

Closing the circle, to open a creative space: Can the intentions of avowedly psychoanalytic research methodologies be fulfilled in methods that are deeply congruent with this epistemology? A methodological study to inform future psychoanalytic research endeavours.

Claire Lokke

A thesis submitted for the degree of Professional Doctorate in Child and Adolescent Psychoanalytic Psychotherapy

Tavistock & Portman NHS Foundation Trust

University of Essex

June 2023

The next phase of the project involved psychoanalytic supervision with my research tutor. This was an organic, experiential encounter through which attention was drawn to aspects of our encounter that, through parallel process, seemed to illuminate aspects of my informant’s experience of the topic. I then considered how the rich interview experience between me and my informant, and equally rich supervision experience between me and my supervisor, could be represented in a research paper. Through this process, I developed a five-point data-analysis guide, which starts from good qualitative-analysis practice of data immersion, then moves into in-depth psychoanalytic exploration, for which I developed four data-analysis questions. In the Findings section, I reflect on the operationalisation of my guide and I will demonstrate, through applying my data-analysis questions to samples of transcript, how my method worked in practice. Sampling data in this way, rather than presenting an analysis of the whole data set can be justified on the understanding of the holographic nature of data in human science, e.g. Seidel (1998) utilises a holographic metaphor, stating that the essence of a phenomena may be maintained by intensively examining part of the data set, rather than intensively coding it all.

The psychoanalytic nature of my research requires a certain level of tolerance of disbelief and of bearing the unknowable nature of a person’s reality (Bion). The unconscious is not rational (Freud, 1915/2001) and therefore in its exploration, the imaginative part of our mind has to be applied. What will be presented is not a series of facts about my informant’s experience, but observations that can neither be proved nor disproved, yet nevertheless contribute to an understanding of the complex reality in relation to the topic.

Attride-Stirling states that in order for the value of qualitative research to be realised, there is a requirement for “methodological rigour at all stages of the research

Furthermore, the non-psychoanalytically minded students seemed to find the process more challenging and were less able to produce moments of reverie. Holmes suggests that “(r)everie-influenced researching becomes a *capacity* which may potentially be developed through practice and supervision” (p.5).

Holmes makes an important methodological contribution, which he is careful to situate as requiring ongoing work, for example, the need for it to be tested with different populations. He signposts ideas for future research, in which a panel might attempt to find analytic consensus in relation to a script and consider “which elements of understanding they wish to feedback to the participant, and this might inform a follow-up interview” (p.130). Holmes’s review of reverie theory and practice offers me a solid base from which to develop my method contribution.

I will now look at how FANI has been used by researchers over the past ten years and whether RRM or reverie-informed methods are yet in evidence in published research.

2.5 Part C. Survey of doctoral level studies using FANI and RRM

2.5.1 FANI

The British Library’s EThOS database offers digital access to doctoral theses undertaken in UK higher education institutions. I used this to explore how FANI has been used by doctoral students over the past 10 years and where in the UK such studies have been undertaken. I started my exploration by entering the search term “Free Association Narrative Interview” (05.09.20), which gave 55 returns (six of which were false positives).

Table 4a. Distribution of FANI projects by university.

University	Number
Essex & Tavistock	12
Essex	6
Sheffield	4
UEL	3
West of England	3
Exeter	3
Nottingham	2
MCR	2
Sussex	1
Salford	1
Middlesex/Metanoia	1
UCL	1
Manchester Met.	1
Hull	1
Herts	1
Southampton	1
Keele	1
Roehampton	1
Cardiff	1
Leeds	1
Portsmouth	1
Open	1
	N=49

Chapter Three. Research design

3.1 Introduction

In this chapter I will outline the aim of my research and its psychoanalytic underpinnings in terms of ontology, epistemology and methodology. I will describe the nine-point guide I developed from the literature review and the evolution of my five-point data-analysis guide, which grew out of the psychoanalytic supervision that formed an essential element of my research. The final part of this chapter will outline other methodological considerations such as contextual information, recruitment, ethics, validity and data protection.

3.2 Research aim

My primary aim is to develop a psychoanalytically informed method for undertaking research interviews, from pre-interview preparation through data gathering to data exploration and analysis. I intend to build directly upon the elements of good practice that I have synthesised from the published literature and unpublished doctoral projects.

I anticipate that developing and then trialling such a method will produce rich data and in order to do this material justice, substantial time will be allocated for psychoanalytic exploration of it. Given the pandemic context, I will trial my method with one informant only. I selected the topic “experience of IAs” on the basis of it being an area of CAMHS work where there is concern regarding good practice and therefore, likely to be a topic that provokes anxiety. I believe this will lend itself well to a psychoanalytic investigation. Finally, I will grapple with how the rich data gathered from the project’s inception, might be adequately represented in a research report.

3.3 Initial research questions

Psychoanalytic methodology seeks to gain access to the unconscious experience of both researcher and informant, seeing this as a valuable source of information regarding the

our associations to them enabled me to connect to something that her fast, unpunctuated speech often precluded. For example, I drew her attention back to her octopus image during interview one when trying to understand more about the professional demands on her, and during interview two she brought our attention back, through elaborating on her seascape imagery, to convey the unpredictable nature of her experiences.

The data produced from my informant's images seemed thick with meaning and the impact of them stayed with me after the interview and throughout the transcript analysis. During the interviews I felt a degree of contentment as if something creative were happening within our shared experience. In contrast, it was not until I started the transcript analysis that I felt a swell of danger that also seemed present in her material. It seemed that in the safety of my office away from the emotional intensity of the relationship (unconscious-to-unconscious pressure) more information became available for consideration. In the live-interview situation, ideas that seemed consciously unacceptable to my informant, perhaps because of the degree of anxiety they generated, nevertheless seemed unconsciously communicated in how she engaged in considering the images she brought. By the end of interview two, ideas associated with dangerous professional practice seemed to come into the realm of the thinkable and she was able to consciously describe her concerns. I believe that the impact of asking my informant to bring an object or image to the first interview was, therefore, of critical value.

Chapter Five. Discussion

5.1 Introduction

In this chapter I will review my original aim and research questions and consider how I have addressed these through developing and operationalising my nine-point guide. I will consider whether my four data-analysis questions are reasonably comprehensive in facilitating psychoanalytic exploration, and thus, able to approach the complex reality of my informant in relation to the IA topic. I will end by discussing the contribution of my study to future psychoanalytically informed research.

5.2 Research aim

I am aware of Midgley's opinion that Hollway and Jefferson's work offers "a fully elaborated theoretical model and description of the implications of this model for every stage of the research process" (p.219). Their work excited me, yet as a novice researcher, I felt further elaboration of a start-to-finish psychoanalytically informed method could be helpful. Holmes's work and the attention Archard paid, in particular to FANI, further advanced my interest and stimulated my wish to synthesise their approaches, whilst attending to the criticisms levelled at taking psychoanalysis out of the consulting room. I was thinking particularly about my needs as a student of psychoanalysis, wishing for a method that would utilise the skills of my training, and in so doing, perhaps offer new guidance of value to other psychoanalytically informed researchers. I felt less sure about developing such a method for non-psychoanalytically trained individuals. My study is not intended to convince sceptics of the value of including the unconscious. A reader would have to approach my work in a state of mind willing to bear the uncertainties inherent both in the method and results. Nevertheless, those curious about a psychoanalytically informed method may find something of interest in what I have done.

Greater explicit information would perhaps be necessary if informants have no such experience. Even so, it is only through the lived experience of the research encounter that they would truly come to know that to which they had consented. A reflective space at the end of each interview, or having a third interview space (as I originally intended) would be a potential way to mitigate concerns regarding informed consent, as here, the informant could be invited to reflect on their lived experience of participation.

An understanding that latent material will be communicated at multiple, concurrent levels is inherent in a psychoanalytic method. It occurs between researcher and informant; informant and the topic; researcher and the topic; researcher, informant and the topic altogether. There is no neat division between data gathering and analysis as the process happens constantly and iteratively. Ethically, this needs to be held firmly in mind alongside the fact that the only question of concern is how this relates to the informant's experience of the topic under investigation. When I describe my informant's communication style, it is not to describe this as an aspect of her personality, but as a potential communication of an aspect of her experience of the topic. For example, in the live-interview situation, I struggled to keep track of the unfolding manifest story as it was disrupted by her unpunctuated speech. I felt distanced and confused and my ability to engage with curious questioning was limited. I believe this may be illuminating an aspect of her IA experience: of something happening urgently, of confusion and frustration. It may relate both to her experience as the clinician, but also of her identification with the families. The waiting time for an IA is over 12 months, which perhaps lends credibility to my analysis.

I suggest psychoanalytic supervision is ethically essential when engaging with unconscious material and is another source of data. It allows a space outside the interview situation to provide perspective on what has occurred. My tutor and I noticed

5.3.4 How can this burden of uncertainty be born, whilst still contributing something of value to the topic under investigation?

Perhaps the most ethical aspect of my psychoanalytically informed method is my assertion that *nothing* can be stated categorically about an informant's experience because, like all experiences, it is not a static entity but one that changes according to the constant interplay of inner-and-outer experience (e.g. Klein, 1946/1988). So, if nothing is certain, where does that leave the relevance of a psychoanalytic method? Whilst nothing can be stated as categorical truth, my contention is that it allows a complex illumination (the unconscious drawing attention to itself) and both researcher and informant have the possibility to increase or decrease the intensity of the illumination, opening up new and unexpected avenues for further investigation. In Holmes's study (2019) he found similar reverie images were produced by multiple students in response to a data extract. With multiple informants, experience-near data may be looked at together to see what additional stories may be brought into the light. Each research relationship will have something of value to add to the experience being investigated.

5.3.5 Further thoughts regarding ontology and epistemology

Of particular interest to me in deciding to do a methodological study was to develop my understanding of what is meant by psychoanalytic ontology and epistemology. During the thesis writing stage I returned to this and delved back into published literature. My exploration uncovered the work of the psychoanalyst Ogden, who illuminates a complex issue I was struggling with when trying to write about what is meant by ontology (the nature of reality) and epistemology (what can be known of this). Ogden (2019) describes how clinical psychoanalysis is both "*ontological* (pertaining to being and becoming)" and "*epistemological* (pertaining to knowing and understanding)"

(p.662). Epistemological psychoanalysis is concerned with understanding and interpreting what is latent and ontological is concerned with helping patients become more fully themselves. This struck me as fascinating and of interest to my research endeavour: could a psychoanalytically informed research method be located within the realms of ontology, more than epistemology? And if so, what would that look like? Following my reading of Ogden, I believe that an epistemologically-focused method would attempt to uncover latent ideas in the data for purposes of interpretation and enhanced understanding. On the other hand, a more ontologically-focused method might attempt to *be with* the informant as she experiences herself in relation to the topic as fully as possible, perhaps through a process of gazing in the same direction and waiting to see what emerges. In this way, facilitating a greater contribution by the informant. I believe that during the part of the interview illustrated in Example 3, I was taking a more epistemological approach in attempting to *understand* my informant's latent communication as expressed through her seascape imagery. Yet, I think at a certain point, almost certainly unconsciously, I shift to a more ontological position. This seems to facilitate our playfulness, and through this "in the moment" experiencing my informant becomes more fully able to let me know about her IA experience (as she went on to do in Example 4).

5.4 What does my research tell us about IAs?

When choosing to explore a clinician's experience of IAs, I was interested in the encounter between clinician and family: how need is communicated, assessed and from which intervention or discharge is decided. I was therefore surprised by the direction my informant took, and pleased that this was perhaps evidence of her using the research space to communicate what she wished (needed?) rather than being unduly influenced by imagining my agenda.

From my informant I learn about the interminable wait for an IA of beyond a year and the process of getting onto the waiting list, which involves a triaging phone-call. There is pressure to signpost to other services and little time to take in the complexity of a family's story. Although important, signposting can feel mechanical: "have you accessed a parenting service? what about trying a free online therapy?" If a family calls whilst on the waiting-list, they are audited as to whether they have accessed the signposted service yet. Recognition of the level of disturbance which brings a family to CAMHS seems lost in this form of contact. When a family finally make it to an IA, there is a feeling of emphasising resilience, not looking too deeply. The back-to-back nature of moving from one appointment to the next, leaves little time for thinking.

Pressure on individual clinicians, made worse by the pandemic (e.g. rising numbers of young people in emotional distress; the isolating nature of remote working) leaves clinicians feeling disconnected. Perhaps this contributes to my informant's experience of her team's struggle to engage with the more disturbing families: pushing for discharge rather than engagement. I also hear that when joint-working with another clinician is available, hard-to-engage families are reached. But this is then jeopardised by difficult-to-understand decisions to transfer to other clinicians.

The relentless nature of the IA system seems clear, with consequent threats to the quality of assessments and to a clinician's identity: the question of whether it is a personal or professional failure, rather than an institutional crisis, seems present. This perhaps contributes to the mechanical following of protocol, rather than responding in a more nuanced way. I hear about the courage entailed in voicing concern to fellow clinicians and the powerful impact in mobilising systemic change when this is possible.

5.5 Contribution of my study and its limitations

At the beginning of my research process I asked whether the intentions of avowedly psychoanalytic research methodologies could be fulfilled in methods that are deeply congruent with this epistemology; I believe I have made a contribution in demonstrating the possibility of this through synthesising good practice and developing a novel psychoanalytic data-exploration method. In operationalising my method, I have laid this out for examination by others.

Criticism could be made that I have only drawn together aspects of practice that were already well-known, without sufficiently addressing the specific arguments levelled at psychanalytically informed research interviewing (e.g. regarding its place in the psychosocial field or being more specific about the use of psychoanalytically informed ideas outside the consulting room). Perhaps my method will seem insufficiently clearly defined, or that my illumination of my informant's experience shows too much evidence of my own preoccupations. A key challenge limiting my contribution, lies in my difficulty representing in words the multitudinous possibilities that emerge within the psychoanalytic research space.

Midgley wonders if a researcher needs their own psychoanalysis to engage in psychoanalytically informed research, but Holmes is more optimistic in its ability to be used by other disciplines. I believe psychoanalytically informed methods are useful to non-psychoanalytically experienced researchers *if* psychoanalytic supervision is provided as I describe in my method. This is an area that warrants further investigation. I believe there is value in single-informant research, but another area for future consideration would be whether my method is scalable to studies involving multiple informants.

5.6 Personal reflections

My research endeavour started from my belief in the potential of psychoanalytic thinking to enrich and illuminate moments of confusion and paradox in the intersubjective encounter of a research interview. I wanted to make a contribution to the research community's continuing interest in psychoanalytically informed methods, helping them stand on firmer ground alongside other qualitative methodologies. I was also intrigued by the philosophical thinking required when considering the ontology and epistemology that are the foundations of an appropriately conceived research project. These concepts were alien to me at the beginning of my research and as such their otherness felt disturbing at times.

From my project's inception, I was questioned many times about what I was doing and I received many bemused expressions as I struggled to articulate it, leaving me feeling disheartened about its potential value. The literature review enticed me, yet also increased my anxiety as I felt Archard had already accomplished (to a high level) what I was hoping to do! Research tutorials were profoundly helpful. After each, I felt sufficiently enlivened to face the next stage of my research process.

Grappling with expressing in language suitable for a research report my experience of encounters with my informant, was constantly challenging. How to show the delicate attention I was paying to unconscious material, holding open multiple possibilities, frequently threatened collapse like a pyramid of paper cups in a breeze. The process of writing was, however, invaluable in processing the whole research experience and leading me to new areas of interest. For example, discovering new ideas relating to psychoanalytic ontology and epistemology. This is the level of nuance I hoped to encounter, and in so doing, highlight potential avenues of exploration for future researchers.

The generosity of the research community (specifically Philip Archard and Clare Harvey) giving me access to their research when I could not find it elsewhere brought me real pleasure; I began to feel part of something beyond my training institution. As I finalise writing my thesis I come upon the challenge of knowing when to stop. Through contact with Archard, I have become aware of new relevant research, e.g. the work of Durkin et al. (2020) who explore the challenges of being a novice-research interviewer. Archard and O'Reilly's (2021) commentary on their work, draws attention to the use and function of silence, the different contexts in which interviews take place and the importance of considering how non-verbal data can be analysed. With this, I feel returned to my own attempts to address exactly these issues.

As I near completion of my research, I feel a responsibility (to myself and those who have supported my endeavour) to not fall silent, but to find channels of communication and dialogue with those who may have an interest in finding out more.

Chapter Six: Conclusion

As a novice researcher planning to undertake an interview-based research project, I sought a research method that would be congruent with my psychoanalytic training and consequent valuing of the influence of the unconscious in all aspects of human experience. Stamenova and Hinshelwood point out that the unconscious, by its very nature, cannot be controlled, which means that efforts to formalise research methods based on it are always going to be problematic, yet they do not shy away from presenting numerous novel ways researchers are attempting this. During my literature review I was particularly inspired by the work of Hollway and Jefferson, and Holmes, who developed their respective research methods (FANI and RRM) through considering and working with the unconscious. FANI has received significant attention from the research community. This is clearly described by Archard who analyses the potential value, along with the pitfalls, of such psychoanalytically informed research methods. He draws attention to how apparently varied and incomplete the use of FANI has been in social work research, thus limiting analysis of it as a method. RRM has only recently been published and so has received less attention to date, although there is evidence of researchers valuing the use of reverie in their work.

Although Hollway and Jefferson, and Homes helpfully describe their methods in detail, I felt there remained a methodological gap in there not being a step-by-step description of a start-to-finish psychoanalytic method for the *whole* research process. Attride-Stirling describes how the value of qualitative research “lies in its exploratory and explanatory power, prospects that are unachievable without methodological rigour” (p.403). She goes on to highlight the methodological gap in describing *how* to analyse textual material and the limited reporting on such processes of analysis. I have engaged

with this challenge, firstly, in developing my nine-step guide for undertaking research interviews, then, drawing on ideas from within psychoanalysis, I developed four data-analysis questions for ethical data exploration. The ideas I found to be of most value, included the requirement for modesty in data analysis, which links with the psychoanalytic premise of the unknowable nature of reality. In other words, there is a limit to the conclusions that can be drawn from the data; the partial and temporal nature of such must be recognised. The holographic metaphor suggests the whole picture in relation to the research question, may be viewed in a data extract (Seidel), thus legitimising the detailed reporting of excerpts of transcript analysis, as I have done.

My study addresses a theoretical gap in the way the unconscious is described and a methodological gap in laying out a start-to-finish research method that is congruent with the ontology and epistemology of psychoanalysis. I have drawn attention to how it is the unrepressed, creative unconscious that should be considered in the research setting rather than the repressed. I have described my data-analysis process with the level of detail called for by researchers such as Attride-Stirling. In so doing, I have laid out for examination, a way in which qualitative researchers may conduct research interviews in an ethical, psychoanalytically elaborated manner.

Next steps

- (1) I would encourage the research community to consider what it means to undertake ontological-psychoanalytically informed interviews, which seems to be about how to be fully present in the interview, not so much to *understand*, but to *be with* the informant as she experiences her thoughts, feelings and bodily sensations, which may enable greater access to aspects of the topic under investigation.

- (2) Further methodological studies could be undertaken to see if the distinction between *understanding* latent communication and *being with* informants as they experience their own thoughts is possible to operationalise or an ineffable aspect of the researcher's way of being. I understand this will sound counter-intuitive to the aim of research, which is to understand more. I believe there is value in exploring this paradox further.
- (3) For researchers with and without psychoanalytic training, to trial and evaluate my nine-point guide and data-analysis questions, with single and multiple informants. If conditions permit, I would recommend trialling my original idea of three interviews, as a way of closing the ethical circle. The purpose of the third being to offer a space to reflect as much on the experience of being involved in the research study as the content discussed. In so doing, an invitation is opened in which power may be levelled out and ownership of material by the informant strengthened.

Reference list

- Archard, P. J. (2019). *The qualitative researcher, the suffering parent and the children's services professional: An enquiry into the theory and practice of psychoanalytically informed interviewing in social work research*. [Unpublished doctoral dissertation]. Access from University of Nottingham.
<http://eprints.nottingham.ac.uk/57185/>.
- Archard, P. J. (2021). The psychoanalytically informed interview in social work research. *Journal of Social Work Practice: Psychotherapeutic Approaches in Health, Welfare and the Community*, 35(2), 191-203.
<https://doi.org/10.1080/02650533.2019.1700492>.
- Archard, P.J., & O'Reilly, M. (2021). Commentary: Silence and the narrative research interview. *Nurse Researcher*, 29(4), 6-8.
<https://journals.rcni.com/nurse-researcher/commentary/silence-and-the-narrative-research-interview-nr.29.4.6.s2/abs>.
- Aveyard, H. (2014). *Doing a literature review in health and social care: A practical guide (3rd ed.)*. Open University Press.
- Bion, W.R. (1991). *Learning from experience*. Karnac Books Ltd. (Original work published 1962).
- Bion, W.R. (2004). *Attention and interpretation*. Rowman & Littlefield Publishers, Inc. (Original work published 1970).
- Bollas, C. (2006). *Being a character. Psychoanalysis and self experience*. Routledge.
- Britton, R. (1989). The missing link: Parental sexuality in the Oedipus complex. In R. Britton, M. Feldman, & E. O'Shaughnessy (Eds.), *The Oedipus complex today: Clinical implications* (pp. 83-101). Karnac.

Britton, R., & Steiner, J. (1994). Interpretation: Selected fact or overvalued idea? *The International Journal of Psycho-Analysis*, 75(5), 1069-1078.

<https://www.proquest.com/scholarly-journals/interpretation-selected-fact-overvalued-idea/docview/1298184872/se-2?accountid=10766>.

Burton, T. (2020). *“He’s always in my head, always in my mind”*: A psycho-social study into the emotional experience of teaching a child at risk of exclusion.

[Doctoral dissertation, University of Essex & Tavistock and Portman NHS Trust]. Access from Essex University.

<http://repository.essex.ac.uk/26985/>.

Care Quality Commission (2018). Are we listening? A review of children and young people’s mental health services.

<https://www.cqc.org.uk/publications/themed-work/are-we-listening-review-children-young-peoples-mental-health-services>.

Cartwright, D. (2004). The psychoanalytic research interview: Preliminary suggestions.

Journal of the American Psychoanalytic Association, 52(1), 209-242.

<https://doi.org/10.1177/00030651040520010501>.

Cayne, J. (2005). *Developing a methodology exploring the unknown in the acquisition of therapeutic knowledge*. [Doctoral dissertation, University of Surrey]. Access from University of Surrey.

<https://openresearch.surrey.ac.uk/esploro/outputs/99514998102346>.

Clarke, S. (2006). Theory and practice: Psychoanalytic sociology as psycho-social studies. *Sociology*, 40(6), 1153–1169.

<https://doi.org/10.1177/0038038506069855>.

Clarke, S., & Hoggett, P. (2009). Researching beneath the surface: a psycho-social approach to research practice and method. In S. Clarke, & P. Hoggett (Eds.), *Researching beneath the surface: Psycho-social research methods in practice* (pp. 1-26). Karnac.

- Clemente, C., McGrath, R., Stevenson, C., & Barnes, J. (2006). Evaluation of a waiting list initiative in a child and adolescent mental health service. *Child and Adolescent Mental Health*, 11(2), 98-103.
<https://pubmed.ncbi.nlm.nih.gov/32811097/>
- Durkin, J., Jackson, D., & Usher, K. (2020). Qualitative research interviewing: Reflections on power, silence and assumptions. *Nurse Researcher*, 28(4).
<https://journals.rcni.com/nurse-researcher/evidence-and-practice/qualitative-research-interviewing-reflections-on-power-silence-and-assumptions-nr.2020.e1725/print/abs>.
- Edwards, D., Carrier, J., Csontos, J., Evans, N., Elliott, M., Gillen, E., Hannigan, B., Lane, R., & Williams, L. (2023). Review: Crisis responses for children and young people – a systematic review of effectiveness, experiences and service organisation (CAMH-crisis). *Child and Adolescent Mental Health (no volume information online)*.
<https://acamh.onlinelibrary.wiley.com/doi/10.1111/camh.12639>.
- Elliott, H., Ryan, J., & Hollway, W. (2012). Research encounters, reflexivity and supervision. *International Journal of Social Research Methodology*, 15(5), 433-444.
<https://doi.org/10.1080/13645579.2011.610157>.
- Ellis, M. (2018). *Telling the truth?: Exploring notions of self and responsibility with young people involved in treatment for harmful sexual behaviour*. [Doctoral dissertation, University of Sussex]. University of Sussex.
<http://sro.sussex.ac.uk/id/eprint/76875>.
- Ferrari, R. (2015). Writing narrative style literature reviews. *Medical Writing*, 24(4), 230-235.
<https://doi.org/10.1179/2047480615Z.000000000329>.

- Finlay, L. (2002). Negotiating the swamp: The opportunity and challenge of reflexivity in research practice. *Qualitative Research*, 2(2), 209-230.
<https://doi.org/10.1177/146879410200200205>.
- Freud, S. (2001). The dream work. In, *The standard edition of the complete psychological works of Sigmund Freud, 4, The interpretation of dreams I* (pp. 277-338). Vintage. (Original work published 1900).
- Freud, S. (2001). The unconscious. In, *The standard edition of the complete psychological works of Sigmund Freud, 14, On the history of the psychoanalytic movement, papers on metapsychology and other works* (pp. 159-215). Vintage. (Original work published 1915).
- Frosh, S., & Baraitser, L. (2008). Psychoanalysis and psychosocial studies. *Psychoanalysis, Culture & Society*, 13, 346-365.
<https://doi.org/10.1057/pcs.2008.8>.
- Frosh, S. (2008). On negative critique: a reply. *Psychoanalysis, Culture & Society*, 13, 416-422.
<https://doi.org/10.1057/pcs.2008.28>.
- Garfield, S., Reavey, P., & Kotecha, M. (2010). Footprints in a toxic landscape: Reflexivity and validation in the Free Association Narrative Interview (FANI) method. *Qualitative Research in Psychology*, 7(2), 156-169.
<https://doi.org/10.1080/14780880802626665>.
- Gee, J. (2014). *The possibility of a “phenomenological” approach to researching how psychotherapists experience working with despair in a UK prison setting*. [Doctoral dissertation, University of Roehampton]. Access from EThOS.
<https://ethos.bl.uk/OrderDetails.do?uin=uk.bl.ethos.604870>.
- Georgiou, K. (2020). *Constructing autism inside and outside the clinic: Exploring relationships between psychoanalytic psychotherapists’ and activists’*

- discourses*. [Doctoral dissertation, University of Hertfordshire]. Access from University of Hertfordshire.
<https://doi.org/10.18745/th.22978>.
- Harvey, C. (2017). The intricate process of psychoanalytic research: Encountering the experience of the researcher–participant relationship. *British Journal of Psychotherapy*, 33(3), 312–327.
<https://doi.org/10.1111/bjp.12285>.
- Haynes, E. (2019). “*Hear Us Speak*”: *Listening to women’s experiences of perinatal distress and the Transactional Analysis psychotherapy treatment they received*. [Doctoral dissertation, University of Salford]. Access from EThOS.
<https://ethos.bl.uk/OrderDetails.do?uin=uk.bl.ethos.781285>.
- Hickman, C. (2019). Children and climate change: Exploring children’s feelings about climate change using Free Association Narrative Interview methodology. In P. Hoggett, (Ed.), *Climate Psychology. On Indifference to Disaster* (pp. 41-59). Palgrave Macmillan.
https://doi.org/10.1007/978-3-030-11741-2_3.
- Hoggett, P. (2015). A psycho-social perspective on social defences. In D. Armstrong, & M. Rustin (Eds.), *Social defences against anxiety: Explorations in a paradigm*, (pp. 50–58). London: Karnac.
<https://doi.org/10.4324/9780429480300>.
- Hollway, W., & Jefferson, T. (2000). *Doing qualitative research differently: Free association, narrative and the interview method*. Sage.
- Hollway, W., & Jefferson, T. (2008). The free association narrative interview method. In L.M. Given (Ed.), *The SAGE Encyclopedia of Qualitative Research Methods* (pp. 296–315). Sage.
- Hollway, W. (2008). Doing intellectual disagreement differently? *Psychoanalysis, Culture & Society*, 13, 385-396.

<https://doi.org/10.1057/pcs.2008.29>.

Hollway, W., & Jefferson, T. (2013). *Doing qualitative research differently: A psychosocial approach* (2nd ed.). Sage.

Hollway, W. (2015). *Knowing mothers: Researching maternal identity change*. Palgrave Macmillan.
<http://dx.doi.org/doi:10.1057/9781137481238>.

Holmes, J. (2013a). A comparison of clinical psychoanalysis and research interviews. *Human Relations*, 66(9), 1183-1199.
<https://doi.org/10.1177/0018726712465315>.

Holmes, J. (2013b). Using psychoanalysis in qualitative research: Countertransference-informed researcher reflexivity and defence mechanisms in two interviews about migration. *Qualitative Research in Psychology*, 10(2), 160-173.
<https://doi.org/10.1080/14780887.2011.586451>.

Holmes, J. (2014). Countertransference in qualitative research: A critical appraisal. *Qualitative Research*, 14(2), 166 – 183.
<https://doi.org/10.1177/1468794112468473>.

Holmes, J. (2017). Reverie-informed research interviewing. *International Journal of Psychoanalysis*, 98(3) 709-728.
<https://doi.org/10.1111/1745-8315.12581>.

Holmes, J. (2019). *A practical psychoanalytic guide to reflexive research. The Reverie Research Method*. Routledge.

Jefferson, T. (2008). What is “The psychosocial”? A Response to Frosh and Baraitser. *Psychoanalysis, Culture & Society*, 13, 366-373.
<https://doi.org/10.1057/pcs.2008.24>.

- Joffe, H., & Elsey, J. W. B. (2014). Free association in psychology and the grid elaboration method. *Review of General Psychology*, 18(3), 173-185.
<https://doi.org/10.1037/gpr0000014>.
- Joyce, M. (2020). Using narrative in nursing research. *Nursing Standard*, 29(38), 36-41.
<https://journals.rcni.com/nursing-standard/using-narrative-in-nursing-research-ns.29.38.36.e9008>.
- Kinsella, E.A. (2006). Hermeneutics and critical hermeneutics: exploring possibilities within the art of interpretation. *Forum Qualitative Sozialforschung / Forum: Qualitative Social Research*, 7(3), Art. 19.
https://www.researchgate.net/publication/48667075_Hermeneutics_and_Critical_Hermeneutics_Exploring_Possibilities_within_the_Art_of_Interpretation#fullTextFileContent.
- Klein, M. (1988). Notes on some schizoid mechanisms. In M. Klein *Envy and gratitude and other works 1946-1963* (pp. 1-24). Virago. (Original work published 1946).
- Kvale, S. (2003). The psychoanalytical interview as inspiration for qualitative research. In P. M. Camic, J. E. Rhodes, & L. Yardley (Eds.), *Qualitative research in psychology: Expanding perspectives in methodology and design* (pp. 275–297). American Psychological Association.
<https://doi.org/10.1037/10595-014>.
- Lapping, C. (2011). *Psychoanalysis in social research: Shifting theories and reframing concepts*. Routledge.
- Long, C., & Eagle, G. (2009). Ethics in tension: Dilemmas for clinicians conducting sensitive research. *Psycho-analytic Psychotherapy in South Africa*, 17(2), 27-52.
https://www.researchgate.net/profile/Carol-Long/publication/308697185_Ethics_in_tension/links/599192170f7e9b9d6467841f/Ethics-in-tension.pdf.

- Lucey, H., Melody, J., & Walkerdine, V. (2003). Project 4:21 Transitions to womanhood: Developing a psychosocial perspective in one longitudinal study. *International Journal of Social Research Methodology*, 6(3), 279-284. <https://doi.org/10.1080/1364557032000091897>.
- McGregor, K. (2018). *Adolescent intimate partner violence: Exploring the experiences of female survivors*. [Doctoral dissertation, University of Manchester]. Access from EThOS. <https://ethos.bl.uk/OrderDetails.do?uin=uk.bl.ethos.756877>.
- McVey, L., Lees, J., & Nolan, G. (2016). Reflective-verbal language and reverie in a qualitative interview. *Counselling and Psychotherapy Research*, 16(2), 132-140. <https://doi.org/10.1002/capr.12059>.
- Mansell, L., Hughes, K., Heyes, J-W., Brownlee, A., Charm, C., Blake, D., Collinge, S., & Smith, J. (2021). A new consultation, assessment and reflection model (CARM) used in child and adolescence mental health services (CAMHS). *Clinical Child Psychology and Psychiatry* 1-7. <https://doi.org/10.1177/13591045211016512>.
- Mees, P. (2016). A psychoanalytic child psychotherapy contribution to generic assessments. *Clinical Child Psychology and Psychiatry*, 21(1), 133-144. <https://pubmed.ncbi.nlm.nih.gov/25604706/>
- Meltzer, D. (1994). Temperature and distance as technical dimensions of interpretation. In A. Hahn (Ed.), *Sincerity and other works: Collected papers of Donald Meltzer* (pp. 374-386). Karnac. (Original work published 1976).
- Midgley, N. (2006). Psychoanalysis and qualitative psychology: Complementary or contradictory paradigms? *Qualitative Research in Psychology*, 3(3), 213-231. <https://doi.org/10.1191/1478088706qrp065oa>.

- Midgley, N., Ansaldo, F., & Target, M. (2014). The meaningful assessment of therapy outcomes: Incorporating a qualitative study into a randomized controlled trial evaluating the treatment of adolescent depression. *Psychotherapy, 51*(1), 128-137.
<https://doi.org/10.1037/a0034179>.
- Miller, L. (1999). Infant observation as a precursor of clinical training. *Psychoanalytic Inquiry, 19*(2), 142-145.
<https://doi.org/10.1080/07351699909534237>.
- Morrissey, J., & Tribe, R. (2001). Parallel process in supervision. *Counselling Psychology Quarterly, 14*(2), 103-110.
<https://www.tandfonline.com/doi/abs/10.1080/09515070126329>.
- Ogden, T.H. (2019). Ontological psychoanalysis or “What do you want to be when you grow up?” *The Psychoanalytic Quarterly, 88*(4), 661-684.
<https://doi.org/10.1080/00332828.2019.1656928>.
- Pearce, S. (2018). *A narrative study exploring representations of identity for young adults with cancer: From diagnosis through treatment*. [Unpublished doctoral dissertation, University College London]. Access abstract from UCL.
<https://discovery.ucl.ac.uk/id/eprint/10047462>.
- Saville Young, L. (2011). Research entanglements, race, and recognisability: A psychosocial reading of interview encounters in (post-) colonial, (post-) apartheid South Africa. *Qualitative Inquiry, 17*(1), 45-55.
<https://doi.org/10.1177/1077800410389443>.
- Saville Young, L., & Frosh, S. (2019). Psychoanalysis in narrative research. In K. Stamenova, & R.D. Hinshelwood (Eds.), *Methods of research into the unconscious: Applying psychoanalytic ideas to social science* (pp. 199-210). Routledge.

- Schorn, A. (2000). The “Theme-centred interview”. A method to decode manifest and latent aspects of subjective realities. *Forum Qualitative Sozialforschung/Forum: Qualitative Social Research*, 1(2).
<https://doi.org/10.17169/fqs-1.2.1092>.
- Seidel, J.V. (1998). Qualitative data analysis: Ethnograph 5.0. *Qualis Research*, Colorado Springs.
<http://www.qualisresearch.com/DownLoads/qda.pdf>.
- Simopoulou, Z. (2017). *Reveries of the existential: A psychoanalytic observation of young children’s existential encounters at the nursery*. [Doctoral dissertation, University of Edinburgh]. Access from University of Edinburgh.
<http://hdl.handle.net/1842/23403>.
- Stamenova, K., & Hinshelwood, R.D. (2019). Introduction. In K. Stamenova & R.D. Hinshelwood (Eds.), *Methods of research into the unconscious: Applying psychoanalytic ideas to social science* (pp. 1-16). Routledge.
- Stänicke, E., Zachrisson, A., & Vetlesen, A.J. (2020). The epistemological stance of psychoanalysis: Revisiting the Kantian legacy. *The Psychoanalytic Quarterly*, 89(2), 281-304.
<https://doi.org/10.1080/00332828.2020.1717229>.
- Strømme, H., Gullestad, S. E., Stänicke, E., & Killingmo, B. (2010). A widened scope on therapist development: Designing a research interview informed by psychoanalysis. *Qualitative Research in Psychology*, 7(3), 214-232.
<https://doi.org/10.1080/14780880802659542>.
- Sumerel, M.B. (1994). Parallel process in supervision. *ERIC Digest*.
<https://files.eric.ed.gov/fulltext/ED372347.pdf>.
- Sutton, R.P. (2012). *Voices from the silence: A qualitative study giving voice to adults with learning disabilities who have experience as service users with mental health needs*. [Doctoral dissertation, University of Portsmouth]. Access from

EThOS.

<https://ethos.bl.uk/OrderDetails.do?uin=uk.bl.ethos.587065>.

Urwin, C., Hauge, M-I., Hollway, W., & Haavind, H. (2013). Becoming a mother through culture. *Qualitative Inquiry*, 19(6), 470-479.

<https://doi.org/10.1177/1077800413482101>.

Wengraf, T. (2019). Researching dated, situated, defended, and deciding/evolving subjectivities by biographic-narrative interview. Psychoanalysis, the socio-societal unconscious, and biographic-narrative interview method and interpretation. In K. Stamenova & R.D. Hinshelwood (Eds.), *Methods of research into the unconscious: Applying psychoanalytic ideas to social science* (pp. 211-238). Routledge.

Wetherell, M. (2005). Unconscious conflict or everyday accountability? *British Journal of Social Psychology*, 44(2), 169-175.

<https://doi.org/10.1348/014466605X39619>.

Whiting, C-M. (2010). *Narratives from the autistic spectrum: What does it mean for a young person to be the bearer of an autistic spectrum diagnosis at secondary school?* [Doctoral dissertation, University of Sheffield]. Access from University of Sheffield.

<https://theses.whiterose.ac.uk/15169>.

Willig, C., & Stainton Rogers, W. (2017). *The SAGE handbook of qualitative research in psychology*. SAGE publications Ltd.

<https://search.ebscohost.com/login.aspx?direct=true&db=nlebk&AN=1538522&authtype=shib&site=eds-live&scope=site>

Winnicott, D.W. (2007). Anxiety associated with insecurity. In D.W. Winnicott, *Through paediatrics to psycho-analysis. Collected papers* (pp. 97-100). Karnac. (Original work published 1952).

Appendices

Appendix A. Start-to-finish guide for undertaking psychoanalytically informed interview-based research.

Nine-point guide

(pre-interview preparation through to conducting the interview)

- (1) Preparation of the interview informant describing the process to be expected, e.g. in relation to the use of silence and following her train of thought (Holmes, 2019).
- (2) Gathering the informant's fantasies regarding participating in this particular piece of research (Saville Young, 2011).
- (3) Preparation for the interviewer, i.e. cultivating a meditative state of mind (Holmes (2019).
- (4) Two interviews per informant, with psychoanalytic supervision between them (Hollway & Jefferson, 2013).
- (5) Use of cues that are as open and encouraging of the informant's associations and narratives as possible (Hollway & Jefferson, 2013).
- (6) Live interview attention to the emotional responses of researcher and informant, and the resulting emotional atmosphere of the encounter (Holmes, 2019).
- (7) Following the informant's meaning frame, by using her words and imagery (Hollway & Jefferson, 2013).
- (8) Use of reverie, if it occurs, to guide the researcher's verbal comments (Holmes, 2019).
- (9) Reflection between researcher and informant, at the end of each interview, regarding what has just occurred (Archard, 2019).

Five-point data-analysis guide

- (1) Data immersion
- (2) Latent theme identification
- (3) Manifest theme identification
- (4) Sample selection
- (5) Exploration of the samples using four data-analysis questions:
 - Q.1 What is the manifest message my informant is communicating about her experience through the spoken language of words?
 - Q.2 What is being conveyed through imagery, delivery style and emotional atmosphere?
 - Q.3 What is being conveyed through the ways in which my informant is relating to me, which may also tell about her experiences of the IA topic (parallel process)?
 - Q.4 Is there a point of intersection where the responses to all questions seem to meet, which may therefore be a consistent representation of my informant's experience of the topic?

Appendix B. Interview schedules.

Interview 1
<p><i>Preamble</i> We are meeting to think about your experiences of initial assessments / first contacts with clients and you can say whatever you want, when you feel like it, and I'll respond, if a response comes to me. Sometimes either of us might pause and be silent for a while, perhaps as we think, and this is fine and valuable too.</p>
<p><i>Preliminary question</i> I asked if you could bring an object or image that comes to your mind when you imagine taking part in this research with me. Can you tell me about what you have brought with you today?</p>
<p><i>Cues</i> Can you tell me about how you came to be a CAMHS clinician? 1b. [follow up in terms of detail, following order and phraseology]</p>
<p>Can you tell me about your experiences of initial assessments /first contacts with clients? 2b. [as 1b]</p>
<p>Can you tell me about a particular IA when you felt anxious? 3b. [as 1b]</p>
<p>Can you tell me about a particular IA when you felt under pressure (if not elicited by 3)? 4b. [as 1b]</p>
<p>Can you tell me about a particular IA when you felt satisfied? 5b. [as 1b]</p>
<p>Can you tell me about care-planning / decision making in IAs? 6b [as 1b]</p>
<p><i>Closing</i> Can you tell me about your feelings / experience of the interview as we come towards the end? Thank you & confirm next interview</p>

Interview 2

Preamble (thanks; check 60mins)

Welcome back. We are meeting to continue thinking about your experiences of initial assessments / first contacts with clients and you can say whatever you want, when you feel like it, and I'll respond, if a response comes to me. Sometimes either of us might pause and be silent for a while, perhaps as we think, and this is fine and valuable too.

Preliminary cue

I wonder if we might start with a moment of silence in which I ask you to take yourself back to our first interview and to the days following it; see if anything comes to mind about how you felt.

Cues

As I think back I am wondering about some ideas. I wonder what you make of them. Whether they feel to you as if they come only from my mind or something from between our two minds?

Idea 1: Tension not only an eight-armed octopus, but with arms being pulled in different directions.

Idea 2: Team as source of support and pressure

Expectations of self?

System anxiety – defensive system?

Care planning?

Closing

Experience of the interview?

Any questions?

Thank you

Appendix C. Ethical approval documents (TREC original submission, followed by requested amendments)

To ensure confidentiality of my informant, the name of her CAMHS Trust is blacked out in the following documents.

(1) TREC form and version 1 of my public facing documents

Tavistock and Portman Trust Research Ethics Committee (TREC)

APPLICATION FOR ETHICAL REVIEW OF RESEARCH INVOLVING HUMAN PARTICIPANTS

This application should be submitted alongside copies of any supporting documentation which will be handed to participants, including a participant information sheet, consent form, self-completion survey or questionnaire.

Where a form is submitted and sections are incomplete, the form will not be considered by TREC and will be returned to the applicant for completion.

For further guidance please contact Paru Jeram (academicquality@tavi-port.nhs.uk)

SECTION A: PROJECT DETAILS

Project title	<i>Closing the circle, to open a space: Can the intentions of avowedly psychoanalytic research methodologies be fulfilled in methods that are deeply congruent with this epistemology? An action research project to inform future psychoanalytic research endeavours.</i>		
Proposed project start date	November 2019	Anticipated project end date	December 2021

SECTION B: APPLICANT DETAILS

Name of Researcher	Claire Lokke
Email address	Claire.lokke@nhs.net
Contact telephone number	07515 480107

SECTION C: CONFLICTS OF INTEREST

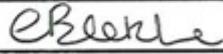
Will any of the researchers or their institutions receive any other benefits or incentives for taking part in this research over and above their normal salary package or the costs of undertaking the research? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> If YES, please detail below:	
Is there any further possibility for conflict of interest? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> If YES, please detail below:	

FOR ALL APPLICANTS

'Is your research being commissioned by and or carried out on behalf of a body external to the trust? (for example; commissioned by a local authority, school, care home, other NHS Trust or other organisation). <small>*Please note that 'external' is defined as an organisation which is external to the Tavistock and Portman NHS Foundation Trust (Trust)</small>	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> NA <input type="checkbox"/>
--	---

If YES, please supply details below:	
Has external* ethics approval been sought for this research? (i.e. submission via Integrated Research Application System (IRAS) to the Health Research Authority (HRA) or other external research ethics committee) <small>*Please note that 'external' is defined as an organisation/body which is external to the Tavistock and Portman Trust Research Ethics Committee (TREC)</small> If YES, please supply details of the ethical approval bodies below AND include any letters of approval from the ethical approval bodies:	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
If your research is being undertaken externally to the Trust, please provide details of the sponsor of your research?	
Do you have local approval (this includes R&D approval)?	YES <input type="checkbox"/> NO <input type="checkbox"/> NA <input checked="" type="checkbox"/>

SECTION D: SIGNATURES AND DECLARATIONS

APPLICANT DECLARATION	
I confirm that: <ul style="list-style-type: none"> • The information contained in this application is, to the best of my knowledge, correct and up to date. • I have attempted to identify all risks related to the research. • I acknowledge my obligations and commitment to upholding our University's Code of Practice for ethical research and observing the rights of the participants. • I am aware that cases of proven misconduct, in line with our University's policies, may result in formal disciplinary proceedings and/or the cancellation of the proposed research. 	
Applicant (print name)	Claire Lokke
Signed	
Date	12.10.19

FOR RESEARCH DEGREE STUDENT APPLICANTS ONLY

Name of Supervisor	Brinley Yare
Qualification for which research is being undertaken	D.Prof. (Professional doctorate in child and adolescent psychoanalytic psychotherapy)

Supervisor – <ul style="list-style-type: none"> • Does the student have the necessary skills to carry out the research? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> • Is the participant information sheet, consent form and any other documentation appropriate? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> • Are the procedures for recruitment of participants and obtaining informed consent suitable and sufficient? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> • Where required, does the researcher have current Disclosure and Barring Service (DBS) clearance? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
--

Signed	Binley A. Yare
Date	16 Oct 2019

COURSE LEAD/RESEARCH LEAD	
<ul style="list-style-type: none"> Does the proposed research as detailed herein have your support to proceed? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> 	
Signed	Jouly O'Leary
Date	16.10.19

SECTION E: DETAILS OF THE PROPOSED RESEARCH

1. Provide a brief description of the proposed research, including the requirements of participants. This must be in lay terms and free from technical or discipline specific terminology or jargon. If such terms are required, please ensure they are adequately explained (Do not exceed 500 words)

This is an action research project (e.g. Bradbury, 2015) that seeks to explore how psychoanalytic epistemology is informing current psychoanalytic research methodology and methods such as the Free Association Narrative Interview (Hollway and Jefferson, 2000/2013) and the Reverie Research Method (Holmes, 2019) and what critical evaluations have been levelled at these and other uses of psychoanalysis within psychosocial studies.

The first stage of the research is therefore an analysis of the evidence base through an in-depth literature review. Once this is complete, I will consider ways in which a psychoanalytic method may be refined to better meet these critical evaluations and I will then aim to trial this refined method design on an interview participant. The interview topic will address the emotional experience of a CAMHS clinician undertaking Initial Assessments (IAs) of families referred to a generic CAMHS. This has been chosen because it is likely to be a good source of unconscious material, which the research design is intended to make accessible for study.

I aim to recruit one participant who will have significant experience in their role as a CAMHS clinician and who is likely to be confident in reflecting upon their practice. I will interview him/her on three occasions. Each interview is estimated to last between 50-75 minutes. The interview time-schedule will be negotiated with the participant to take account of their professional obligations at the time. It is estimated that the interviews will happen at fortnightly intervals in order to not add too much pressure to their time schedule.

The first two interviews will explore different aspects of the participant's IA experience. In order to conduct an ethically sound project, the participant will be briefed beforehand that he/she will be invited to speak as freely and openly as possible to me about their experiences whilst maintaining their professional integrity, e.g. ensuring they protect the anonymity of the families they may refer to in their discussion.

The third interview is again anticipated to last between 50-75 minutes and the participant will be asked to come to this interview prepared to explore their experiences of the interview process itself, i.e. their responses to being involved in the trialled psychoanalytic method.

2. Provide a statement on the aims and significance of the proposed research, including potential impact to knowledge and understanding in the field (where appropriate, indicate the associated hypothesis which will be tested). This should be a clear justification of the proposed research, why it should proceed and a statement on any anticipated benefits to the community. (Do not exceed 700 words)

The rationale for exploring psychoanalytic epistemology, methodology and method

Psychoanalytic epistemology, methodology and method have the potential to enrich qualitative project design, data collection and analysis through attending to unconscious as well as conscious processes. This is increasingly being recognised in the field of psychosocial research by both psychoanalytically trained researchers (e.g. Holmes, 2019) and those not trained, but nevertheless experienced in using psychoanalytically informed methods (e.g. Hollway and Jefferson, 2000/2013). Many questions have been posed by psychosocial researchers, e.g.

- What is the place of psychoanalysis within psychosocial research? (e.g. Frosh and Baraitser, 2008)

- Can psychoanalytically informed methods be implemented by non-psychoanalytically trained researchers? (e.g. Holmes, 2019)
- Is it ethical to harness unconscious communication in research? Is it ethical not to? (e.g. Hollway and Jefferson, 2000/2013)
- How can participants' affect and non-verbal communication be accessed, recorded and analysed? (Holmes, 2019)
- Is the Reverie Research Method useful across different populations, not just depressed adolescents? (Holmes, 2019)
- What could be the role and potential of 'reflexive non-clinical supervision'? (Elliott, Ryan and Hollway, 2012)
- How may participants' involvement in 'construction of interpretation' of their data be facilitated? (Stopford, 2004)

These questions were brought to light in an initial sweep of the literature, suggesting a detailed investigation into the founding principles of using psychoanalysis in research is warranted, from where its current use can be tracked and its future potential explored in an attempt to contribute to the growing evidence base.

As an action research project the findings will be used to design and test a refined psychoanalytic research method with one participant interviewed on three occasions.

The rationale for asking a question about IAs

The initial assessment a clinician undertakes with a family is pivotal for deciding their care plan and how stretched CAMHS resources are to be used. The IA is, therefore, likely to be a meeting of two parties under pressure: on the one hand there is a clinician managing a complex caseload and needing to meet certain targets, e.g. throughput of cases, and on the other hand there is a family who may struggle to effectively communicate their level of need. Such a topic is hypothesised to be a rich source of unconscious communication and therefore would suit the testing of a psychoanalytic research method.

The rationale in terms of personal development

To deepen my theoretical understanding of psychoanalytic epistemology and its potential contribution to practice-based research design and implementation within my future place of employment.

3. Provide an outline of the methodology for the proposed research, including proposed method of data collection, tasks assigned to participants of the research and the proposed method and duration of data analysis. If the proposed research makes use of pre-established and generally accepted techniques, please make this clear. (Do not exceed 500 words)

This is an action research project (e.g. Bradbury, 2015) with the primary participant being me as I explore, in depth, the current evidence base linking psychoanalytic epistemology, methodology and methods. This will be done by a literature search of published studies and as yet unpublished theses.

My main emphasis will be to explore the Free Association Narrative Interview (Hollway and Jefferson, 2000/2013) and the Reverie Research Method (Holmes, 2019), e.g. how have they been received by the research community, what critical evaluations have been levelled at them and how they have been used in psychosocial studies since their inception. I will also look at how other researchers have applied psychoanalysis within psychosocial studies.

I will then consider ways in which a psychoanalytic method may be refined to better meet the criticisms being levelled at the use of psychoanalysis within psychosocial studies. I aim to trial this refined method design on one participant.

In order for the emphasis to be on the trial of the method rather than on the interview topic itself, I aim to recruit a participant who will have significant experience in their role as a CAMHS clinician and who is likely to be confident in reflecting upon an area of their practice. The interview topic (e.g. the emotional experience of undertaking IAs) has been chosen because it is likely to be a good source of unconscious material, which the research design is intended to make accessible for exploration. The participant will be interviewed three times over the course of a couple of months (the exact timetable will be negotiated with the participant):

- 1) The first interview will require the participant to come prepared to think about a memorable IA they have undertaken. The conscious and unconscious reasons for its memorability are hoped to generate rich data.
- 2) The second will require them to come ready to talk about an IA of their choice. This aims to open up a further avenue of unconscious motivation, e.g. upon what basis does the participant choose this IA?
- 3) The third, will be to reflect on the interview process itself, e.g. what was the participant's experience of the interviews?

Each interview is anticipated to last between 50-75 minutes.

I anticipate that the data to be collected will include:

- 1) The audio recorded interviews and their transcription.
- 2) My recollection of the interviews written immediately afterwards. This will include the content of what was said alongside my emotional experience of the encounter with the participant and their material.
- 3) Additional data generated during psychoanalytic research supervision of 1) and 2). Brinley Yare is the project supervisor and in addition to this, psychoanalytic research supervision of the data will be sought from within the M80 course team.

Data collection and analysis will be through a psychoanalytic lens, but the specifics of method will only be determined after the first stage of method design has been completed, which rests on the analysis of the current evidence base.

SECTION F: PARTICIPANT DETAILS

4. Provide an explanation detailing how you will identify, approach and recruit the participants for the proposed research, including clarification on sample size and location. Please provide justification for the exclusion/inclusion criteria for this study (i.e. who will be allowed to / not allowed to participate) and explain briefly, in lay terms, why this criteria is in place. (Do not exceed 500 words)

This is an action research project, with the primary participant being me as I explore, in depth, the current evidence base linking psychoanalytic epistemology, methodology and methods.

In order for the emphasis to be on the trial of the method rather than the interview topic itself, I aim to recruit only one participant who will have significant experience in their role as a CAMHS clinician and who is likely to be confident in reflecting upon an emotive area of their practice. The repeated design of three interviews with the same participant, seeks again to place emphasis on the method which may be better evaluated if the participant remains constant.

I will invite participation through an email outlining the project, which will be sent to selected clinicians from within [redacted]-disciplinary CAMHS team, e.g. senior practitioners or those who have been in post for five or more years. Permission to do this has been sought and granted from the CAMHS clinical manager.

The location of the interviews will be in our shared place of work (e.g. the CAMHS clinic).

5. Will the participants be from any of the following groups?(Tick as appropriate)

- Students or staff of the Trust or the University.
- Adults (over the age of 18 years with mental capacity to give consent to participate in the research).
- Children or legal minors (anyone under the age of 16 years)¹
- Adults who are unconscious, severely ill or have a terminal illness.
- Adults who may lose mental capacity to consent during the course of the research.
- Adults in emergency situations.
- Adults² with mental illness - particularly those detained under the Mental Health Act (1983 & 2007).
- Participants who may lack capacity to consent to participate in the research under the research requirements of the Mental Capacity Act (2005).
- Prisoners, where ethical approval may be required from the National Offender Management Service (NOMS).
- Young Offenders, where ethical approval may be required from the National Offender Management Service (NOMS).
- Healthy volunteers (in high risk intervention studies).
- Participants who may be considered to have a pre-existing and potentially dependent³ relationship with the investigator (e.g. those in care homes, students, colleagues, service-users, patients).
- Other vulnerable groups (see Question 6).
- Adults who are in custody, custodial care, or for whom a court has assumed responsibility.
- Participants who are members of the Armed Forces.

¹If the proposed research involves children or adults who meet the Police Act (1997) definition of vulnerability³, any researchers who will have contact with participants must have current Disclosure and Barring Service (DBS) clearance.

² 'Adults with a learning or physical disability, a physical or mental illness, or a reduction in physical or mental capacity, and

living in a care home or home for people with learning difficulties or receiving care in their own home, or receiving hospital or social care services.' (Police Act, 1997)

³ Proposed research involving participants with whom the investigator or researcher(s) shares a dependent or unequal relationships (e.g. teacher/student, clinical therapist/service-user) may compromise the ability to give informed consent which is free from any form of pressure (real or implied) arising from this relationship. TREC recommends that, wherever practicable, investigators choose participants with whom they have no dependent relationship. Following due scrutiny, if the investigator is confident that the research involving participants in dependent relationships is vital and defensible, TREC will require additional information setting out the case and detailing how risks inherent in the dependent relationship will be managed. TREC will also need to be reassured that refusal to participate will not result in any discrimination or penalty.

6. Will the study involve participants who are vulnerable? YES NO

For the purposes of research, 'vulnerable' participants may be adults whose ability to protect their own interests are impaired or reduced in comparison to that of the broader population. Vulnerability may arise from the participant's personal characteristics (e.g. mental or physical impairment) or from their social environment, context and/or disadvantage (e.g. socio-economic mobility, educational attainment, resources, substance dependence, displacement or homelessness). Where prospective participants are at high risk of consenting under duress, or as a result of manipulation or coercion, they must also be considered as vulnerable.

Adults lacking mental capacity to consent to participate in research and children are automatically presumed to be vulnerable. Studies involving adults (over the age of 16) who lack mental capacity to consent in research must be submitted to a REC approved for that purpose. Please consult [Health Research Authority \(HRA\)](https://www.hra.nhs.uk/) for guidance: <https://www.hra.nhs.uk/>

6.1. If YES, what special arrangements are in place to protect vulnerable participants' interests?

If YES, the research activity proposed will require a DBS check. (NOTE: information concerning activities which require DBS checks can be found via <https://www.gov.uk/government/publications/dbs-check-eligible-positions-guidance>)

7. Do you propose to make any form of payment or incentive available to participants of the research? YES NO

If YES, please provide details taking into account that any payment or incentive should be representative of reasonable remuneration for participation and may not be of a value that could be coercive or exerting undue influence on potential participants' decision to take part in the research. Wherever possible, remuneration in a monetary form should be avoided and substituted with vouchers, coupons or equivalent. Any payment made to research participants may have benefit or HMRC implications and participants should be alerted to this in the participant information sheet as they may wish to choose to decline payment.

8. What special arrangements are in place for eliciting informed consent from participants who may not adequately understand verbal explanations or written information provided in English; where participants have special communication needs; where participants have limited literacy; or where children are involved in the research? (Do not exceed 200 words)

N/A

SECTION F: RISK ASSESSMENT AND RISK MANAGEMENT

9. Does the proposed research involve any of the following? (Tick as appropriate)

- use of a questionnaire, self-completion survey or data-collection instrument (attach copy)
- use of emails or the internet as a means of data collection
- use of written or computerised tests
- interviews (attach interview questions)
- diaries (attach diary record form)
- participant observation
- participant observation (in a non-public place) without their knowledge / covert research
- audio-recording interviewees or events
- video-recording interviewees or events
- access to personal and/or sensitive data (i.e. student, patient, client or service-user data) without the participant's informed consent for use of these data for research purposes
- administration of any questions, tasks, investigations, procedures or stimuli which may be experienced by participants as physically or mentally painful, stressful or unpleasant during or after the research process
- performance of any acts which might diminish the self-esteem of participants or cause them to experience discomfort, regret or any other adverse emotional or psychological reaction
- investigation of participants involved in illegal or illicit activities (e.g. use of illegal drugs)
- procedures that involve the deception of participants
- administration of any substance or agent
- use of non-treatment of placebo control conditions
- participation in a clinical trial
- research undertaken at an off-campus location (risk assessment attached)
- research overseas (copy of VCG overseas travel approval attached)

10. Does the proposed research involve any specific or anticipated risks (e.g. physical, psychological, social, legal or economic) to participants that are greater than those encountered in everyday life?
YES NO

If YES, please describe below including details of precautionary measures.

There are no specific or anticipated risks as I am only seeking for the participant to reflect on an aspect of their professional role, which is likely to be a familiar activity for a CAMHS clinician, albeit in a research format.

<p>11. Where the procedures involve potential hazards and/or discomfort or distress for participants, please state what previous experience the investigator or researcher(s) have had in conducting this type of research.</p>
<p>N/A. The research procedure does not involve potential hazards.</p>
<p>12. Provide an explanation of any potential benefits to participants. Please ensure this is framed within the overall contribution of the proposed research to knowledge or practice. (Do not exceed 400 words) NOTE: Where the proposed research involves students of our University, they should be assured that accepting the offer to participate or choosing to decline will have no impact on their assessments or learning experience. Similarly, it should be made clear to participants who are patients, service-users and/or receiving any form of treatment or medication that they are not invited to participate in the belief that participation in the research will result in some relief or improvement in their condition.</p>
<p>The principal participant in this project is me and there are clear benefits in terms of deepening my theoretical understanding of psychoanalytic epistemology and its practical applications beyond the clinical situation. In drawing together the existing evidence base that links psychoanalytic epistemology, methodology and methods, I hope to be able to inform the design of future psychoanalytic research endeavours and thus contribute to practice-based research in my place of employment.</p> <p>There are no specific benefits built into the research design for the interview participant, but it is anticipated that he/she may enjoy having a reflective space to consider a core element of his/her work.</p>
<p>13. Provide an outline of any measures you have in place in the event of adverse or unexpected outcomes and the potential impact this may have on participants involved in the proposed research. (Do not exceed 300 words)</p>
<p>Given the skill level and training the CAMHS clinician participant has, it is unlikely that he/she will be adversely affected by the interviews. The project documentation, however, will include details of the occupational health department in the Trust in which we work, where they could access help should they feel adversely affected.</p>
<p>14. Provide an outline of your debriefing, support and feedback protocol for participants involved in the proposed research. This should include, for example, where participants may feel the need to discuss thoughts or feelings brought about following their participation in the research. This may involve referral to an external support or counseling service, where participation in the research has caused specific issues for participants. Where medical aftercare may be necessary, this should include details of the treatment available to participants. Debriefing may involve the disclosure of further information on the aims of the research, the participant's performance and/or the results of the research. (Do not exceed 500 words)</p>
<p>The third interview with the participant will be designed to offer a space for reflection on the interview process. He/she will be invited to contact me if they would like to be kept informed about the progress of the project and its outcomes.</p> <p>The project documentation (participant information sheet and debrief letter) outlines where further support may be found, e.g. the occupational health and wellbeing team at [REDACTED]</p>

FOR RESEARCH UNDERTAKEN AWAY FROM THE TRUST OR OUTSIDE THE UK

15. Does any part of your research take place in premises outside the Trust?

- X YES, and I have included evidence of permissions from the managers or others legally responsible for the premises. This permission also clearly states the extent to which the participating institution will indemnify the researchers against the consequences of any untoward event

16. Does the proposed research involve travel outside of the UK?

- YES, I have consulted the Foreign and Commonwealth Office website for guidance/travel advice? <http://www.fco.gov.uk/en/travel-and-living-abroad/>
- YES, I am a non-UK national and I have sought travel advice/guidance from the Foreign Office (or equivalent body) of my country of origin
- YES, I have completed the overseas travel approval process and enclosed a copy of the document with this application

For details on university study abroad policies, please contact academicquality@tavi-port.nhs.uk

IF YES:

17. Is the research covered by the Trust's insurance and indemnity provision?

- YES NO

18. Please evidence how compliance with all local research ethics and research governance requirements have been assessed for the country(ies) in which the research is taking place.

NOTE:

For students conducting research where the Trust is the sponsor, the Dean of the Department of Education and Training (DET) has overall responsibility for risk assessment regarding their health and safety. If you are proposing to undertake research outside the UK, please ensure that permission from the Dean has been granted before the research commences (please attach written confirmation)

SECTION G: PARTICIPANT CONSENT AND WITHDRAWAL

18. Have you attached a copy of your participant information sheet (this should be in *plain English*)? Where the research involves non-English speaking participants, please include translated materials.
YES X NO

If NO, please indicate what alternative arrangements are in place below:

19. Have you attached a copy of your participant consent form (this should be in *plain English*)? Where the research involves non-English speaking participants, please include translated materials.
YES X NO

If NO, please indicate what alternative arrangements are in place below:

20. The following is a participant information sheet checklist covering the various points that should be included in this document.

- X Clear identification of the Trust as the sponsor for the research, the project title, the Researcher or Principal Investigator and other researchers along with relevant contact details.
- X Details of what involvement in the proposed research will require (e.g., participation in interviews, completion of questionnaire, audio/video-recording of events), estimated time commitment and any risks involved.
- X A statement confirming that the research has received formal approval from TREC.
- X If the sample size is small, advice to participants that this may have implications for confidentiality / anonymity.
- X A clear statement that where participants are in a dependent relationship with any of the researchers that participation in the research will have no impact on assessment / treatment / service-use or support.
- X Assurance that involvement in the project is voluntary and that participants are free to withdraw consent at any time, and to withdraw any unprocessed data previously supplied.
- X Advice as to arrangements to be made to protect confidentiality of data, including that confidentiality of information provided is subject to legal limitations.
- X A statement that the data generated in the course of the research will be retained in accordance with the University's Data Protection Policy.
- X Advice that if participants have any concerns about the conduct of the investigator, researcher(s) or any other aspect of this research project, they should contact Simon Carrington, Head of Academic Governance and Quality Assurance (academicquality@tavi-port.nhs.uk)
- X Confirmation on any limitations in confidentiality where disclosure of imminent harm to self and/or others may occur.

21. The following is a consent form checklist covering the various points that should be included in this document.

- X Trust letterhead or logo.
- X Title of the project (with research degree projects this need not necessarily be the title of the thesis) and names of investigators.
- X Confirmation that the project is research.
- X Confirmation that involvement in the project is voluntary and that participants are free to withdraw at any time, or to withdraw any unprocessed data previously supplied.
- X Confirmation of particular requirements of participants, including for example whether interviews are to be audio-/video-recorded, whether anonymised quotes will be used in publications advice of legal limitations to data confidentiality.
- X If the sample size is small, confirmation that this may have implications for anonymity any other relevant information.
- X The proposed method of publication or dissemination of the research findings.
- X Details of any external contractors or partner institutions involved in the research.
- X Details of any funding bodies or research councils supporting the research.
- X Confirmation on any limitations in confidentiality where disclosure of imminent harm to self and/or others may occur.

SECTION H: CONFIDENTIALITY AND ANONYMITY

22. Below is a checklist covering key points relating to the confidentiality and anonymity of participants. Please indicate where relevant to the proposed research.

- Participants will be completely anonymised and their identity will not be known by the investigator or researcher(s) (i.e. the participants are part of an anonymous randomised sample and return responses with no form of personal identification)?
- The responses are anonymised or are an anonymised sample (i.e. a permanent process of coding has been carried out whereby direct and indirect identifiers have been removed from data and replaced by a code, with no record retained of how the code relates to the identifiers).
- X The samples and data are de-identified (i.e. direct and indirect identifiers have been removed and replaced by a code. The investigator or researchers are able to link the code to the original identifiers and isolate the participant to whom the sample or data relates).
- Participants have the option of being identified in a publication that will arise from the research.
- X Participants will be pseudo-anonymised in a publication that will arise from the research. (i.e. the researcher will endeavour to remove or alter details that would identify the participant.)
- The proposed research will make use of personal sensitive data.
- Participants consent to be identified in the study and subsequent dissemination of research findings and/or publication.

<p>23. Participants must be made aware that the confidentiality of the information they provide is subject to legal limitations in data confidentiality (i.e. the data may be subject to a subpoena, a freedom of information request or mandated reporting by some professions). This only applies to named or de-identified data. If your participants are named or de-identified, please confirm that you will specifically state these limitations.</p> <p>YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p> <p>If NO, please indicate why this is the case below:</p>

NOTE: WHERE THE PROPOSED RESEARCH INVOLVES A SMALL SAMPLE OR FOCUS GROUP, PARTICIPANTS SHOULD BE ADVISED THAT THERE WILL BE DISTINCT LIMITATIONS IN THE LEVEL OF ANONYMITY THEY CAN BE AFFORDED.

SECTION I: DATA ACCESS, SECURITY AND MANAGEMENT

<p>24. Will the Researcher/Principal Investigator be responsible for the security of all data collected in connection with the proposed research? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p> <p>If NO, please indicate what alternative arrangements are in place below:</p>
<p>25. In line with the 6th principle of the Data Protection Act (1998), which states that personal data shall not be kept for longer than is necessary for that purpose or those purposes for which it was collected; please state how long data will be retained for.</p> <p><input type="checkbox"/> 1-2 years <input checked="" type="checkbox"/> 3-5 years <input type="checkbox"/> 6-10 years <input type="checkbox"/> 10> years.</p> <p>NOTE: Research Councils UK (RCUK) guidance currently states that data should normally be preserved and accessible for 10 years, but for projects of clinical or major social, environmental or heritage importance, for 20 years or longer. (http://www.rcuk.ac.uk/documents/reviews/grc/grcpoldraft.pdf)</p>

<p>26. Below is a checklist which relates to the management, storage and secure destruction of data for the purposes of the proposed research. Please indicate where relevant to your proposed arrangements.</p> <p><input checked="" type="checkbox"/> Research data, codes and all identifying information to be kept in separate locked filing cabinets. <input checked="" type="checkbox"/> Access to computer files to be available to research team by password only. <input type="checkbox"/> Access to computer files to be available to individuals outside the research team by password only (See 23.1). <input type="checkbox"/> Research data will be encrypted and transferred electronically within the European Economic Area (EEA). <input type="checkbox"/> Research data will be encrypted and transferred electronically outside of the European Economic Area (EEA). (See 28). NOTE: Transfer of research data via third party commercial file sharing services, such as Google Docs and YouSendIt are not necessarily secure or permanent. These systems may also be located overseas and not covered by UK law. If the system is located outside the European Economic Area (EEA) or territories deemed to have sufficient standards of data protection, transfer may also breach the Data Protection Act (1998). <input type="checkbox"/> Use of personal addresses, postcodes, faxes, e-mails or telephone numbers. <input checked="" type="checkbox"/> Use of personal data in the form of audio or video recordings. <input type="checkbox"/> Primary data gathered on encrypted mobile devices (i.e. laptops). NOTE: This should be transferred to secure UEL servers at the first opportunity. <input checked="" type="checkbox"/> All electronic data will undergo <u>secure disposal</u>. NOTE: For hard drives and magnetic storage devices (HDD or SSD), deleting files does not permanently erase the data on most systems, but only deletes the reference to the file. Files can be restored when deleted in this way. Research files must be <u>overwritten</u> to ensure they are completely irretrievable. Software is available for the secure erasing of files from hard drives which meet recognised standards to securely scramble sensitive data. Examples of this software are BC Wipe, Wipe File, DeleteOnClick and Eraser for Windows platforms. Mac users can use the standard 'secure empty trash' option; an alternative is Permanent eraser software. <input checked="" type="checkbox"/> All hardcopy data will undergo <u>secure disposal</u>. NOTE: For shredding research data stored in hardcopy (i.e. paper), adopting DIN 3 ensures files are cut into 2mm strips or confetti like cross-cut particles of 4x40mm. The UK government requires a minimum standard of DIN 4 for its material, which ensures cross cut particles of at least 2x15mm.</p>	
<p>27. Please provide details of individuals outside the research team who will be given password protected access to encrypted data for the proposed research.</p>	
<p>N/A. While I will share de-identified, partial data in research supervision, no-one apart from me will have access to the whole data set. In supervision I will take responsibility for sharing information in an ethically sound manner, complying with data protection legislation and good research practice regarding confidentiality. I will pay similar regard to legislation and will take responsibility for destroying the data at the end of the project period.</p>	
<p>28. Please provide details on the regions and territories where research data will be electronically transferred that are external to the European Economic Area (EEA).</p>	
<p>N/A</p>	
<p>29. Will this research be financially supported by the United States Department of Health and Human Services or any of its divisions, agencies or programs? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p>	
<p>If YES please provide details:</p>	

SECTION J: PUBLICATION AND DISSEMINATION OF RESEARCH FINDINGS

30. How will the results of the research be reported and disseminated? (Select all that apply)

- Peer reviewed journal
- Non-peer reviewed journal
- Peer reviewed books
- Publication in media, social media or website (including Podcasts and online videos)
- Conference presentation
- Internal report
- Promotional report and materials
- Reports compiled for or on behalf of external organisations
- Dissertation/Thesis
- Other publication
- Written feedback to research participants
- Presentation to participants or relevant community groups
- Other (Please specify below)

SECTION K: OTHER ETHICAL ISSUES

31. Are there any other ethical issues that have not been addressed which you would wish to bring to the attention of Tavistock Research Ethics Committee (TREC)?

N/A

SECTION L: CHECKLIST FOR ATTACHED DOCUMENTS

32. Please check that the following documents are attached to your application.

- Letters of approval from any external ethical approval bodies (where relevant)
- Recruitment advertisement
- Participant information sheets (including easy-read where relevant)
- Consent forms (including easy-read where relevant)
- Assent form for children (where relevant)
- Evidence of any external approvals needed
- Questionnaire
- Interview Schedule or topic guide
- Risk Assessment (where applicable)
- Overseas travel approval (where applicable)

34. Where it is not possible to attach the above materials, please provide an explanation below.

Although it is planned that a participant will be interviewed, the nature, form and content of the interview is not yet known, as it will be highly guided by the first element of this action research project, e.g. the review and critique of current psychoanalytic research methods and the refining of these to form the method for this project's interviews. This means the interview schedule cannot be included in the documentation at this point.

References

- Bradbury, H. (ed.) (2015) *The SAGE handbook of action research*. 3rd edn. London: SAGE.
- Elliott, H., Ryan, J. and Hollway, W. (2012) 'Research encounters, reflexivity and supervision', *International Journal of Social Research Methodology: Theory & Practice*, 15(5), pp. 433-444.
- Frosh, S. and Baraitser, L. (2008) 'Psychoanalysis and psychosocial studies', *Psychoanalysis, Culture & Society*, 13(4), pp. 346-365.
- Hollway, W. and Jefferson, T. (2000) *Doing qualitative research differently: Free association, narrative and the interview method*. London: SAGE.
- Hollway, W. and Jefferson, T. (2013) *Doing qualitative research differently: A psychosocial approach*. 2nd edn. London: SAGE. Available at:
<http://search.ebscohost.com/login.aspx?direct=true&db=nlebk&AN=775817&authtype=shib&site=ehost-live>
(accessed: 6/04/19).
- Holmes, J. (2019) *A practical psychoanalytic guide to reflexive research: The Reverie Research Method*. London: Routledge.
- Stopford, A. (2004) 'Researching post colonial subjectivities: the application of relational (post-classical) psychoanalysis to research methodology', *Critical Psychology*, 10, pp. 13-35.



Research project brief

Dear [named colleague],

As you know, I am a child and adolescent psychotherapy trainee and I will be undertaking a doctoral research project over the next couple of years.

My interest is in how 'the unconscious' may contribute to our enhanced understanding of psychoanalytic research project design, data collection and analysis, i.e.

In what ways can an environment be created in which unconscious experience can show itself?

In order to trial such an environment I am looking to interview colleagues. The topic will be:

What is the emotional experience of CAMHS clinicians undertaking Initial Assessments?

If you are interested in:

Practice-based research or the emotional impact of IA work

And you would like to know more, please come and speak to me or email me at Claire.lokke@nhs.net

Project brief

Version 1 (12.10.19)

Project:

Closing the circle, to open a space: Can the intentions of avowedly psychoanalytic research methodologies be fulfilled in methods that are deeply congruent with this epistemology? An action research project to inform future psychoanalytic research endeavours.

Researcher: Claire Lokke



Participant information sheet

Research title

Closing the circle, to open a space: Can the intentions of avowedly psychoanalytic research methodologies be fulfilled in methods that are deeply congruent with this epistemology? An action research project to inform future psychoanalytic research endeavours.

Who is conducting this research project?

Claire Lokke, child and adolescent psychotherapist in doctoral training. I am employed by The Tavistock and Portman NHS Foundation Trust. I am entering year three of a four-year placement in [redacted] NHS Trust. The Professional Doctorate in Child and Adolescent Psychoanalytic Psychotherapy is validated by Essex University. This research project has been reviewed and ethical approval received via the Tavistock Research Ethics Committee (TREC).

What are the aims of this project?

The aim of this project is to undertake a detailed investigation into the existing evidence base for psychoanalytic research methodology and methods. I will be thinking about the critical evaluations that have been written about in the literature and how these may be harnessed to improve future psychoanalytic research design. To this end I will trial a novel method based on my research findings. The method will be interview-based. I am seeking to interview a CAMHS clinician on the topic of their emotional experience of Initial Assessments (IA). The participant will be interviewed three times:

What would taking part involve?

If you agree to participate you will be asked to talk as openly and freely as possible about your IA experiences and as a clinician-researcher I will ensure the anonymity of any client you may refer to.

You will be invited to three audio-recorded interviews. Each one is anticipated to last between 50-75 minutes and will take place in [redacted] at a time convenient to you. The interviews will be spaced over a couple of months.

- 1) The first interview will require you to come prepared to think about your experiences of a memorable IA you have undertaken.
- 2) The second will require you to come prepared to talk about an IA of your choice.
- 3) The third will be to reflect upon the interview process itself.

Participant Information Sheet

Version 1 (12.10.19)

Project:

Closing the circle, to open a space: Can the intentions of avowedly psychoanalytic research methodologies be fulfilled in methods that are deeply congruent with this epistemology? An action research project to inform future psychoanalytic research endeavours.

Researcher: Claire Lokke

A key element of the project is exploring unconscious communication, both in the reported IAs and in the interview situation. In order that your data is analysed in an ethically sound manner it will be shared with a psychoanalytic supervisor, in a similar way that you might take a case to supervision with your manager. I will maintain your confidentiality at all times, by removing any identifying details.

What will happen to your data?

The General Data Protection Regulation (2018) arrangements will be followed. The Tavistock and Portman NHS Foundation Trust is the sponsor for this study based in the United Kingdom. I will be using information from you in order to undertake this study and will act as the data controller for this study. This means that I am responsible for looking after your information and using it properly. I will keep identifiable information about you from this study for up to five-years after the study has finished.

Your rights to access, change or move your information are limited, as I need to manage your information in specific ways in order for the research to be reliable and accurate. To safeguard your rights, I will use the minimum personally identifiable information possible. I will use your name and the contact details you provide only to contact you about the research study. I am the only person who will have access to information that identifies you. I may be assisted in the analysis of this information by senior colleagues, but they will not be able to identify you and will not be able to find out your name or contact details.

You can find out more about the legal framework within which your information will be processed by contacting the sponsoring Trust's Clinical Governance and Quality Manager, Irene Henderson: IHenderson@tavi-port.nhs.uk.

How will your data be used?

The data will be analysed and written up as part of my doctoral dissertation. It may also be used in future academic presentations and peer reviewed publications.

What if you change your mind?

Participation is entirely voluntary and you will be able to withdraw consent for your data to be used up to two weeks after your last interview.

What are the possible benefits of taking part?

Your participation will support the development of my skills as a researcher and clinician, enabling me to contribute to future research within the NHS that may usefully address practice-based questions. It may also contribute to the evidence base of psychoanalytic methodology and methods.

You may find having the space to reflect on a key-element of CAMHS work to be intellectually and emotionally stimulating.

Are there any risks?

Participant Information Sheet

Version 1 (12.10.19)

Project:

Closing the circle, to open a space: Can the intentions of avowedly psychoanalytic research methodologies be fulfilled in methods that are deeply congruent with this epistemology? An action research project to inform future psychoanalytic research endeavours.

Researcher: Claire Lokke

There is an extremely minimal risk that a colleague who knows your work very well may feel able to identify you from a professional paper that is written as an outcome of this project. I will, however, take every possible step to ensure that your privacy and that of any client you may discuss is protected. No identifying details will be used at any time.

The content and process of the interviews are likely to feel familiar to you as a CAMHS clinician and therefore, there are unlikely to be any personal risks involved in your participation. If, however, you feel unsettled by discussing aspects of your experience you may find it helpful to contact the occupational health and wellbeing team at [redacted] hospital [redacted] for further support. If you are left with questions regarding how you or [redacted] CAMHS' are undertaking Initial Assessments, you are encouraged to speak to your service supervisor in the first instance.

How will new information regarding safeguarding be managed?

If during the course of the interviews I hear information that I believe falls under the remit of safeguarding vulnerable children or adults I will bring this to your attention. You will then be expected to follow the local safeguarding procedures.

What feedback will I receive?

If you would like to find out about the outcomes of the research, the completed thesis will be available to you, on request.

Contact details

Ms. Claire Lokke (researcher) Claire.lokke@nhs.net

Dr. Brinley Yare (project supervisor) BYare@tavi-port.ac.uk

Dr. Brian Rock (study sponsor and Director of Postgraduate Studies, The Tavistock and Portman NHS Foundation Trust) BRock@Tavi-Port.ac.uk

Concerns

If you have any concerns about my conduct as a researcher, you may contact Dr. Simon Carrington (Head of Academic Governance and Quality Assurance, The Tavistock and Portman NHS Foundation Trust) academicquality@tavi-port.nhs.uk

**Thank you for taking the time to read this information sheet.
If you decide to participate, please complete the attached consent form.**

Participant Information Sheet

Version 1 (12.10.19)

Project:

Closing the circle, to open a space: Can the intentions of avowedly psychoanalytic research methodologies be fulfilled in methods that are deeply congruent with this epistemology? An action research project to inform future psychoanalytic research endeavours.

Researcher: Claire Lokke



Consent form

Research title

Closing the circle, to open a space: Can the intentions of avowedly psychoanalytic research methodologies be fulfilled in methods that are deeply congruent with this epistemology? An action research project to inform future psychoanalytic research endeavours.

Consent statements

Please tick

I confirm that I have received, read and understood the participant information sheet for the above named project.

I confirm that I would like to voluntarily participate in the audio-recorded interviews as described in the participant information sheet.

I confirm my understanding that I may withdraw from the study at any time up to two weeks after my participation.

I confirm that I give consent for my data to be used in accordance with the information described on the participant information sheet, the primary purpose of which is to contribute to the production of my professional doctorate research dissertation. I understand my data may also be used in the writing of academic peer reviewed articles and conference presentations.

I confirm my understanding that whilst every effort will be made to anonymise the data, it is possible that if quotations are used, they may be recognisable to me or staff who work closely with me.

If you have any further questions or you would like to discuss anything before consenting to participate please email me: Claire.lokke@nhs.net

Participant's name (block capitals)

Participant's signature

Date

Consent form

Version 1 (12.10.19)

Project:

Closing the circle, to open a space: Can the intentions of avowedly psychoanalytic research methodologies be fulfilled in methods that are deeply congruent with this epistemology? An action research project to inform future psychoanalytic research endeavours.

Researcher: Claire Lokke



Post-project information

Thank you for taking the time to participate in my research project.

Your contribution is much appreciated as it will support my development as a researcher and as a clinician. I hope it will also contribute to the small, but growing literature base on psychoanalytic research methodology.

I hope the experience has been of interest to you. If you have any concerns about the way the research was conducted you may contact Simon Carrington (Head of Academic Governance and Quality Assurance, The Tavistock and Portman NHS Foundation Trust) academicquality@tavi-port.nhs.uk

If you have been personally affected by the interview, you may wish to seek support from the occupational health and wellbeing team at [redacted] Hospital ([redacted])

If you would like to be kept informed about the progress of the project, please let me know.

Claire Lokke
Claire.lokke@nhs.net

Post-project information

Version 1 (12.10.19)

Project:

Closing the circle, to open a space: Can the intentions of avowedly psychoanalytic research methodologies be fulfilled in methods that are deeply congruent with this epistemology? An action research project to inform future psychoanalytic research endeavours.

Researcher: Claire Lokke

(2) TREC assessor's feedback

Claire LOCKE

By Email

3 December 2019

Re: Trust Research Ethics Application

Title: How does psychoanalytically informed qualitative research methodology contribute to the understanding of interview generated data? An investigation of my processes as a psychoanalytically informed qualitative researcher exploring the experiences of CAMHS clinicians undertaking Initial Assessments.

I am writing to inform you that your application has been reviewed by the Assessors and I can confirm that your research ethics application has not been approved at this stage. Please note that **SIGNIFICANT** amendments have been requested.

Ethical approval is given subject to formal ratification by the Trust Research Ethics Committee (TREC) and on the proviso of minor amendments requested by TREC assessors are addressed.

The amendments are as follows:

Advisory	Comments
1. Participants and Selection Criteria	<p>Comment 1 Please clarify - will the subject be professionally known to the researcher? If so how might this affect the conduct of the project and the capacity for objectivity in the data analysis process? Will a number of colleagues be approached, if so how on what criteria will the selection of one take place?</p> <p>Comment 2 Why [REDACTED] CAMHS? Is there a link that needs to be explained and addressed? The link is described in the participant information not the ethics form. Reference is made to "our shared place of work".</p> <p>Some criteria are provided but "e.g." is used. The pre-selection criteria need to be clearer for identifying the initial approach group. Is the approach to find a group in order to then identify as best fit a candidate as possible from a list of criteria, where the more criteria met the better the match? Not specific enough to avoid the suggestion that someone might be lined up. How will disappointed potential participants be handled?</p> <p>It is not clear if more than one potential interviewee comes forward (by self - selection against criteria?) how the key or best fit participant will be</p>

	identified.
2. Participant Support/Distress	<p>Comment 1 There seems a small risk of this. Nevertheless, It is good practice to state what straightforward measures will be taken in the event of the participant becoming distressed – typically 1. Use of researcher’s own capacities as a professional 2. Debriefing following sessions 3. Referral to an appropriate professional</p> <p>Comment 2 I think the potential for distress is understated. A CAMHS worker being interviewed about personal perspectives might become distressed. The researcher assumes robustness. There will be other service support options such as recommending participant discuss matters with their supervisor as well as consideration of self- referral to OH (which is mentioned).</p> <p>The way feedback on the research outcomes will be shared in some way with the interviewee need to be clearer.</p>
3. Data Analysis	<p>Comment 1 Some stronger indication of proposed methods of data analysis of the empirical material should be included.</p> <p>Comment 2 The proposed method or approach for analysing the recordings, transcripts is not presented.</p> <p>The participant information implies assistance from a psychoanalytic supervisor (is this the research supervisor?) in analysis of data. The role should be clear and the lack of knowledge of the interviewee held by the supervisor should be clear. Should also be clear if the audio recording or/and the transcripts are to be shared. It is not clear what it is that makes this action research.</p> <p>The applicant seems to imply that there is work to be done (e.g. investigating literature, which does not require ethical approval) which will provide more detail on the proposed methodology and the nature of questioning to be employed which does need ethical approval. Methodology lacks description and specificity.</p>
4. Data Management	Methods of storage, transfer and destruction for recordings should be clear. It should be clear who will hear them and see transcripts and in what role.
5. Disclosure	Should there be a disclosure relating to protection of vulnerable children or adults then an awareness of protection/safeguarding procedures and preparedness should be shown by the researcher.
6. Participant Information Document	The participant information has no entry under the heading “are there any risks?”
7. Approval from [redacted] CAMHS	The agreement from the [redacted] service manager that it is appropriate to approach employees and ask them to engage etc is not provided

Please attached checklists for more information.

Please ensure that your amendments be made in the form of either a revised application form and/or specific supporting documents e.g. consent letter (where appropriate). Your supervisor/research lead is responsible for guiding you through the ethical approval process and with this in mind, please ensure that the amended application is signed by yourself, your supervisors and the research lead/course lead **AND** that you copy your supervisor/research/course lead in your response to this letter.

We appreciate that this requires further work on your part but it would be helpful if you could return your amended application by **17 December 2019** to the Quality Assurance Department (academicquality@tavi-port.nhs.uk). Please include a brief statement in the email explaining how the above amendments/conditions have been met.

In the meantime you MAY NOT begin to undertake your research work at this stage.

If you have any further questions or require any clarification do not hesitate to contact me.

Best regards,



Paru Jeram
Secretary to the Trust Research Degrees Subcommittee
T: 020 938 2699
E: pjeram@tavi-Port.nhs.uk

CC: Supervisor, Course/Research Lead

Ethical Practice Assessors Checklist 1

	Criteria	Addressed? (please delete as appropriate)	Comments
1	Do the research aims, methods or methods of analysis give rise to ethical concerns?	Yes	<p>The proposed method or approach for analysing the recordings, transcripts is not presented.</p> <p>The participant information implies assistance from a psychoanalytic supervisor (is this the research supervisor?) in analysis of data. The role should be clear and the lack of knowledge of the interviewee held by the supervisor should be clear. Should also be clear if the audio recording or/and the transcripts are to be shared. It is not clear what it is that makes this action research.</p> <p>The applicant seems to imply that there is work to be done (e.g. investigating literature, which does not require ethical approval) which will provide more detail on the proposed methodology and the nature of questioning to be employed which does need ethical approval.</p>
2	Are participant selection criteria appropriate and justified?	No	<p>Why [redacted] CAMHS? Is there a link that needs to be explained and addressed? The link is described in the participant information not the ethics form. Reference is made to "our shared place of work".</p> <p>Some criteria are provided but e.g. is used. The preselection criteria need to be clearer for identifying the initial approach group. Is the approach to find a group in order to then identify as best fit a candidate from a list of criteria, where the more criteria met the better the match? Not specific enough to avoid the suggestion that someone might be lined up.</p> <p>It is not clear if more than one potential interviewee comes forward (by self selection against criteria?) how the key or best fit participant will be identified.</p>
3	Will written informed consent be obtained? If otherwise, is it justified and ethical?	Yes - however	I am not provided with the agreement from the [redacted] service manager that it is appropriate to approach employees and ask them to engage etc; neither am I convinced of the justification for not having it.
4	If payment will be offered, is this ethical?	NA	
5	Are the stated plans to protect confidentiality robust?	No	Methods of storage, transfer and destruction for recordings should be clear. It should be

	Do they show due awareness of relevant local and national frameworks?	Yes	clear who will hear them.
6	If there is any procedure that might cause discomfort/distress, is this reasonable and ethical?	No	
7	If there is any distress or risk involved for participants, is this reasonable and ethical?	Yes/No/NA	I think this is understated. A CAMHS worker being interviewed about personal perspectives might become distressed. The researcher assumes robustness. There will be service support options such as recommending participant discuss matters with a supervisor as well as consideration of self-referral to OH (which is mentioned). The way feedback on the research outcomes will be shared in some way with the interviewee need to be clearer.
8	Will participants be made aware of: their right not to take part or withdraw at any time? their right to confidentiality/privacy? who to contact about participation in the study?	Yes No Yes	Should there be a disclosure relating to protection of vulnerable children or adults then an awareness of protection/safeguarding procedures and preparedness should be shown by the researcher.
9	Is the risk assessment required* – if so, has one been completed satisfactorily? <i>*To be completed if research is not undertaken in regular place of work/study</i>	No - however	The participant information has no entry under the heading "are there any risks?"
10	Do you have any advisory comments relating to the proposed project or methodology? (this section is optional)	Yes	I don't agree with the proposal that the researcher is the primary participant.

Ethical Practice Assessors Checklist 2

Criteria	Addressed? (please delete as appropriate)	Comments
Do the research aims, methods or methods of analysis give rise to ethical concerns?	Yes	Yes, although the ethical issues are limited per se. One series of 3 interviews with a professional is involved.
Are participant selection criteria appropriate and justified?	Yes/No	Some clarification is needed I think. Will the subject be professionally known to the researcher? If so how might this affect the conduct of the project and the capacity for objectivity in the data analysis process? Will a number of colleagues be approached, if so how on what criteria will the selection of one take place?
Will written informed consent be obtained? If otherwise, is it justified and ethical?	Yes	
If payment will be offered, is this ethical?	NA	
Are the stated plans to protect confidentiality robust? Do they show due awareness of relevant local and national frameworks?	Yes Yes	
If there is any procedure that might cause discomfort/distress, is this reasonable and ethical?	Yes	There seems a small risk of this. Nevertheless it is good practice to state what straightforward measures will be taken in the event of the participant becoming distressed – typically 1. Use of researcher's own capacities as a professional 2. Debriefing following sessions 3. Referral to an appropriate professional
If there is any distress or risk involved for participants, is this reasonable and ethical?	No	No, beyond the above
Will participants be made aware of: their right not to take part or withdraw at any time? their right to confidentiality/privacy? who to contact about participation in the study?	Yes Yes Yes	
Is the risk assessment required* – if so, has one been completed satisfactorily? <i>*To be completed if research is not undertaken in regular place of work/study</i>	Yes	Unless interviews not taking place in regular place of work
Do you have any advisory	Yes	1. The designation of this as action

<p>comments relating to the proposed project or methodology? (this section is optional)</p>		<p>research seems to be a stretch in terms of the usual understanding of this approach. The project seems to me better denoted as something like 'methodological development'. It doesn't make real sense to say that the main participant is the researcher herself.</p> <ol style="list-style-type: none"> 2. Some stronger indication of proposed methods of data analysis of the empirical material should be included. 3. The format of the interviews cannot be precisely described at this point because it would seem to be dependent on the preliminary phase of conceptual work and literature review. This does not seem an ethical problem to me since I imagine that in line with the author's statements, some form of 'free narrative' interview technique will be deployed, and the background conceptual work will inform the data analysis more than the conduct of the interviews? 4. There is very recent new work that bears directly on the proposal – A PhD critically examining the use of FANI by Dr Philip Archard, University of Nottingham. Available on Research Gate or from me. One paper accepted for publication.
---	--	---

Recommendation (tick as appropriate)

1. Approve	
2. Provisionally Approve with <u>minor conditions</u> requested (e.g. typos and other minor errors or omissions) – to be signed off by Supervisor	x
3. Not Approve - <u>significant conditions</u> requested (e.g. aspects of the research process are unclear or under-described; insufficient consideration of ethical issues; management of ethical concerns is questionable) – to be signed off by TREC Assessor	
4. Defer - return to TREC Chair	
5. Not approve	

(3) Amendments made in response to feedback from the TREC assessment, including revised public facing documents

Responses to the comments raised:

Please note the project title is not as written on the feedback email, but rather:

Closing the circle, to open a space: Can the intentions of avowedly psychoanalytic research methodologies be fulfilled in methods that are deeply congruent with this epistemology? A methodological study to inform future psychoanalytic research endeavours.

Researcher: Claire Lokke

Condition	comment	Please detail in summary how conditions are met
1. Participants and Selection Criteria	<p>Comment 1</p> <p>Please clarify - will the subject be professionally known to the researcher? If so how might this affect the conduct of the project and the capacity for objectivity in the data analysis process?</p> <p>Will a number of colleagues be approached, if so how on what criteria will the selection of one take place?</p>	<p>The participant will be known to me. In line with psychoanalytically informed qualitative research methodology I will not be aiming for objectivity, but for carefully considered use of my subjectivity in relation to the data gathering and analysis process. I am aware that unconscious interpersonal communication will be occurring between the participant and me, and that this is not easy to be aware of. This forms a central aspect to the project, i.e. how to access and then analyse the unconscious in a research situation. The issues surrounding conscious/unconscious communication and the objectivity/ subjectivity axis will need to be carefully acknowledged and thought about throughout the project, which I intend to do.</p> <p>Five senior CAMHS clinicians, who will have been working in [REDACTED] for five-plus years, will be sent an initial recruitment email (appendix 1). The five will be pre-selected on the basis of their length of service and degree of experience. The selection of the participant will be on a first response basis and this will be clearly written in the recruitment email.</p>
	<p>Comment 2</p> <p>Why [REDACTED] CAMHS? Is there a link that needs to be explained and addressed? The link</p>	<p>[REDACTED] has been chosen because it is the Trust in which I am based and in discussion with my research supervisor (Dr. Brinley Yare) it was decided that this small-scale research project could be accommodated here, with agreement from the service manager.</p> <p>As above for comment 1. The pre-selection criteria are:</p>

<p>is described in the participant information not the ethics form. Reference is made to "our shared place of work".</p> <p>Some criteria are provided but "e.g." is used. The pre-selection criteria need to be clearer for identifying the initial approach group. Is the approach to find a group in order to then identify as best fit a candidate as possible from a list of criteria, where the more criteria met the better the match? Not specific enough to avoid the suggestion that someone might be lined up. How will disappointed potential participants be handled?</p> <p>It is not clear if more than one potential</p>	<p>i) senior CAMHS clinicians who regularly undertake Initial Assessments (IAs)</p> <p>ii) senior CAMHS clinicians who have been employed [REDACTED] for at least five years</p> <p>iii) senior CAMHS clinicians whose experiences in [REDACTED] and length of service means they have a degree of expertise in undertaking IAs.</p> <p>The recruitment email will advise that selection will take place on a first come-first selected basis. Immediately after the first response is received an email to the four other pre-selected colleagues will be sent thanking them for their time in considering my project and informing them that the position is now filled (appendix 2).</p>
--	---

	interviewee comes forward (by self - selection against criteria?) how the key or best fit participant will be identified.	
2. Participant Support/Distress	<p>Comment 1</p> <p>There seems a small risk of this. Nevertheless, it is good practice to state what straightforward measures will be taken in the event of the participant becoming distressed – typically 1. Use of researcher’s own capacities as a professional 2. Debriefing following sessions 3. Referral to an appropriate professional</p>	As you will notice elsewhere in the original ethics application (e.g. under question 14), I will use my professional capacities to notice and reflect with the participant on an appropriate avenue for support should it seem appropriate to do so. There is specific opportunity to do this in session-three and I will make them aware of the referral route to the Trust’s Occupational Health service and remind them of the supportive role their service supervisor might be able to offer. I will make this information clear in the revised debrief letter (appendix 3) and participant information sheet (appendix 4).
	<p>Comment 2</p> <p>I think the potential for distress is understated. A CAMHS worker being interviewed about personal perspectives might become distressed. The researcher assumes robustness.</p>	See comment above.

	<p>There will be other service support options such as recommending participant discuss matters with their supervisor as well as consideration of self-referral to OH (which is mentioned).</p> <p>The way feedback on the research outcomes will be shared in some way with the interviewee need to be clearer.</p>	<p>Changes will be made to both the debrief letter (appendix 3) and the participant information sheet (appendix 4), which will state that if the participant is interested in the research outcomes then I will send them a copy of my completed thesis on request.</p>
3. Data Analysis	<p>Comment 1</p> <p>Some stronger indication of proposed methods of data analysis of the empirical material should be included.</p>	<p>This project seeks to explore the complimentary paradigms of the Free Association Narrative Interview (FANI) and the Reverie Review Method (RRM) and how the two methods might usefully be synthesised to the advantage of future psychosocial researchers. In the section below, I highlight how data collection and data analysis is described in the two methods (e.g., Hollway & Jefferson, 2013; Homes, 2017, which my study will seek to follow.</p> <p>The data analysis of the empirical material will all be analysed using a psychoanalytic theoretical frame. This will entail:</p> <ul style="list-style-type: none"> i) Writing up my memory of the interview as soon as it has ended. This will include what I remember the interviewee said; the emotional atmosphere of the encounter; the non-verbal interactions between us; any moments of reverie or bodily responses. This will form a psychoanalytical analysis of my immediate responses to the research encounter. ii) I will keep a field-note diary of any moments of reverie or (day)dream-thoughts that arise following the interview. iii) I will listen to and transcribe the audio recordings of each interview and keep a record of moments of reverie.

		<p>iv) Excerpts from i)-iv) will be presented to my research supervisor Dr. Yare for assistance with the psychoanalytic interpretation.</p> <p>v) This process will be repeated for all interviews.</p>
<p>Comment 2 The proposed method or approach for analysing the recordings, transcripts is not presented.</p>		<p>See above.</p> <p>Data collection</p> <p><i>FANI</i></p> <ul style="list-style-type: none"> - FANI utilises the method of encouraging interviewees to free associate in response to a series of open questions. The aim is to elicit stories, through avoiding asking 'why' questions and in following the interviewee's ordering and phrasing. - Two interviews are typically undertaken with the same interviewee to allow an opportunity to check hypotheses that begin to form in interview one and to allow space for both researcher and interviewer to reflect on the stories that are emerging. - Intersubjectivity, the research relationship and researcher reflexivity are carefully explored in the co-production of the data. <p><i>RRM</i></p> <ul style="list-style-type: none"> - RRM seeks to capture the spontaneous visual imagery and interoceptive responses that arise during the course of an interview. The interview itself follows a loosely structured agenda relating to the topic under consideration. - Similar to FANI reverie informed interviews are 'intersubjective dialogues in which data arises as much in the responsive mind of the interviewer as it does in the interchange of words' (Holmes, 2019) <p>Data analysis</p> <p><i>FANI</i></p> <ul style="list-style-type: none"> - Starting point is to base the analysis on the hypothesis that the interviewee is a 'defended subject', invested consciously and unconsciously in a particular discourse relating to the interview topic. - Attempts are made to not fragment the data being analysed but to see it as a whole. Structured summaries and pen portraits of the interviewee by the interviewer are produced to support this development of a holistic picture. - reflexive supervision is sought to understand the interview material and the researcher's subjective responses to it.

		<p><i>RRM</i></p> <ul style="list-style-type: none"> - Researcher reverie is sought to be captured during the actual interview and during the transcription and analysis process. The researcher monitors his/her state for signs of reverie during i) the live interview, ii) the interactions with the audio data and iii) with the transcribed material. - The reverie is then used as a unique way of accessing possible unconscious communications regarding the interview topic. <p>My project – data collection and analysis</p> <ul style="list-style-type: none"> - I will conduct the interview following the method described in FANI using open ended questions to start and then asking the participant to freely associate as ideas come into their mind. Follow up questions will be asked in response to the material generated. - I will attend to the interviewee's verbal and non-verbal communication and using the RRM, to my visual and interoceptive responses. - The first stage of data analysis will occur promptly following the first interview, i.e. the interview will be transcribed and read repeatedly to achieve a state of immersion in the material and to gain a sense of it as a whole. This will inform the direction the interview prompts will take in interview two. - When the interviews have been completed the material will be analysed as described in FANI in terms of identifying themes from the spoken discourse of the interviewee and themes that seem to be communicated through unconscious communication as captured through careful exploration of my reverie (as described in RRM). - My theoretical frame for interpreting the material will be psychoanalytical. Psychoanalytical supervision will be sought to enhance understanding of the unconscious material generated. <p>Published studies that outline the methodology:</p> <p><u>FANI</u> Hollway, W. and Jefferson, T. (2000) <i>Doing qualitative research differently: Free association, narrative and the interview method</i>. London: SAGE.</p> <p>Hollway, W. and Jefferson, T. (2013) <i>Doing qualitative research differently: A psychosocial approach</i>. 2nd edn. London: SAGE. Available at:</p>
--	--	--

	<p>The participant information implies assistance from a psychoanalytic supervisor (is this the research supervisor?) in analysis of data. The role should be clear and the lack of knowledge of the interviewee held by the supervisor should be clear. Should also be clear if the audio recording or/and the transcripts are to be shared.</p>	<p>http://search.ebscohost.com/login.aspx?direct=true&db=nlebk&AN=775817&authtype=shib&site=ehost-live (accessed: 6/04/19).</p> <p>A search of the electronic database PsycINFO, using the search term 'Free Association Narrative Interview' returned 23 results, indicating its current relevance as a psychosocial research methodology being employed in both published research and post-graduate theses.</p> <p><u>RRM</u> Holmes (2017) Reverie informed research interviews, <i>International Journal of Psychoanalysis</i>, 98, 3, 709-728</p> <p>Holmes, J. (2019) <i>A practical psychoanalytic guide to reflexive research: The Reverie Research Method</i>. London: Routledge.</p> <p>I will be receiving assistance from my research supervisor Dr. Brinley Yare in the analysis of data, who is also a psychoanalytic clinician. I am the only person who will have access to the audio recordings of the interviews, but I will take excerpts from the transcripts (which only I will transcribe and only I will see in their entirety) to supervision sessions for discussion. There is a known distance between Dr. Yare and ██████████ CAMHS practitioners; he does not know anyone who works there. I will take full responsibility for ensuring all data in the excerpts is anonymised and that the paper copies are destroyed promptly following the supervision session.</p>
--	---	---

	<p>It is not clear what it is that makes this action research.</p> <p>The applicant seems to imply that there is work to be done (e.g. investigating literature, which does not require ethical approval) which will provide more detail on the proposed methodology and the nature of questioning to be employed which does need ethical approval. Methodology lacks description and specificity.</p>	<p>Nature of the questioning to be employed:</p> <p>Following the FANI method I will first ask an open question to begin to establish rapport in this research relationship and to begin to help him/her free associate, such as:</p> <ul style="list-style-type: none"> - Please can you tell me about your work in CAMHS? <p>Then</p> <ul style="list-style-type: none"> - Can you tell me about children's entry into ██████████ CAMHS? <p>Follow up clarification and elaboration prompts will occur in response to where the interviewee takes their associations.</p>
<p>4. Data Management</p>	<p>Methods of storage, transfer and destruction for recordings should be clear. It should be clear who will hear them and see transcripts and in what role.</p>	<p>I will be recording the interviews on a tape-Dictaphone. The recordings will take place in my work environment and will be stored secured in a locked cabinet to which only I have access.</p> <p>I will transcribe the recordings onto a Word document, which will be stored on a password protected computer to which only I have access. This electronic file will be stored on the computer's hard drive.</p> <p>I will require ongoing access to both the audio recording and its transcription until the end of the project and then both will be destroyed.</p>

		No one will hear the audio recordings apart from me. Dr. Brinley Yare, as my research supervisor, will be shown sections of the transcripts during supervision sessions. I take full responsibility for de-identifying the excerpts that I share.
5. Disclosure	Should there be a disclosure relating to protection of vulnerable children or adults then an awareness of protection/safeguarding procedures and preparedness should be shown by the researcher.	I will add a section to the Participant Information Sheet (appendix 4) that makes it clear that if during the course of an interview I hear information that seems to fall under the safeguarding of vulnerable children or adults I will bring this to the attention of the participant. I will expect the participant to follow the local safeguarding procedures within the Trust and will agree this with them beforehand.
6. Participant Information Document	The participant information has no entry under the heading "are there any risks?"	This information was available but the page break meant it was on the next page of the document.
7. Approval from CAMHS	The agreement from the service manager that it is appropriate to approach employees and ask them to engage etc is not provided	The formally agreed process for getting this information via communication between the Quality Assurance team at the Tavistock and has been initiated.

Research project recruitment

Dear [named colleague],

As you know, I am a child and adolescent psychotherapy trainee and I will be undertaking a doctoral research project over the next couple of years.

My interest is in how ‘the unconscious’ may contribute to our enhanced understanding of psychoanalytic research project design, data collection and analysis, i.e.

In what ways can an environment be created in which unconscious experience can show itself?

In order to trial such an environment I am looking to interview one colleague who will have significant experience of the chosen topic, which is:

What is the emotional experience of CAMHS clinicians undertaking Initial Assessments?

If you are interested in:

Practice-based research or the emotional impact of IA work

And you would like to know more, please come and speak to me or email me at Claire.lokke@nhs.net.

Selection of the participant will be on a ‘first come-first selected’ basis.

Project brief

Version 2 (11.01.20)

Project:

Closing the circle, to open a space: Can the intentions of avowedly psychoanalytic research methodologies be fulfilled in methods that are deeply congruent with this epistemology? A methodological study to inform future psychoanalytic research endeavours.

Researcher: Claire Lokke



Research project participant recruitment - CLOSED

Dear [named colleague],

I am writing to let you know that recruitment to my doctoral research project is now complete. I would like to thank you for the time you will have taken to read my previous email regarding recruitment.

Kind regards,

Claire Lokke
Child and Adolescent Psychotherapist in Doctoral Training

Project brief

Version 2 (11.01.20)

Project:

Closing the circle, to open a space: Can the intentions of avowedly psychoanalytic research methodologies be fulfilled in methods that are deeply congruent with this epistemology? A methodological study to inform future psychoanalytic research endeavours.

Researcher: Claire Lokke

Participant information sheet

Research title

Closing the circle, to open a space: Can the intentions of avowedly psychoanalytic research methodologies be fulfilled in methods that are deeply congruent with this epistemology? An action research project to inform future psychoanalytic research endeavours.

Who is conducting this research project?

Claire Lokke, child and adolescent psychotherapist in doctoral training. I am employed by The Tavistock and Portman NHS Foundation Trust. I am entering year three of a four-year placement in [REDACTED] NHS Trust. The Professional Doctorate in Child and Adolescent Psychoanalytic Psychotherapy is validated by Essex University. This research project has been reviewed and ethical approval received via the Tavistock Research Ethics Committee (TREC).

What are the aims of this project?

The aim of this project is to undertake a detailed investigation into the existing evidence base for psychoanalytic research methodology and methods. I will be thinking about the critical evaluations that have been written about in the literature and how these may be harnessed to improve future psychoanalytic research design. To this end I will trial a novel method based on my research findings. The method will be interview-based. I am seeking to interview a CAMHS clinician on the topic of their emotional experience of Initial Assessments (IA). The participant will be interviewed three times:

What would taking part involve?

If you agree to participate you will be asked to talk as openly and freely as possible about your IA experiences and as a clinician-researcher I will ensure the anonymity of any client you may refer to.

You will be invited to three audio-recorded interviews. Each one is anticipated to last between 50-75 minutes and will take place in [REDACTED] at a time convenient to you. The interviews will be spaced over a couple of months.

- 1) The first interview will require you to come prepared to think about your experiences of a memorable IA you have undertaken.
- 2) The second will require you to come prepared to talk about an IA of your choice.
- 3) The third will be to reflect upon the interview process itself.

Participant Information Sheet

Version 2 (11.01.20)

Project:

Closing the circle, to open a space: Can the intentions of avowedly psychoanalytic research methodologies be fulfilled in methods that are deeply congruent with this epistemology? A methodological study to inform future psychoanalytic research endeavours.

Researcher: Claire Lokke

A key element of the project is exploring unconscious communication, both in the reported IAs and in the interview situation. In order that your data is analysed in an ethically sound manner it will be shared with a psychoanalytic supervisor, in a similar way that you might take a case to supervision with your manager. I will maintain your confidentiality at all times, by removing any identifying details.

What will happen to your data?

The General Data Protection Regulation (2018) arrangements will be followed. The Tavistock and Portman NHS Foundation Trust is the sponsor for this study based in the United Kingdom. I will be using information from you in order to undertake this study and will act as the data controller for this study. This means that I am responsible for looking after your information and using it properly. I will keep identifiable information about you from this study for up to five-years after the study has finished.

Your rights to access, change or move your information are limited, as I need to manage your information in specific ways in order for the research to be reliable and accurate. To safeguard your rights, I will use the minimum personally identifiable information possible. I will use your name and the contact details you provide only to contact you about the research study. I am the only person who will have access to information that identifies you. I may be assisted in the analysis of this information by my research supervisor (Dr. Brinley Yare), but he will not be able to identify you and will not be able to find out your name or contact details. He may be shown de-identified excerpts from the interview transcripts, which I will destroy after immediately after the supervision session.

You can find out more about the legal framework within which your information will be processed by contacting the sponsoring Trust's Clinical Governance and Quality Manager, Irene Henderson: IHenderson@tavi-port.nhs.uk.

How will your data be used?

The data will be analysed and written up as part of my doctoral thesis. It may also be used in future academic presentations and peer reviewed publications.

What if you change your mind?

Participation is entirely voluntary and you will be able to withdraw consent for your data to be used up to two weeks after your last interview.

What are the possible benefits of taking part?

Your participation will support the development of my skills as a researcher and clinician, enabling me to contribute to future research within the NHS that may usefully address practice-based questions. It may also contribute to the evidence base of psychoanalytic methodology and methods.

You may find having the space to reflect on a key-element of CAMHS work to be intellectually and emotionally stimulating.

Participant Information Sheet

Version 2 (11.01.20)

Project:

Closing the circle, to open a space: Can the intentions of avowedly psychoanalytic research methodologies be fulfilled in methods that are deeply congruent with this epistemology? A methodological study to inform future psychoanalytic research endeavours.

Researcher: Claire Lokke

Are there any risks?

There is an extremely minimal risk that a colleague who knows your work very well may feel able to identify you from a professional paper that is written as an outcome of this project. I will, however, take every possible step to ensure that your privacy and that of any client you may discuss is protected. No identifying details will be used at any time.

The content and process of the interviews are likely to feel familiar to you as a CAMHS clinician and therefore, there are unlikely to be any personal risks involved in your participation. If, however, you feel unsettled by discussing aspects of your experience you may find it helpful to contact the occupational health and wellbeing team at [REDACTED] Hospital ([REDACTED]) for further support. If you are left with questions regarding how you or [REDACTED] CAMHS' are undertaking Initial Assessments, you are encouraged to speak to your service supervisor in the first instance.

How will new information regarding safeguarding be managed?

If during the course of the interviews I hear information that I believe falls under the remit of safeguarding vulnerable children or adults I will bring this to your attention. You will then be expected to follow the local safeguarding procedures.

What feedback will I receive?

If you would like to find out about the outcomes of the research, the completed thesis will be available to you, on request.

Contact details

Ms. Claire Lokke (researcher) Claire.lokke@nhs.net

Dr. Brinley Yare (project supervisor) BYare@tavi-port.ac.uk

Dr. Brian Rock (study sponsor and Director of Postgraduate Studies, The Tavistock and Portman NHS Foundation Trust) BRock@Tavi-Port.ac.uk

Concerns

If you have any concerns about my conduct as a researcher, you may contact Dr. Simon Carrington (Head of Academic Governance and Quality Assurance, The Tavistock and Portman NHS Foundation Trust) academicquality@tavi-port.nhs.uk

**Thank you for taking the time to read this information sheet.
If you decide to participate, please complete the attached consent form.**

Participant Information Sheet

Version 2 (11.01.20)

Project:

Closing the circle, to open a space: Can the intentions of avowedly psychoanalytic research methodologies be fulfilled in methods that are deeply congruent with this epistemology? A methodological study to inform future psychoanalytic research endeavours.

Researcher: Claire Lokke

Are there any risks?

There is an extremely minimal risk that a colleague who knows your work very well may feel able to identify you from a professional paper that is written as an outcome of this project. I will, however, take every possible step to ensure that your privacy and that of any client you may discuss is protected. No identifying details will be used at any time.

The content and process of the interviews are likely to feel familiar to you as a CAMHS clinician and therefore, there are unlikely to be any personal risks involved in your participation. If, however, you feel unsettled by discussing aspects of your experience you may find it helpful to contact the occupational health and wellbeing team at [redacted] Hospital ([redacted]) for further support. If you are left with questions regarding how you or [redacted] CAMHS' are undertaking Initial Assessments, you are encouraged to speak to your service supervisor in the first instance.

How will new information regarding safeguarding be managed?

If during the course of the interviews I hear information that I believe falls under the remit of safeguarding vulnerable children or adults I will bring this to your attention. You will then be expected to follow the local safeguarding procedures.

What feedback will I receive?

If you would like to find out about the outcomes of the research, the completed thesis will be available to you, on request.

Contact details

Ms. Claire Lokke (researcher) Claire.lokke@nhs.net

Dr. Brinley Yare (project supervisor) BYare@tavi-port.ac.uk

Dr. Brian Rock (study sponsor and Director of Postgraduate Studies, The Tavistock and Portman NHS Foundation Trust) BRock@Tavi-Port.ac.uk

Concerns

If you have any concerns about my conduct as a researcher, you may contact Dr. Simon Carrington (Head of Academic Governance and Quality Assurance, The Tavistock and Portman NHS Foundation Trust) academicquality@tavi-port.nhs.uk

**Thank you for taking the time to read this information sheet.
If you decide to participate, please complete the attached consent form.**

Participant Information Sheet

Version 2 (11.01.20)

Project:

Closing the circle, to open a space: Can the intentions of avowedly psychoanalytic research methodologies be fulfilled in methods that are deeply congruent with this epistemology? A methodological study to inform future psychoanalytic research endeavours.

Researcher: Claire Lokke

Consent form

Research title

Closing the circle, to open a space: Can the intentions of avowedly psychoanalytic research methodologies be fulfilled in methods that are deeply congruent with this epistemology? A methodological study to inform future psychoanalytic research endeavours.

Consent statements

**Please
tick**

I confirm that I have received, read and understood the participant information sheet for the above named project.

✓

I confirm that I would like to voluntarily participate in the audio-recorded interviews as described in the participant information sheet.

✓

I confirm my understanding that I may withdraw from the study at any time up to two weeks after my participation.

✓

I confirm that I give consent for my data to be used in accordance with the information described on the participant information sheet, the primary purpose of which is to contribute to the production of my professional doctorate research dissertation. I understand my data may also be used in the writing of academic peer reviewed articles and conference presentations.

✓

I confirm my understanding that whilst every effort will be made to anonymise the data, it is possible that if quotations are used, they may be recognisable to me or staff who work closely with me.

✓

If you have any further questions or you would like to discuss anything before consenting to participate please email me: Claire.lokke@nhs.net

Participant's name (block capitals)



Participant's signature



Date

...10/02/21

Consent form

Version 2 (11.01.20)

Project:

Closing the circle, to open a space: Can the intentions of avowedly psychoanalytic research methodologies be fulfilled in methods that are deeply congruent with this epistemology? A methodological study to inform future psychoanalytic research endeavours.

Researcher: Claire Lokke



Post-project information

Thank you for taking the time to participate in my research project.

Your contribution is much appreciated as it will support my development as a researcher and as a clinician. I hope it will also contribute to the small, but growing literature base on psychoanalytic research methodology.

I hope the experience has been of interest to you. If you have any concerns about the way the research was conducted you may contact Simon Carrington (Head of Academic Governance and Quality Assurance, The Tavistock and Portman NHS Foundation Trust) academicquality@tavi-port.nhs.uk

If you have been personally affected by the interview, you may wish to seek support from the occupational health and wellbeing team at [redacted] Hospital ([redacted]). If you are left with questions regarding how you or [redacted] CAMHS' are undertaking Initial Assessments, you are encouraged to speak to your service supervisor in the first instance.

If you would like to be informed about the outcomes of the project, please email me and I will send you a copy of my thesis once it is complete.

Claire Lokke
Claire.lokke@nhs.net

Post-project information

Version 2 (11.01.20)

Project:

Closing the circle, to open a space: Can the intentions of avowedly psychoanalytic research methodologies be fulfilled in methods that are deeply congruent with this epistemology? A methodological study to inform future psychoanalytic research endeavours.

Researcher: Claire Lokke

(4) Email and letter confirmation of ethical approval

From: academicquality@Tavi-Port.nhs.uk
Subject: Research Ethics Application
Date: 16 January 2020 at 13:14:42 GMT
To: Clairelokke@gmail.com,clairelokke@gmail.com
Cc: academicquality@Tavi-Port.nhs.uk,BYare@Tavi-Port.ac.uk

Dear Claire,

I am pleased to inform you that subject to formal ratification by the Trust Research Ethics Committee your application has been approved. This means you can proceed with your research.

Please note that any changes to the project design including changes to methodology/data collection etc, must be referred to TREC as failure to do so, may result in a report of academic and/or research misconduct.

Please login to MyTap/MyResearch and 'My Letters' for more details regarding your application.

Yours sincerely,

Paru Jeram

Secretary to the Trust Research Degrees Subcommittee and Quality Assurance Officer

**The Tavistock and Portman
NHS Foundation Trust**

Tavistock Centre
120 Belsize Lane
London NW3 5BA
Tel: +44 (0)20 8938 2214

Claire LOCKE

By Email

16 January 2020

Dear Claire,

Re: Trust Research Ethics Application

Title: Closing the circle, to open a space: Can the intentions of avowedly psychoanalytic research methodologies be fulfilled in methods that are deeply congruent with this epistemology? A methodological study to inform future psychoanalytic research endeavours.

Please be advised that any changes to the project design including changes to methodology/data collection etc, must be referred to TREC as failure to do so, may result in a report of academic and/or research misconduct.

If you have any further questions or require any clarification do not hesitate to contact me.

I am copying this communication to your supervisor.

May I take this opportunity of wishing you every success with your research.

Yours sincerely,

Best regards,



Paru Jeram

Secretary to the Trust Research Degrees Subcommittee

T: 020 938 2699

E: academicquality@tavi-Port.nhs.uk

cc. Course Lead, Administrator