Protocol: A Qualitative Linguistic Framework for Analysing Empathic and Empowering Communications in Classical Person-Centered Therapeutic Interactions

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Empathy and empowerment are crucial person-centered therapeutic processes which are interrelated and co-constructed in discourse by therapist-client dyads. Recently, research recommendations have been made for linguistic analyses of therapeutic processes. The interrelatedness of processes has often been overlooked when these recommendations have been progressed. Research so far has also tended to favour therapist discourse instead of focusing on the co-construction of processes.

The publication of protocols enables researchers and therapists to access information about emerging research. Protocol publication can reduce dissemination bias and promotes credibility and trustworthiness of qualitative methodologies. The proposed development and application of a linguistic framework for analysing empathic and empowering communications by therapist-client dyads in person-centered therapy is described in this protocol. The present status of the study is given, including why and how hybrid linguistic features identified in discourse analysis, pragmatics and conversation analytic approaches are included. Information about the therapeutic transcripts used as data for framework development is also given for illustrative purposes.

The anticipated theoretical and methodological contributions of this research are summarised. Suggested applications of the research outcomes for practice are also described, including their usefulness for trainee person-centered therapists, or for person-centered therapists or researchers who are interested in linguistic methodologies.

Keywords– linguistic framework, qualitative methods, empathy, empowerment

Purpose of Protocol Paper

Protocol publication for clinical research, especially clinical trials, has been promoted since the late 1990s and mandated for clinical trials since 2004 as a way of reducing publication bias and selective presentation of findings (Viergever and Li, 2015). This has extended to trials of psychodynamic and related therapies (Mechler et al., 2020). Protocol papers are published while the study is in progress, before findings are known. The publication of qualitative protocol papers is becoming increasingly commonplace (Haven and Van Grootel, 2019), including papers in psychotherapy such as Montero-Marin et al. (2013), Schofield and Grant (2013) and Brown et al. (2020). Qualitative protocol papers support research to take place as efficiently as possible by offering earlier dialogue with the broader research community. This allows qualitative research to develop in a timely manner and offers transparency and accountability.

By describing work in progress, protocol papers can be used to overcome criticisms about credibility in qualitative research. For example, protocol papers can provide a rebuttal to concerns about publication bias in qualitative research by allowing emerging research to be accessible prior to its publication on completion (Haven and Van Grootel, 2019). Haven and Van Grootel outline how the rigour of qualitative research has been questioned owing to the relative subjectivity of qualitative work. Qualitative protocol papers therefore allow for checking research subjectivity at an early stage, for example, of whether the research design is loyal to the underlying philosophy and research 'blueprint'. In turn, such checking enables transparency concerning flexibility in qualitative research by demonstrating how the research has evolved, and so enhances research rigour.

This paper presents the protocol for a study about the communication of empathy and empowerment between therapists and clients in the context of person-centered therapy. The overall study aim is to discover the communicative parameters through which empathy, empowerment, and their interrelationship, are conveyed during person-centered therapy. It aims to adhere to the benefits of publishing qualitative protocols described above by, describing the background and purpose of the study, including the value the research project adds; orienting the reader to the aims and research questions of the study and how the design has been orchestrated; outlining the methodology, including further information about qualitative issues of subjectivity and the present status of the project; and concluding by summarising the intended contribution of the research and outlining the planned next steps.

Linguistic Analysis of Empathy and Empowerment in Person-Centered Therapy: What is Already Known

The importance of the presence, and communication, of empathy in the person-centered therapeutic relationship has been emphasised since the inception of person-centered therapy (Rogers, 1951). Empathy is a core condition of person-centered therapy which enables a functioning therapeutic relationship by allowing the therapist to understand the experience of the client as if they were the client (Rogers, 1975). Rogers explained that the efficacy of empathy is dependent upon the therapist skilfully communicating empathically with the client. This means that it is not enough for the therapist to simply *feel* empathic but that the client must also be aware that the therapist is feeling empathic *for* them.

The importance of empowerment in the person-centered therapeutic relationship has also been known since the inception of person-centered therapy. For example, Rogers (1951) described the importance of the therapist-client relationship being egalitarian, meaning the

therapist should avoid holding power over the client. The experience of the equalised power relationship should enable the client to develop an internalised locus of control. By having an internalised locus of control, the client can take mastery over their own life, and hence become empowered. The ideal person-centered therapeutic therapist-client interaction is therefore characterised by being both empathic and empowering.

The ability to describe empathy using hybrid linguistic methods (meaning by combined linguistic research methods) has been demonstrated in research in other institutional contexts. For example, Pounds (2012) created a discourse-pragmatic linguistic framework by combining linguistic features from different schools of linguistic thought to analyse the communication of empathy in a physician-patient context.

Empowerment here is defined using person-centred therapeutic theory, meaning it relates to the client holding personal power from within (Rogers, 1978). While there are fewer examples of linguistic research into communication of empowerment in institutional contexts, as suggested by researchers like Hughes (2017), methodologies that are typically used to analyse power (like discourse analysis) can, and should, incorporate positive aspects of power, such as how language has been used to empower. A move in this direction can be seen in Thorne and Sanders (2013), who found that Rogers used personal pronouns to empathise and empower. Rogers' use of 'I' to speak as though he were the client indicated that he was in the client's frame of reference, while moving from using first person pronouns to second person pronouns toward the end of therapy to indicate client empowerment. Nevertheless, there is much more scope for linguistic methodologies to be used to analyse how positive, progressive communications occur, including the use of empathy and empowerment.

Rogers (1978) suggested that empathy and empowerment should be examined at varied levels of realisation, as empowerment, which relates to relational empathy, may be transferable to the client's relationships beyond therapy. More recently, the value of combining insights from a range of areas of linguistics to describe person-centered therapeutic communications has been emphasised by researchers like Spong (2009). Spong recommended combining discourse and conversation analytic approaches owing to their capability to describe precise linguistic communications whilst also accounting for the context in which they occur. Furthermore, Simpson, Mayr and Statham (2019) describe how combining linguistic methodologies can help to bolster the positive aspects of each individual method by offsetting their relative weaknesses. For example, discourse analytic and pragmatic approaches can be used to offset criticisms against the attention to 'micro' structural linguistics of conversation analytic approaches by simultaneously drawing attention to the contextual factors in which the communication has occurred. Researchers like Tsileou (2018) have also highlighted the utility of combining flexible and robust linguistic methodologies to describe person-centered therapeutic processes, including empathy and empowerment, which are, by nature, complex and fluctuating.

Background and Study Justification

The practice of therapy, including person-centered therapy, principally comprises verbal communication (Velasquez and Montiel, 2018). For therapy to be effective, the therapist's 'work', including their feelings of empathy, must be communicated to the client (Rogers, 1975). This implies that person-centered therapeutic processes, like empathy, are observable in communication. The use of linguistic methodologies makes the analyses of communications viable, thereby their use provides a good fit for the analysis of therapeutic

discourse. The suggestion that linguistic methodologies should be employed to analyse therapeutic communications has been made for the last few decades (for example, McLeod and Machin, 1998), and interest in linguistic approaches has increased since the 1980s (Strong and Smoliak, 2018). While there has been some progress in this regard, including Tay's (2021) metaphor research, Perakyla's (2012) research about questions, and Wynn and Wynn's (2006) reformulations research, research using linguistic methods to analyse therapy remains relatively uncommon.

Writing recently, McLeod (2015) found that only 10 – 20% of therapeutic research (of all types) utilises qualitative methodologies, despite their suitability for analysing potentially complex therapeutic data. Researchers of therapy have instead tended toward using quantitative methodologies. For example, questionnaires comprising quantitative measures are frequently issued to therapists and clients following the conclusion of a series of therapeutic treatment (McLeod, 2015).

The prioritisation of quantitative research methods in this context may not be particularly surprising considering, firstly, their general dominance and, secondly, the emphasis on researching the outcomes of therapeutic treatment. As such, quantitative methodologies may be favoured because of their prominence, relative speed of issue and analysis, and cost effectiveness. However, writing recently, authors such as McLeod (2015) and Tsileou (2018) have outlined the utility of qualitative research into therapeutic contexts.   Qualitative research may be especially useful for its relative ease of application to therapeutic data which can, by its character, be complex.

The emphasis on prioritising the analysis of outcomes has also been questioned, for example by Sanders (2006). Sanders argues that the analysis of therapeutic processes is also important

as it describes what happens during therapy. Moreover, in the person-centered therapeutic context, it may be difficult to define what a 'good' therapeutic outcome should 'look like'. Client outcomes may not follow a linear or predictable path, meaning they may be difficult to analyse using quantitative methods alone. For example, quantitative methods like questionnaires may not be able to capture the experiences of a client who appears to be improving but who then regresses before they, once again, appear to be improving. The reliance on methods which describe outcomes may also contrast with the ethos of non-directivity in person-centered therapy, as therapists are trained to avoid aiming for specific outcomes. Clients may also not explicitly know, or be able to verbalise, the outcomes they are anticipating.

In recent years, researchers like Tseilou (2018) have suggested that qualitative linguistic methodologies can provide a good fit for analysing processes as they occur in therapeutic communications.   Methodologies that have been encouraged, or utilised, so far have included discourse and conversation analytic approaches. Authors like Spong (2009) have summarised that the use of discourse and conversation analytic methodologies can enable analyses that are flexible, robust, and sensitive, meaning that they can be effectively applied to complex person-centered therapeutic data. Meanwhile, authors like Tseilou suggest that qualitative linguistic analyses of processes in therapeutic communication should include a plurality of approaches to account for what is being communicated at various levels, including the 'micro' (the immediately observable utterances as they occur between therapist and client and their meanings), and the 'macro' (the broader meaning of the discourse in which such utterances occur, including incorporation of the context).

The usefulness of therapeutic transcripts for data purposes in qualitative linguistic research (initially encouraged by Rogers, 1951) has been reiterated more recently by authors such as Scarvaglieri (2019). Scarvaglieri explains that therapy researchers have tended toward focusing on analysing how participants of therapy speak about what has happened previously in therapy, as opposed to analysing the communications that have occurred as they occur during therapy. The use of therapeutic transcripts for data purposes will therefore enable a focus on how processes are communicated during therapy, so also make it possible to simultaneously analyse contributions made by both therapists and clients.

To summarise, there is a need for research which incorporates multiple, appropriate qualitative linguistic methodologies which provide capability for analysing complex and fluctuating therapeutic communications within and across therapy sessions, and which provide a good fit with person-centered therapeutic principles by enabling the analysis of both therapist and client contributions.

The remainder of this protocol outlines the development of a hybrid qualitative linguistic methodology which is both theory- and data-led. This means that theory about empathy and empowerment in person-centered therapy, alongside methodological theory about linguistic features of empathy and empowerment, are both being used to craft the framework. It also proposes that the development of the framework, including its refinement, is done by testing it on authentic person-centered therapeutic data (meaning transcripts which detail real therapeutic communication). The therapeutic transcripts comprise classical person-centred therapeutic practice, meaning the type founded by Carl Rogers in the 1940s, which remains the most practised 'type' in current person-centred therapy worldwide (Sanders, 2017). The

framework is being developed in iterations, meaning that it will be refined and finalised based on the results of testing the developing framework on the therapeutic transcript data.

The protocol therefore defines a study which aims to provide novel findings in several ways: firstly, by its inclusion of hybrid qualitative linguistic methodological approaches (positive discourse analysis, conversation analysis, and pragmatics) which use linguistic features capable of generating new insights into empathic and empowering processes, as well as their interrelationship, and secondly, by using these approaches to analyse authentic therapist-client therapeutic communications. The insights provided by the creation of the framework can be utilised by other person-centered therapists and researchers intending to use linguistic methodologies and authentic therapeutic transcripts for research or practice purposes.

The research questions (RQ) are:

RQ1: Through which communicative parameters can empowerment be conveyed during person-centered therapy?

RQ2: Through which communicative parameters can empathy be conveyed during person-centered therapy?

RQ3: Through which communicative parameters can empowerment and empathy be seen to interrelate and fluctuate during person-centered therapy?

Design

Summary of pilot work, methodological approach, and status of study

The hybrid qualitative linguistic framework described in this protocol is derived from both theory and data. At the time of writing, further iterations are being made to the framework

following an initial piloting period, and based on findings from the pilot, further analysis of five sets of transcripts of a complete series of therapeutic sessions.

The choice of methodologies adopted was based on their fit with person-centered therapeutic practice, and on their epistemological compatibility. This methodological approach follows the rise of qualitative methodological pluralism to generate complementarity between findings (Clarke et al., 2014). It also responds to calls for counselling research to be methodologically pluralistic (McLeod, 1999) to enable richer research findings. A review of the theoretical literature indicated that positive discourse analysis, conversation analysis and pragmatic approaches formed a good fit with the data owing to their ability to analyse empathic and empowering interactions whilst also regarding the broader context in which the therapeutic interactions occur. -These methodologies are epistemologically compatible, meaning they can be successfully combined to overcome their relative weaknesses. For example, Simpson, Mayr and Statham (2019) describe a study which utilised these three overarching methodologies to overcome common criticisms aimed at conversation analysis for disregarding broader contextual details. Furthermore, the inclusion of conversation analytic approaches helped overcome criticisms aimed at pragmatic and discourse analytic approaches, for example about power being pre-ordained in any given context. Therefore, combining these three approaches allows the analytical strength of conversation analysis to meet the critical stances of pragmatics and critical discourse analysis whilst all approaches also allow the focus on the data to be maintained.

A broad range of linguistic features from different theoretical domains were then shortlisted for potential inclusion in the framework. Person-centered therapeutic theory was simultaneously searched to clarify theoretical conceptualisations of empathy and

empowerment. This search was expanded to include research which considered empathic and empowering communications in related contexts, such as person-centered health. Literature from linguistics and person-centered therapy (and related institutional domains) was also used to clarify the verbal dimensions of empathy and empowerment.

Findings from the review were then used to develop the prototype framework. The framework was piloted on a subset of data that will be later used for full analysis. The aim of piloting the framework was to test the utility of the methods identified during the literature review and to check how effectively each method could be integrated. This was done by analysing the co-occurrence of each linguistic measure. Project reflections in memo form were also kept. A write up of the piloting period also took place to check whether the methods could be effectively integrated. This included considering both the literature that had been surveyed and broader epistemological issues, showing how analysis was both theory- and data- driven.

The linguistic features shortlisted for piloting were taken from several sources based on their utility for analysing empathic and empowering communications and interactions in person-centered therapy. As a representative example, categories from Pounds' (2012) empathic speech act were used in piloting as follows: showing feelings are valid, expressing concern about causing discomfort, facilitating minimal comments, using backchannel noise, inviting confirmation or elaboration by referring to a third party, showing understanding, using expressing lack of certainty in an exploratory mode, using modifiers, and using softeners in form of verbs and modal expressions. Appraisal and evaluation, and referring to potential feelings were rejected following piloting as other categories were either not present in the data or were merged more successfully with other linguistic features. For example,

self-disclosure was merged with questions as it was better organised as being a response to questions. The subsequent retainment of the linguistic features included in the pilot framework was therefore contingent on how effectively they could be used to analyse empathic and empowering communications across the entire sets of transcripts. The lack of inclusion of the linguistic features of empathy and empowerment in the transcripts used for piloting was judged to be typical, meaning that they were unlikely to be present in other transcripts.

The next stage of the development of the framework was to review the literature to ascertain whether the benefits of retaining the features outweighed the findings from the pilot analysis which suggest they should be rejected. For example, previous findings suggested that self-disclosure may be considered an outcome of therapeutic communication (Velasquez and Montiel, 2018), meaning its rejection as an overarching linguistic feature was justifiable.

All rejected measures remained rejected following this subsequent literature review, and analysis was then undertaken on all five complete series of transcripts. NVivo was used to code the data, and to keep memos about the development of the analysis.

The data and theory are currently being revisited to explain the findings, especially to find out more about the potential interaction between empathic and empowering communications. Further iterations are likely to be made to the framework and will be considered complete once saturation of analysis has been achieved, following Patton's (1990) guidance. This means that the framework has described what it has intended to describe and that use of the framework to analyse the dataset no longer yields new analytic insights.

Data Collection

Materials

For illustrative purposes, this section details the authentic therapeutic transcripts that are being used to develop and test the framework. The framework will be developed and tested by use of case studies of person-centered therapy sessions, which include a therapist-client dyad, and which incorporate a complete and intact (first to final) series of therapeutic sessions. This follows Patton's (1990) definition of purposive qualitative homogenous sampling as it enables a focused analysis of a subgroup of participants.

The transcripts are published in the 'Volume I' section of the Alexander Street (2019) website, which is a publisher that curates content for use in research. All transcripts meet the American Psychological Association's (APA) (2017) ethical guidance for use in research projects. This means that all participating therapists and clients have given their permission for transcription of their session and for its use in research.

All transcripts used for piloting purposes in the creation of the linguistic framework have been taken from classical person-centered therapeutic sessions which took place in the early 1970s in the United States of America. This was, in part, a practical decision as recent therapeutic transcripts are difficult to access (McLeod, 2015). The use of therapeutic transcripts from the 1970s still provides a good fit with the aims of the present research. Empathic and empowering speech will not have altered significantly since the 1970s. Additionally, classical person-centered therapy is still practiced and is relatively unchanged since its inception. Whilst some talk in the transcripts details cultural details, these details do not affect the analysis of interactional patterns of empathic and empowering speech. The use of therapeutic data from the 1970s is therefore sufficient to meet the aims of the present research and will not curtail analysis. The choice of data also follows McLeod's (2015)

suggestion that documentary data (including older therapeutic transcripts) has merit for use in research into contemporary therapy.

The individual characteristics of either the therapist or client detailed below are those provided by the Alexander Street (2019) website but are not considered for analysis purposes in this research project. This is in line with work in linguistic pragmatics (as opposed to sociolinguistics) that aims to provide generalisations of language use, and not on language use due to individual characteristics. This has directed methodological choices, meaning that individual characteristics shall only be referred to in future publications if mentioned explicitly in the transcripts and relevant to the study aims.

Sample

Transcripts selected for data purposes detail classical person-centered therapy and comprise five case studies which include all sessions of a complete series of therapeutic sessions. All individual case studies comprise a therapist-client dyad. The characteristics of each dyad have been provided by the Alexander Street (2019) publishers who obtained this information from the therapists who submitted the transcripts. This includes information regarding the presenting problem of the client however does not include diagnostic information as classical person-centered therapists do not record such information. Information provided by the publishers is included below. However, the research project detailed here aims to understand general empathic and empowering modes of communication by therapists and clients so does not concern their individual characteristics.

Dyad one comprises a female therapist and a male client. The therapist has a PhD and under ten years of professional experience. The client is aged between 21 – 30 years old, is single, and heterosexual. The Alexander Street website describes that the client 'abuses substances,'

has problems with sleep, relationship problems, and experiences a range of negative mood states.

Dyad two comprises a female therapist and a female client. The therapist has a PhD and under ten years of professional experience. The client is aged between 20 – 25 years old, is single, and heterosexual. The Alexander Street website describes the client as experiencing several negative affective states. The client describes her relationship problems, attempts at suicide, and her difficulties undertaking therapy.

Dyad three comprises a female therapist and female client. The therapist has a PhD and under ten years of professional experience. The client is aged between 21 – 30 years old, is single, and heterosexual. The Alexander Street website describes the client experiencing a range of negative emotions. The client discusses her romantic relationship, disliking her jobs, and having poor body image.

Dyad four comprises a male therapist and a female client. The therapist has a PhD and under ten years of professional experience. The client is aged between 21 – 30 years old, is engaged, and heterosexual. The Alexander Street website describes the client describing a range of negative feelings. The client discusses her abortion, the quality of her relationships and her feelings about attending therapy.

Dyad five comprises a male therapist and a male client. The therapist has a PhD and under ten years of professional experience. The client is aged between 21 – 30 years old, is single, and bisexual. The Alexander Street website describes that the sessions involve the client discussing his negative emotions, sexuality, and feelings about undertaking therapy

The five series of case studies comprise over a thousand pages of interactions. This is estimated to provide enough data to fulfil the research aims, so data use follows Patton's

(1990) recommendation that data collection be based on the researcher's assumptions about how much data is required to produce sufficient findings. Following Saunders et al. (2018), analysis will continue on this dataset until saturation occurs, which will be assumed once analysis of the data set yields no further conceptualisations of empathy, empowerment, or of its relatedness. However, further sampling will take place should saturation not be achieved. This means that the final number of case studies that will be analysed may extend beyond the five case studies which comprise the current dataset. Any further sampling will follow the inclusion and exclusion criteria outlined within this paper which follows.

Inclusion and exclusion criteria for data source use by website

The Alexander Street (2019) publishers detail no specific inclusion criteria for the submission of therapeutic transcripts for potential publication in their database. No personal or contact details are provided for either the participating therapist or client in the transcripts so it is not possible to ascertain what has motivated submission. However, the Alexander Street (2019) publishers hired external expert editors to validate the presence of classical person-centered therapy in the transcripts. The transcripts were also submitted by the therapists who partook in the transcripts, and all have confirmed that they are qualified in person-centered therapy to doctoral level.

The case studies were selected for data purposes because of the possibilities they offer for analysing interactions made by therapist-client dyads across multiple person-centered therapeutic interactions. The selection of these five case studies was based on the availability of data from the complete dataset offered by the Alexander Street (2019) website. The five case studies were the only complete and intact sets of transcripts on the Alexander Street (2019) website which detailed classical person-centered therapy. These five series of

transcripts provided a good fit with the research aims of this project as they include complete series of person-centered therapy between a single therapist-client pairing

The five sets of complete transcripts taken from the website for this research are assumed to be typical cases (where 'typical cases' comprises a course of therapy that is successfully completed). This follows McLeod's (1999) recommendation that theory-oriented case studies utilise 'typical cases' (even where this is later found not to be the case). Although it is not possible to track client 'outcomes,' this is not significant as this research project concerns processes rather than outcomes.

Inclusion and exclusion criteria for data source use by study

To observe any fluctuations in language use over therapeutic sessions, it is required that all series of transcripts must be complete, meaning that the first, final, and all in-between sessions must be intact. Therapeutic transcripts comprising only a single session of therapy are therefore excluded from this study.

Each series of transcripts must include the same therapist-client dyad throughout its sessions as analysis concerns the effect that empathic and empowering communications have on the dyad. Therapeutic sessions involving anything other than a single therapist-client dyad (for example, comprising family therapy) are excluded.

Transcripts must detail classical person-centered therapy (as validated by the external expert editorial team hired by the Alexander Street (2019) publishers). Transcripts which detail other types of therapy (including pluralistic therapies) are excluded. This is because theoretical conceptions regarding empathy and empowerment have been derived from person-centered

therapeutic theory. Expressions of empathy and empowerment will potentially differ in alternate types of therapies, including those which combine variations of therapeutic types.

There were no inclusion or exclusion criteria concerning the individual characteristics of the therapist or client, as the research questions and aims regard general patterns of empathic and empowering communications rather than how these may be expressed based on individual linguistic choices or characteristics (should this be the case). This includes language use relating to 'presenting concerns' as this relates to individual characteristics and could potentially contravene the non-diagnostic ethos of person-centered therapeutic practice. The commonality of 'participants' is that they are therapists (who are qualified in person-centered therapy and are undertaking person-centered practice in the transcripts), and clients in person-centered therapeutic dyads, and the unit of analysis is empathic and empowering communications that occur within their interactions. Information regarding the individual characteristics of the 'participants' is therefore not required or included in this paper.

Ethical considerations – approval and consent

Ethical permission was sought at university level but deemed not necessary to formally apply for by the ethics committee because the data (the transcripts) used for piloting are de-identified and available in the public domain (by institutional access to the Alexander Street, 2019, website).

The therapists who participated in the sessions detailed in the transcripts submitted either session recordings or transcripts to the Alexander Street (2019) website, meaning they have given full permission for use of the transcripts in research. The Alexander Street (2019) website, which is based in the United States of America, confirms that client participants detailed in the transcripts have also given permission for the use of transcriptions for research

purposes per ethical guidelines issued by the APA (2017). Guidance regarding anonymity, informed consent, privacy and confidentiality, data protection, right to withdraw, and knowledge of publication is therefore confirmed to have been adhered to.

There is no anticipated risk of harm to members of the research team.

Rigour

O'Brien et al.'s (2014) standards for qualitative research have and will be followed throughout all stages of research design and analysis. Per O'Brien et al.'s (2014) requirements, the research design has incorporated considerations about researcher reflexivity in consideration of researcher subjectivity in qualitative work. A reflexive diary has been kept and comments which helped develop analysis or which enhanced the reporting of findings will be included in subsequent publications. This means that reflexive considerations will be made by the researcher for this study and considered in relation to potential subjectivity and influence on findings. For the purposes of transparency, reflexive comments will also be included in any publications for this study. Considerations about the applicability of the findings in other institutional contexts will also be included.

Inter-rater reliability is being utilised to overcome concerns about subjectivity per O'Brien et al.'s (2014) guidance. This will occur by comparing how the data has been coded between the lead researcher and the co-authors.

O'Brien et al.'s (2014) guidance for ensuring trustworthiness by maintaining detailed notes (an 'audit trail') has and will be followed. The function of the audit trail in this study is to demonstrate how synthesis has occurred by providing documentation that illustrates the

analysis process. This will be included in reports and publications regarding this research project.

Transcript sampling of cases for inquiry

Patton's (1990) guidance regarding purposive sampling in qualitative research is being followed. The transcripts which are being used to develop and test the framework have been selected for the richness of their content and fit with the research questions. Homogenous sampling is used, meaning a focused analysis of a subgroup of participants (i.e., a therapist-client dyad in the context of classical person-centered therapy) will be undertaken.

Data Analysis

The completed framework is intended to be applied to authentic transcripts for the analysis of empathic and empowering communications between therapist-client dyads within classical person-centered therapy. The framework is being developed by testing it in multiple iterations on complete and intact sessions of classical person-centered therapy until saturation has been achieved.   Initially, the first, middle and final transcript from one series of transcripts has been piloted. The subsequent retainment of the linguistic features was based on their potential for exemplifying empathic and empowering communications across entire sets of transcripts. Presently, linguistic features have been shortlisted to questions, reformulations, personal pronouns, hedging, and metaphors. Five complete transcripts have and will continue to be analysed for the presence of these features, and further data will be sought should saturation not be achieved. Further transcripts will be sought from the same website should saturation not be achieved by analysis of the five sets of transcripts. Future researchers and therapists may then consider the applicability of the completed framework to

analyse empathic and empowering communications in their own person-centered therapeutic transcripts.

Other researchers may choose to extend the findings from this research project by incorporating it within a multi-method approach. For example, the framework could be used alongside a method which analyses outcomes so also be applied in process-outcome research. Researchers and therapists with access to participating therapists and clients may also consider the possible influence or impact of the individual characteristics of those partaking in therapy on the findings.

Discussion

Findings from the proposed research are intended to be useful to therapists and researchers who have an interest in how linguistic features can be used to understand more about how empathy and empowerment occur in practice, and in combination, in person-centered therapy.

The creation of a qualitative linguistic framework and the findings it will produce will add to what is known both theoretically and methodologically about empathic and empowering communications between therapists and clients in person-centered therapy. This has value for therapists who would like to know more about how empathic and empowering communicative processes work in person-centered therapy. The findings from this research could be fed into training programmes for person-centered therapists. Findings also have use for clients who would like to find out more about how their therapy has functioned, or for potential clients who would like to find out more about how communication works in person-centered therapy.

Suggestions to combine the strengths of multiple methodologies by use of a pluralistic approach (for example, Tseilou (2018) to best research the complexities of counselling

communications have been followed. Methodologies have been selected which fit the ethos of person-centered therapy, and which have been used to analyse empowerment and empathy in other institutional contexts. The framework has so far undergone an initial piloting period which involved analysing a sample of the data using findings from person-centered therapy research and linguistic theory. Following this, the framework has been refined by revisiting theory from person-centered counselling and similar fields (like health care), when necessary, for example to justify the removal of linguistic features from the framework.

The research adds to person-centered therapeutic research through its use of authentic therapeutic data, per recommendations for doing so dating back as early as Rogers (1951), and more recently emphasised by researchers like McLeod (2015). This research practice allows therapeutic communications to be understood from the 'inside', so responds to calls for the need for research which analyses therapeutic communication as it naturally occurs, as opposed to considering it retrospectively (Tseilou, 2018).

Finally, the research proposed in this protocol responds to criticisms regarding the tendency for person-centered therapy researchers to prioritise the therapists' perspective (Wilkins, 2010). The linguistic framework outlined here offers a method which can be used to analyse contributions of both therapists and clients equally and in relation to one another. It is therefore loyal to the ethos of person-centered therapy, as it treats the contributions of therapists and clients equivalently.

Conclusion

This protocol has provided an overview of the emerging creation of a qualitative linguistic framework. It has aimed to provide research transparency by offering early access to the rationale for the study, as well as by describing its present status, methodology, and intended

next steps. It is anticipated that this will encourage researchers and therapists alike to engage with this approach.

The novel application of this framework, once developed, has been outlined, demonstrating the potentiality of the framework for analysing empathic and empowering therapeutic communications between therapists and clients in classical person-centered therapy.

Findings from the development of this framework will have utility for person-centered researchers and therapists. It is intended that details about the creation of the framework will be informative for other researchers who wish to use linguistic methodologies in their own therapeutic research.   The creation of the framework will also contribute to what is already known about how linguistic methodologies can be combined to provide an understanding of the various 'levels' at which therapeutic communication occurs in relation to empathy and empowerment.

The framework is also expected to have application beyond the therapeutic setting, for example in health care organisations where practitioners use person-centered communication as their primary mode of operation.

The findings from the framework will also add to theory about the communication of empathy and empowerment in person-centered therapy. The framework could be used by researchers who wish to analyse empathic and empowering processes as they occur, and interrelate, by application to therapeutic transcripts. This adds to the research which focuses on processes rather than outcomes, though may be extended by future researchers to incorporate linguistic features which also consider outcomes.

Whilst the emphasis is on how processes work as opposed to on outcomes, the findings may potentially be used evaluatively. For example, a therapist might focus upon the location and

proximity of fluctuations of empathic and empowering communications over the course of several of their own therapeutic sessions. This information could feed into further sessions with clients and help therapists 'demystify' their therapy to their clients by providing them with actual therapeutic data as evidence.   The framework could also be used by trainee therapists who are learning about person-centered therapeutic processes, for example by providing guidance regarding good practice of empathic and empowering communication. By adding knowledge about the linguistic realisations of empathy and empowerment, therapists will be able to put this into practice as it will allow them to consider how their own contributions may affect their relational empathy and client empowerment. Furthermore, therapists will be able to use the findings from the framework to analyse how clients actively participate in empathic and empowering therapeutic interactions.

The framework will enable the analysis of both therapist and client contributions 'as they occur,' which is additive as previous research has frequently prioritised the therapist and involved retrospective accounts.

The findings from the final iteration of the framework will be published when complete. These findings will include details regarding the development of the final form of the framework, and about the findings about empathic and empowering interactions that the framework produced.

Acknowledgements

Declaration of Interest Statement

The authors report no conflict of interest.

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