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# AS A SUPERVISION STRATEGY INTERPERSONAL PROCESS RECALL: BASIS AND APPLICATION

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#### Abstract

The main purpose of the study is to focus some approaches that are used in counselling sessions from the perspective of Interpersonal Process Recall (IPR). This study includes three parts. In this context, first one is related to the critical literature review for a personal model of counselling, second part is about critical commentaries on Interpersonal Process Recall exercise and the last part is an integration of first and second parts'. That part includes implications for IPR practice and conclusion. Further, following review of the literature firstly presents general definitions about approaches and basically, the effects of approaches used in counselling sessions. Literature review part does not include all information about the approaches that was used in supervisee's counselling sessions. The present research is a study about supervisee's towards finding a therapeutic model that best suits her and also includes some parts from her own life history. In the final part, a conclusion takes place in which the results of the study were discussed and some constructive suggestions were made in the light of literature and IPR process. Also, the issues that are seen crucial related to supervisee's experience and literature review was discussed using critical subjectivity.

Keywords: Interpersonal Process Recall, Counselling, Supervision.

#### 1. Introduction

Each individual has their personal power need to be explored and counsellors are only a guest within the client's world of experience (Mearns, 2003). Interpersonal Process Recall (IPR) is a supervision process in which video or audio recordings are evaluated so that counsellors can return to the session moment after the session and speak what they feel, think and experience at that moment (Kettley, 2013). IPR is a type of discovery learning in supervision. It offers the opportunity to think more comprehensively than should be done during the session. This is because (Kettley, Kettley & Bates, 2015):

- We think and feel faster than can be put into words.
- We don't have time to say all we think.

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- There may be something we wouldn't prefer to say.
- We may not be able to identify the appropriate expressions for the thoughts that cross our minds.
- We may not be paying enough attention to the client.

In short, IPR is a process that invites the supervisees to discover themselves and then facilitates the appropriate response quickly. In this part of the study, it is planned to discuss some counselling approaches that supervisees might prefer to use in therapeutic process.

## 1.1. Person-Centred Approach

All person-centred working intends to help clients at least with an indirect method. This method leads the clients to discover themselves introspectively and to achieve dominance over their actions so that they could evaluate their past, present and make better decisions for the future. Moreover, such skills will keep having their efficiency in the lives of the clients (Mearns, 2003). Rogers (1959) stated that 'There is no such thing as Scientific Knowledge; there are only individual perceptions of what appears to each person to be such knowledge'. Since the outcomes of counselling are rewarding, participants could reap the fruits of victory however, it cannot be applied for everyone (Lipinska, 2009). As Mearns and Thorne (2000) put forward, 'be with the client in her experiencing', not outside of it. A necessity in this approach is 'working at relational depth' (Lipinska, 2009). Approaching the client with a person-centred focus and in an integrative way would enable and lead him/her not to ignore any details but to accept and embrace his/her past, present and future (Lipinska, 2009). Also, the role of therapist is not to perfect techniques but to give attention to how the attitudes are expressed in a specific relationship (Thorne, 2003).

Thorne and Mearns's ideas about three particular areas in counselling experience are: working at relational depth, configurations of self and working in 'not-for-growth'. Also, conditions, which are required to work at relational depth, are:

• Increasing communication with remarkable levels of therapeutic conditions

- The 'stillness' and 'fearlessness' of the therapist
- Giving attention to the 'expressing' instead of the expression
- Joining the experience of the client (Mearns & Thorne, 2000).

Rogers (1957) stated six necessary and sufficient conditions required for therapeutic change:

- "1. Two persons are in psychological contact.
- 2. The first, whom we shall term the client, is in a state of incongruence, being vulnerable or anxious.
- 3. The second person, whom we shall term the therapist, is congruent or integrated in the relationship.

4. The therapist experiences unconditional positive regard for the client.

5. The therapist experiences an empathic understanding of the client's internal frame of reference and endeavours to communicate this experience to the client.

6. The communication to the client of the therapist's empathic understanding and unconditional positive regard is to a minimal degree achieved."

## 1.1.1. Unconditional Positive Regard - Acceptance

Unconditional positive regard is a kind of acknowledgement in which the clients are being evaluated holistically (Mearns, 2003). Dryden and Mytton (1999) states that unconditional positive regard is a non-judgemental method enabling clients with the appreciation they might need. In person centred approach, the counsellor provides unconditional respect, acceptance and caring for the every characteristic of the clients' personalities. Rogers believed that the positive regard is needed universally, and was especially needed by the clients in therapy because, these people were the ones who lacked the joy of acceptance most. For this reason, unconditional positive regard is a crucial step towards the self-acceptance of the client. Rogers defines this step as a process of showing affection to the client without any irritating behaviours directed to their mind and body (Thorne, 2003). Lipinska (2009) also suggests that the easing relationship between the client and the therapist could enable the clients to embrace their inner self as well as empowering their personality.



## 1.1.2. Non-directivity

Non-directivity refers to a situation where the psychologist, with a caring and respectful approach, aims to help the client by leading him/her to make his/her own choices according to his/her needs in life (Gillon, 2007). The role of therapists is not making interpretations or giving advices for the clients but helping them to reveal their problems and providing suitable conditions by the help of 'acceptance' and 'understanding' for the client's growth (Dryden & Mytton, 1999).

## 1.1.3. Empathy - Tending

One of the major factors in a successful therapy is empathy (Gillon, 2007). Empathy is required for therapists in order to observe every detail of changes in their clients. Such an observation is necessary because, the therapist is supposed to seek out if the client is making positive development. Accordingly, therapists should be willing to enter the minds of their clients and get familiar with their ideas without hesitations (Thorne, 2003). To state this in a different manner, empathy is a process of becoming intimate with a client's inner world, and the best way to achieve this is through listening to every type of verbal and non-verbal communication carefully (Gillon, 2007).

Empathy is a process of flowing in one's ideas and being adapted simultaneously to every change s/he is experiencing. Empathy also means becoming a part of someone else's world and avoiding passing judgements, it also means becoming aware of the hidden items in one's thoughts only to reveal them when the person is ready to digest the facts. It provides an opportunity to see someone's inner world with a new subjective perception. It is important ensure that the client is not misguided guided, hence, insights about the empathised person should be double checked before the manifestation (Rogers, 1980). Dryden and Mytton (1999) stated that providing a caring support and having a complete grasp of the client's emotions are the objectives of a therapist.

### 1.1.4. Personal Growth

Person-centred counsellors are the experts in detecting even the minor changes of personal growth. Moreover, at the moment they realize such changes, they help their clients to increase this growth to its maximum. Growth process requires a holistic understanding of the client's world, and the key element of the person centred approach is to let and to encourage the client to take the responsibility of finding solutions (Mearns, 2003). Along the term 'organismic valuing' Rogers (1959) introduced another notion, which he called as the self or self-concept. He described this term as a construct, which aims to present how the perceptions of one shape his/her awareness.

## 1.1.5. Actualising Tendency

Dryden and Mytton (1999) suggest that the actualising tendency is universal for all organisms since it 'maintains and enhances' them. Rogers (1961) also states that it is the nature of human beings to be willing to improve themselves. Rogers (1961) defines actualising tendency as an impulse leading one to discover the limits of the self by developing him/herself in every possible aspect. Rogers believed that people always have the potential to develop and move forward, and this situation has been called self-actualization tendency. According to Rogers, development is not limited to the childhood years, the individual strives to realize herself throughout her life (Feist & Feist, 2008). Although the self-actualization tendency emphasizes the satisfaction and pleasure that develops the individual, it also includes being in balance by meeting the needs and trying to protect the self-concept (Cervone & Pervin, 2008).

### 1.1.6. The Therapeutic Process

Person-centred approach is not restricted by any kind of evaluation methods. The only necessary diagnosis about the clients is their incapacity of actualising tendency. According to Rogers, prescribed assessment fails to realize the experiencing the clients are going through. As soon as the counsellor and the client start therapy, the client should be allowed to choose the content of their sessions (Dryden & Mytton, 1999). It is easy to assume that not every client would aim to achieve similar goals. For this reason, they must be allowed to shape the future they want to live in. It should also be realised that this future world of the client would keep changing its shape as the therapy continues. The main reason of such changes sources



from the positive development of the client through therapy and the realization it brings which is the impotence of the initial goals. This change itself could be regarded as a sign of improvement because; the improving ideal worldviews of the client will be accompanied by other positive changes in the self (Thorne, 2003).

A holistic approach toward the personality of a client might sometimes be challenging because, there could be different aspects of a specific personality. In such cases, person-centred counsellor should be aware that s/he is responsible for creating therapeutic conditions for the each aspect of the client's personality (Mearns, 2003).

# 1.2. Gestalt Approach

Explaining what gestalt therapy with few words is exactly difficult because of its comprehensiveness and complexity. Hence, I will only try to give main points of it. Gestalt therapy functions as an empirical method; its focus is the idea that the clients are able to achieve their goals by the help of communication and creative experimentation, which would eventually lead to an elevated awareness (Mann, 2010). Yontef (1999) forms three main arguments, which have been accepted as the 'pillars of gestalt':

"1. Field Theory: The person's experience is explored in the context of their situation or field.

**2. Phenomenology:** The search for understanding through what is obvious and/or revealed, rather than through what is interpreted by the observer.

**3. Dialogue:** A specific form of contacting (not just talking) that is concerned with the between of the relationship and what emerges in that between" (Mann, 2010).

Mann (2010) states that: "We are exploring how a person reaches out to their world, how they respond to their situation and how past and present situations impact upon their (and our) process of reaching out in the here and now". In other words, in this approach the key elements are the creation of the conditions, which are mentioned above.

# 1.2.1. The Here and Now

'Here' describes the present location and 'now' describes the present moment we are in. In order for the individuals to gain awareness, the importance of 'here and now' is crucial (Sills, Fish & Lapworth, 2000). Gestalt theory focuses on the present reactions and thoughts of the clients. Nevertheless, gestalt theory does not repudiate that it is the past experiences which are shaping the present ones, or there are expectations regarding the future. The reason gestalt focuses on present is because every idea belonging to past or future is experienced at the present and for this reason, therapist asks the questions of 'what' or 'how' instead of 'why'. Trying to understand the underlying reasons of a situation may easily lead to a search for a needle in a haystack (past and future) (Mann, 2010). Gestalt therapy asks questions such as: What is happening in the moment? What do you experience while you sit? What do you realize in the present? How do you experience your fear? (Corey, 1991).

## 1.2.2. Anxiety

Perls (1969) describes anxiety as a gap between now and after. According to Pearls, when the individual become distant from the present and get occupied in the future, she/he experiences anxiety. In other words, according to the Gestalt approach, it is argued that people try to fill the gap between the here and now by making plans and developing expectations, and they experience anxiety because they do not live today. The most effective factor in reducing anxiety is seen as being able to live here and now. The approach to treatment is rehabilitative and not psychodynamic (Brownell, 2010).

## 1.2.3. The Awareness Continuum - Responsibility - Choice - Risking

According to Gestalt therapy people keep hold of the power to change their will. For this reason, individuals are responsible for their actions and for their choices. Being aware is to be responsible. The choices that are made in life are also in their responsibility. Taking responsibilities, making choices and taking responsibilities according to one's own choices are taught in Gestalt therapy. There is a concept,



which is inseparable from taking responsibilities and making choices; this concept is risk taking. To live is a risk itself, making choices is also a risk (Beck, 1961; Oldham, Key & Starak, 1988).

## 1.2.4. Techniques

One technique used in Gestalt is phenomenological method. This method requires a more intimate relation between the therapist and the group or client; therapist should be wide open for any effect that clients may reflect, so that s/he can interpret the situation benefiting from these reflections' knowledge.

Another technique, which is commonly used, is experimentation. This term however does not refer to a specific method since the practice is defined by the inventions of clients and therapists. The method is used for a variety of situations such as giving up old habits, learning better attitudes, acquiring a noncontradictory inner world, etc. (Houston, 2003). Houston suggests that despite there is a variety of methods in Gestalt theory, they have a common ground, and the main reasons for this are:

1. Respecting and raising awareness of the process of gestalt formation itself. This assumes that the individual is indivisible from the context;

2. Assuming a tendency towards autonomy and growth, via a process of gestalt formation and the learning or assimilation intrinsic to it;

3. Looking for the subjective truth of what is going on in the moment for all parties;

4. Relating that truth to the context or background that has led to the present perceptions;

5. Emphasising the autonomy or self-responsibility of the client;

6. Keeping in awareness and commenting on what is often and clumsily called inter subjectivity, the effect of each on the other (Houston, 2003).

Frank (2003) stated that without evaluating human in their habitat, it is not possible to seize their nature.

## 1.3. Solution Focused Brief Approach

It is a fact that communication, both verbally and nonverbally, is a remarkable tool for information exchange. Therefore, conversations are the essence of counselling; it is possible for all participants to be empowered in the mutual transmission of meaning (Bertolino, Kiener & Patterson, 2009). Solution-focused therapy benefits from language and it focuses on methods regarding how the problems could be solved. In this therapy, underlying the reasons of a problem remains in the background (Berg & Miller, 1992). Solution-focused approach aims to solve matters in a directly manner. It is important how fast the therapy bears fruit and how satisfied the clients are. This approach is usually in a struggle for replacing certain behaviours with others (Milner & O'Byrne, 2002).

Nonetheless, traditional psychotherapy and solution focused brief therapy have several differences in terms of application. It is assumed that the clients are capable of making changes in their nature toward an intended direction. In a solution-focused interview, problems and goals are clarified in the first stage. Following this, clients are asked to focus on solutions. In the problem solving process, there are a number of key elements such as precession changes, problem scaling or 'miracle questions' which would help the clients to proceed efficiently. Apart from these, special tasks and feedbacks, which are given by the therapist, also play an important role in terms of encouraging the clients to make further improvements after the sessions (Macdonald, 2007).

Steve de Shazer (1985), puts forward that psychotherapy's ultimate goal is to help the client and create a change for the better. He further suggests that, after his studies in Mental Research Institute he has come to a realization pointing out that any change is tend to be beneficial. What is unquestionable about the change is that the individuals change themselves. In this method, the beginning of treatment is not bound to any detailed history and can be started immediately.

Macdonald (2007) suggests that showing the progress with a timeline could function as a helpful sequence. This could be achieved by discussing about specific problems and reviewing the progress made at the previous therapies. Then the discussion can be shifted to 'here and now' and new goals and their obstacles can be identified. Progress can also be followed by problem scaling after each session and further steps can be discussed.



It is assumed that the clients are capable of making changes in their nature toward an intended direction. Therapists use their potential to promote descriptions gradually in a positive, encouraging manner for the clients. Listening to these descriptions, clients may have a better chance to find themselves in a position where they start producing solutions instead of ignoring problems. Another important detail in such processes is the attitude of the therapist; s/he should be respectful, non-judgemental, cooperative and caring on the purpose of the maximisation of self-promotion of the client (Macdonald, 2007).

Despite the fact that solution-focused brief therapy does not require a history, there are cases where the stories, which have not been told before, may need to be listened before any further progress. This might be necessary in terms of safety assessment since the new information might be a threat for the client or others. Certain matters are put aside; conversations about the problems or the speculations considering the purposes of the symptoms (Macdonald, 2007).

Steve de Shazer (1994) made successful use of 'language matching' with his clients. His experiments to support the clients' words, phrases, sentences or questions by using repetitions gave significantly positive results indicating that such repetitions strengthen the bonds between the therapist and the clients in a short period of time. By means of this technique, it is possible to convey a message to the clients that their every word is being listened very carefully and the therapist is staying connected to their inner world with loyalty. In cases where the client's response is monosyllabic or 'don't know', the therapist can use another repetition from the previous sentences. One of the key elements of success in this method is the therapist's ability of asking right questions while using the specific words that are previously used by the client. Seligman (2002) has suggested that it is possible to trigger and sustain cogent personal and emotional functions simply by the use of words and resources which has positive cohesions in the client's mind; she called this method Positive Psychology. Seligman (2002) has developed Positive Psychology, whose whole premise is that using positive words and resources leads to more effective personal and emotional functioning.

## 1.4. Multimodal Approach

Dryden and Mytton (1999) compare a carpenter and a therapist in order to present the similarities of both practices when the multimodal approach is in question. A carpenter's job depends upon the tools s/he bears, and s/he would need a different tool for each different task s/he encounters. Just like a carpenter, a therapist needs to approach every individual as a unique task that requires more than a single method handle the problems. And of course the therapist is responsible for his/her tools; s/he should know how, when and for whom to use them. In other words, a multimodal counsellor needs to be familiar with the treatment techniques and how to apply them. Lazarus (1997) points out that there are risks a multimodal counsellor should be aware of; therapist should have enough data to ensure that the selected technique is effective for the aforementioned client, and it is also important for therapists to realize the risks of using a particular technique they have no experience with.

## 2. An Example of Interpersonal Process Recall (IPR) Experience

Through this part I deal with an Interpersonal Process Recall (IPR) experience of my supervisee in relation to a client. All information collected in this study has been kept completely confidential. Before transcription of video records, firstly, permission of the client has been obtained. Furthermore, the permission of both the client and the supervisee has been obtained so that the information about the therapy session can be used in a scientific study.

In Kagan's work (1980), it is seen that IPR clustered around themes such as self-exploration, the other's ideas, own behaviour, values and assumptions, hopes and intentions. Some examples of questioning in supervision include:

- What were you thinking?
- What were you feeling?
- What pictures, memories or words were going through your mind?
- Was there anything you wanted to say but couldn't find the 'appropriate' words for?
- Were you aware of any risks? Did you imagine the outcomes of anything you considered doing?



- Do you recall how your body felt? Can you recall any specific parts of your body reacting more than the other parts?
- Were you aware of any changes in your body at that time?
- Were there any physical sensations then? Where did you notice them most? When?
- If that physical sensation had a voice of its own, what would it have said?

## 2.1. Client-Counsellor Relationship

Studies which are done to demonstrate the effectiveness of psychotherapy state that there is no superiority of any approaches over the others (Lambert & Cattani-Thompson, 1996; Smith & Glass, 1977). Before starting the sessions, organizing the physical environment properly is one of the essential parts of the counselling process. For instance; being careful about the clothes worn in sessions (duly dressing), paying attention to the physical distance, creating a quiet environment, staying away from the distractions (Sommers-Flanagan & Sommers-Flanagan, 2002).

The basis of counselling is the relationship between counsellor and client. To develop working alliance, first step is relating with clients (Jennings & Skovholt, 1999; Samstag et.al, 1998). Hence, counselling process of my supervisee's with client started with question asked to learn general feelings of her when she came to the session. She states that "Firstly, I tried to relieve the clients and then continue the process within more comfortable way. After the client talked about her feelings, she started to talk about a picture which she saw on Facebook. The picture was related to one of her friend and a visited place. She stated that she was attracted by that picture and wanted to visit that place. After that desire, she said that she started to plan a trip immediately to that place. It is seen that one part of her is ready for that trip. After her that sharing, I started to listen her more carefully to accompany her in her journey". Nonetheless, Macdonald (2007) emphasizes the importance of asking clients to note what changes they make prior to the first session. "To do so implies that change is inevitable and that clients will themselves be active in promoting changes."

## 2.2. Active Listening - Acceptance - Empathy- Reflection

Egan (2009) claims that counsellors should speak less than their clients. They also should communicate as little as possible by establishing sentences except summarising. Besides that, "promote minimal" is a technique to show clients that they are listened by counsellor and not being precluded. Examples thereof are "uh-huh" and "nodding". In the interpersonal process recall experience, my supervisee was extremely careful to show her client that she focused to listen to her that she was showing her attention to her client as a way of non-verbal communication. On the other hand, when I watched all video record, it is seen that the rate of non-verbal communication ways is too much instead of giving appropriate respond to the client.

## 2.3. "Reflection of Feeling" - "Restatement of Content"

Counsellor arranges the client's progress rate considering the content that the client has expressed. "Reflection of feeling" and "restatement of content" are two ways of accomplishing that. "Reflection of feeling" means that understanding the feelings of the client and with this reflecting them to the client. "Restatement of content" is that realizing the client's thoughts and restating this content again to the client (Egan, 2009). Meier & Davis (2011) presented that restatement of content sentences should not include directive statements. Counsellors work on intangible things such as feelings and thought in counselling sessions. Hence experienced counsellors help their clients to embody their feelings and thoughts. My supervisee noticed that she had some struggles to success this. Although she had an effort to do active listening and give reflections for feelings of client and restatement of content, she had some moments that I could not do it appropriately. Additionally, she had some unnecessary and unwarranted responses. Although she told that she did not want to grasp the chance to see Northern Lights before go to Hong Kong, her response was "Hum, next year you will not be here". This respond does not have any meaning for client and contribute to her. Client stated that if she misses the opportunity to go to Northern Lights when she was in the UK, she had to fly again thirteen hours from Hong Kong. Although she did not say anything about money supervisee replied her "Oh, you have to pay more money". Maybe she has not thought financial issues. Also, while she was talking about her decision about travelling alone, supervisee commented it as



being excited to travel. She was telling that after she arrived to Sweden, she had to use train to go to the Northern Lights. In that moment, it could be better to do restatement of content but supervisee emphasized her being alone in the train. While the main problem of her was worries about being alone throughout her trip to Sweden, it is not appropriate to remind her loneliness unless she mention. It could be better to reply her doing feeling reflection instead of using non-verbal communication. Also supervisee noticed that she missed some outstanding moments to do "restatement of content" and then she could encourage her to talk about her worries for being safe. Additionally, there are also some moments where it was necessary to do reflection of feelings. Supervisee also caught some of her own directive statements like "Have you ever checked the forms". This statement is not only directive, also includes questioning and maybe advice. That can be disturbing for the client. Nonetheless, Egan (2009) states that inexperienced counsellors ask questions to get more information and give advice. It's certainly allowed to ask questions to get some specific information and to investigate minutely, yet clients might perceive the consecutive questions as threatening, Questions yield to completely control of counsellor the counselling process and it may direct clients improperly.

Egan (2009) also emphasize the importance of being silent when counsellors are not sure what to say and suggests saying nothing in those moments. Also Egan states that inexpert counsellors usually do not like silence in counselling process and try to fill in the gaps among clients' statements. Experienced counsellors are like best referees perform their duties while remaining in the background at sporting matches. When referees and counsellors make a mistake, they come to others' attention much more. When I observed my supervisee's experience on video record, I see that she tries to speak much more nearly after the half of session. She explains this as: "I remember those moments and honestly I can explain that I was struggling with my feelings. Because, after I realized that I am not responding my client appropriately, I was in a need to say something to my client".

Self-discovery provides information what needs to be done for growth and that can be therapeutic for client (Crits-Christoph, 1992). Many therapeutic approaches claim that the greatest responsibility related to growth that belongs to clients. Clients generally know how to reach desired goals and outcomes but they do not trust their individual capacity to move properly. Counsellors are responsible for helping clients to identify entirely their problems rather than solving them early in the process of counselling. For instance, it can be investigated which solutions were tried previously by client (Crits-Christoph, 1992; Posadzki et al., 2010). There are also some studies states that one of the most effective ways to help clients is focusing on their strengths. Even though relatively small, it is paid attention to each strong part of clients' (Wood et al., 2011; Reinoso & Forns, 2010). Supervisee tried to find past experiences related to travelling alone to a place before. She stated that she did not experienced similar one before. If she has experienced before, she would try to focus on how she managed it when she was alone. Then supervisee decided to talk on how much she wants that trip and compare her wish with her worries. Because her attitudes for that trip were key issues for her: She wants to go there too much and hence bought tickets immediately. Also she started to check some possibilities to feel safe when she is alone. Nevertheless, she has a part, which is worried about being alone during the trip to Sweden. When supervisee observed all these, she found it useful to focus on her excitement and encourage her to find some allaying solutions to decrease her worries.

Egan (2009) states that when clients use words not easily identifiable such as "bad", "good" or "sad", ask them for a detailed description of these words. When the client talked about her "worries", asking her the meaning of that word for her could be better to embody the word semantically for the client. Furthermore, using "metaphor" may have an outstanding effect on client. Especially when we wanted to embody the some of the meanings of clients' words, we can do this with using metaphors. Metaphor means that expressing an idea with another ways (Edwards, 2004).

Macdonald (2007) defines that "the issues are defined using questions about scales from 0-10. The 'miracle question' encourages creative thinking and explores possible futures as a means towards developing plans." This application would be able to useful to talk about the "worries" of my client. Also that could be an outstanding step for next sessions to see the change.

"Rogers was so confident of the potency of the core conditions that he often spoke in 'if ... then' terms. If the conditions exist, then the process follows" (Thorne, 2003). Dryden and Mytton (1999) claim that this technique helps clients learn to relax. Besides that then asking clients to imagine the situations or issues they are worried, gradually increasing the intensity of the exposure. While supervisee was responding her



client, the question in her mind was "What am I doing! Oh, terrible!" While her aim was so different, she could not use language well and instead of relaxing the client she felt that she created confusion in her mind.

## 2.4. Towards to the End of the Practice

Additionally, Bertolino et al. (2009) states that summarizing the counselling process is a crucial part to connect among related issues. This also shows clients that they were listened carefully. While supervisee was ending the session, it was one of her deficits. She was also checking time and when it the time is ripe to finish, she told this the client directly, not to do any summary. Normally, while she does not like mention something about telling to the clients her best wishes for her, she has done it at the end of the session. ("I hope that you will enjoy your trip"). Because when she had similar sharing, it does not seem to me realistic.

### 3. Conclusion: Reflections and Implications of the IPR Practice

"After learning the method, practitioners develop their own pattern for using the method and their own modifications and additions. However, like learning to play a musical instrument, it is necessary to start with basic skills before beginning to improvise" (Macdonald, 2007). For this Interpersonal Process Recall exercise, I seem that my supervisee is confused about how should she manage the process. Also, during the session there were some moments she felt herself nonplussed. She does not know the reasons of her struggle but she remembers that she was confused to choose the appropriate responds for the client. She has told that she usually prefers using person-centred approach, gestalt approach and solution focused brief approach. However person-centred and gestalt approaches have differences, it is possible to use both of them in counselling sessions. Both approaches believe that the main aim of individuals is actualizing themselves as they are. Therapists accompany their clients throughout their own inner process to explore their power (Perls, 1969; Rogers, 1959). After the supervisee started her sessions using person centred approach, she continues the process with Gestalt or solution focused approach or both of them as depends on the need of clients, also process flow.

On the other hand, for Rogers, 'expressive-responsive' dialogue has two main aims. First one is therapist can see that he understand the clients' perceptions, attitudes, feelings...etc. This is an important part of session, which helps prevent misunderstandings. Second one is clients can be encouraged to attend more closely to how they feel. That is also useful to increase self-understanding and self-acceptance. Also Rogers suggests no further techniques, specific directions or interpretations for therapy (Rogers, 1942).

When the supervisee assessed her skills to use them in her interpersonal process recall experience, she cannot say that she is successful. Firstly, she states her main problem as trying to listen to my client intently, she was also endeavouring to make sentences in my mind. Especially, choosing the most appropriate response was compeller. Milner & O'Byrne (2002) claims that "if you are getting stuck in your work with clients, don't search for a reason in the client such as 'resistance' ask what you would be doing instead if you were being more helpful." She always tries to keep this opinion in her mind and turn the struggles to as a benefit for future practice.

Although therapy process has some basic common factors like having a psychological problem or a need for growth (Lampropoulos, 2001), she always believes that each person has different personality, different characteristic features and also different needs. She was curious if it is possible to find a way to alter the 'balance of power' in the client's personality. On the other hand, her aim was to purify her by separating negatives from the positive side. As Cooper's (2004) stated that with research results, she always tries to consider that issue: "the empirical evidence seems to indicate that an emphatic, warm, collaborative and engaging therapeutic relationship contributes to positive therapeutic outcomes in the majority of clients, although different clients seem to have different relational needs." Instead of using some specific approaches, she prefers starting with person-centred approach and then let the process flow. Also, I shape the process considering the clients' needs. For this counselling experience, I felt like I was losing myself within the process and she could not show her counselling skills enough. Its reflections are seen in her responses. She states that she could do "restatement of content", but she usually prefers to say only "Uhhuh" and similar reactions as a response to the client. Furthermore, as it was mentioned above in part B, when the client talked about her "worries", asking her the meaning of that word for her could be better to embody the word semantically for the client. In relation to this Sharry and Owens (2000) also say that "working within clients' own descriptions can be more motivational and provides a better long-term fit for



any solution generated." It should not to be forgotten that there are many methods to be used in IPR, such as grounded theory (Angus et al., 2014).

#### 4. Limitations and Recommendations

Although there are many approaches in therapy, in this study, content was created over the approaches used in the sessions. This is an important limitation of this study. Therefore, it is necessary to conduct research with different approaches in order to contribute to supervision studies and to expand the vision.

#### REFERENCES

Angus, L., Watson, J. C., Elliott, R., Schneider, K. & Timulak, L. (2014). Humanistic psychotherapy research 1990–2015: From methodological innovation to evidence-supported treatment outcomes and beyond. *Psychotherapy Research*, 25 (3), 1-18.

Beck, R. (1961). Perspectives in philosophy. New York: Halt, Rinehalt and Winston.

Berg, I. K., & Miller, S. (1992). Working with the problem drinker. New York: W. W. Norton & Company, Inc.

Bertolino, B., Kiener, M. S. & Patterson, R. (2009). *The therapist's notebook on strengths and solution-based therapies: Homework, hand-outs and activities.* New York: Routledge/Taylor&Francis.

Brownell, P. (2010). Gestalt therapy: A guide to contemporary practice. New York: Springer.

Cervone, D., & Pervin, L., A. (2008). Personality: theory and research. Danvers, MA, United States: John Wiley & Sons, Inc.

Cooper, M. (2004). Towards a relationally-oriented approach to therapy: Empirical support and analysis. *British Journal of Guidance & Counselling*, 32(4).

Corey, R. (1991). *Theory and practice of counselling and psychotherapy*. Monterey: Brooks/Cole Publishing.

Crits-Christoph, P. (1992). The efficacy of brief dynamic psychotherapy: A meta-analysis. *American Journal of Psychiatry*, 149, 151-158.

de Shazer, S. (1985) Keys to solutions in brief therapy. New York: Norton.

de Shazer, S. (1994) Words were originally magic. New York: Norton.

Dryden, W. & Mytton, J. (1999). Four approaches to counselling and psychotherapy. New York: Routledge.

Edwards, D. (2004). Art therapy. London: Sage

Egan, G. (2009). The skilled helper: A problem-management approach to helping. Thompson Brooks/Cole.

Feist, J., & Feist, G., J. (2009). Theories of personality. United States of America: McGraw-Hill.

Frank, R. (2003). Embodying creativity: The Therapy process and its developmental foundation. *British Gestalt Journal*, 12(1), 22-30.

Freud, S. (1895) Project for a scientific psychology. London: Hogarth 1966.

Gillon, E. (2007). Person-centred counselling psychology: An introduction. London: Sage Publications.

Houston, G. (2003). Brief gestalt therapy. Sage Publications, London.

Jennings, L. & Skovholt, T. M. (1999). The cognitive, emotional, and relational characteristics of master therapists. *Journal* of *Counseling Psychology*, 46, 3-11.

Kagan, N. (1980). Interpersonal process recall: A method for influencing human interaction. Mason Media, Houston, TX.

Kettley, R. (2013). What is the Person-Centred trainee therapist's awareness of their own body language and its possible impact on the therapeutic relationship? MSc dissertation. Sherwood Psychotherapy Training Institute, Nottingham.

Kettley, S., Kettley, S. & Bates, M. I. (2015). *An introduction to IPR as a participatory design research method*. The 2015 ACM International Joint Conference on Pervasive and Ubiquitous Computing (UbiComp 2015), Sep. 7-11, Osaka, Japan.

Lambert, M., & Cattani-Thompson, K. (1996). Current findings regarding the effectiveness of counseling: Implications for practice. *Journal of Counseling & Development*, 74, 601–608.

Lampropoulos, G. K. (2001). Common process of change in psychotherapy and seven other social interactions. *British Journal of Guidance & Counselling*, Vol. 29, No. 1.

Lazarus, A.A. (1997) Brief but comprehensive psychotherapy: The multimodal way. New York: Springer.

Lipinska, D. (2009). Person-centred counselling for people with dementia: Making sense of self. London; Philadelphia: Jessica Kingsley Publishers.

Macdonald, A. J. (2007). Solution-focused therapy: Theory, research & practice. London: Sage publications.

Mann, D. (2010). Gestalt therapy: 100 key points and techniques. New York: Routledge.

Mearns, D. & Thorne, B. (2000). *Person centred therapy today: New frontiers in theory and practice*. London: Sage Publications. Mearns, D. (2003). *Developing person-centred counselling*. London: Sage Publications.

Meier, S. T. & Davis, S. R. (2011). The elements of counselling. Belmont, CA: Brooks/Cole.

Milner, J. & O'Byrne. P. (2002) Assessment in social work. Basingstoke: Palgrave Macmillan.

Oldham, J., Key, T. & Starak, Y. (1988). Risking being alive. Victoria: Pit Publishing.

Perls, F. (1969). *Gestalt therapy verbatim*. Moab. UT: Real People Press.

Posadzki, P, Stöckl, A. & Mucha, D. (2010). Qi Gong Exercises and Feldenkrais method from the perspective of gestalt concept and humanistic psychology. *Journal of Bodywork & Movement Therapies*, 14, 227-233.

Reinoso, M. & Forns, M. (2010). Stress, coping and personal strengths and difficulties in internationally adopted children in Spain. *Children and Youth Services Review*, 32, 1807–1813.



Rogers, C. R. (1942). Counselling and psychotherapy: Newer concepts in practice. Boston: Houghton Mifflin.

Rogers, C. R. (1957). The necessary and sufficient conditions of therapeutic personality change. *Journal of Consulting Psychology*, 21, 95–103.

Rogers, C. R. (1959). A theory of therapy, personality and interpersonal relationships as developed in the client-centered framework. In S. Koch (ed.), *Psychology: A study of science, Vol. III. Formulations of the Person and the Social Context.* New York: McGraw-Hill. pp. 184–256.

Rogers, C. R. (1961). On becoming a person: A therapist's view of psychotherapy. London: Constable.

Rogers, C.R. (1980) A way of being. Boston: Houghton Mifflin.

Samstag, L.W., Batchelder, S.T., Muran, J.C., Safran, J.D. & Winston, A. (1998). Early identification of treatment failures in short-term psychotherapy: An assessment of self-reported therapeutic alliance and interpersonal behavior. *Journal of Psychotherapy Research and Practice*, 7, 126-143.

Seligman, M.E.P. (2002). *Authentic happiness*. New York: The Free Press/Simon and Shuster. www.authentichappiness.com.

Sharry, J. & Owens, C. (2000). The rules of engagement: A case study of a group with 'angry' adolescents. *Clinical Child Psychology and Psychiatry*, 5(1): 53-62.

Sills, C., Fish, S. & Lapworth P. (2000). Gestalt counseling. Oxon: Winslow Press.

Smith, M. L., & Glass, G. V. (1977). Meta-analysis of psychotherapy outcome studies. *American Psychologist*, 32,752-760. Sommers-Flanagan, J., & Soomers-Flanagan, R. (2002). *Clinical interviewing*. New York: Wiley.

Thorne, B. (2003). *Key figures in counselling and psychotherapy series*. London: SAGE Publications Ltd.

Wood, A. M., Linley, P. A., Maltby, J., Kashdan, T. B. & Hurling, R. (2011). Using personal and psychological strengths leads to increases in well-being over time: A longitudinal study and the development of the strengths use questionnaire. *Personality and Individual Differences*, 50, 15–19.

Yontef, G. (1999). Awareness, dialogue and process: Preface to the 1998 German Edition. *The Gestalt Journal*, XXII (1): 9–20.