were supportive of this idea. As a first step, the SPRU team approached a respected, local independent centre for counselling and therapy, for preliminary discussion about the possibility of a form of group support.

Providing a supportive role in a group setting

The technique of group analysis emerged during the second world war, and aims to use the resources of the group at the service of the analysis of the individual (Foulkes 1984, Foulkes and Anthony 1990). Exploring what is said in the group and how it is said helps the members to understand themselves, to change and to develop.

The technique of group analysis has been used in a variety of non-therapeutic settings. Rifkind (1995) ran staff consultation groups within a range of professional settings which involved hearing directly from people in difficult circumstances. Nichol (1997) used group-analytic techniques for professional development in the business world, and Smith (2001) describes using groups to facilitate communication and to offer support when debriefing professionals who have witnessed a critical incident. Rance (1998) and Nitsun (1998a; 1998b) used a group analytic approach to facilitate dialogue and communication in businesses and organisations. In a research environment Michel (2001) describes how an analytic group setting enabled researchers to reflect on the internal dynamics of the research group, and helped to resolve conflict in the group. The literature suggests that use of group analytic techniques is a suitable model for helping people to communicate with each other and make sense of their experience.
Drawing on group analytical theory, the psychotherapist working with the SPRU researchers saw a support group as providing a safe space for reflection and rehearsal of ideas, in which the researchers could develop awareness of their own feelings around loss. Developing self-awareness would help them see what they brought personally into the research relationship. A group would provide a place in which the researchers could get to know each other in a different way, share concerns, and think about what was happening in the group itself. They might then draw on this new knowledge about each other for support during the research.

Psychotherapy uses the idea of ‘containment’ to make feelings manageable. Feelings become bearable by being voiced and heard by others in the group and in this way take on a different perspective and are contained or limited. The group analyst saw containment as an important aspect of this support group. By talking together about death, which is frightening because of its unknown power to affect us, the researchers would realise that they could manage and survive the feelings of the bereaved parents.

The analyst saw another aim of the support group as reducing the likelihood that researchers’ conversations with parents would be blocked by their not having a similar experience of death of their own child. At the same time, some boundary needed to be established between the researchers and the researched. Maintaining appropriate boundaries is important in enabling and managing communication, without invading or compromising each others’ space or relationship. From the group analyst’s perspective, setting up and respecting the boundaries in group analysis might reflect and symbolise the boundary which the researchers would keep between their own needs and concerns and those of the parents taking part in the research.
Procedure and practice

Agreeing a structure for support

A structure for the provision of support was agreed in informal discussions between the group analyst and researchers. The researchers were breaking new ground here. This way of working was new, and had to fit the proposed research timetable, at moderate cost, with some flexibility to respond to needs that might arise during the project.

It was agreed to have an initial group meeting before starting interviews with parents, for discussion about concerns and issues that seemed important to the researchers and the group analyst. The plan was to hold one or more further meetings during or after the fieldwork, to talk about what was happening and move on. As an additional tier of support, should individual researchers find they needed more intensive or a different kind of help, the proposed budget was set to allow each researcher two individual counselling sessions during the lifetime of the project, as they personally chose.

The first group meeting

Prior to the first group session the researchers spent time together discussing individual concerns about talking to parents in such sad and difficult circumstances, and managing the interviews. The researchers had variable previous experience of a counselling/therapeutic relationship, and for one this way of working was completely new. One concern was that there might be some risk in sharing deep personal feelings, for example if this subsequently led to regret when the researchers went back to the office and the more familiar working environment. It is usual for members of a therapy group to be asked not to meet socially outside the group. This practice component could not be adopted because the researchers regularly worked closely together.
The first group meeting took place in the psychotherapy centre in a comfortable room used for seminars and groups. The three researchers and the analyst met in a circle around a small table. The ‘safe’ setting, away from work and with no disturbance for an hour and a half fostered an environment of trust. There was no set agenda; the analyst began by wondering what it was like to be starting this research.

The researchers’ recalled experience of the meeting was of sharing considerable anxieties about managing interviews across such sensitive issues in a way that did not result in bad experiences for parents taking part. One concern was that having to think carefully about financial technicalities such as social security rules might detract from attention to important relational aspects of the interviews. Another concern was that one researcher’s personal experience of a child’s death some years ago might steer too powerfully the direction of discussions. The researchers recognised that the analyst helped them understand how their anxieties were about themselves, even when projected onto parents to be interviewed. There was discussion about feelings of which the researchers had been aware when conducting similar interviews, including frustration in hearing how some people were treated in administrative and regulatory systems; and being upset by lack of service provision, injustice and waste of resources. One team member described being aware of feeling more angry than upset about what happened to people. The analyst led a discussion about coping strategies and how each researcher generally managed emotional feelings which emerged in such interviews.

What the analyst observed happening in the meeting was the researchers talking about differences between this piece of work and other studies they had undertaken. It seemed that the researchers were talking to one another in a different way from usual.
They were used to consulting each other, and providing support and encouragement for each other as colleagues engaged on the same work, but not in the intimate way being asked of them in this group. The group meeting brought out some fears which might otherwise not have been voiced, such as awareness of their individual mortality and acknowledgement that their own children might also die. From the therapist’s perspective, the researchers were able to feel vulnerable in the group, and experience the understanding and support of their colleagues.

The analyst observed the team reflecting on other research undertaken, and thinking about their strengths, and the experience which they brought to this project. The researchers recalled being enabled to understand better the balance of skills and resources in the team, and their own ability to support each other in difficult work. They said how hard it was to ask questions without being able to offer solutions; what the analyst observed here were feelings of anger and pain.

The first meeting ended by discussing what had been happening and how the process had been helpful, and confirming arrangements for subsequent meetings.

*The second group meeting*

During the fieldwork a pattern of working emerged in which the researchers talked informally about each of their interviews with one another, sharing their experiences of the discussions with parents and what had emerged. These informal discussions worked well as a form of support. Potential problems discussed in the first group meeting did not arise, and nobody asked for an individual counselling session. For various reasons the project took longer than planned, and it was a year before the
second group meeting took place, when the analyst had seen a draft report from the study. While walking to the meeting the researchers shared some negative feelings that too long a time had passed since the fieldwork, and what they were about to do might prove a waste of time. The second meeting took place in the same room as before and again was one and a half hours long. The researchers talked about their frustration at the length of time it was taking to publish findings, which was not within their control. Their concern related to feelings of responsibility to parents who had taken part to get the research findings into the public domain, and feelings of frustration about being unable to contribute to current relevant policy debates about benefits for carers and for bereaved people while publication was awaited.

The therapist observed a sense of satisfaction in what had been achieved in this research; anger about what needed to be done to help such families, and strong feelings about boundaries of researchers’ responsibilities, and whether these stopped at completing the research or extended into development of social policy.

Although the researchers had approached the second meeting with some uncertainty they felt more positive about the experience afterwards. Discussing angry feelings about delays in publishing results helped team members understand better each other’s different experiences of work, and helped the researchers move on from their frustration to focus on the positive contribution of the research to policy and practice. So the meeting had been helpful to some extent, and had provided a clear ending for a challenging and demanding piece of work.
Strengths and weaknesses of this process

The researchers felt that the support from the group analyst had been valuable, but had come mainly in the initial session, where feelings about such difficult work were shared in a way that would probably not otherwise have happened within the normal working environment. One of the team would have liked to have been more prepared for the group process, which was experienced as so different from other work-related interactions. The analyst felt that this was an example of the need for more meetings of the group so that they could reflect on and learn from the process as it happened.

The analyst agreed with the researchers that in terms of support in dealing with issues arising from the work, the second session was too late. The researchers did not experience particular emotional problems during the fieldwork and the analyst’s observations that the team members already had internal strategies for support were borne out. The fieldwork itself did not prove a negative experience for any of the team members. However, had anyone wanted to talk and think about how the research had affected them it might have seemed too long to wait until the second group meeting. It would have been better to have the second group session at an earlier stage, when the interviews were fresh in the researchers’ minds.

It was after the project was completed, during dissemination of findings, that one researcher experienced unexpected emotional impact from the work. During a discussion about using media publicity to achieve high impact of findings, one researcher became upset about suggestions made to the research team about ways in which the circumstances of bereaved parents might be presented. Remembering the group discussions and findings from the literature reviewed earlier in this article helped
the researcher concerned to understand what was happening at a personal level, to stand ground in responding calmly and rejecting the suggestions, and to deal with the potentially negative personal impact by talking it through with the other team members.

From the analyst's perspective, a question which was not clarified was who the researchers would have talked to if they had wanted some individual support during the research. Initially, the analyst had agreed to be available to provide such support. However, had this happened, the analyst would then have knowledge to bring to the second group meeting which other members did not have. In retrospect, the analyst believed that any support at an individual level should have been offered by another member of the counselling centre rather than himself. The researchers talked about why they had not asked for any support on an individual basis. One view was that the emotional impact of the fieldwork had not created problems and there was no need for such support. Another observed that even with no strong need for support, it was interesting that none had used the budget available and taken what might have been a good opportunity to spend time exploring feelings with a skilled professional. However, it would have felt quite 'brave' to be known by colleagues to be receiving further support on an individual basis, and at the same time 'a bit self-indulgent' to be using funds available for what might seem personal exploration and development, rather than dealing with problems.

Since the group did not meet while the interviews with parents were in progress there was no space for the team to talk about how the work was affecting them at the time. The researchers said that this happened informally between themselves. The analyst's view here was that there was no way of keeping the shared knowledge and experience
together, and that further group meetings during the research would have provided a place for anyone who needed it to talk about the effects of the work, enabling the team to be more fully aware of what was happening between them during the research.

In conclusion, the research team felt that they had explored a useful way of working, and would certainly consider incorporating this kind of supportive component in future difficult work. Their research was completed with positive outcomes for the team. It seems likely that the parents also had a better experience as a result of the researchers’ increased confidence and greater understanding of how to talk to them. One member of the team recognised long-term positive impacts in unrelated research some three years later, in interviews with people who had experienced traumatic bereavements.

In terms of resource implications for research budgets, the researcher time involved and the fees to the psychotherapy centre both seemed good value, although it would have been better to have the second meeting earlier, and probably during the fieldwork. One lesson was that it might be useful to discuss in advance the process involved in this kind of supportive group meeting, which can seem so different from more familiar forms of interaction in work-related meetings.

The potential of the model of support adopted in this study was not being rigorously tested, of course. The initiative was exploratory and hard to evaluate. Since no particular problems arose for the researchers and they did not draw on one component of the proposed model, the question whether the analytic group approach is the optimal way of providing emotional support remains unanswered. It might be suggested that the fact that problems did not arise indicates some effectiveness of the model of support.
The researchers were enabled to deal with issues so that they were not identified as ‘problems’. One of the benefits of the initial meeting was to open up channels of communication between the three members of the team that allowed them to seek support from each other during this work.

The analyst concluded that thinking about what was happening for the individual researchers and what was happening for the group during the research helped the researchers to keep the boundaries around their own agendas as individuals and as a group of researchers working together. In retrospect, he felt that in offering a support group to future researchers he would want to be much more specific about what he had to offer and would suggest a series of group sessions rather than the possibility of individual sessions. He would want the group to meet at regular intervals during the research.

Finally, readers may be interested in the process of writing this article. It proved quite a challenge for the four authors to agree an account of the perspectives and experiences of the group process. This was related both to differences in language between the two disciplines of social policy and psychotherapy, and to differences in personal experience of the group process among the three researchers. Reading the analyst’s initial written account triggered new written contributions from the researchers and, it seemed, deeper understanding of what had happened in the group meetings. It became important to the researchers to be more precise about their personal feelings, which were sometimes different. The process of agreeing the written text, involving several rounds of discussion and amendments, was itself important in understanding what had been happening.
References


BSA (1999) *British Sociological Association Statement of Ethical Practice*.


