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**THE INNER WORLD OF DANCE: AN EXPLORATION
INTO THE PSYCHOLOGICAL SUPPORT NEEDS OF
PROFESSIONAL DANCERS**

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**Submitted in partial fulfilment of the requirements for the
degree of Doctor of Psychology**

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THE INNER WORLD OF DANCE: AN EXPLORATION INTO THE PSYCHOLOGICAL SUPPORT NEEDS OF PROFESSIONAL DANCERS

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DECLARATION

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**SECTION A: INTRODUCTION TO THE
PORTFOLIO**

INTRODUCTION

This portfolio consists of four sections. These address areas of enquiry which are distinct and yet interwoven by themes of commonality. The introduction provides a brief overview of each section of the thesis and explores the interconnecting themes which underpin the portfolio.

The second section incorporates the research component. This introduces a novel area of research which has not been addressed from the perspective of counselling psychology. The literature addressing psychological support in dance is scarce, and little is known about dancers' perceptions of these services. Therefore, this research aims to gain insight into perceptions of psychological therapy and to address potential support requirements by exploring the subjective experiences of professional dancers using the qualitative research methodology of Interpretative Phenomenological Analysis (IPA).

The third section, presents a client study which provides a powerful illustration of how a client's patterns of relating to others manifested within therapy. It illustrates how a therapeutic relationship, grounded in Rogers (1957) 'core conditions for therapeutic change', assisted the client in accessing grief which had been buried because of the need to create an impression of strength within the family. In addition, the client study reflects upon the value of the use of self-disclosure and process identification within therapy.

The final section consists of a literature review which explores the challenges faced by counselling psychologists when working with perfectionism. By addressing this area, it considers the potential impact of client perfectionism upon therapeutic outcome, the process of therapy and the development of the therapeutic relationship. It also reviews the area of perfectionistic self-presentation, and explores practitioner perfectionism, in relation to the process of therapy and therapeutic relationship.

1.1 Overview

Hamilton (1997, p.51) highlights how 'anyone who steps before the footlights knows that performing can be exhilarating-or terrifying. Yet the audience sees only the artist's persona, not the fears that lie beneath the mask.' An underlying theme within this portfolio is the potential barrier of impression management when seeking psychological support and within the therapeutic process. Goffman (1969) makes the analogy of life being like a theatre, where social interactions are 'staged', rather like theatrical performances. This portfolio aims to go 'behind the scenes' in order to access the subjective experience of clients and professional dancers which might be concealed 'beneath the mask'. Each section of this portfolio illustrates an experience or environment in which there appear to be difficulties in gaining access to what lies behind the idealized image portrayed. An additional commonality is the value placed upon the humanistic paradigm within counselling psychology and the importance of reflecting upon the subjective experiences of the client within the therapeutic process.

1.2 Personal reflections upon portfolio

In order to address the issue of researcher reflexivity, a brief overview of my rationale for pursuing this area of investigation will be presented. As a counselling psychologist in training and ex-professional dancer, I have always had a personal interest in dancers' psychological well-being. My research process began with a review of the dance psychology literature. Whilst this highlighted a number of psychological difficulties which might be experienced during a dancer's career, it also indicated a number of potential barriers to seeking psychological support. A preliminary discussion with a psychologist working in this field left me with a sense that some dancers appeared cautious and at times unwilling to seek support. This led me to reflect upon the question 'are dancers getting what they need in terms of psychological support?' This was an area which I raised with another psychologist working in the field and it became apparent that this question

generated interest and uncertainty. I began to reflect upon how psychological support services might be perceived by dancers and what might deter or facilitate the process of seeking support. Therefore, in keeping with the underlying philosophy of counselling psychology, it appeared important to find ways in which the subjective experiences of professional dancers could be accessed.

From a clinical perspective, my interest in finding ways to connect with clients who appeared to be difficult to reach was generated when working with clients who experienced severe and enduring mental health problems. This highlighted the importance of exploring the client's subjective experiences in order to assist in the development of the therapeutic relationship. Whilst reflecting upon this issue, I am reminded of the words of a clinical supervisor who always placed a strong emphasis upon finding 'a way in' to the client's world. By focusing upon the subjective experiences of the clients and professional dancers within this portfolio, it is hoped this might provide a greater understanding of how counselling psychologists can make 'use of the client's *subjective* experience to create new forms of therapeutic practice' (Du Plock, 2006).

1.3 The Research

In keeping with Goffman's analogy of life being like a theatre, it would appear that this may be especially true for those within a professional dance career. Finding a way to access what 'lies behind the mask' would seem to be particularly important in a population who have a tendency to view psychologists as 'outsiders' and may hold the belief that they 'lack any appreciation for the artistic process' (Hamilton & Robson, 2006, p 2). The very nature of dance as a non-verbal art form provides limited opportunities for dancers to openly explore their subjective experiences. This research aims to address a novel area by exploring the experiences of dancers through the lens of counselling psychology, and investigating their psychological support needs. The overall findings provide an insight into the

subjective experiences and emotional challenges faced by professional dancers. A variety of barriers and facilitators to seeking psychological support are also identified. These findings have implications for the practice of counselling psychologists as a number of key areas which might facilitate the process of seeking support are discussed. The potential role of redefining psychological support services in order to reduce fear and stigma is also highlighted by this study.

1.4 The Client Study

McLeod (2003) considers that emphasis placed upon subjective experiences within qualitative research methods is in keeping with the phenomenological stance which forms the foundations of the person-centred approach. Therefore, the methodological approach utilized within the research is linked to the therapeutic approach within this study. The client study provides an insight into the challenges faced by someone who felt unable to grieve the loss of a partner and the potential impact of bereavement upon the family system. It addresses the challenges of finding a way to assist the client in connecting with painful feelings of unresolved grief which lay buried beneath the need to create an impression of strength in order to care for a family in crisis. The case provides a powerful illustration of how the client's patterns of relating were repeated within therapy and reflects upon the potential value of making use of process identification within the sessions. It also explores the power of the therapeutic relationship in finding 'a way in' to the client's experiences and reflects upon the use of self-disclosure within this process.

1.5 The literature review

The literature review addresses the challenges faced by counselling psychologists when working with perfectionism in therapy. Once again, the need to appear perfect, may act as a barrier to accessing the subjective experiences of clients which lie 'beneath the mask' of perfectionism. The

topic of the literature review is also considered to overlap with the research due to the never ending pursuit of perfection within the world of dance. By exploring the challenges of working with perfectionism, the review addresses how this might impact on therapeutic outcome, the process of therapy and the formation of a therapeutic alliance. The issue of perfectionistic self-presentation is considered as an additional factor which must be addressed when working with perfectionism in therapy. The review also explores the issue of practitioner perfectionism in relation to the development of the therapeutic alliance and subjective experience of the practitioner.

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SECTION B: RESEARCH

THE INNER WORLD OF DANCE: AN EXPLORATION INTO THE PSYCHOLOGICAL SUPPORT NEEDS OF PROFESSIONAL DANCERS

ABSTRACT

The dance psychology literature highlights a number of psychological difficulties which may be experienced by professional dancers. The importance of psychological support has become increasingly recognized within the dance profession but this has yet to be explored from the perspective of counselling psychology. The research addressing the issue of psychological support in dance is scarce, and little is known about dancers' perceptions of these services. This research aims to address a novel area by conducting an exploration of dancers' emotional support requirements and addressing perceptions and experiences of psychological therapy. Semi-structured interviews were carried out with eight dancers, currently employed with British dance companies. Interviews were analysed using Interpretative Phenomenological Analysis. The research was conducted according to the British Psychological Society Ethical Principles and Guidelines (2005). Four super-ordinate themes emerged from the data: Inside the world of dance, emotional challenges of career, barriers and facilitators to seeking support and personal perceptions of support services. Overall findings suggested the dancers' intrinsic motivations for pursuing their career were in conflict with the external occupational demands within the profession. Emotional challenges often resulted from the lack of fulfilment of basic psychological needs, as defined by self-determination theory (Ryan & Deci, 2002). A variety of barriers and facilitators to seeking psychological support were identified and the need for impression management was highlighted in relation to beliefs around career progression. The findings reported a number of key areas which might facilitate the process of seeking psychological support. These included reassurances around confidentiality, dissemination of information and the need for dancers to feel empowered by companies to make use of these services. The potential role of redefining psychological support services in order to reduce fear and stigma was also highlighted by this study.

CHAPTER 1: INTRODUCTION

1.0 BACKGROUND TO RESEARCH

In recent years, the role of psychological support within dance has become increasingly recognized. A national enquiry into the well-being of dancers in the UK ('Fit to Dance 2', Laws, 2005) recommended that dance schools and companies set up links with counselling services. As a counselling psychologist in training and ex-professional dancer, I have always had an interest in dancers' psychological well-being. Having knowledge of the work of counselling psychologists, and experience of the world of dance, has led me to reflect upon what the field of counselling psychology might be able to offer those within the dance profession.

The starting point for this research was an exploration of the current dance psychology literature which highlights the physical and psychological challenges inherent within the dance profession. In addition, a review of the literature reflects the increased integration of knowledge from dance medicine and science research to enhance the physical and emotional well-being of dancers. Most vocational dance schools, and some professional dance companies, now have access to a counsellor or psychologist. Despite the increase in availability of psychological support, a number of themes emerge from the literature as potential factors which might facilitate, or hinder, the dancer from seeking support. The evidence of these themes has led to a personal curiosity about how dancers might perceive the support services available to them.

Finding that the majority of the dance psychology research has been based upon student populations led Sharp (2003) to highlight the need for further research looking specifically at the experience of professional dancers. The scarcity of qualitative research in this area and the largely anecdotal nature of the literature support this researcher's concerns. The body of quantitative research does not facilitate the possibility of gaining in-depth insight into the dancers' experience. By providing dancers with an opportunity to talk about

their lifeworld, this research aims to gain an insight into psychological support requirements from the dancers' perspective.

1.2 Relevance to Counselling Psychology

The Professional Practice Guidelines of the Division of Counselling Psychology (2005) highlight the importance of reflecting upon the 'context' in which practitioners work and the need to consider how this might impact on the client's experience. The dance psychology literature suggests a number of specific challenges which may be faced by counselling psychologists when working with dancers. Hamilton and Robson (2006, p 2), propose that many professionals and students, within the performing arts domain, have a tendency to view psychologists as 'outsiders' with the belief that they 'lack any appreciation for the artistic process'. Therefore, it is considered important for practitioners to be able to understand the specific culture of each artistic domain in order to work effectively with performing artists. Hamilton et al. (1995) postulate that psychology has a valuable function to play when working with dancers. They suggest that an increased knowledge of this population may assist in the development of interventions which meet their specific needs.

Although the dance psychology literature suggests that dancers may have particular needs when seeking psychological support, this has yet to be addressed from the perspective of counselling psychology. Stone (1874, as cited in Harman 1991, p. 1) made the observation that it is 'always on the borderground between two great subjects of study that new phenomena were often to be looked for'. It is important to reflect upon this statement from the perspective of counselling psychology. When the experiences of dancers are explored through the lens of counselling psychology, what new phenomena might emerge? Strawbridge and Woolfe (2003) highlight how the humanistic underpinnings of counselling psychology place the emphasis upon the importance of subjectivity and qualitative exploration of experiences. Additionally, Du Plock (2006, p.29) considers the importance of counselling psychologists making use of the subjective experience of the client in order to

generate 'new forms of therapeutic practice'. These descriptions of the work of counselling psychologists provide support for the notion that counselling psychology research has the potential to provide a rich insight into the subjective experiences of dancers. By exploring dancers' psychological support needs, and perceptions of therapy, this will assist counselling psychologists in accessing the world of a population who claim to have difficulty in trusting those outside the profession (Krasnow, Kerr & Mainwaring, 1994).

Stricker (1992) considers that research produced by a particular generation has the potential to advance the practice of subsequent generations. When reflecting on the role of counselling psychologists as researchers, the British Psychological Society Professional Practice Guidelines (2005) highlight the importance of dissemination of research findings to other practitioners and the community. The exploration of the phenomenological world of professional dancers provides an opportunity for counselling psychologists to develop greater awareness around the potential needs of this client population. In addition, it allows practitioners to reflect upon their potential role within this specialized and demanding career.

2.0 REVIEW OF LITERATURE

In a review of a decade of research addressing the psychological and physical challenges faced by dancers, Hamilton and Hamilton (1991) conclude that the stresses experienced by professional dancers may impact on their health, functioning and adjustment. Their contention together with the key findings within the dance and performance psychology literature provides both the rationale for the current research and an insight into the potential psychological challenges of a career in dance.

For those with little knowledge of the inner world of dance, the life of a professional dancer may appear glamorous and somewhat elusive. In her ground-breaking text, providing an exploration into the world of performing arts psychology, Hamilton (1997a), a prolific researcher and experienced

practitioner within the world of dance psychology, makes the following observation:-

'When you sit in a darkened theatre, you enter a place of make-believe that is populated by characters, music, drama and dance. A spotlight is there to illuminate without revealing the machinations behind the scenes. It can all seem so effortless. That is, of course, as long as you are sitting in the audience' (p.vii).

The dance psychology literature highlights a wide range of psychological challenges which dancers may encounter within their career. Whilst Hamilton & Robson (2006) report that it is typical for dancers to describe themselves as artists as opposed to athletes. This description is contrasted by a seminal study, conducted by Nicholas (1975), providing a comparison between the physical and mental demands of 61 sports and forms of dance. The findings of Nicholas (1975) conclude that classical ballet exceeded the requirements of every other activity under investigation highlighting the intense physical, emotional and artistic demands within the world of classical ballet. The rigours of a career in dance are supported by Hamilton and Hamilton (1991) who, in their review of twenty years of the dance literature, conclude that coping with the dual demands of artistry and athleticism can impact on both physical and psychological well-being.

Based upon extensive experience as researchers and psychological practitioners within the performing arts, Hamilton and Robson (2006) propose that in contrast to consultation within the world of sports psychology, performing arts psychology differs in a number of important domains. Firstly, within the performing arts, peak performance is not objectively measurable by a 'perfect score'; hence the focus of consultation within the performing arts must centre upon the aesthetic and technical requirements of each art form. Therefore, effective therapeutic interventions must be in keeping with the specific artistic challenges within the performing art domain. For example, the aesthetic demands within the world of ballet may differ greatly from the occupational stresses within the career of a musician. This is further supported in a key paper by Hamilton (2004), who acknowledges the inherent value of detailed

insight into the differing challenges faced by performing artists in order to enhance the effectiveness of therapeutic interventions.

2.1 Motivations for pursuing a career in dance

An overview of the dance literature suggests a number of factors may attract the dancer into pursuing this career. Hamilton (1997) considers that the motivation to dance professionally is generated from the self. This is expanded upon by the seminal research of Ryan and Deci (2000, p.71) who conclude that intrinsic motivation is a process by which an activity is performed for 'the inherent satisfaction of the activity itself'. Following a series of extensive well-controlled quantitative investigations, Deci and Ryan (2000) propose a range of definitional descriptions relating to intrinsic motivation. These incorporate four theories which consider that intrinsically motivated activities must be either: grounded in innate psychological needs, occur without evident external rewards, be stimulated by the optimally challenging nature of the task, or conducted as a result of self interest.

In their ethnographic study of professional ballet dancers in the UK, Wainwright and Turner (2004) additionally report that dancers often make reference to their career as 'a calling'. This supports the notion that a career in dance is often driven by motives intrinsic to the individual. In addition, the literature suggests that dance is considered to play an important role as a source of emotional expression. Warren (1984) proposes that, at its most primitive level, dance is an expression of emotion through the medium of movement. This is substantiated by Hanna (2006, p.33), who states that 'dance can often express what words cannot'. Whilst the reports of Hanna (2006) and Warren (1984) provide additional insight into potential motives for pursuing a career in dance, the anecdotal nature of these reports highlights the need for additional research into the motives for pursuing a professional dance career.

Additionally, Hanna (1990, p.28) offers an alternative explanation relating to the potential rewards of a career in dance by postulating that the focus upon

execution of specific steps or sequences may facilitate an increased sense of control within the life of a dancer. In doing so, she considers dance may bring about changes in emotional state or even an alteration in 'states of consciousness'. This is supported by Csikszentmihalyi (2008, p.6) who, in his exploration of the process of optimal experience amongst athletes, surgeons, artists, musicians and chess masters, developed the concept of 'flow'. This is defined as:

'The way people describe their state of mind when consciousness is harmoniously ordered, and they want to pursue whatever they are doing for its own sake'.

Based upon extensive research in a variety of populations, Csikszentmihalyi (2008) considers one of the major aspects of experiencing a state of 'flow' is the ability to leave behind other difficult aspects of life. He suggests that during this process, the individual is able to let go of the idea of separation from the activity they are performing. In the case of the dance, it would appear that the movements, music and the dancer become one. Csikszentmihalyi (2008, p.59) applies a dancer's description of this experience to encapsulate the understanding of flow:

'I get a feeling that I don't get anywhere else...Dance is like therapy. If I am troubled about something, I leave it out of the door as I go in [the dance studio]'.

The dancer's experience of 'flow' (Csikszentmihalyi, 2008) and the role of dance as a form of emotional expression (Warren, 1984) further support Deci and Ryan's (1990) definitions of intrinsically motivated activities being grounded in innate psychological needs and occurring without evident external rewards.

Whilst the role of intrinsic motivation within dance is evident in the literature, the area of extrinsic motivation is noticeable by its absence. Kogan (2002) highlights the inconsistency between the extrinsic rewards of dance and the sense of satisfaction reported within the career. He proposes that the modest earnings over a brief career are outweighed by the immense sense of satisfaction reported whilst performing. This appears to be in contrast to the world of athletes, where large financial rewards can be gained during a similar

length of career. Therefore, Kogan (2002) highlights the importance of further exploration around the role intrinsic and extrinsic motivation within the performing arts in order to provide additional insight into what attracts and satisfies the performer during their career in the arts

2.2 Personality in performing artists

Research investigating the relationship between personality and participation in elite sport/performing arts has focused upon the exploration of two key areas (Bakker, Whiting, & Van der Brug, 1990). Does participation in a particular sport/performing art alter certain personality characteristics, or are individuals with specific personality profiles attracted to a career within sport/performing arts?

Research into the personality profiles of actors, dancers and musicians has produced contradictory findings. A variety of studies, using a range of personality measures, have compared the profiles of actors with control groups. The most common overall finding that emerges from this data has been actors' tendency to score highly on the 'Extraversion' scale (Hammond & Edelman, 1991; Marchant-Haycox, 1992). This is supported by Nettle (2006) who contrasted the personality profiles and cognitive styles of 191 professional actors (predominately British) with a general population sample. These findings reported that actors scored significantly higher on extraversion, but additionally, on the 'Openness to Experience' and 'Agreeableness' scale. This would support the notion that individuals with specific personality profiles may be drawn to a particular career.

Nettle (2006) explains this theory of self-selection by considering that high levels of extraversion in actors would be likely to attract extraverted personalities, due to the rewards of being in the spotlight/centre of attention. Additionally, the high levels of 'Agreeableness' and 'Openness to Experience' may be supplementary factors that draw actors into what Nettle (2006) termed as the most social of the professions within the performing arts. Therefore, Holland (1985) postulates that these findings confirm the utility of reflecting upon vocational careers as being the

product of a match between the psychological characteristics dictated by the profession and the inherent psychological traits of the individual. However, the conclusions of Holland (1985) must be interpreted with caution due to the absence of longitudinal research to substantiate these findings. Therefore, additional evidence in the form of longitudinal studies would inform the practice of counselling psychologists and provide additional insight into the role of psychological characteristics within the performing arts domain.

In contrast, Bakker's (1988) research addressing the personality traits of 52 student ballet dancers reported greater levels of introversion when compared to a control group of non-dancers. These dancers were also found to have higher levels of achievement motivation and emotionality than the control group. Bakker (1988) proposes that the attributes of achievement motivation and sensitivity may be conducive to promoting success within this demanding career. Additionally, Bakker (1988) argues that high levels of emotionality are a valuable asset within the performance aspect of the career. Furthermore, the degree of introversion is considered to have a potential link with the solitary/non-verbal nature of the career. However, Kogan (2002, p.7) questions the validity of Bakker's (1988) interpretations by suggesting that the personality requirements within dance may have been added 'post hoc' in order to fit with personality profiles reported in this study. Whilst the findings of Bakker (1988) offer one interpretation of the fit between personality profile and personality requirements with the world of dance, additional research is required in this area in order to corroborate these findings.

A follow-up study (Bakker, 1991) supported the findings of Bakker (1988) but included an additional exploration of changes in personality within the portion of the sample who had elected to terminate their career. No significant differences in personality were found between those who had continued in the profession when compared with those who had ended their career. Therefore, Bakker (1991) concluded that the personality characteristics of dancers were primarily the result of self-selection but might be reinforced by the sub-culture within ballet. This is further supported by the fact that the dancers who terminated their professional career continued to dance as a hobby, suggesting a continued attraction to the specific sub-culture of ballet. However, the generalizability of these findings is

limited due to the small sample population. The use of a student sample population is an additional limitation and points to the need for additional research to validate or dispute the concept of self-selection within the performing arts.

3.0 WHY MIGHT DANCERS REQUIRE PSYCHOLOGICAL SUPPORT?

In 1996, Brinson & Dick conducted a seminal piece of research within the field of dance entitled 'Fit to Dance 1'. This involved a national inquiry into the health of over six hundred dancers in the UK through self-report questionnaires. Although the research was primarily focused upon dancers' physical well-being, the research reported a large number of the dancers also experienced psychological problems including anxiety, stress, depression and difficult relationships. Therefore, a questionnaire specifically targeting the psychological well-being of dancers could provide counselling psychologists with additional information about the needs of this population.

A follow up study, 'Fit to Dance 2' (Laws, 2005), using almost double the sample size, found that dancers reported more psychological problems than physical injuries. Whilst these findings provide support the notion that dancers may experience psychological difficulties within their career, certain methodological flaws were also identified. The report highlighted the inherent problems of making use of self-report questionnaires and there were also concerns relating to the reliability, and validity, of the measure. In addition, the inclusion of a sample population which consisted of 75% vocational dance students and 25% professional dancers resulted in the findings being more representative of dance students as opposed to professional dancers. Therefore, further research is required in this area in order to gain an in-depth and reliable assessment of the nature and scale of psychological problems faced by professional dancers.

In a qualitative cross-cultural comparison study, Sharp (2003) investigated the most common psychological difficulties encountered by practitioners in their work with dancers. The findings suggested that presenting issues were similar

for dancers in the UK, America, Canada and France. Common difficulties included anxiety and depression resulting from injury, eating disorders, body image concerns, general career worries and difficulties around career transitions. Although Sharp's (2003) findings were similar to those of Brinson and Dick (1996), direct comparisons cannot be made due to the differing methodologies and sample populations. This highlights the need for further research which aims to capture the experiences of dancers and supplements the work conducted from the perspective of practitioners.

Further research was conducted from the dancers' perspective by Hardy (2005) who carried out a qualitative study, using grounded theory, exploring the similarities and differences of the experiences of stress, coping strategies and sources of support in freelance and employed contemporary dancers. Both groups cited problems with choreographers as a source of stress in addition to concerns relating to the occupational environment and the future. Freelance dancers showed more concerns about finance, maintaining fitness and aging but also demonstrated signs of a more internal locus of control than those in employment. In contrast, employed dancers were reported to be less autonomous, more focused upon external events/politics within the company, experienced greater self doubt and showed signs of a more external locus of evaluation. Although, this research provides an in-depth exploration of potentially interesting differences between the freelance and employed dancers, its qualitative nature does not allow for generalizability to other populations. Therefore, additional research is required to investigate the specific psychological support needs of differing sub-populations of dancers in order to enhance the treatment of the individual. In concluding, Hardy (2005) proposes that future research should investigate the role of self-determination theory (Ryan & Deci, 2002) within the world of dance.

3.1 The growth of dance medicine and support services

Within sport, the role of psychology in enhancing abilities and injury prevention has become increasingly significant. Greben (1991) highlights how research in

the performing arts domain has become similarly more prolific with practitioners showing an increasing interest in the treatment of performers. In a review of the past thirty-eight years of the 'Dance Medicine and Science Bibliography', Solomon and Solomon (2004) report a growth in psychological research within this domain.

Since 1984, the British Association of Performing Arts Medicine (BAPAM) has provided a source of specialist healthcare for a range of performing artists within the UK. At present the BAPAM practitioners' register lists twenty-nine practitioners with specialist knowledge of working with psychological difficulties experienced by performing artists. In 1989, an increased interest in the specialized area of performing arts medicine resulted in the publication of 'Medical Problems of Performing Artists', the first quarterly journal specifically focused upon arts medicine. The following year saw the formation of 'The International Association of Dance Medicine and Science' (IADMS). This organization aims to educate dance communities, and practitioners, and continues to develop the profile of dance medicine within the world of dance.

Dance UK, a national organization involved in the promotion of health within dance, has also highlighted the value of dissemination of research findings and the education of dancers, teachers and dance medicine practitioners. As a result, 'The Healthier Dancer Programme' was developed by Dance UK in 1990. This aimed to improve the overall physical, and emotional, well-being of dancers by facilitating research, providing information and advice, and advocating for better healthcare provision. The introduction of a practitioners' register has also enabled dancers to have access to professionals with specialist knowledge in this area.

3.2 The challenges of a career in dance

A career in dance involves a life of dedication where dance can become an all-consuming part of the individual's life, identity and focus. Hamilton, Hamilton and Meltzer (1989) consider that a successful dancer must have high levels of

commitment, an ability to cope with the physical and emotional pressures, and a tolerance to withstand the pain that is so often part of a dancer's career. The need for these qualities is supported by the research of Hamilton, Kella and Hamilton (1995), who investigated personality, occupational stress, and coping in forty-eight elite New York musicians and dancers using a range of validated measures to assess personality and occupational stress. Both professions were found to have more competitive and artistic careers than the norm group when assessed using the Adult Personality Inventory (Krug, 1984). Hamilton et al. (1995) further reported that whilst all performers experienced high levels of occupational stress, dancers were found to exhibit the highest levels reported. Key areas in which dancers experienced significantly higher levels of stress were highlighted as their physical environment and conflicting demands from supervisors. It was common for dancers to report that ambiguous criteria were often used during professional evaluations. This was considered to be a particular concern due to weekly castings being dictated by dance company management.

Whilst the research of Hamilton et al. (1995) provides an insight into certain aspects of occupational stress amongst musicians and dancers, larger scale and cross-cultural research is needed to expand upon these initial findings. In addition, the inclusion of dancers and musicians who were all of soloist or principal level may have been a contributing factor to the high levels of occupational stress reported within this research. Therefore, an investigation of occupational stress in musicians and dancers of differing ranks within the company may provide further insight in this area.

Whilst the extreme focus upon physical appearance is not a source of occupational stress within professional musicians, a number of other key stressors are present within the world of music. Hays and Brown (2004) highlight how a professional musician is required to be able to sight-read, work as a unit with other members of the orchestra, and adhere to the demands of the conductor. The findings of Fishbein, Middlestadt, Ottati, Strauss, and Ellis (1988) provide further support for high degree of occupational stress experienced by musicians reported by Hamilton et al. (1995). In a self-report survey of 2,122 musicians, the most common psychological difficulty

experienced was performance anxiety. This research described how a total of 27% of the musicians surveyed used beta-blockers, such as propranolol, to assist with anxiety related symptoms. Whilst, these findings are based upon a self-report study of an American sample, further exploration of the use of medication for performance anxiety would inform the practice of practitioners and assist in the development of interventions targeting anxiety in musicians.

3.3 External locus of evaluation and control

Anecdotal evidence suggests that the reliance upon external sources of evaluation can be problematic within a dance career. Hanna (2006) proposes that the ongoing dependence upon evaluation from external sources originates early in training and persists throughout the dance career. This can result in the dancer's self-esteem becoming dependent upon feedback from others within the profession (Hamilton, 1997a). In addition to the reliance upon an external locus of evaluation, dancers inhabit a world where they have little control over their career. Schnitt (1990) highlights the paradox where many dancers describe feeling in control of their bodies and yet exist in an environment in which they are primarily controlled by teachers or choreographers. Newman (2003, p.314-315) depicts the powerlessness of the dancer:

'Their teachers tell them what to do in class, the schedule tells them where to go at what time, the ballet masters tell them what to do in rehearsal, and the director picks their roles and their partners.'

Whilst these anecdotal reports highlight the role of locus of control, research has yet to provide empirical evidence in relation to the potential links between external locus of control and emotional well-being in dancers.

In a similar population, research has analysed the relationship between locus of control and self-esteem in 30 elite Canadian gymnasts (Kerr & Goss, 1997). This found gymnasts to have a higher external locus of control and self-esteem when compared to a norm group of similar age and gender. However, these findings are contrasted by Kolt and Kirby's (1993) research into elite Australian gymnasts, which reported high levels of internal locus of control within this sample

population. The conflicting findings may be explained by a number of factors. Firstly, there may be cross-cultural differences in the training patterns of Australian and Canadian gymnasts. Therefore, as in the dance literature, the approaches taken by different coaches during training may play a role in the gymnasts' development of an internal/external locus of control. In addition, the small sample populations and differing nationalities of these gymnasts limit the generalizability of these findings. Clearly, further large scale, cross-cultural research is required in order to establish whether there are links between locus of control and self-esteem in this and other artistic populations.

3.4 Identity and Career transition

The issue of identity following career transition can be problematic as it is common for dancers to report a strong sense of identification with their occupational role. This is supported by Mainwaring, Krasnow and Kerr, (2001, p.110) who suggest that 'for dancers, their work is their dancing: it is a way of life that defines who the dancer is.' The strong sense of identity with the role as a dancer can result in difficulties when a dancer is unable to dance either through injury or following career transition.

Harman (1991) highlights how a career in dance is brief, with the majority of dancers facing the prospect of retirement by the age of thirty-five or forty. Pickman (1987) uses the term 'tunnel vision' to describe a dancer's refusal to acknowledge the reality of the transitory nature of their career. The subject of transition from a career in dance is unusual due to the extensive role played by dance in both lifestyle and identity. As is the case with other sporting and artistic careers, Greben (2002), a clinician with considerable experience within the field of dance, describes how the end of a dance career can result in the simultaneous loss of career and identity. This is supported by the sports psychology literature, where Chamalidis (1997) reports that athletes who place great value on involvement in elite sport were found to be at increased risk of experiencing retirement related difficulties than those who placed less value upon athletic identity. Murphy, Petipas and Brewer (1996) suggest that these

challenges may result from the fact that athletes who are strongly committed to the athletic role are less likely to explore other career, education and lifestyle options.

Research into coping during periods of transition suggests that certain factors may ease the transition process. Tarasov, a Russian philosopher, states that a life transforming situation can be used to the benefit of the individual providing an adequate exit is found or a proper decision made. He encapsulates this process by stating that:

'When life shakes us up, we can move on, if we know where the exit is...'
(Tarasov, cited in Stambulova, 2000, p.584)

Finding an 'exit' from a dance career may be particularly challenging. Like athletes, dancers have often been goal directed and dedicated to their art from an early age. Hamilton (1998) highlights how the dancer's lengthy training may mean other aspects have to be put aside making little time for experimentation with different roles and identities. This is corroborated by the clinical experience of Greben (2002) who reports that dancers often regard themselves to be much less talented and able to learn in areas outside the dance world than is actually the case. He postulates that this sense of self doubt emerges as a result of being highly developed in one specific domain and underdeveloped/inexperienced in others areas of life although these conclusions have yet to be substantiated by empirical research.

In addition, the dance psychology literature emphasizes how many dancers experience career transition much earlier in life. This is illustrated by an American nationwide survey which reported that nine out of ten dancers in training had a wish to become professional dancers but only 35% accomplished this goal (Hamilton, 1997b). The findings of Hamilton (1997b) support the notion that dancers who do not reach professional status may also require psychological support when facing the shattering of career aspirations and the issues of loss of identity which may ensue.

3.5 Body Image and Disordered Eating

As in the sporting domain, the dance world fuels a preoccupation with body image and this is particularly striking in ballet dancers (Hamilton 1997c; Pierce & Daleng, 1998). Hamilton (1998) reported that in female dancers, regardless of technique, three out of four assessed viewed their body image in a negative manner. However, it is suggested these findings may be associated with ballet training early in life or a sign of the perfectionism present within the dance world.

The research literature addressing eating disorders in dancers suggests that many of the aesthetic demands placed upon dancers can make eating disorders a concern. These difficulties are highlighted by Hamilton & Hamilton (1994) in a cross-cultural survey of professional dancers. This indicated that the weight criteria for female ballet dancers was approximately 15% below the ideal weight for height, one of the criteria used to diagnose anorexia nervosa by the American Psychiatric Association (1994). When assessing the criteria for the diagnosis of anorexia nervosa (DSM IV, 2000), it appears that other criteria within DSM IV (2000) might also apply to many dancers. The diagnostic criteria of intense fear of weight gain and body weight/shape distortion may also be a relevant concern.

The research addressing the prevalence of eating disorders amongst dancers has produced conflicting findings. Nelson and Chatfield (1998) conducted a review of the eating disorder literature and reported a greater frequency of anorexia nervosa in female ballet dancers when compared with the general population. However, a critical review of the methodology in the eating disorder literature argues that, in some cases, modified or abridged versions of validated screening measures have been used. As a result, Nelson and Chatfield (1998) suggest that the prevalence of anorexia nervosa has been over reported in female ballet dancers. These conflicting findings may also be influenced by the study of different subpopulations of dancers where varying demands may be placed upon dancers in relation to body shape. Despite the contradictory findings, it is clear from the literature that the expectations of a professional dance career result in an environment where eating disorders are not uncommon.

3.6 Perfectionism

In an exploration of attentional and interpersonal style using personality profiling amongst a small sample of American dancers, Solomon, Solomon, Micheli, Saunders and Zurakowski (2002) reported high levels of perfectionism and competitiveness in dancers. Wainwright and Turner (2004, p.316) provide supplementary anecdotal evidence of high levels of perfectionism in dance by stating that 'the daily quest for the unattainable is one of the features of class, rehearsal and performance'. Whilst the findings of Solomon et al. (2002) provide empirical evidence of high levels of perfectionism in both professional and student populations, it is clear that research addressing perfectionism in dancers needs to be expanded to encompass cross-cultural research using larger samples. In addition, further research utilizing specific measures of perfectionism, for example, the Multidimensional Perfectionism Scale (Hewitt & Flett, 1991a) would provide insight into whether certain types of perfectionism are more prominent within this population. This would inform the practice of practitioners working with dancers and assist in the tailoring of interventions to meet the needs of the individual.

Evidence of perfectionism is also apparent in similar populations. The music psychology literature also reports that the pursuit of perfection is present within the lives of musicians. This is supported by Dews and Williams (1989) who highlight the fact that every aspect of the performance of musicians is related to the quest for perfection. In addition, these findings implicate perfectionism as a major contributing factor in performance anxiety and distress within the musicians' career.

Perfectionism has been implicated, within a number of well-controlled quantitative studies, in a variety of different psychopathologies which include depression (Blatt, 1995), eating disorders (Hewitt, Flett & Ediger, 1995) and stress (Chang, 2000). The link between perfectionism and stress has been expanded upon within a workplace setting where Fry (1995) compared the impact of perfectionism upon health outcomes amongst female executives. These findings indicated that when the levels of stress within the workplace

escalated, employees with higher levels of perfectionism experienced a more rapid increase in burnout, decrease in self-esteem and worsening physical symptoms. Whilst the findings of Fry (1995) provide evidence of a link between perfectionism, stress and burnout, further research upon different populations would inform the practice of counselling psychologists and offer a greater understanding of the impact of perfectionism within a range of client populations.

Numerous theories have been developed to address the link between perfectionism and self-esteem. Hirsch and Hayward (1998) propose that individuals with unhealthy levels of perfectionism have a tendency to form a link between perfection and their perceived value as a person. This can result in any perceived error being seen as an indication of personal failure. Within the dance psychology literature, Barrell and Terry (2003) report that dancers face frequent criticism, which can result in levels of self-esteem being affected by the feedback of others. This is supported by Hamilton (1997a, p.58) who considers that dancers with low self-esteem may remain fixated upon achieving 'ideals of their profession which can often lead to a significant depletion of self when criticized'. Whilst the findings of Barrell and Terry (2003) and Hamilton (1997a) provide anecdotal evidence of the link between criticism, perfectionism and low self-esteem in dancers, once again these reports highlight the need for further empirical evidence to support these findings.

In contrast, to the theory of Hirsch and Hayward (1998), Hamachek (1978) considers that perfectionists are driven by fear of failure, hence any performance involving appraisal is perceived as an opportunity for failure as opposed to success. These findings are supported by Zinsser, Bunker and Williams (1998, p.286) who propose that perfectionistic athletes can become so fixated upon failure and perceived errors that performance and enjoyment of the sport is severely impacted. This has additionally been found to affect self-concept and can initiate a 'fear-of-failure syndrome'.

Within the world of dance, the findings of Krasnow, Mainwaring, and Kerr (1999) suggest that the 'demands for perfection' generated by teachers may

have an additional negative impact upon psychological well-being and patterns of injury. These researchers compared levels of perfectionism and psychological stress in a group of elite ballet dancers, modern dancers and artistic gymnasts. Using the Multidimensional Perfectionism Scale (Frost, Marten, Lahart & Rosenblate, 1990) the research reported differences in the perfectionism subscales amongst the three groups. While both groups of dancers scored highly upon the 'Doubt about Actions' scale, gymnasts were reported to achieve higher ratings on the 'Parental Expectations scale'. In concluding, the authors suggested that these disparities may result from the differing evaluative criteria used within these professions. Whilst gymnasts have more precise criteria for evaluation, the nature of dance involves more subjective and artistic forms of assessment in relation to performance. However, several criticisms can be levelled at the research. Firstly, the role of personality differences may also be a contributing factor which has not been addressed. Secondly, the use of the Multidimensional Perfectionism Scale (Frost et al. 1990), a self-report measure, provides insight into the dancers and gymnasts perceptions of perfectionism but this measure does not permit an assessment of perfectionism from the perspective of coaches or ballet teachers. In addition, the sole use of female participants and the cross-sectional nature of the design does not allow for the exploration of the causal relationships reported within the investigation.

An additional consideration which requires further exploration is the possibility that the levels of perfectionism experienced by dancers are augmented by the demands of directors, and teachers. This concept is supported by Krasnow et al. (1999) who propose that the relationship between coaches/teachers and gymnasts/dancers is a crucial element in need of further investigation. Therefore, an in-depth exploration of the interaction between potential internal and external perfectionistic demands within the working relationship of dancers and directors/teachers would enhance the understanding of practitioners and improve the performance and well-being of dancers.

4.0 THE PROVISION OF PSYCHOLOGICAL SUPPORT

Sharp (2003) conducted research using interviews with professionals working with dancers in America, United Kingdom, Canada and France in order to explore the provision of support services offered to vocational dance students. These findings suggested a link between a dance organization's views of the value of psychology and the subsequent availability of psychological support services. In some organizations psychological support was viewed in a negative light. This appeared to stem from a number of concerns which included a lack of education within the profession around the nature of support provided by mental health practitioners. Additional concerns expressed centred around a fear that dancers might become reliant on therapists or apprehension that the service might be used purely to express dissatisfaction about staff. The validity of this research is questionable, as an in depth exploration of the research methodology is not reported, however, the use of interviews with practitioners supplies a rich source of data into potential barriers to making use of psychological support services.

In contrast, the 'Fit to Dance 2' report (Laws, 2005) addressed the issue of the provision of counselling services from the dancers' perspective as part of a self-report questionnaire. This found that 74% of dancers who had seen a counsellor or psychologist reported finding it helpful. 71% of dancers also expressed a belief that it would be useful to have access to an independent psychological practitioner but only approximately half the number of dancers participating in the study had access to a counsellor/psychologist. It should be noted that a large proportion of the dancers involved in the Laws (2005) questionnaire were students making it difficult to generalize the findings to professional dancers. However, this report highlights that many dancers would value the support of a psychologist but that this type of help is frequently unavailable.

5.0 BARRIERS/FACILITATORS TO SEEKING EMOTIONAL SUPPORT

A growing body of literature has addressed the issue of factors influencing the likelihood of seeking psychological support. The earlier research focused specifically on what Kushner and Sher (1989) termed 'approach factors'. These were considered to be factors which might increase the likelihood of seeking psychological support. Komiya, Good and Sherrod (2000) found that gender, decreased levels of distress, fear of emotions and stigma accounted for 25% of the variance in perceptions towards seeking support.

More recent research has addressed the issue of 'avoidance factors' (Kushner & Sher, 1989) which might decrease the likelihood of individuals seeking support. Avoidance factors reported including social stigma (Sibicky & Dovidio, 1986, Corrigan, 2004), reluctance to self-disclose (Hinson & Swanson, 1993) and gender, with women being reported to have more positive attitudes towards the seeking psychological support and the use of support services than men (Kessler, Brown & Broman, 1991). Whilst causality cannot be inferred, this research highlights specific concerns which may hinder the process of seeking psychological support.

Vogel and Wester (2003) investigated the role of avoidance factors in relation to seeking psychological support. They reported that individuals who were uncomfortable with disclosure of distressing events and unable to perceive benefits of this action tended to hold less positive views towards seeking support. These findings conclude that the dissemination of information regarding counselling services should attempt to address information relating to effectiveness and aim to reduce fears relating to accessing these services. In addition, Komiya et al. (2000, p.141) propose that, in certain circumstances, as a fear reducing strategy, there may be value in redefining counselling services as 'consultations', 'coaching' or 'seminars'. This appears to have been utilized by the New York City Ballet where the psychologist has been redefined as 'wellness co-ordinator', whilst other companies have used the term performance psychology consultant.

5.1 Counselling in the workplace

When considering potential avoidance and approach factors (Kushner & Sher, 1989) which may influence dancers' ability to seek psychological support, it is useful to draw upon research addressing counselling within other workplace settings. Athanasiades, Winthrop and Gough (2008) used grounded theory to explore factors affecting the self-referral process to counselling within a university employee counselling service. These findings suggested that prior positive experiences of mental health services were the primary motivator for making use of employee counselling services. Other factors which facilitated the process included trust in the confidentiality of the service and recommendation of the service by other users. Negative perceptions of counselling and a view that the workplace was an unsafe environment were found to serve as barriers to seeking support. Whilst, this research provided an insight into potential factors influencing the process of self-referral, these findings cannot be generalized to other occupational settings. Therefore, further research is required to explore the potential impact of other occupational settings upon the self-referral process.

In an additional study, Gyllensten, Palmer and Farrants (2005) explored finance organizations attitudes towards workplace stress interventions using interpretative phenomenological analysis (IPA). These findings identified an overall theme of resistance towards counselling for stress, this included sub-themes relating to culture within the finance sector, confidentiality fears, negative perceptions and a lack of belief in counselling as the best intervention. Although Gyllensten et al. (2005) questioned the homogeneity of their sample. These findings provided an in-depth exploration of the employees' experiences, but these findings may not be generalizable to other populations due to the small sample and qualitative nature of the research.

The importance of confidence in the confidentiality of employee counselling services was also found to be important in research using quantitative methodologies. French, Dunlap, Roman and Steele (1997) conducted a questionnaire study in six occupational settings over a two-year period. These findings reported that perceptions, relating to confidentiality of workplace

counselling, impacted on the employees' decision to make use of these services. Therefore, Hesketh (2000) proposes the need for counselling psychologists to reflect upon, and anticipate, specific ethical issues which may occur within certain organizational contexts. In addition, Walton (2003) proposes that employees are more likely to make use of counselling services if information is provided and the management is perceived to be supportive of the service. These findings suggest that endorsement by management and reassurances around the confidentiality of workplace counselling may be crucial in facilitating the process of seeking psychological support.

5.2 Impact of the dance culture upon seeking support

'Fit to Dance 1' (Brinson & Dick, 1996) identified a number of potential barriers which might impact on dancers' ability to seek psychological support. A key element of this included the 'stigmatization of anything psychological' (p. 75). One feature of this appeared to be concerns that psychological interventions may result in the removal of 'the neurosis' that drives the individual's creative abilities. As a result, the findings identified that counselling services would not be valued unless the dancer had a belief that they were not going to be viewed as 'unreliable' by others within the profession for making use of these services. Therefore, Brinson and Dick (1996) support the findings of Walton (2003) by making recommendations that dancers need to be supported, and given permission, to make use of these types of services.

Mainwaring, Krasnow and Kerr (2001) consider the dance world to be steeped in a 'culture of tolerance' towards pain and suffering, with dancers often being encouraged to continue to perform in spite of injury. In a survey of approximately one thousand dancers in America, Hamilton (1999) reported that 24% had a tutor who had expectations that they work when seriously injured and 48% had felt 'unjustly humiliated' in class. Common messages such as 'you have to suffer for your art' are often passed on to dancers early in training. This suggests that, in many cases, the 'culture of tolerance' may be learnt from an early age and become ingrained in the dancers' belief system. It is possible that messages

around 'tolerance' to suffering may extend to psychological and emotional issues, making it more difficult for dancers to seek support, although this is an area which has yet to be explored by researchers.

5.3 Impression management

The literature suggests a number of factors relating to the dancers' occupational environment which might act as barriers to seeking psychological support. Franklin (2003, p.7) highlights the importance of understanding the 'impact and constraints' of the workplace in order to assist in the provision of appropriate interventions. The literature suggests that within the world of dance any signs of weakness, or vulnerability, must be concealed in order to maintain the ideal image of strength and an ability to cope with the demands of the profession. This is substantiated by Hamilton (1991, p.51), who states that 'performers learn to deny vulnerability in the presence of others'. When considering this potential occupational barrier to seeking support, it is applicable to reflect upon the role played by impression management within the world of dance.

Goffman (1969) describes impression management as the use of strategies which are designed to evoke a desired response from observers. Whilst exploring this process, he draws parallels between social interactions and theatrical performances by proposing that both activities are made up of a 'frontstage' which is supported by activities conducted 'backstage'. Goffman (1969) considers individuals assume social roles where actions in the presence of others are often staged in order to create a favourable impression of self. In doing so, a person will often attempt to portray an image which is in keeping with the desired qualities of the group. This will involve attempts to downplay circumstances, events or facts which may not be compatible with the ideal image of self. This theory may be in keeping with the dancers' need to downplay signs of vulnerability in order to create an impression of strength. As a result, this may have the potential to act as a barrier to seeking support, as it would seem that some acknowledgement of vulnerability would be necessary in

order to initiate this process. Goffman (1969, p.66) highlights the potential insight gained from studying 'performances that are quite false to learn about ones that are quite honest'. Therefore, further investigation around the role played by impression management within the world of dance may provide valuable insight into the mechanisms used to conceal vulnerability and any potential role in hindering the seeking of psychological support.

Impression management has been considered to be influential in the promotion and maintenance of self-esteem, the preservation of self-concept and the regulation of social outcomes (Leary & Kowalski, 1990; Schlenker, 1980). Richardson and Cialdini (1987) describe two different types of tactics which may be relied upon to create an appropriate image. The first, termed 'direct tactics', is considered to be ways in which individuals might convey information about personal traits, skills and achievements. The second, 'indirect tactics', involves the management of details, related to people and activities, which are associated with the individual.

5.4 The potential role of stigma

The findings of 'Fit to Dance 1' (Brinson & Dick, 1996) identified a stigma associated with anything psychological within the world of dance. This would seem to be another potential barrier to seeking support. Goffman (1969, p.13) defines stigma as 'an attribute that is deeply discrediting'. Once again, the role of impression management seems particularly relevant, as individuals may be forced to conceal information relating to the source of the stigma or risk assuming the position of a 'discredited' individual. Goffman (1969, p.71) considers that 'a discreditable disclosure in one area of an individual's activity will throw doubt on the many areas of activity in which he may have nothing to conceal'. This is supported by research in the workplace setting. Carroll (1996) highlights a potential link between fears around confidentiality in the workplace and concerns that seeking psychological support may negatively impact upon career progression. Therefore, further exploration of this issue in dancers should

address whether a dancer's fears of stigmatization around psychological support are linked to perceptions around negative impact upon career progression.

Vogel, Wade and Hackler (2007) conducted an investigation into the mediating role of self-stigma and attitudes towards counselling upon perceived public stigma and willingness to seek psychological support. Using structural equation modelling, this study provided additional understanding into the way in which stigma might impact on an individual's ability to seek support. The findings suggested that perceptions of public stigma, linked with mental illness, predicted the degree of self-stigma associated with seeking psychological support. This, in turn, predicted attitudes towards seeking counselling and willingness to make use of psychological support services. Whilst this study acknowledges the limitations of the use of a student sample, and highlights the need for longitudinal research, it also provides valuable insight for practitioners. Therefore, Vogel et al. (2007) propose that the ultimate long-term goal may be to facilitate a change in society's attitudes towards psychological support. However, an important first step may be to assist individuals in learning to cope with, or overcome, the impact of internalizing the negative effects of stigma. One specific manner in which this might be targeted is the provision of information through workshops and internet information. Consequently, these findings provide potential insight into ways in which practitioners might facilitate the help seeking process within the dance profession.

5.5 The role of alternative medicine

Krasnow, Kerr and Mainwaring (1994) consider that the dancer's work culture can encourage a hesitancy to seek help from medical professionals. They suggest there may be a common belief amongst dancers that medical professionals, including sports medicine doctors, lack understanding of the inherent needs of their profession. Therefore, it appears that fears around feeling misunderstood may be an additional factor which deters dancers from putting their trust in professionals outside the dance world.

Schnitt and Schnitt (1991) suggest that many dancers tend to place their trust in more holistic forms of health care by turning to alternative health practitioners as a source of physical and emotional support. They consider that cultural beliefs within the dance world can result in a mistrust of most traditional institutions and figures in authority, including the medical profession. This is supported by Astin (1998), who examined the role of the socio-cultural and personal beliefs in the decision-making process relating to seeking support from alternative health practitioners. The findings suggested three key motivators linked to the decision-making process. These included: dissatisfaction with conventional medicine, the perception of greater control and an increased compatibility with the individual's own values and philosophy related to illness and health. Whilst causality cannot be inferred, these findings provide an insight into potential key motivators relating to the seeking of support from alternative health practitioners.

Research exploring the rationale for seeking support from alternative health practitioners has also been investigated within the world of dance. Lee (1992) conducted an exploratory qualitative study addressing the health care selection process in dancers. This identified a number of key themes, which included the use of other dancers as sources for referrals, confusion and misinformation about health care, mistrust of the health care system and a potential preoccupation or denial of health related problems. Lee (1992) proposes that improvements need to be made to the process of disseminating information to dancers and that practitioners must also develop an increased understanding of dancers' occupational identity. Whilst, the qualitative nature of this research provides a valuable in depth analysis of dancers' perceptions in relation to health care selection, further large scale research would be required in order to substantiate these findings.

6.0 CONCLUSION

This review highlights the anecdotal nature of a substantial proportion of the dance psychology literature. Therefore, additional research using both

qualitative and quantitative methodologies is required to further the understanding of practitioners working with professional dancers. Areas of research which require additional exploration include the role of intrinsic and extrinsic motivation within the dance career, the potential impact of teaching styles upon emotional well-being within dance companies and further empirical research into perfectionism and locus of control in dancers. Whilst the need for psychological support within the world of dance has become increasingly recognized, research addressing dancers' psychological support needs and perceptions of psychological therapy are noticeable by their absence. This highlights the need for further exploration in this area, in particular, an in depth exploration of the potential role of stigma and impression management in the process of seeking psychological support. From the literature, it is apparent that psychological support is becoming increasingly available to dancers but at present there is a need for an evaluation of the effectiveness of these services. A process of reflection upon current psychological support services will enable practitioners/dance companies to enhance the quality of these services and identify potential populations and emotional support needs which at present remain unfulfilled.

A review of the literature highlights a number of challenges, and psychological difficulties which might be encountered during a dancer's career. The importance of psychological support has become progressively more recognized, with an increasing number of dance schools and companies having access to a counsellor or psychologist. However, there appear to be a number of themes emerging from the literature which suggest certain aspects of the dance culture might hinder a dancer's ability to seek help (Krasnow et al., 1994). Research suggests dancers may often feel misunderstood by those outside the profession (Krasnow et al., 1994) and that it may be difficult for them to trust those who do not have an insight into their world (Krasnow et al., 1994). Therefore, this research aims to address a gap in the literature by providing an exploration of psychological support requirements and perceptions of psychological therapy from the perspective of those within the profession.

7.0 RATIONALE AND RESEARCH AIMS

McLeod (1991) proposes a number of ways in which the experience of the client can be concealed or different from the therapist's experience. In doing so, he considers that certain client groups may have specific expectations around their needs from counselling. The dance psychology literature suggests that this might be the case with dancers. In the 'Fit to Dance 1' survey (Brinson & Dick, 1996), dancers expressed a belief that counsellors would need to have some experience in dance to be able to understand their specific needs and be of assistance. This further supports the findings of Krasnow et al. (1994) who suggest that dancers may feel misunderstood by those outside the dance profession. Therefore, further exploration into the dancers' perceptions of counselling and personal needs from the counselling relationship will assist and guide practitioners when working within this domain.

In 1996, Brinson and Dick estimated there to be twenty-five thousand people in a variety of areas of the dance profession within the United Kingdom. Ten years later it is likely that this figure is considerably larger, with an estimated two hundred dance companies in the UK. The increasing population of dancers highlights the need for counselling psychologists to develop knowledge and awareness around the needs of this specific population. Sharp (2003, p.10) concludes that 'the dance world can be a complex place in which to work without an understanding of the peculiarities of the dance culture'. Therefore, it is important for counselling psychologists to gain an understanding of this 'culture' to inform and guide their practice.

In recent years, there has been an increase in psychological research investigating aspects of the dance career. The literature suggests there may be certain aspects of the dance culture which might impact upon the dancers' ability to seek help. However, much of this evidence has been anecdotal or from the perspective of practitioners working with dancers. In addition, the majority of the research has been conducted on student populations and the need for further research upon professional dancers has been highlighted (Sharp, 2003). The scarcity of research exploring the phenomenological world

of professional dancers' highlights the need to find new ways of accessing the experiences of this population. This will assist practitioners in tailoring their therapeutic approach to suit the needs of a growing population.

Whilst research has addressed the provision of psychological support for dancers, little is known about their perceptions of these services. Therefore, this research aims to build upon previous research by exploring dancers' psychological support requirements and perceptions of counselling using the qualitative research methodology of IPA. This research is considered to be novel in two respects. Firstly, it will provide an insight into psychological support services from the dancers' perspective, and secondly, it will introduce a new area of research to the field of counselling psychology.

CHAPTER 2: METHODOLOGY

1.0 INTRODUCTION

A qualitative research methodology incorporating the use of semi-structured interviews was utilized within this study. The rationale for selecting a qualitative approach will be explored with reference to the chosen methodology of interpretative phenomenological analysis (IPA).

1.1 RATIONALE FOR THE USE OF QUALITATIVE METHODOLOGY

Qualitative research places the focus upon 'the quality and texture of experience' as opposed to the investigation of 'cause-effect relationships' (Willig, 2001). A variety of epistemological positions can be accommodated. Flick (1998) proposes that the area of research should be the key determining factor in the choice of research methodology. This research aimed to access the subjective experience of professional dancers and explore personal perceptions relating to the seeking of psychological therapy. The lack of prior research in this area provided support for the utilization of a qualitative methodology. This presented an opportunity for a more exploratory approach to be taken and facilitated the opportunity for an in-depth study of subjective accounts. Qualitative paradigms also provide the researcher with the potential for an idiographic exploration of the phenomenological world of the participant (Bryman, 1988). This aspect was central to the study of the lifeworld of professional dancers.

Snape and Spencer (2003) consider the use of a qualitative methodology facilitates the exploration of topics where potentially complex areas may be uncovered. Following an examination of the current dance research literature, and discussion with professionals in the field, the multifaceted nature of the area under investigation was apparent. This further supported the selection of a qualitative methodology. In addition, Patton (2002, p.39) proposes that qualitative research permits the generation of findings in a manner in which the

phenomena 'of interest unfold naturally'. Therefore, the utilization of a phenomenological approach was appropriate for the exploration of the inner world of dance from the perspective of the participants. This was further supported by the increased interest and acceptance of the use of qualitative research methods within the field of counselling psychology.

An additional determining factor in the choice of a qualitative approach stemmed from the reflection upon the role of the researcher within the research process. Hathaway (1995) encapsulates the role of the qualitative researcher as being like an 'actor' in the company of 'other actors'. Given the researcher's prior experiences as an ex-dancer and counselling psychologist in training, it seemed appropriate to select a research methodology which explicitly acknowledged the complex inter-relationship between researcher and participant.

1.2 IPA AS A RESEARCH METHODOLOGY

IPA was chosen to explore the phenomenological world of professional dancers. Smith, Flowers and Larkin (2009, p.1) describe IPA as a qualitative methodology which is 'committed to the examination of how people make sense of their major life experiences'. In recent years, IPA has become increasingly utilized within the field of clinical, social and health psychology research due to the emphasis placed upon the individual's perception and understanding of life experiences and occurrences (Smith & Eatough, 2007).

Smith, Flowers and Osborn (1997) propose that the process of analysis within IPA provides an approach in which meaningful interpretations can be constructed. Participants are viewed as 'experts on their own experiences and can offer researchers an understanding of their thoughts, commitments and feelings through telling their own stories; in their own words' (Reid, Flowers & Larkin, 2005, p. 20). IPA provides an insight into the area of research at an idiographic level and moves from a case by case analysis to an exploration and interpretation of the experiences of the sample as a whole. This process

provides an in depth exploration and interpretation of how participants perceive and understand events occurring within their lives (Chapman & Smith, 2002).

In keeping with other qualitative methodologies, IPA does not seek to make claims regarding the generalizability of the study but instead seeks to relate the findings to the sample population under investigation. However, due consideration of 'theoretical as opposed to empirical generalizability' permits the reader to assess the research findings in relation to the existing literature in addition to personal and professional experience within the field (Smith & Eatough, 2007, p.40). Future subsequent studies conducted upon similar populations will facilitate a more in-depth assessment of the generalizability of the findings within this research.

The methodological strengths of IPA have also been perceived as weaknesses by researchers. Willig (2005) has questioned IPA's conceptualisation of the role of language within the approach and raises the question of whether language can ever be considered as a means of fully capturing experience. In response, IPA researchers acknowledge the epistemic limitations of language and accept the inevitable partiality of first-person accounts. In addition to consideration around the use of language, IPA also places a focus upon the link between context and the way in which meanings are constructed by participants within any given setting (Blumer, 1969). This provides an opportunity to explore the impact of social interactions and culture upon experiences.

An additional criticism directed at IPA is the role of cognition within the approach. Willig (2005) proposes that the focus of phenomenological research should be grounded in the exploration of 'lived experiences' as opposed to the study of individual cognitions. Eatough and Smith (2008) address this critique by raising the question of whether cognition can truly be defined as a distinct process. In doing so, they perceive cognition to be a valuable aspect of the participant's lived experience which provides additional insight into the manner in which the individual makes sense of their world. Smith and Eatough (2007) consider IPA to be committed to the exploration of the 'cognitive, linguistic, affective and physical being of the individual'. In addition to this commitment,

comes an acknowledgement of the interconnectivity and complexity of this process.

IPA shares features of commonality with other qualitative research methodologies including discourse analysis and grounded theory. The similarities between discourse analysis and IPA are grounded in the focus upon the use of language within the method of inquiry. However, the two methodologies diverge due to differences in the way in which social cognition is perceived within each approach. Discourse analysis considers language to be central to the construction of social and psychological life and places the focus upon how language is used to construct versions of the world. By placing the spotlight upon the role of language within the construction of the world, discourse analysis aims to 'gain a better understanding of social life and social interaction' from the study of 'social texts' (Potter & Wetherell, 1987, p.7).

In contrast to discourse analysis, Chapman and Smith (2002) propose that the study of language within IPA is used to gain insight into the individual's thoughts, beliefs and experiences around the area under exploration. IPA researchers' utilize language as a powerful means of entering the client's world. Although discourse analysis was considered as a potential research methodology, this would not have met the aims of this research because of its focus at the societal level as opposed to the subjective experience of the individual. IPA was considered to be a more fitting approach due to the focus upon the exploration of dancers' experience as opposed to the investigation and generation of hypotheses as to how language constructs the world.

Grounded theory first originated from the work of Glaser and Strauss (1967). The focus of this methodology is the development of a 'high level conceptual account' based around the research data (Smith et al. 2009, p.44). Whilst IPA and grounded theory both make use of an exploratory approach, a key difference between the two methodologies is that grounded theory facilitates the exploration of social processes (Willig, 2005) and leads to the construction of a model/theory. In contrast to grounded theory, IPA places the focus upon attempting to gain an insider's view of the participant's experience of their

lifeworld. Whilst due consideration was given to the use of grounded theory, the focus upon the phenomenological world of the professional dancer as opposed to the generation of an explanatory theory supported the rationale for the use of IPA.

Whilst the generation of a model/theory, is a central tenet of grounded theory, where it is used 'to generate a theoretical-level account of a particular phenomenon' (Smith et al., 2009, p.43). The production of a model has not traditionally featured as a core principle of IPA, a methodology which places the focus upon idiographic meaning-making. However, this issue has been the subject of ongoing debate amongst IPA researchers and the discussion has centred on whether model-making can be applied to individual IPA research projects. At present the consensus suggests that the use of a model of what is occurring (in explanatory terms) is not typical within IPA, due to the idiographic focus placed upon the how participants 'make sense' of their experiences. However, a model providing a representation of the relationship between aspects of the participants' experiences is appropriate if this is considered to enhance the understanding of the research process (Larkin, 2008). Therefore, this research does not aim to produce a model of what is occurring within the research but does present an illustration of the relationship between aspects of the participants experience within the discussion (see Figure 1).

1.3 RATIONALE FOR THE UTILIZATION OF IPA

IPA was selected as an appropriate research methodology for a number of reasons. Firstly, the research explored an original area, by addressing the 'lived experience' of professional dancers. In addition, Shaw (2001) considers IPA to be a useful method of analysis for novel areas of research and highlights how the utilization of this methodology has the potential to uncover rare themes. The iterative process of IPA can also assist the researcher in developing an 'insider's perspective' into the area under investigation (Reid, Flowers & Larkin, 2005).

The researcher was keen to capture the dancers' perceptions of the phenomenological world of dance and the potential challenges of being immersed within this culture. Reid, Flowers and Larkin (2005, p.21) consider that IPA places the 'focus upon contextualised and detailed accounts of experience'. Therefore, the choice of IPA as a research methodology also allowed for the exploration of specific cultural aspects which may be unique within the world of dance.

Due to the prior experiences of the researcher, within the world of dance, it was important to select a research methodology that allowed an acknowledgement of this to be made. IPA explicitly acknowledges that the research process and analysis are inevitably the result of the experiences of the participant interacting with the perceptions, experiences and beliefs of the researcher. In doing so, it accepts the impossibility of gaining a full and direct access to the experiences of an individual and considers this to be filtered through the subjectivity of the researcher. This is supported by Smith (1996b, p.195), who considers the issue of reflexivity to be 'an inevitable consequence of engaging in research with people' and states that this 'can be harnessed as a valuable part of the research exercise'.

Finally, the use of IPA as a research methodology was in keeping with the core values of the work of counselling psychologists. The BPS Professional Practice Guidelines for the Division of Counselling Psychology (2005, p.6) states that within research 'it is expected that there will be congruence between the model of research chosen and the values expressed in counselling psychology'. By 'engaging with subjectivity and intersubjectivity' of the participants, knowing and respecting 'first person accounts as valid in their own terms' and recognising 'social contexts' (BPS, 2005, p.1-2) IPA was in keeping with these guidelines.

1.4 EPISTEMOLOGICAL CONSIDERATIONS

Hughes (1990, p.11) highlights that 'every research tool or procedure is inextricably embedded in commitments to particular versions of the world and to

knowing that world'. The qualitative approach taken by the researcher is dependent upon a number of factors including the interacting role of ontology and epistemology. Ontology places the focus on the nature of the world and what can be known while epistemology is concerned with the nature of knowledge and how we can know.

Snape and Spencer (2003) highlight the importance of the role of awareness of both the philosophical issues and methodological implications which arise as one way of ensuring consistency and quality in the area of research. In order to consider these areas, the theoretical underpinning of IPA will now be addressed.

1.5 THEORETICAL UNDERPINNINGS OF IPA

The three key theoretical underpinnings of IPA are:-

- Phenomenology, which focuses upon the experience of the world from the perspective of the individual (Willig, 2005).
- An interpretative approach, which draws upon hermeneutics.
- Idiography, which places the focus upon individual case analysis.

Each of the theoretical underpinnings will now be considered by briefly addressing their origins within the realm of philosophy.

1.5.1 IPA and Phenomenology

IPA has a phenomenological approach to exploring the meaning making process from an idiographic perspective. Phenomenology attempts to 'set aside any assumptions about the object of inquiry, and build upon a thorough and comprehensive description of the 'thing itself' (McLeod, 2005, p.56). This field of philosophy is based upon the writings of a number of key thinkers but originated from the work of Husserl (1859-1938). Husserl was concerned with the personal experience of objects or events but did not seek to construct an

objective statement of the phenomenon (Smith, 1996). He advocated the importance of describing the way in which the world was experienced through conscious acts. In doing so, he placed the focus upon returning 'to the things themselves'. The essence of returning 'to the things themselves' is key to the phenomenological approach as it implicates the possibility that by focusing upon the phenomenon in its own right, this provides an opportunity of capturing the way in which it is experienced.

Husserl (1859-1938) stimulated the work of a number of additional key thinkers including the contributions of Heidegger (1889-1976). He argued that phenomenology was more than just a descriptive methodology and that the process of description inevitably resulted in a process of interpretation. For Heidegger, it was not possible to purely focus upon the description of experience as had been advocated by Husserl. As a result, Heidegger emphasised the need to consider that experience is always grounded within the world and ways of being. This view was supported by the view of Merleau-Ponty (1962, p. xi) who also placed an emphasis upon the embodied nature of being in the world. He stated that 'man is in the world and only in the world does he know himself'. As a result, Heidegger developed a more interpretative methodology which merged phenomenology with the concept of hermeneutics. In doing so, he considered that what the researcher brings to the research inevitably distorts the phenomenon under investigation.

1.5.2 IPA and Hermeneutics

Hermeneutics is considered to be the study and theory of interpretation. Smith and Osborne (2007) state that IPA involves a two stage process of interpretation, or double hermeneutic, where the participant is attempting to make sense of their world whilst the researcher is attempting to make sense of the participant making sense of their world. The research process also attempts to combine what Ricoeur (1970) termed the hermeneutics of meaning with the hermeneutics of suspicion. Within the analysis phase the researcher initially focuses upon the meaning for the experience of the individual (hermeneutics of

meaning). The process of analysis then attempts to engage with the text at a more in depth level of interpretation (hermeneutics of suspicion) by exploring what may lie deeper or be concealed within the data. Smith (2004) suggests that the use of both levels of interpretation can result in a fuller exploration of the individual's experience.

1.5.3 IPA and Idiography

IPA is based upon an idiographic form of inquiry as opposed to a nomothetic approach (Smith, Harre & Van Langenhove, 1995). In contrast to the group level analysis of the nomothetic approach, the idiographic approach attempts to explore the experiences at the level of the individual. IPA places the initial focus upon an in depth analysis of each individual participant's experience and therefore considers the value of the individual case in its own terms. Smith (2004) considers that only when an in depth analysis of each case has been made does a gradual and tentative shift towards a cross case comparison occur. In doing so, IPA attempts to consider the similarities and differences which appear within and across cases.

In contrast to the positivist paradigm which considers there to be a 'real world' where knowledge can be gained through the use of scientific methods, IPA is grounded in a non-positivist paradigm which focuses upon individual experiences. Willig (2005, p.66) states that IPA can be considered 'to subscribe to a *relativist ontology*' whilst acknowledging the role of symbolic interactionism (Blumer, 1969). This results in an additional focus being placed upon the nature of social interaction how the individual makes meaning out of their individual and social world.

2.0 RESEARCH AIMS

By making use of idiographic, interpretative phenomenological study the focus is placed upon the experience of specific individuals in certain situations, in this case the experience of individual dancer's within British dance companies. This

research aims to build upon the previous research by exploring emerging themes from a variety of areas including:-

1. What are the emotional challenges of a dance career?
2. What do dancers feel is needed in terms of psychological support?
3. What might be the potential barriers/facilitators to seeking support?
4. How do dancers perceive psychological support?

3.0 IPA AND SAMPLE SIZE

Within the IPA literature, there appears to be little consensus around what constitutes an appropriate sample size for an IPA study. Smith, Jarman and Osborne (1999) consider the use of ten participants to be close to the upper end of sample size within an IPA study although research has been conducted with larger samples. In contrast, Smith (2004) also placed an emphasis upon the value of case studies and small sample studies within IPA research. Despite the lack of consensus, the importance of a detailed engagement with each participant's material is considered to be crucial within any research utilizing IPA.

The researcher made the decision to follow the guidelines for research using qualitative methods made by Turpin, Barley, Beail, Scaife, Slade, Smith and Walsh (1997). These guidelines propose that six to eight participants is a sufficient sample size for an IPA study within clinical and health postgraduate programmes. An additional factor, which influenced the researcher's decision, was the challenge of recruiting dancers who were willing to participate in the research; therefore, the sample size consisted of eight participants. The appropriateness of this size of sample in IPA research is further endorsed by the work of Smith and Osborn (2008).

4.0 RECRUITMENT OF PARTICIPANTS

Purposive sampling is used within IPA in order to recruit participants who share the experience which is being addressed by the research question (Willig,

2005). This study set out to explore the 'lived experience' of employed professional dancers. As a result, the participants recruited for the study were professional dancers, over the age of eighteen, who were currently employed with a British professional dance company. These population parameters were selected in order to provide access to individuals who had expertise in the phenomenon being studied (Reid, Flowers & Larkin, 2005). The appropriateness of population parameters presented an initial dilemma within the research process. During this stage I considered if it was appropriate to include male and female dancers in the study. In addition, I reflected upon whether to recruit dancers from a variety of dance styles and the potential impact of an ex-dancer researching the experiences of other dancers. This was resolved through personal communication with the founder of IPA, Jonathan Smith (see appendix 16: personal Communication) and discussion with other research supervisors as part of a presentation of the research within its initial stages. Following this period of consultation, these dilemmas were resolved and it was considered to be appropriate to include male and female dancers from a variety of dance styles. The rationale for these decisions and a critical reflection upon the sample is now addressed.

Smith, Flowers and Larkin (2009, p.50) argue that the participants selected for an IPA study should 'represent a perspective as opposed to a population', indicating that IPA is representative of the phenomenological experiences of the participants as opposed to the population as a whole. They also emphasize the need for pragmatism when attempting to access hard to reach populations and consider that the degree of homogeneity of the sample population will vary according to the area of study. The researcher was aware of the potential challenges of recruiting dancers to participate in the research (due to the closed nature of the world of dance and potential fears around confidentiality) and had to balance this difficulty against the need to acquire a relatively homogenous sample.

It is acknowledged that there are a variety of factors which could have been defined within the sample. These included age, gender, dance style, and rank within the dance company. All of these issues were reflected upon and

discussed during research presentations. Due to the physical demands of the career, the lifespan of a dancer tends to be short. This is supported by Harman (1991) who highlights the fact that dancers face the prospect of retirement by the age of thirty-five or forty. For this reason, a decision was made not to restrict the age parameters of the sample. Whilst it is acknowledged that there is a need for research exploring the experience of unemployed dancers, this population was not included to ensure that the population parameters did not become too broad for an IPA study.

Prior to recruitment, due consideration was given to the appropriateness of including dancers who came from different dance backgrounds. My decision to include dancers from a variety of dance styles reflected the overlap in repertoire within many companies. It is common for ballet dancers to perform contemporary, or on occasion musical theatre style pieces, and for contemporary/musical theatre dancers to perform more classically orientated styles of choreography. Therefore, the inclusion of dancers from a variety of dance styles was considered appropriate. However, it would not have been relevant to include dancers without any experience of full-time dance training prior to commencing their career, as the intense period of training is a crucial part of the dancer's career and experience.

At the beginning of the recruitment phase, the researcher approached the management of a number of British dance companies with recruitment information via an email sent through Dance UK, a national dance organization (see appendix 1: information for dance companies). However, this resulted in the recruitment of only one dancer. The researcher subsequently contacted a dancer through personal contacts, thus initiating a process of snowballing until eight participants were recruited.

During the recruitment process, the participants were contacted verbally by other dancers. If the dancers expressed an interest in participating they were provided with an information sheet detailing the purpose of the research, what the nature of participation would involve and information relating to confidentiality and anonymity (see appendix 2-3). The dancers who wished to

proceed were provided with the contact details of the researcher in order to facilitate the instigation of contact.

Five female dancers and three male dancers were recruited. The differences in proportion of both genders may be reflective of the greater proportion of female dancers within the professional dance world. Dancers were recruited from a number of professional dance companies and consisted of ballet dancers, contemporary and musical theatre dancers. The dancers ranged in age between 21 and 34 (see appendix 4: demographic information). All dancers came from London based dance companies, although a number of the companies were touring companies. Two of the dancers were currently in personal therapy. Three other dancers described receiving some emotional support from a homeopath. This was not classified by the researcher as an experience of therapy due to the lack of psychotherapeutic training of the professional in this field. In terms of past experiences, one dancer had two brief experiences of therapy earlier in her career and two dancers described having two sessions of therapy, one as an adolescent and another during his career.

4.1 CRITICAL REFLECTIONS UPON RECRUITMENT

As part of the recruitment process, potential participants were made aware that I was an ex-professional dancer and counselling psychologist in training. It was hoped that this might facilitate the recruitment procedure and the process of trust and exploration within the interviews. The dancers' willingness to disclose their phenomenological world was a gratifying contrast to the initial difficulty in recruitment.

During recruitment I reflected upon the early difficulties and wondered whether the failure to recruit dancers through dance company management was an indicator of the closed nature of the culture within the dance world. In addition, I reflected upon whether dancers perception were such that they did not view psychological support as an issue of importance, however, this theory was not supported by the dancers who participated in the interviews. I also considered

the possibility that I could be 'lumped' together with the management within the company, and consequently the dancers might be suspicious of my motives for conducting the study. As a result, it seemed important to be transparent about the rationale for conducting the research and my prior experience within the dance world. On a personal level it would have seemed dishonest not to disclose my dual role as researcher and ex-dancer as I anticipated that the dancers would guess that this might be the case upon meeting. In my experience, it is common for dancers to be able to spot other dancers/ex-dancers due to certain physical and postural attributes. This was something which was validated by conversations with several dancers who were not involved in the research and the ex-dancers who participated in the pilot studies. I also addressed the issue of disclosure during university research presentations and the consensus gained was that this was appropriate and in keeping with the notion of transparency.

Due to the difficulty in recruitment, certain considerations must be made in relation to the research sample. The research made use of dancers who had a variety of experiences of personal therapy. Whilst this could be considered to be a limitation of this research it also provided the potential to gain insight from a variety of perspectives. This is supported by Smith et al. (2009, p.49) who argue that members of a sample should not be treated 'as an identikit'. They postulate that the recruitment of a relatively homogenous sample provides the researcher with the potential to reflect upon and explore the similarities and differences between the participants' experiences. The inclusion of dancers from a variety of dance styles also provided an opportunity to gain insight into the challenges within different areas of the dance world but future research may wish to conduct further comparisons in this area. The use of snowballing is often used with IPA research (Smith et al. 2009) and this proved to be an effective method of recruitment for a population who appeared hard to reach. However, one of the limitations of this method of recruitment is potential for participants to link the researcher with other like minded individuals. Therefore, it is acknowledged that whilst this method of recruitment fulfilled the need of gaining participants who had experience of the inner world of dance, the potential for sampling bias could be considered to be a limitation of the study.

An additional key area, which was not addressed within the research, was the potential impact of personality differences in relation to the dancer's experiences. This is another area which could be addressed within future research. All the dancers who participated in the study were currently employed. The majority were from the lower ranks in the company, corps de ballet/ensemble level. Further research exploring the experience of unemployed and soloist/principal level dancers may provide an opportunity to assess whether there are similarities or differences between samples.

In summary, upon critical reflection, the sample was considered to be homogenous in that all dancers had experienced at least three years of full-time training, were currently employed with British dance companies and shared the experience of performing in different dance styles. This provided an opportunity to access the lifeworld of professional dancers and explores the emotional challenges of a professional dance career. However, it is acknowledged that the differing experiences of personal therapy have an impact on the homogeneity of the sample. Whilst this facilitated the exploration of perceptions and experiences of therapy from a variety of perspectives it is also considered to be a limitation of the study. In this case, the researcher had to balance the need to recruit participants against the degree of homogeneity of the sample. Further research is needed to build upon the findings of the current research by exploring dance populations who have no experience of therapy. This would provide additional insight into perceptions of therapy and potential barriers and facilitators to seeking support. In addition, although the current research findings were similar across genders, additional research would enable the exploration of differences in experiences across genders.

5.0 IPA AND SEMI-STRUCTURED INTERVIEWS

This research made use of semi-structured interviews as a means of data collection. Chapman and Smith (2002) consider semi-structured interviewing to be appropriate within IPA research as it allows for a certain degree of flexibility

during the interview process. This enables participants to have input into the direction of the interview and provides an opportunity for novel areas to be explored as they emerge within the process (Smith & Osborn, 2008). The use of semi-structured interviewing can also be considered to be in keeping with the philosophical underpinnings of phenomenology, hermeneutics, and the theoretical aspects of IPA's methodology. In essence, it provided the potential for an exploration of the participants 'lived experiences' and their understanding of these processes.

The very nature of semi-structured interviews as a method of data collection is in itself a complex process. In his depiction of the interview process, Rapley (2001) describes how the researcher aims to seek 'to unpack' the prior talk, and allow multiple numbers of issues, or 'mentionables', that the interviewee raises to be explored and/or followed up' (p.315). However, Willig (2005) emphasizes the need for a fine degree of balance, by the researcher, in order to guide the interview whilst allowing space for the interviewee to explore and elaborate upon the issues which arise.

A key advantage to the use of semi-structured interviews is that this provides the potential for a rapport to develop between researcher and participant. This appeared to be particularly important with the participant group under investigation as the literature highlighted potential difficulties in dancers trusting those outside of the profession. With this in mind, I attempted to ground the interview in Rogers (1957) 'core conditions' of empathy, unconditional positive regard and congruence.

As with all qualitative interviews, Reissman (1993) indicates that the interviewer must be fully aware of the fact that the participant's experience is being heard by one researcher and this would have appeared in another format if conducted by a different interviewer. Therefore, it is acknowledged that one of the key disadvantages of semi-structured interviews is the element of bias introduced by the researcher and the potential impact this may have upon the participant. Mishler (1986) expands upon the issue of subjectivity by reflecting upon the close relationship between the research interviews and the interpretation

process. He postulates that the construction of the interview schedule, the presentation of the researcher and the manner in which the information is received all shape the representation of the data. It is therefore important to embrace this aspect of the methodology through an in depth exploration of the researcher's prior assumptions or situational issues which may shape the findings. These issues will be considered when reflecting upon the interview process and analysis.

5.1 PILOTING AND THE INTERVIEW SCHEDULE

A key consideration in the formation and utilization of a semi-structured interview schedule is that this should act as 'a guide' to researcher as opposed to something which dictates the process (Smith, 1995, p.5). Due consideration of the phrasing of interview questions is also vital in order to ensure that questions are phrased in a neutral as opposed to leading manner.

As researcher, it is salient to raise the issue of my own awareness around the fact that an infinite range of possible questions/areas could have been included within the interview schedule. Decisions relating to the areas addressed within the schedule were endorsed by a range of sources. An initial review of the current dance and psychological research literature provided a basis in which to ground the early construction of this schedule. This was expanded upon by further reflection upon the relevant areas which the research set out to explore. During the planning stage, several discussions with professional dancers and psychologists working within the field were conducted in order to assess whether the areas addressed were considered valid by independent professionals. As an additional source of validation, I also sought feedback from colleagues and my research supervisor, removed from the world of dance, in order to gain further insight from those outside of the profession.

Construction of Interview Schedule

The interview schedule aimed to address five key areas. Firstly, it provided a gentle introduction to the interview, in order to allow the researcher to begin build a rapport with the participants. This explored the dancers' pathway into the

world of professional dance, reflected upon their dance experiences and considered initial motives for pursuing a career in this field. Once a rapport had begun to develop, the next section moved to a deeper level and aimed to elicit the dancers' views on having access to psychological support services within the world of dance. In addition, it provided an assessment of sources of psychological/emotional support utilized by the dancers during their career.

The subsequent section involved further in depth disclosure by exploring the dancers' perceptions of the emotional challenges of the career. It also encouraged reflection upon the question of whom they might turn to when in need of emotional support. This part of the schedule also attempted to examine dancers' experiences of potential practical/emotional barriers and facilitators to seeking psychological support. This provided the potential to elicit data which might inform the practice of psychological practitioners within the field in terms of service provision.

The final section explored the dancers' perceptions of psychologists and counsellors. In doing so, it aimed to facilitate rich descriptions through probes which encouraged the dancers to reflect upon any images associated with counsellors/psychologists. The inclusion of a final question encouraging dancers to discuss any further areas which they thought might be relevant to the research provided an opportunity to capture essences of experience which might have been missed within the interview schedule. As researcher, I acknowledge that an additional question addressing romantic relationships could have been included within the schedule but it was interesting to note this was not raised as an area which was considered to have been omitted at the end of the interview by any of the dancers.

Following construction, the interview schedule was piloted on three ex-dancers, who did not participate in the study (see appendix 5: pilot interview). This assisted in refining and clarification of specific questions and enabled the researcher to obtain feedback about whether the interviewing approach facilitated the participant's exploration of the topics discussed. Feedback from the dancers was obtained and the participants agreed that the interview was

generally clear and did not raise any areas which they considered might cause offence. The dancers also agreed that they felt at ease during the interview and were satisfied with the ethical safeguards implemented in order to protect the anonymity and safety of the participants.

Following the pilot interviews, the dancers were questioned about any other areas which might be relevant to the research. The issue of the inclusion of a question relating to dancers perceptions of alternative medicine was raised by two of the dancers. The rationale behind this was both dancers stated that many dancers sought these types of therapy as opposed to psychological therapies due to the absence of stigma. The removal of stigma was related to perceptions that these types of therapies were considered to be physical as opposed to psychological. In their exploration of this area, the dancers also made reference to the fact that many of the physical therapists within dance companies (masseurs/ physiotherapists) were often used as a source of psychological support. This further endorsed their perceptions that emotional difficulties could be addressed under the guise of physical therapies. Whilst this may seem an unconventional area to explore within the interview, the input from the dancers, and the supporting body of literature, justified the inclusion of a question addressing dancers' views on seeking support from alternative health practitioners. It was also interesting to note that the area of alternative medicine was raised by many dancers early in the interview prior to any prompts from the schedule.

Following completion of the pilot interviews, minimal alterations were made to the schedule in order to refine and clarify specific questions and allow for the inclusion of additional questions which the participants felt might be relevant (see appendix 6 for alterations: interview schedule).

Construction of the demographic questionnaire

The demographic questionnaire was designed to collect additional factual data in relation to the dancers' lives and careers. Initial questions provided basic information about the participants' age, sex and nationality. An additional

question assessed the number of years each dancer had spent in full-time training. This provided information about the number of participants who had entered a vocational boarding school at the age of eleven thus providing an indication of those who had been partially separated from their families at an early age to pursue their career. Other demographic questions addressed the number of years each dancer had been a professional dancer and the styles of dance in which they performed. This assisted in providing a sense of context to the dancers' experiences and elicited information regarding the overlap between performing styles of the ballet and contemporary dancers. The dancers were also asked to record the names of companies where they had performed. In order to protect the anonymity of the dancers, the names of these companies were not included within the research but this allowed the population to be defined as dancers from London based dance companies.

There were numerous questions which could have been included within the demographic questionnaire. However, this was kept brief as the researcher was mindful of the need to allow a rapport to develop with each of the dancers before probing with too many questions. Additional questions relating to experiences of personal therapy could have been included but this was already addressed within the interview schedule. Other aspects which might have been added could have assessed relationship status and sexual orientation; however, these areas were also mentioned by the dancers during the interview without additional prompting. One area which might have been useful to record was approximate annual salaries for each dancer as financial constraints were cited as a barrier to seeking psychological support within the research. Additional information in this area might have added further depth to the dancers' experiences in terms of barriers to seeking psychological support.

5.2 THE INTERVIEW PROCEDURE

Before commencing the interview, each participant signed consent forms stating that they were willing to take part in the research and for their interview to be taped (see appendices 11-12). All participants also completed the demographic

questionnaire (see appendix 7). The researcher encouraged the participants to ask questions or express any concerns they might have about participation prior to commencing the interview. Participants were informed that they were not obliged to answer any question which made them feel uncomfortable. All participants were happy to respond to all the questions within the schedule.

The interviews were recorded using a digital voice recorder. Each interview lasted between fifty to ninety minutes. All interviews were conducted away from the work place with the majority taking place in the participant's homes. It was hoped that this would provide an environment which was conducive to open exploration of the area under investigation. The researcher attempted to ensure that the interview was not interrupted and that external sources of noise did not intrude upon the interview.

5.3 PERSONAL REFLECTIONS UPON THE INTERVIEW PROCESS

Prior to the interviews, I considered how I might be viewed by the dancers who had agreed to participate in the study. I wondered whether I would be perceived as an ex-dancer or as a counselling psychologist in training/researcher. Would I be viewed as someone who had an understanding and insider knowledge of the world of dance or as an outsider? Would my curiosity in this area of research evoke interest or suspicion? Was there a possibility that I might be regarded in a similar way as some dance company management and perhaps treated with caution or distrust?

From the interviews, it was apparent that some ex-dancers were viewed as valued sources of emotional support. However, the sense of distrust in relation to company staff was also evident. Therefore, I was aware of the delicate path which I had to tread within the research process. I hoped that the decision to conduct the interviews away from the workplace might encourage more open disclosure and was struck by the dancers' willingness to share their experiences. In some cases, I elected not to make use of the parts of the transcripts because of fears relating to their anonymity. This suggested that certain dancers felt comfortable to share difficult experiences or perhaps use the

interview to express their sense of frustration regarding work related incidents. However, I acknowledge that as is the case in all qualitative research, my own experiences will inevitably have impacted upon the interview and research process as a whole (see Reflexivity section).

During the interviews, I found that my prior knowledge of the inside world of dance to be of use. It was clear that the participants did not feel the need to explain certain words or terminology specific to dance. Following the initial interview, I reflected upon how the data produced would be richer if I was able to follow the guidelines of Willig (2005) and 'express ignorance'. This presented a challenge, as the dancers were already aware of my dance experience. Prior to subsequent interviews, I informed the dancers that they might wonder why I was asking certain questions given my dance background. I explained that these questions were being asked in order that I was able to access their subjective experience rather than my own.

The dancers reported that they found the interview interesting and it had given them a chance to explore areas they would not normally reflect upon. None of the dancers stated that they were experiencing emotional distress after the interview but all responded positively to being given a list of support organisations following the debriefing. Seven of the dancers commented on how it was useful to have for the future and that they were not aware of the potential sources of support available to them. Many of the dancers were also keen for me to answer questions around the differences between counsellors, psychotherapists, psychologists and psychiatrists. I answered these questions but only following the completion of the interviews.

5.4 TRANSCRIPTION

The interviews and pilot interviews were transcribed by the researcher as this assisted and enriched in the process of reflecting upon the meaning of the participant's experience (Etherington, 2004). During transcription, the participant's names were altered and any reference to particular dance

companies removed in order to protect anonymity. To assist the process of analysis, each line of text was numbered so it could easily be identified.

Smith and Osborn (2003) consider that for IPA it is necessary for the entire interview to be transcribed with the level of transcription being kept at the 'semantic level'. Therefore, all spoken words, incomplete sentences, repetitions, false starts, pauses and laughter were included within the transcription. Willig (2005, p.25) highlights the impossibility of the interview transcript providing a 'mirror image' of the interview process. Whilst the researcher made every effort to transcribe the interviews as accurately as possible, it was necessary to revisit the audio recordings during the process of analysis in order to gain a greater understanding into what each participant was attempting to express.

6.0 ANALYSIS

Each of the interview transcripts was analysed following the guidelines set out for Interpretative Phenomenological Analysis by Smith, Jarman and Osborn (1999). A summary of this process will now be described:-

- Firstly, the transcribed interviews were listened to and an iterative process of reading and re-reading the transcripts was conducted in order to gain an initial insight into the areas addressed and the manner in which these were recounted.
- Following this process, a record of emerging thoughts, associations, contradictions and forms of paraphrasing were recorded in the left-hand margin. The participant's use of language was also reflected upon in order to attempt to enrich the exploration of the experience of the individual.
- At this point, the researcher then returned to these original notes and attempted to identify the essence of what was being relayed in the text. Then potential themes emerging from each section were identified and

recorded in the right-hand margin. These themes often shifted towards the use of more psychological terminology. Storey (2007, p.55) likened this process to making a shift 'beyond a journalistic summarising of the interview transcript' (see appendix 8: example of analysis).

- The researcher then reflected upon the themes identified in each section and considered any potential connections between them. The themes were arranged into super-ordinate themes and sub-ordinate themes. These were presented in a summary table which included the page and line numbers of the verbatim that supported each emerging super ordinate and sub-ordinate theme (see appendix 9: example of single case analysis).
- Upon completion of all case by case analysis, the researcher compiled a list of all super-ordinate themes. A decision was then made by the researcher regarding which themes would become the focus of the study. A number of factors were influential in this process. Firstly, the researcher considered the frequency with which the themes emerged across transcripts. The selection of themes was not purely based upon frequency as certain themes were selected because of the richness of text which supported them or the potential to provide insight into other aspects of the themes presented. The themes presented were discussed with my supervisor and a colleague in order to assess whether they were appropriate and represented within the data. During this process several sub-themes were collapsed into a single sub- theme and the master theme of the role of dance was included as a sub-theme within the first super-ordinate theme.
- A table of master themes (see appendix 15: themes from analysis) was then constructed prior to the presentation of findings within the results and discussion sections.

- In the final stage of analysis, each of the themes was then translated into a narrative account. Within IPA analysis, Reid, Flowers, and Larkin (2005), consider that it is vital for the analysis to be grounded in sufficient amounts of verbatim data. During this process, care was taken to ensure that the researcher made a distinction between what had been said by the participant and personal interpretations of the data (Smith & Osborn, 2003).

During the process of analysis a record of emerging thoughts were recorded in a reflective journal in order that this could be referred to at different stages of the analysis and during the process of reporting the findings.

7.0 ASSESSMENT OF VALIDITY AND RELIABILITY

The assessment of quantitative research typically involves the consideration of traditional criteria specifically reliability, validity and generalizability. In contrast, the evaluation of qualitative research has been the subject of considerable debate and, at present, there appears to be little consensus as to the most appropriate assessment criteria. In their discussion regarding the assessment of validity in IPA, Smith, Flowers and Larkin (2009) highlight the deepening sense of discontent within the world of qualitative research. The debate has triggered a questioning as to whether the criteria used to assess reliability/validity within quantitative research can be applied within the qualitative domain. The ongoing dialogue does not diminish the value placed upon the assessment within qualitative research but highlights the need for the use of evaluative criteria which are considered to be applicable in this area of research.

Elliot, Fischer and Rennie (1999, p.220) propose a range of criteria to evaluate qualitative research that includes:- 'owning one's perspective', 'situating the sample', 'grounding in examples', 'providing credibility checks', 'coherence', 'accomplishing general versus specific tasks' and 'resonating with readers'. In contrast, Reicher (2000) argues that given the diversity and differing epistemological positions of qualitative research methods, it may not be

appropriate to judge validity and reliability using a unitary set of criteria. He concludes that it may be important to tailor the assessment criteria specifically to the individual research methodology. Reicher's (2000) position is supported by Smith et al. (2009, p.179) who emphasizes the danger of assessment criteria becoming 'simplistic and prescriptive' thus risking the loss of the 'subtle' nuances within research in the qualitative domain.

Yardley (2000, 2008) puts forward an alternative range of criteria for the evaluation of qualitative research which includes 'sensitivity to context', 'commitment and rigour', 'transparency and coherence' and 'impact and importance'. Smith et al. (2009) propose that these criteria, in addition to those of Elliot et al. (1999), are sufficiently broad to be applicable to a range of qualitative research and have the potential to encompass a variety of theoretical orientations within this area of investigation. Therefore, within this research, the evaluative criteria proposed by Yardley (2000, 2008) have been utilised in order to assess validity and quality, a term suggested by Smith et al. (2009) to replace the quantitative criteria of reliability and validity.

When considering the issue of 'sensitivity to context', Smith et al. (2009, p. 180) propose a number of assessment criteria which can be reflected upon at differing stages of the research. These include an awareness of the existing literature in the area of research (planning stage), sensitivity to the social/cultural context of the sample (interview and planning stage) and the data collected from participants (analysis and write up). Smith et al. (2009) also propose that the very choice of IPA as a research methodology can at times be viewed as an 'indicator of sensitivity to context'. This premise is based upon the fact that the rationale for utilization of IPA is usually grounded in an awareness of the importance of context due to the idiographic engagement with the accounts of the participants.

IPA was chosen as a research methodology in order to attempt to access the lifeworld of professional dancers. The study aims to address an area which has received little attention within the current research literature. Therefore, whilst in the planning stage of the research, care was taken to consider the theoretical

context by reviewing the current literature and through discussion with other professionals in the field. A review of the current literature and rationale for the research is provided in order to demonstrate sensitivity to existing theory and research in the area.

The recruitment of a sample who shared the 'lived experience' under investigation is also an important criterion for consideration in terms of 'sensitivity to context'. The research included eight professional dancers who were employed with British dance companies. Whilst it is acknowledged that the differing experiences of personal therapy of two of the dancers may impact upon the validity of the study, it is contended that these experiences enrich the data and the understanding of the lifeworld of the dancers.

An additional aspect which should be considered in relation to 'sensitivity to context' is a reflection upon the interview process. Smith et al. (2009, p.180) highlight the importance of both empathy and managing the complexities of power where 'research expert' can 'meet experiential expert'. Following Heidegger, IPA asserts that the researcher's understanding of events is always mediated by previous knowledge (the 'fore-structures' of existence within the world) which is itself based on prior experience. When reflecting upon the relationship between interviewer and interviewee and its potential impact upon the research process. The dual nature of the relationship between the researcher's prior experience within the world of dance and role as researcher/counselling psychologist alerted the researcher to the need to scrutinize this aspect of the research process. This was monitored through a reflective journal and addressing the issue of reflexivity at various points in the research. It was hoped that the decision to interview the dancers in a setting removed from the work place may have assisted in providing the participants with an environment that was conducive to the open discussion of their experiences. The researcher also attempted to ground the interview in the 'core conditions' (Rogers, 1951) as a way of communicating empathy and facilitating expression of experiences.

A final area addressed in relation to sensitivity towards the participants' experiences was the attention placed upon engaging and interpreting the text of the participants. Care was taken to include a sufficient amount of verbatim from the transcripts within the presentation of the analysis in order to allow the reader to make an assessment of the interpretations being made (Smith, 1996a).

Smith et al. (2009) acknowledge that the criteria for assessing 'sensitivity to context' can be considered to be similar to that which is used to reflect upon 'commitment'. Therefore a piece of research is considered to demonstrate 'commitment' if it seen to fulfil the first criteria of 'sensitivity to context'. Rigour refers to the comprehensive nature of the research which includes the suitability of the sample and depth of engagement within the analytic process.

When reflecting upon the sample in terms of 'rigour', despite the differences in sample in terms of gender and dance style (see recruitment), a number of similarities emerged in relation to how the dancers made sense of their experiences. This highlights the strength of these accounts and also provides support for the validity of the analysis. However, it is acknowledged that whilst providing a rich insight into differing experiences of therapy, the prior experiences of therapy of certain participants may have impacted upon the findings reported.

Close attention was paid to the participant's experience during the interview and analytic stages of the research. Appendix 15 also provides evidence of the themes represented by each participant but ultimately an assessment of rigour in relation to the analysis must be assessed by the reader.

The third criterion of 'transparency' refers to the degree of clarity with which each stage of the research process is illustrated during the writing up of the study. Within the report, the researcher attempted to provide a detailed presentation of the recruitment process, the construction of the interview schedule, the interview process and the differing stages of analysis. A clear illustration of these areas is provided through the inclusion of appendices

showing the pilot interview schedule, the interview schedule, a sample of annotated analysis and individual/cross-case table of themes.

It is contended that the issue of 'coherence' must in part be assessed by the reader. During the writing up stage, the researcher reflected upon the presentation of findings and considered how these might be perceived by others in the field through discussion with her research supervisor and colleagues. It is hoped that the inclusion of 'disconfirming case analysis' (Yardley, 2008, p. 242) will provide the reader with evidence that the analysis has reflected upon all the data collected and not purely upon that which is in keeping with the viewpoint of the researcher. In addition, Yardley (2008) proposes that 'coherence' can be assessed by the degree of fit between the research and the underlying theoretical assumption of the research methodology. As proposed by Smith et al. (2009, p.182), it is argued that the research findings provide evidence of both 'phenomenological and hermeneutic sensibility'.

Finally, the 'impact and importance' of the findings were addressed by considering 'The Professional Practice Guidelines of the Division of Counselling Psychology' (2005). These highlight the need to consider the 'context' in which practitioners work and the importance of addressing how this may impact upon the client's experience. Although IPA does not set out to generate findings that can be generalized, this research aspires to provide practitioners with an insight into the lives of a population who may have specific psychological support needs. The findings interpret the 'lived experience' of professional dancers and provide an exploration of potential barriers and facilitators to seeking psychological support. This is a new area within the world of counselling psychology research and the use of IPA is in keeping with the investigation of novel topics (Smith & Osborn, 2008). A variety of recommendations are generated from the data to inform the practice of counselling psychologists and others within the profession.

Independent Audit

Smith et al. (2009) propose that the use of an independent audit as an additional adjunct when assessing the validity of qualitative research. During the research process, an audit trail was collated. This included: notes following interviews with professionals in the field, the research proposal, the interview schedule/reflections upon construction, recordings of interviews, interview transcripts with annotation, individual/cross-case tables of themes, records of discussions with research supervisor and the final report. These provided a coherent step-by-step record of the entire research process which can be checked by an independent party if required.

Finally, a decision was made not to utilize participant validation for practical and methodological reasons. On a practical basis, the additional stage of returning to the participants had the potential to be time consuming and difficult. When reflecting upon methodological issues, participant validation would have introduced the additional factor of a triple hermeneutic, where the participant would be engage in making sense of the researchers interpretations based upon their initial sense making experiences generated by from interviews. However, participants who expressed an interest were provided with a summary of the research findings and invited to contact the researcher or request a copy of the entire research study.

Cross-validation was conducted by the research supervisor of the project and an independent colleague. This provided an opportunity for sections of the analysis to be checked to ensure these were consistent with the data. This was considered to be particularly important given the prior experiences of the researcher within the world of dance.

8.0 REFLEXIVITY

McLeod (2000) terms the infinite range of contesting reflexive possibilities within the process of qualitative research as 'self-tormenting'. These dilemmas are encapsulated by Banister, Burman, Parker, Taylor and Tindall (1994, p.13).

They consider 'we arrive at the closest we can get to an objective account of the phenomenon in question through an exploration of the ways in which the subjectivity of the researcher has structured the way it is defined in the first place'.

Willig (2001) echoes the importance of exploration of reflexivity within qualitative research and distinguishes between two forms of reflexivity: 'personal reflexivity' and 'epistemological reflexivity'. Epistemological reflexivity promotes personal reflection upon assumptions made 'about the world' and 'knowledge' during the research process (Willig, 2001, p.10). This encourages the researcher to interrogate the ways in which the design of the study, research question and methods employed has impacted upon the research process and findings.

From relativist ontology, IPA privileges the exploration of subjective experience of the participant's world over the objective nature of this world (Willig, 2001). In doing so, I acknowledge the impossibility of complete access into the phenomenological world of the participant. Any representation is considered to be one representation of the world, which is grounded in the assumption of the impossibility of gaining access to objective truth. IPA is data driven and in contrast to other approaches does not set out to test prior hypothesis. During the methodology, analysis and discussion sections, I have endeavoured to illustrate the role played by design, methodology, and the research question in the formation of data and findings. I have also considered the issue of methodological reflexivity through the exploration of my rationale for the utilization of IPA and reflection upon the use of other qualitative research methods. This has enabled exploration around the ways in which other methodologies would have introduced different insights into the area of research.

The intersubjective nature of IPA presents a host of challenges which must be embraced and acknowledged as a vital part of the research process. In contrast to the philosophy of quantitative research, personal reflexivity must be addressed. Flick (1998, p.6) considers that the researcher's 'reflections on their actions and observations in the field, their impressions, irritations, feelings and

so on, become data in their own right, forming part of the interpretation'. Within the methodology and analysis, I have reflected upon the how various aspects of reflexivity interact and impose upon the interactions between the lifeworld of the researcher and participants. In doing so, I have described the negotiation of the path as researcher and considered how my interactions with participants inevitably impacted upon the collection and analysis of the data.

Smith et al. (2009) highlight how the researcher must conduct an in depth personal reflection in order to address how previous experiences or knowledge may impact upon that of the perceived degree of identity with the participants experiences. They propose that there is no such thing as the 'too much' or 'too little' knowledge of the world of the participant; instead the focus should be placed upon reflection of the potential impact of 'the fore-structure' of knowledge upon the research process.

8.1 PERSONAL REFLEXIVE STATEMENT

In addition to personal reflections upon the interview process, it is important to consider and make explicit the prior personal experiences, theoretical knowledge and assumptions, which I may bring to the research. I am addressing the research as a counselling psychologist in training and researcher but also bring my own personal experiences from a short career as a professional ballet dancer. A period of eleven years has passed since my career ended, with this comes an awareness that the world of professional dance has moved on considerably. I still continue to teach on a freelance basis but work with adults and children who are not professional dancers.

I first became interested in exploring this area of research following discussions with psychologists working in the field. The differing perceptions of dancers' openness to seeking psychological support led me to reflect upon whether dancers were getting what they needed in terms of psychological support and how they perceived services that were available to them. My current employment and experiences as a counselling psychologist in training have not

brought me into contact with professional dancers in a therapeutic capacity. As researcher, I hoped that my prior dance experience might provide me with an opportunity to enter a world and culture which may be difficult to access. I was also aware of what might be brought to research in terms of prior experiences and assumptions. I acknowledge that my prior experiences may have led me to interpret certain meanings of the participants' experiences in a different way than they had been intended (Minichiello, Aroni, Timewell & Alexander (1995).

During my dance career, I was not aware of any psychological support services available to dancers and this was not something which I considered. Therefore, I am uncertain as to how I might have perceived these during my career. I am also aware that my training as a counselling psychologist will have inevitably resulted in a change in how I might perceive the provision of support services within the world of dance. Despite sharing certain common experiences, my perspective will inevitably differ from those of the dancers as the memories of my experiences fade, the dance world evolves, and my experiences are impregnated by my studies and practice in counselling psychology.

Participant/Researcher Relationship

The very nature of IPA embraces the Heideggerian view of the 'person-in context'. There is no expectation that the researcher will present a blank stance, free from their influences and experiences within the world. Instead, IPA focuses upon maintaining a degree of openness to the experiences of the participants by attempting to 'bracket off' prior assumptions relating to the phenomenon under investigation during research design, data collection and analysis. The researcher is faced with the challenge of maintaining a delicate balance between the 'emic' (phenomenological, insider) and 'etic' (interpretative, outsider) (Reid, Flowers, & Larkin, 2005). Although it is important for the researcher to immerse themselves in the world of the participant (the emic), it is also essential for sufficient distance to be maintained in order to allow space for 'etic' concepts to emerge during the process of analysis. Consequently, an

inevitable tension emerges in providing the opportunity for the experiences of the participant to be heard alongside the interpretations of the researcher.

The issue of speaking positions has been addressed by numerous researchers' within the qualitative domain. A thorough reflection of the professed similarities and differences between the researcher and participants is vital due to the potential impact upon the research process. Coyle (1996) highlights how the representation of those considered similar to the researcher risks being met with claims that 'objectivity is supposedly contaminated by the researcher's own 'agenda' and 'issues'. He argues that the apprehension around avoiding potential 'bias' can take priority over the potential richness which may be brought to an area of research as a result of 'insider' knowledge.

When addressing the area of 'sameness', due care and attention must be paid to other unshared characteristics/experiences which may result in shift from 'sameness' to 'Other'. Stanley and Wise (1993) propose that lack of consideration around this issue can lead to researchers expressing 'fictitious sympathy' on behalf of their participants. In addition, Carabine (1996) highlights how the distinction between 'sameness' and 'other' can be blurred by inconsistencies, with individuals experiencing being 'same' in certain situations and 'Other' in different contexts.

Upon reflection, I would consider my position as researcher to be similar to that described by Oguntokun (1998), in her research into black African women. What commenced as an illusion of 'sameness' shifted to a repositioning of 'being alongside the dancers'. As researcher, I brought what Hurd and McIntyre (1996, p.78) describe as 'both complementary and contradictory' experiences. Due to prior experiences, my shift from 'insider' may also permit my positioning to be described as an 'experienced or privileged Other' (Woollett, 1996, p.71).

Ely (1991, p.125) highlights how, when working within a world in which the researcher has a degree of insight, it is crucial to frequently reflect upon the question 'am I talking about them or am I talking about me?' These were issues which I considered throughout the process of analysis and reflected upon with

my supervisor. One such issue was addressed during the analysis of data relating to career transition in order to ensure that my interpretations were grounded in the experiences of the participants as opposed to my own.

Parker (2005) considers the use of a reflective journal to be a valuable tool in creating distance between the researcher and the context of the research. This was introduced as a way of recording the changing and developing process of the research. It was used to note any reflections following each interview, analysis, research supervision and at other points in the process where it was considered important to consider themes emerging from the data.

I was also encouraged by my supervisor to record my prior assumptions and any expected findings before commencing and during the research process. This was of great value when reflecting upon what I believed I knew/didn't know and how prior assumptions were challenged and altered as a result of the research process. During the research process, it was striking how my prior perceptions relating to the provision of psychological support evolved as a result of my interactions with the dancers. I was surprised by the level of fear and distrust within the world of dance. Upon commencing the research, I held the belief that the provision of psychological support services should be available within the workplace. However, my thinking was altered by the research experience and my perceptions shifted to a sense that psychological support services would be most useful to dancers if they were removed from the work environment.

9.0 ETHICAL PROCEDURES

To ensure ethical practice throughout the research, the British Psychological Society (BPS) Ethical Principles and Guidelines (2005, p.8) were followed. Particular attention was paid to the section focusing upon the 'ethical principles for conducting research with human participants'. Prior to commencing the research, ethical approval was obtained from City University. A number of measures were taken to provide participants with the opportunity to give

informed consent before participating in the research. Every effort was made to inform the participants about the purpose of the research and how this would be conducted. Participants were also given information about the measures in place to protect anonymity. The names of all participants were changed and during transcription any references to the individual's work place were removed or altered. Participants were also informed about data storage and access. All participants were given the right to withdraw from the study at any time. Copies of the information sheets and consent forms given to the dancers can be found in appendices 10-12.

During the piloting stages of the interview schedule, the researcher discussed the questions included with the research supervisor and the ex-dancers who participated in the pilot interviews. It was agreed that the questions included within the interview schedule were unlikely to cause offence. The setting of the interviews was also given consideration. All interviews were conducted in a place that would ensure the confidentiality of each participant, with most interviews being conducted in the homes of the participants. The researcher took measures to ensure personal safety by making a colleague aware of the times when interviews were being carried out and telephoning upon return.

Following completion of the interview, each participant was debriefed and reminded of their right to withdraw or make alterations to any parts of the interview (see appendix 13: debriefing information). None of the dancers chose to withdraw or make any modifications to their interviews. Dancers were also provided with a list of organizations providing support. The contact details of the research supervisor were also included, in the event that the participants had any concerns about the manner in which the research had been conducted (see appendix 14: list of support organizations). All dancers expressed an interest in being provided with a summary of the research findings and it was agreed that this would be sent to them via email upon completion of the research.

During the transcription and analysis phase of the research, the interview recordings were kept in a locked cabinet separate from the transcripts. The recordings will be destroyed following completion and assessment of the

research. The transcribed interviews were stored in a password protected file on the researcher's computer. Care was taken in the selection of verbatim from the transcripts used within the results and discussion section. In certain cases, the researcher had concerns that specific sections of verbatim had the potential to compromise the anonymity of the participants. This was discussed with the research supervisor and a decision was made to exclude specific parts of verbatim.

CHAPTER 3: ANALYSIS OF DATA

1.0 INTRODUCTION

The following chapters explore the four super-ordinate themes and related sub-themes emerging from the data (see appendix 15: list of themes). Evidence to support each sub-theme will be provided through the inclusion of verbatim from the interviews. Each quote is referenced in relation to the original interview by the inclusion of page and line numbers. Further evidence to support each of the emerging themes within other interviews is provided in appendix 15. The use of empty brackets, within a quote, indicates that part of the quote has been excluded. All names and other identifying details have been altered in order to protect the dancers' anonymity. In addition, the interview transcripts have not been included within the portfolio.

Whilst each of the super-ordinate themes is evident in all of the interviews there are differences in terms of what is represented within the sub-themes. Some sub-themes appear in all interviews whilst others are only representative of certain interviews. In order for the dancers' experiences to be heard, and explored, the researcher made the decision to present the analysis of themes before concluding with a discussion of findings in relation to the research literature.

THEME 1: INSIDE THE WORLD OF DANCE

This theme provides an exploration of the dancers' experiences of living and working in the world of dance. It offers an invitation to embark upon a journey and enter into their internal world. In doing so, it is hoped that the reader will be able to move beyond the perspective of the audience and gain a glimpse, behind the scenes, into what potentially lies behind the glamour of the spotlight. The following section provides an exploration of each of the four sub- themes.

1.1 SUB-THEME 1: ROLE OF DANCE WITHIN CAREER

The first sub-theme explores the role of dance within the lives and careers of the dancers. In doing so, it addresses the dancers' internal drives and motivations for pursuing a career within this profession. Dance appears to play a multiplicity of roles within the dancers' world. One aspect, which seemed important, was the lifestyle.

Andrew 1(30) I like the lifestyle of it really.

The dancers also expressed the joys of performing. Their descriptions evoke a sense of something treasured which, once experienced, remained etched on the mind forever.

Justin 1(23-24) It was just that whole magic of being on stage and everything that... you kind of can't forget about after you've experienced it.

In an exploration of the pleasurable aspects of performing, the dancers' provided an insight into the sense of gratification which comes from being the centre of attention and gaining validation from an audience.

Leanne 2(20-21) You're all sort of after the same thing at the end of the day which is...a little bit of...not stardom...but you know you do like that spotlight thing.

Alex 2(12-13) I love the attention and...you know...it's not every work you do that at the end of the day you get applause.

For Emily, performing seemed to provide something more, a sense of personal comfort and security:

2(5-6) I just really enjoyed performing and I felt really comfortable...very safe when I was on stage...and I think that sort of um...comfort zone.

Although Alex mentioned the pleasures, and challenges, of the physical aspects of a dance career, several dancers moved beyond this to describe dance as a vehicle for emotional expression with dance being viewed as a primary means of self-expression.

Andrew 1(26-27) I mean...dancing...straight away is like...the way I express myself(...) I just like...that's how I feel I can express myself...like emotions and stuff.

Caroline 4(23-24) *I decided to be a dancer because...because...because for me it's a wonderful way of expressing myself...using the body as a way of expression is extremely...is necessary...for me.*

Some of the dancers found the use language to be an impediment to self-expression. Both Natalie and Emily seemed to have found a way of transcending language by expressing emotions through movement and the body.

Natalie 2(3-4) *I remember feeling quite inhibited about expressing myself vocally or...you know...trying to articulate thoughts and ideas through...kind of language and voice felt very...intimidating but I found it very easy through my body...2(14) I think that moving my body I found I could kind of transcend language.*

Emily 2(32-33) *I don't think I would have been a singer or an actress or something like that because I think...I need to express myself physically rather than verbally.*

Many of the dancers described starting dance because friends or family members attended classes, some made reference to being introduced to dance at a difficult stage in their childhood. Caroline, an adopted child, was sent to dancing because she would not speak. Emily also mentioned that starting dance classes coincided with her being taken out of school as a result of severe bullying. Both Caroline and Emily explored how dance played a vital, and potentially healing, role in terms of finding a means of expression, a purpose and focus during difficult times.

Caroline 4(25-27) *I think I really had to unlock many...many things I think on a...on a personal level and dance definitely helped me with this process...and it really...really helped me I think to go through a...for me a hard, a really hard childhood. 4(29) And it gave me a focus, a focus and also a reason to live I would say.*

Emily 2(17-19) *Taking me to ballet classes meant that there was something that I felt could do...and I felt very comfortable doing it...um...you know...I mean it's just the combination...of expressing yourself physically and with music.*

Emily provided additional insight into her lifeworld by drawing parallels between her experiences of attending dance classes and therapy:

3(10) *It's almost like its own version of therapy.*

The dancers also described the value of using dance to help focus and calm the mind. It would seem that dance has a meditative quality and provided a way in which to redirect the focus from external problems onto the physical and artistic components of the career.

Emily 11(29-30) *It's that sort of...you know comfort blanket ...the one thing that actually focuses your mind and gets you through the days...coming into work and doing your job.*

For Leanne, dance could be considered to serve as a stress release mechanism:

8(23-25) *It just quiets your mind because it puts the focus onto physical and artistic things rather than...you know...problems that...you might be going through...in...you know outdoor life or whatever...I just find it's sort of quiets...calms me down.*

Additional exploration of Leanne's experience showed a personal awareness of the conflict which arose between the internal role played by dance in her life and other external aspects of the career. She seemed to be caught in a double bind with dance being experienced as both a source of stress and 'de-stress'.

9(8-9) *It's funny though because if it's work that's stressing me out it's...it's normally work that de-stresses me.*

Despite this conflict, Leanne also considered there to be a potential spiritual element to dance, something difficult to verbalize. Her description suggested that there were moments where she moved into the realms of experiencing an altered state of consciousness.

9(5-6) *I'd say there's just a massive spiritual element to it in some way...I'm not quite sure what way.* 9(9-10) *It's that thing that sort of takes over...it feels like you're in the right place...doing the right thing.*

The second sub-theme seems to illustrate a stark contrast to the themes explored within the first. This highlighted a degree of conflict between the role of dance for the dancer (sub-theme 1) and the dancers' perceptions relating to how they are viewed within the dance company (sub-theme 2).

1.2 SUB-THEME 2: BEING SEEN AS A BODY

In their exploration of life within the dance company, the dancers made reference to feeling like they were viewed as physical bodies instead of emotional beings. Within these descriptions there appear to be several layers to the essence of their experiences. Caroline likened her experience to being somewhat like a 'robot'. The manner in which she explored this aspect seemed to indicate, that when experienced, there was a sense of switching onto 'auto pilot' and becoming something flawless and nonhuman. This appeared to originate from external sources but then gradually became internalized, by being treated like a 'robot' she began to feel like one:

8(1-2) It's like being treated as a robot...er...who has to be able to execute movement as perfect as it can. 8(8-10) Sometimes I feel like being a robot (...) you really do things automatically.

Both Leanne and Alex described experiencing their role within the company in a different, but equally nonhuman, manner. For Leanne, there was an element of being 'lumped' together by the management and seen as a unit, as opposed to an individual:

4(2-3) Because they do that...they...they put you in...one group...you know...this is how it's done...this is how you're going to work...they don't get to know you as people.

Alex's description also seemed to illustrate something impersonal about the way in which he perceived his treatment within the company. He introduced the concept of being seen as a number but added an extra dimension by describing what happens when the dancer/number is not fit to work. In his exploration of the experience of injury, there was an element of being out of sight, out of mind.

4(18-20) You know especially in aa professional company where at the end of the day they need the numbers in order to function...and if you are not...you know fit enough to be to become a number...then ...you are basically forgotten...you have to go away and do what you need to do in order to be fit again and to be recognized.

Emily described her experience in a different manner. She tended to view herself as a highly expendable physical body, devoid of thoughts or

emotions. Her perceptions evoke the sense of a lengthy and ingrained cultural history behind this approach to the treatment of dancers.

5(2-4) I also refer to things like that as the 'old boy' system but I think there's (...) ballet is...and its general attitude to...dancers is ...they don't think dancers have minds or feelings or...they are just bodies and...you know...if you can't do it somebody else will.

Emily also explored the potential long-term impact of being seen as a body. It seemed that dancers tended to internalize the underlying message of being a body. By being treated like a body, the dancer appeared to begin to believe, and act, in this manner. Her description suggested that dancers' perceptions play a role in maintaining the illusion of a separation between mind and body. The intense focus on the physical could act as a barrier to the promotion of emotional well-being.

5(11-14) I think if dancers actually thought about themselves like that they might be more willing...to step forward and say...you know...I am going to go and speak to somebody and...um...keep that part of my body healthy...because they don't seem to think of the two as being...you know a whole.

There appeared to be a stark contrast between the way the dancers described being viewed within the company and the performance aspect of their career. As a performer, the very essence of their role upon stage seemed to be about conveying emotions, and yet, there was little space for emotions to be displayed within the work environment. Emily's description suggested that perhaps the stage was the only place where dancers had permission to release these emotions but, in a sense, there was no dress rehearsal for this experience.

Emily 5(24-28) You're supposed to get up on stage and show lots of different emotions but if you're coming to work and you're not allowed to do it (...) you're not practicing...the one thing that you're supposed to be doing later on...you can't express your emotions... and you're hanging on to those all the time and you're having to go on the stage ... it just looks ... you're not going to be able to perform.

Once again, a conflict seems to exist between the dancers' motivation to dance and the organization's perception of the dancer. This tension appears to be

temporarily removed when the dancers step on stage and are free to express themselves physically and emotionally.

1.3 SUB-THEME 3: EXTERNAL LOCUS OF CONTROL

The third sub-theme explores the dancers' perception of the external locus of control within their world. This section addresses the impact of working in an environment where the opinion, and direction, of others is vital to career progression. The challenges which this evoked were present on a number of levels. Alex continued to grapple with the idea of accepting that his career was in the hands of someone else.

9(17-20) Even though...I have done the best of my ability...in someone else's eyes...I haven't achieved yet...therefore... I am not in the place where I wanted to be and I don't even know if I will ever get there (...) I had to ...almost...not accept...well I suppose accept the fact that your career is in the hands of someone else and in someone else's eyes.

For Alex, the struggle to accept the external locus of control within his career evoked feelings of frustration and powerlessness:

9(22-23) It's blatantly clear that what you want to achieve and what you want to get...and what...and how things are...it's decided by someone else...and you have no power whatsoever.

Some dancers found their own ways of dealing with this sense of powerlessness which seemed to provide a greater sense of internal locus of control within their career. Having coping strategies, and impression management, were a vital part of this process.

Justin 6(3-5) You can't really control.... what staff are going to do ...or how a company is going to treat you...but you can control how you come over to them or how you deal with...with what they throw up on you....which can I think maybe change the outcome in the end...slowly.

1.3.1 Being seen but not heard

Dancers who felt powerless also believed voicing their opinions could have a negative impact on their career. Once again, an underlying theme of being seen

as a body re-emerges. Andrew described his frustration around working in a world where he must remain silent or risk losing his job.

9(14-15) *I think it's a frustration thing of knowing that you can't say anything because if you want the job...you'll take it...it's better than being unemployed.*

Caroline relayed the negative impact of an experience at school where dancers were given the opportunity to voice their opinions:

5(21-22) *I remember some of the dancers actually (...) had the possibility to speak up...you know...they were not seen with good eyes...I would say.*

The potential negative consequences of voicing an opinion engendered a state of incongruence within the dancer.

Caroline 6(32-33) *You have to be diplomatic...so you have to lose...and to put on the side part of yourself...so this is quite...quite hard.*

1.3.2 Institutionalization

A common perception described by the dancers was a view that they were considered to be stupid and treated like children by those in authority.

Caroline 21(-2) *We often had the feeling to be treated as kids...and this is really, really hard...I think...when you're twenty-seven.*

Amy 15(9-10) *I think people generally do believe that dancers are thick and certainly on the management level that's what they think...and they kind of just think...they treat you like children.*

The dancers' experiences of day to day working life highlighted the institutionalized nature of their career. The impact of early training and constant direction from external sources led to feelings of uncertainty around personal desires and a sense of reliance upon guidance from others. It appeared that by being treated like children the dancers began to feel like children.

Caroline 11(22-25) *With the company when we tour...you're given rooms...you go to see the theatre...this is your bus...this is the train (...) we don't think what we actually like or what we want (...) so I think it's also again...we are also trained to...we always try somehow to...to hold someone in hand and kind of being told what to do or what to take or.*

This sub-theme provides an insight into the dancers' experience of being trained and working in an environment where an external locus of control seems to be a

key element of their career. The final section addresses the competitive aspect of the career and a potential evolutionary theme within the dancers' world.

1.4 SUB-THEME 4: SURVIVAL OF THE FITTEST

The final sub-theme explores the dancers' experience of living and working in a world where competition is fierce. Emily described the need to consistently perform, at a high level, on a daily basis. An inability to adhere to these standards resulted in the dancer being dismissed like the 'runt' of the litter.

Emily 7(6-7) You come in and you do exactly what you did the day before...and the day before that... and...um...if you don't...you know...you're kind of the weak one in the pack.

The dancers' described the intense focus required in order to survive and the need to remain strong. They implied that someone was always waiting in the wings, and any sign of vulnerability or impairment in performance, would lead to one dancer being removed and replaced by another.

Leanne 16(19-21) Everyone's so wrapped up in their own sort of...dance thing (...) when someone falls by the wayside it's generally a...oh, she's weak...she's fragile...left alone...pushed out sort of thing...somebody comes in immediately to take your place.

Emily 5(19-21) If you're in rehearsal....and...you know...you can see when people are becoming mentally fatigued and they just you know ... they're not picking up...and then of course you know it's like a pack of hyenas.

There was also a pressure to create the illusion of psychological strength when amongst other company members. The dancers' perceived that they could easily be judged and typecast. This resulted in the need to 'perform' both on and off stage to increase the chance of success.

Leanne 16(31)-17(1) If you're seen as weak there will be someone seeing you're weak (...) and thinking...she's not...she won't be able to do that and I can do that...you know...it's a constant...um fight.

The dancers' descriptions suggested that the 'staff' also played a role in fuelling rivalry within the company. There was an element of being tested where only those who could withstand the pressure were selected whilst those who crumbled were cast aside.

Amy 9(31-32)-10(2-3) They'll put say you like against another girl and kind of make you...I can't think how to explain this it's stupid...um...like compete with each other...like they'll play you off against each other (...) often it starts to feel like it's going to be the first one to crack will be out of the race. 10(13-15) if you can't take it and you crack up you'll just be seen as someone...you know you're not tough enough to really do that kind of thing so...you've been tested thank you...you can go back to where you came from.

Living and working within the competitive world of dance appeared to have an impact upon the lives and behaviour of the dancers. In addition to giving the impression of psychological strength it was also necessary to maintain an image of physical strength. This created problems when injury struck as the need to maintain an image of physical strength often became a greater priority than the dancer's own physical welfare. Emily described how dancers who were physically damaged were discarded and replaced with those who were better equipped to perform.

4(18-21) People won't admit to having injuries (...) because of how it might affect their casting (...) if they're physically weak or they...they sustain an injury (...) there is this big fear that (...) they will just be pushed away aside and...you know...let's get the next fit and healthy...mentally stable person in...to come and take your place.

Emily explored the potential impact on the dancer's position in the company, if they were known to have received counselling. There was evidence of evolutionary themes in her description around the 'hierarchy' within the company. It seemed the dancers had to adapt their behaviour in order to survive in an environment where the balance of power was constantly evolving.

7(14-16)-7(18)-7(20-21) If you want to seek counselling...you don't necessarily let other people know because the first thing they'll think of is 'they're weak'...you know...they'll be the next one down' which means that...you know... there being a hierarchy (...) how does the balance of power then shift? (...) If that person is not in the equation...

Emily appeared shocked by her own experiences and there was a need to normalize and make sense of them by generalizing to other life situations.

7(25-26) It's business...it's business...whether you are in the...you know...in the political arena or dance or in business...you know...people are...7(28) They're happy to use other people as stepping stones and...you know...if you're not there it means a space is available.

It would seem that the world dancers inhabit is one where only the strongest and fittest survive. Those who fail to withstand the pressure fall by the wayside resulting in other dancers profiting from the misfortune of those who have gone before.

THEME 2: EMOTIONAL CHALLENGES OF THE CAREER

The second theme addresses potential interpersonal, occupational and psychological difficulties encountered by the dancers within their career. Within this exploration, the dancers also highlight potential areas, and stages, in their career where psychological support might be required.

2.1 SUB-THEME 1: RELATIONSHIPS

2.1.1 Impact of work demands upon relationships

The dancers explored the difficulties of working in a world where life, and career, were inextricably linked. It was common for dancers to describe working six days a week, for an average of forty-six weeks per year. The ballet and contemporary dancers' working day tended to last approximately eight hours whilst rehearsing and up to ten hours when performing. These dancers often spent several months of the year touring abroad and within the UK. The intensity of the workload is captured by Justin's description of his experience of the Christmas performing season:

6(22-24) When we get to like January we've done like one hundred and ten shows or something in like ...twelve weeks and...and you're just literally can't...can't... you don't want to do anymore

Andrew, the musical theatre dancer, experienced a less intense workload and made reference to performing in the evening but having:

2(5) Whole days to yourself most of the time.

For the ballet and contemporary dancers, the gruelling schedule of daytime rehearsals and evening/weekend performances resulted in limited time away

from the world of dance. This hampered their capacity to form and maintain relationships with those outside the profession. Caroline highlights the problematic nature of marrying the occupational demands of her career with the ability to socialize and maintain relationships with those outside the dance company environment:

*21(24-28) Maybe also...dancers have difficulties to have a life outside work...you know to socialize and to meet other people....I mean...with....again **** is quite a specific company for that...because we tour for half of the year... I think it's really hard for most of us to have...you know...to have a private life...some of them do...because they had their partner for ten years or...or they have their partner who is a technician...but it's quite hard to keep a relationship.*

Alex's experience gives a sense of the enmeshed nature of work and social life, which is particularly apparent whilst performing or touring:

15(13-16) Everywhere you go...the only people you know are the people you work with...and usually when you go on tour...is the time where you're actually performing...so you start at eleven in the morning...you finish at eleven in the evening...and if you ever have any sort of energy to spare.... the people you socialise with are the people you work with.

It was interesting to note that little reference was made to romantic relationships during the interviews. Of the participants interviewed, only Justin and Natalie were currently in a relationship. This could support the notion that the all consuming nature of the profession may be a factor which can impede the formation of romantic relationships. Additional interpretations which relate to the design of the interview schedule are also discussed within the methodology section.

2.1.2 Sexuality

Although the area of relationships was not addressed in depth during the interviews, the issue of comfort around sexuality was explored. It was interesting to note that no heterosexual males volunteered to participate in the research, and sexuality was only discussed by certain male dancers. Andrew and Justin made reference to their experiences in relation to sexual orientation within the world of dance. As gay men, there was a sense that the dance world provided a

milieu in which they felt comfortable to express their sexuality. Justin describes how ballet school provided a facilitative environment in which to 'come out'.

*Justin 2(5-7) It was also a lot easier to come out, because I was at *****, and I was in an easy atmosphere for that and...it may not have been but it could have been a lot more trouble or a problem... if I'd been at a normal school.*

For Andrew, concerns relating to his sexuality tended to be a greater issue whilst in training. This appeared to dissipate following the transition to professional dancer where he found himself in a world populated by numerous gay men. There seemed to be a degree of comfort derived from working with other dancers of the same sexual orientation.

20(8-9) Sexuality(...) that mainly happens at college I think...and then it's not really such a big deal for guys...in the business...because obviously there's so many gay guys.

In addition, the world of dance appeared to be an environment where homophobia was actively frowned upon. From the perspective of the gay male interviewees, there was a sense that straight male dancers openly accepted differences in sexual orientation.

Andrew 20(11-12)-20(14-15) I don't think any straight guys ever have an issue with gay guys in the company...I never really have personally come across anyone particularly homophobic(...)maybe I've just been lucky...but...I don't think there's any room for those kind of people in the business...definitely not in this business.

Whilst the interview data provides a flavour of the world of dance from the perspective of certain homosexual males, the absence of heterosexual males within the sample prevents a more in depth exploration of this area.

2.1.3 Personal boundaries within the working environment

Living and working in a close knit environment resulted in difficulties in maintaining boundaries between work and personal life. Personal issues seeped into the work environment and, consequently, work and other aspects of life, merged.

Emily 9(13-15) *I think it's quite rare for dancers to have very separate personal life...whatever is going on in your personal life...people generally know somehow or another.*

The dancers inhabited a world where gossip and rumours were easily cultivated. This indirect source of communication resulted in a sense of confusion around the differences between fact and fiction, where dancers seemed to be known and yet unknown.

Emily 6(34) *There's the instant internal...um...grapevine that goes round.*

Justin 9(2-4) *Everyone knows everyone's business...and everyone knows what everyone has done...everyone knows what everyone hasn't done (...) everyone knows all the rumours which aren't true...and the ones which are true... but no one really knows which is which anymore.*

A re-occurring challenge was the need for vigilance around trust and disclosure within the company. There was an instinctive desire to develop trusting relationships but this was inhibited by a protective mechanism which resulted in dancers erring on the side of caution.

Emily 11(22-24) *I think...people...they want to trust each other as emotional beings... particularly...you know... with such a high level of...emotion kind of seeping out but...erm... they don't quite want to put all their cards on the table.*

Justin described having discovered the consequences of disclosing too much to work colleagues. He had learnt, the hard way, about the importance of boundaries when talking to other dancers.

8(29-32) *I find it very easy to just talk and talk and talk and talk...and then (...) the next day or the next week you realize actually that they've probably gone and told everyone else (...) it gets around really quickly....and that's something that you've got to be so careful of...and I'm never, ever careful enough.*

The challenge of maintaining boundaries between work and personal life were augmented when extended periods of time are spent together whilst touring. The dancers' descriptions give a sense of the tension and discord which can be evoked during these times.

Caroline 15(17-18) *It's a test...living in a group...especially in a small group and touring with a small group.*

Alex 15(18-20) *So it can become quite... family orientated...where you know people so well and you know how to push their buttons and they know how to*

push your buttons as well...so there is a level of friction and confrontation and (...) intimacy that can lead to problems.

The emotional challenges of touring emerged as an area of interest and relevance to psychological practitioners working with dancers. This is supported by Alex, who reflects upon the potential value of psychological support to assist dancers in coping with the challenges of touring.

15(21-23) Again it's another part of psychology that isn't necessarily (...) in there...that could help people to ...facilitate their well-being while they are on tour.

2.2 SUB-THEME 2: STAGES OF TRANSITION

The dancers highlighted a number of different periods and stages of transition in their career which were considered to be emotionally challenging.

2.2.1 Commencing a professional career

The first stage of transition was making the leap from training to working as a professional within a company.

Justin 6(10) I think the transition between going into a school and a company is a big time.

Caroline explored how her training left her feeling ill equipped to cope with the world outside school. Her experience gives a sense of the huge jump which had to be made from the nurturing and institutionalized training environment into the professional world where self-care appeared to be a novel and vital component within the professional world.

12(8-11) There's a world between being in a dance school and being in a company (...) emotionally sometimes I don't think we are prepared enough to take care of ourselves...because in a dance school you're kind of conditioned (...) especially if you're in a boarding school.

The transition from school to company involved entering uncharted territory in which the dancers seemed to experience something akin to culture shock.

Alex 8(11-12)-(14) *When you join a professional company...everything is new (...) everything is almost...scary because you know get into a... strange territory.*

The dancers faced a number of emotional and practical challenges when making this transition. Although there was a sense of greater freedom, with this came the need for personal responsibility, and focus, at a time when the change of lifestyle had the potential to lead them astray.

Alex 8(17-26) *When you become a professional dancer...you're by yourself...basically...and when you're eighteen and you get your first ... your first pay cheque and you're amongst adults...it's a certain ...certain kind of sense of freedom that could lead to...go in a different direction.*

Making the transition from training to the professional world brought with it additional challenges in terms of fluctuating levels of confidence. Moving from being a 'big fish in a small pond' to becoming a 'small fish in a very large pond' brought with it an inevitable reduction in levels of self-esteem.

Andrew 6(17-19)-6(21) *When I left college my confidence was quite high because it was built up here (...) then to go into a career where it knocked my confidence back down again to below where I was before I even started (...) that was quite hard at first...picking myself back up.*

Caroline grappled with the transition from student to professional performing artist. She highlighted another area of interest to psychological practitioners, the potential value of psychological support during transition from training, in order to foster a greater sense of identity as a person and performer.

12(27-32) *I realised that when I started my career that I wasn't able to understand what the artistic director wanted (...) because I had a great technique but I didn't know sometimes why he was criticizing me (...) and what he wanted was something else than steps (...) and I think this could be interesting for dancers to have emotional support at this time so that they can actually think about who they are and also...this also will definitely feed their career.*

2.2.2 Midpoint of career

The midpoint of the career brought new and differing emotional challenges. After the coping with the fear and excitement of entering a professional career, certain dancers described how they moved to a point where reality began to set

in. At this point, the magic of their career dissipated and the dancer was left with the realisation that their work was a job like any other form of employment.

Leanne 11(19-24) I think there's a stage in the middle (...) after you've sort of...not reached your peak but done these roles...but you reach a sort of level where you think (...)I've done that now...I've done that...and I've done that and then (...) you just sort of hit this...funny...thing...a lot of people go down a little bit and then come back up a bit...because it sort of takes on a normal...like a normal job.

At this point, certain dancers experienced a sense of losing sight of where their career was going.

Andrew 5(26-27) Some people lose sight of where their careers are going (...) I know I felt in particular that my career wasn't really going anywhere.

2.2.3 Coping with injury

The dancers also discussed the challenges of coping with injuries during their career. This presented the dancers with multiple challenges including an inability to work, absence from the company environment and the loss of dance itself, which many had described as a vehicle for emotional expression. Alex's description gave the sense of existence becoming purposeless during these troubling times:

4(23) You always struggle in the sense that you...you're injured therefore you're not in use.

Emily provided an insight into the difficulties surrounding encounters with those within the company during periods of injury. There was a sense that, once again, she was viewed as a number rather than an emotional being. Her description evoked the feeling of a longing for some form of emotional connection, for her difficulties to be acknowledged, but it appeared that the internal workings of the company had a different agenda.

13(5-9) You are almost afraid to run into the staff because (...) all they...they care about is when you're going to get back on stage... when they can stop juggling the numbers to make it work because they are down a dancer (...) they don't think ...nobody ever asks 'how are you?'... 'are you coping?'... 'are you alright?'... 'how's your mental state...are you keeping yourself busy?'... 'how is it?'

In addition to the period of absence during times of injury, Alex revealed the challenges of returning to work. There appeared to be a sense of incongruence between his description and his actual experience. This suggested that perhaps denial served as a coping mechanism during this time. Whilst there was a need to appear confident, there were also underlying fears of doing further damage, and a need for physical and emotional support during this time.

Alex 5(25-27) I have always been very...er... focused and...er... I have...er...I am quite confident...I have a lot of confidence... so for me it wasn't so difficult in terms of going back...there was a sense of fear...you know...thinking is my knee going to go again? You know, somehow I have learnt to... work with it... but it would be great if there was a support.

2.2.4 Facing the reality of the end of the career

The challenges of facing the prospect of the end of their career were also addressed by the dancers:

Alex 7(25-28) In terms of coming an age...you know...becoming older and finishing your career....I think it's a ...it's a very difficult time for anyone.

Several dancers described having reached a stage in their career where they had begun to consider whether they should make a career transition. This was something in the back of the minds of many dancers and was accompanied by many unanswered questions around the right time to make the transition and how/ where to go next.

Caroline 13(26) It's something I've really been thinking over the past two years.13(33-34) What I'm going to do next...or what I want to do (...) so I have...there are lots of things I want to do which is good...but then it's also how to do it...where to do it.

For Alex, making a career transition initiated a process of re-evaluating his life in the context of the rest of the world. He described the pain of letting go of something innate and having to move into the 'grown up' world outside of dance. This seemed to evoke a deep sense of grief, the letting go of a fantasy, in order to face the reality of what lay ahead.

9(27-32) I'm at a stage in my career where do I carry on dancing because I love it and that's what I was born to do and let's do until I...I can no longer to

do it...or do I grow up and see that life isn't ... the stage and make up and all of that.

Thoughts around making a career transition evoked a period of reflection and re-evaluation for several dancers. What once appeared to be an all consuming lifestyle suddenly became insignificant. With this came a sense of deflation, and a realization, that the world was no longer just a stage.

Leanne 13(1-3) It's a massive transition (...) you suddenly realize that in the grand scheme of things it doesn't matter how many times you've actually got up there...and banged out Swan Lake.

2.3 SUB THEME: EXTERNAL LOCUS OF EVALUATION AND SELF-ESTEEM

The reliance upon evaluation from external sources appeared to originate early in training. Caroline explored the development, and problematic nature, of her dependence upon external sources for positive feedback and evaluation.

11(16-18) We've been trained that way...because the approbation started to come from the teacher...then from the rehearsal director...eventually the artistic director...when it becomes problematic is in our...my everyday life.

The reliance upon evaluation from external sources seemed problematic in the sense that, almost like a mirror, once removed the dancer was left with a crippling sense of uncertainty in relation to their ability. Emily's description gave the sense of how, in the absence of feedback, the dancer was sent spiralling into her own inner process of self doubt. This led to an increasing sense of desperation for some kind of appraisal in order to permit the dancer to shift from this uncomfortable place of uncertainty.

14(18-21)-(23) I think when there's no communication at all...I think it leaves people feeling very lost...and they don't know whether what they're doing it...it's good, bad or indifferent...and of course that's when everybody's self doubt kind of comes in...and that's when you are desperate for someone just to say 'rubbish' (...) anything...anything.

The reduction in feedback, following transition from training to professional career, was a particularly difficult to manage. Once again, the diminished quantity of feedback resulted in the dancer being plagued with negative thoughts and feelings of self doubt.

Emily 14(23-25) *When you start dancing professionally I think that's one of the biggest (...) holes...in the job and I think it opens up such a huge can of worms (...) and can really make people feel (...) very...you know...uncomfortable and (...) it feeds all the negative thoughts...it feeds all the down things.*

2.3.1 Self-esteem

The impact of the development of an external locus of evaluation upon self-esteem was also evident in the dancers' descriptions:

Amy 7(16-17) *I think a lot of dancers lack confidence and kind of always (...) that kind of beaten down if you like...oh you know...and then try and always pull yourself back up.*

Certain dancers appeared to be caught in a cycle where, due to the reliance upon an external locus of evaluation, self-esteem became solely dependent upon their performance at work. Leanne appeared aware that the external locus of evaluation was linked to both self-esteem and motivation. Despite this, she has reached a point of realization in her career that her self-esteem no longer needed to be purely work dependent.

8(1-2) *I think for a long time...my self esteem was based on what I was doing at work...and that's where part of the drive comes from.*

Amy highlighted the paradox between the personal attribute of self-belief needed for success within the career and the profession's tendency to instil insecurities which appeared to undermine the very essence (self-belief) of what was needed in order to progress.

10(19-21) *It's very strange because as much as the profession nurtures insecurity...lack of confidence and all those things...in order to actually do it ...those are exactly the things you absolutely have to have...in order to progress.*

Emily described the consequences of trying to balance the tension between the opposing positions of insecurity and self-belief. This seemed to result in the development of a fragile 'false self' as a way of protecting the dancer from the underlying feelings of terror around the possibility of being found out. Parallels could be drawn between Emily's description and the phenomenon of the

'impostor syndrome' where individuals can exist in a perpetual state of fear around being 'found out'.

11(8-13) *When you see very 'confident' people...or what is viewed as very confident...they're not really (...) I think dancers...yeah...they do have this sort of...they're forced to behave in a way that's confident when you don't actually feel it...it's a very dangerous structure...to have that sort of shell of confidence and...you know...I can do it and I won't go off and inside most people are just terrified that...you know they're going to be found out.*

2.3.2 Perfectionism

Linked with the reliance upon evaluation from external sources, the dancers also described the need to strive for the illusive goal of perfection.

Leanne 9(27-29) *Well we're all perfectionists (...) we always focus on the negative...I say we but there's probably a few that don't but I know most of my friends.*

For Leanne, it seemed the need to struggle to reach a level which was always just out of reach originated from external sources within the company.

10(24-25) *It never...it's never ending...there's...you know they always say...you know...there's always room for improvement...and you take it to the extreme.*

In contrast, for Alex, the drive for perfection was more internally generated:

7(9) *I would say there is fears...there is anxiety...there is this level of being perfect in your own eyes.*

Despite his need to aim for perfection, Alex seemed to be aware that the goal of attaining perfection was just an illusion. In some respects he knew he was fighting a losing battle and yet continued to fight just in case this was achievable.

Alex 7(11-13) *It's a funny ...er...feeling because you know you can't be perfect...you can probably dance the best of your ability...but you can never I suppose...I don't know what is perfect? What is being perfect...but (...) you know you always are striving.*

It appears that working in an environment where dancers rely upon an external locus of evaluation can be challenging and leads to a questioning of identity and ability. There is a sense that the dancer, almost like a chameleon, will be

whoever they are told they are. The following section addresses a related issue by exploring the dancers' perceptions of the challenges relating to attaining physical perfection.

2.4 SUB-THEME: DISORDERED EATING AND BODY IMAGE RELATED ISSUES

Several of the dancers addressed the issue of body image and disordered eating within their training and career. From Leanne's description there appeared to be a sense of dissatisfaction around weight and body image amongst dancers which she then generalized to the population outside of dance.

10 (30-31) Well there's all the weight issues and how you look (...) nobody's happy with their body a hundred percent but it pretty much goes for everyone everywhere.

Caroline's experiences give a sense of the lengthy struggle to accept her body as it was, as opposed to attaining the ideal which she had created for herself:

15(1-4) I also had lots of difficulty to...to accept my body (...) I really had...I kind of wanted to fit to a certain style of body (...) I had quite weird body concepts actually...which are actually not normal (...) I really cultivated this idea of being extremely thin for a very, very long time.

Andrew appeared to view disordered eating as being primarily a female issue but on further exploration he also recognized that this could be a problem amongst male dancers. His description suggested that he perceived male and female eating problems differently. For female dancers, it was viewed as being a problem, whilst for male dancers; it seemed to be merely about wanting to be slim.

7(3-5) For girls there's probably the eating problems because of the body image that everyone has to have...I think that applies more to girls than guys (...) but I do know that there are a few guys that think that they also actually want to be slim and skinny as well.

Justin also considered his difficulties around food to be different from female dancers. It appeared that for Justin his problem was just in his head whilst the issues for the girls were more serious and pathological.

3(17-19) *I had a lot of problems with the food when I was at school...really more mental than anything (...) like the girls would have bulimia or anorexia ...it wasn't like that it was more ...mental problem that I had.*

None of the dancers described experiences of anorexia or bulimia but there was a theme around inconsistency in terms of eating patterns which often seemed to manifest during training.

Justin 7(20-22) *I was never really thin and I was never bulimic...and...so...so I was always fine but my eating patterns were really odd...and I'd yo yo diet.*

Natalie 8(21-23) *Definitely in my dance training that was pretty awful...I never was anorexic but I definitely (...) was extremely unbalanced in my eating (...) not eat through the day and then eat a lot in the evening.*

Certain dancers described finding it difficult to sustain disordered eating patterns for any length of time upon entering their professional career. They reached a point where their bodies, or minds, could no longer tolerate the pressures they had placed on themselves as a result of disordered eating patterns. For some, this resulted in a change in eating patterns or working environment.

Caroline 15(4-5) *It's something which works you know...for five or six years....maybe ten...but at one point your body just tells you no.*

Natalie 9(4-6) *I kind of rebelled against that and went into the kind of world of...releasing dance where it's (...) anti...you know...marginalizing kind of...it's very...you know...about inclusiveness with body types and things so...so that was very healing really.*

The insight obtained from the dancers' experiences provides valuable information for practitioners working within the world of dance. The dancers highlight a number of emotional challenges and stages in their career where they might benefit from psychological assistance. Specific areas drawn from the analysis include additional support around touring, coping with injury and whilst making the transition from training into the professional world.

THEME 3: BARRIERS AND FACILITATORS TO SEEKING SUPPORT

This theme provides an exploration of potential practical/ emotional barriers and facilitators which could impact on the dancers' willingness to seek psychological support. It would seem that aspects of the internal world of dance, and specific personal barriers, might prevent the dancers from approaching counsellors or

psychologists. In addition, a number of practical issues which might be valuable in facilitating help seeking behaviours.

3.1 SUB-THEME 1: IMPRESSION MANAGEMENT

This sub-theme addresses the importance of impression management within the dance environment. In a profession where image is crucial to success, a considerable amount of energy is invested in creating a persona which is perceived to facilitate career progression. In many respects there is a sense of needing to perform both on and off stage.

3.1.1 Direct tactics

The dancers described how their understanding of the importance of impression management tended to originate from training. This was illustrated by Justin who had learnt, from an early age that he was not just being judged in terms of his dance ability:

4(20-21) In a dance school...coming across to other people... the way you come across to other people is really important. 4(23) Almost all of the time...even if you're not dancing...well...your body language.

Caroline explored how dance training taught her to conceal any sense of vulnerability in order to portray the impression of psychological strength. From her description, it appeared that she had now reached a stage in her career where she was able to move towards a greater sense of personal congruence by acknowledging her feelings of strength and vulnerability.

9(2-5) I think when you're dance training you are asked to be...I mean you have to be quite strong psychologically and I think most of dancers are but (...) this is really at the cost of...of ...of their vulnerability...and it's quite important thing to recognise that we are vulnerable (...) because we are really trained somehow to hide that.

The need to conceal vulnerability seemed to merge with needing to conceal any source of emotional difficulties as these were associated with weakness and this in turn evoked feeling of shame.

Natalie 13(9-11) I think there's kind of a lot of shame around emotional difficulties (...) certainly...in you know...the dance profession in certain kind of

areas (...) if you're not...a kind of um...strong person in some way or something...that...there can be kind of shame.

For Andrew, the need to conceal emotional difficulties was again linked to the avoidance of stigma, but an additional factor of consistently needing to manage an impression of being successful was also introduced.

3(9-12) Some people I think find that they want to hide it from other people in the business...because they want other people to believe that they're doing well...it's just this whole stigma that goes with...if you're seen to not be doing very well then maybe you won't continue getting the jobs.

In her exploration of the shame around emotional difficulties, Natalie made reference to the words 'clean', 'dirty' and 'sanitization'. She likened emotions to dirt whilst considering the importance of cleanliness within the world of dance. She appeared to give the impression that emotions, rather like dirt and germs, need to be cleaned away from the dance studio in order to make room for the idealised goal of physical perfection. It was interesting to reflect on the parallels drawn between dirt, emotions and sanitization. When viewed in practical terms, it would seem that both emotions and dirt can never be removed and always return unless regularly cleaned away.

14(1-7) I think that...that there's a kind of...that...there's something about being very clean and...and...and um...don't get dirty in here...it's all quite kind of...an idea of perfectionism and there's a kind of obsession around perfectionism...around technique quite often...things like that which(...)and yet you're being kind of in these environments...that are kind of sanitized...you know and...so it's very conflicting you know in that way.

3.1.2 Indirect tactics

In order to manage appearances it was also necessary to create emotional distance from those who openly acknowledged experiencing emotional difficulties or seeking psychological support. Andrew described feelings of shock when he first heard another dancer talk openly about seeing a counsellor.

19 (20-23) I was a bit shocked at the fact that I was speaking to someone that had actually ever been to see a counsellor because normally I suppose it's a quite private thing...people don't like to talk about the fact that they go to see counsellors or psychologists...it's more personal...and the way he was being quite open about it was quite shocking...and the fact that I knew I was seeing someone that actually saw a counsellor.

In addition to the shock, there appeared to be a need for Andrew to separate himself in some way by seeing himself as 'other'. In talking about his friend, he seemed to be attempting to manage his impression of self. There was a sense that there might be a possibility of the potential stigma rubbing off on him unless he could distinguish himself as being different. In this case he chose to identify himself as English and the other dancer as foreign. The distinction of English versus foreign seemed to serve as a way of creating distance on both an emotional and geographic level.

18(27-31)-9(1) My first reaction was...oh my god...really... (laughs)...and he was like...he said he gets that from a lot of English people...that it's um...a bit of a shock reaction as if like are you some sort of freak... (laughs)...that he has to go and see someone all the time because...19(1) But English people tend to just get on with it I suppose.

The dancers explored beliefs around how their image might be altered if it was known they had sought counselling and how others might view this negatively.

Amy 18(7-9) It just forms part of how you are seen by your colleagues and the staff and I don't think being seen as seeking counselling is necessarily positive to your image...I mean I personally would think it's negative but...maybe they wouldn't...I don't know.

Natalie's experiences support the perceptions expressed by Amy. She described a time during her training when it became apparent that she was having emotional difficulties and needed to seek support. It seemed that when the illusion of being invincible and emotionless disappeared she became something different and disappointing within the eyes of her teacher.

5(6-9) The kind of disappointment that I wasn't kind of this...kind of stoic kind of person that can kind of handle anything that's thrown at me (...) that I actually have kind of emotions (...) was almost like a...a...from then on she couldn't quite relate to me.

This sub-theme suggests that both 'direct' and 'indirect' tactics of impression management are vital to the dancers' career progression. The next theme explores other potential personal barriers which might affect their ability to seek support.

3.2 SUB-THEME 2: PERSONAL BARRIERS TO SEEKING PSYCHOLOGICAL SUPPORT

The next sub-theme addresses other personal barriers to seeking support. There appear to be several coping mechanisms, emotions, fears and experiences which might play a role in deterring the dancers from making use of emotional support.

3.2.1 Openness to support versus self reliance

Many of the dancers described having learnt to cope with their problems alone or through the internalization of difficult issues encountered within their career.

Justin 8(5) I generally tend to keep it inside...I'm usually quite good at dealing with something.

Justin described how there were individual differences in terms of dancers' perceptions relating to seeking support. Some appeared to be more psychologically minded whilst others seemed to prefer, or perceive, that it was better to cope alone.

4(15-16) I think some...some people...are more prone to realize about how....not...how their brain works but how ...or more...open to help...whereas other people I think like to go it alone...or like to think it's more...that's a better way.

In addressing the issue of openness to support versus self reliance, Andrew explored his rationale for needing to cope alone. Within this process, the theme of internal versus external locus of control re-emerged. His description gave the impression that asking for help would result in the loss of his own internal coping mechanisms and a shift towards reliance upon external sources of support. In his mind, external and internal coping mechanisms could not function simultaneously. By coping alone, this allowed him to feel reassured that life was manageable and under his control.

13(12-15) For me I think it would be like (...) almost failing...like in my own mind...like being not quite strong enough to support myself (...) I feel that...if every time a...everything got bad I needed to turn to somebody else then how would I be able to manage on my own...I suppose an independence thing...and I always feel like...if I can do it by myself then I'm alright.

3.2.2 Acknowledgement versus denial of emotions

Despite the personal need to conceal and store emotions, there was also a sense that some dancers had an underlying awareness that all was not quite as it appeared on the surface. On reflection, it seemed to the researcher that once again there was an aspect of putting on a performance both on and off stage but to differing audiences.

Justin 14(2-5) I tend to hide my problems inside (...) I'm quite good at like boxing up my issues and knowing what's wrong and sort of where I keep it (...) but actually underneath there's a lot of things that I can talk about or a lot of things which do affect me...some that I don't really realize about.

Denial, or lack of awareness, played an important role in allowing the dancer to remain focused upon their career. There was a sense that if emotions remained hidden, the dancer could hold onto the illusion that all was well in their world. These mechanisms prevented them from being diverted onto other paths which might distract them from remaining focused on their chosen career. This provided an indication that the dancers were more dedicated to dance than their own psychological well-being, a need to suffer for their art form.

Justin 9(32)-10(1-3) If you kind of ignore it...and...and say...with that sort of pride "oh, there's nothing wrong with me"... then you kind of feel stronger than that...and that...you know... there must be nothing wrong and you can just continue along the path that you've been going along.

Andrew 2(31-32)-3(2) so you kind of hide it...hide it and keep going for what you want to do...I think it's...peoples' drive for their love of what they do that makes them keep their inner...kind of (...) angst or whatever inside.

In contrast, Caroline, a dancer who had sought support, found that she was more able to cope if she acknowledged her difficulties as opposed to hiding them and allowing these to build up.

9(18-22) Saying those difficulties is helpful...saying them and acknowledging them also is extremely helpful (...) it's something that I need to do because otherwise I just build up.... I just keep like building up some kind of a wall with those emotions and at one point it's...I have a feeling to be really oppressed.

3.2.3 Confidentiality

Another issue which the dancers described as a potential barrier to seeking support arose around concerns relating to the confidentiality of support services. Caroline, a dancer who sought therapy through independent sources, described her fears around dance companies having access to counsellors or psychologists.

6(2-3) I'm going to be quite honest actually...I would be afraid for example, me...about the confidentiality idea... between the dance company and the counsellors.

For many of the dancers, fears around confidentiality originated from experiences during training. Some had witnessed or experienced situations in which boundaries around confidentiality were not adhered to by psychological professionals employed within certain training establishments.

Emily 5(31-34)-6(1-3) There was a student counsellor (...) she was meant to be a sort of go-between and...erm she spoke to the ballet staff and passed on information that (...) they wanted us to know (...) I think there was a huge mistrust from the dancers and the students...the savvy ones used her... 'oh miss I feel awful ... this is happening or that's happening' ...um...and the rest of us just kept well away from her because I think there was a general feeling that she was not to be trusted...um and also I mean...from her side she wasn't giving us any reason to trust her.

3.3 SUB-THEME 3: LACK OF INFORMATION/AVAILABILITY

This sub-theme addresses practical aspects related to seeking psychological support. It explores the dancers' perceptions of emotional support and also considers the issue of access and availability of support services.

3.3.1 Accessibility and availability of psychological support services

When the dancers were asked about their views relating to dance companies having access to counsellors or psychologists, some appeared in favour of this idea but were unaware of current sources of emotional support available to them.

Amy 3(2)-(4) It would be great (...) but it's not really there...that I've heard of.

In contrast, Justin believed emotional support would be available, if he needed it, but what he might be offered would not necessarily be geared specifically to meet his needs.

3(24-26) I'm sure if I was in need of something... I could either get it through the company GP or ...through the medical insurance that we've got...or... I'm sure there would be a way of getting it ...but I doubt that they would have any experience of dance...I mean dealing with dancers.

Other dancers described feeling lost and uncertain about whom they might approach if they decided to seek emotional support.

Alex 12(11-12) I wouldn't know where to start...what would be the right... the right person to do it or...the right organization...it's something I never looked into it...so I have no idea.

Amy 15(29)-(31) Short of just opening up the Yellow Pages (...) I wouldn't really know who to go and see and who could tell me who to go and see...who could I ask...really.

3.3.2 Dissemination of information

The dancers seemed unclear around what mental health professionals might offer. There was considerable confusion in relation to the differing roles and services provided by those within the mental health profession. The dancers' experiences are of interest to psychological practitioners as these indicate the value of further information and input in relation to the type of services available and practicalities around seeking support.

Justin 13(3-8) Psychiatrist....psychologist and psychiatrist (...) I've never been sure what the difference between those are and what the different role would be (...) I guess it's important for dancers to know if they're going to get help...which avenue they should be going down (...) how it's going to affect them...how much it's going to cost....just some kind of idea of what they'll be going into.

The dancers valued the idea of input from their place of work in relation to providing information regarding sources of emotional support.

Alex 12(16-17) You know at the end of the day it would be great that the company would have a liaison ...you know...with people...with organizations that would... we would be able to seek help.

Leanne explored her personal experience of seeking support through the company, and her feelings of dissatisfaction around this process. She considered it important to have an element of choice. Her description suggested she would prefer to be guided in the right direction but also have a sense of control over her own well-being in terms of deciding which practitioner might best meet her needs.

15(18-20) Maybe having...you know a list of people that you can go and see which one you want to see...see which one you're comfortable with...I was just referred to this one doctor and there wasn't any choice of anyone else.

There were differing views relating to dissemination of information around emotional support services. Some dancers preferred the idea of a more subtle and confidential method of accessing details about support organizations.

Amy 16(4-7) I mean obviously not sticking a notice up on the board but kind of...someone in...I don't know...someone like HR I think is quite good...someone like him...if he knew...sort of had a list of people that you knew you could go and see and was kind of discreet.

Others preferred more openness and clarity around the availability and process of referral. These dancers seemed to value frank and open discussion initiated by the company as opposed to having to research the options available through other sources.

Leanne 16(9-10) It would be good if...you know...we were sort of sat down and said look if you are going through any problems...you know...if you go to the doctor he can refer you to this person or that person...you know...so it was a bit clearer.

3.4 SUB-THEME 4: LOCATION AND KNOWLEDGE

The following theme explores the dancers' perceptions around other factors which might facilitate their willingness to seek support. Within this section, there is an underlying comparison between preferences relating to location of support services and knowledge of practitioners. There is a common theme of internal versus external. In terms of location, the dancers explore their preferences towards internal versus external support services and, in relation to practitioner knowledge, the role of the importance of insider knowledge is also discussed.

3.4.1 Location of psychological support services

The dancers showed a preference towards having access to emotional support away from their place of work.

Alex 12(26-28) The building isn't necessarily the biggest so I would rather go outside work.

Leanne 17(20-21) Outside...absolutely outside...you just...I don't think you'd be able to relax if you saw someone at work...in the building.

Several dancers mentioned the impracticality of having access to counsellors or psychologists within the workplace. This was linked to fears around confidentiality and concerns that their decision to seek support might become common knowledge via the internal grapevine of the company.

Emily 17(7-8) I don't think it would work if someone was able to come into the company and have a room where people could come in and speak to them. 17(12-15) It needs to be your time and to be able to do it yeah...away from prying eyes and ears ...and also just getting out of the building (...) you want to do it on neutral territory.

Despite the fact that the dancers were keen to have access to and be provided with information relating to sources of support, they also considered that these services would need to be located in an environment which was removed from the source of the problem. This suggested the dancers were looking for both physical and mental space from their difficulties.

Caroline 20(7) Outside the company...definitely outside the company. 20(11) And also so dancers don't have the feeling it's related to work.

Justin 10(12-14) Generally outside of the situation (...) say the problem was at work...then I would probably want to meet someone out of that building...to try and sort of get outside the bubble....and again if was at home...I wouldn't really want someone to come and visit me at home.

The dancers also seemed to be sensitive to the atmosphere and setting of potential counselling services. Andrew's description of the ideal environment gave the impression that he was looking for an informal and non-clinical setting.

18(19-20)-(22) *You want to feel that the balance is very equal (...) and the room itself would have to be similar like...a lounge or something like...homely (...) Somewhere that you don't feel like you're sat in an office.*

3.4.2 Knowledge of world of dance

The second part of this theme explores the dancers' views relating to their preferences around the knowledge, and experience, of a potential counsellor or psychologist from whom they might seek support. Emily considered that having access to a practitioner who had an insight into the world of dance might facilitate the process of seeking support.

16(19-20) *Having insight into ballet is something that...dancers are (...) they are more conducive to...to...talking to somebody that knows what they're talking about.*

Despite this, the dancers appeared to struggle to find practitioners who had an insight into their world and the emotional challenges they faced.

Amy 12(21-22) *I think it's tricky to find people who understand the nature of the profession...and the stresses and the anxieties it brings.*

The dancers' preference towards working with a professional who had some insight into their world seemed to be grounded in a fear that they might become frustrated if they felt misunderstood.

Amy 12(13-15) *The main thing with dancers seeking support it's...it's finding people who actually understand the profession and what it's about (...) there would be nothing more irritating than seeing a counsellor who really just didn't have a clue or couldn't really...didn't really get it.*

The dancers considered that it was unnecessary to have an in-depth knowledge of their world, but that it was important for practitioners to grasp certain concepts of the culture which they considered a unique aspect of their world.

Alex 11(14-16) *There are ...quite a few different elements within the dance world that... it is important to grasp...in terms of casting (...) and ...how the company works...and so forth...I think it would be ...almost necessary to be able to get the end result.*

Justin 12(24-25) *I think it could be helpful if they have a knowledge of dance...or...how...how the dance world sort of...revolves around its own little axis....and everyone knows everyone.*

Emily's description gave a sense that it might be difficult to understand the inner working of the dancer's world unless it had been experienced. She considered this to be an issue which might deter dancers from seeking support. There was almost a sense of needing to protect the inner workings of the dancers' world in order to maintain the unique and special perception of their career. This suggested that it might also be difficult for dancers to let 'outsiders' into their world.

Emily 15(10-12) I think you have to be in that environment in some respects (...) to really understand it and...I suppose...that (...) is indicative of why a lot of dancers don't necessarily go to counsellors because they feel there is so much to explain. 15(16-17) I think ballet dancers are very strangely protective of their world...it's so sort of specialized...it's so...weird in lots of ways

This theme provided an insight into some of the potential barriers, and facilitators, to seeking psychological support. In order to provide a more in depth analysis of this area, the final theme will explore the dancers' perception of support services.

THEME 4: PERCEPTIONS OF SUPPORT SERVICES

The final theme explores aspects relating to the dancers' perceptions of support services. Within this theme, the dancers explore their experiences of seeking support, describe what is useful in terms of emotional outlets from their career and address their perceptions of counsellors/ psychologists and alternative health practitioners.

4.1 SUB-THEME 1: PERSONAL EXPERIENCES OF SUPPORT

Within this section, the dancers explored their current or past experiences of seeking support.

4.1.1 Experiences of psychological support

A few dancers spoke about working with counsellors and psychologists within their career. Some appeared to have had experience of short-term therapy whilst others had more lengthy periods of therapy.

Alex 3(17-18) I have had a few sessions with the psychologist that worked in a part...in a sort of part time...freelance basis with the company. 3(20) I think it helped me... mentally quite a lot.

Natalie 6(14) I've had it pretty much consistently...throughout my whole career.

Certain dancers described seeking emotional support during training but, from their descriptions; it appeared that the act of seeking support was instigated by others as opposed themselves.

Leanne 3(20-22) I did speak to someone I think she came to me first though...somebody probably like gave her like a small word...and I wasn't going to but then I did and it was actually quite good.

Justin 3(12-14) I actually only went once or twice but my parents sort of thought I should go because I just used to get like more emotional ...than I had in the past without really realizing why.

The dancers provided an insight into their experience and the process of being in therapy. This provided a different experience from some of the aspects which were inherent within their career and have been addressed in earlier themes. Caroline found an environment where she was able to let go of the need for impression management and begin to be herself without fear of how this might impact upon her career. She appeared to begin to experience a sense of greater personal congruence which had been absent at many times in her career.

9(10-13) I think this is not that easy...not easy...so for sure...going to see a counsellor really allowed me to you know to...to have a place where I had to think to be really myself also...and not especially having the feeling... having the necessity you know... to look happy even if I'm not.

Both Natalie and Caroline, who sought therapy away from the work environment, mentioned the sense of safety experienced within counselling. Again this seemed different to the inner world of dance as fears relating to trust and confidentiality were removed allowing the dancers to express themselves openly and honestly.

Natalie 7(17-19) Just a place where you can really be honest and feel very safe to be...very...very honest.

Caroline 16(8-9) I think having a counsellor is a really...erm.... it's a really, really safe place for me to talk...safe...helpful and it really makes me enjoy life...100% much more than before.

Caroline also described how counselling enabled her to be seen as a 'person' with the ability to think as opposed to being viewed as a 'body'.

7(26-27) The counselling is for me the possibility to talk...to talk and.... it also allows me to...to be considered and seen as a thinking person instead of just being seen as...as a body.

Leanne had two experiences of counselling, one whilst in training and the other while dancing professionally. The two experiences appeared to have been very different in nature. In the first instance, whilst at school, she felt understood, heard and supported:

4(1-2) It was helpful in the sense that you knew there was someone who sort of knew what was going on with you...didn't just take you for face value...that actually asked you what's wrong.

Her second experience, through work, seemed different as she described the impact of working with a professional who did not seem to understand her experiences. These differing experiences of having therapy highlight the importance placed upon feeling understood by the practitioner.

4(28-30) To be honest that was a total waste of time...I was referred...um... from the GP at work...to people outside of work that weren't in the business and didn't know what was going on...it was a very expensive chat...to not a very good friend.

4.1.2 Alternative medicine

In addition to the experiences of seeking support from counsellors or psychologists, the dancers were asked about their perceptions relating to the potential value of alternative medicine. It was interesting to note that all dancers had visited some form of alternative health practitioner and many dancers made reference to this during the interview prior to specific prompts within the interview schedule. There appeared to be a number of different motives for deciding to make use of these services. For Amy, it was a lack of faith in more conventional sources of medicine:

13(8-10) I don't believe that much in conventional medicine and those kind of things...I mean it has it's place but I just find the alternative stuff a lot more interesting...and highly effective...but that's just a personal view of mine. 3(5-6) I think it's a lot more beneficial to do something alternative rather than just take Prozac for example.

Leanne described her preference for a less clinical approach. Her description suggested she experienced clinical environments as being cold and unfriendly.

6(20-21) The alternative medicine is more of a...it's more of a friendly thing...more real...it's not as clinical...I find anyway.

The dancers valued the holistic approach taken by alternative practitioners. They also stressed the perceived value of seeking support from body-orientated therapists, perhaps because this was something which fitted with the physical nature of their career.

Justin 9(14-20) It's sort of...almost...it's half way between like spiritual...well there's sort of three parts to it...it's like spiritual...there's intellectual and then there's physical (...) so most of them have got something to do with the body.

Leanne, Amy and Emily described seeking support from the same homeopath. From hearing the dancers experiences, the researcher got a sense that this homeopath was actively supporting a considerable number of dancers within the company and information relating to her services had been passed via the 'internal grapevine' within the company. For Leanne, the decision to seek support was a last attempt to find support after a history of trying to find support from other mental health professionals:

5(3) I did meet a homeopath that I get on...that I see now. 5(5-6) She was kind of my last resort because I thought...you know...there's no point...you're not meeting anyone that you feel comfortable with to talk about stuff.

From Amy's description, it seemed the homeopath fulfilled a number of needs in terms of emotional support. This appeared to link with the dancers' need to find someone outside of work who had insight into their world and could be trusted.

3(28-29) I go and see a homeopath who is sort of wonderful...and she's someone who actually loves ballet and is really into the dance. 4(4-5) To be able to go and speak to someone and she...for me it's always been helpful because...it's just...because it's external from your life and your friends.

5(11-12) I mean the basic thing is...you know...I just simply trust...I get on with her just the way she is as a person.

Emily explored an additional factor which appeared to facilitate her ability to seek support in this case. Despite awareness that she was actually seeking emotional support from her homeopath, it was more acceptable under the guise of homeopathy. This enabled her to seek emotional support in a format that was more palatable and removed the stigma of seeking support from mental health services.

6(13-19) I've found it incredibly helpful (...) but that's a sort of ...I suppose because it's under the...it's under the guise of homeopathy (...) if I said I'm going to see a therapist...I just wouldn't (...) but because I know what goes on between us it's more like therapy (...) it doesn't have...again I don't want to say stigma because... I think people don't feel like that towards counselling and therapy...but attached to dance...I think there's a case of...if you need that...you're not strong enough.

4.2 SUB-THEME 2: EMOTIONAL OUTLETS FROM CAREER

The second sub-theme provides an exploration into the ways in which dancers found an emotional outlet from their career. It also considers the dancers perceptions around seeking support from those within the dance world and compares this with the dancers need for contact with the world outside dance.

The dancers considered work colleagues to be a valuable source of support within the dance world. Emily described the internal support network within the world of dance:

9(20) I think we as a group...we tend to self-help.

Alex viewed dancers as being different, and distinct, from the rest of the population. This was illustrated by his use of the word 'normal' in his exploration of the challenges in seeking emotional support outside the profession and suggested that perhaps there was something unique about the way in which dancers defined themselves.

Alex 6(9-12) It's difficult to talk to a normal person.

The dancers perceived their world as unusual and this seemed to present difficulties when attempting to confide in those outside the profession. Amy, a dancer who lived with her family, describes the invaluable support received from this source:

12(4-5) I'm lucky that I am really close to my family and I do get on with them and so...yeah...I mean they're a great support but that's not the case for everyone.

This is contrasted by the experiences dancers who describe finding it difficult to talk openly to their family about the challenges of their career. Andrew highlights how a lack of understanding of the internal workings of the dance world can often act as a barrier to seeking support from family.

11(26-28) I think...a lot of dancers probably find this...that their parents aren't always the best people to turn to because they don't fully understand the business...and the only friends you can ever turn to are friends within the business.

The perception of not feeling understood by those outside the profession resulted in difficulties when confiding in friends who had little knowledge of the world of dance.

Alex 6(23-25) So I think that's what(...)although there is always a sense of you always speak to your friend about your... you know difficult times...I don't go into too much details because it would be ...I don't understand... I don't think they would understand.

Emily's description supports the theme of fears around feeling misunderstood interwoven in the accounts of Alex and Andrew. Her experience gives a sense of a perception of needing to have experienced the world in order to be able to fully understand. In her account, Emily considers this to be a potential barrier to seeking support from counselling:

15(9-12) Although I'm very close to my family...I tend not to take...that sort of stuff... I tend not to tell my family because I think it's...so much of it is just a day to day thing you have to...I think you have to be in that environment in some respects to (...) really understand it and...I suppose...that (...) is indicative of why a lot of dancers don't necessarily go to counsellors because they feel there is so much to explain...there is so much background.

An additional factor which could be considered to impact the dancers' ability to seek support from family may be result of early separation from the family in

order to pursue training and a professional career. Both Caroline and Alex chose to move countries in order to pursue their career. In addition, a number of dancers entered full-time training at the age of eleven which also involved a degree of separation from family at an early age. Alex's experiences give a sense of his growing awareness around the sacrifices made to pursue his career:

9(12-14) I had to give up a lot...and the older I get I see the more sacrifices I have done that when I was younger I wasn't aware of it (...) I gave up family...you know I am so far away from my own culture...I had...you know... I came by myself... and I had to learn English and ...a lot of things in order to...to feel at home.

Despite the value placed upon internal support, there appeared to be something suffocating about this network which resulted in the need for distancing.

Emily 9(24-25) A great support network as it is...it becomes very insular...and (...) I do find myself extracting...from that...you know ... just pulling away just ever so slightly.

The dancers also valued having support from sources removed from the profession and living environment.

Justin 5(1-2) Generally having a chat with someone who's a bit removed from...everything (...) like calling someone I don't live with or I don't work with.

Many dancers grappled with the notion of striking a balance in terms of reaping the benefits of seeking support from both internal and external sources. For Emily, a combination of close friends within the company and homeopathy seemed to fulfil her needs in terms of emotional support.

9(30-33) I definitely rely quite heavily on my group of close friends [within the profession] in conjunction with seeing my homeopath...and I think that's where the balance has become much more even in the last couple of years because...although I still have my (...) personal counsellors...as we have each other (...) I can then take it a step away and speak to someone who is not connected with it.

The dancers also considered the potential benefits of having access to professionals outside the world of dance as a way of supplementing their internal self-help system.

Andrew 6(21-23) You've got to have plenty of friends around that have experienced it but I think a professional would be useful as well.

Amy 6(4-6) In terms of counselling...I think it's just great to have someone...you know that's in your phone book that you can just ring up and who...you can talk to that's separate.

Whilst addressing the issue of striking a balance between internal and external support systems, Natalie described her positive experiences of seeking support from twelve-step groups.

6(23-24)-7(1) I think um...the most useful um kind of thing...that I've had is twelve- step work which deals with addiction.

It would seem that Natalie benefited from finding individuals who understood and could identify with her experiences.

13(8-9) I think it's again around the idea of sort of identification...finding...you know...people that...kind of...can relate to what I'm saying.

Amy described the benefits of finding an emotional outlet away from her career by seeing people or doing things that were removed from her work environment.

6(20-21) The things that make me feel better is seeing people who are removed from the company and that kind of insular (...) bubble that you live and you work in and that you're in constantly.

It appeared that by taking herself away from the world of dance Amy was able to have space to regain a sense of perspective which assisted her in coping when returning to work.

7(1-2) I think it just...um...gives me a sense of calm (...) I'm kind of...maybe more independent and...um...I think it just gives me confidence at work. (4-5) You know there's something outside your life...that's maybe just as important or bigger or whatever than just (...) 10-30 to 6-30 at the company studios.

The emerging themes highlight how the dancers' had discovered a range of sources to provide an emotional outlet from their career. On reflection it would seem that other dancers provided a source of understanding and identification, whilst external sources assisted in gaining a sense of perspective on life.

4.3 SUB-THEME 3: PERCEPTIONS OF COUNSELLORS AND PSYCHOLOGISTS

The next sub-theme explores the dancers' perceptions of counsellors and psychologists. During the interview, the participants were asked to reflect upon their associations linked with the words 'counsellor' and 'psychologist'. This also stimulated further reflection, and uncertainty, about the differences between the two professions. The dancers gave a variety of responses when posed the question 'when I say the word counsellor, what comes to mind?'

Alex 13(29) Counsellor ...um...to me if you say counsellor it would say help...someone that can advise you...can guide you.

Leanne 18(23-24) Nothing scary...and not...it doesn't make me think someone's going to delve into my soul...(laughs)...someone you can...um...go and chat to.

Amy 19(23-24) The image I get is like a...you know...old lady kind of or a sort of dusty old man sitting there and kind of going...ooh really ooh that's not very nice is it...or whatever.

Caroline 22(1-2) Therapist...help...listener...and a counsellor is also someone who...who is not there to judge you.

The dancers were also asked a similar question 'when I say the word psychologist, what comes to mind?' This evoked very different associations which appeared to have a greater link with science, assessment, facts and depth of exploration of self.

Natalie 18(9) A clipboard 18(11-14) More around...diagnostic kind of procedures (...) rather than a kind of...emotional kind or more...rather than kind of going into kind of anything necessarily too much to do with somebody's past and family and childhood...I don't imagine that there...it would be more a kind of factual...practical kind of thing with a psychologist.

Leanne 18(28)-(30) That would be more deep (...) yeah...getting right sort of down into it...where things are actually really coming from.

Amy 20(1-2) I think it's more like someone in a suit...sitting at a desk...kind of much more serious kind of...more...it's more medical I guess.

In describing perceptions related to counsellors and psychologists, the potential differences between these two practitioners were also explored. A number of

dancers considered there would be a difference in the degree of training required within these professions.

Alex 14(14-15) I would suppose a counsellor you don't necessarily need to go through training....I could be a counsellor if you come to my house with a problem...couldn't I.

Caroline 22(18-24) If it's psychologist...maybe this person has...more diploma...because a psychologist is a doctor I guess...maybe... who studied psychology...and maybe a counsellor also studied psychology but... maybe that the training is shorter.

In addition to perceptions regarding differences in training, it seemed psychologists were perceived as more medical and scientific:

Andrew 18(1-2) More like professor types...like...definitely more like...doctor types (...) it sounds more scientific than counsellor.

There also appeared to be a greater element of fear evoked by the word 'psychologist' than the word 'counsellor'. Emily was more daunted by the prospect of seeing a psychologist:

20(6-8) I think counselling is a word that sounds...it's much more gentle...sort of hands on...um...informal and...you know... it sounds a little bit more kind of (...)it's .. other things sound more intimidating.

For Leanne, this sense of fear appeared to be related to potential insights which might be gained whilst seeking support:

19(8-9) A psychologist...I wouldn't find it scary...I'd find...you know...what you were maybe going to find out a bit scary.

In her comparison of the words 'counsellor' and 'psychologist', Emily showed awareness of the role played by language in this process. Although she viewed the work of counsellors and psychologists as similar she was also aware of the role of semantics in making difficult situations more palatable.

19(30-33) I suppose I view it as one and the same but (...) perhaps it's just a more palatable way of putting it to people...you know... going to counselling probably sounds less invasive...but I think there's always going to be...you know...it's semantics... people are always going to be frightened off by certain wording.

4.4 SUB-THEME 4: POTENTIAL EMOTIONAL SUPPORT REQUIREMENTS

The final sub-theme addresses potential support requirements which the dancers considered might be useful within their career. This provides an insight into the personal qualities, and experience, the dancers might look for in a potential counsellor or psychologist. They also identify key areas in which they might benefit from the support and explore other potential sources of support which might be useful to them.

4.4.1 Personal qualities of practitioners

Firstly, the dancers described some of the potential personal qualities which they might look for in a practitioner. From earlier descriptions of the dancers' world, it appeared that they were searching for specific qualities which differ from those they experienced within their career. It seemed that the dancers might be looking for an antidote to the relationships and experiences within the workplace.

Justin 8(25) I think someone who...who really isn't judgemental.

Andrew 18(15-16) Soothing and calming...in their voice and their manner.

Leanne used her previous negative experience of counselling to highlight the qualities she would look for in a counsellor or psychologist. In her description there was a sense of the desire for an absence of power within the relationship and a need to be viewed as an individual. Striking a balance between compassion, and the ability to challenge was also important.

19(13-17) Someone friendly...someone not egotistical...because...that's what I found with one of the people that I saw...they were so...you know...I'm a psychologist I know everything...I'll sort you out...I'll put this label on you...that label (...) so someone who's quite selfless...um...compassionate (...) challenging as well...you know...not...not someone who's going to...just...feel sorry for you and let you go.

4.4.1 Support needs

In addition to the support needs during transitional phases, addressed in theme two, the dancers explored other aspects of their life, and career, where they

might benefit from emotional support. Certain dancers valued the notion of support in order to process issues relating to casting.

Leanne 7(14-15) If there's something that goes wrong at work...role wise like if a role is taken away from you (...) yeah...someone to go and speak to.

Emily described how it might be useful to have a source of emotional support during the lonely times of injury and to assist with personal issues which were unrelated to work. Once again, the fine line between work and personal life was highlighted.

12(12-14) It would be really useful I think because...particularly to talk to somebody when you're injured because...because it's a small group of injured people or you might be on your own...which I think is even harder. 9(7-8) I think somebody that I could sort of speak to you about... not necessarily what's going on at work...but... in my private life as well because I think they end up becoming something inextricably linked.

Justin explored his support requirements from a broader perspective by addressing the issue of the potential value of what he termed 'preventative psychology'. His description indicated that aspects of cognitive behavioural therapy or coaching had been useful to him in the past.

13(10-15) Some kind of preventative psychology I guess (...) someone who would come and talk to us at the beginning of each term and he would talk about (...) how you use your mind and your brain towards a goal or how you...how you focus your energy...how you focus your...your...happiness or your negativity and...and make use of it and how you can change things by believing in yourself.

Amy addressed the potential value of having input from sports psychologists. She stated that if she were to seek additional support she would choose to work with a sports psychologist.

21(13-14) I think something that would be useful in dance...um...would be something like sports psychology...like a sports psychologist I think would be very helpful.

This approach was appealing to Amy because of its ability to focus on specific performance or work related challenges and goals. She was obviously aware that this type of information was available and used within sport but appeared uncertain as to whether other professionals might also be able to provide this

type of support. Once again this provided evidence that dancers were unclear about services offered by differing psychological practitioners.

21(16-19) They would be able to give you a lot of techniques that...err...would make...doing things a lot easier in terms of...um...working with performance anxiety or how to overcome nervousness or (...) how to put your head in the right sort of space to be able to whatever (...) techniques like that which are very commonly used in sport which are not in dance. 21(28-30) For me it just sounds more specific and more orientated...um...to something that for me personally I think would be really useful...but maybe a counsellor or a psychologist could do that as well...I don't know.

Another barrier to seeking emotional support which was addressed by the dancers was financial constraints although this will not be discussed within the confines of the research. When addressing this issue, Andrew introduced the possible value of internet support and considered the benefits of its accessibility and ability to bypass time and financial barriers in the process of seeking support

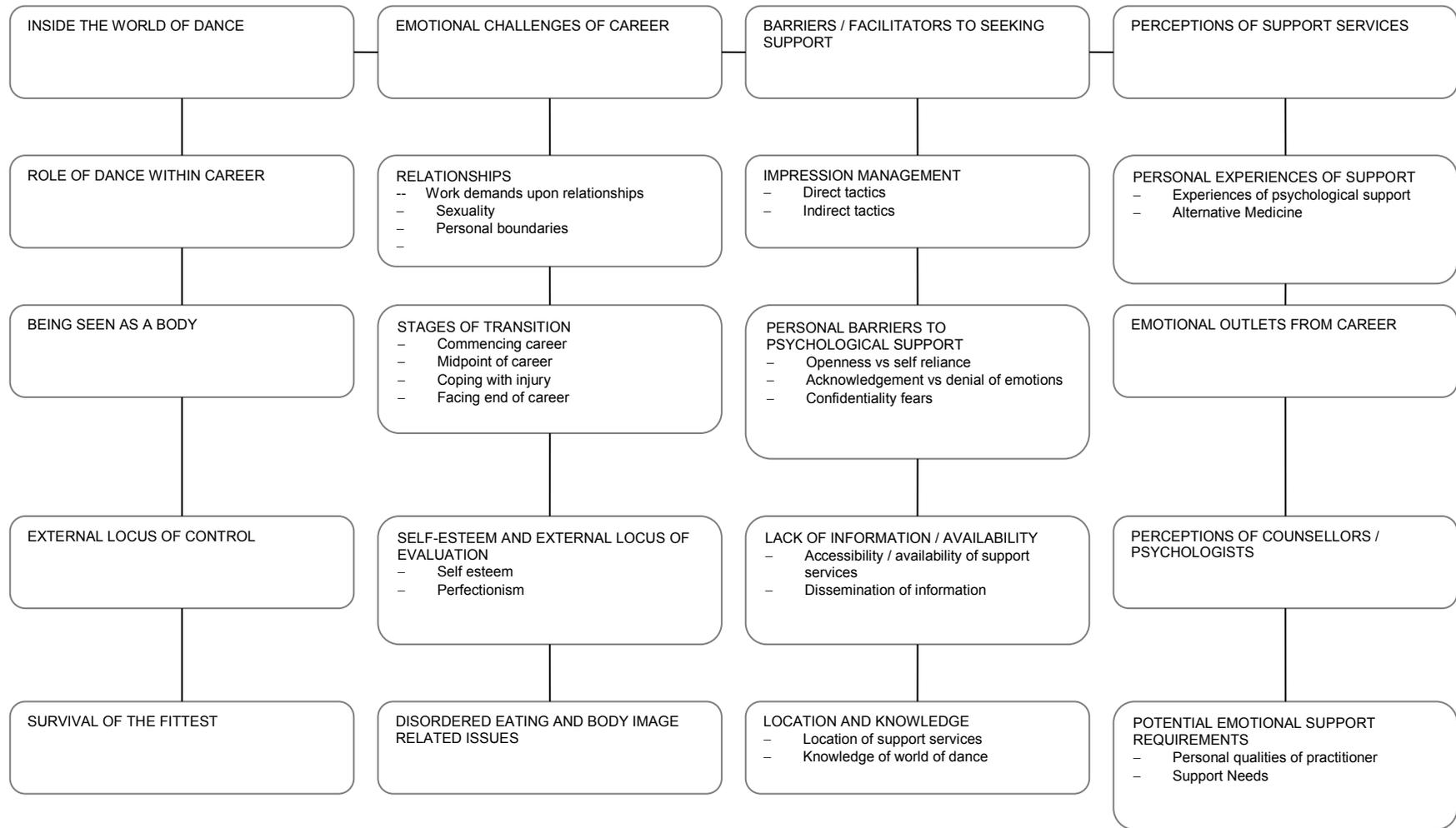
4(30-32) It would be quite helpful if there was something that could be written on the internet or something...so it's very easily accessible (...) like a Google search engine you can just ask questions like about how you are feeling and there can be some sort of...it would obviously be a text book answer. 7(19) Obviously it's cheaper to get on the internet.

In summary, the analysis identified four super-ordinate themes: inside the world of dance, emotional challenges of career, barriers and facilitators to seeking support and perceptions of support services. Having reflected upon the dancers experiences, the following section discusses these findings in relation to the literature and reflects upon the implications for practitioners.

CHAPTER 4: DISCUSSION

INTRODUCTION

This section will build upon the analytic findings by reflecting upon the four themes emerging from the analysis and their relation to the research literature. Due to the overarching links between specific areas of the literature, the discussion will be divided into two sections. The initial section will address the first two themes, (inside the world of dance/ emotional challenges of career) and consider these in relation to self-determination theory (Ryan & Deci, 2002) and additional aspects of the literature. The second section will discuss theme three (barriers and facilitators to seeking psychological support) and theme four (perceptions of support), by reflecting upon potential 'avoidance' and 'approach' factors (Kushner & Sher, 1989) which are implicated in seeking psychological support within the world of dance. Prior to a discussion of the findings, an illustration of the interconnection between the emerging themes is presented in Figure 1.



THEME 1

THEME 2

THEME 3

THEME 4



Self-determination theory



Approach / avoidance factors

1.0 ROLE OF DANCE: A VEHICLE FOR EMOTIONAL EXPRESSION?

The first sub-theme highlighted the diverse variety of roles played by dance within the lives and careers of the dancers. Whilst descriptions of enjoying the lifestyle, technical and performance aspects of their career were given, dance also played a vital role as a form of self-expression. This supports the work of Warren (1984), who considers dance to be a vehicle for emotional expression. An additional and novel factor relating to dance as a form of emotional expression which emerged from the data was the dancers' awareness of personal difficulties around verbal expression of emotions. This research found that certain dancers had discovered a way of 'transcending' language, by using movement as a primary form of emotional self-expression. These findings support Hanna's (2006, p.33) notion that 'dance can often express what words cannot'. However, it is not clear from the analytic findings whether dancers are attracted to this career because of the non-verbal form of expression or if the nature of the career reinforces this form of self-expression. The appeal of dance as a non-verbal form of emotional self-expression is in keeping with research addressing the personality profiles of ballet dancers (Bakker, 1988; Bakker, 1991). The high levels of introversion and emotionality reported in student ballet dancers lends further weight to the idea that individuals with specific personality characteristics may be attracted to a non-verbal expressive art form.

In addition to the findings which support the notion that dance offers a non-verbal form of emotional expression, the references to dance as a 'version of therapy' suggests that dance can also be experienced as restorative and healing. This is supported by two of the dancer's experiences of the therapeutic role played by dance at difficult times during their childhood, one as an adopted child who would not speak and the other after being removed from school following severe bullying. The introduction of dance movement therapy within mental health settings highlights the potential utility of this alternative approach as a way of facilitating emotional expression and working therapeutically with clients, in particular those who struggle with verbal expression of emotions.

Whilst the research highlights the role of dance as a form of self-expression, the analysis reports additional aspects of dance which contribute to its intrinsic appeal. Inherent within one of the dancer's description of the pleasurable aspects of their career, is reference to experiencing moments where something 'sort of takes over'. This implies that this dancer may be experiencing a state of 'flow' (Csikszentmihalyi, 2008). The pleasurable aspects of experiencing moments of 'flow' within dance may be a factor which contributes to dancers continuing to pursue their career even when the impact of this appears detrimental (Csikszentmihalyi, 2008). The dancer's rationale for pursuing their career supports Hamilton's (1997) notion that the desire to dance is intrinsically motivated. In their seminal work investigating intrinsic motivation, Ryan & Deci (2000, p.71) argue that for an activity to be intrinsically motivated, it must have an individual appeal, in terms of 'novelty', 'challenge' or 'aesthetic value'. Therefore, the rewards of the pursuit of a career in dance appear to be 'in the activity itself' (Deci & Ryan, 1991, p.241). However, further research is required in order to provide further exploration into the role of extrinsic motivation within the dancers' career.

1.1 THE EMOTIONAL CHALLENGES OF A CAREER IN DANCE AND THE ROLE OF SELF-DETERMINATION THEORY

Prior to additional discussion of the first two themes, it is important to draw upon the work of Ryan and Deci (2002), the founders of self-determination theory. This theory proposes that enhanced well-being and self-motivation result from the fulfilment of three basic psychological needs ('autonomy', 'competence', and 'relatedness'). Before reviewing the theory, the basic needs of 'autonomy', 'competence' and 'relatedness' will be defined. Deci and Ryan (1991, p.243) state that the need for 'autonomy' incorporates a desire to feel as if personal actions are internally driven and to have an input into determining these actions. 'Competence' is described as an individual's need to understand that certain actions will lead to desired outcomes and an ability to feel in control of determining these outcomes. 'Relatedness' is considered to include an individual's need to interact/care for others and feel that this is reciprocated in a genuine manner. An additional component of 'relatedness' consists of a general

need 'to feel a satisfying and coherent involvement with the social world' (Deci & Ryan, 1991, p.243). Self-determination theory is comprised of four sub-theories relating to human motivation (Ryan & Deci, 2002). Within the confines of this research, a full account of these sub-theories will not be addressed. However, an overview of cognitive evaluation theory and organismic integration theory will be interwoven within the discussion in order to demonstrate the link between the literature and the current analytic findings.

A large majority of the research into self-determination has investigated whether specific social contexts play a role in facilitating or hindering need satisfaction. This is supported by research within the sporting domain where Perreault, Gaudreau, Lapointe, and Lacroix (2007) reported a negative relationship between basic needs satisfaction and athlete burnout. Basic needs satisfaction has additionally been found to predict positive outcomes in self-determined motivation (Hollembek, & Amorose, 2005), and subjective vitality (Reinboth, & Duda, 2006) within the sports psychology literature. The impact of occupational demands upon basic need satisfaction is additionally reported in literature addressing the well-being and need-fulfilment of professional models (Meyer et al., 2007). These findings propose that the basic psychological needs, defined by self-determination theory (autonomy, competence and relatedness), may be thwarted by the need to comply with the wishes of others, the routine nature of work and the lifestyle of professional models. When reflecting upon the emotional challenges within the dancer's career, the inner world of dance has the potential to 'thwart' the fulfilment of basic psychological needs of 'autonomy', 'competence' and 'relatedness' (Ryan & Deci, 2002). The subsequent section of the discussion will provide an exploration of the analytic findings in relation to self-determination theory (Ryan & Deci, 2002) and additional research literature.

The sub-theme of 'being seen as a body' highlights the tension between the dancers' intrinsic motives for pursuing their career and the external demands placed upon them by those within the profession. The dancers portrayed the vital role of dance as a form of emotional self-expression but also reflected upon

the paradox of living and working in an environment which was 'sanitized', where they were treated as emotionless 'bodies', 'numbers' or 'robots'. The dancers' descriptions of how by being treated 'as a body', they began to experience a sense of the mind and body being separate, could be explained by organismic integration theory, a sub-theory of self-determination theory (Deci & Ryan, 1985). This theory explores the contexts which facilitate or hinder the 'internalization and integration of the regulation' of extrinsically motivated activities (Ryan & Deci, 2000, p.72). In doing so, it proposes that extrinsically motivated behaviours fall along a continuum according to the degree of internalization and integration of these activities. The least integrated activities, termed as 'externally regulated' are conducted to meet external rewards or demands. Further along the continuum of extrinsic motivation is 'introjected regulation', which describes behaviours that are partially regulated but not fully internalized as part of the self. At the other end of the continuum is 'integrated regulation', the most autonomous form of extrinsic motivation where behaviours are fully integrated, therefore, in keeping with an individual's ideals and needs. Fitting with this theory, the messages around being seen as a body appear to be subject to 'introjected regulation' where these are partially regulated but not fully internalized as part of the self.

Whilst the dancers described the role of intrinsic motivation within dance, a number of external rewards and motivators are introduced during training and the professional career. The description of work as a 'source of stress and de-stress' illustrates the conflict between intrinsic and extrinsic motivation within the profession. This area is also addressed within sports research, where Frederick and Ryan (1995) highlight how despite the inherent intrinsic motivations present within competitive sport; this is also an area where rewards, demands and targets are present. The tension between intrinsic and extrinsic motivation can be reflected upon in relation to cognitive evaluation theory (Deci & Ryan, 1985), an additional sub-theory of self-determination theory. This theory states that intrinsic motivation is facilitated by an environment which is conducive to autonomy or self-determination and can be 'thwarted' by conditions which result in perceptions that an activity has an external locus of causality. The analytic findings suggest that dancers are faced with the dilemma of how to marry the

internal motivations for pursuing dance with the external expectations of the working environment resulting in a 'thwarting' of levels of intrinsic motivation.

The impact of cognitive evaluation theory (Deci & Ryan, 1985) is particularly striking during the midpoint of the dancers' career where the dancers described reaching a point when the initial excitement dissipates and they are left with a realization that their work is just a job, like any other form of employment. Ryan and Deci (2000, p.71) consider that for an activity to be intrinsically motivated it must have intrinsic appeal for the individual in terms of 'novelty', 'challenge' or 'aesthetic value'. This suggests that the dancers reach a stage in their career where there is a reduction in levels of intrinsic motivation as the 'novelty' and 'challenge' (Ryan & Deci, 2002) of the career recedes. Within the analysis, this issue was particularly apparent in the experiences of dancers who had remained at the same rank in a dance company for a considerable period of time. The midpoint of the career seems to be a particularly salient period where intrinsic motivation could be enhanced through the setting of personally achievable goals. This is substantiated by the clinical recommendations of Hamilton and Robson (2006). They highlight the value of therapeutic interventions within the performing arts which place an emphasis upon the achieving a sense of joy from the art form, for example, the experience of flow (Csikszentmihalyi, 2008) in order to enhance levels of intrinsic motivation within the career.

The dancers described feelings of powerlessness and frustration when living and working in an environment where they had little control over their lives or career. This is supported by Schnitt (1990) who considers that many dancers have an impression of feeling in control of their bodies and yet exist within an environment where they are primarily controlled by teachers or choreographers. The dancers' experiences evoked a sense of working in an institutionalized environment where they described being treated 'like children' and trained to do what they are told. The inability to voice opinions, for fear of the negative impact this might have upon their career, would also appear to reduce the dancers' sense of control and autonomy.

In addition, the dancers explored the challenges of working in an environment where life and career are inextricably linked. This created difficulties in the formation and maintenance of relationships with those outside the profession and a struggle to maintain boundaries between work and personal life. Dancers also expressed a need to remain guarded around personal disclosures, due to the 'instant internal grapevine' which was ever present within the company. These challenges were augmented when they were required to spend lengthy periods of time living and working together whilst on tour. The competitive nature of the world of dance and the difficulties in trusting others within the company would seem to hinder the fulfilment of the basic need of 'relatedness'. In contrast, the shared experience of other dancers was also described as a valuable source of emotional support suggesting that there are elements of the companionship between dance company members which may go some way to fulfilling the basic need of 'relatedness'. Additionally, the inevitable link between life and career and the difficulties in maintaining relationships with those outside the profession seem to 'thwart' a second aspect of 'relatedness', the need 'to feel a satisfying and coherent involvement with the social world' (Deci & Ryan, 1991, p.243). During an exploration of emotional outlets from the career, the dancers described the value of activities outside the workplace and the need to confide in someone removed from the work environment. This may be a supplementary manner in which the dancers attempted to fulfil the need for 'relatedness' which may be lacking within their career.

The dancers highlighted the emotional challenges of transition periods within their career. Making a transition from training into a professional career was one such situation where the dancers experienced a sense of feeling ill-equipped to cope with the world outside the protective environment of vocational training. This led to a reduction in perceived levels of competence and self-esteem as a result of making the transition from being a 'big fish in a small pond' to a 'small fish within a very large pond'. Therefore, transition periods within the career also impacted on the dancers' fulfilment of the needs for 'competence' and 'autonomy'. Coping with injury was an additional transition period which was perceived as emotionally challenging. The dancers described the sense of purposelessness experienced when 'not being in use'. With this came an

inevitable sense of isolation and a realization that they were viewed as a dancer who could not be used, as opposed to an emotional being who was struggling to cope with the devastating impact of injury. Once again, this would seem to 'thwart' the basic needs for autonomy, control and relatedness leading to a reduction in emotional well-being and intrinsic motivation (Ryan & Deci, 2000) as the dancer is removed from their career, social network and form of self-expression. These findings would indicate an increased need for psychological support during times of injury or transition. This is augmented by the earlier findings of the pivotal role of dance as a form of emotional self-expression.

During the analysis, the problematic nature of reliance upon evaluation from external sources was explored. This was an area which was considered to develop during training and perpetuated throughout the career. These findings are supported by Hanna (2006), who suggests that the ongoing dependence upon evaluation from external sources originates early in training and persists throughout the dance career. The development of an external locus of evaluation appears to fit with person-centred theory. It seems that dancers' early experiences of training may lead to the acquisition of what Rogers (1959) defined as 'conditions of worth'. This can result in a disconnection from the individual's 'organismic experiencing' and the development of an external locus of evaluation, where self worth becomes dependent on winning approval and avoiding disapproval (Mearns & Thorne, 1999). This is substantiated by the analysis, where dancers described how their reliance upon an external locus of evaluation was linked to both self-esteem and motivation.

In addition, the absence of feedback was problematic for dancers. The analysis suggested that this could send the dancer spiralling into their own inner process of self doubt. This provides support for the idea that the dancer's self-esteem becomes reliant upon the feedback of others within the profession (Hamilton, 1997a). The reliance upon feedback from external sources would suggest that the dancers' sense of 'competence', as described by self-determination theory (Ryan & Deci, 2002) is dependent upon the nature of feedback which they receive. Deci (1975) argues that the inherent psychological meaning of feedback and rewards will determine the impact on motivation. He reports that

feedback, which is perceived as '*informational*', serves as a way of enhancing intrinsic motivation, whilst '*controlling*' or '*amotivating*' (communicating incompetence) feedback will result in a decrease in self-determination or 'competence'. These findings highlight that the frequent criticism faced by dancers (Barrell & Terry, 2003) has the potential to reduce levels of intrinsic motivation within their career and are of particular relevance for dance company staff and management. The importance of providing regular '*informational*' feedback to dancers within the company must be highlighted to those working with dancers as this appears to be a vital component in enhancing intrinsic motivation and therefore improving performance and well-being.

The dancers described the pain of letting go of a career which is often defined as 'a calling' (Wainwright & Turner, 2004). With this came the inevitable realization that their world was not a stage and an accompanying sense of loss of both extrinsic and intrinsic sources of motivation. In addition, the analysis reported a degree of uncertainty around knowing when was the right time to let go of something that they 'love' and were 'born to do'. This highlights the importance placed upon the role of dance, as a way of life, and a core part of the dancer's identity. As Greben (2002) suggests, this results in the simultaneous loss of both career and identity. In addition, the analysis relating to the pain of contemplating career transition illustrated the intense sense of loss within the lives of the dancers. This presents an interesting paradox. Despite the physical and emotional sacrifices endured during the career, the pain of letting go of this world seems just as great. These inconsistencies suggest that there is clearly a need to unravel the tensions and conflicts which emerge around the prospect of career transition. A survey of 571 dancers, by the Dancers' Career Development (2007), a British organization offering practical, financial and psychological support to professional dancers making a career transition reported that over 50% of the dancers who retrained using this service remained within dance/other arts related professions. This suggests that for many dancers making a career transition involves an evolution of the self, where dance still remains a large part of the individual's identity.

Several dancers experienced a sense of dissatisfaction and struggled to accept their body shape because of internalized ideals in relation to weight and appearance within the profession. This supports findings of Hamilton (1997c) and Pierce and Daleng (1998) who suggest that the dance world can fuel a preoccupation with body image. However, both of these pieces of research suggest that this is particularly striking in ballet dancers. In contrast, this analysis found that the struggles with body image were present in ballet, contemporary and musical theatre dancers. Although it is not possible to generalize this analysis to the dance population as a whole, these findings are similar to those of Hamilton (1998) who reported a negative perception of body image in three out of four female dancers, regardless of technique. However, as Hamilton (1998) proposes, the body image related concerns expressed by the dancers within this analysis may have been influenced by early experiences of balletic training.

When reflecting upon the impact of early dance training, Ackard, Henderson, & Wonderlich (2004) further reported that childhood participation in dance training has been found to be associated with disordered eating behaviour, in particular 'Bulimic behaviours' and a 'Drive for thinness' on the Eating Disorders Inventory (Garner, 1991). The findings of Ackard et al. (2004) further substantiate the notion that early dance training may have an impact upon later body image perceptions. Ackard et al.'s (2004) use of a large undergraduate student sample, who were no longer involved in dance as a vocational career, provides an additional dimension to understanding the potential impact of early dance training upon body image distortion in other populations. Whilst it is clear that further research would be required in order to investigate whether style of dance or length of training are additional factors associated with body image perception and disordered eating behaviour. These findings provide a novel insight for counselling psychologists by highlighting the need to consider the impact of early dance training during assessment and therapeutic interventions with clients who present with disordered eating or body image distortion.

An additional theme which emerged from the analysis related to male perceptions of eating disorders. From the male dancers descriptions, it

appeared that disordered eating in men was perceived as being 'skinny' or as a 'mental problem', whilst the women were considered to experience 'eating problems' or 'anorexia' and 'bulimia'. This suggests that the male dancers included in the study had a tendency to view female disordered eating as more serious than that experienced by men. Whilst the literature highlights a greater incidence of eating disorders amongst women than men with 'The American Psychiatric Association' reporting a ratio of ten females to every male eating disorder patient (2000).

The dancers described the feelings of needing to strive for the elusive goal of perfection. This is supported by Solomon et al. (2002) who found that the high levels of perfectionism and competitiveness in dancers resulted in a constant striving for perfection within their art form. The dancers' experiences indicated that the drive for perfection was internally and externally generated within their career. When placing this in the context of Multidimensional Perfectionism Scale (Hewitt & Flett, 1991), the dancer's sense of perfectionism would be conceptualized as both self-oriented and socially prescribed. These findings are of interest to counselling psychologists. Larson and Chastain (1990) reports that perfectionists can become emotionally withdrawn from relationships resulting in an inability to seek help from mental health professionals due to fear of disclosure. Therefore, this suggests that high levels of perfectionism within the dance population may act as a barrier to seeking psychological support.

The descriptions of the competitive nature of the dancers' career evoked a sense of inhabiting a world where only the strongest and fittest survive. The inclusion of language such as 'the weak one in the pack', 'a pack of hyenas' and 'the first one to crack will be out of the race' seemed to be particularly evocative. This generated a novel theme in which parallels were drawn between the dancer's experiences and Darwin's use of the term 'survival of the fittest'. The dancers' descriptions of needing to maintain an image of both psychological and physical strength fit with the concept of 'adaption'. This is described by Lorenz (1966, p.7) as 'the process which moulds the organism so that it fits its environment in a way achieving survival'. This research suggests that dancers have to adapt their behaviour in order to survive within an environment where

the balance of power is constantly evolving. In keeping with evolutionary themes, the dancers illustrated how those who fail to withstand the pressure fall by the wayside resulting in other dancers profiting from the misfortune of those who have gone before.

2.0 BARRIERS AND FACILITATORS TO SEEKING PSYCHOLOGICAL SUPPORT/ PERCEPTIONS OF SUPPORT

The analytic findings suggest a variety of coping mechanisms, emotions and experiences which play a role in deterring dancers from potentially making use of psychological support services. Research addressing potential barriers and facilitators to seeking support (Kushner & Sher, 1989), distinguished between 'approach' and 'avoidance' factors. These were considered to be factors which might increase or decrease the likelihood of individuals seeking psychological support. Within the analysis, a variety of 'approach' and 'avoidance' factors emerged from the data. An exploration of the role of 'approach' and 'avoidance' factors will now be addressed in relation to the analytic findings.

2.1 'AVOIDANCE FACTORS'

The analytic findings suggested that a need to be self-reliant, denial or concealment of emotions, stigma, concerns around confidentiality and potential fears of the negative impact of counselling upon career were potential 'avoidance' factors. When reflecting upon these findings in relation to the literature certain parallels and contrasts are apparent. Vogel et al. (2007) reported that individuals who were uncomfortable with disclosure of distressing events, and unable to see perceived benefits of disclosure, tended to hold less positive views towards seeking support. Whilst the findings of the analysis suggested that denial or concealment of emotions were a barrier to seeking support, this only provides partial support of Vogel et al's (2007) research. Although certain dancers highlighted the need to be self-reliant, this appeared to come from a perspective of being self sufficient. Therefore, in contrast to Vogel et al. (2007), the perceived benefits of disclosure were not directly implicated within the analysis.

Within the analysis, there were differing accounts regarding the dancer's management of emotional challenges within the career. Several of the dancers, who had not experienced counselling, described concealing or denying emotions and the need for self-reliance as a coping strategy. This was contrasted by a dancer, with experience of counselling, who described the value of openly acknowledging her feelings and difficulties. When reflecting upon this contrast, it is difficult to assess whether her openness to acknowledging feelings was the result of differences in coping strategies or a consequence of experiencing therapy. Whilst this contrast provides potential insight into the impact of therapy upon coping strategies, further investigation is required in order to compare potential differences in coping strategies in dancers who had received therapy with those who have no history of therapy.

From the analysis, there were distinct gender differences in terms of which dancers had elected to seek psychological support. Two of the female dancers were currently in personal therapy, whilst a further three female dancers made reference to talking about emotional concerns with a homeopath. In contrast, none of the male dancers were currently in personal therapy. The impact of gender is supported by Komiya, Good and Sherrod (2000), who reported that gender (male), decreased levels of distress, fear of emotions and stigma accounted for 25% of the variance in perceptions towards seeking support. Although levels of distress and fear of emotions were not apparent in the analysis, the impact of stigma and gender are similar to the findings of Komiya et al. (2000). The gender differences in willingness to seek support highlight the importance of targeting male dancers when working therapeutically with dancers.

The dancers' descriptions implied that a considerable amount of energy was invested in maintaining an image of strength and the absence of vulnerability. Therefore, the role of impression management appeared to be vital in order to survive and progress within a dance career. This appears to be in keeping with the work of Goffman (1969), who draws parallels between social interactions and theatrical performances, in terms of the need to portray an image which is in keeping with the desired qualities of the group. The utilization of impression

management strategies suggest that dancers may feel the need to 'perform' both on and off stage but to different audiences. The need to conceal any signs of vulnerability is further supported within the analysis by the earlier evolutionary theme of 'survival of the fittest'.

The dancers expressed the perception that if others within the company became aware they were seeking psychological support, this might have a negative impact upon their career. Once again, parallels can be drawn between the dancers' fears around seeking psychological support and Goffman's work on stigma. Here he states that 'a discreditable disclosure in one area' has the potential to induce doubt on other aspects of the life of the individual (Goffman, 1969, p.71). In the case of dancers, the analysis suggests that if the dancer was known to be seeking support, this might throw doubt upon their dance abilities, which may hinder career progression. This is further supported by research in other occupational settings where Carroll (1996), highlights a potential link between fears around confidentiality and concerns that seeking psychological support may negatively impact upon career progression.

In keeping with the work of Richardson and Cialdini (1981), the dancers described making use of both 'direct' and 'indirect' tactics of impression management. Their descriptions of hiding vulnerability seemed to extend to the need to conceal any emotional difficulties. This is supported by the dance psychology research where Hamilton (1991, p.51) considers that 'performers learn to deny vulnerability in the presence of others'. Within the analysis, the inability to maintain this image evoked feelings of shame and the notion that any display of inappropriate emotions may bring 'dirt' into an environment which was described as 'sanitized'. In addition, the use of 'indirect' impression management tactics was also illustrated by the need for distancing from anyone who openly acknowledged the fact that they were seeking psychological support. These findings have implications for the work of counselling psychologists as Franklin (2003, p.7) cites the importance of understanding the 'impact and constraints' of the workplace, in order to assist in the provision of appropriate interventions. Therefore, the need for dancers to distance themselves from those who were known to be seeking support is a particularly

important finding for psychologists to reflect upon when working within a dance company setting.

An additional factor which the dancers described in relation to seeking psychological support was the avoidance of stigma. This is supported by the findings of 'Fit to Dance 1' (Brinson & Dick, 1996) which identified a stigma associated with anything psychological within the world of dance. The analytic findings are further supported by the literature which reports that fears around social stigma have been found to be associated with decreased help-seeking behaviours (Sibicky & Dovidio, 1986, Corrigan, 2004). These findings have implications for practitioners working with dancers. Vogel et al. (2007) suggests that it may be important to target stigma at the level of the individual. They propose that the provision of information, through workshops and internet information may be a potential strategy in assisting individuals to cope with or overcome the impact of internalizing negative effects of stigma. Therefore, the recommendations of Vogel et al. (2007) would assist in the promotion and education around psychological support services within the world of dance. The high degree of receptiveness to the distribution of written information regarding support services following the research interviews adds further weight to the notion that dancers would appreciate further education and clarification around potential psychological services available to them.

An additional fear which emerged during the analysis related to confidentiality. The dancers expressed fears that if dance companies were to have direct links with counsellors or psychologists they would be concerned about the confidentiality of these services. These fears have also been reported within other settings with Gyllensten et al. (2005) reporting that concerns relating to confidentiality were a potential barrier to seeking support within finance organizations. These concerns were often linked to fears that the content of sessions might be leaked to others within the organization. Similar findings have also been reported by French et al. (1997) who found that perceptions relating to confidentiality impacted on the employees' decision to make use of psychological support services.

The analysis found that a number of dancers' fears relating to confidentiality originated from witnessing or experiencing situations where boundaries around confidentiality were not adhered to by professionals within vocational dance schools. This highlights the damaging impact of breaches in confidentiality and addresses the difficulties of working with young people within a school setting where ethical issues around boundaries may become complicated by the age of the students (Bor, Ebner-Landy, Gill, & Brace, 2002). The insight provided by the analysis into the impact of early experiences upon the long-term impact of dancers' perceptions around the confidentiality of psychological support services has the potential to alter the perceptions of future generations of young dancers. Hesketh (2000) highlights the need for counselling psychologists to reflect upon specific ethical issues which might arise within different organizational contexts. It is clear that adherence and clarity in relation to boundaries around confidentiality within vocational dance schools provides the potential to alter perceptions of current future generations of dancers.

2.2 'APPROACH FACTORS'

The dancers' experiences highlight the importance of faith in the confidentiality of psychological support services. However, whilst fears around confidentiality have been found to act as an 'avoidance' factor, they also play a vital role as a potential 'approach' factor. This is supported by Athanasiades et al. (2008) who describe how trust in the confidential ethos of workplace counselling services can serve as a motivating factor for self-referral to these services. When addressing preferences around the location of psychological support, the dancers expressed the view that this would need to be available away from the workplace. These views were grounded in fears around confidentiality and a sense that it would be important to seek support in an environment which was 'removed from the problem'. Therefore, the analytic findings suggest that the location of psychological support away from the dance company would be a crucial 'approach' factor within the world of dance.

Despite the dancers' favourable views in relation to having access to psychological support, many dancers were unaware of sources of support

available to them and uncertain as to how information might be accessed. Within the analysis, the dancers described feeling lost and uncertain as to how they would go about locating psychological support, and valued the idea of having access to information around these services. This was illustrated within the research process, by the dancers' positive responses to receiving information about support agencies as part of the debriefing process, and their reports of being unaware of these services.

The dancers were eager for dance companies to provide information and a choice of psychological support services. However, there were differing preferences around how they would like to access information regarding sources of support. Some dancers showed a preference for discreet access, whilst others valued the idea of frank and open discussion within the company. The issue of feeling empowered by the company to be able to care for their own emotional well-being seemed to be a key factor 'approach' factor within the analysis. This supports the recommendations of Brinson and Dick (1996) who propose that dancers need to be encouraged and given permission to make use of psychological support services. Therefore, these findings highlight the importance of informing and empowering the dancers to seek psychological support. The dissemination of information by dance companies would be a crucial part of this process. This is endorsed by research in other work place settings where Athanasiades et al. (2008) highlights the value of the provision of clear information relating to the purpose and availability of workplace and off site counselling services. The findings of Athanasiades et al. (2008) are expanded upon by Walton (2003), who suggests that employees are more likely to make use of workplace counselling if information about this service is available and the management is supportive of the utilization of psychological therapy.

In the analysis, the dancers expressed the view that having access to a practitioner who had insight into the world of dance would facilitate the process of seeking psychological support. The perceptions that 'insider' knowledge was required, and the description of dancers having a tendency to be 'protective of their world', would lend support to the idea that many dancers may view

psychologists as 'outsiders' (Hamilton & Robson, 2006, p 2). Additionally, there was an emerging theme around a potential frustration relating to trying to explain to a practitioner how 'the dance world revolves around its own axis'. The consequences of feeling misunderstood by a counsellor are highlighted by one dancer's negative experience of counselling, which she describes as, an 'expensive chat...to not a very good friend'. Within the 'Fit to Dance 1' survey, dancers reported that counsellors would need to have some experience of dance, in order to understand their specific needs, and be of support (Brinson & Dick 1996). Whilst the analytic findings support the notion of the need for a basic knowledge and understanding of the dance world, they do not suggest that personal experience of dance is essential. Therefore, this research supports Hamilton and Robson's (2006) recommendation that it is important for practitioners to gain an insight into the experiences of those within this 'culture' in order to inform and guide their practice.

A number of emotional challenges were experienced by the dancers within their career. These included coping with transitions/injuries, the competitive nature of their career, disordered eating, body image concerns, external locus of control within the career and low self-esteem. The dancers described a variety of sources of emotional support which were valued during their career. For some, the experience of psychotherapy was considered valuable. It was apparent that, for these dancers, counselling seemed to provide an environment where they could gain a sense of fulfilling 'basic needs', as proposed by self-determination theory, which may be 'thwarted' within the workplace (Ryan & Deci, 2002). 'Relatedness' appears to be enhanced by the safety of the environment which allowed dancer in therapy to let go of the need to manage the impressions of others and move towards a greater sense of personal congruence. The view of being seen as more than 'just a body', and the opportunity to freely express emotions was also implicated in this process. When reflecting upon the earlier findings of dance as means of non-verbal expression, this presents an interesting shift in relation to the medium used for emotional expression. This suggests that for some dancers in personal therapy there had been a shift beyond movement as form of emotional expression to incorporate the vocal expression of emotions.

Within the analysis all dancers reported having experience of accessing the services of alternative health practitioners. The dancers' positive views relating to seeking support from alternative health practitioners are substantiated by the findings of Schnitt and Schnitt (1991), who suggest that many dancers tend to place their trust in more holistic forms of health care as a source of physical and emotional support. The analytic findings suggested a variety of reasons behind the dancers' decisions to make use of alternative health services. These included a lack of faith in conventional medicine, negative experiences of counselling, preferences towards a more holistic approach to treatment and the less clinical nature of the environment. These appear to be similar to the findings of Astin (1998), who reported that dissatisfaction with conventional medicine, perception of greater control and increased compatibility with an individual's philosophy of illness and health as key factors to relating to the general public's decision to seek support from alternative health practitioners. Several dancers described seeking support from a homeopath recommended by other dancers within the company. This implies that despite a lack of trust within the profession, dancers may rely upon other dancers for personal recommendations around meeting their physical and psychological support needs.

The dancers' experiences also provided evidence of a lack of information relating to emotional support services, and in some cases, a mistrust of the health care system. A number of these findings are supported by Lee (1992), in her investigation of the health care selection process in dancers. The themes relating to the use of other dancers as sources for referrals, confusion/misinformation about health care, and mistrust of the health care system are supported by this analysis. However, a potential preoccupation or denial of health related problems reported by Lee (1992) differs from the analysis of this research.

Three additional themes emerged from the analysis in relation to the decision to utilize forms of alternative medicine. These were the importance placed upon body-orientated therapies, a less clinical environment and the absence of stigma related to making use of these services. It was apparent from the

interviews that three of the dancers received emotional support from a homeopath but this was considered more acceptable under 'the guise of homeopathy' highlighting the role of reduction of stigma as a potential 'approach' factor to seeking psychological support. Additionally, the attraction to body-orientated therapies may be in keeping with the earlier theme around the body as a form of emotional expression.

During the exploration of associations between counsellors and psychologists, the dancers' descriptions indicated confusion around the potential similarities and differences between practitioners. The word 'counsellor' appeared to evoke less fear than the word 'psychologist'. Dancers' perceptions suggested that psychologists were viewed as medical, scientific and more likely to explore problems in a deeper academic manner. This appeared to instil fear amongst some of the dancers, as one felt daunted by the prospect of seeing a psychologist, whilst another described a fear around what she might discover about herself. These findings have ramifications for psychologists and dance companies, as it appears that the manner in which psychological support services are presented may be a key factor facilitating the process of seeking psychological support.

Goffman's (1969) theory of 'impression management' has been evident in a number of guises throughout this research. Within the world of dance, impression management has been used in order to protect the dancer and enhance career progression, sometimes to the detriment of the emotional well-being. Perhaps 'impression management' could also be introduced as a strategy to alter perceptions and reduce stigma around seeking psychological support. A reframing of psychological support may assist in reducing potential fear or stigma within the world of dance. This is substantiated by Komiya et al. (2000) who consider that it may be necessary, as a fear reducing strategy, to redefine counselling services as 'consultations' or 'coaching'. An illustration of the positive reframing of psychological support services is apparent in the case of New York City Ballet with the redefinition of the psychologist as 'wellness co-ordinator'. In addition, many vocational schools now make use of the term 'performance psychologist' when introducing the service to their students.

CHAPTER 5: GENERAL OVERVIEW AND CONCLUSIONS

In keeping with Goffman's (1969) analogy of life as a theatre, this research study has gone behind the scenes and explored the phenomenological world of professional dancers. During the analytic process, four key themes emerged from the data: 'inside the world of dance', 'emotional challenges of career', 'barriers and facilitators to seeking psychological support' and 'perceptions of support'. These themes were reviewed in relation to the research literature, in particular, the role of self-determination theory (Ryan & Deci, 2002) and 'approach/avoidance' factors (Kushner & Sher, 1989). The research has generated a number of factors which are of value to the work of counselling psychologists. Following the recommendations of Kogan (2002), these findings conclude that the challenge for psychologists working within the performing arts is to generate novel and innovative ways of working with the challenges inherent within these professions. This appears to be particularly salient due to the suggestions that dancers have a tendency to view psychologists as 'outsiders' who lack an appreciation of the artistic process (Hamilton & Robson, 2006). The following section will highlight the key findings of the research and reflect upon the implications for counselling psychologist and researchers in the field.

1.0 Implications for Counselling Psychologists

The use of dance as a form of emotional expression is highly relevant in informing the practice of counselling psychologists. This finding is particularly significant given the high levels of emotionality and introversion reported in dancers within the literature. If dancers have high levels of emotionality and a tendency to rely upon movement as a primary form of emotional expression, what are the potential implications when a dancer is unable to dance due to injury or following a career transition? Might this be a time where additional psychological support is needed? Additionally, what are the ramifications for counselling psychologists when working with a population who have a tendency to communicate emotions through movement? When reflecting upon the use of the body as a form of self-expression, it is interesting to observe that all the

dancers within this research have sought support from alternative health practitioners. Many claim to prefer the 'holistic approach' and cite a preference for alternative therapy due to the greater focus upon the body. Counselling psychologists might find it useful to understand a dancer's subjective experiences through the use of body-orientated therapies, for example, sensorimotor psychotherapy (Ogden, Minton & Pain, 2006).

An emerging theme within the analysis was the tension between how to marry the intrinsic motives for pursuing a career in dance with the extrinsic demands placed upon dancers within their profession. These findings suggested that there are a variety of occupational demands inherent within the dance career which play a role in hindering 'need satisfaction' as defined by self-determination theory (Ryan & Deci, 2002). Coping with injury/transitions, the reliance upon an external locus of evaluation, institutionalization, coping with the midpoint of the career, working within a close knit environment and the intense focus of the career were factors which had the potential to 'thwart need satisfaction'. These research findings highlight the importance for counselling psychologists to make a thorough assessment as to how the basic needs of 'autonomy', 'competence' and 'relatedness' may be fulfilled or 'thwarted' within the career. This will assist in the development of effective therapeutic interventions in order to enhance the 'basic needs' of dancers and improve well-being/intrinsic motivation.

When providing psychological support within the dance profession the research addressing 'approach' and 'avoidance' factors (Kushner & Sher, 1989) informs the practice of counselling psychologists as a number of 'approach/avoidance' factors emerged from the analytic findings. The issue of clear communication relating to the nature and confidentiality of psychological support services is a crucial factor. Transparency is paramount in facilitating the utilization of these services in a culture where trust can be hard to gain, and suspicion fostered. It is clear from the findings that dancers are keen to have further information relating to support services and would value being able to obtain this through dance companies. This would suggest that both psychological practitioners and company management have a vital role to play in the dissemination of

information. From the perspective of practitioners, it is important for clear information to be distributed to the dancers. Therefore, any printed material should aim to attempt to reduce fear and stigma by providing dancers with reassurances about the confidentiality of psychological support services. An additional insight which arose from the research was the potential benefit of internet support services. This is an area which warrants further investigation as this format of information and therapy may be particularly useful to dancers who spend long periods on tour or are unable to finance personal therapy. Additionally, one dancer described the potential value of a web chat service as a way of providing a sense of connection with other dancers during periods of injury. This highlights the potential benefit of support and companionship from other dancers with the shared experience of coping with the emotional and physical challenges of injury.

The fears around confidentiality expressed by the dancers' highlights the sensitivity of the location of psychological support services. The analysis reported that the ability to access psychological support removed from the workplace environment was instrumental in the utilization of these services. Therefore, these findings indicate that counselling psychologists should be attached to dance companies but removed from the workplace. The findings also highlight the importance of mindfulness in relation to the manner in which psychological support services are presented to the dancers. The redefinition of emotional support as performance coaching would be a way of reducing potential stigma and facilitating the use of these services. Additionally, the implications of the findings suggest that it is important for counselling psychologists to liaise with dance company management in order to provide education about the value of psychological support. The need for communication between psychological practitioners and dance company management is crucial in the dissemination of information, and the empowerment of dancers, through frank discussions as to how psychological support services are perceived within the company.

The findings of the current research propose a number of potential psychological and physical challenges that dancers may encounter during their

career. These include perfectionism, coping with injury, making a transition to a professional company, the midpoint in the career, career transition, relationship issues, sexuality, coping with working in an institutionalized environment, body image distortion and eating disorders. The research highlights that periods of transition can be particularly challenging for dancers. In addition, the issue of body image and eating disorders is also a complex area within this population. When reflecting upon dance and eating disorders, the findings from the literature suggest that due consideration around participation in dance as a child should be a key factor when assessing all clients with eating disorders and body image related issues.

The qualitative nature of this research has provided an in-depth insight into the subjective experiences of the dancers who participated in the study. Additionally, there is much to be learnt from research based upon larger populations when reflecting upon the psychological challenges of the career. Each of the presenting issues which emerged from the analysis is commonly encountered when working with a range of clients. However, it is crucial for counselling psychologists to reflect upon how these issues relate to the occupational demands of a career in dance during assessment and when working therapeutically with professional dancers.

The analytic findings demonstrate the value placed by dancers upon working with practitioners who have an insight into their world. This is in keeping with the Division of Counselling Psychology Professional Practice Guidelines (2005) which highlights the importance of gaining insight into the broad range of 'life experiences' which may be encountered by clients who present for therapy. Therefore, knowledge of the dance psychology literature, attendance of dance performances, and undertaking further research focusing upon the subjective experiences of professional dancers would enhance counselling psychologists understanding of this client population. Networking with other professionals working in the field would be an additional manner in which to understand the inner workings of the world of dance.

1.2 Implications for future research

In order to further the understanding and facilitation of psychological support seeking it would be useful to extend this small scale research to a larger population of dancers using more detailed surveys or questionnaires. This would permit the findings to be generalized to a larger target population. The inclusion of dancers with a variety of experiences of therapy within this research highlights the need for further exploration using more homogeneous samples. A comparison of perceptions of psychological therapy between dancers with and without prior experiences of therapy would further enhance the understanding of barriers/facilitators to seeking psychological support and general perceptions of psychological therapy within this profession.

As a research methodology, IPA does not seek to make comparisons between samples but instead focuses upon the experiences of the individual. Within this research, there appeared to be gender differences, in terms of willingness to seek psychological support. Future research could explore this area in relation to potential differences in emotional coping strategies between male and female dancers.

The links between emotional challenges within the dance career and self-determination theory is also an important area for further investigation in how best to improve the well-being and intrinsic motivation of dancers. An investigation into the impact of teaching practice in relation to self-determination theory will promote the well-being of future generations of students and professional dancers. Additional benefits would emerge from an in-depth study into the perception of psychological support services from the perspective of dance company management. Counselling psychologists should be mindful of the fact that dance teachers, directors and choreographers are the product of previous dance generations. Therefore, it may be interesting to reflect upon the management's perception of the role of psychology within the career. If these perceptions are not explored, there is a danger of history repeating and dancers feeling unable to access services because of perceptions and the culture instilled in those who have gone before.

2.0 CONCLUSION

In summary, what can be concluded from the exploration of the phenomenological world of professional dancers? Firstly, this research has facilitated an in-depth insight into the experiences of eight professional dancers. In doing so, it has provided counselling psychologists with inside knowledge of the inner world of dance and additional awareness around potential emotional challenges which may be encountered when working with those within the profession. The findings relating to the importance of dance as a means of self expression will inform the practice of counselling psychologists and enhance the understanding of the subjective experiences of professional dancers. The exploration of 'approach' and 'avoidance' factors (Kushner & Sher, 1989) has generated findings which have the potential to enhance the availability and accessibility of psychological support within the world of dance. The analysis highlights the role of impression management in concealing signs of weakness or emotional vulnerability. This was additionally linked to fears around potential stigma in seeking psychological support and highlights the importance of the dissemination of information relating to the confidentiality of counselling services within the world of dance.

The research findings highlight the fact that psychology has an important role to play within the dance profession by shifting the focus away from perpetuating the historical culture of martyrdom to promoting dancers' well-being. The humanistic values underpinning the work of counselling psychologists suggest that this profession has much to offer the field of dance. Hamilton and Robson (2006, p.2) propose that, in addition to a solid clinical background, a 'psychologist's credibility will ultimately depend on the ability and willingness to understand and appreciate each art form's language, structure and values'. It is clear that those involved within the dance profession must join together with psychological practitioners and researchers in a collaborative process to enhance the well-being of current and future generations of dancers. As Brandfonbrener (as cited in Harman, 1991, p. 17) states, 'If we sit back and do not take active roles in shaping this speciality, we will have only ourselves to blame when it fails to achieve its full potential'.

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APPENDIX 1 INFORMATION SHEET FOR DANCE COMPANIES

Please allow me to introduce myself, my name is Alison Stuart and I am a student at City University in London who is currently completing a doctorate in Counselling Psychology. I am an ex professional dancer and have a particular interest in dancers and psychological well-being. For my doctoral research project, I have chosen to look at the issue of dancers and psychological and emotional support.

Research examining the issue of emotional and psychological support in dancers is scarce and little is known about their perception of services that are available. For my research, I intend to carry out a qualitative study on a small sample of dancers in order to try and access their experience of this type of service. The research will aim to investigate what dancers feel they need in terms of emotional and psychological support. In addition, it will explore what dancers believe influences their ability to seek support, and their perceptions of the role played by counselling or psychological therapy in their lives.

Through carrying out this research, I hope to raise awareness around the little studied issue of dancers and their emotional and psychological needs. I also hope that the research will provide an insight into the therapeutic experiences of dancers. This may in the future assist in the provision of appropriate tailored services. In addition, I hope that the research will be of value to those working with dancers and may enable a deeper understanding of dancers' needs within the profession of Counselling Psychology.

For the research I would like to recruit a small sample of dancers who would be willing to participate in an interview. I would like to interview dancers who are currently employed by a British dance company. Dancers do not need to have had any previous experience of therapy. The interview will be conducted by myself, will last approximately one hour and will take place in a confidential setting that is convenient for the participant. During the interview dancers will be invited to share their thoughts regarding what support they feel they need and their perceptions of psychological therapy.

I would like to record the interviews for transcription and analysis later, and participants will therefore be asked to provide written consent. The interviews are conducted in confidence and all the data used in the research will be made anonymous. Dancers will have the right to withdraw participation at any time should they so wish.

My research has received ethical approval from the University but I would be very happy to complete any other ethical procedures that your company may consider necessary. If you have any questions or would like further information about the research, including a copy of the proposal, I can be contacted on [REDACTED] or at [REDACTED]. The research project is being supervised by Dr D. Danchev ([REDACTED]).

I would be very grateful for your assistance in the recruitment of participants. I have attached a recruitment flier and information leaflet that can be displayed in suitable locations or emailed to your dancers.

APPENDIX 2

RECRUITMENT FLIER

Are you a professional dancer who is currently employed in a British dance company?

Would you be willing to share your thoughts on what dancers might need in terms of emotional or psychological support?

My name is Alison Stuart. I am an ex-dancer and a student at City University who is completing a doctoral research project looking at the issue of emotional and psychological support in dancers. I am looking for dancers who would be willing to share their thoughts and experiences in confidence. You do not need to have any experience of counselling or therapy. If you would be interested in participating in the research please contact me on [REDACTED] or by email ([REDACTED]).

This research is supervised by Dr. D. Danchev

([REDACTED])

APPENDIX 3 INFORMATION FOR DANCERS

Thank you for your interest in participating in this research. Please allow me to introduce myself, my name is Alison Stuart and I am a student at City University in London who is currently completing a doctorate in Counselling Psychology. As an ex-dancer I have a particular interest in dancers and psychological well-being. For my doctoral research project, I have chosen to look at the issue of dancers and psychological and emotional support. The aim of the research is to investigate what dancers feel they need in terms of emotional and psychological support. In addition, it will explore what you believe influences your ability to seek support and your perceptions of the role played by counselling or psychological therapy within the dance profession.

Through carrying out this research, I hope to raise awareness around the little studied issue of dancers and their emotional and psychological needs. I also hope that the research will provide an insight into the therapeutic experiences of dancers. This may, in the future, assist in the provision of appropriate tailored services. In addition, I hope that the research will be of value to those working with dancers and may enable a deeper understanding of dancers' needs.

For the research I would like to recruit a small sample of dancers who would be willing to participate in an interview. I would like to interview male dancers who are currently employed by a British dance company. You do not need to have had any previous experience of therapy. The interview will be conducted by myself, will last approximately one hour and will take place in a confidential setting that is convenient for you. During the interview, you will be invited to share your thoughts regarding what support you feel is needed and your perceptions of psychological therapy.

I would like to record the interviews for transcription and analysis later, and you will therefore be asked to provide written consent. All data provided will be anonymous, and you will have the right to withdraw participation at any time should you so wish.

The research will be conducted according to the Code of Conduct and Ethical Principles of the British Psychological Society under the supervision of Dr. D. Danchev ([REDACTED]). I will be happy to answer any further questions that you might have.

If you feel that you would like to take part in the research or feel you would like more information please contact me by email at [REDACTED]

**APPENDIX 4
DEMOGRAPHIC INFORMATION**

<u>AGE</u>	<u>NUMBER OF PARTICIPANTS</u>
21-25	1
26-30	6
31-35	1
<u>DANCE STYLE</u>	
Ballet	5
Contemporary/ Musical Theatre	3
<u>NUMBER OF YEARS AS PROFESSIONAL DANCER</u>	
0-5 years	1
6-10 years	3
11-15 years	4
<u>NATIONALITY</u>	
British	5
French	1
Canadian	1
Brazilian	1
<u>LEVEL WITHIN COMPANY</u>	
Soloists	2
First Artists	2
Corps de ballet/ Ensemble	4

APPENDIX 5

RESEARCH INTERVIEW SCHEDULE: PILOT STUDY

INTRODUCTION

- Researcher introduction.
- Explanation of research.
- What this will entail and why this is being done.
- Reading and explanation of consent forms followed by signing.
- Completion of demographic data form.

Switch on voice recorder

PATHWAY TO CAREER IN DANCE

I would like to start the interview by asking you a few questions about your dance training.

- Can you talk about your pathway to becoming a professional dancer?
- How many years did you train to be a dancer?
- What made you want to become a professional dancer?
- What do you enjoy about your career?

PSYCHOLOGICAL SUPPORT IN DANCE

I would now like to hear your views on the provision of emotional and psychological support for dancers.

- What are your thoughts on dance companies having access to counsellors or psychologists?
- Did you have access to a counsellor or psychologist during your career or whilst training?
- Have you had previous experience of counselling?
- What forms of emotional support do you feel might be useful to you?

EMOTIONAL AND PSYCHOLOGICAL DIFFICULTIES

- Do you think that there are psychological and emotional difficulties which are common amongst dancers?
- Are there specific stages in a dancers' career where they might need extra emotional support?
- What kind of emotional or psychological difficulties do you experience?

- Whom do you turn to when you feel in need of emotional support?
- What sort of person might you seek support from?
- What are your views on seeking support from alternative health practitioners?

SEEKING SUPPORT

- Is there anything that might make it difficult for you to be able to seek help from a counsellor or psychologist?
- *(If yes)* Can you say more about these difficulties?
- Is there anything that might assist you in being able to seek help from a counsellor or psychologist?
- *(If yes)* Can you say more about what might be helpful?
- If you decided to seek support from a counsellor or psychologist do you have any preferences as to where you would like them to be located?

PERCEPTIONS OF COUNSELLING

- I would like you to imagine that you are a counsellor or psychologist working within a dance company. What kind of difficulties do you think dancers might consult you about?
- When I say the word counsellor, what comes to mind?
- When I say the word psychologist, what comes to mind?
- What particular qualities or abilities would you look for in a potential counsellor or psychologist?
- If another dancer told you that she was considering starting counselling and asked you what you think counselling might be like. What would you say to them?
- Is there anything else that you would like to add to what we have discussed?

That completes the main part of the interview. As this interview is still in the stage of being piloted, I would now like to ask you some questions about taking part in the interview.

- What was it like for you to take part in this interview?
- Did you find the questions easy to understand?
- *(If no)* Which questions did you find difficult to understand?
- What did you think about the way in which the questions were phrased?
- What was helpful in terms of allowing you to express your experiences?

- Was there anything that was unhelpful in terms of allowing you to express your experiences?
- *(If yes)* Can you say more about what was unhelpful?
- What did you think about the way in which I conducted the interview?
- How did you find the length the interview?
- How did you feel about the setting of the interview?
- Is there anything else that you feel I should be aware of when conducting this interview with other participants?
- *(If yes)* Can you say more about this?
- As you are now aware, this interview aims to explore dancers' perceptions of psychological therapy and to look at what dancers feel they need in terms of emotional and psychological support. Were there any other questions or areas that were not addressed that you feel might be relevant to the research?

That completes the interview. Thank you for your participation.

(Turn off voice recorder)

ENDING

- Debriefing.
- Distribution of ongoing support information.

APPENDIX 6 RESEARCH INTERVIEW SCHEDULE

INTRODUCTION

- Researcher introduction.
- Explanation of research.
- What this will entail and why this is being done.
- Reading and explanation of consent forms followed by signing.
- Completion of demographic data form.

Switch on voice recorder

PATHWAY TO CAREER IN DANCE

I would like to start the interview by asking you a few questions about your dance training.

- Can you talk about your pathway to becoming a professional dancer?
- How many years did you train to be a dancer?
- What made you want to become a professional dancer?
- What do you enjoy about your career?

PSYCHOLOGICAL SUPPORT IN DANCE

I would now like to hear your views on the provision of emotional and psychological support for dancers.

- What are your thoughts on dance companies having access to counsellors or psychologists?
- Did you have access to a counsellor or psychologist during your career or whilst training?
- Have you had previous experience of counselling?
- What type of emotional support do you think might be useful to you?
- What is helpful to you when you are experiencing emotional difficulties?

EMOTIONAL AND PSYCHOLOGICAL DIFFICULTIES

- Do you think that there are psychological and emotional difficulties which are common amongst dancers?
- Are there specific stages in a dancers' career where they might need extra emotional support?
- What kind of emotional or psychological difficulties do you experience?

- Whom do you turn to when you feel in need of emotional support?
- What sort of person might you seek support from? (personal qualities)
- What are your views on seeking support from alternative health practitioners?

SEEKING SUPPORT

- Is there anything that might make it difficult for you to be able to seek help from a counsellor or psychologist?
- *(If yes)* Can you say more about these difficulties?
- Is there anything that might assist you in being able to seek help from a counsellor or psychologist?
- *(If yes)* Can you say more about what might be helpful?
- If you decided to seek support from a counsellor or psychologist do you have any preferences as to where you would like them to be located? (inside/ outside company)

PERCEPTIONS OF COUNSELLING

- I would like you to imagine that you are a counsellor or psychologist working within a dance company. What kind of difficulties do you think dancers might consult you about?
- When I say the word counsellor, what comes to mind? (images)
- When I say the word psychologist, what comes to mind? (images)
- What particular qualities or abilities would you look for in a potential counsellor or psychologist?
- If another dancer told you that they were considering starting counselling and asked you what you think counselling might be like. What would you say to them?
- As you are now aware, this interview aims to explore dancers' perceptions of psychological therapy and to look at what dancers feel they need in terms of emotional and psychological support. Were there any other questions or areas that were not addressed that you feel might be relevant to the research?
- Is there anything else that you would like to add to what we have discussed

**That completes the interview. Thank you for your participation.
(Turn off voice recorder)**

ENDING

- Debriefing/ Distribution of ongoing support information.

**APPENDIX 7
DEMOGRAPHIC QUESTIONNAIRE**

PERSONAL INFORMATION (to be completed prior to interview)

Name:

Age:

Gender:

Nationality:

Number of years as a professional dancer:

Style of dance:

Which companies or organizations have you performed with?

APPENDIX 8: SAMPLE OF ANALYSIS

<p>Not bringing home life to work- doing/being same each day</p> <p>Weak one in pack</p> <p>Realisation around focus upon self and career</p> <p>Selfish element</p> <p>Not allowing displays of weakness/distress</p> <p>Need to conceal seeking support 'The next one down'- hierarchy.</p> <p>Shift in balance of power</p> <p>Shock and acceptance around situation</p>	<p>EMILY: Yeah...yeah...I think it's a sort of...you come in and do a job...and being professional and...not bringing your home lives into work and...you know...and you come in and you do exactly what you did the day before...and the day before that... and...um...if you don't...you know...you're kind of the weak one in the pack and there's...there's not much...there's a sort of element of...people will walk past somebody who's obviously visibly upset...they'll get a pat on the back and concern but then the next thing they think of is...what have I got to do next...where am I going...I'm late for rehearsal and I can't stop and help you...(pause)...and watching people do that is very...it reminds you...how...completely focused people are.</p> <p>RESEARCHER: Yeah.</p> <p>EMILY: There's a very sort of selfish element... you know there's...<u>almost</u> a sort of sense of...if somebody else has fallen by the wayside...that means there's a space available...(pause)...so not allowing yourself to be visibly...erm...upset or weak or you know ...if you have to go...you know...if you want to seek counselling...you don't necessarily let other people know because the first thing they'll think of is 'they're weak'...you know...(laughs)...'they'll be the next one down' which means that...you know... there being a hierarchy...you know.</p> <p>RESEARCHER: Yeah.</p> <p>EMILY: How does the balance of power then shift?</p> <p>RESEARCHER: Yeah.</p> <p>EMILY: If that person is than not in the equation...um... it sounds horrendous doesn't it ... (laughs)... but I suppose that is the way it is.</p> <p>RESEARCHER: The way it is.</p> <p>EMILY: The way it is.</p> <p>RESEARCHER: Yeah.</p>	<p>Internal focus</p> <p>Survival of the fittest</p> <p>Impression management</p> <p>Survival of the fittest</p>
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APPENDIX 9- EXAMPLE OF SINGLE CASE ANALYSIS OF THEMES (CORRESPONDING QUOTES OVERLEAF)

MASTER THEMES	SUB THEMES	PAGE AND LINE NUMBER
Emotional Challenges	Coping with injury	4(23) 4(25-27) 5(22-24) 5(25-27)
	Perfectionism/ Self Criticism	6(30-31) 7(4) 7(9) 7(11-13) 7(17)
	Transitions	7(25-26) 7(26-28) 8(1-4) 9(29-32) 8(11-12)-8(14) 8(14-17) 8(17-20) 8(20-21) 8(22-24) 8(24-26)
	Personal sacrifices for career	9(4-5) 9(12-14)-9(16)
	Lack of career satisfaction	9(25-27) 9(27-29)
	Coping with touring	15(13-16) 15(18-21) 15(21-23)
Inner World of Dance	Being seen as a number	4(18-21)
	Not feeling heard	4(30-31) 5(15-16) 5(19-20)
	Self Absorption	6(1-2)
	External locus of evaluation	9(16-18) 9(18-20) 9(22-23)
	Volatile nature of career	11(3-6) 4(14-16)
Emotional/Practical Barriers & Facilitators	Lack of priority within company	10(9-10) 10(14-16)
	Knowledge of world	10(30-32) 11(14-16)
	Lack of information/knowledge	12(9) 12(11-12) 12(14)
	Dissemination of information	12(16-17)-12(19) 12(20-21)
	Location	12(26-28) 12(30-31)
	Availability	3(13-14) 3(15-16) 4(29-30) 5(12-13) 5(16-17)
Sources of Support	Career transition support	4(1-2)
	Dancers who identify vs those outside the profession	6(1) 6(6-7) 6(9-12) 6(19-21) 6(23-25)
	Physiotherapist	10(7-9)
	Alternative medicine	11(21-22) 11(22-24)
Perceptions of Counselling	Personal Experience	3(18-21)
	Personal Requirements	10(23) 10(25-26)
	Potential issues addressed	13(3) 13(4) 13(11-13) 11(1-2)
	Counsellor	13(29) 14(3-4) 14(6) 14(14-15)
	Psychologist	14(7-8) 14(17)
Role of Dance	Physicality of dance	2(6-7) 2(12)
	Attention/applause	2(11-12) 2(15)
	Being someone different	2(14-16)

QUOTES RELATING TO SUBSEQUENT PAGE

You know it's such an important thing because..you know if you are injured or whatever there is an element of..fear when you come back...5(22-24)
It's a funny..feeling because you know can't be perfect..you can probably dance the best of your ability..but you can never(...) you can't be perfect....7(11-13)
In terms of coming an age..you know..becoming older and finishing your career..I think it's a..it's a very difficult time for anyone..like myself 7(25-26)
I had to give up a lot and the older I get I see the more sacrifices I have done that when I was younger I wasn't aware of it..you know..I gave up family..9(12-14)-9(16)
So that was biggest issue I have mentally to deal with...is the fact that even though..I've done a range of...different characters in different places and I have fulfilled..9(25-27)
It's harder..because obviously everywhere you go the only people you know are the people you work with..and usually when you go on tour..is the time where you actually performing...5(13-16)

There is a sense... you know especially in a ...a professional company where at the end of the day they need the numbers in order to function...and if you are not... you know fit enough...4(18-21)
Even in terms of...with...with the management they are not prepared to listen to problems you know they are there to do a job the same way you there to do a job....it just happens that... 4(30-31)
It's a very selfish profession...you know you...it's all about you 6(1-2)
I am not in the place where I wanted to be and I don't even know if I will ever get there..so.. I had to..almost..not accept..well I suppose accept the fact that you career is in the hands of someone... 9(18-20)
It's a very volatile career because...part of it...is a physical part of it which if you..for some reason you are not healthy enough..or by the nature of the job you start having problems.. your career is 4(14-16)

Psychological isn't necessarily...a main issue...and...er... it isn't necessarily something that people would ...even consider...I suppose...you know...they don't see it as a priority...or they don't see it... 10(9-10)
It's a weird world..you know...but you have to have some sense of, some knowledge of it..you know..that you would be able to grasp you know what the dancers' needs are and how they..they feel and... 10(30-32)
If I would be able to...yeah...I wouldn't know where to start...what would be the right... the right person to do it or...the right organisation...it's something I never looked into it...so I have no idea 12(11-12)
You know at the end of the day it would be great that the company would have a liaison ...you know...with people with organisations that would... we would be able to seek help...at the moment... 12(16-17)-12(19)
The building isn't necessarily the biggest so I would rather go outside work. just so that I could be..honest..you know..open and honest without having to..choose my words or even talk about...12(26-28)
Psychological...it... you know you don't really have a place where you can... you know...I don't know...talk about your insecurities 4(29-30)

British companies they usually work closely to...with ...erm...Dancers Resettlement Fund...which I think is a great support to everyone really 4(1-2)
Mainly my contemporaries...at work because they probably would understand better where I am coming from 6(1)
I have a very good physiotherapist in the company and I think she tries to liaise with the management..in all aspects but it's nothing concrete and it's nothing....10(7-9)
I always welcome help..you have to be open-minded and try to..seek alternative medicines and ways of dealing with problems..I am always open-minded in terms of how...11(22-24)

I have had...because of my injury... mainly...I have had a few sessions with the psychologist that worked in a part...in a sort of part time...freelance basis with the company 3(18-21)
The quality of listening...and maybe direct me in what...where I want to get and I can't figure out how I get there 10(25-26)
I suppose that that would be the two big..you know issues..like I said before you know at the beginning of your career and at the end of your career..and then obviously in the...13(11-13)
Counsellors is through facts I suppose...they are people that ...um how can I put it...let's say if you go to a hospital and you do...HIV test...you..14(3-4)
A psychologist would be someone who would influence your thoughts and the way you think...or the way you might want to think in order to develop 14(7-8)

I love the physical stuff although...it's...I can say that it is hard 2(6-7)
I love the attention and...you know...it's not every work you do that at the end of the day you get applause 2(11-12)
I love the whole dressing up...you know...getting costumes on...the make up and I do a lot characterisation work so it's more interesting part of you know...2(14-16)

APPENDIX 10 INFORMATION ABOUT THE RESEARCH

Thank you for your interest in participating in this research. In order for you to make an informed decision about whether you choose to participate an outline of the aims of the research and what will be involved is given below.

My name is Alison Stuart and I am a completing my doctoral research at City University under the supervision of Dr. D. Danchev ([REDACTED]). The research will be conducted according to the Code of Conduct and Ethical Principles of the British Psychological Society.

The aim of the research is to explore dancers' perceptions of psychological therapy. I am looking to interview dancers who are currently employed in a British dance company. You do not need to have had any previous experience of therapy. The interview will last approximately one hour and will take place in a confidential setting that is convenient for you. During the interview you will be invited to share your experiences and perceptions in relation to psychological and emotional support. The interview will be recorded and you will be required to read and sign a consent to tape agreement outlining the confidentiality conditions of the recording (see consent to tape agreement for details).

Any identifying details will be removed or altered to protect the anonymity of participants. A coding system or pseudonym will be used so that the identity of each participant is protected and this will not be attached to the information contributed. Any key used to link participants' identity with a code number will be stored securely and kept separate from the research data which will be stored on a password protected computer. The key and any recordings will be destroyed upon completion of the research.

If you have any further questions or feel you would like more information please ask the researcher. Your participation is voluntary and you are free to withdraw from the research at any time.

If you feel you would like to participate please read and sign the consent form.

**APPENDIX 11
CONSENT FORM**

Please read the following and if you are in agreement, sign where indicated.

I consent to participate in the research project into dancers' perceptions of counselling conducted by Alison Stuart, a counselling psychologist in training at City University. I understand that the research is supervised by Dr. D. Danchev ([REDACTED]) and that the research will follow the Code of Conduct and Ethical Principles of the British Psychological Society.

I have read and understood a description of the research procedure and the agreement outlining the confidentiality conditions for the use of recordings.

I understand that the results of this research may be published in psychological journals or reported to other scientific bodies but I will not be identified in any report or publication.

I understand that I have the right to withdraw from the research at any time without giving a reason and that my anonymity will be protected throughout the research.

Signed (participant) date.....

Name (print).....

Signed (researcher)..... date.....

**APPENDIX 12
AGREEMENT FOR AUDIO TAPING**

The agreement sets out the conditions of confidentiality for the use of audio tapes by the researcher Alison Stuart for the purposes of psychological research.

The participant permits Alison Stuart to record the research interview on the understanding that:-

The tapes are only to be heard and used for analysis by Alison Stuart.

Permission may be withdrawn at any time.

The tapes will be stored in a locked cabinet that is only accessible to the researcher and will be destroyed at the end of the research.

Any transcripts of the tapes will have identifying details removed to protect anonymity.

This agreement is in keeping with the British Psychological Society Code of Conduct and Ethical Principles.

I have read and understood the above agreement and consent to the implementation of this.

Signed (Participant)date.....

Name (Block capitals).....

Signed (Researcher).....date.....

APPENDIX 13 DEBRIEFING INFORMATION

Thank you for taking part in the research.

What was it like to participate in the interview?

Is there anything that you feel you need to say about the interview?

If you would like to receive a copy of the research findings please give me your contact details and I can make arrangements to send this to you.

If you have any concerns about the interview that you do not feel able to talk to me about you can contact my research supervisor Dr. D. Danchev ([REDACTED]).

Should you have found the interview distressing in anyway or if it brought up difficult feelings that you would like to talk to someone about I have provided a list of organizations that you can contact.

APPENDIX 14 ORGANIZATIONS PROVIDING SUPPORT

Should you feel that you require emotional or psychological support following this interview, these are some organizations that might be able to help you:-

Samaritans- 08457 909090

24 hour confidential telephone helpline for those in emotional distress.

Careline- 0845 122 8622

Confidential counselling service for any issue. Mon-Fri 10am-1pm & 7pm-10pm.

Saneline- 0845 767 8000

Helpline providing advice and support on any mental health problem. Mon-Fri 1-11pm.

Get Connected- 0808 808 4994 or help@getconnected.org.uk

Helpline for those who are 25 and under. Will provide details of free or low cost counselling services in your area- daily 1pm-11pm.

Beat- Eating Disorders- 0845 634 1414 or help@b-eat.co.uk

Helpline providing advice and support for people with eating disorders.
Mon-Fri 10-30am-8-30pm & Sat 1pm-4-30pm

Dancers Career Development- 0207 404 6141

Organization providing practical and emotional support for dancers considering career transition.

Dance UK- www.danceuk.org

A list of practitioners who work with dancers is provided on the website.

British Association of Performing Arts Medicine- www.bapam.org.uk

A list of practitioners who work with performing artists is provided on the website.

**APPENDIX 15
THEMES FROM ANALYSIS**

MASTER THEME	SUB-THEME	ALEX	JUSTIN	ANDREW
INSIDE THE WORLD OF DANCE				
	Role of dance within career	2(6-7) 2(12-13)	1(23-24)	1(26-27) 1(30)
	Being seen as a body	4(18-20) 4(29-31)	13(21-28)	9(14-18) 9(22-23) 11(11-18)
	External locus of control	9(16-18) 9(22-23)	5(25-26) 6(3-5)	
	Survival of the fittest			
EMOTIONAL CHALLENGES OF CAREER				
	Relationships	15(13-23) 15(13-16)	8(27-32) 9(2-6) 6(22-24) 2(5-7)	2(5) 20(8-9)
	Stages of transition	8(11-17) 7(25-28) 9(27-32) 8(17-26) 4(23)		5(24-27) 10(19-21) 10(10-11)10(4-5) 9(26-30)
	External locus of evaluation/self esteem	6(30-31)-7(1-2) 7(11-13) 7(9)	14(1-3) 7(12-14)	
	Disordered eating/body image		3(17-19) 3(16-25) 7(29-30)	7(3-5) 7(10-12)
BARRIERS AND FACILITATORS TO SEEKING SUPPORT				
	Impression management		4(19-21) 13(32)-14(1-3)	18(27-31)-9(1) 19(20-28) 19(30-31)-20(1-2)
	Personal barriers		8(5)	13(4-6) 13(12-19) 13(24-30) 2(27-29)
	Lack of info/availability	12(9-12) 12(19-21) 12(16-17) 3(12-15) 5(12-17)	13(3-8) 3(24-26)	
	Location & knowledge		12(24-25) 10(12-14)	
PERCEPTIONS OF SUPPORT SERVICES				
	Personal experiences	3(17-21) 11(21-24)	2(21-22) 3(12-14) 9(9-20)	14(1-2) 14(6-9)
	Emotional outlets	6(1) 6(6-12)	12(14-16) 5(1-2) 8(8-13)	6(14-16) 6(31) 11(26-31)
	Perceptions of counsellors/psychologists	13(29) 14(14-15) 14(17) 14(3-8)	11(12-15) 11(17-20) 11(23-25)	17(17-19) 17(25-29) 18(1-6)
	Potential emotional support requirements	10(23-26)	4(3-5) 13(10-16) 12(4-7) 12(10-11)	4(29-32) 7(21-22) 5(10-12) 18(19-22)

THEMES FROM ANALYSIS (CONT)

MASTER THEME	SUB-THEME	LEANNE	CAROLINE	AMY
INSIDE THE WORLD OF DANCE				
	Role of dance within career	1(27-28) 2(20-22) 8(8-9) 8(23-25) 9(9-10)	1(4-7) 1(13) 4(21-27) 5(9-10)	
	Being seen as a body	4(2-3)	7(29-32) 8(1-2) 8(8-10) 8(12-20)	
	External locus of control	9(27)-10(6) 9(11-15)	17(14-16) 11(21-25) 20(33-34)-21(1-5) 5(16-17)	14(22-26) 15(9-12)
	Survival of the fittest	16(19-21) 12(28-29)	4(12-17)	9(31-32)-10(2-5) 10(10-11) 10(12-15) 11(2-5)
EMOTIONAL CHALLENGES OF CAREER				
	Relationships		15(17-22) 21(24-28)	
	Stages of transition	12(22-27) 13(1-3) 11(18-30) 12(19-20)	13(26-34) 12(24-33)-13(2) 12(8-11)	8(9-12)
	External locus of evaluation/self esteem	3(3-5) 9(27-29) 10(24-25)	14(23-26) 15(7-8) 6(21-24) 10(23-24) 14(28-29) 11(14-21)	7(16-17) 10(19-21) 7(20-23)
	Disordered eating/body image	10(30-31)	15(1-5)	
BARRIERS AND FACILITATORS TO SEEKING SUPPORT				
	Impression management	16(31)-17(1)	9(2-5) 9(7-10)	
	Personal barriers		9(18-25) 6(2-3)	18(7-9) 17(23-26)
	Lack of info/availability	15(18-20) 16(57) 16(9-10)		15(29-31) 15(24-27) 16(1-7) 16(13-17) 2(24-27) 3(2-4)
	Location & knowledge	17(20-25) 17(29-32) 20(1)		16(24-29) 17(13-16) 18(2-3) 12(13-15)
PERCEPTIONS OF SUPPORT SERVICES				
	Personal experiences	4(1-2) 4(28-30) 5(1-3) 6(19-20) 5(30)-5(1-3) 6(20-21)	18(33-34)-19(1-2) 23(15-17) 6(21-22) 7(26-27) 16(3-6) 17(23-25) 17(32-33)-18(1-2)	13(3-6) 13(8-10) 13(3) 4(4-5)
	Emotional outlets	10(17)		11(27) 12(4-5) 6(20-25) 7(1-10)
	Perceptions of counsellors/psychologists	18(23-24) 18(28-30)	22(1-4) 22(8-9) 22(18-24)	19(14-24) 19(26-31) 20(1-2)
	Potential emotional support requirements	7(14-15) 7(24-29) 19(13-17)	23(2-5) 16(14-19) 22(30-31)	21(13-14) 21(21) 22(8-9) 21(28-30)

THEMES FROM ANALYSIS (CONT)

MASTER THEME	SUB-THEME	NATALIE	EMILY
INSIDE THE WORLD OF DANCE			
	Role of dance within career	2(2) 1(25-33) 2(10-14)	2(1) 2(5-6) 2(9-12) 2(17-33) 2(3-5) 3(10) 11(29-30)
	Being seen as a body		5(21-28) 13(2-5) 5(8-11) 5(11-14) 5(2-4) 5(4-8)
	External locus of control		
	Survival of the fittest		4(18-21) 5(19-21) 7(6-7) 7(12-21) 7(25-28)
EMOTIONAL CHALLENGES OF CAREER			
	Relationships		9(10-15) 4(1-2) 11(22-25)
	Stages of transition	10(1-3) 10(10-12)	11(27-29) 12(25-33) 13(5-14) 12(2-4)
	External locus of evaluation/self esteem	4(13-14)	10(19-22) 10(25-30) 11(8-13) 13(30-34) 10(32-33)-11(1-2) 11(4-7) 14(23-27)
	Disordered eating/body image	8(21-23) 9(1-6)	
BARRIERS AND FACILITATORS TO SEEKING SUPPORT			
	Impression management	9(14-21)	
	Personal barriers	5(3-6)	6(3-4) 6(2-3) 7(7-14) 7(18-20) 5(31)-6(3)
	Lack of info/availability	16(11-14)	
	Location & knowledge		16(19-20) 15(10-17) 17(7-14)
PERCEPTIONS OF SUPPORT SERVICES			
	Personal experiences	10(9) 6(14) 6(3-6) 14(22-23) 15(3-5)	6(13-15) 6(15-19) 16(10-16)
	Emotional outlets	7(11-15) 12(1-2) 12(9-14)	9(20-24) 9(30-33) 9(17-20)
	Perceptions of counsellors/psychologists	18(9) 18(11-14) 17(23-24)-18(3)	18(11-20) 18(22-34) 19(30-33) 20(6-8) 19(33-34)-20(1-4)
	Potential emotional support requirements	18(19-23) 13(23)-19(2)	9(7-8) 12(12-14) 16(6-7)

APPENDIX 16

PERSONAL COMMUNICATION WITH JONATHAN SMITH

To: ja.smith

Subject: Methodological queries regarding an IPA study

Dear Dr. Smith

I am currently in the process of conducting DPsych research using IPA. I attended the IPA conference in 2007 and found this extremely useful. I wondered if you would be kind enough to give me some feedback regarding several methodological queries which I have relating to my research. I am an ex-professional dancer and counselling psychologist in training who left my dance career ten years ago. I have an interest in dancers and psychological well-being and am aiming to use IPA to look at the experience of professional dancers. In particular, I hope to be able to explore their world in relation to the emotional challenges of the career, possible barriers and facilitators to seeking psychological support and perceptions relating to psychological support. I do however have a few queries which I would value some input around:-

1) Do you think it is a problematic for an ex-dancer to research the experience of other dancers (the literature suggests that dancers tend to view psychologists as outsiders and find it hard to trust those outside the profession)? There was no psychological support available whilst I was performing and the dance world has moved on considerably since I was performing so I am aware that I am coming from a 'wise' rather than 'same' perspective.

I don't think this is a problem as long as you attempt to put to one side shared assumptions so you can concentrate on the individual experience

2) It has been difficult to recruit dancers to participate in the study. At present I have 3 male dancers and 5 female dancers. I have elected to define my population parameter as professional dancers who are currently employed within a British dance company who have experienced at least 3 years of full-time training. Therefore, I have included ballet, contemporary and musical theatre dancers. What are your views regarding the use of dancers from a variety of dance styles given the overlap between the types of work performed by these artists.

IPA advocates a homogenous sample- in my view including different types of dancer is probably ok.

Any feedback would be gratefully received.

Many thanks

Alison Stuart

SECTION C: CLIENT STUDY

FINDING A 'WAY IN': THE POWER OF THE THERAPEUTIC RELATIONSHIP IN PERSON-CENTRED THERAPY

CHAPTER 6

1.0 INTRODUCTION

This client study addresses the case of a fifty year-old female client whom I had been working with for eleven sessions using a person-centred approach. I chose this particular case for a number of reasons. Firstly, it provided a powerful illustration of how a client's patterns of relating to others manifested within therapy. As a result, I feel this informed my practice, as a counselling psychologist in training, by highlighting the value of the use of process identification within sessions. Secondly, it provided me with an insight into the challenges faced by an individual who felt unable to grieve the loss of a partner and the potential impact of bereavement upon the family system. By reflecting upon my sessions with this client, I gained a greater sense of understanding around the use of self disclosure in my work. It also provided insight into how a therapeutic relationship, grounded in Rogers (1957) 'core conditions for therapeutic change', assisted the client in accessing feelings of grief which had been deeply buried because of shame around appearing 'weak' if these were expressed.

2.0 THEORETICAL ORIENTATION

The actualising tendency is central to the person-centred approach. Rogers (1961, p.351) considers this tendency can 'become deeply buried under layer after layer of encrusted psychological defenses'. Clients typically enter therapy with poor self-concept and internalized conditions of worth. The need for positive regard can result in the development of 'incongruence between self and experience' (Thorne, 1992, p.31). Psychological disturbance will be perpetuated if a person becomes largely dependent upon positive feedback from others in order to gain a sense of self worth (Mearns & Thorne, 1999). Central to the person-centred approach is the emphasis placed upon the quality of the relationship between client and therapist. Thorne (1992) considers that the role of the therapist is to facilitate the formation of a relationship which enables the client to discover their internal resources. The person-centred approach

maintains that delivery of the 'core conditions' can encourage growth and therapeutic change. Therefore, if the therapist is able to offer a relationship in which unconditional positive regard, congruence and empathy are present, and perceived by the client, therapeutic growth is likely to occur (Thorne, 2002). As a counselling psychologist in training, I was also aware of the importance of reflecting upon current research relating to bereavement, plus the relationship between psychological factors and irritable bowel syndrome (IBS), in order to inform my practice.

3.0 REFERRAL

Kate was referred by her GP to the National Health Service (NHS) counselling service where I was on placement as an honorary counsellor. The counselling service is based within an NHS Primary Care setting. Kate was assessed by the counselling co-ordinator prior to our first session. The referral form stated that she was finding it difficult to cope with problems relating to her family and was suffering from irritable bowel syndrome which appeared to have been exacerbated by past and ongoing sources of stress.

3.1 CLIENT BACKGROUND

Ethical safeguards have been implemented during the presentation of this client study. In order to protect anonymity, the client's name and other potentially identifying details have been altered. Kate is a fifty-five year-old woman whose husband died in a building related accident eleven years ago. She has two sons, aged thirty-two and twenty-two and two daughters, aged twenty and eleven. Kate currently lives with her three youngest children and also cares for her eighty year-old mother who lives nearby. From early childhood, as the oldest of three children, Kate took on the role of 'caretaker' within the family. She described how as a child she made frequent attempts to rescue her mother from violence inflicted by her alcoholic father. Following the death of her partner, Kate experienced a four year period of legal proceedings as part of the inquest into her husband's death. Kate found it difficult to pass through the grief

process because of the lengthy inquiry and her need to care for other members of the family who have also struggled following the death of their father. As problems within her family escalated (see initial session), Kate has become increasingly stressed and found it difficult to cope. This appears to have exacerbated her symptoms of IBS which first manifested during adolescence.

4.0 THE FIRST SESSION

Kate was casually dressed and maintained good eye contact throughout the session. She appeared distant and I wondered if it might be difficult for her to talk openly about her current concerns. At the start of the session, I got a strong sense of Kate 'being on edge'. I felt that it was too early in our relationship to reflect my own feelings but kept this in mind in case this feeling persisted and became relevant at a later stage in our work together. I began the session by making Kate aware that I knew a little about her from the assessment but asked if she could tell me in her own words what had brought her to counselling.

Kate told me that her GP sent her for counselling as an alternative to additional medication for her irritable bowel syndrome. She described how she had tried numerous medical, dietary and alternative health remedies but none of these seemed to provide any long-term relief from her symptoms. In my experience, it can often be a challenge to engage clients who describe themselves as being 'sent' by their GP. This appeared to be the case with Kate as it became apparent that she was highly sceptical about any potential benefits in attending counselling. I acknowledged her scepticism and actively encouraged her to explore this as it seemed to be very present at the start of our work together. Kate went on to mention that her daughter had also attended counselling at the centre where I was based and had left after just three sessions because she had felt frightened by the experience.

I got a strong sense that it had taken a great deal of courage for Kate to attend the session given her scepticism and her daughter's experience of counselling. I

felt it might be appropriate to reflect this to her as it was something which Mearns and Thorne (1999) termed as 'persistent and striking' throughout the session. I hoped this might be a way of communicating unconditional positive regard (UPR) in addition to remaining congruent within the relationship. Lietaer (2001, p.105) considers that the communication of UPR can produce 'a high level of safety which helps unfreeze blocked areas of experience to allow painful emotions in a climate of holding'. This appeared to be the case with Kate as she became tearful in response to my reflection. It felt as if there had been a barrier between us since the start of the session and this had suddenly been removed, giving me a glimpse of her internal world. I wondered if my sense of Kate 'being on edge' at the start of the session was linked to the holding back of sadness which she was now beginning to express.

Kate described how she felt overwhelmed and was finding it difficult to cope with the demands of caring for her family. She mentioned her irritable bowel syndrome and stated that her symptoms had become more extreme over the past few years due to the stressful nature of family life. At this point, Kate quickly shifted to talking about how she felt ashamed for crying in the session and mentioned that she considered it meant she was 'weak'. She spoke about her sense of shame for needing to seek support and stated that she felt 'not good enough' because she was finding it difficult to cope with her current problems on her own.

Towards the end of the session, she described how her husband had been killed in a building accident eleven years ago. Kate made reference to the fact that this had occurred three weeks before Christmas and she had been left to care for four children, the youngest being just three months old at the time. Following the death of her husband, Kate mentioned her difficulties in grieving due to the demands of caring for the rest of the family and the lengthy period of the inquiry following her husband's death. She described how the whole family had been deeply affected by the death and had found it 'difficult to move on with life'. Kate reported that her twenty-two year-old son was alcoholic and her twenty year-old daughter had been housebound for two years as a result of severe agoraphobia. In addition, her eleven year-old daughter had been

severely bullied at school and had become school phobic. This had led her to make the decision to educate her daughter at home.

4.1 INITIAL FORMULATION OF THE PROBLEM

Prior to addressing the issue of formulation, it is important to acknowledge the underlying tension between the role of assessment/formulation in counselling psychology and the philosophical underpinning of the person-centred model. In keeping with the scientist practitioner model, assessment and formulation underlies and informs the practice of counselling psychologists. Clarkson (1998, p.3), differentiates the work of counselling psychologists from that of counsellors by highlighting the emphasis placed upon the application of '*academic psychology alongside practical counselling skills*'. However, from the standpoint of the person-centred approach, the implementation of assessment techniques is considered to be somewhat 'foreign' (Corey, 2005). In keeping with the underlying philosophy of this model, Corey (2005, p.178) argues that 'the best source of knowledge about the client is the individual client'. These philosophical inconsistencies have the potential to challenge the thinking of counselling psychologists. In doing so, they present a dilemma around how to manage the need for assessment/formulation whilst remaining in keeping with the underlying theoretical approach of the person-centred model.

Despite the uneasy relationship between the person-centred approach and the issue of formulation, this approach also provides a differing perspective which is in keeping with 'many of the values underpinning the growing discipline of counselling psychology' (Gillon, 2007, p.2). When reflecting upon 'The BPS Professional Practice Guidelines for the Division of Counselling Psychology' (2005) it is clear that the person-centred approach adheres to the core values underlying the practice of counselling psychologists. Despite these core values, the goals of the person-centred approach differ from those of other theoretical approaches, with a greater focus being placed upon 'the person' as opposed to 'the person's presenting problem' (Corey, 2005, p.170). Person-centred therapy could be considered to conflict with other more medicalized approaches, which

rely on the issue of diagnosis, and the practitioner being viewed as expert. However, Corey (2005, p. 178) attempts to resolve this issue by proposing that the question which emerges is not 'whether to incorporate assessment' but 'how' this can be approached in a manner which is in keeping with the underlying philosophy of the person-centred approach. Therefore, assessment and formulation must be carried out as a collaborative process where both client and practitioner reach a joint understanding around how this will be conducted (Proctor, 2005). The importance of assessment in person-centred therapy is substantiated by Rennie (1998) who reiterates the fact that the lack of emphasis placed upon assessment using this approach does not imply that the use of assessment should be rigidly avoided.

Kate presented with the symptoms of IBS which had been diagnosed by her GP. These symptoms had been experienced since adolescence but had become more severe in recent years. Kate reported suffering from daily stomach pains and had taken a series of medications prescribed by the GP on a daily basis. During the assessment, it became apparent that the medication had given her little relief and her symptoms prevented her from spending long periods away from home.

In addition to her IBS, Kate's early experiences of witnessing domestic violence and alcoholism within the family have led to the acquisition of internalized 'conditions of worth' (Rogers, 1959). This has resulted in her self worth becoming dependent upon caring for others and assuming the role of the 'strong' member within her family system. Consequently, Kate has become cut off from her 'organismic experiencing' and developed an external locus of evaluation where her self worth had become dependent on winning approval and avoiding disapproval (Mearns & Thorne, 1999). Therefore, Kate was in what Rogers (1957) termed as a 'state of incongruence'. Rogers (1959, p.35) describes how 'incongruence between self and experience leads to psychological vulnerability which will often leave an individual anxious and confused'.

Kate reported that her symptoms of IBS originated during adolescence. Her early experiences of living with domestic violence continued to have an impact upon Kate's physical and emotional well-being. Biermann-Ratjen (1998, p.122) proposes that when 'faced with traumatic experiences' an individual 'develops anxiety in conjunction with the prototype of defence against experience' in the form of reduced awareness. This can result in the blocking of the experience from consciousness and the manifestation in a physical format (in Kate's case, the physical symptoms of irritable bowel syndrome). This is supported by numerous studies which have found a relationship between irritable bowel syndrome and psychological factors (Creed & Guthrie, 1987). Therefore, Kate's symptoms of IBS appeared to be linked to anxiety and traumatic experiences in childhood. The physical symptoms of stomach pains were apparent in the session when Kate began to speak about the death of her husband. This observation, along with the worsening of IBS over the past few years, supported the hypothesis that her unresolved grief and stress related to her family had exacerbated physical symptoms.

One of the most striking features of the initial session was Kate's frequent references to feeling ashamed for crying or expressing emotion in the session because this meant she was 'weak' and not able to cope on her own. This highlighted how Kate's need to be seen as the 'strong' member of the family was perpetuating her difficulties as it had prevented her from expressing painful emotions or accessing psychological support. Person-centred theory considers that when a particularly significant event occurs in an area where high incongruence is present this can result in the breakdown of the process of defence. As a result, the client is suddenly brought into contact with the denied experience resulting in accompanying anxiety due to the threat to the current self-concept (Nelson-Jones, 2006). The sudden death of Kate's husband, whom she described as 'her rock' had threatened her self-concept as the 'strong' member of the family. This had brought her into contact with feelings of anxiety and vulnerability which she had been protected from by her husband during her marriage.

During the initial session, it became apparent that Kate was suffering from a chronic grief reaction due to unresolved grief tasks (Worden, 2004). This hypothesis was based upon Kate's description of her difficulties in grieving and adjusting to life following the death of her husband. Worden (2004, p.89) postulates that a chronic grief reaction is identifiable due to its 'excessive duration' and the individual's awareness of an inability to pass through the process of mourning. It was eleven years since the bereavement but it was clear that Kate and her family continued to live their life in the shadow of her husband's death.

Worden (2004, p. 26) introduces the concept of four 'Tasks of Mourning' which must be visited and resolved during the grief process. These include accepting 'the reality of the loss,' working 'through the pain of grief,' adjusting 'to an environment in which the deceased is missing' and emotionally relocating the deceased and moving on with life. Worden (2005, p.90) highlights the importance of considering other 'mediators of mourning' which may be inhibiting the resolution of the grief process. Additional factors which had impacted upon the grief process included the lengthy period of inquiry following the death of her partner. This is supported by Gamino, Sewell and Easterling (2000) who consider this to be a factor in prolonging the process of grief in accidental deaths. The mode of death, lack of social support following the bereavement and concurrent stress of looking after four young children appeared to be additional 'mediators of mourning' (Worden, 2005, p.90).

Following the initial session, the impact of the death upon the whole family system was evident. Worden (2004, p.118) highlights how, when the open expression of grief does not occur, there can be a tendency for certain members of the family to 'act out' feelings in a variety of different behaviours which serve as 'grief equivalents'. Kate's description of life following the accident and the impact of the ongoing legal case upon the family, suggested that the family struggled to grieve the loss at the time of death but had responded later in a variety of forms of 'grief equivalents'. These have taken the form of a variety of physical, emotional and social difficulties (her son's

alcoholism, her daughter's agoraphobia and her youngest daughter's school phobia).

In contrast to other therapeutic approaches, despite my initial formulation, it would not have been in keeping with the underlying philosophy of the person-centred approach to lead the client based upon my hypotheses. Person-centred research proposes that personality change within the client is facilitated by "the attitude" of the practitioner as opposed to specific 'techniques' or 'theories' (Rogers, 1961). Therefore, Corey (2005, p.171) highlights the importance of shifting from the viewpoint of assessing clients from the perspective of 'preconceived diagnostic categories' in order to enter their subjective world and form a relationship based upon the experiential 'moment-to moment' encounter.

5.0 THE CONTRACT

Prior to our first session, Kate received a letter from the counselling co-ordinator informing her that she was being offered six to twelve sessions. During the first session, we discussed the boundaries around confidentiality and agreed to meet for fifty minutes on a weekly basis. A review was carried out during the sixth session and Kate decided that she wished to continue for a further six sessions.

5.1 CHOICE OF THERAPEUTIC APPROACH AND AIMS

At present, there are no National Institute of Clinical Excellence (NICE) guidelines for working with bereavement. However, the Department of Health (2005) provides advice on developing bereavement services within the NHS. This makes reference to the NICE guidelines on improving supportive and palliative care for adults with cancer (2004) which recommends that the psychological approach taken should be dependent upon the type and 'severity' of the client's problem. As the NICE guidelines do not provide explicit guidance regarding the assessment of the 'severity' of bereavement related issues, I assessed Kate's symptoms of unresolved grief in accordance with the criteria

for complicated grief proposed by Worden (2005). It was apparent that Kate was suffering from a chronic grief reaction due to unresolved grief tasks (Worden, 2004). Worden (2004, p.90) proposes that when working with chronic grief reactions it is necessary to assess which tasks of grieving remain unresolved and reflect upon the 'mediators of mourning' which may be preventing this process. Therefore, part of the therapy was guided by the client in considering the 'mediators of mourning' and working towards a resolution of unresolved grief tasks.

When reflecting upon Kate's symptoms of IBS, it could be argued that this condition could have been addressed using a number of different therapeutic approaches, for example, cognitive behavioural therapy. At present, the NICE guidelines for the treatment of IBS (2008) acknowledge a wide range of psychological treatments which can be implemented in the treatment of IBS. These include the use of cognitive behavioural therapy, hypnotherapy and/or psychological therapy in clients who have not responded to pharmacological treatments after twelve months. However, the current recommendations do not favour one therapeutic approach over any other and state that the selection of a particular approach should depend upon the client's preference following a clear explanation of the approaches available and the rationale for their use.

During the initial session, we discussed the option of working using an approach which targeted specific problems in Kate's life from a cognitive behavioural perspective. The model of cognitive behavioural therapy was introduced during the session and Kate was made aware that issues which could be addressed would include ways in which she could manage her IBS and anxiety. I also gave her the option of using a less problem focused approach where she could talk about the death of her husband, her family or whatever was troubling her in the hope of gaining a clearer sense of what she was experiencing. Despite some trepidation about addressing this issue, Kate said she felt she needed a space where she could explore her feelings about the death of her husband as the anniversary of his death was fast approaching. Given the display of stomach pains in the assessment, which became evident whilst addressing the death of

her husband, this seemed to be an appropriate focus for the sessions as her IBS appeared to be exacerbated by her unresolved grief.

In addition, following the assessment, I discussed Kate's presenting issues and needs with my supervisor. We agreed that it would be appropriate to address Kate's unresolved grief using a person-centred approach. The decision to work using this model is also supported by Corey (2005) who considers the person-centred approach to be of particular value when working with bereavement related issues.

I was aware of the potential challenges of using this therapeutic approach in short-term therapy; however, Thorne (1999) considers that a person-centred approach can be used in time limited therapy providing that the client wishes to work in this way. Early on in the sessions, we worked together to determine how Kate wished to make use of the time available. As Proctor (2005) suggests, this seemed to be in keeping with the person-centred principles as it served as a way of empowering the client.

My initial aim was to develop a therapeutic relationship with Kate. Therefore, I attempted to ground the sessions in Rogers (1957) 'core conditions for therapeutic change' and focused upon the communication of unconditional positive regard, empathy and congruence. The communication of unconditional positive regard seemed particularly important due to Kate's expression of shame around experiencing sadness in the initial session. I hoped that by developing a relationship grounded in the 'core conditions' this might assist Kate in moving towards reconnection with her 'inner organismic self' and away from reliance upon external sources (Kalmthout 1998).

During the early sessions, I reflected the conflicting parts of Kate, the part of her that was experiencing grief and distress and the part that felt ashamed for experiencing these feelings. I hoped that by reflecting and empathizing with both parts this might enable her to focus upon them directly and provide an opportunity for fuller access and the possibility of movement away from her state of incongruence (Mearns & Thorne, 1999).

5.2 THE DEVELOPMENT OF THERAPY

As the sessions progressed, I experienced Kate as a warm and caring person. Our relationship seemed to deepen following the first session and I began to feel a strong connection with Kate from early on in our work. Initially, I provided Kate with a space to be with and explore her feelings. This appeared to be something which she had not experienced at other times in her life.

During the initial session, Kate spoke about how she tended to put the needs of others before her own. This was particularly evident in relation to interactions within her family. Early in our work together I began to observe that this process was being played out within our sessions. I quickly became aware that I was in danger of losing Kate behind the weight of her children's problems. As I began to build a relationship with Kate, I witnessed how she would spend most of the session focusing upon her children's problems and making little reference to what she was experiencing. The tendency to place the needs of her family before her own was also evident on a practical level as Kate arrived fifteen minutes late for one of her sessions because she had been trying to renew her oldest son's car insurance.

There were times when I also felt a desire to 'fix' Kate's family problems and this was something I addressed in supervision (see challenges in work). I considered whether it might be appropriate to make use of what Rennie (1998) describes as 'process identification'. However, I found myself feeling cautious about this because of concerns that it may adversely interrupt her focus. Rennie (1998) suggests that this technique can be a useful way of helping the client to identify the process occurring and this may assist the client in beginning to connect with feelings which have been hidden. Therefore, I made the decision to reflect Kate's process of focusing upon others within the session. This was a crucial point in the therapy as Kate developed a greater awareness of this process and began to focus upon what she was experiencing. In later sessions, she often made reference to how she was trying to leave her family outside the counselling room and use the space to begin to focus upon her own experiences.

Kate was a client who carried the therapy process into her life (Nelson-Jones, 2006) and often came back to subsequent sessions to talk about realizations she had during the week. In the following session, Kate spoke about how she had begun to gain insight into the fact that caring for others made her feel better about herself. This indicated that she was becoming aware of her external locus of evaluation. She described how early experiences of growing up around alcoholism had left her feeling 'second best'. Kate mentioned that this had changed when she met her husband, and for the first time in her life, she had begun to feel like a 'strong and worthwhile' person. However, following his death, Kate had lost this sense of self worth and described feeling anxious and like a 'weak old woman'. During this part in the therapy, it was clear that she had identified an additional 'mediator of mourning', which Worden (2005, p.41-42) terms as 'personality variables'. Worden (2004, p.33) highlights how the death of a partner who acts as a source of self esteem can negatively impact the bereaved sense of self esteem, especially if 'the deceased person was making up for serious developmental deficits in the mourner'. This supported the hypothesis that the death of Kate's husband had resulted in a threat to her self-concept which had brought her into contact with denied experiences of anxiety and vulnerability (Nelson-Jones, 2006).

5.3 THE USE OF METAPHORS IN THERAPY

The use of metaphors was a valuable tool during the sessions. Tolan (2003) suggests that metaphors can be used as a creative way of communicating empathic understanding. This can be initiated by the client or therapist and also built upon or altered during the process of therapy. Early in the sessions, Kate frequently made reference to how it felt like she had stored up so many feelings from the past. She stated that it was as if these feelings had been kept 'bubbling' in a container and the container had become so full it was now 'boiling over'. This metaphor provided both Kate and myself with a sense of what she was currently experiencing. It seemed that Kate's symptoms of IBS were a physical manifestation of her container 'boiling over'.

As the therapy progressed, Kate described how this container was like a cauldron in her head and how she was beginning to learn to express her feelings to prevent the cauldron from boiling over. This description appears to fit with person-centred theory. The feelings contained in Kate's cauldron were indicative of the incongruence between her current self-concept and her experience of self (Thorne, 1992). When Kate began to let go of the need to deny or distort her real feelings and allowed herself to experience whatever she was feeling at the time (Dryden & Mytton, 1999), Kate's 'cauldron became less full'.

5.4 CHANGES IN THE WORK

As the sessions progressed, Kate began to experience the unconditional acceptance of our relationship. This appeared to lead to a gradual breaking down of what Rogers (1959) described as internalized 'conditions of worth'. Consequently, Kate began to reconnect with her organismic valuing process and became less dependent upon the need for approval from others (Mearns & Thorne, 1999). This change in Kate was particularly evident when she announced that she was going on a short holiday with her youngest daughter. She described how this was her first holiday in five years and it was clear she was somewhat anxious about whether the rest of the family would 'cope' without her.

Upon returning from holiday, Kate had reached a realization that her family could cope without her and that she was still able to enjoy herself. This led to a shift in the focus of the sessions and, as Kate started to feel less of a need to care for others, she became more able to address her own needs and experiences. Kate began to move on to tackle the issue of her difficulty in re-engaging with life after the death of her husband. Stroebe, Stroebe and Hansson, (1993, p.446) describe how in some cases the life of the bereaved individual may become 'a memorial to the dead person, with considerable cost to other family and personal relationships'. It seemed as if Kate was beginning

to acknowledge that her life had been centred on the death of her husband for many years.

Kate became tearful as she spoke about experiencing guilt for having enjoyed herself whilst on holiday. At this point, she began to face what appeared to be a major factor in preventing her from moving forward in her life. Kate spoke at length about her fears that if she enjoyed herself it would in some way be disrespectful to husband. It seemed as if Kate was oscillating between what Worden (2004, p.35) described as the third and fourth tasks of mourning ('adjusting to a world in which the deceased is missing and emotionally relocating the deceased and attempting to 'move on with life'). As Kate began to allow herself to experience the grief and distress around the loss of her partner she began to move away from the state of incongruence which had been present at the start of therapy.

5.5 THE THERAPEUTIC ENDING

As the end of the work drew near, I got a sense that it might be particularly difficult for Kate to work towards an ending. There was now a strong sense of connection between us and I was mindful of feelings that might be evoked by the loss of our relationship. In addition, I was aware that our sessions were due to end two weeks after the anniversary of her husband's death.

During the eighth session, when reference to the ending was made, Kate became visibly uncomfortable, avoided eye contact and showed signs of discomfort around telling me something. After a period of silence, she said she did not think she was going to be able to attend the last three sessions and wondered if there was a possibility of suspending the last few sessions until after New Year. At this stage, I felt uncertain about what was occurring within the session. I could have chosen to reiterate the time boundaries around our sessions together but felt that by responding to her question I might prevent her from further exploration around whatever she was experiencing. Therefore, I elected to reflect how it might be difficult for her to attend the final sessions.

This led to Kate focusing on the practicalities of how much she had to do to prepare the flowers for her husband's anniversary and to make things 'just right' for the children at Christmas. She spoke increasingly rapidly and I got a sense that Kate felt the need to do things perfectly. Given the persistence of the need to do things perfectly that had been present in our sessions I decided to attempt to reflect the deeper meaning in what she had been saying which appeared to be just outside her awareness (Mearns & Thorne, 1999). Kate became visibly tearful and disclosed how she thought if she did things perfectly for Christmas and the memorial it helped to lessen the feelings of guilt which she felt around the impact of her husband's death upon her children. This illustrated the impact of guilt present within the grief process (Worden, 2005).

During this session, I got a sense that she might be finding it difficult to express feelings of grief around her husband's anniversary. I was mindful of my own experience of the anniversary of a death and wondered if it might be helpful to make use of this. In reference to the use of therapist self disclosure, Yalom (2008) highlights the complexity surrounding this type of intervention but also suggests that self disclosure has much to offer in terms of contributing to the effectiveness of the therapist. Rogers (1962) considers that self disclosure can be used when considered appropriate but I often find myself questioning what this means in terms of my practice. Yalom (1995, p.414) suggests that it can be helpful to question whether the use of disclosure will assist in 'the client's growth process'. I hoped that the disclosure might be a way of communicating empathy and also provide Kate with an opportunity to explore the feelings of grief which she appeared to find difficult to express. Therefore, I chose to disclose how I had experienced strong emotions around the time of the anniversary of a loss.

At this point, Kate became tearful and spoke at length about what it had been like for her to get through Christmas following the death of her husband. She became increasingly emotional and spent the rest of the session talking about her experiences of caring for her husband in hospital before his death. In doing this, Kate was revisiting what Worden (2004) termed as the second task of mourning, by working through the pain of grief. At the end of the session, Kate

appeared less agitated and said she realized she did not have to experience the anniversary alone and that she would like to attend the final sessions. I can never be entirely sure of the process that occurred for Kate within this session and this was something which I reflected upon in supervision. Wosket (1999) describes how the use of therapist self disclosure can act as an invitation for the client to see deeper into themselves through what has been revealed. My use of self disclosure appeared to have assisted Kate in experiencing her feelings of grief. In the past, Kate had mourned the anniversary in private. By allowing her 'to be whatever immediate feeling is going on' (Rogers, 1986, p.198) and remaining with her in this process Kate reached a realization that she no longer had to experience feelings of grief alone.

During the last few sessions, Kate spoke about the feelings of sadness evoked by her husband's anniversary. As the work drew to a close, Kate said she realized she was actually very strong and not the 'weak woman' she considered herself to be at the start of therapy. She had begun to move towards a greater sense of personal congruence. Kate stated that she now understood that she had kept feelings 'bottled up in her cauldron' for too long. She mentioned that by expressing the feelings she had been ashamed to display a huge difference to her symptoms of irritable bowel syndrome had occurred and, as a result, she now rarely needed any medication. Kate said one of her biggest realizations was that she could 'get on with living' and still love the person she had lost. This provided an indication that she had moved towards resolution of the fourth task of mourning (Worden, 2004). Due to the complexity of Kate's experiences and the impact upon the family system I still felt that Kate needed further support in relation to the problems within her family. Worden (2004) highlights the importance of addressing the impact of bereavement upon the whole family unit. This was not possible within the context of our sessions but at the end of counselling we discussed the option of onward referral for family therapy which Kate was keen to pursue.

6.0 CHALLENGES IN THE WORK AND USE OF SUPERVISION

One aspect of the work which was challenging, but also beneficial to my practice was working with a supervisor who worked primarily from a psychodynamic perspective. Gillon (2007, p.3) highlights how counselling psychologists are encouraged to 'embrace a multiplicity of therapeutic perspectives and approaches' and this was something which was useful in my work with Kate. However, I also had to balance this with the need for personal congruence and the avoidance of viewing Kate's difficulties purely from my own perspective. In order to address this, I attempted to remain within the client's frame of reference during the session and reflected my own feelings when this was necessary for me to remain congruent within the relationship (Rennie, 1998). During supervision, I was able to reflect upon what it might be like for a 'carer' to be 'cared for' in therapy and whether Kate might feel the need to care for me. I also examined the process of Kate wanting to suspend the ending of therapy and considered whether this might have been something she wished she could have done at the time of her husband's death.

Lietaer (1993) highlights the inevitability of the client repeating past patterns of relating within therapy and considers that the therapist should remain focused upon what the client 'does to him'. During my work with Kate, I was aware of my feelings of wanting to 'fix' Kate's family problems but also knew that it was important for any movement to be initiated by the client rather than myself. Charney (1986, p. 20) considers that supervision can provide a useful space to reflect upon the feelings of the therapist and make use of these as 'signposts for what the patient evoked' in order to assist in the development of the therapy. There were times when it felt as if the whole family were present in the therapy room. I could see that there was the potential for me to get caught up in Kate's process of needing to 'fix' other people. I was also aware that my desire to 'fix' the family's problems might be partly due to my sense of feeling overwhelmed by the volume of issues which Kate presented. During supervision, we reflected upon my sense of feeling overwhelmed and what it was like to sit with this in the session. My supervisor also addressed my desire to 'fix' the client's problems from the psychodynamic perspective of 'transference'. Whilst the person-

centred approach does not advocate working with ‘transference’, I feel I benefited from this in terms of developing a greater sense of empathic understanding. Therefore, supervision enabled me to get a sense of what the client was experiencing but without losing what Rogers (1957) termed the ‘as if’ nature of this experience.

6.1 REFLECTIONS ON THE CLIENT STUDY AND LEARNING

I have often heard people describe their work in therapy as being like ‘peeling layers of an onion’. This was something I experienced in my sessions with Kate. By developing a therapeutic relationship grounded in the ‘core conditions’ this appeared to assist Kate in peeling away layers of what Rogers (1961, p.351) described as ‘encrusted psychological defenses’. Over time, this enabled her to begin to reconnect with her actualising tendency and to acknowledge the feelings of grief which had been kept hidden from others.

Whilst those who advocate the use of what Merry (2004, p.43) terms as a ‘classical’ approach to person-centred therapy would emphasize the importance of a consistent and non-directive attitude towards both the content and process of therapy. The utilization of a more experiential person-centred approach, as illustrated by the work of Rennie (1998), facilitated a crucial shift in Kate’s process. This is illustrated by how the implementation of process identification within therapy enabled Kate to move beyond repeating past relationship patterns towards a point of resolution (Gendlin, 1968). In future, I feel I will be more aware of the potential value of making use of this as a way of assisting clients to access feelings which appear hidden (Rennie, 1998).

In addition, this study has facilitated my ability to reflect upon the integration of ‘*empirical research of the client and the counselling process*’ to my practice as a counselling psychologist in training (Clarkson, 1998, p. 3). During my work with this client, I was able to reflect upon how self-concept can play a role in inhibiting the resolution of grief. As a person who felt the need to assume the role as the ‘strong’ member of the family, this impeded the experiencing of

feelings which were necessary to reach resolution around a loss (Lazare, 1979). As postulated by Worden (2005), in order to address the unresolved tasks of mourning it was necessary to discover and reflect upon the 'mediators of mourning'. My early hypothesis considered that the mode of death, lack of social support following the bereavement and concurrent stress of looking after four young children were all implicated as 'mediators of mourning' (Worden, 2005, p.90). However, as the sessions evolved, an additional and crucial 'mediator' was identified, the role of Kate's partner in maintaining her sense of self-esteem following serious developmental deficits as a result of childhood traumatic experiences.

In keeping with the approach as scientist practitioner, an integral part of the work of counselling psychologists is an evaluation of clinical practice. One of the criticisms often levelled at the person-centred approach is the lack of objective measurement in relation to therapeutic outcome. When reflecting upon my work with Kate, it was important to find a mode of evaluation which was consistent with both the underlying philosophy of counselling psychology and the person-centred approach. This was found in the work of Worden (2005, p.115), who proposes three types of change which are valid in the evaluation of grief therapy. These include 'subjective experience', 'behaviour' and 'symptom relief'. All of these changes were reported by the client during the therapy. Kate's report of an increase in self-esteem and reduction in feelings of guilt around enjoying life were indicative of 'subjective changes'. Her ability to enjoy a holiday with her daughter, for the first time in five years, showed changes in 'behaviour' during the therapy process. In addition, her 'reduction in symptoms' of IBS and decrease in use of medication provided evidence of symptom relief and the link between her IBS and psychological factors (Creed & Guthrie, 1987).

Mearns and Thorne (1999) consider that one of the key aspects of the person-centred approach is the importance of the counsellor's therapeutic use of self. When making use of self disclosure, I have often found myself questioning the meaning of Rogers (1962) statement that self disclosure can be used when considered appropriate. By reflecting upon this work, I have begun to see for

myself that there was something occurring at an instinctual level which was guiding my decision to make use of disclosure. On some level, it just felt right at the time and perhaps this is what Rogers was trying to describe. I believe this will help me when working with clients in the future by encouraging me to have greater confidence in trusting my own intuition.

Upon reflection, I acknowledge that I could have elected to use a range of other therapeutic approaches, for example, cognitive behavioural therapy to help Kate to manage her symptoms of anxiety and IBS. Whilst this would have assisted her in coping with stress and managing her symptoms it may also have denied her with the opportunity to process the underlying symptoms of unresolved grief. I feel that it would have been useful to have been able to explore Kate's feelings of grief earlier in the work. However, Kate did not appear to be ready or able to reach these at the start of our work together. If I had directed her it would not have been in keeping with focusing upon the client's frame of reference. It was difficult to bring the work to a close so soon after Kate's husband's anniversary but I felt reassured by the fact that there was the possibility of further work with a family therapist.

One of the things that struck me about this case was the sense of connection that I felt I had with Kate. Despite her initial ambivalence and scepticism, our relationship appeared to deepen very early on in our sessions together. I am aware that sometimes when I am working using person-centred approach, I can tend to question whether I am doing enough to facilitate change. This case has highlighted to me that when I start to question my role I need to refocus on the therapeutic relationship and ground myself in Rogers (1957) 'core conditions for therapeutic change.'

Rogers and Sanford (1989) state that the 'core conditions' can be easily stated, complicated to describe and even more difficult to put into practice. The more I work using this model the more I come to realise just how well this encapsulates my experience of working from a person-centred approach. What on one level can appear so simple has also brought numerous challenges and rewards to my practice as a counselling psychologist in training.

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SECTION D: THE LITERATURE REVIEW

WORKING WITH PERFECTIONISM: THE CHALLENGES FOR COUNSELLING PSYCHOLOGISTS

CHAPTER 7

1.0 INTRODUCTION

This review evaluates the research on perfectionism. In doing so, it provides an assessment of how the research and practice of counselling psychologists has the potential to inform and enhance the understanding of work conducted in this area. Additionally, it reflects upon the challenges for counselling psychologists when working with perfectionism in clinical practice. In keeping with the philosophy of counselling psychology, a key theme throughout this work is a focus upon how perfectionism can impact the client's subjective experience of the therapeutic alliance and process of therapy. The review is divided into three sections. The first reflects upon the conceptualization of perfectionism and the research investigating the origins of this issue within the client. The second addresses the literature exploring the impact of perfectionism upon treatment outcome, the development of the therapeutic alliance and the process of therapy. To conclude, the final section explores the topic of perfectionistic self-presentation and the under researched area of perfectionism in counselling psychologists.

There has been considerable growth in research addressing perfectionism. Within the literature, perfectionism has been defined and conceptualized in many forms. Sorotzkin (1998, p. 88) describes a perfectionist as 'someone who is driven by fear of failure to strive compulsively towards goals beyond reach and reason'. Hirsch and Hayward (1998, p.359) postulate that a perfectionistic individual can often 'equate perfection with self-worth' resulting in an ensuing sense of inadequacy if these standards are not met. Whilst the definitions of Sorotzkin (1998) and Hirsch and Hayward (1998) differ in their conceptualizations of the underlying roots and impact of perfectionism, both instil a sense that perfectionism is likely to be a source of distress. In making a distinction between 'non-pathological' and 'pathological' perfectionism, Hamachek (1978) astutely notes that perfectionism in itself may not be problematic. Hamachek (1978) defines a 'non-pathological' perfectionist as

someone who can set high levels of attainment but is able to tolerate not meeting these standards, whereas individuals exhibiting 'pathological' levels of perfectionism are described as being unable to accept anything but the high standards set.

The contrasting definitions of perfectionism within the literature provide valuable information and cause for reflection within the world of counselling psychology. Firstly, is perfectionism always a source of distress in clients? Might this be a component which in some cases may enhance the therapy by acting as a motivating factor? In addition, when reflecting upon the work of Hamachek (1978), if perfectionism can be defined as 'pathological' and 'non-pathological', how can a distinction be made when working with clients? In order to expand upon these reflections, an exploration of the literature relating to the conceptualization and measurement of perfectionism provides additional insight into this area.

2.0 CONCEPTUALIZATION AND MEASUREMENT OF PERFECTIONISM

Early conceptualizations defined perfectionism as a unidimensional concept by placing the focus solely upon personal cognitive components which included dysfunctional attitudes (Burns, 1980) and irrational beliefs (Ellis, 1962). These unidimensional conceptualizations have been challenged by more recent findings where a greater focus has been placed upon the conceptualization of perfectionism as a multidimensional concept through the inclusion of both personal and social components.

Several measures have been utilized to assess perfectionism. Hewitt and Flett (1991a) developed a self-report Multidimensional Perfectionism Scale, a measure which has been validated by a number of empirical studies and reported to have good internal consistency in addition to acceptable construct validity and test-retest reliability. This scale makes the distinction between self-oriented, other-orientated, and socially prescribed perfectionism.

Self-orientated perfectionism (Hewitt & Flett, 1991a) is perceived to originate from within the individual and involves the setting of excessively high personal standards. In contrast to the findings of Burns (1980), Hewitt and Flett (1991a) report that self-orientated perfectionism can act as a positive motivational factor. However, the presence of this type of perfectionism has additionally been found to be positively related to a variety of psychological problems including depression (Hewitt, Flett & Ediger, 1996), anxiety (Flett, Hewitt & Dyck, 1989) and anorexia (Cooper, Cooper & Fairburn, 1985). The research findings relating to self-orientated perfectionism substantiate the distinctions of Hamachek (1978) by providing evidence for the existence of both 'pathological' and 'non-pathological' elements of perfectionism.

Other-orientated perfectionism (Hewitt & Flett, 1991a) is considered to be similar to self-orientated perfectionism but in this case the setting of exceptionally high standards is directed at others as opposed to the self. Research indicates that other-orientated perfectionism is related to positive qualities such as the ability to be resourceful and a determination to achieve goals (Flett, Hewitt, Blankstein & Mosher, 1991; Flett, Hewitt, Blankstein & O'Brien, 1991). Despite these positive qualities, Blatt (1995) also reports that this dimension of perfectionism can interact with negative life events resulting in depression. This suggests that the interpretations of individuals who exhibit this type of perfectionism can act as either a resource or a barrier to emotional well-being.

In contrast, socially prescribed perfectionism (Hewitt & Flett, 1991a) differs from both self-orientated and other-orientated perfectionism as this originates from the belief that others have excessively high standards and expectations for the individual. This perception instils a fear of being unable to achieve and live up to the standards of others. Hewitt and Flett (1991a) report that socially prescribed perfectionism has been found to correlate with the need for approval, external locus of control and a fear of negative evaluation across three sample populations totalling 242 students. In addition, socially prescribed perfectionism has been found to be associated with lower levels of intrinsic motivation and has been found to predict depression in cases where it interacts with

interpersonal stress and stress relating to achievement (Hewitt & Flett, 1993). These findings inform the practice of counselling psychologists by highlighting the need for an in-depth exploration of different aspects of perfectionism exhibited in clients during the assessment process. In summary, whilst self-orientated and other-orientated perfectionism can be either adaptive or maladaptive, Hewitt and Flett (1991a) contend that the presence of high levels of socially prescribed perfectionism have the potential to induce a state of learned helplessness. This results from perceived discrepancies between personal performance and perceptions of unrealistic expectations prescribed by others. Further research based upon other clinical and non-clinical populations would enhance clinicians understanding of this crucial aspect of perfectionism as it is apparent that this has the potential to impact a variety of aspects of the therapeutic relationship and outcome.

Frost, Marten, Lahart and Rosenblate (1990) developed an additional Multidimensional Perfectionism Scale (MPS-F) based upon self-report measures. This scale differs from the multidimensional measure of Hewitt & Flett (1991a) due to the absence of an assessment of other-orientated perfectionism. Despite these differences, there are also similarities as a result of the inclusion of assessment measures for personal and externally generated sources of perfectionism. The dimensions within the MPS-F (Frost et al, 1990) include concern over mistakes, doubts about actions, personal standards, organization and parental expectations, and parental criticism. However, in a review of the MPS-F (Frost et al, 1990), Stöber (1998) contends that this scale could be reduced to three inter-correlated factors, 'concern over mistakes and doubts', 'parental expectations and criticisms', 'personal standards' and an additional factor of 'organization'. Whilst the multidimensional measures of Frost et al. (1990) and Hewitt and Flett (1991a) differ in their approach to assessing different aspects of perfectionism, both measures highlight a clear distinction between personally imposed standards and externally generated expectations. These measures substantiate the notion that perfectionism is a multidimensional construct.

Knowledge of the measures used to assess dimensions of perfectionism can assist researchers and practitioners in categorizing different components of perfectionism. In particular, they highlight the importance of due consideration of both external and internally generated sources of perfectionism during client assessment. However, in a review of perfectionism assessment measures, Shafran and Mansell (2001) draw attention to the bias towards the use of self-report measures within the majority of empirical research investigating perfectionism. They contend that the retrospective nature of certain sub-scales, for example, the Frost et al (1990) dimension of parental criticism and expectations, do not facilitate an assessment of the client's current state and consequently are unlikely to detect clinical change. These findings are supported by Rhéaume et al. (2000) who conclude that the utilization of sub-scales designed to assess developmental aspects of perfectionism result in difficulties relating to the assessment and comprehension of perfectionism.

Whilst the literature addressing conceptualizations and measurement of perfectionism provide insight into a variety of factors implicated in perfectionism, these findings also generate questions in relation to the assessment of perfectionism within clinical practice. Whilst there are a number of features of commonality between the perfectionism measures of Frost et al. (1990) and Hewitt and Flett (1991a), it is questionable whether the use of these measures are sufficient in providing an accurate assessment of client perfectionism. Given that the research findings demonstrate a link between perfectionism and other forms of psychopathology, for example, depression (Blatt, 1995; Hewitt, Flett & Ediger, 1996; Lynd-Stevenson & Hearne, 1999) and anxiety (Flett, Hewitt & Dyck, 1989). This suggests that the use of additional assessment measures assessing anxiety, worry or depression might facilitate the assessment process when used in conjunction with perfectionism measures. In doing so, this would provide the potential to monitor subsequent changes during therapy. An integration of assessment measures may also assist psychological practitioners in determining when perfectionism should be the focus of clinical practice with clients.

An additional consideration during assessment is the ongoing debate as to how to define perfectionism. In a review of the characteristics of clinical perfectionism, Shafran, Cooper and Fairburn (2003) draw attention to the danger of perfectionism becoming defined by scales designed to measure it. They highlight the need to form clear definitions of perfectionism before developing scales which measure these aspects. This leads to the question as to whether research has truly captured the nature and essence of perfectionism.

At present, research into perfectionism has favoured the methods of natural science and is predominantly conducted within a quantitative framework incorporating a variety of methodologies including factor analysis, correlational analysis, path analysis and analysis of variance (ANOVA). However, qualitative studies addressing perfectionism are few in number; therefore, a greater understanding of the subjective experience of perfectionism may be enhanced by additional qualitative research in this area. Given that the utilization of qualitative research is in keeping with many of the underlying values of counselling psychologists (McLeod, 2003), this highlights the potential for counselling psychologists to enhance the understanding of the subjective experience of perfectionism through additional research from a qualitative perspective.

3.0 ORIGINS AND DEVELOPMENT OF PERFECTIONISM

Research addressing the origins of perfectionism postulates that this is often rooted in an individual's early experiences with parents who are critical and perfectionistic (Hamachek, 1978; Burns, 1980; Frost, Lahart & Rosenblate, 1991). From a developmental perspective, these findings are supported by Barrow and Moore (1983). Based upon their research and practice in group interventions with perfectionistic clients, Barrow and Moore (1983) posit four types of early parental experiences which can play a role in the formation and development of perfectionistic thinking. These experiences include:-

- Parents who were openly critical.

- Parents setting exceptionally high standards.
- Approval by parents being conditional, unpredictable or lacking.
- Parents acting as a model for child's perfectionistic thinking and behaviour.

The impact of early parental experiences in relation to the development of perfectionistic thinking can be perpetuated in adulthood. This is substantiated by the findings of Hollender (1965), who report that individuals who attempt to fulfil parental standards of perfectionism in childhood, as a way of attaining approval, may continue to repeat these patterns in adulthood. From a cognitive perspective based upon clinical experience, Barrow and Moore (1983) propose that early developmental experiences provide a basis for the foundation of a variety of maladaptive cognitive processes which relate to interpretations about the individual, people and the world. Therefore, they propose that the underlying source of emotional distress within perfectionism is the result of perfectionistic thinking styles. This is supported by the work of Burns (1980) who considers that perfectionists make use of dichotomous thinking styles where self worth and achievement are defined in terms of perfection or worthlessness.

In their review of the literature addressing the development of perfectionism, Shafran and Mansell (2001) contend that it may be possible for perfectionistic thinking to have a positive impact upon the individual in the early stages. However, over time, this may shift to becoming self-defeating and dysfunctional because of difficulties in achieving, or maintaining, the high standards which are acceptable to the individual. Whilst it is difficult to form an assessment of when perfectionistic thinking shifts from being positive to dysfunctional, the findings of Shafran and Mansell (2001) highlight the need for early intervention in clients who present with difficulties stemming from perfectionistic thinking.

Frost et al. (1990) support the notion that the impact of parental expectations and criticism can be a key component in the development of perfectionism. This is illustrated by research which reports that the impact of perfectionistic parents has been found to be related to a number of psychological problems including

self-critical depression (Blatt, Wein, Chevron, & Quinlan, 1979) and obsessive compulsive disorder (Rasmussen & Tsuang, 1986). However, the findings of Antony, Purdon, Huta and Swinson (1998) conflict with earlier research. They report little evidence of elevated scores in the parental expectations or criticisms scales using the MPS-F (Frost et al. 1990) in a large sample of clinical and non-clinical groups including clients with eating disorders, panic disorder, social phobia, obsessive compulsive disorder. Therefore, further investigation and comparison of different clinical populations has the potential to dispute or substantiate the impact of perfectionistic parents in relation to the development of psychological problems and inform the practice of counselling psychologists. Additional longitudinal research would also provide insight into the long-term impact of early childhood experiences upon levels of perfectionism. This would assist in the provision of psycho educational interventions for parents whose children are likely to be at risk of developing perfectionistic traits due specific parenting styles.

This review has addressed the impact of parenting styles upon the development of perfectionism; however it should be acknowledged that additional factors which may contribute to the development of perfectionism should also be considered. In assessing this area, it would be important to explore other experiences which may contribute to the development of client perfection, for example, educational/work experiences and the impact other key figures within the life of the client.

4.0 THE IMPLICATIONS OF PERFECTIONISM WITHIN CLINICAL PRACTICE

When reviewing the literature, it is important to consider the implications of perfectionism in terms of its links with psychopathology and impact upon the therapeutic relationship. From a diagnostic perspective, perfectionism has been linked with a variety of psychological disturbances and psychopathologies including depression (Blatt, 1995; Lynd-Stevenson & Hearne, 1999), eating disorders (Hewitt, Flett & Ediger, 1995), suicidal ideation (Hewitt, Flett & Weber,

1994; Hamilton & Schweitzer, 2000), obsessive compulsive disorder (Tallis, 1996; Antony, Purdon, Huta, & Swinson, 1998), social phobia (Antony et al, 1998) and personality disorders (Broday, 1988). In addition, perfectionism has been found to be detrimental to physical health with reports of a relationship between perfectionism and exhaustion (Mitchelson & Burns, 1998), general somatic symptoms (Martin, Flett, Hewitt, Krames & Szanto, 1996) and stress (Chang, 2000). Further research addressing the impact of perfectionism upon psychopathology will enhance the understanding of potential links with other psychological disorders, for example, post traumatic stress disorder (Shafran & Mansell, 2001). Whilst a critical assessment of the literature in this area will not be addressed within the confines of this review, these findings highlight the need for practitioners to develop knowledge and awareness of the potential impact of perfectionism within a variety of presenting issues which may be addressed in clinical practice.

The literature additionally reports that perfectionism can impact therapeutic outcome and the ability to form therapeutic relationships. Lewis and Bor (1998) highlight how the focus upon the therapeutic relationship and the need to monitor this throughout the duration of therapy is a central component of the work of counselling psychologists. Therefore, addressing the impact of perfectionism upon the therapeutic relationship provides counselling psychologists with the potential to develop greater knowledge and awareness around specific challenges which may be encountered during therapy. As Clarkson, (1998, p.3) states, this provides the potential for the application of '*empirical research of the client and the counselling process*, to the practice of counselling psychology'.

5.0 THE IMPACT OF PERFECTIONISM UPON THERAPEUTIC OUTCOME

Perfectionism has been found to be related to poor psychological outcome in a variety of empirical research studies based upon adult populations with depression (Flett, Hewitt & Dyck, 1989; Frost, Heimberg, Holt, Mattia & Neubauer, 1993; Blatt, Quinlan, Pilkonis, & Shea, 1995). Evidence from the

National Institute of Mental Health Treatment for Depression Collaborative Research Program (TDCRP) reported that high levels of perfectionism, assessed using the 'Dysfunctional Attitudes Scale' (Weissman & Beck, 1978) were related to negative outcome in brief therapy (16 weeks) in a sample of 239 clients with depression (Blatt et al., 1995). These findings were consistent across four different treatment conditions including medication+clinical management, a placebo condition+clinical management, cognitive behavioural therapy and brief interpersonal therapy when measured using comprehensive self-report and clinical measures of functioning assessed by clinicians and clinical evaluators. In contrast, patients with low levels of perfectionism were reported to be relatively responsive across all four treatment conditions. This further supports the notion that high levels of perfectionism are a major factor implicated in the brief treatment of depression.

The findings of Blatt et al. (1995) are further substantiated by an eighteen month follow-up study (Blatt et al. 1998) which reported significant correlations between high levels of pre-treatment perfectionism with diminished coping strategies, degree of fulfilling relationships and self-critical thinking. However, when reflecting on the research relating to outcome, it is important to acknowledge the findings of Elkin (1994) who in a comprehensive review of the review of the TDCRP findings questioned the effectiveness of short-term treatment for depression, in particular with clients who present with high levels of perfectionism. This highlights the need for additional research exploring the impact of long-term therapy in the treatment of perfectionism.

When evaluating the work of Blatt et al. (1995) it is important to consider the bias towards a sample population with depression. Whilst these results provide insight into the potential impact of high levels of perfectionism upon the outcome of brief treatment of depression, these findings must be interpreted with caution and cannot be generalized to other clinical populations with different presenting issues. Despite these methodological limitations, the inclusion of an assessment measure for perfectionism in clinical practice may inform the practice of counselling psychologists when conducting brief therapy with clients who present with depression. However, it may be important to utilize

other multidimensional measures of perfectionism (Hewitt & Flett, 1991a; Frost et al., 1990) within future research and assessment of clients in order to capture additional dimensions of perfectionism which may not be assessed by the 'Dysfunctional Attitudes Scale' (Weissman & Beck, 1978).

In a re-analysis of the TDCRP data, Blatt, Zuroff, Bondi, Sainslow and Pilkonis (1998) examined the impact of perfectionism over the course of therapy using the 'Dysfunctional Attitudes Scale' (Weissman & Beck, 1978). These findings suggested that the level of pre-treatment perfectionism did not impact upon the degree of clinical improvement during the first half of therapy. However, differences were found in the second half of treatment, with no further improvement being reported in individuals with moderate to high levels of perfectionism. Blatt et al. (1998) suggest that the findings may be linked to clients with higher levels of perfectionism being confronted with a sense of failure in relation to treatment towards the end of therapy. These findings have implications for clinical practice as they raise the question of the potential benefits of the latter parts of therapy in clients with moderate to high levels of perfectionism and question the effectiveness of short-term therapy in clients with moderate/high levels of perfectionism. In addition, they highlight the importance addressing the impact of the therapeutic ending early in therapy in order to enable beliefs about the outcome of therapy to be explored. When reflecting upon the continued improvement in clients with low levels of perfectionism during the second half of therapy this research suggests that low levels of perfectionism may be a factor which can facilitate therapeutic change. This supports Hamachek's (1978) notion of a distinction between 'pathological' and 'non-pathological' perfectionism.

When assessing the findings of Blatt et al. (1998) from a cognitive therapy perspective, in a review of the literature, Shafran and Mansell (2001) propose that the rigidity of beliefs in those with high levels of perfectionism could play a role in the disruption of the end stages of therapy where core beliefs tend to be challenged and modified. Therefore, they conclude that further research is required to explore how perfectionism might impede progress in the latter parts of other therapy with differing therapeutic approaches. Thus far the literature

reviewed has been criticized for its primary focus upon the impact of perfectionism in the short-term treatment of depression. Future research addressing the impact of perfectionism upon other psychological issues has the potential to expand current knowledge and inform the practice of practitioners.

6.0 ADDITIONAL FACTORS IMPACTING THERAPEUTIC OUTCOME

Whilst the quality of the therapeutic relationship has been found to influence therapeutic outcome in a variety of forms of psychotherapy (Horvarth & Symonds, 1991), there has been limited research into the impact of the therapeutic relationship when working with perfectionistic clients. Using data from the TDCRP, Zuroff and Blatt (2006) investigated the impact of the client's perception of the quality of therapeutic relationship upon treatment outcome. This was conducted using validated measures assessing a variety of aspects of the therapeutic alliance, perceived quality of therapeutic relationship and therapeutic outcome. These findings reported that the perceived quality of the therapeutic alliance early in therapy directly contributed to a number of dimensions of outcome in the treatment of depression including reduction of symptoms and improved adjustment across all four treatment conditions. The lack of differentiation between the four treatment groups suggests that it is not the specific therapeutic model which contributes to positive outcome but the quality of relationship which acts as a facilitator by enhancing the therapeutic intervention. Suggesting that the research population may not be representative of other target populations and highlighting the potential impact of manualized short-term treatment techniques, Zuroff and Blatt (2006) emphasize the need for naturalistic studies to reflect upon the role of therapist differences and therapeutic approaches within this area of research.

6.1 Length of therapy

The literature reviewed has explored the potential for poor treatment outcome solely in relation to brief therapy for depression following perfectionistic beliefs

(Blatt et al., 1995). As a result, it is also important to consider whether perfectionists, in particular those with moderate to high levels of perfectionism, may respond differently to longer term interventions. Blatt (1992) conducted a reanalysis of data from the Menninger Psychotherapy Research Project, a large scale American study comparing the effects of psychoanalysis and long-term dynamic therapies in anaclitic (those preoccupied with concerns relating to disruptions in interpersonal relationships) and introjective (perfectionistic and self-critical) outpatients. These findings suggested that perfectionistic (introjective) clients showed greater improvement with intensive long-term psychodynamic forms of treatment when compared to anaclitic clients. These findings are consistent with those of Elkin (1994) who questioned the 'potency' of short-term therapy in clients who present with depression and perfectionism. This suggests that the efficacy of treatment model and length of therapy may be dependent upon individual differences and pre-treatment pathology. However, it is difficult to generalize the findings of one study based upon an American sample population to other clinical populations, therefore, it is important to examine additional research in this area.

In contrast, Fredtoft, Poulsen, Bauer and Malm (1996) argue that a short-term psychodynamic approach focusing upon issues related to perfectionism was found to be effective in group therapy with a small sample of university students. Whilst direct comparisons between findings cannot be made due to the differences in sample populations and therapeutic approach, the findings of Fredtoft et al. (1996) conflict with the conclusions of Blatt et al. (1995). Based upon their findings from the TDCRP data, Blatt et al. (1995, p.1014) highlight how long-term psychodynamic psychotherapy may be required in the treatment of perfectionism to enable the individual to focus on relinquishing 'aspects of their identification with harsh, judgemental, parental figures who have set excessively high standards'. However, it is clear from the literature that research addressing length of treatment in relation to outcome with perfectionistic clients is scarce, and sample populations limited, making it difficult for direct comparisons to be made both within, and between, therapeutic approaches. The conflicting findings, limited sample populations and differences in therapeutic approaches reported within this review highlight the need for

additional research in order to establish evidence-based practice for the treatment of perfectionism.

7.0 HOW MIGHT PERFECTIONISM IMPACT THE PROCESS OF THERAPY?

Whilst this review has highlighted the potential impact of perfectionism upon treatment outcome, the literature also suggests that client perfectionism has the potential to impact upon a variety of aspects within the process of therapy.

7.1 Seeking support from psychological services

The literature reflects a number of difficulties and concerns which might make it problematic for perfectionistic clients to enter and engage in therapy. This appears to be a crucial area of research when working with perfectionists given the empirical research linking perfectionism with psychopathology. Larson and Chastain (1990) report that perfectionists can become emotionally withdrawn from relationships which results in an inability to seek help from mental health professionals due to fear of disclosure. This is supported by the research of Nielsen et al. (1997) who in a regression analysis reported that high levels of socially prescribed perfectionism were related to decreased tolerance of stigma around seeking help and less willingness to self disclose during therapy. An additional finding of this research was an association between other-orientated perfectionism and a lack of confidence in mental health practitioners, which was not reported in clients with self-orientated or socially prescribed perfectionism. Whilst these findings suggest that considerable anxiety can be experienced by perfectionists both prior to and during therapy, the design of this study does not permit the inference of causality. A future area of study which would inform practice might be a qualitative analysis of perfectionists' experiences of seeking psychological support. This would provide an opportunity to explore factors which facilitate or hinder help-seeking behaviours in perfectionistic clients and in doing so inform the practice of counselling psychologists.

Despite the research evidence of potential difficulties in seeking support, certain components of perfectionism have also been reported to be beneficial in the process of therapy. Based upon extensive experience in clinical practice, Hirsch and Hayward (1998) describe how perfectionists can often be punctual and reliable in terms of carrying out tasks set in therapy. This is supported by the research of Hamachek (1978) who reports that perfectionism has been found to be a factor which can promote achievement and facilitate adjustment. Therefore, Blankstein and Dunkley (2002) propose that one of the goals in therapy is the modification of the maladaptive aspects of perfectionism which result in emotional distress whilst simultaneously enhancing the positive, more adaptive, aspects of perfectionism.

7.2 Perfectionism and the development of a therapeutic alliance

Weissman and Beck (1978) reported that perfectionism has been found to be associated with difficulties in the formation of a good therapeutic alliance within therapy. This is supported by further analysis of the TDCRP data where Zuroff et al. (2000) highlight the potential impact of perfectionism upon the client's ability to contribute to the strengthening of the therapeutic alliance during the development of therapy. The findings propose a number of factors which could be implicated including the possibility that perfectionistic clients may have a limited capacity to develop a collaborative therapeutic relationship. Additionally, clients may be less adept at dealing with disruptions in the treatment process resulting in a negative impact upon the ability to form a strong therapeutic alliance and engage with the therapeutic process. However, these findings must be interpreted with caution due to the correlational nature of the study and the fact that the research is based upon a sample population with depression which in itself may serve to attenuate the development of a therapeutic alliance and engagement within therapy. Despite these limitations, the findings of Zuroff et al. (2000, p. 120) conclude that perfectionism serves 'to attenuate the overall increase in patient alliance'. Therefore they postulate that practitioners may need to implement specific therapeutic strategies focused upon the reduction of

perfectionism, for example, an exploration of realistic expectations within therapy, in order to enhance the collaborative nature of the therapeutic process.

Based upon a review of the literature research, Blatt, (1995) offers an alternative explanation in relation to the role of perfectionism in attenuating the formation of a therapeutic relationship. He hypothesizes that clients with perfectionism are likely to enter therapy feeling vulnerable, looking to win approval and avoid negative feedback and close relationships. This is considered to result from a fear of failure and an expectation of being hurt by others. Therefore Blatt et al. (1995) suggest this can often result in the formation of relationships which are emotionally distant and superficial.

In response to the inconclusive findings, Habke and Flynn (2002) propose that research examining the impact of perfectionism in group therapy settings may provide further insight into the relationship between perfectionism and the client's ability to contribute to the formation of a collaborative therapeutic relationship. However, the literature examining group interventions with perfectionistic clients is scarce. Based upon clinical practice using group interventions with perfectionistic clients, Barrow and Moore (1983) propose a series of goals. These include the development of realistic goals, a greater capacity to tolerate when goals are not achieved, an ability to separate self-worth from performance and the development of cognitive coping strategies to moderate perfectionistic responses. Whilst the clinical insight of Barrow and Moore (1983) provides an understanding of potential goals for group interventions, there is an absence of outcome research to substantiate the effectiveness of these interventions. An additional area which would inform the practice of group interventions with perfectionistic clients would be an exploration of group dynamics within this setting. This would provide additional understanding in relation to whether group process would augment or reduce the manifestation of perfectionistic tendencies and provide insight into factors contributing to the formation of a therapeutic alliance within this client population.

In addition, Blatt et al, (1995) propose that the impact of perfectionism on the ability to form a therapeutic relationship may be a factor implicated in the negative relationship between perfectionism and outcome. However, Zuroff et al. (2000) contend that whilst negative treatment outcome may be linked to the perfectionist's difficulties in forming close relationships this could also be impacted by the brief nature of the therapy included in the research. They consider that further research is required in order to assess the therapeutic alliance from the perspective of the perfectionist, the therapist and independent observer. Research addressing possible interactions of different dimensions of perfectionism upon the quality of the therapeutic alliance would be a valuable way in which to provide an in-depth analysis of this area. A key area of research within this domain would be an investigation into the impact of other-orientated perfectionism upon the formation of the therapeutic alliance. This might provide further insight into potential expectations held by the client which might need to be addressed as part of the therapeutic process.

7.3 Manifestations of perfectionism within therapy

The literature also highlights the challenges of letting go of perfectionistic thinking and behaviour during therapy. As clients become more aware of the reasons behind their perfectionism, the clinical findings of Sorotzkin (1998) observe that there can be a tendency for the client to become perfectionistic in terms of goals for therapy. This is supported by Hewitt and Flett (1996) who consider that unhelpful goals and beliefs relating to therapy have the potential to undermine the therapeutic process. In a review of the literature on working with perfectionism, Corrie (2002) highlights a tendency for the perfectionist to assess progress using 'all or nothing' thinking with the inevitable challenges in therapy being seen as indications of failure. Therefore, she suggests that it is important for the client to understand what the therapeutic process involves and for any goals set within therapy to be carefully planned with the client's perfectionism in mind.

The termination of therapy is also be a key component in the work with perfectionistic clients as this brings with it the potential for the client to be confronted with a sense of failure in relation to treatment outcome. Based upon a review of the literature, Corrie (2002, p.23) considers it may be important to assist clients in achieving a sense of satisfaction despite the lack of a 'perfect outcome'. In addition, she highlights the potential value for the client to explore any sense of disappointment in order that they can experience a situation where the therapist is able to remain with the client unconditionally in the absence of a perfect outcome.

8.0 PERFECTIONISTIC SELF-PRESENTATION

Another challenge faced by psychologists is working with clients who display symptoms of perfectionistic self-presentation. There is a scarcity of research addressing the issue of perfectionistic self-presentation; therefore this is a crucial area for counselling psychologists to reflect upon in order to inform clinical practice. Hewitt et al. (2003) describe perfectionistic self-presentation as a maladaptive strategy associated with low self-esteem, internal and interpersonal distress. This is expanded upon by Sherry, Hewitt, Besser, Flett and Klein (2006, p. 830) who consider that perfectionistic self-presentation relates to 'the expressive features of perfectionism' and the need to promote areas of perceived perfection whilst simultaneously obscuring imperfections from others.

Although there is a degree of overlap between perfectionistic self-presentation and trait perfectionism due to the role of self-orientated and socially prescribed within both areas, Hewitt et al. (2003) consider trait perfectionism and perfectionistic self-presentation to be theoretically and empirically distinct. Whilst trait perfectionism focuses upon the nature and attitudes related to perfectionism, perfectionistic self-presentation centres on how individuals communicate their perfectionism to others. In addition, Sorotzkin (1985) proposes that in the case of perfectionistic self-presentation, the need for recognition and acceptance can become so great that individuals create a

'façade' in order to display the admired qualities and provide protection against possible rejection.

Based upon a series of seminal empirical studies in this area using a diverse range of clinical and non-clinical sample populations, Hewitt et al. (2003) report that just as there are individual differences in dimensions of trait perfectionism there can also be a variety of dimensions of perfectionistic self-presentation. These differences relate to concerns about presenting an image of perfection to others versus a need to avoid showing or disclosing imperfections. They consider there to be three components of perfectionistic self-presentation:-

- Perfectionistic self-promotion, in which an individual aims to display an image of perfectionism in public.
- The hiding of imperfections, whereby an individual attempts to avoid and conceal displays of imperfection.
- The nondisclosure of imperfection, where the individual avoids making verbal disclosures of any imperfection.

In their research based upon a large clinical and non-clinical population using the Multidimensional Perfectionism Scale (Hewitt & Flett, 1991a), Hewitt et al. (2003) found evidence for individual differences in perfectionistic self-presentation. These findings reported a strong association between perfectionistic self-presentation and both socially prescribed and self-orientated perfectionism. Hewitt and Flett (1991b; 1993) additionally report that both self-orientated and socially prescribed perfectionists have a tendency to avoid facing their own imperfections. Therefore, Flett and Hewitt (2002) consider that perfectionistic self-presentation is a potential block for perfectionistic individuals in terms of seeking social or professional support.

In addition to potential difficulties relating to help-seeking behaviours, perfectionistic self-presentation may also present difficulties in terms of the need to portray an ideal self or conceal imperfections from the therapist during therapy. This is substantiated by the findings of Meleshko and Alden (1993) who report that individuals who felt unable to disclose their shortcomings,

limitations and fears typically had difficulties in forming intimate relationships. These findings lead Hewitt et al. (2003) to highlight a need for further empirical research in order to investigate the impact of perfectionistic self-presentation in terms of the difficulty in disclosing personal problems and an unwillingness to seek assistance from social support networks. A key question which is yet to be addressed by the literature is whether varying degrees of perfectionistic self-presentation have the potential to impact the process in different ways. In addition, further research examining the impact of perfectionistic self-presentation upon emotional expression and potential links between the need to conceal emotions and subsequent health problems would enhance understanding of this crucial but under researched area (Hewitt et al., 2003).

9.0 PERFECTIONISM IN COUNSELLING PSYCHOLOGISTS

This review has considered the challenges for counselling psychologists when working with perfectionism but thus far this has been addressed from the perspective of the client. Lewis and Bor (1998) note that within the work of counselling psychologists; the 'self' of the therapist has an important role to play in the building of the therapeutic relationship. As a result, it is important to explore the issue of perfectionism from a different perspective, by reflecting upon how this might manifest itself in counselling psychologists and the potential impact this may have upon the therapeutic relationship.

Despite the fact that perfectionism appears to be prevalent amongst psychological practitioners, the literature in this area is scarce. In their research into practitioner perfectionism, Wittenberg and Norcross (2001, p.1544) state that 'conducting psychotherapy can present a formidable assault on a psychotherapist's fantasy of perfection'. This is supported by the findings of Deutsch (1984), who carried out a self-report study upon psychotherapists most distressing cognitions related to conducting psychotherapy. In addition to placing blame upon their ability if the client did not progress, a variety of popular responses were identified. These cognitions included thoughts that the practitioner should always have an ability to work at a peak level of competence

and enthusiasm, have an ability to work with all clients and to handle any emergency presented. This research highlights the need for additional qualitative and quantitative research in order to provide a thorough and honest exploration of practitioners' perceptions relating to personal and professional expectations. Future research will inform the practice of those within the profession and has the potential to enhance practice with clients through appropriate modelling of realistic goals in relation to the self and therapy.

Wittenberg and Norcross (2001) contextualizes the experience of psychological practitioners by proposing that the nature of therapy presents the practitioner with a host of challenges including clients who seem to make little, or no improvement, and those who question the skills and ability of the therapist. In their research based upon 197 doctoral level and private practice psychologists, perfectionism was found to be negatively related to both work satisfaction and tolerance of uncertainty in therapy. Whilst these findings enhance the understanding of the impact of perfectionism upon clinical practice, they must be interpreted with caution. In addition to the correlational nature of this study, the sample population was noted to be unrepresentative due to the differences in age and low levels of perfectionism reported in comparison to other populations. Despite these methodological reservations, the work of Wittenberg and Norcross (2001) highlights the need for further research in this area. This is supported by Corrie (2002) who in a review of the current literature emphasizes the need for research addressing perfectionism in counselling psychologists in order to assess the ways in which this might relate to issues of stress, burnout and the ability to cope within the profession.

Corrie (2002) draws attention to the fact that research in this area has potential implications for the continuing personal and professional development of counselling psychologists. Additional key areas which warrant investigation include an assessment of whether certain aspects of perfectionism or perfectionistic self-presentation in psychologists are more likely to impact the therapeutic relationship. It may also be important to explore the dynamics of a perfectionistic client working with a perfectionistic psychologist. Would this be likely to augment the difficulties in outcome and quality of therapeutic

relationship? In conclusion to their research exploring the impact of therapeutic relationship upon treatment outcome of depression, Zuroff and Blatt (2006) advocate a valuable area for future research. This highlights the need for an exploration of possible interactions between therapist characteristics, client characteristics and the type of therapeutic approach in relation to the formation of the therapeutic relationship. Whilst research addressing practitioner perfectionism is still in its infancy, a review of the current literature illustrates the need for an expansion of knowledge and understanding of this under researched area.

10.0 CONCLUSION

This review highlights a number of challenges faced by counselling psychologists when addressing issues related to perfectionism during their practice. Research has indicated a link between perfectionism and negative therapeutic outcome (Blatt et al., 1995) and potential difficulties in the formation and development of a therapeutic relationship (Zuroff et al., 2000). In addition, the findings of Blatt et al. (1998) suggest that individuals with moderate or high levels of perfectionism are likely to show little therapeutic change in the second half of brief therapy. In contrast, low levels of perfectionism are reported to enhance the second half of brief therapy which supports the notion that low levels of perfectionism can enhance the therapeutic process. The literature also reports a number of potential difficulties which perfectionists might encounter prior to and during the process of therapy. These include difficulties in seeking psychological support (Larson & Chastain, 1990; Nielson et al., 1997), problems with the formation of intimate relationships (Meleshko & Alden, 1993) and perfectionistic expectations within therapy (Sorotzkin, 1998).

Whilst these findings provide an insight into specific issues which might be encountered when working with perfectionistic clients they also appear to generate a variety of unanswered questions. In particular, the findings do not explain which specific aspects of perfectionism might impact the therapeutic process and neglect the exploration of the impact of long-term therapy across a

variety of treatment models. There also appear to be a number of methodological issues which need to be considered in relation to the research. Firstly, the majority of the therapeutic outcome studies included in this review address the impact of perfectionism upon therapeutic outcome in the treatment of depression using the TDCRP data. Therefore, Shafran and Mansell (2001) consider it is important to further this research by investigating whether perfectionism has an impact on the treatment of other disorders and other client populations.

The research has primarily involved short-term manualized treatment models, which does not allow the impact of long-term therapy or individual differences amongst therapists to be explored. Additional research exploring treatment outcome in long-term therapy, across a variety of treatment approaches, may provide further insight into the optimal treatment approach and length of therapy. Another key area for future research would be an in-depth examination of perfectionistic self-presentation as this has been implicated as a factor involved in the relationship between perfectionism and negative therapeutic outcome (Blatt et al. 1995).

Finally, although the literature defines a variety of unidimensional and multidimensional scales designed to measure dimensions of perfectionism there is still an underlying lack of clarity as to how perfectionism should be defined (Shafran, Cooper & Fairburn, 2003). The findings of this review contend that it remains questionable as to whether the current research has truly captured the experience and manifestation of perfectionism. Therefore, further qualitative research in this area might facilitate an in-depth exploration of the experience of perfectionism from the perspective of both client and practitioner.

10.1 Relevance to counselling psychology

These findings of this review are of interest to counselling psychologists for a number of reasons. Firstly, the literature suggests a link between perfectionism and variety of forms of psychopathology and other psychological disturbances.

Secondly, reports relating to negative impact of perfectionism upon formation of the therapeutic alliance are crucial due to the focus placed upon the 'potentially curative properties of the therapeutic relationship' (Martin, 2006, p. 35) within the work of counselling psychologists. Additionally, the research addressing treatment outcome provides an insight into the potential impact of perfectionism upon short-term therapy. This is of particular interest to counselling psychologists working within Primary Care settings where short-term therapy is the usual treatment option.

Corrie (2000, as cited in Corrie, 2002) highlights that despite the growing body of research and increasing awareness around the potential negative impact of perfectionism upon treatment outcome, few clients are referred specifically to address this issue. At present, due to the lack of guidelines in this area, there is no consensus as to when perfectionism should become the focus of treatment and which therapeutic approaches are most beneficial when working with this presenting issue. Additional research might inform the practice of counselling psychologists by investigating any potential relationship between perfectionism and relapse. If research was found to support the idea that perfectionism might be a factor that predisposes clients to relapse then therapy addressing perfectionism would be a useful tool in relapse prevention work.

The research has additionally highlighted a number of potential challenges which may emerge during therapy regarding expectations relating to the process and outcome of therapy. Corrie (2002) notes that it may be important to address the inevitable challenges which are faced during therapy as an opportunity for growth as opposed to a sign of failure. By addressing expectations at the start of therapy, this might assist the client in beginning to generate realistic as opposed to 'perfect' goals. As Prueett, (1991, p.348) states: 'it helps to know, earlier rather than later that the pursuit of perfection is always done whilst riding on a hobbled horse.' The literature also suggests that the end of therapy might provide additional challenges and the opportunity for learning as the client is confronted with potential difficulties in accepting the notion of a less than perfect outcome. Therefore, Corrie (2002) highlights the importance of addressing any potential concerns or disappointments in order for the client to

be able to reassess their expectations and experience a less than perfect outcome in an unconditionally accepting environment.

In conclusion, a variety of issues which have not been addressed within the confines of this review must be acknowledged. In particular, it is important to consider how gender and cultural differences might relate to various dimensions of perfectionism. This is supported by Corrie (2002, p.23), who highlights the need for counselling psychologists to focus upon 'the multiple, explicit and implicit personal and cultural rules' which are faced within practice. Whilst there is a wealth of literature addressing a variety of aspects of perfectionism in clients, issues relating to perfectionism in psychological practitioners have also been neglected. The review has highlighted the need for further research into perfectionism in counselling psychologists and how this might impact the therapeutic process (Corrie, 2002). Research addressing potential interactions between different dimensions of perfectionism in counselling psychologists and impact upon the therapeutic process is an additional area which is currently neglected within the literature. Whilst reflecting upon aspects of personal perfectionism it is also necessary to explore and acknowledge our own personal and professional imperfections. As Wosket (1999, p.109) states 'when we are fallible we are at our most human and when we are at our most human we are in touch with our greatest potential for helping clients.' Surely this is in keeping with the core values of the work of counselling psychologists?

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