

A qualitative study of experiences of digital technology through using an iPad in therapy.

By Ani de la Prida
(student number 1252176)

MA in Counselling and Psychotherapy

University of East London
2014

A dissertation submitted in fulfillment of the requirements of the University of East London for the degree of Master of Arts in Counselling and Psychotherapy

Acknowledgements

To my family; my husband Chris and my son Jordan, thank you for your support, belief in me, and your love. To my late mum, for telling me I can do anything, I know you would be very proud.

To my spiritual sister Beverley Cooke; thank you for your academic support, calmness, and for always being there late at night. To Liz Kitchen thank you for your help, which inspired me. To Teresa Cosgrove thank you for your trust and for always seeing my potential. Also to the late Liesl Silverstone, my dear friend who has always inspired me and from whom I am still learning.

I'd like to thank my supervisor Patrizia Collard for your support, uplifting words and your generosity in giving me time.

Finally I'd like to say thank you to my participants for taking part, and to Emma Bacon for transcribing.

Table of Contents

Abstract	3
Chapter One Introduction	5
Chapter Two Literature Review	8
Chapter Three Methodology	14
Chapter Four Findings	24
Chapter Five Discussion	51
Chapter Six Conclusion	56
References	57
Appendices	68

Abstract

In recent years technological developments have revolutionised the way we communicate and work. However as therapists we seem to be lagging behind in our integration of digital technology. I believe that the potential for the therapeutic use of digital technology has been largely neglected, and this study attempts to begin to redress this balance.

The purpose of this qualitative, phenomenological study is to explore experiences of using digital technology, focusing on the use of an iPad in therapy. I explore experiences from both therapist and client perspectives with adults, children and young people. I was able to use a range of sources; four transcribed interviews, three with my own clients, my clinical practice notes and a pre-recorded interview. I use Thematic Analysis as a means of analysis and developed three overarching themes which structure the findings into: Prior - attitudes towards new technology, During - experiences of using digital technology, and The future - possibilities and implications for the use of digital technology in therapy.

The results suggest that there are a number of influences on our use of digital technology, these include: fears, incongruence, cultural, and generational influences. The study shows the versatility of digital media and its potential for use in play therapy, art therapy and talking therapy. It highlights therapeutic potential in areas such as interactive applications, digital gaming and virtual realities, and suggests that more research is needed.

I argue that digital media is friendly. The possibilities for use are diverse and open up exciting new dimensions for therapy. I also argue that we must integrate digital technology otherwise we risk being outside of mainstream culture, and in particular youth culture.

Introduction

In recent years technological developments have revolutionised the way that we communicate and work. In particular hand held and touch technology devices have become everyday tools, (Miller, 2011) due to their portability, versatility and increasingly user friendly functions.

The popularity of the iPad is rising in spite of criticisms by technology experts that it is not a particularly advanced device (Eanes 2013). It seems likely that hand held devices such as the iPad will soon become our major mode of communication, as the telephone was in the last century (News Crucible, 2010).

The functionality and flexibility of these devices is related to the design and availability of 'apps' (application software), a growth area that is predicted to take over from older mediums such as websites (ibid). The app market is currently estimated at \$25 billion (news.com.au, 2013) and developing at a phenomenal rate. There are now over 1 million apps available at Apple's app store, although many are never even downloaded (Ingraham, 2013). With "so many apps, so little time" (ibid) it is difficult to keep track of new apps and uses, however it seems to me that the potential of digital tablets is limited only by our imagination and creativity

Some technology sociologists view digital development as a symptom of wider social change; circumstances create an environment where digital development has to happen to meet the needs of society (Miller 2011). This technological determinism holds that that technology itself further drives and shapes change, in other words technology itself is changing how we live. Language itself is changing as new vocabulary is created in response to technological developments. Newer generations born into a digital world (1980 onwards) have been called 'digital natives', and the 'Net Generation' whilst those born earlier are 'digital immigrants' who adopt digital technology (Prensky 2011). According to Prensky

digital immigrants may learn and adapt but digital technology will always be a second language. More recently researchers are beginning to draw distinctions between the Net Generation and those born in the 1990s, the 'iGeneration', who are using technology in ways that can leave their Net Generation siblings behind (London, 2010).

Digital technology has embedded and permeated current culture where "we are all digital now" (Fortune, 2011). The on-line world is fully integrated into the off-line 'real' world (Miller 2011) and distinctions between digital and non-digital are becoming irrelevant. Is this a shift to a new paradigm? Suggestions are growing that we are now in new post-digital age, where we have moved beyond speaking about technology itself to focussing on "what we can do with it" (Alexenberg, 2011. p.34).

In June 2013 I bought an iPad to use when my laptop broke. My life had functioned well without an iPad and the decision to buy one was mostly economic, so I was surprised when within a few short weeks - I fell in love with my iPad! I became evangelical and wondered why it had taken me so long to give in to my teenage son's urgings to get one. I now recognise that as a digital immigrant my resistance to new technology is not uncommon.

The first apps I downloaded were art apps, which allow the iPad to be used to create images with digital pens, paint and felts. I was very excited by the tools and the ease with which art can be created digitally. I immediately thought about introducing it into my practice as a person-centred therapist where I use art, play and creative media with a wide range of clients. I wanted to explore what I could do with it, echoing Alexenberg's (2011) post-digital thinking.

Initially I thought first of introducing it to my younger clients, assuming it would be a familiar medium for them to use. But then I also started to wonder whether my adult, digital immigrant clients would also find it a useful tool within therapy.

I searched for art therapy, counselling and psychotherapy apps. I was surprised to find only one art therapy app, Computer Art Therapy (Seong-in Kim, 2013) which I found poor in

terms of content and usability. I found very few apps relating to counselling and psychotherapy, other than self help and study aids for psychology students.

I looked to find out how other therapists were using touch technology in their practice and was surprised to find little had been in terms of research. There also appeared to be gaps on this topic in the literature. For example in *The Changing Shape of Art Therapy: New developments in Theory and Practice* (Gilroy & McNeilly. 2010) there was a noticeable absence of any mention of digital art or new technology. This may be partly explained by the authors' admission to not "fitting into the 20th century in my resistance to anything computer-orientated" (p.144). I did find a short mention of digital media in art therapy, and one case study using an iPad with a hospitalised teenage boy (Malchiodi,2012) which further ignited my interest.

It seemed to me relevant to use digital technology in therapy, otherwise we risk being seen as outside of mainstream culture, and youth culture in particular. We must use the digital language of our clients and not expect them to have to use our non-digital language of therapy. Eanes (2013) highlights that "technological tools seem to be shaping our relationships", and I wondered how digital technology might impact therapeutic relationships and practice. Excited by the possibilities and potential for therapeutic practice that digital media might have I designed this research study around the introduction of an iPad within my own practice.

Literature Review

In reviewing the literature I became frustrated as I discovered there was very little literature specific to that of using an iPad in therapy. I therefore widened my search to a number of related areas. Digital technology however is a vast and diverse field encompassing on line therapy, chat rooms, virtual realities, apps for cognitive behaviour therapy and relaxation and creative apps such as 3D clay modelling and art.

In order to cover breadth I have had to sacrifice some depth although a lack of depth in the literature due to the scarcity of therapeutic experiences with digital technology is also a factor.

I found that related areas were diverse and in order to provide a coherent review I have loosely structured the literature review around the themes within my study, namely: attitudes towards digital technology, experiences within therapy and the future of technology in therapy.

Attitudes towards digital technology

There is a noticeable absence of mention of digital technology in therapy. A meta-analysis (Bratton et al, 2005) of effectiveness in play therapy, and Play Therapy UK's 10 year research study (2011) makes no mention of digital technology. A review of important upcoming publications in art and play therapy also reveals (Prendiville & Howard 2014, Pernicano, P. 2014, Malchiodi & Crenshaw. 2014, Dalley & Case 2014) no mention of digital technology. Most surprising perhaps in regard to play therapy as digital technology is a familiar medium for children (Pykhtina et al 2012).

Delfos (2003) suggests that play therapists are lagging behind as they are from a non-digital generation. Research highlighting therapist concern that new technology "may not always be sturdy enough for continuous play" (Pyktina et al p.137) is indicative of a digital

immigrant mentality (Prensky 2012), supporting Delfos's view. However although Peterson et al (2005) did find that older therapists were less likely to use digital technology, he found the largest factor predicting use was education, a therapist with a Phd is most likely to use digital technology.

The reluctance to integrate technology may be compounded by the narrative that digital technology is harmful, early studies focussed on negative impact such as social isolation (Selnow 1984), aggression (Cooper & Mackie 1986, Sherry 1997), and examples of children "behaving like serial killers who were addicted to [the] computer game" (Delfos, 2003.p5).

However Colwell & Payne's study (2000) found no evidence to support the idea that gaming could lead to social isolation. Potential benefits have also been highlighted for example digital gaming aiding therapy with children and supporting friendship development (Gardner 1991).

Therapists often see digital technology as interfering with the therapeutic process (Pykhtina et al 2012) whilst Klorer (2009) goes so far as to say " In the rare times when I use computers in art therapy, I make sure there is still some 'unconnected' time where the client and I can engage in face-to-face contact. I do not want to lost sight of the relational aspect of eye-to-eye gazing, which cannot happen if we are both engaged with a computer screen". (p.82). Reeves (2009) finds switching off and disconnecting has a calming effect, raising the point of technology overload; being constantly connected is stressful. This is perhaps indicative of a digital immigrant position, as for digital natives the opposite is true (Prensky 2012).

An alternative, and I think rather depressing view, is that therapists may not be necessary for therapy. One study has shown that computerised cognitive behavior therapy (Purves & Dutton 2013) is as effective as face to face.

Goss and Anthony (2003) suggest that if the psychological processes involved in change reside in the client there is no reason why therapy cannot be facilitated by

psychotherapeutic software. The potential cost saving attraction to government is easily recognisable (McInnes. 2014). However I cannot see how relational approaches such as person-centered therapy, could be computerised.

The view that computerised therapy is as effective appears to contradict research which showed that young people rated the most helpful aspects of therapy as talking to someone and feeling understood (Cooper, 2013, Lynass, et al., 2012). Street (2013) highlights KOOOTH.com's research where 92 % of young people felt listened to using the on-line service and 86% reported that they preferred on-line to other ways of accessing support. This seems to suggest that whilst young people prefer to be able to engage on line, a human empathic response is likely to be an important or even determining factor in achieving positive outcomes.

However attitudes towards technology is changing and there is a move towards using technology in play therapy sessions (Gardener Edge 2013). Evidence of this is that IAPT services have received funding for iPads to be used by children and therapists to monitor outcomes in order to improve therapeutic treatment (Gov.uk, 2013)

Experiences within therapy

Johnson's (1987) case study described ease of use, reduction in anxiety and increase in verbalisation of feelings as therapeutic benefits of using a digital art based programme with a 10 year boy. Delfos (2003) agrees that digital art therapy is useful in reducing anxiety (Delfos 2003) and also in the facilitation of relationships. One study specific to Apple Macintosh computers (Canter 1987) used a variety of software for drawing, animation and music. Importantly Canter found that "specially designed software can bring out creative expression in clients with emotional and learning disabilities" (p 17). Canter also highlighted benefits as increased confidence, communication and an increase in attention span. Johnson (2002) found that a microcomputer and graphics pad captured children's interest and suggests there is potential for digital media to add to the theory.

More recently Klorer (2009) suggests that for children and young people with attachment difficulties using digital technology in therapy may be unhelpful as it allows them to avoid relational aspects of therapy.

However Thong (2007) suggests that digital art is valid therapeutic modality that fosters the therapeutic alliance and can empower clients. He presents an important but frustratingly brief series of case studies using a variety of digital media, including 3D modeling, photography, painting and drawing. Thong concludes that digital art shares many characteristics with traditional art materials, and that by being able to encompass a variety of mediums simultaneously it can facilitate integration of the psyche. Depending “on which computer tools are utilized to evoke distinct aspects of the client, the completed computer image can contain combinations of parts of the self or a summary of the whole.” (ibid, p.58).

In the 1980’s digital games were developed to address drug abuse, anti-social behaviour and offending (Gunter 1998). Development seems to have halted until more recently, and Wilkinson (2008) suggests this is because early work presumed therapeutic limitations with digital games.

However technological and cultural developments have led to changes. It is now recognised that gaming can have a powerful effect, for example digital games are used to desensitise soldiers to killing (Delfos 2003). New games now seem to target specific groups, for example a solution focused game designed for adolescents, one targeting depression, and another targeting anger management (Coyle et al 2009). An interesting finding (ibid) was that one game actually increased and enhanced communication with the therapist.

Coyle (2007) suggests that protocols need to be developed as the "choice of technology used with given client groups is a critical factor in the success of computer-assisted interventions"(p.346).

Rosegrant’s (2012) series of case studies is important as he describes how he was able to engage with a young boy using a role-playing digital game. He suggests that allowing, “technologically altered realities” into therapy will better enable us to work with clients.

Further development in terms of digitally altered realities has led to an interesting pilot study which used 3D animated avatars with clients with schizophrenia. The study found that patients who heard persecutory voices were able to talk with the avatars and reduce the hallucinations in both severity and frequency (Lydall 2013).

In terms of play therapy (Kadusan & Schaefer 2003) used a digital camera to photograph sand tray work. They recorded and transcribed a child comments, which is printed out for the next session. They found that “stories in the sand” (p111) captured a quality of depth of the client’s experience.

An important study is the development of Magic Land (Pykhtina et al, 2012). Interactive play therapy tabletops have been designed with a number of different applications developed through a research process. The process was specifically supportive of non-directive practice, and one aim was to allow “children to create their own toys to provide a child with further control over their symbolic play” (p.139) . For example the Rosebush activity allows a child to create environments and stories to encourage expression and role-play. Magic Land takes advantage of opportunities that cannot be offered in a traditional play therapy , for example the Water application allows the child opportunity to “make ripples, add pebbles...sounds of rain and thunder...add and remove fish” (140) . Evans (2012) also highlights the value of novel uses for digital technology in therapy, suggesting future research is needed. Pykhtina (2012) et al suggest that Magic Land can enhance rather than replace traditional play therapy toys.

The future of technology in therapy

Canter (1987) suggests there is much potential for digital technology in art therapy and that this medium can facilitate insight for therapist and client.

Delfos (2003) suggests that boys are more attracted to digital games than girls, and asserts that “during the fifteen years I have had a computer in the play room, boys have used it

much more often than girls” (p.3). This matches my clinical experience as all my male clients have engaged in gaming, whilst none of my female clients have. This suggests that perhaps there could be a therapeutic benefit to using gaming to engage with boys in therapy. This could be of particular benefit with adolescent boys (Rosegrant 2012) as this group can prove harder to engage with.

Brian Austin (2009) highlights Kapitan (2007) that the need for mastery and clinical use of technology is a pressing issue for art therapy, whilst cautioning us to pay attention; if we are lulled into complacency “what we set in motion may well overwhelm us” (p.83 Austin 2009). He suggests that technology has the capacity to engage the mind and body in profound and meaningful ways. For example digital tools can become an extension of the body and of the creative mind, which he says has implications for art therapy, and that once “we enter the realm where the imagery we see or create on a computer screen is fully integrated with our minds and bodies, we are well beyond anyone’s concerns about the hand’s role in creativity” (p.85). This is an exciting idea that suggests there is great potential to develop in ways that we have not yet considered.

Methodology

Design rationale

In designing my study I focused first on what I wanted to find out, which was to explore the experience of using digital technology in therapy from both practitioner and client perspectives. I wanted the opportunity to view one phenomenon or shared experience from two perspectives, hoping that there may be the potential for unique insight or knowledge to emerge. Specifically I was interested in;

- ☐ how usable and practical it is
- ☐ how it impacts, if at all on the therapeutic process,
- ☐ what advantages and disadvantages are there to using digital technology in therapy
- ☐ what might enable or disable clients and therapists from making use of digital technology as a tool

For accessibility I decided to focus specifically on using an iPad, and chose to narrow this down further to using an art based app for my study. I chose one that mirrors material reality in the tools it provides (Appendix A) imagining this might be easier for clients and provide a structure for me. However I have come to realise that this decision is indicative of my technological ‘accent’ (Prensky 2001.p.2) in that other uses for the iPad in sessions didn’t actually occur to me.

In a sense my study is two fold, firstly there is the practice element, where I have introduced and reflected on using an iPad with my own clients in sessions. Initially I considered the possibility of this as action research. However I rejected this idea as one of the defining features of action research is equality and lack of separation between researcher and participants (McIntosh 2010). Using reflexivity as intersubjective reflection in order to develop practice allows for analysis of “unconscious structure relations between

participants in the research process” (McIntosh 2010.p.51). This positions me as separate from my participants, supporting my phenomenological position.

My experience as 'practitioner-researcher' (Fish 1999) was important to include because I value the process of reflecting on observations, experiences and responses from sessions, which is according to McIntosh "ontological ...[and] about furthering knowledge, in ways that deepen and uncover our knowledge of self and others" (2010. p.24). A further benefit of this is that I have been able to draw on my experience of a number of clients across many sessions, which I would not otherwise have been able to include.

I kept session notes which I coded and analysed for themes, had numerous conversations, engaged in clinical supervision and used art therapy work (appendix A, p.20-21.) to explore the practice element. Using Ghaye and Ghaye's 10 principles (1998) this process is identified as reflective practice. In particular point 10 which states that reflective practice "is eclectic, and is comfortable with drawing on different ways of knowing. It is not prejudiced in how knowledge is gained or understood" (McIntosh. 2010.p.46) is descriptive of my approach.

The second part to my study is that of generating data from interviews with participants. I chose to use semi structured interviews (Appendix 1) as I felt this would allow for both freedom to explore the experience, and structure to explore specific areas within interviews. Interviews were carried out in my counselling practice room in my home. Other sources used included a recorded interview with four digital art therapists (Carlton, 2011) and a telephone conversation with a practitioner, which were noted in detail.

Methodology rationale

As a person-centred practitioner my epistemological position is phenomenological, I value individual experience, as unique and dependent on context and individual subjectivity. I acknowledge that reality can be constructed by language and discourse, but my position is

that the experience exists of itself, and therefore I rejected Narrative and Discourse Analysis (Smith, 2008).

As my topic is largely new and under researched I am interested in a wider view, finding out what there is to know rather than focussing on theoretical debate or question. Narrative Analysis and Discourse Analysis are constructivist, concerned with depth and would not enable me to have a wider view (ibid). Thematic Analysis is useful when investigating an under researched area in presenting an accurate account or representation of the entire data set, which sacrifices depth for width - although maintains a rich overall description (Braun & Clarke 2013). Interpretive Phenomenological Analysis and Thematic Analysis seem similar in that they are both flexible, however I was concerned that the voice of participants could be lost with Interpretive Phenomenological Analysis as the greater the level of interpretation, the better the study is considered to be. Interpretive Phenomenological Analysis is ideographic (Smith, 2008) studying one case thoroughly before moving on to the next. This doesn't suit my study, as I want to view and make sense by viewing the whole and being able to move backwards and forwards through the data, which is better suited to Thematic Analysis.

As a person-centred practitioner I am interested in the "experiences, meanings and realities" (Braun & Clark, 2006.p.81) of my participants. Thematic Analysis can fit with this essentialist realist position, because it isn't tied to a theoretical framework. It suits my study because I can use it to "reflect reality and to unpick or unravel the surface 'reality'." (ibid).

Interpretive Phenomenological Analysis is inductive, whilst Thematic Analysis can be inductive and/or deductive which further suits my study in that I want to accurately and cleanly represent participant's experience in a bottom up analysis, and also use data from other sources in a top down analysis (Smith, 2008). Thematic analysis is flexible and allows for the use of a range of sources, to expand study past the individual experiences (Guest et al, 2012.p.17).

As I have a diverse range of sources in my study I wanted the flexibility that Thematic Analysis allows, where codes and themes can be created using a variety of sources of “evidence within the area being studied, or from your gut feelings...as well as from those being observed or interviewed” (p.62 Grbich 2012).

Ethical issues

Prior to commencing my research project I sought approval from the Ethics Committee (Appendix 2), using the Code of Ethics and Conduct (British Psychological Society 2009) and the BACP Ethical Framework for Good Practice (2013) as guidance when designing my study.

Ethically there were a number of issues to consider. Firstly I would be using my own clients and because of role power (Proctor 2002) inherent in the client-therapist relationship I needed to minimise the potential risk of exploitation, for example clients might feel pressure and agree to participate in order to please me. This was a particular issue with the design of my study, as I would need to invite only participants who had used an iPad in session with me as I had only a small number from which to choose. This had the effect of making each potential participant a more precious resource, which could unconsciously be communicated by me.

As a person -centred practitioner I wanted to ensure that I did not unintentionally encourage or direct clients towards using the iPad. Introducing it with it with clients who did not already use art could have been imposing my agenda. I also felt I needed to exclude a number of younger clients from my study , for example one child who was particularly destructive. I felt that concern for my iPad could render me incongruent (Rogers 2003) and potentially impact negatively on the session.

In order to ensure that I maintained beneficence and non-maleficence (BACP 2013) I carefully considered within clinical supervision which clients I would introduce using the iPad to, and which of these I would invite to participate. This was to ensure that I only included clients for whom participation would not impact on their therapy. Initially I

considered contacting past clients as a way to prevent affecting the therapeutic process, but through supervision decided that this had potential to cause harm in a number of ways. For example clients would need to engage in a therapeutic session with the iPad which could potentially reopen issues. On this basis I decided a number of clients would not be suitable, one actively suicidal client, and a further vulnerable younger client.

I hoped to recruit a range of ages and with younger participants I needed to ensure that I enabled informed age appropriate consent and obtained parental consent whilst maintaining confidentiality. I felt initially that I needed a range of invitation letters and consents, but it became clear that my initial drafts of the invitation and consent forms were too complicated. My ethics application was granted with the minor condition that I should discuss rewording the interview questions and consent form for primary age participants with my academic supervisor (Appendix 3). I redrafted a version, tested and redeveloped this with a sample of four young people, aged 10 -18 years as an informal action research exercise (McIntosh, 2010). I discovered that although I wanted to ensure participants were fully informed, young people wanted much less information than I had imagined. I was able to write a simplified version and used this learning to also simplify my adult and carer invitation and consent forms. (Appendix 4).

Of clients who had used the iPad in session I was able in supervision to identify three potential participants. I invited participants verbally and provided them with information and consent forms at the end of a session so they had time to consider the information at home. All three agreed to participate. I made sure that participants understood they could change their mind at any time prior to beginning analysis. I offered to read through transcripts with younger participants if they wished, or they could have a copy to take home. All participants declined this offer. After the interviews I allowed time to debrief, however the topic did not raise any difficult issues for participants. As I was the participants' therapist I was available in on-going sessions should any issues have needed to be explored.

Selecting and recruiting participants

I wanted to find participants from within my own counselling practice and I used a purposive sampling approach to recruit participants relevant to my topic (Bryman 2012). In this case these were participants who had used the iPad in sessions with me. I needed to first introduce the iPad in sessions before recruiting any potential participants and this process was somewhat more complex than I initially imagined. I imagine the findings may be transferable and therefore have attempted to provide sufficient contextual information throughout (Lincoln & Guba 1985).

I felt that younger age groups would be likely to have a different experience of using iPads to clients from older age groups and was interested to have a range of ages. In my practice I introduced the iPad alongside traditional art materials as one of the resources available. With such a small sample size from a restricted pool of potential applicants a comprehensive range of ages was not feasible. I identified potential participants, dividing into subgroups by age. By using this stratified purposive sampling I could explore "typical cases or individuals within subgroups of interest" (Bryman, 2012.p419), which I hoped would yield a richer source of data. All of those invited agreed to participate. I recruited three participants from my practice, an 11-year-old boy, a 16- year- old girl, and a 48-year-old woman. I recruited one female participant through word of mouth, a 55-year-old therapist. The adult participants were aware of the study prior to using the iPad in a session. Both of the younger participants had used the iPad as part of our usual therapy session prior to being aware of the study.

The interview process

Ensuring that participants feel relaxed and comfortable helps to create the best conditions for gathering quality data (Smith et al 2009). I was able to establish rapport quite quickly as I had existing relationships with all of my participants, three of whom were clients and one a work colleague. I feel that having a pre-existing relationship helped in this study, however I was aware of creating a dual relationship of researcher/counsellor with my clients. I feel this was manageable as my topic carried little emotional risk to participants, however I

recognise a potential for ethical issues in terms of responsibility for the safety of clients and ensuring integrity of client-practitioner relationships (BACP 2013).

I held the interviews in my home in my counselling room. This environment maintained clinical boundaries and was familiar to my client-participants. With my work colleague I offered her a choice of venue and she chose to meet at my counselling room.

Interview schedule

I chose to use semi-structured interviews so that I could compare participant responses. This was important as I was interested in potential differences in experiences and attitudes across a range of ages, for example towards using digital technology. I also wanted a flexible process to allow participants freedom to digress and explore their experience, as “it gives insight into what the interviewee sees as relevant and important” (Bryman.2012. p.470).

I designed a schedule (Appendix 1) using my own puzzlement as a mechanism for generating some questions (Loftland & Loftland 1995). I found that adult participants used questions as a starting point from which they expanded into a number of areas. I used a number of techniques such as ‘follow up’ and ‘probing’ questions (Bryman 2012) to try to encourage participants to elaborate. I found that younger participants generally were not as forthcoming as adult participants. This may be because even subtle influences on children and adolescents can cause a tendency to give socially desirable responses (Crandall 1975) and they may have felt influenced in this context. Alternatively it may have been that the topic was of more interest to my adult participants, both of whom are therapists.

Analysing & writing data

The interviews were recorded and transcribed, and I began analysis by listening to the recording a number of times, checking against transcripts. I kept notes from sessions where I used iPad, made notes from a recording of interviews with four digital art therapists and

notes from one telephone conversation. I felt it was important to my study that I did a complete coding which aims to “identify *anything* and *everything* of interest or relevance to answering your research question within your entire dataset” (p.206 Braun & Clarke 2013). I only became more selective later in the analytic process so that I could minimise bias and explore a breadth of data in my study.

I used conceptual mapping where “word by word, line by line segmentation and fragmentation [is carried out so] that data is meticulously examined” (p.64, Grbich 2012) as this is useful when a broad overview is required. This produced over 600 codes initially, which I then analysed and developed into initial candidate themes (Braun & Clarke 2013).

A disadvantage of conceptual mapping is de-contextualisation, and in order to avoid misrepresenting data, once I had initial candidate themes I returned to the original transcripts to review and contextualise the codes and extracts within the themes. I found this process overwhelming at times, the movement backwards and forwards through the data was time consuming and as highlighted by Braun and Clarke (2013) it took far longer than anticipated. However I feel that this choice did enable me to gain a more in depth understanding of the detail of my data, which has added an important richness to the analysis.

I colour coded by participant, and analysed the data generated from my reflective practice notes and digital art therapy interviews separately initially for reasons of transparency and to minimise bias. However once analysed the separation of data became irrelevant as the themes, which I developed from a practitioner perspective, fell mostly into separate themes to those from a client perspective. Where codes from both concurred they seemed simply to enrich the containing theme. I had 7 initial candidate themes:

1. *Views and attitudes to new/digital technology*
2. *New/digital technology -skills and experience*
3. *Client experiences of using the iPad in sessions*

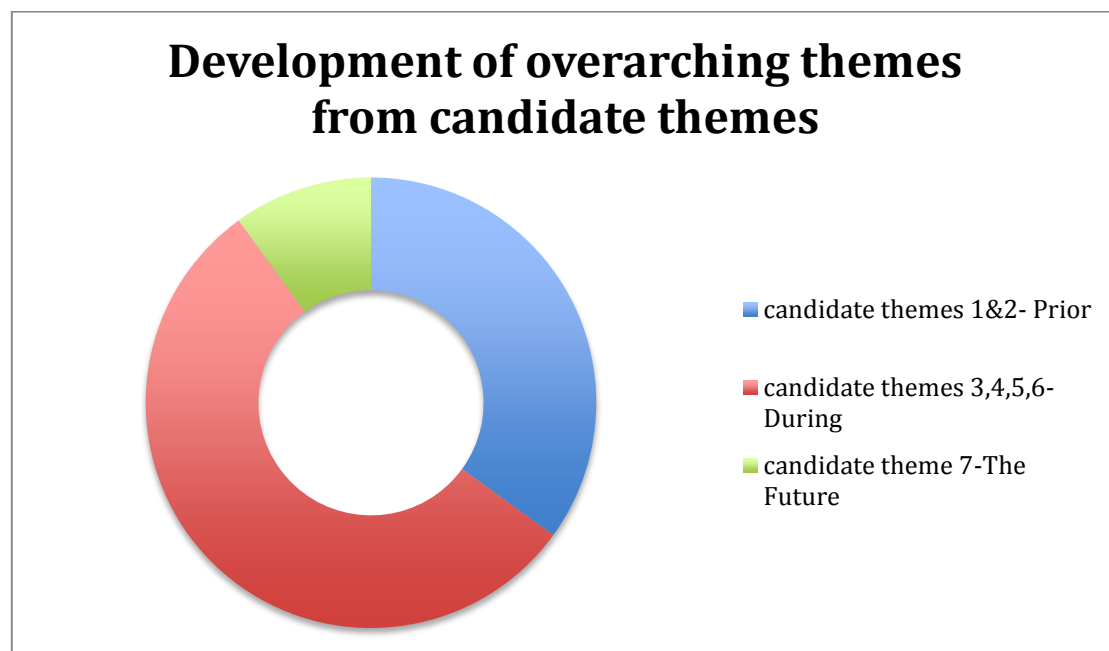
4. *How the iPad was used in sessions*

5. *Digital art vs traditional materials*

6. *Therapeutic-ness*

7. *Therapist experiences/ views/perspective on using iPad in therapy*

From these I then developed three overarching themes, these “organise and structure the analysis ; they...simply capture an idea encapsulated in a number of themes” (p.231 Braun & Clarke 2013) . The chart below shows how the data from candidate themes was reorganised and illustrates the weighting of experiences in sessions, which account for 55% of the analysis.



Prior - attitudes to digital technology

This theme developed from candidate themes 1 and 2, and has 3 sub-themes. It examines the influences, experiences and skills that shape participants attitudes, providing insight into participants’ phenomenological perspective, which shapes their experience of using an iPad within therapy.

During - experiences of using digital technology in therapy

This theme contained the most data for analysis, and is structured with 4 subthemes to explore how the iPad was used, client and therapist experiences and therapeutic implications. I found it frustrating as it was necessary to sacrifice depth in order to cover the breadth of experience in this theme.

The Future - possibilities and implications for digital technology in therapy

As this is a 'thin' theme (Braun & Clarke, 2013) I questioned whether it should be included elsewhere as a subtheme. However I have chosen to present it here separately as I feel it anchors the analysis to current practice. Although 'thin' in terms of volume and detail I feel there is richness in the message conveyed. The data for this theme was gathered mainly from a recorded interview. I did not interview the therapists myself, and this I feel accounts for the difference in volume and detail of data collected.

Findings

I have used a variety of sources as data and to differentiate I have used the terms 'client' to denote data gathered from notes from sessions with clients in my practice, and 'participant' to denote those who were interviewed for this study.

1. Prior - attitudes to digital technology

In developing this overarching theme I sought to understand influences that shape participants experiences of digital technology in therapy. Influences consisted of generational and cultural influences, and also experience and skills levels. These were developed into three subthemes:

1.1 Prior experience and skills

1.2 New technology isn't new for the Net Generation

1.3 New technology : fears and mistrust

The analysis highlighted a distinctive split, illustrating fundamental phenomenological differences between adult and younger participants.

1.1 Prior experience and skills

There was significant difference in the experience, ownership and skills levels between participants. Both Bobby and Zara own a tablet and describe using it as easy. For them it is part of their everyday life captured here by Zara:

"I'm on it the majority of the time...for social networking and stuff" 23.

This is in contrast to Jaida and Paula as neither had used an iPad prior to the session. Being able to switch between different Internet devices is easier for younger participants (Oblinger & Oblinger 2005). Although Jaida and Paula use the Internet regularly for shopping and research, they felt they lacked knowledge and were less confident using a new device. This extract captures uncertainty about functions and hesitation using terminology, i.e. 'tablet':

"perhaps because I don't know, I still don't know much about this ... tablet? It's really easy to delete it?" 1996 Jaida

Bobby and Zara clearly felt competent using digital technology. It is so much a part of their everyday life that the concept of using digital technology as a skill seemed meaningless for younger participants as activities are carried out with little attention or thought. In contrast adult participants feel less competent, and are less able to transfer from using a computer to a tablet. Lack of skill leads to strong feelings of fear for adult participants described by Jaida:

"I panic if I touch the wrong button, I don't know what to do" 1213.

Not knowing what to do creates a lack of confidence and a reluctance to use digital technology at times. For example Jaida described how with a new device things take longer, it takes time to get used to. The extract here illustrates how long the process can take:

"but I don't use it as a phone. I use it to check my emails and, erm just to play with it ... I'm going through the process. What's it been two months? I've just started to think about maybe transferring the chip whatever it is into the new phone" 1185.

This shows how for adult participants getting used to new technology is stressful and takes effort (Prensky 2011). This contributes to a reluctance to use it which in turn compounds the lack of confidence, illustrated by Jaida below:

"I don't feel neither confident or competent, because I don't give myself the chance to develop that confidence or competence" 1244.

There was some conflict between adult participants' attitudes to digital technology, and their experience. Their self-concept of 'not competent' was challenged by the experience of using the iPad, which was easier than expected. Their negative preconceptions are highlighted by the surprise they expressed, captured here by Paula:

"but I LIKED it ! And it was easier than I thought it was gonna be" 2398.

Both Jaida and Paula expressed a desire to be shown how to use digital technology, in contrast to the net generation who learn experientially (Oblinger & Oblinger, 2005), however once shown they quickly gained confidence illustrated by Paula :

"when someone simplified it for me, I wasn't scared of it anymore. And once I started using the computer for doing the invoices and quotes and stuff like that I thought, oh my god I can't believe I've been doing it on that bloody thing for the last six MONTHS" 2624.

1.2 New Technology isn't new for the Net Generation

When analysing the data one of the first things that struck me was the difference in response to my first question about their relationship to new technology. Paula and Jaida had much to say on the topic, over 100 lines each. They described similar feelings of detachment, reluctance and disinterest (1125) as well as fear and anxiety:

"I don't like it... no, no , actually I'm going to change that. Its not that I don't like it, it scares me...it makes me feel stupid " Paula 2236.

However the question seemed to confuse Zara and Bobby, and in stark contrast their responses were minimal, illustrated below:

“I’m on it most of the time” 24

“it’s a bit easier to use like than writing and drawing” 456.

Zara and Bobby’s responses related to function, whilst Paula and Jaida’s were distinctly affective. This significant difference illustrates how for the Net Generation new technology is a meaningless term. When asking “what technology they use, you will often get a blank stare. They don’t think in terms of technology; they think in terms of the activity technology enables” (Oblinger & Oblinger 2005).

As new technology is part of their world it is simply considered in terms of function rather than evaluation. For example in my experience indoor plumbing has always existed and therefore it’s difficult for me to conceive of a relationship to it. For me I have no need to evaluate the concept ; it is simply part of how my world functions. In the same way new technology is part of how the world functions for the younger participants.

To explore this further I informally interviewed two teenagers and two adults, see below:

Table 1.

What is your relationship	to indoor plumbing ?	to new technology?
Teenagers/ Net Generation	<p>Its useful</p> <p>I use it all the time</p> <p>Don’t know how anyone existed without it</p>	<p>Its useful</p> <p>I use it all the time</p> <p>Don’t know how anyone existed without it</p>
Adults/non-Net Generation	<p>Its useful</p> <p>I use it all the time</p>	<p>Confusing</p> <p>I get angry</p>

	Don't know how anyone existed without it	Don't know enough about it
--	--	----------------------------

The responses in blue highlight generational differences and illustrate the point clearly; new technology isn't new for the Net Generation.

It is important to recognise that when we talk about digital technology the meanings and understanding between generations may be very different. According to Oblinger & Oblinger what we "might consider 'new technology' such as blogs or wikis, are not thought of as technology" (2005) by the Net generation. For example instant messaging, or IMing isn't thought of as technology, but as an action and is treated as a verb. Interestingly texting or IMing is described as 'talking' by the Net Generation (ibid). Understanding this can help shape how we seek to use technology in therapy, and also how we talk about it so that we can communicate more easily with clients.

Jaida and Paula saw differences between themselves and the younger generation. Describing digital technology as the language 'they' use (2138), illustrates a feeling of difference between 'them and us'. Seeing digital technology as more relevant to young people is common, and research links the digital divide to age, opportunity and experience (Edge et al, 2005).

Although Paula felt that age was relevant she felt the "mind-set on technology" (2514) was a more important influence on how you think about and use new technology. Seeing herself as from a non-digital generation raised strong feelings for Paula, illustrated here when she describes how new technology makes her feel:

"It makes me feel stupid and old and, some of it makes me feel like, oh is this really necessary I could have done this in half the time, the old fashioned way. Which makes me feel even older when I say things like that" 2242.

Feeling older and of a different generation is perhaps exacerbated by the pressure and criticism from family which both Jaida and Paula experienced (1470, 2316). Expectations and criticism from children and a defensiveness was expressed as 'not bothered' and 'boredom' by both Paula and Jaida is captured in these extracts :

"when my children start to show me things they get frustrated with me anyway cos I can't pick it up like that (clicks fingers) but also I think 'I'm not really bothered' I don't want to learn how to" 2315 Paula.

"Oh his phone does this and his computer does that, and I'm like (yawning) , yawning " 2335 Paula .

This boredom and disinterest seems to me incongruent (Rogers 2003) with their strong feelings and is likely to be a distortion and defence against criticisms and their also their fear of digital technology. This may make it more difficult for adult clients to engage with digital technology in therapy.

1.3 New technology: fears and mistrust

Descriptions of new technology as scary (2230) and not to be trusted (2859) was common to adult participants. The fears related to a number of issues, which contributed to their reluctance to use and integrate digital technology (Prensky, 2012). Jaida graphically described her fear here:

"don't know how to, erm how to use it, even now looking at it and I can just see that red square and erm everything else is dark , and its kind of there, its that there is something magical and mysterious ...[and]fear and anxiety" Jaida 1544.

A further pattern was of fear related to not understanding digital technology, for example Jaida described feeling panic when she touched the wrong button on her phone (1214). There was also fear of loss, of a nostalgic idea of childhood (2777) and of social interaction

(2261). There was also a fear of loss of certain qualities or pleasures in how we used to live, highlighted by Paula:

"I love the smell of a book I can't have a Kindle... I can't have a Kindle...there's nothing nice about that ... I wanna (sniffing) smell a book, I wanna walk in a bookshop and like...touch it" 2687.

Adult participants were also afraid of digital technology breaking easily or going wrong, which Prensky (2012) states is common amongst digital immigrants. Paula remembers when she first worked on a computer and recognises that feelings evoked in her then are still present now:

"Because I thought it was VERY complicated and VERY clever, and much cleverer than me and it was going to trip me up, and I probably, and I still have a little bit of that. As far as, like 'cos the iPad is like new, 'cos that computer was like a monster in the corner and now they are like these tiny little things" 2638.

This illustrates a distrust of technology that was present for both adult participants and myself (2218), but noticeably absent with younger participants. This again highlights differences in attitudes between generations as the Net generation don't share these fears (ibid). The extract from Paula captures the idea that digital technology isn't trustworthy:

"no actually no I don't trust it. I don't trust it for that but I also don't trust it for, it took me ages to know that if you send an email it actually gets somewhere" Paula 2284.

But Paula also expressed a more deep-seated mistrust of digital technology which echoes a prevalent narrative in society that digital technology is harmful captured here:

“well I KNOW that not all of it is to our advantage. And I think even some of things that we think are to our advantage NOW in years to come will turn out to be quite detrimental” 2273.

Concern with new technology isn't a new phenomenon; in the 1930's older generations were distrustful of electricity (Burgess 2003). Younger participants were not concerned that new technology is harmful, whilst adult participants felt that digital technology is addictive (2661), unhealthy and damaging children (2119, 2663).

According to Buckingham (2009) the growth of digital technology has “been marked by a kind of schizophrenia that often accompanies the advent of new cultural forms. On the one hand these new forms are seen to have enormous positive potential...while on the other they are frequently seen to be harmful” (p.125).

Illustrating the other side to the schizophrenic attitude towards digital technology (ibid) is participants' recognition of the positive potential. Jaida for example describes the iPad as a mobile library (1260), whilst younger participants already see the possibilities and use technology to do things that wouldn't otherwise be possible (87).

2. During - experiences of using digital technology in therapy

This theme explores the experience of using digital technology in therapy mainly focusing on the use of the iPad. I have split the analysis of using digital technology four subthemes:

2.1 How digital technology was used

2.2 Client experiences using the iPad

2.3 Therapist experiences using the iPad

2.4 Therapeutic implications

The subthemes are arranged around the process of using digital technology. Due to the design of this study my session notes form the basis for analysis in section 2.3, where I have aimed to offer a transparent and reflexive account of my experience.

2.1 How digital technology was used

An exciting discovery for me was the range of uses for therapy digital technology has. I initially felt I needed to have a one specific art app to introduce the iPad into a session and there are a number of reasons for this. Firstly the limited view I had at the start was due in part to my lack of knowledge of using an iPad, being unfamiliar with its uses I simply didn't know what was possible. My background as an arts counsellor made it automatic for me to first consider using an art app. Art is familiar, in my realm of understanding and therefore an easier learning curve. Learning occurs best when linked to personal interest and past experience for the learner to make sense of it (Cohen & Levinthal 1990). Therefore a therapist who is an on-line gamer might choose gaming as a first step into introducing digital technology into sessions.

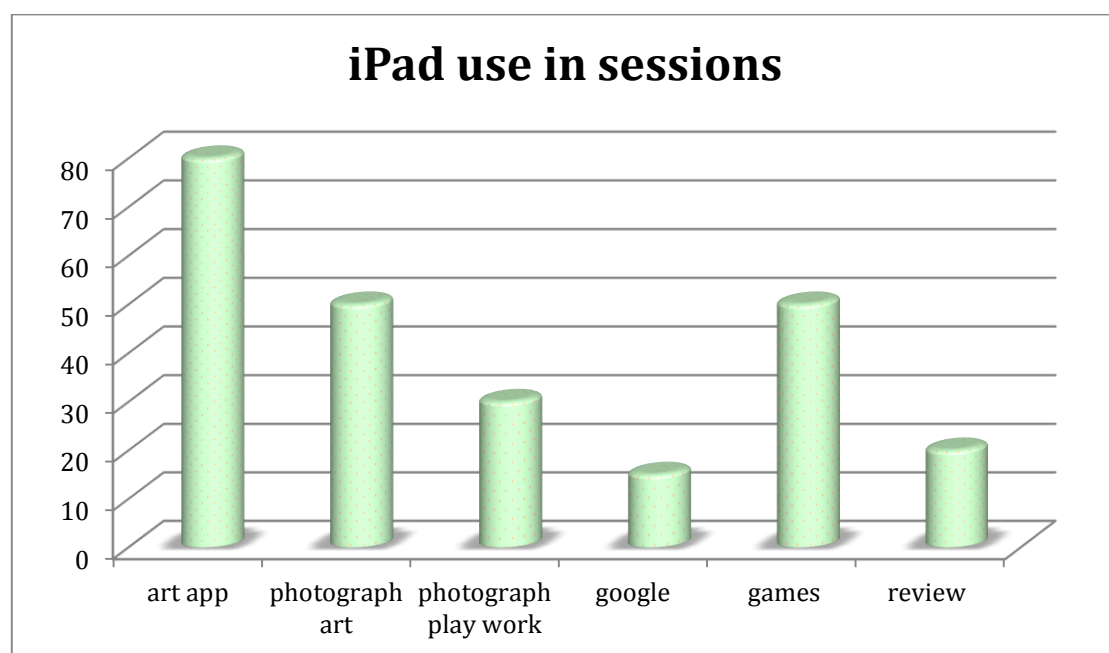
However one of the main reasons I chose an art app was that a variety of uses didn't occur to me. This particular art app replicates reality quite closely and therefore it was easier for me to engage with. This highlights that I am in a different non-digital paradigm to the Net Generation. I am a digital immigrant, and whilst digital immigrants are able to learn and adapt, using technology is not second nature. This can be seen in the frequency of use by participants in sessions:

Client	Age	Sessions iPad used
Bobby	10 years	12
Zara	16 years	2
Paula	45 years	1
Jaida	50 years	1

Drawing on my session notes I have noticed that that the majority of my younger clients use the iPad in most sessions. The low frequency with which adult clients use the iPad is indicative of the technological paradigms. Zara is an unusual exception having made a conscious decision to practice skills using traditional materials:

“I took like art at school so I try and spend my time drawing like even if it’s not coursework just try and spend my time to practice like and stuff” 374

I imagine that clients might also use the iPad in order to build skills. For example clients who don’t have access to digital technology at home may choose to try it in the safety of a therapeutic environment. Noticeably my younger clients have all used the iPad in a variety of ways with me whereas adult clients have not. The variety of ways in which the iPad was used is illustrated below:



Across all sessions in this study the iPad was used most with the art app, although this may be due to how I introduced it as a resource alongside art materials. The next most common use was games and photographing artwork. Photographing artwork, sand tray, and scenes has proved so useful that I have now adopted this as part of my practice, and routinely offer the iPad to clients to photograph their work. An additional benefit to me as a therapist is

that I can bring images on the iPad to clinical supervision, which has helped me improve my practice.

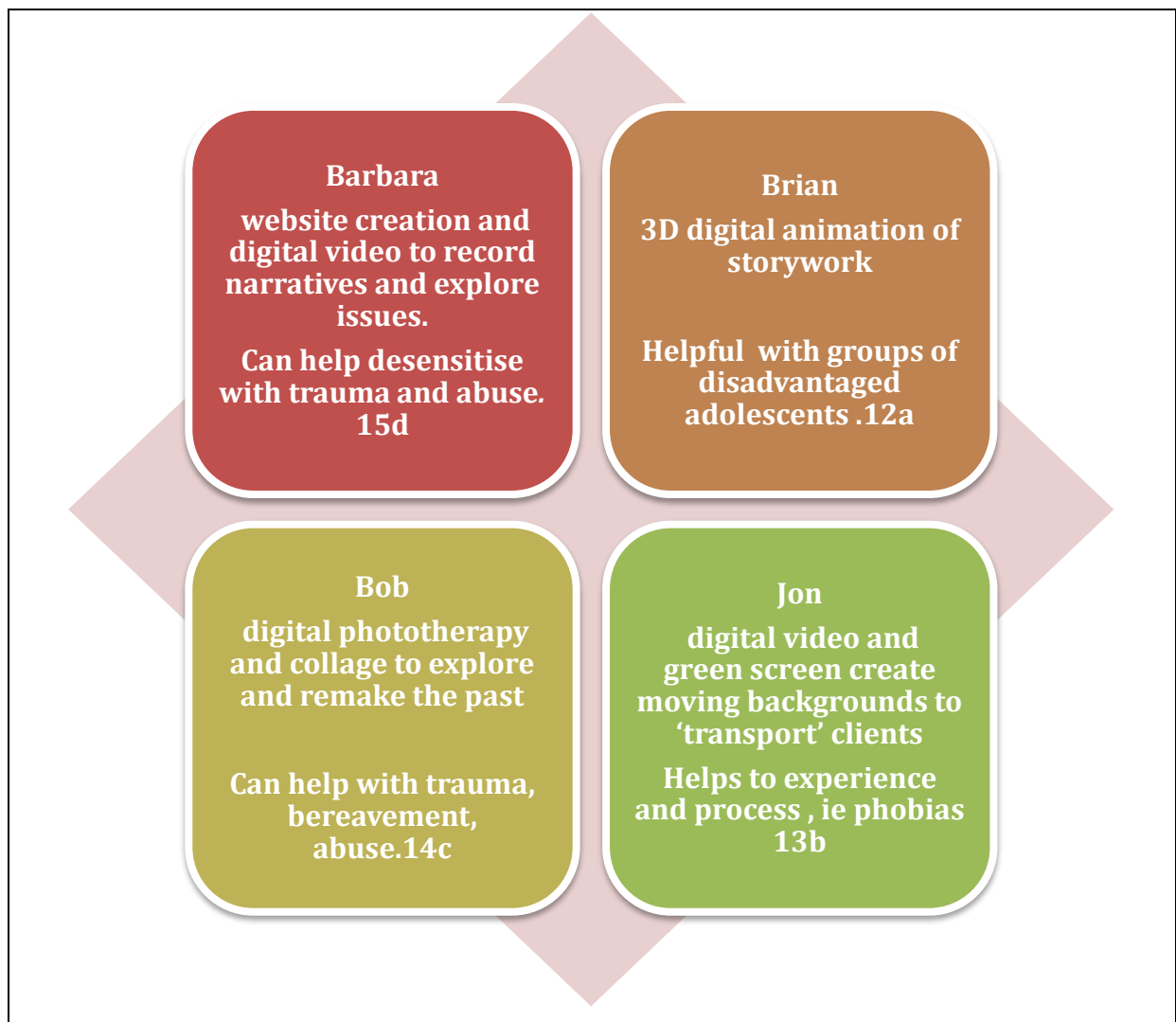
Clients have found reviewing useful using photographs of work. Bobby felt that using the iPad in this way helped him need fewer sessions, summed up in the extract below:

“I wouldn’t have had the progress that I’ve had now... ‘cos like I think I would be coming for loads and loads more sessions because, erm like I wouldn’t be able to look back at what I did and I’d still be like going on with the same stuff as I was going to say before... it sort of helps like, get on to a different thing” 640 and 1009.

Using the Internet in therapy had not occurred to me until one client suggested it, she spontaneously googled to show me what she was scared of, it felt surprisingly natural to me:

“she googled and found the crying angels. The iPad was simply part of the session, a useful tool.” (n)

I am limited to using only an iPad in therapy, but the wider variety of digital technology use identified in this study is illustrated below:



2.2 Client experiences using the iPad

Overall using the iPad was positive for participants, nothing negative emerged from the experience. Creating images on the iPad was experienced as easier in a number of ways, participants found using tools make the image easier, quicker and more versatile to manipulate than in real life (1803). Adult participants found the speed a revelation (2438) whereas younger participants expect speed and therefore using traditional materials feels slow in comparison. This clearly suggests that we must offer digital media to younger clients otherwise we may hinder their process. Bobby describes how this feels:

"[paper is] A lot harder, it would have taken me a lot more time and the drawing wouldn't have been as good" 211.

For the younger participants using the ipad feels natural and enjoyable illustrated by the extracts below:

"It's like more relaxing and laid back cos with like paper you actually have to concentrate" 764 Bobby

"Like I dunno it just felt like easy and funnner, and more, like, just like more easier and funner" 176 Zara.

In contrast however adult participants felt self-consciousness. The heightened state of awareness captured in the extract below is reminiscent of approaching something dangerous:

"I was constantly watching myself and judging myself in as- how do I approach it" 1590 Jaida.

Participants discovered that their fears were unfounded; it was easier than imagined (2740). This extract highlights negative expectations about competence and Paula's increased confidence after the session:

"I felt a little bit like when you do something new when you're a child, and you think oooh I can do this... it can make you feel a bit clever - well it did me anyway" 2426, 3054.

Describing the experience as a child-like experience was a pattern amongst adult participants. The immersion and vividness of experience is captured in Jaida's description:

“A very early experience with, with the world. It is, you know looking at the wonderment of the child, with for instance looking at a colourful ball - it’s there, it’s really focussed, its clear, it’s visible. It’s so real, and that’s the kind of experience I had with the tablet” 1856.

Having permission to play contributed to the child like feeling (1585), and was reminiscent of a parent-child relationship illustrated below:

“Jaida: So it’s almost like a child-parent relationship (laughing)...if I needed help you would be there and you would, it was in my head you know, you would say (laughing) Ani: There , there (laughing)” 1370.

Experiencing a symbolic parallel between childhood experiences and therapy was recognised by Winnicott (Casement 1997) and it may be that the experience of using an iPad in therapy facilitates or provides opportunities for experiencing the therapist as a reparative parent. Child like play may enable clients to access deeper material, or provide relief from adult responsibilities.

“I could get messy without getting messy... because of that, this is the- the word responsibility comes in. I didn’t have to worry about making it messy” 1911

Jaida felt her intensity of engagement was also due to focussing on a smaller digital area than with paper. She felt she had less interaction with the world around her whilst using the iPad (1720). This interesting point may partly explain why digital technology is of benefit with clients who are autistic (Malchiodi 2009) as it may narrow sensory stimulus.

Jaida also found using the iPad tactile and comforting (1323). She described a visceral (1561) physical experience of colours going through her fingers illustrated in this extract:

“the touch and even when I talk about I can feel little tingle of excitement because I can feel it going through my finger tips and with the visual with the colours it ” 1345.

This experience of digital media as tactile perhaps challenges art therapy's reluctance to engage with digital media highlighted by Austin (2009) which he suggests originates in the idea that using touch with traditional materials has a "privileged hold on creative, mental and psychological processes" (p.84).

Participants highlighted that with paper the drawing process is different and that the image on paper seems to hold more meaning than a digital image (1973). This perhaps relates to paper being more tangible but also to the time (210) and effort invested in the process:

"I am putting more of myself in image on paper" 1793 Jaida,

"some things are best on paper because they are more personal" 965 Bobby.

This suggests a reduced attachment to digital images and may explain why all participants said they would feel less concern if a digital image was accidentally deleted (2962) or if someone outside of the session accessed it. This suggests a therapeutic benefit as clients may feel less vulnerable when working digitally. Jaida's extract captures the difference in attachment with a digital image:

"no, no I wouldn't worry about that I mean even something about it being more impersonal even if you put my name, it wouldn't have the same resonance as if ...it was my picture, my image that was made in person being put up somewhere. Even without my name, that would have been much bigger- would have had much bigger impact than putting this up somewhere" 1972 .

2.3 Therapist experiences using the ipad

I felt nervous when first using the ipad in therapy, which relates to lack of competence and confidence. My inexperience also meant that I often only discovered what I didn't know

when using it in session with clients. I felt awkward and anxious, captured here in this extract:

“When I started to facilitate I felt nervous... I don’t think I can save the image and if I touch it accidentally it could change the image ... and I realised I hadn’t explained this to JG. The screen kept power saving and we had to nudge it occasionally” IV.

My lack of competence also caused me to lose one clients image when he used a new app I was unfamiliar with:

“he created a being thingi but because I didn’t know how to save it we lost it. I felt terrible - he just shrugged and said he would make it again. He did, it was slightly different and we tried to save it but lost it! But then we saw the original had been saved in the gallery - he laughed, he made a third thing and we saved it”. (ref)

The impact on my client seemed minimal, perhaps because of the reduced attachment to digital images mentioned earlier. This incident highlighted to me the importance of feeling comfortable and competent with digital technology. I realised that by being “unschooled in and overwhelmed by the latest technological tools” (Austin, 2009. p.38) I could impact on clients’ process. Further concerns caused by my inexperience emerged, for example not knowing how to lock images in closed folders, and wondering how to prevent clients scrolling through my work on the ipad highlighted here:

“perhaps I should have an alternative desktop that I open for clients, with restricted access - is this even possible?” c)

I was also concerned in other ways about using my ipad and I strived to ensure I maintained beneficence (BACP 2013) and reduce any impact on client’s process. The cost of the iPad was clearly a factor illustrated here:

“worried about breaking ipad. (this is my ipad and not a dedicated ipad - a risk for me. Would I also worry if it wasn’t mine? I think so - an expensive item)” 1070.

An unforeseen concern for me with my ipad was that of hygiene, which is captured in these extracts:

“he used the loo, and didn’t wash his hands, my response internally was that I didn’t want him using MY ipad ! “ h),

“she picked inside her nose...I didn’t want her to use MY ipad with dirty hands ! Then I realised that I hadn’t disinfected it from the earlier client! Not even sure how to disinfect an ipad” l).

I now risk assess clients before making the iPad available in order to prevent my concerns impacting on the therapeutic process, and I have also learned to keep hygienic wipes in my therapy room!

I felt pleased to discover that the same skills worked when facilitating with the iPad (2200, XVII), although I began to find facilitating a struggle in some sessions which is captured in this extract:

“he played and I sat alongside commenting. I found this challenging at times...also difficult for me to engage with him. I found myself switching off emotionally...I did force myself back trying to empathise” f).

Difficulty in engaging suggested incongruence (Rogers 2003) on my part. My awareness grew as I noticed at times a reluctance to use the ipad. This reluctance led me to become incongruent and directive within sessions which is highlighted in below:

“he asked if I had games on it ...I stiffened. I answered no I didn’t think so- and when he looked he found some, seems I had ‘forgotten’ that I had any installed... I found myself directing him towards an art app ” b), e)

This didn’t make sense to me, I do work with play materials so why was I the reluctant? I recognised an unconscious belief around digital gaming. I illustrate my process in this extract:

“There were lots of actions and commentary that could be metaphor, which I could reflect back - for example ‘I keep missing the danger signs’, ‘I can go back and do it again’...‘I’m not giving up’, etc. So why do I not like this ‘play’ in therapy? I think it isn’t therapeutic!! My unconscious material and prejudice. Cultural? My paradigm?” g).

Although I agree with an emerging view that digital gaming can actually be beneficial (McGonigal, 2012) this extract revealed a narrative operating unconsciously. This cultural narrative is one that views digital gaming as damaging for young people (Mail Online, 2014). This narrative also gave rise to a dilemma captured here :

“I started to wonder what mum would think if he told her he’d sat and played with ipad [all session] ?! What if he wasn’t allowed to play [with one]? Need to think this through” f)

Other dilemmas were raised with regard to on-line use: what if a client downloads a virus ? What parental controls or filters should I have to control content? Should I limit searches? What games and activities are suitable and how do I decide this for each client? (d).

Contracting is clearly important here so that clients are clear on the boundaries within a session. That many of my clients are more competent than me, for example being able to bypass internet filters, is a further complication. I do not yet have answers to these issues

but these are important questions to answer, and ones that Coyle et al (2007) suggests we, as therapists need to start to explore.

2.4 Therapeutic implications

The property of being able to use digital paints and such without getting mess on hands or clothes seemed beneficial. For example one client was dressed smartly and would not have used traditional paints, therefore using the iPad enabled her to engage creatively in ways that she would not otherwise have done.

However I feel there is a therapeutic value with traditional materials as clients can experience mess and the process of cleaning it up. This in itself is a metaphor for the therapeutic work that clients can take into their outside world (Green & Drewes 2014).

Practicality appeared also in relation to participants being able to get straight down to the task, the variety of tools and resources were literally at their fingertips. The process of drawing felt less rushed and quicker with the iPad (216). Participants found it easier to get the colours, tools and digital paper or backgrounds that they wanted to use, there was no need to actively organise or look for materials, Zara describes this:

“all just there...it’s just like instead of organising, instead of like spending ages looking for the colour you want you can just click on, like if it was just hiding under a bit of paper of something” 245

This seemed to allow clients to get straight on with the work therefore allowing greater therapeutic time within a session. However as with experiencing mess, perhaps the task of organising and choosing materials also has a therapeutic value in itself, which is lost when using an iPad.

Being able to change things easily and quickly has potential benefits for example providing an opportunity to experience feelings of power and mastery. But Paula also questioned the value of the process of using digital materials highlighted here:

“does actually picking up something that’s like a crayon or paints or anything, would that be more rewarding as a process?... I’m wondering if through that process you’d gain more from it” 2797.

However one significant distinction emerged, that of the ease with which you can undo or fix mistakes with digital art (50). Participants liked being able to undo mistakes as there was less worry about ruining or messing up work.

With the iPad mistakes aren’t visible whereas on paper even small mistakes show (53) and Zara describes the difference this makes:

“with the iPad you can just do something and if you don’t like it you can just rub it out and just do it again and it’ll be alright . But on drawing it’s just like if you don’t like it you kind of have to go over it a lot to try and cover up the mistake” 223.

This means that when using the iPad mistakes matter less. Although removing mistakes could suggest lack of acceptance it seems to that when using the iPad perhaps the opposite is true. Participants experimented, took risks and could “get stuff wrong” (IX). Jaida’s extract captures this:

“I’m not saying it’s less serious but on one level... I think, erm what it did, it dissolved my inhibitions more and or quicker than paper would.” 1877.

This suggests an experience of some quality akin to Unconditional Positive Regard (Rogers 2003) when using the iPad in therapy, which increases spontaneity and creativity. This has clear implications for therapy as fostering creativity can promote mental health and therapeutic growth (Cropley, 1990).

Adult participants described feeling safe (2885, 1376). By having experienced an absence of threat (Rogers 2003) in the session their self concept in regard to digital technology was able to change to one of 'digitally competent' allowing them more positive experiences with technology. Jaida for example described feeling really excited and wanting to use a whiteboard after having used the iPad (1502). The extract below captures this change for Paula:

"Yeah definitely actually ... at the weekend... I went 'oh can I just borrow it for a minute then please' ... I did it and it was incredibly simple" 2551.

Bobby found it useful when he didn't want to draw or write preferring to use the iPad to google or take photographs (478). He also found it useful when he didn't want to talk as he could use the iPad to draw or write (735). This suggests that the variety of uses available with an iPad supports and facilitates a client's ability to make therapeutic choices. In one session Bobby created a scene using an Emperor penguin to represent himself and then used the iPad to google penguin facts :

"I searched up what they actually looked like, to get a rough idea if I was right or wrong" 619

This was a turning point session for Bobby as he was able to identify qualities such as 'adaptable', 'clever', 'strong', and incorporate these into his self-concept. This illustrates therapeutic work that could not have been facilitated without digital technology.

All participants felt that using the iPad was helpful. Jaida felt that using the iPad could be more therapeutically supportive at times (2041) whilst Zara felt it somehow helped her process although she couldn't explain how (162).

3. The Future - possibilities and implications for digital technology in therapy

Data in this theme is gathered from therapists who are currently using digital technology in therapy in a variety of ways. There are no sub themes in this section, but there a number of current issues are raised, and important implications for the future of therapy are highlighted such as a commitment to change, self awareness, and transcultural practice.

Of the four digital art therapists in the interview all had used technology as part of their work prior to using it in therapy. Barbara used digital recording equipment as part of performance art (3), Brian was a digital illustrator for twenty years (5), Jon has an electronic arts background (8) and Bob used digital technology as a photographer (10). This was unsurprising to me as therapeutic specialisms are likely to evolve from our interests and experience. It is clear from their descriptions that they adapted how they originally worked with digital technology into digital art therapy. By using their experience and expertise with the medium, in much the same way that an artist might retrain as an art therapist they were able to develop unique interventions and tools. For example Jon (8) worked originally as an artist with digital audio-visual media. As a therapist he now projects moving images onto a green screen enabling clients to experience alternative scenarios. His ease and understanding of the medium enabled him to develop this intervention. This echoes an earlier point, that for digital technology in therapy to work well, therapists need to be comfortable with it:

“it has to be natural for therapist ... therapists need to be comfortable using it ... needs to be a fluid process - so learn how to use it! “ (23).

It was surprising to me however that of the four therapists, three had made an active effort to learn how to use technology. In other words even though the level of skill with digital technology was higher than average, as digital immigrants an additional investment of effort was needed. This illustrates a commitment and willingness to embrace and incorporate digital technology, illustrated here by Bob’s dedication :

" [Bob] took a year long sabbatical to learn how to use digital equipment and switched over" 10.

Interestingly even the one younger therapist of the four felt that he too had made a commitment to learn and change, described in this extract :

'I don't consider myself a technological person, I made the change" 50.

This illustrates how even though he is a digital native and therefore more at ease with digital technology, he too had to make a commitment to learn and change. It suggests that digital natives also need to develop skills with new technology - it may be the their first language but perhaps they do nevertheless need to learn to speak it.

The technological deterministic view that technology is changing was clearly present. Technology is changing our practice, but it is also changing us.

" It's having an impact on our psyche...we are evolving, gravitating towards it...we are evolving with it" 43-47

Presnky is clear that he believes that digital technology is making us better and even wiser (2012), whilst others consider that it is making us less empathic and damaging our memory (Kendall 2013). In terms of my own practice I would say that using digital technology has widened my vision and imagination - I have seen that more things are now possible using digital technology; therefore I am stimulated to imagine more possibilities. Some change is visible in my practice. For example when a child was trying to describe a character from a Japanese cartoon I asked if she wanted to show me and she used the iPad to google the character. This felt a useful and easy intervention, one that supported the clients direction, and one that I would not have conceived of a few years earlier.

Jaida was reluctant to use new technology but after using the iPad she found she had changed. She described feelings of excitement and of wanting to use digital technology:

"I haven't used it but when I saw it my first reaction was - I was so excited ! I just wanted to go in there and try it out, and I did see K-- working with it and I envied her, she was drawing something and I thought I wanted to push-[myself] to do that"

1505.Jaida

This illustrates the social and cultural shift that we are experiencing, and highlights a willingness to become fluent with digital technology. Brian below captures this:

"if we aren't comfortable with technology we will have problems with what is coming, we'll be left in the dust" 48.

This extract also expresses the idea that change is inevitable whilst graphically hinting at a recognition of aging and death. The ideas of aging and the inevitability of a new generation are evident here in a comment about the American Art Therapy Association:

"as the membership changes (becomes younger) they'll automatically be using it more" 26

This highlights recognition that digital technology is an everyday part of life for younger generations, and therefore we do need to become experts in this new media (31). We need to use the language and media of our clients. This extract captures Jaida's recognition of the need to adapt to our clients:

"...with their need and process because young people especially young people nowadays I mean , I'm pretty sure they would choose the tablet "2099.

Digital technology is increasingly recognised as a relevant medium in therapy (Malchiodi 2009), but digital technology is a rapidly developing field. Malchiodi, a prominent advocate of digital technology in art therapy describes her previously published ideas as laughable in the face of current technological developments (ibid). Even the iGeneration's use of digital

media is already leaving the Net Generation behind (London 2010). London also points out that clients in the future are likely to be open to cutting edge therapeutic interventions such as using virtual worlds or avatar therapy. It is important therefore that as therapist we do pay attention to technological developments and micro generational changes “because very soon these young people are going to become our clients. If we want to help them, deliver therapy to them...we will need to understand their unique relationship to technology, and as clinicians be prepared to harness technology” (ibid p. 33). This clearly suggests that we must invest ourselves and embrace digital technology if we are to be effective therapists in the developing digital world.

However in order for us to incorporate digital technology into therapy we need to understand our own relationship to digital technology and recognise our blind spots. Nagel et al (2012) highlight this point by asking “ How would most of us react (at least the unseen reaction) to someone telling their story through an avatar in a virtual world? Would you be open or would your biases be immediately obvious? Would the fear of the technology itself keep you from joining your client?” (p.26). Through this study I learned that in spite of my openness to digital technology in therapy, I still have blind spots, these caused me to become incongruent and to recognise that I had unconscious prejudices.

“I inadvertently left the ipad in the room, and when he noticed it I thought OK. He was excited and said he'd used one before, he asked if I had games on it. My internal response was that I stiffened, I think I am prejudiced towards games” b)

As a person-centred practitioner counsellor congruence is a necessary condition for therapy (Rogers, 2003). Recognising cultural and media influences and how generational situatedness has shaped my attitudes towards digital technology may be as important to my self-awareness as exploring childhood experiences.

But in spite of our generational reluctance at times to engage with new technology (Prensky 2012) it seems that therapists are responding and the recognition of a growing awareness and movement towards technology is captured here:

“there is a hunger for it from other therapists...now is a good time to study the use of digital media in therapy” 39.

This highlights current debate about the need for studying the use of digital media. The debate highlights how use of digital media has further implications for therapy in terms of multicultural and transcultural awareness. Lago (2011) suggests that exploring the use of “communication technologies in counselling training could aid transcultural understanding” (p.19). Merz Nagel et al (2012) are critical of Lago, suggesting he is slightly missing the point that cyberspace “transcends culture while being its own culture” (p.27). They suggest that as a profession we need to develop our understanding of cyber culture and its emerging subcultures through education and immersion. They also highlight possibilities with cyber culture for greater inclusion citing Uphoff’s definition of “the invisibly diverse - those who are from different cultures that are not immediately identifiable by their accent or physical appearance” (2011. p.30). We are all invisibly diverse when on line by the absence of our physical presence; therefore Merz Nagel et al argue that cyber space can promote equality.

There were some reservations about digital technology. For example Bob raises a concern about the effect of over stimulation on children and young people.

“It (digital technology) can be a gift BUT it can be overload, of sensory experience in the youth -it creates ADD in kids” (41) .

Klorer (2009) explores this issue claiming that amongst the young a reduced capacity for attention and focus, declining communication skills and an increase in aggression are linked to digital overload and lack of social interaction. She suggests that multi tasking is detrimental for those who have Attention Deficit Disorder (ADD) and that this has implications for therapy, “They want to listen to their iPods™ while we are talking; they insist that they can multitask. It takes effort to keep sessions “unconnected.” (p.82). I do wonder however if protecting ‘connectedness’ within therapy in this way could actually alienate younger clients. It is preferable to me as person-centred therapist, to find ways of

engaging with clients using their language of digital technology rather than to force them to use our non-digital one.

In contrast Delfos (2003) uses digital games to work with clients who have Attention Deficit Hyperactivity Disorder (ADHD). She suggests that that games such as 'break out' where a digital ball is aimed at a wall to smash bricks and demolish the wall helps clients understand cause and effect. Delfos also cites Trimmel and Huber (1998) who found that playing Tetris enhanced concentration in children with ADHD. Participants also highlighted the benefits of using digital technology with particular groups. Brian (12a) found that digital illustration was particularly suited to adolescents as it slowed them down and helped develop impulse control and delayed gratification. This has been shown to directly improve behaviour and performance (Lickerman 2012). Bob felt that tablet technology was of particular benefit in his experience:

"iPad is useful for clients who are autistic" (44)

This seems supported by research with Project Sketch-up/Project Spectrum (Malchiodi 2009) a 3D design programme. This study showed that computer technology was useful for young people on the autistic spectrum as they tend to respond and think visually and spatially . This programme enabled them to express ideas more creatively and fluently and in much less time than it would take with traditional drawing materials.

To sum up there is seems a feeling of resignation that change is inevitable, but also a prevailing optimism and willingness to invest in exploring and developing digital therapy for the future.

Discussion

This study has raised a wide variety of topics for discussion including; cultural and generational influences, digital gaming, virtual realities, interactive play based applications, boundaries with digital media, the consequent ethical implications and the lack of research. Any one of which could form the basis of study in its own right. In this discussion I have chosen two topics that are of interest to me so that I can explore in more depth within the limits of the word count. I have approached this discussion in relation to person-centred theory, as this is my orientation and area of interest. However, discussion of digital media in person-centred literature is noticeably absent. Therefore I also hope that I may challenge the field to begin to consider the potential of digital technology within person-centred therapy.

The therapeutic value of mistakes

Greh (1986) was one of the first to observe that art students were less worried about making mistakes and more able to experiment when working with digital art (p.7. Greh). Students consequently were more creative and spontaneous which improved the quality of their work. This study suggests that clients using the iPad in therapy might find the ease with which they can erase mistakes therapeutic. For example earlier I highlighted Jaida's description (1877) of how using the iPad dissolved her inhibitions. Younger clients also feel less concern about making mistakes. This suggests to me that the ease with which mistakes can be 'undone' with digital media may enable an experience that relates to Unconditional Positive Regard (Rogers 2003). In spite of the apparent judgement inherent in calling an action a 'mistake' the quality experienced does seem related to acceptance in that it promotes spontaneity. This I feel would be a fruitful area for research, particularly from a person-centred perspective.

However there are clear implications for therapy and mental health if when using digital technology in therapy clients experience a quality that promotes spontaneity and creativity. Rogers described how creativity is a quality that is present in the person-centred theoretical concept of a fully functioning person, “a creative person...who in an imperfect way actually emerges from the experience of safety and freedom in a therapeutic experience” (Rogers, 1965, p.33). I suggest that perhaps digital media offers an increased opportunity for experiencing freedom in therapy and therefore promotes clients actualisation towards a fully functioning person.

However conversely it also seems to me that there may be a therapeutic deficit if clients aren't able to make mistakes and experience frustration, disappointment or even anger in therapy. I worked with a 9-year-old for whom becoming able to make mistakes with art without losing his temper or destroying his work was the therapeutic task. As he became able to accept and even value his mistakes, he became able to take this learning into the outside world and became more confident and less anxious as a result.

Mistakes in therapy are opportunities for growth (Mitchell, 2013) and when working with tangible art materials in therapy this is often clearer to see. Mistakes can also promote creativity summed up here, “ In an artist's world, mistakes are opportunity; mistakes are portals to discovery; mistakes lead to new techniques and formerly unseen ideas. Happy accidents are welcomed in the studio. Artists practice the art of using mistakes to further their creative their creative process. Mistakes become valuable” (ibid, online). This leads me to wonder whether if my 9-year-old client had used an ipad, he would have experienced the same therapeutic growth.

However participants did find that there were some similarities between using traditional art materials and the art app, for example digital colours not being exactly as hoped. Adult participants being less skilful with an ipad experienced digital media not exactly doing as intended. Therefore perhaps there is scope for both an enhanced therapeutic value in erasing or undoing errors, and an opportunity for working with mistakes when using the iPad.

Ecotherapy

Ecotherapy combines ideas from ecopsychology with psychotherapy, aiming to alleviate distress by enabling connection between our inner nature and the outside natural world (Jordan, 2014). Ecotherapy tends to involve outdoor practice, often in groups. Recently the Person-Centred & Experiential Journal published a special issue exploring the relationship between person-centred therapy and ecotherapy (2013). In this issue it was argued that ecological approaches to therapy may have a particular resonance within the person-centred approach, in terms of “ organismic experience, ecological congruence and the need to symbolise to awareness more of the person’s ‘environment’” (Chatalos, 2013, p.365). Harris (2013) also suggest that ecotherapy may prove to be the growing edge of person centred theory.

From my digital immigrant position I initially considered that there could be no connection between ecotherapy and digital technology as logically a connection with nature is a fundamental aspect. Through this study however I have reconsidered this position. Digital technology could conceivably bring nature into the therapy room. Clients could explore themselves in ecological contexts that otherwise would not be possible. For example, could digital media enable clients to experience a rain forest or a field? Jon Ehinger (Carlton, 2011) already uses a green screen to create a moving background for clients to experience alternative environments in a basic way. However creating 3D projections is fast becoming a realistic proposition (McNicoll & Rivalland, 2013) and I imagine that using emerging digital technology we could create a realistic experience, or a real time experience of the natural world.

This has particular implications for therapy for example with clients with disabilities, or those who are in a hospital environment. However it may also enable us to engage with nature in ways that would not otherwise be possible, for example an underwater environment. I am not likely to venture to the top of a mountain but perhaps I could have an experience that would bring me closer to experiencing myself at the top of a mountain.

Some are likely to consider this an inauthentic experience, a reproduction of ecological contact and therefore the antithesis of ecotherapy. However I would argue that email contact, on-line therapy and virtual reality are also reproductions of contact. Yet clients report that they do experience empathy via digital media (Preece & Ghazati, 2001). Therefore it seems a realistic possibility that we could experience or enhance a connection between our inner nature and outside natural world.

Prensky (2012) states that we are changing how we think through our interactions with digital technology. A similar thread is developed by McGonigal (2011) who highlights a “mass exodus” (p.1) from reality to virtual reality, suggesting that digital gaming is the most important medium of this century. Digital technology is changing how we act. She describes developments in gaming which harness gamers to collectively achieve a meaningful task, ie searching for a cure for cancer. I suggest that it is possible to develop games that enable greater interaction with our natural environment. Digital games could encourage greater insight into our interrelatedness and therefore promote care for the environment. Although I am limited in my understanding of the technological possibilities, I do see that there is potential here. Therefore I suggest that there may be possibilities for digital media to support ecotherapy in the future both in terms of gaming and also in terms of enabling ecological contact digitally.

Strengths and limitations

Overall I feel that my design and methodology were a good fit. It enabled me to find answers to my original questions:

- ☐ how usable and practical it is
- ☐ how it impacts, if at all on the therapeutic process,
- ☐ what advantages and disadvantages are there to using digital technology in therapy
- ☐ what might enable or disable clients and therapists from making use of digital technology as a tool

I believe one of the strengths of this study is the diversity and breadth that I was able to

cover with my research . I also hope that the honesty and transparency of my account of my clinical experience will contribute to the willingness of others to experiment with digital media.

I feel that one of the disadvantages was the depth that I sacrificed in order to cover a breadth. For example I feel that I raised the issue of ethics in relation to digital media but have not been able to explore in this study. These are important issues, which stem from a fundamental therapeutic skill of knowing how to set boundaries that keep clients and therapists safe. These are also complex issues to resolve, for example what if an adult client downloads pornography during a session? Do I allow clients to download games? All of these have implications for therapeutic practice, and I feel that I have raised more questions than I have answered.

Conclusion

What I have learned from this study is arguably what I already knew - we must integrate digital technology into therapeutic practice. I have realised that this question is one that is specific to my generation and me. It is a question that will soon become redundant. In the same way that it is difficult for my generation to conceive of digital technology in therapy, it is difficult for newer generations to conceive of therapy *without* digital technology.

I have discovered that fears, generational and cultural influences affect the use of digital technology. Self-awareness is a factor as behaviour in regard to digital technology is shaped by unconscious influences, which as therapists we need to explore to prevent our incongruence affecting therapy.

I have also learned that digital media is friendly! When digital media was used in therapy, client fears turned out to be unfounded. Digital media can contribute to the therapeutic process, and this is an area that clearly needs further study.

However I have discovered that there are new sets of dilemmas, and boundaries needed in regard to digital media. This is an area that I suggest needs urgent exploration.

I agree with Prensky (2012) who believes that “ if people, rather than resist or reject the technical changes that come at them, maintain a positive—though critical—attitude toward technology, and if people take positive, proactive steps to integrate technology with their minds and their lives, they will all be far better off. ” (p.18)

I hope that my study has opened up areas for discussion. I also hope that it will encourage therapists to use their courage (BACP 2013) and creativity to engage with digital technology in therapy.

Word count : 14,930 (approx.)

References

Alexenberg,M. (2011) *The Future of Art in a Post-Digital Age : From Hellenistic to Hebraic Consciousness*. Bristol: Intellect

Austin, B. (2009) . Renewing the Debate: Digital Technology in Art Therapy and the Creative process. *Art Therapy, Journal of the American Art Therapy Association*, 26 (2) pp83-85

BACP (2013) *Ethical Framework for Good Practice in Counselling and Psychotherapy*. Lutterworth : BACP

BACP (2011) iPhone app helps treat phobias. *Therapy Today*. Vol.22 .Issue 10.

Bratton, S., Ray,D., Rhine, T. (2005) The Efficacy of Play Therapy with Children: A Meta-Analytic Review of Treatment Outcomes. *Professional Psychology: Research and Practice* . Vol 36 (4) pp376-390

Braun,V. & Clarke,V (2006) Using Research in Psychology. *Qualitative Research in Psychology*. 3: 77-101

British Psychological Society (2009) Code of Ethics and Conduct.[online] Available at: <http://www.bps.org.uk/system/files/documents/code_of_ethics_and_conduct.pdf > [Accessed on 10.06.13]

Buckingham,D (2009) New media, new childhoods? Children's changing cultural environment in the age of digital technology, in Kehily,A (2009) *An Introduction to Childhood Studies*. Maidenhead: Open University Press pp.124-141

Burgess, A. (2003) *Cellular Phone, Public Fears and a Culture of Precaution*. Cambridge : Cambridge University Press

Bryman A. (2012) *Social Research Methods* (4th ed) Oxford : Oxford University Press

Canter, D. S. (1987) The Therapeutic effects of Combining Apple Macintosh Computers and Creativity Software in Art Therapy Session. *Art Therapy : Journal of the American Art Therapy Association*. Vol 4 (1) pp 17-26

Carlton,N. (2011) Four Digital Art Therapy Interviews. New York . *Vimeo.com* [online] Available at: <<http://vimeo.com/70799998>> [Accessed 1.12.14]

Casement,P. (1990) *Further Learning from the Patient : The Analytic Space and Process*. London: Routledge

Chatalos, P. (2013) Sustainability : ecopsychological insights and person-centred contributions. *Person-Centred & Experiential Psychotherapies*, Vol 12, Issue 4, December, pp.355-367

Coehn, M.Hadley, M. Frank, M. (2011) *Young Children, Apps & iPad*. New York : Michael Cohen Group. [online] Available at < [http://mcgrc.com/wp-content/uploads/2012/06/ipad-study-cover-page-report-mcg-info_new-online .pdf](http://mcgrc.com/wp-content/uploads/2012/06/ipad-study-cover-page-report-mcg-info_new-online.pdf)> [accessed 9.2.1.4]

Cohen,W. & Levinthal,D. (1990) Absorptive Capacity : A New Perspective on Learning and Innovation. *Administrative Science Quarterly*, Vol. 35, No. 1, (Mar., 1990), pp. 128-152.

Cooper, M. (2013) *School-based counselling in UK Secondary Schools: A review and critical evaluation*, Lutterworth: BACP/Counselling MindEd. [online] Available at: www.counsellingminded.com

Cooper,J. & Mackie,D. (1986) Video games and aggression in children. *Journal of Applied Social Psychology*. Vol.16. pp.726-744

Coyle,D. (2007) *Adaptable design for talk based mental health intervention*. Unpublished Doctoral dissertation. University of Dublin, Trinity College.

Coyle, D., Doherty, G. (2009) Clinical evaluations and collaborative design: developing new technologies for mental healthcare interventions. *CHI 2009*, ACM Press, (2009), 2051–2060.

Coyle, D. Doherty, G. Sharry,J, (2009) An Evaluation of a Solution focused Computer Game in Adolescent Interventions. *Clinical Child Psychology and Psychiatry*.14: 345 -360

Crandall,V (1975). A Children's Social Desirability Questionnaire for Children. *Journal of Consulting Psychology* , vol 29 (1) February, pp28-36

Cropley,A. (1990) Creativity and Mental Health in Everyday Life. *Creativity Research Journal*, Vol (3) 167-178. (1990)

Csikszentmihalyi, M. (1990) *Flow : The Psychology of Optimal Experience*. New York: Harper & Row

Delfos,M (2003) The conquered giant : the use of the computer in play therapy, in Maarsse,F.J. et al.(2003) *Clinical Assessment, Computerized Methods, and Instrumentation*. Lisse: Swets & Zeitlinger

Eanes, R.S. (2013). Truly magical: Advertising, rhetoric, and the iPad. *International Association for Media and Communication Research Conference*, Dublin.[online] Available at: <<http://ryanean.es/publications>> [accessed 24.6.13]

Edge,J., Fuller, N., Springate,I., Walker,C., (2005) A Digital City? Attitudes to learning and technology in Hull. *Volcom*. [online] 12.9.2010. Available at: <http://www.learntolive.org.uk/> [Accessed 12.1.14]

Evans, S. (2012) Using Computer Technology in Expressive Arts Therapy : A Proposal for Increased Use. *Journal of Creativity in Mental Health*. Vol 7, Issue 1, pp.49-63

Fish,D. (1998) *Appreciating Practice in the Caring Professions*. Oxford: Blackwell Science

Fortune, S. (2011) Reporting back from the first international post digital symposium. *Alpha-ville*. [blog] Available at: <http://www.alpha-ville.co.uk/reporting-back-from-the-first-international-post-digital-symposium/> [accessed 27.1.4]

Gardener, J,E. (1991) Can the Mario Bros help? Nintendo games as an adjunct in psychotherapy with children. *Psychotherapy*, 28, 667-670

Gardener Edge (2013) Professor publishes first interactive book on play therapy. *Gardener Edge* [online] 15.11.2013. Available at: http://www.gardneredge.com/news/2013/11/15/7497-professor-publishes-first-interactive-book-on-play-therapy#.Uu1-TlZ_t5w [Accessed 1.2.14]

Ghaye,A and Ghaye,K. (1998) *Teaching and Learning through Critical Reflective Practice*. London: David Fulton

Gilroy, A. Mc Neilly,G. (2010) *The Changing Shape of Art Therapy : New Developments in Theory and Practice*. London: Jessica Kingsley

Gov.uk (2013) Handheld computers used in therapy. *Healthcare Counselling & Psychotherapy Journal*. 14750724. July1, 2013, Vol. 13, issue 3.

Grbich,C. (2012) *Qualitative Data Analysis : An Introduction* London: Sage

Green,E., & Drewes, A. (2014) *Integrating Expressive Arts and Play Therapy : A Guidebook for Mental health Practitioners and Educators*. Hoboken: John Wiley & Sons.

Greh,D. (1986) Using Computers in Secondary Art Education . *Art Education*, Vol 39 (6)

Goss,S. Anthony,K. (2003) *Technology in Counselling and Psychotherapy: A Practitioners Guide*. Hampshire : Palgrave Macmillan

Guest, G. MacQueen,K. Namey,E. (2012). *Applied Thematic analysis*. Thousand Oaks : Sage

Gunter, B. (1998) *The `Effects of Video Games on Children : The Myth Unmasked*. Sheffield : Sheffield Academic Press

Harris, A. (2013) Gendlin and ecopsychology : Focusing in nature. *Person-Centred & Experiential Psychotherapies* , Vol 12, Issue 4, December,pp.330-341

Ingraham, N. (2013) Apple announces 1 million apps in the App Store, more than 1 billion songs played on iTunes radio. *The Verge* [online] October 22.Available at : <<http://www.theverge.com/2013/10/22/4866302/apple-announces-1-million-apps-in-the-app-store>> [accessed 30.6.13]

Johnson,R. (2002) *Play Therapy Techniques* (2nd ed) in Schaefer,C. Cangelosi,D. pp.365-371. Lanham : Jason Aronson, 2002 viii 383 pp.

Jordan,M.(2014) Home. Ecotherapy. [online] Available at:<http://www.ecotherapy.org.uk> [Accesses on 24.2.14]

Kapitan, L. (2007). Will art therapy cross the digital culture divide? *Art Therapy: Journal of the American Art Therapy Association*, 24(2), 50–51.

Kadusan,H, Schaefer,C. (2003) 101 Favourite Play Therapy Techniques. Lanham: Rowman & Littlefield

Kehily,M. (2009) An Introduction to Childhood Studies. Maidenhead : Open University Press

Kendall,P. (2013) Is the digital age rewiring us? *The Telegraph*. [online]13.3.12 Available at: <<http://www.telegraph.co.uk/technology/9913452/Is-the-digital-age-rewiring-us.html>> [accessed 20.2.14]

Klorer,G. (2009) The Effects of Technological Overload on Children : An Art Therapist's Perspective. *Art Therapy : Journal of the American Art Therapy Association*. 26(2) pp.80-82

Lago,C. (2011) The Handbook of Transcultural Counselling and Psychotherapy. Maidenhead: Open University Press

Lickerman,A. (2012) The Power of Delaying Gratification: How to develop impulse control. *Psychology Today*. [online] Available at: <<http://www.psychologytoday.com/blog/happiness-in-world/201207/the-power-delaying-gratification>> [accessed 20.2.14]

Lincoln,Y.S., & Guba, E.G. (1985) Naturalistic inquiry. Newbury Park,CA : Sage

London,M. (2010) Opening Therapeutic Doors to the iGeneration. *TILT Magazine*, Premiere issue, September [online] Available at: <<http://issuu.com/onlinetherapyinstitute/docs> [Accessed on 20.2.14]

Loftland,J & Loftland,L.(1995) Analyzing Social Settings: A Guide to Qualitative Observation and Analysis. 3rd edn. Wadsworth : Belmont,CA

Lydall, R. (2013) Avatars help schizophrenic patients banish their demons. Evening Standard. 29th May 2013

Lynass, R., Pykhtina, O., Cooper, M. (2012) A thematic analysis of young people's experience of counselling in five secondary schools in the UK. *Counselling and Psychotherapy Research*, 12 (1), pp. 53-62.

Mail Online (2014) Are computer games damaging your child's health? *Daily Mail plc* [online] Available at: < <http://www.dailymail.co.uk/health/article-67490/Are-games-damaging-childs-health.html> > [accessed 1.2.14].

Malchiodi, C. (2009) Art Therapy Meets Digital Art and Social Multimedia: Art therapy goes digital in the 21st century...well maybe. *Psychology Today*. [online] Available at: < <http://www.psychologytoday.com/blog/the-healing-arts/200911/art-therapy-meets-digital-art-and-social-multimedia> > [Accessed on 12.12.13]

Malchiodi, C. (2012) *Handbook of Art Therapy*. New York: Guildford Press

Malchiodi, C. & Crenshaw, D. (2014) *Creative Arts and Play Therapy for Attachment Problems*. London : The Guildford Press

Marendaz, L., Wood, K. (1999) The Effects of Childhood Sexual Abuse on Female Sexuality : A Model of Intervention. *Restoration for Victims of Crime Conference*. Melbourne, September 1999 . [online] Available at: < http://www.aic.gov.au/media_library/conferences/rvc/marendaz.pdf > [Accessed on 20.2.14]

Mattson, D. (2012) An Introduction to the Computerized Assessment of Art-Based Instruments, *Art Therapy: Journal of the American Art Therapy Association*, 29:1, 27-32.

McGonigal, J. (2012) *Reality is Broken : Why Games make us Better and How They Can change The World*. New York: The Penguin Press

McInnes (2014) Lumbering towards extinction. *Therapy Today*. Feb Vol 25. Issue 1.p.9

McIntosh,P. (2010) Action Research and Reflective Practice : creative and visual methods to facilitate reflection and learning. Abingdon: Routledge

McNicoll, A., Rivalland, M. (2013) In thin air: Could touch display projected on mist replace physical screens? CNN. [online] 24.12.2013. Available at:
< <http://edition.cnn.com/2013/12/24/tech/touch-display-projected-on-mist/>> [Accessed 25.2.14]

Merz Nagel, D Anthony,K. Louw,G. (2012) Cyberspace as Culture : A New Paradigm for Therapists and Coaches. *TILT Magazine*. Spring pp.25-35[online] Available at: < <http://onlinetherapyinstitute.com/2013/05/29/cyberspace-culture-paradigm-therapists-coaches/>>. [Accessed on 20.2.14]

Miller,V. (2011) Understanding Digital Culture. London: Sage

Mitchell. L (2013) Artist value mistakes...why you should too. *Inner Canvas*. [online] 25.4.13. Available at: <http://innercanvas.com/2013/04/25/artists-mistakeswhy/> [Accessed 1.2.14]

News.com.au (2013) 900,000 apps out there: we pick the 10 must-haves. *News.com.au*. July 19. Available at: <<http://www.news.com.au/technology/gaming/apps-out-there-we-pick-the-10-musthaves/story-fn81y8rt-1226681768234>>.[accessed 27.1.14]

News Crucible (2010) Alexander Graham Bell and the iPad. *Newcrucible.wordpress.com*. [blog] 29 April. Available at: <<http://newcrucible.wordpress.com/2010/04/29/alexander-graham-bell-and-the-ipad>> [Accessed 24.6.13]

Oblinger,D & Oblinger, J. (2005) Is it Age or IT : First Steps Towards Understanding the Net Generation. *Educause*. [online] Available at< <http://www.educause.edu/research-and-publications/books/educating-net-generation>> [accessed 1.2.14]

Pernicano.P.(2014) Using Trauma-Focused therapy Stories: Interventions for Therapists, Children and their Caregivers. Hove : Routledge

Peterson,B. Stovall,K. Elkins,D, Parker-Bell,B. (2005) Art Therapists and Computer technology. *Art Therapy, Journal of the American Art Therapy Association*, 22(3) pp139-149

Play Therapy UK (2011) An Effective Way of Alleviating Children's Emotional, Behaviour and Mental Health Problems - the Latest Research. *Play Therapy UK*. 12 Aug 2011.

Play Therapy UK (2014) An Introduction to Play Therapy. *Play Therapy UK* [online] Available at: <<http://www.playtherapy.org.uk/Resources/Articles/ArticleMBIntro1.html>> [accessed 25.2.14]

Preece,J. & Ghozati,K. (2001) Experiencing Empathy Online. Rice, R.. & Katz,J. *The Internet and Health Communication: Experiences and Expectations*. London: Sage

Prendiville, E., & Howard, J. (2014) Play Therapy Today : Contemporary Practice with Individuals, Groups and Carers). Hove: Routledge

Sherry, J. (1997). Do violent video games cause aggression? A meta-analytic review. *International Communication Association*. Montreal,Canada.

Prensky,M. (2011) Digital Natives, Digital Immigrants. *On the Horizon*. MCB University Press, Vol 9 No 5, October 2001

Prensky,M. (2012) Brain Gain : Technology and the Quest for Digital Wisdom. Basingstoke: Palgrave Macmillan

Proctor,G. (2002) The Dynamics of Power in Counselling and Psychotherapy : Ethics, Politics and Practice. Ross-on-Wye : PCCS

Purves,D. Dutton,J. (2013) An exploration of the therapeutic process while using computerised cognitive behaviour therapy. *Counselling and Psychotherapy research*. 13 (4) pp. 308-316

Reeves, A. (2009) Log on, drop out: Life Beyond the iPhone. *Therapy Today* 20 (2) p 6-7

Rogers, C. (2003) Client Centred Therapy: Its Current Practice, Implications and Theory (reprint). London: Constable & Robinson Ltd

Rogers, C. (1965) . The Concept of the Fully Functioning Person. *Pastoral Psychology*. April , Vol 16, Issue 3, pp21-23.

Selnow,G.W, (1984) Playing video games : The electronic friend. *Journal of Communication*, 34, 148-156.

Seong-in Kim (2013) Computer Art Therapy. [download] Available at: <<https://itunes.apple.com/gb/app/computer-art-therapy/id492665603?mt=8>> [Accessed 27.1.14]

Smith, J, A, Flowers, P & Larkin, M (2009) Interpretative Phenomenological Analysis : Theory, Method and Research, London : Sage

Smith, J. (2008) Qualitative Psychology : A Practical Guide to Research Methods. London: Sage

Street, C. (2013) Scoping Report Online Counselling Provision for Children, Young People and Young Adults. Lutterworth: BACP/Counselling MindEd. [online] Available at: <www.counsellingminded.com>

Thong,S.A. (2007) Refining the Tools of Art Therapy. *Art Therapy: Journal of the American Art Therapy Association*, 24(2) pp. 52-58

Trimmel, M & Huber, R. (1998). After-effects of human-computer interaction indicated by P300 of the event-related brain potential. *Ergonomics*, 41 (5), 649-655 cited in Delfos,M (2003) The conquered giant : the use of the computer in play therapy, in Maarsse,F.J. et al. Clinical Assesment, Computerized methods, and Instrumentation. Lisse: Swets & Zeitlinger

Wilkinson,N. (2008) Online Video Game Therapy for Mental health Concerns. *International Journal of Social Psychiatry*, 2008 Jul; 54(4) :370-82.

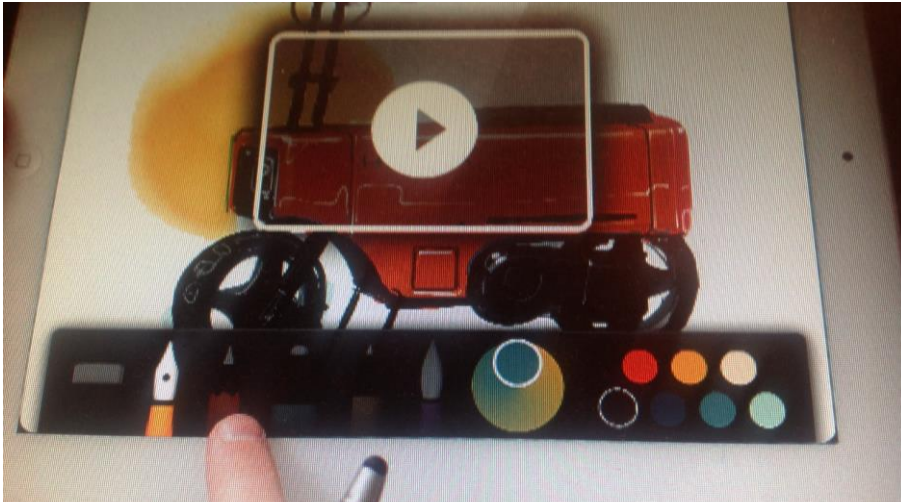
Willig,C. (2001) Introducing qualitative research in psychology: Adventures in theory and method. Philadelphia: Open University

Appendices

Appendix A	Powerpoint Presentation	page 69
Appendix B	Powerpoint Presentation Image	page 70
Appendix 1	Interview Schedule	page 71
Appendix 2	Ethics Application	page 72
Appendix 3	Ethics Approval	page 93
Appendix 4	Invitation Letters and Consent Forms	page 96
Appendix 5	Analysis examples	page 106
Appendix 6	Data examples	page 110
Appendix 7	Transcription examples	page 115

Appendix A

ipad app 'Paper by 53'



Paper by 53

- I have researched and chosen this app as it replicates reality in a sense with a good selection of recognisable tools and functions ;
- Pen, Pencils, Felts, Calligraphy pen, paints
- A wide palette of colours and mixing tool
- A rubber
- A rewind function
- It is easy to use, the tools feel good to use with smooth clean strokes and the art produced is aesthetically pleasing
-

Appendix B

Feedback

- ☐ Any feedback?
- ☐ Anything I have missed?
- ☐ Does it sound interesting ?

- ☐ I used art therapy to further reflect on my experience and knowledge on the topic of using ipad in sessions, analysing this to allow other forms of knowing to emerge
- ☐ My image to sum up.....
- ☐

Bits filled in, a bit messy, connecting
threads, moving, contained



Appendix 1

SCHEDULE

Ani de la Prida

SEMI STRUCTURED INTERVIEW

POSSIBLE RESEARCH QUESTIONS

Questions on their views of new technology

1. how would you describe your experience and feelings towards new technology?

Questions on using the app

2. Thinking of this particular application can you tell me about the usability of it?

Questions on using the ipad - have they used one before, are they a confident user

3. Have you got an ipad or touch tablet? how confident would you say you are at using them generally?

4. Tell me about your thoughts when using it here for the first time - were you nervous, excited?

5. how many times have you used the ipad here - did your experience of using it change?

Questions on impact on therapeutic process or not

6. in what ways if any did using the ipad here help or inhibit your process

Questions comparing to using paper

7. how did it compare to using traditional art materials ?

Questions regarding confidentiality concerns with new technology

8. b) did you have the image emailed to you – tell me about that ?

9.a) did you have any concerns about security from the ipad, for example that your image could appear elsewhere, get hacked into, how it is stored etc?

10. how likely are you to choose to use this again in the future on a scale of 1 - 10

what if anything do you feel it added to the session

what if anything do you feel it took away from the session

Is there anything else you'd like to tell about the experience

Appendix 2

UNIVERSITY OF EAST LONDON School of Psychology

APPLICATION FOR RESEARCH ETHICS APPROVAL FOR RESEARCH INVOLVING HUMAN PARTICIPANTS

FOR BSc LEVEL 3 PROJECTS & MSc/MA DISSERTATIONS

Before completing this form students should familiarise themselves with the latest *Code of Ethics and Conduct* produced by the British Psychological Society (BPS) in August 2009. This can be found in the Ethics folder in the Psychology Noticeboard (UEL Plus) and also on the BPS website www.bps.org.uk under *Ethics & Standards*. UEL's ethics policy is a useful brief outline of good ethics conduct - see <http://www.uel.ac.uk/qa/manual/policies.htm>
Please pay particular attention to the ethical principles of respect and responsibility.

Note that research solely involving animal observation or analysis of existing data (secondary analysis) should complete separate forms. These can also be found in the Ethics folder in the Psychology Noticeboard (UEL Plus)

HOW TO COMPLETE & SUBMIT THE APPLICATION

Complete this application form electronically, fully and accurately.

Type your name in the 'student's signature' section (5.1).

Include copies of all necessary attachments in the **ONE DOCUMENT SAVED AS .doc** (See page 2)

Email your supervisor the completed application and all attachments as **ONE DOCUMENT**. INDICATE 'ETHICS SUBMISSION' IN THE SUBJECT FIELD OF THIS EMAIL so your supervisor can readily identify its content. Your supervisor will then look over your application.

When your application demonstrates good ethical protocol your supervisor will

type in his/her name in the 'supervisor's signature' section (5.2) and email your application to the Helpdesk for processing. You will be copied into this email so that you know your application has been submitted. It is the responsibility of students to check this. Students are not able to email applications directly to the Helpdesk themselves.

Your supervisor will let you know the outcome of your application. Recruitment and data collection are **NOT** to commence until your UEL ethics application has been approved, along with other research ethics approvals that may be necessary (See 4.1)

MANDATORY ATTACHMENTS

A copy of the invitation letter that you intend giving to potential participants.

A copy of the consent form that you intend giving to participants.

OTHER ATTACHMENTS AS APPROPRIATE

A copy of original tests and questionnaire(s) and test(s) that you intend to use. Please note that copies of copyrighted (or pre-validated) questionnaires and tests do NOT need to be attached to this application. Only provide copies of questionnaires, tests and other stimuli that are original (i.e. ones you have written or made yourself). If you are using pre-validated questionnaires and tests and other copyrighted stimuli (e.g. visual material) make sure that these are suitable for the age group of your intended participants.

A copy of the kinds of interview questions you intend to ask participants.

A copy of ethical clearance from an external organisation if you need one, and have one (e.g. the NHS, schools etc). Note that your UEL ethics application can be submitted and approved before ethical approval is obtained from another organisation (see 4.1). If you need it, but don't yet have ethical clearance from an external organisation, please let your supervisor know when you have received it.

A scanned copy* of a current Criminal Records Bureau (CRB) clearance certificate. A current certificate is one that is not older than 6 months. This is necessary if your research involves young people (anyone under 18 years of age) or vulnerable adults (see 4.2 for a broad definition of this). A CRB certificate that you have obtained through an organisation you work for is acceptable, as long as it is current. If you don't have a current CRB certificate, but need one, you can apply for one through the Psychology Helpdesk. The

School of Psychology will pay the cost.

* IF SCANNING ATTACHMENTS IS NECESSARY BUT NOT *AT ALL* POSSIBLE, SUBMIT TWO HARDCOPIES OF YOUR APPLICATION (INCLUDING ALL ATTACHMENTS) DIRECTLY TO THE HELPDESK. HARDCOPY APPLICATIONS ARE TO BE SIGNED BY YOU AND YOUR SUPERVISOR AND DELIVERED TO THE HELPDESK BY YOU

IF YOU NEED A CRB CERTIFICATE DO NOT SUBMIT THIS APPLICATION UNTIL YOU CAN ATTACH A COPY OF THE CERTIFICATE TO THIS APPLICATION.

To save time, prepare this application in advance so that you are ready to attach the CRB certificate when you receive it

1. Initial details

1.1. Title of your course:

MA Counselling and Psychotherapy

1.2. Title of project or dissertation: (This can be a working title)

A qualitative study of client and counsellor experiences of using a digital art application via ipad as compared to using traditional art materials in therapy

1.3. Project/dissertation submission deadline:

December 2013

☒

1.4. Please tick if your application includes a copy of a CRB certificate

This is to ensure that your application will remain confidential

Yes

1.5. Please tick to confirm that you have read and understood the British Psychological Society's Code of Human Research ethics

x

2. About the research

2.1. Research question(s):

I am interested to find out what is it like for client and therapist using digital art as compared to using traditional art materials in therapy ? In particular;

How usable and practical is it?

Does it impact on the therapeutic process?

What advantages and disadvantages are there to using a digital art application?
What might enable or disable clients and therapists from making use of this tool?

2.2. Likely duration of the data collection from intended starting to finishing date:

June – September 2013

Methods

2.3. Design of the research:

I will use semi-structured interviews with 4-6 clients and will transcribe and analyse using Interpretative Phenomenological Analysis. Interviews will be about 30-40 minutes in duration.

I am using an art application called Paper by 53 via ipad, which is a simple to use application that mimics traditional art materials. I have introduced use of this firstly in practice sessions with colleagues, and secondly with my own clients in order to develop my practice.

I will invite clients and colleagues who have used the ipad art application to engage with my research. I will do this via word of mouth, leaflets and email. I will provide an invitation letter outlining the research project and a consent form. As I may invite participants from a range of ages I have included invitation letters and consent forms written in appropriate language for KS1&2 (primary), KS3-5(secondary), adult participants and parent/carer. (see appendix 1)

I will recruit a colleague to interview me using the same questions, so that I am also an explicit participant in the study and this data will also be transcribed and analysed for themes. I will reflect on my thoughts and experience after sessions, and may also include this as data.

2.4. Data Sources or Participants:

(Where is your data coming from? Include proposed number of participants, method of recruitment, specific characteristics of the sample such as age range, ethnicity, profession etc)

I intend to invite clients and colleagues who have used the ipad art application to engage in semi structured interviews. I will recruit using word of mouth, leaflets and email. From these I hope to select 4-6 participants, and aim for at least two clients and two practitioners including myself.

As the nature of my study is concerned with experience within a session, I need to use participants who have had at least one session using the ipad therapeutically.

Because I will also be recruiting from my own client base I will explore in my own clinical supervision prior to approaching, which clients it is appropriate to invite to participate, and would not invite any clients who are considered vulnerable or for whom participation could be detrimental. I will seek to minimise any potential impact on the therapeutic process and relationship with any clients who do participate.

2.5. Measures, Materials or Equipment:

(Give details about what will be used during the course of the research. For example, equipment, a questionnaire, a particular psychological test or tests, an interview schedule or other stimuli such as visual material. See note on page 2 about attaching copies of questionnaires and tests to this application. If you are using an interview schedule for qualitative research attach a copy of the schedule to this application)

I will be using a recording device. I will be using semi structured interview and have attached a copy of the schedule appendix 2. These are for guidance and I will use age appropriate language with participants.

YES – age appropriate material

2.6. Outline of procedure, giving sufficient detail about what is involved in the research: (Outline the stages of the proposed research from sending out participant invitation letters and gaining consent through to what will be involved in data collection/experimentation/interview. For example, what will participants be asked to do, where, and for how long?)

Procedure involves:

I will give people who have used the ipad application an invitation letter that outlines the nature and purposes of the research and participants' rights. I will only give invitation letters to clients after approval with my clinical supervisor. If they agree to participate, I will give them a consent form to sign before interviewing them.

I will allow extra time when inviting under 18's to allow sufficient time to discuss with parent/guardian.

Interviews will take place at my home or at WHCM.

Interviews will last for about 30-40 minutes.

Interviews will be audio-recorded and transcribed for analysis.

I will offer participants a copy of the transcript to read through for additional approval if they wish before I begin analysis

In the case of younger children I will offer to read through a copy of the transcript with them.

I will then analyse using IPA

3. Ethical considerations

Please describe how each of the ethical considerations below will be addressed. See the BPS guidelines for reference, particularly pages 10 & 18, and the step-by-step guide in the Ethics folder.

3.1. Obtaining fully informed consent:

I will give invitation letters to potential participants, once I have approval from my clinical supervisor in each instance, explain the research and allow time for them to ask questions. I will then ask the participants to go away with the letter to consider. If they choose to participate I will then give them a letter to obtain consent.

In the case of a child or young person I have two separate forms written in age appropriate language. I will allow more time for the child or young person to consider and to ask questions. If they then agree to participate I will then ask permission to seek parental consent. I will then give a copy of both the child and adult information forms and consent forms to the parent. As I am in private practice I do have contact with parents of my younger clients. I will explain and allow time for questions and also allow a further week for the parent and child or young person to discuss. If both agree then I will obtain consent forms from both the child or young person and parent.

3.2. Engaging in deception, if relevant: (What will participants be told about the nature of the research? The amount of any information withheld and the delay in disclosing the withheld information should be kept to an absolute minimum.)

n/a

3.3. Right of withdrawal: (In this section, and in your participant invitation letter, make it clear to participants that 'withdrawal' will mean the opportunity to have the data they have supplied destroyed on request. This can be up to a specified date, i.e. not after you have completed your analysis, but always be sensitive. Speak to your supervisor if necessary.)

I will explain verbally and in the letter that the participants have a right to withdraw up to the point where I have engaged in analysis. I will supply a copy of a transcript to each participant and offer then the opportunity to amend or withdraw before I begin analysis. If they choose to withdraw after this time I will reserve the right to use the data anonymously.

3.4. Anonymity & confidentiality: (Please answer the following questions)

I will know my participants and will have their contact details. I will store all of their data anonymously, using codes and an index which I will store separately in a locked box. Any art work included in this study will be anonymised and stored digitally with password protection, or in paper form. Written consent will be obtained from participants. The recorded data will be destroyed within 2 years, but I reserve the right to keep anonymised transcripts longer for possible development for publication. Images may be kept longer if separate written permission is given on the consent form.

NO

3.5. Protection of participants:

(Are there any potential hazards to participants or any risk of accident or injury to them? What is the nature of these hazards or risks? How will the safety and well-being of participants be ensured? What contact details of an appropriate support organisation or agency will be made available to participants, particularly if the research is of a sensitive nature or potentially distressing?)

I will see participants in my home or at my place of work - WHCM. Both environments have been risk assessed and are the usual environments where I would see clients and colleagues and therefore there are no physical hazards. The subject of the interview is the process and not the content of sessions and so is unlikely to stimulate any painful issues. I will debrief each participant after each interview. In the unlikely event that painful issues do emerge I would refer colleagues to the counselling service available at WHCM. With my own clients I would be able to support through on-going counselling with them on a weekly basis.

3.6. Protection of the researcher:

(Will you be knowingly exposed to any health and safety risks? If equipment is being used is there any risk of accident or injury to you? If interviewing participants in their homes will a third party be told of place and time and when you have left a participant's house?)

I have risk assessment procedures in place with my private practice and at WHCM, and I will be seeing people already known to me so I believe the risk is minimal. I will also be able to seek support should I need it from my own clinical supervision and my research supervision.

3.7. Debriefing:

(Will participants be informed about the true nature of the research if they are not told beforehand? Will participants be given time at the end of the experiment or interview to ask you questions or raise concerns? Will they be re-assured about what will happen to their data/interview material?)

I will debrief participants after each session, and will allocate time for them to raise questions. I will reiterate confidentiality, the data storage process and their right to withdraw.

3.8. Will participants be paid?

NO

If YES how much will participants be paid and in what form (e.g. cash or vouchers?)
Why is payment being made and why this amount?

3.9. Other:

(Is there anything else the assessor of this application needs to know to make a properly informed assessment?)

4. Other permissions and clearances

4.1. Is ethical clearance required from any other ethics committee? (e.g. NHS, Charities, Schools) NO

If YES please give the name and address of the organisation:

Has such ethical clearance been obtained yet? YES / NO

If NO why not?

If YES, please attach a scanned copy of the ethical approval letter. A copy of an email from the organisation is acceptable if this is what you have received.

PLEASE NOTE: UEL ethical approval can be gained before approval from another research ethics committee is obtained. However, recruitment and data collection are NOT to commence until your research has been approved by UEL and other ethics committees as may be necessary. Also note that you do not need NHS ethics approval if collecting data from NHS staff except where the confidentiality of NHS patients could be compromised. Speak to your supervisor if in doubt.

4.2. Will your research involve working with children or vulnerable adults?* YES

If YES have you obtained and attached a CRB certificate? YES

If your research involves young people between the ages of 16 and 18 will parental/guardian consent be obtained. YES

If NO please give reasons. (Note that parental consent is always required for participants who are 16 years of age and younger)

* You are required to have CRB clearance if your participant group involves children and young people who are younger than 18 years of age. You should speak to your supervisor about seeking consent from parents/guardians if your participants are between the ages of 16 and 18. 'Vulnerable' adult groups includes people aged 18 and over with psychiatric illnesses, people who receive domestic care, elderly people (particularly those in nursing homes), people in palliative care, and people living in institutions and sheltered accommodation, for example. Vulnerable people are understood to be persons who are not necessarily able to freely consent to participating in your research, or who may find it difficult to withhold consent. If in doubt about the extent of the vulnerability of your intended participant group, speak to your supervisor.

Methods that maximise the understanding and ability of vulnerable people to give consent should be used whenever possible.

IN ORDER TO HAVE ETHICAL CLEARANCE FOR RESEARCH INVOLVING CHILDREN, YOUNG PEOPLE OR VULNERABLE ADULTS YOU MUST ATTACH A SCANNED COPY OF THE ORIGINAL CRB CLEARANCE CERTIFICATE TO THIS APPLICATION. YOUR CERTIFICATE MUST NOT BE OLDER THAN 6 MONTHS.

4.3. Will you be collecting data overseas? NO

This includes collecting data/fieldwork while you are away from the UK on holiday or visiting your home country.

* If YES in what country or countries will you be conducting fieldwork?

Please get the Risk Rating for the country/countries you propose to travel to from **Red24** at www.aonprotect-red24.com (password currently is **7797**). Search for the country where you propose to conduct your research.

RISK RATING	HIGH	MEDIUM
	LOW	

NOTE: You are NOT permitted to conduct fieldwork in countries that are deemed to be HIGH risk at the time of travel. You should monitor the risks of the trip up until the date of travel and if there are any changes please contact your supervisor. It is the responsibility of the student to safeguard their own health and safety, and that of participants, while conducting fieldwork overseas.

5. Signatures

TYPED NAMES WILL BE ACCEPTED AS SIGNATURES IF THE APPLICATION IS EMAILED TO THE HELPDESK BY YOUR SUPERVISOR

5.1. Declaration by student:

I confirm that I have discussed the ethics and feasibility of this research proposal with my supervisor.

Student's name: ANI DE LA PRIDA

Student's signature: Ani de la Prida

Student's number: 1252176

Date: 31.5.2013

5.2. Declaration by supervisor:

I confirm that, in my opinion, the proposed study constitutes a suitable test of the research question and is both feasible and ethical.

Supervisor's name: Gordon Jinks

Supervisor's signature: Gordon Jinks
2013

Date: 7th June

PLEASE CONTINUE THE APPLICATION ON THIS SAME DOCUMENT

PARTICIPANT INVITATION LETTER

(See pro forma and examples in the ethics folder in the Psychology Noticeboard on UEL Plus.
These should be adapted for use with parents/guardians and children.)

UNIVERSITY OF EAST LONDON

School of Psychology
Stratford Campus
Water Lane
London E15 4LZ

The Principal Investigator

Ani de la Prida
ani@delaprida.orangehome.co.uk Telephone number 07921 331069

Consent to Participate in a Research Study (Adult)

The purpose of this letter is to provide you with the information that you need to consider in deciding whether to participate a research study. The study is being conducted as part of my Counselling & Psychotherapy Masters degree at the University of East London.

Project Title

A qualitative study of client and counselor experiences of using a digital art application via ipad as compared to using traditional art materials in therapy

Project Description

I am interested to find out what is it like for clients and therapists using digital art as compared to using traditional art materials in therapy. The aim of this study is to help develop counselling knowledge and practice in this area. In order to find out about the experience I will be conducting interviews, using a semi-structured format that will last approximately 40 minutes. These will be recorded and then transcribed. I will be asking questions on your thoughts and experience of using digital art in therapy, and of technology in general. I will also include data from my own experiences. I will supply you with a copy of the transcript for you to read through if you wish prior to beginning my analysis. I will then use an Interpretive Phenomenological Analysis methodology to analyse this data.

I don't consider that there is any risk to you in participating, or any particular benefit to you directly. I consider it unlikely that the interview will stimulate any painful issues, but if in the unlikely event that it does I will ensure that relevant support is available from myself or by referral.

Confidentiality of the Data

You are known to me, which is necessary to this study, and I have your contact details. I will use codes and an index to ensure anonymity and confidentiality of your data within this study. Once the session has been recorded it will be coded, stored digitally and password protected. The anonymised recording will then be transcribed. I will carefully store the anonymised data and your details separately, and the index in a locked box. Any art work included in this study will also be anonymised and may be stored digitally or in printed format. The recorded data, your details and coding index will be destroyed within 2 years. I will use the data to produce a dissertation, and may develop this later for publication or for educational purposes. I will therefore need to keep the anonymised transcripts on file for possible further analysis in the future. I

would like permission to keep any images on file for educational purposes and possible publication and there is a space on the consent form to indicate if you are happy for this.

Location

The interviews will take place either at my home address in Brentwood, or at WHCM in Chelmsford at a time that suits you. Both places have a private room where we can meet confidentially.

Disclaimer

You are not obliged to take part in this study and should not feel coerced. You are free to withdraw at any time. Should you choose to withdraw from the study you may do so without disadvantage to yourself and without any obligation to give a reason. Should you withdraw once analysis of your data is underway I reserve the right to use your anonymised data in the write-up of the study and any further analysis that may be conducted. I will inform you of this date in advance.

Please feel free to ask me any questions. If you are happy to continue you will be asked to sign a consent form prior to your participation. Please retain this invitation letter for reference.

If you have any questions or concerns about how the study has been conducted, please contact the study's supervisor :

Gordon Jinks, School of Psychology, University of East London, Water Lane, London E15 4LZ. (Tel: 020 8223 4486, Email g.h.jinks@uel.ac.uk)

or

Chair of the School of Psychology Research Ethics Sub-committee: Dr. Mark Finn, School of Psychology, University of East London, Water Lane, London E15 4LZ.
(Tel: 020 8223 4493. Email: m.finn@uel.ac.uk)

Thank you in anticipation,
Yours sincerely,

Ani de la Prida
Date:

UNIVERSITY OF EAST LONDON

School of Psychology
Stratford Campus
Water Lane
London E15 4LZ

The Principal Investigator

Ani de la Prida

ani@delaprida.orangehome.co.uk Telephone number 07921 331069

Consent to Participate in a Research Study (Parent/Carer)

The purpose of this letter is to provide you with the information that you need to consider in deciding whether to consent to your son/daughter participating in a research study. The study is being conducted as part of my Counselling & Psychotherapy Masters degree at the University of East London.

Project Title

A qualitative study of client and counselor experiences of using a digital art application via ipad as compared to using traditional art materials in therapy

Project Description

I am interested to find out what is it like for clients and therapists using digital art as compared to using traditional art materials in therapy. The aim of this study is to help develop counselling knowledge and practice in this area. In order to find out about the experience I will be conducting interviews, using a semi-structured format that will last approximately 40 minutes. These will be recorded and then transcribed. I will be asking questions on your son/daughter's thoughts and experience of using digital art in therapy, and of technology in general. I will also include data from my own experiences. I will supply your son/daughter with a copy of the transcript to check through prior to beginning my analysis. I will then use an Interpretive Phenomenological Analysis methodology to analyse this data. I don't consider that there is any risk to your son/daughter in participating, or any particular benefit to him/her directly. I consider it unlikely that the interview will stimulate any painful issues, but if in the unlikely event that it does I will ensure that relevant support is available from myself or by referral.

Confidentiality of the Data

You and your son/daughter are known to me, which is necessary to this study, and I have your contact details. I will use codes and an index to ensure anonymity and confidentiality of the data within this study. Once the session has been recorded it will be coded, stored digitally and password protected. The anonymised recording will then be transcribed. I will carefully store the anonymised data and your details separately, and the index in a locked box. Any art work included in this study will also be anonymised and may be stored digitally or in printed format. The recorded data, your details and coding index will be destroyed within 2 years. I will use the data to produce a dissertation, and may develop this later for publication or for educational purposes. I will therefore need to keep the anonymised transcripts on file for possible further analysis in the future. I would like permission to keep any images on file for educational

purposes and possible publication and there is a space on the consent form to indicate if you are happy for this.

Location

The interviews will take place either at my home address in Brentwood, or at WHCM in Chelmsford at a time that suits you. Both places have a private room where we can meet confidentially.

Disclaimer

Your son/daughter is not obliged to take part in this study and should not feel coerced. He/she is free to withdraw at any time. You are also free to withdraw participation on their behalf. Should you or your son/daughter choose to withdraw from the study you may do so without disadvantage to yourself and without any obligation to give a reason. Should you withdraw once analysis of your data is underway I reserve the right to use the anonymised data in the write-up of the study and any further analysis that may be conducted. I will inform you of this date in advance.

Please feel free to ask me any questions. If you are happy to continue you will be asked to sign a consent form prior to your son/daughter's participation. Please retain this invitation letter for reference.

If you have any questions or concerns about how the study has been conducted, please contact the study's supervisor :

Gordon Jinks, School of Psychology, University of East London, Water Lane, London E15 4LZ. (Tel: 020 8223 4486, Email g.h.jinks@uel.ac.uk) **or**

Chair of the School of Psychology Research Ethics Sub-committee: Dr. Mark Finn, School of Psychology, University of East London, Water Lane, London E15 4LZ.

(Tel: 020 8223 4493. Email: m.finn@uel.ac.uk)

Thank you in anticipation,

Yours sincerely,

Ani de la Prida

Date:

UNIVERSITY OF EAST LONDON

School of Psychology
Stratford Campus
Water Lane
London E15 4LZ

The Principal Investigator

Ani de la Prida
ani@delaprida.orangehome.co.uk Telephone number 07921 331069

Consent to Participate in a Research Study (under 18's)

The purpose of this letter is to give you enough information so you can decide whether to be part of my research study. The study is for my Counselling & Psychotherapy Masters degree at the University of East London.

Project Title

A qualitative study of client and counselor experiences of using a digital art application via ipad as compared to using traditional art materials in therapy
This title is saying that I am interested to find out what its like for clients and for counselors to use an ipad art application in therapy

Project Description

I want to find out what its like for clients and counsellors using the ipad compared to using paper and pencils in therapy. I hope this will help me and others develop how we work with clients.

Because you are under 18 years I will need a parent/carer to agree to you taking part. To help me find out what its like I will interview you for about 40 minutes. I will have some questions written down about using the ipad and technology in general, but will make sure you can also just tell me what you think. I'll record the interview and then will have it typed. I will record my experiences later too. I will give you a copy of the typed interview so you can read it through if you want to. If there is anything you want to take out you can. I will then use this typed copy to study and analyse.

I don't think this can hurt or upset you in any way, and there isn't any particular benefit to you. If you found that doing this was upsetting in some way we could talk it through afterwards and also in our counselling sessions.

Confidentiality of the Data

I do have your name and address but I will use codes, and an index to make sure no one can work out who you are from the recording or typed material. Once the session has been recorded it will be coded, password protected and then typed up. I will carefully store the coded material and your details separately, and the index in a locked box. Any art work you let me use will be coded and kept digitally or on paper. I will destroy the recording, your details and coding index within 2 years. I will use this material to produce a project called a dissertation which I will give to the University. I might later have some of the work published or use it when teaching. I will need to keep the typed version of the interview on file for more analysis in the future. I would like permission to keep any art work on file for to use when teaching or for publication, and there is a space on the consent form to say if you are happy for this.

Location

The interviews will be at my home address in Brentwood, or at WHCM in Chelmsford at a time that suits you. Both places have a private room where we can meet confidentially.

Disclaimer

You don't have to take part in this study and should not feel pressured into taking part. You can change your mind and pull out at any time. Your parent/carer can also ask that you pull out of the study. If you change your mind that is ok, and you don't have to explain why. If I have already started to analyse then I have the right to use the anonymised material in the write-up of the study and any further analysis that I do. I will tell you the date before starting my analysis.

Please do ask me any questions. Is there anything you don't understand? If you are happy to continue you I will ask you and your parent/carer to sign consent forms before we start. Please keep this invitation letter for reference.

If you have any questions or concerns about what I am doing , please contact the study's supervisor :

Gordon Jinks, School of Psychology, University of East London, Water Lane, London E15 4LZ. (Tel: 020 8223 4486, Email g.h.jinks@uel.ac.uk)or

Chair of the School of Psychology Research Ethics Sub-committee: Dr. Mark Finn, School of Psychology, University of East London, Water Lane, London E15 4LZ.

(Tel: 020 8223 4493. Email: m.finn@uel.ac.uk)

Thank you in anticipation,

Yours sincerely,

Ani de la Prida

Date:

Date:

CONSENT FORM

(See pro forma in the ethics folder in the Psychology Noticeboard on UEL Plus. This should be adapted for use with parents/guardians and children.)

UNIVERSITY OF EAST LONDON

Consent to participate in a research study (Adult)

A qualitative study of client and counselor experiences of using a digital art application via ipad as compared to using traditional art materials in therapy

I have read the information sheet relating to the above research study and have been given a copy to keep. The nature and purposes of the research have been explained to me, and I have had the opportunity to discuss the details and ask questions about this information. I understand what is being proposed and the procedures in which I will be involved have been explained to me.

I understand that my involvement in this study, and particular data from this research, will remain strictly confidential. Only the researcher(s) involved in the study will have access to identifying data. It has been explained to me what will happen once the research study has been completed.

I hereby freely and fully consent to participate in the study which has been fully explained to me. Having given this consent I understand that I have the right to withdraw from the study at any time without disadvantage to myself and without being obliged to give any reason. I also understand that should I withdraw once analysis is underway, the researcher reserves the right to use my anonymous data in the write-up of the study and in any further analysis that may be conducted by the researcher.

I give permission for any images to be kept and used in the future for educational purposes or publication YES/NO

Participant's Name (BLOCK CAPITALS)

.....

Participant's Signature

.....

Researcher's Name (BLOCK CAPITALS)

.....

Researcher's Signature

.....
Date:

UNIVERSITY OF EAST LONDON

Consent to participate in a research study (Parent/Carer)

A qualitative study of client and counselor experiences of using a digital art application via ipad as compared to using traditional art materials in therapy

I have read the information sheet relating to the above research study and have been given a copy to keep. The nature and purposes of the research have been explained to me, and I have had the opportunity to discuss the details and ask questions about this information. I understand what is being proposed and the procedures in which my son/daughter will be involved have been explained to me.

I understand that my son/daughter's involvement in this study, and particular data from this research, will remain strictly confidential. Only the researcher(s) involved in the study will have access to identifying data. It has been explained to me what will happen once the research study has been completed.

I hereby freely and fully consent to my son/daughter participating in the study which has been fully explained to me. Having given this consent I understand that I have the right to withdraw my son/daughter from the study at any time without disadvantage and without being obliged to give any reason. I also understand that should I withdraw once analysis is underway, the researcher reserves the right to use the anonymous data in the write-up of the study and in any further analysis that may be conducted by the researcher.

I give permission for any images to be kept and used in the future for educational purposes or publication YES/NO

Participant's Name (BLOCK CAPITALS)

.....

Parent/Carer's Name (BLOCK CAPITALS)

.....

Parent/Carer's Signature

.....

Researcher's Name (BLOCK CAPITALS)

.....

Researcher's Signature

.....

Date:

UNIVERSITY OF EAST LONDON

Consent to participate in a research study (under 18's)

A qualitative study of client and counselor experiences of using a digital art application via ipad as compared to using traditional art materials in therapy

I have read the information sheet relating to the above research study and have been given a copy to keep. The point of the study has been explained to me, and I have had the opportunity to discuss the details and ask questions. I understand what is being suggested and what I am being asked to do.

I understand that my involvement and material from this research, will remain strictly confidential. Only the researcher(s) involved in the study will be able to know who I am. It has been explained to me what will happen once the research study has been completed.

I freely and fully consent to participate in the study which has been fully explained to me. I understand that I can withdraw from the study at any time, and that it is ok if I pull out and I don't have to explain why. I also understand that if I do withdraw once analysis is underway, the researcher can still use the written material in the study and in any further analysis that is done.

I give permission for any artwork to be kept and used in the future for educational purposes or publication YES/NO

Participant's Name (BLOCK CAPITALS)

.....

Participant's Signature

.....

Researcher's Name (BLOCK CAPITALS)

.....

Researcher's Signature

.....

Date:

OTHER ATTACHMENTS

(See notes on page 1 about what other attachments you may need to include)

SCHEDULE SEMI-STRUCTURED INTERVIEW POSSIBLE RESEARCH QUESTIONS

Questions on their views of new technology

1. how would you describe your experience and feelings towards new technology?

Questions on using the app

2. Thinking of this particular application can you tell me about the usability of it?

Questions on using the ipad - have they used one before, are they a confident user

3. Have you got an ipad or touch tablet? how confident would you say you are at using them generally?

4. Tell me about your thoughts when using it here for the first time - were you nervous, excited?

5. how many times have you used the ipad here - did your experience of using it change?

Questions on impact on therapeutic process or not

6. in what ways if any did using the ipad here help or inhibit your process

Questions comparing to using paper

7. how did it compare to using traditional art materials ?

Questions regarding confidentiality concerns with new technology

8. b) did you have the image emailed to you – tell me about that ?

9. a) did you have any concerns about security from the ipad, for example that your image could appear elsewhere, get hacked into, how it is stored etc?

10. how likely are you to choose to use this again in the future on a scale of 1 - 10

what if anything do you feel it added to the session

what if anything do you feel it took away from the session

Is there anything else you'd like to tell about the experience

SCANNED COPY OF CURRENT CRB CERTIFICATE

(If one is required. See notes on page 1 if scanning is not at all possible)

Enhanced Certificate Page 1 of 2		Disclosure & Barring Service
Certificate Number: 001405721845		Date of Issue: 24 MAY 2013
Applicant Personal Details		
Surname:	DE LA PRIDA	Position applied for: COUNSELLOR LECTURER
Forename(s):	ANNA MARIA	Name of Employer: WHCM
Other Names:	DE LA PRIDA ANNA MARIA DE LA PRIDA ANI DE LA PRIDA ANI	Countersignatory Details
Date of Birth:	05 MARCH 1964	Registered Person/Body: COPAS
Place of Birth:	LONDON	Countersignatory: RUTH SAMME
Gender:	FEMALE	
Police Records of Convictions, Cautions, Reprimands and Warnings		
NONE RECORDED		
Information from the list held under Section 142 of the Education Act 2002		
NONE RECORDED		
DBS Children's Barred List information		
NONE RECORDED		
DBS Adults' Barred List information		
NOT REQUESTED		
Other relevant information disclosed at the Chief Police Officer(s) discretion		
NONE RECORDED		
Enhanced Certificate This document is an Enhanced Criminal Record Certificate within the meaning of sections 113B and 116 of the Police Act 1997.		
<p>THIS CERTIFICATE IS NOT EVIDENCE OF IDENTITY</p> <p>Disclosure and Barring Service, PO Box 165, Liverpool, L69 3JD Helpline: 0870 90 90 811</p> <p>Continued on page 2</p> <p>© Crown Copyright</p>		

REMEMBER TO INCLUDE ALL NECESSARY ATTACHMENTS IN THE ONE APPLICATION DOCUMENT AND EMAIL THE COMPLETE APPLICATION AS ONE DOCUMENT (.doc) TO YOUR SUPERVISOR WITH 'ETHICS SUBMISSION' IN THE SUBJECT FIELD OF YOUR EMAIL

AND REMEMBER THAT YOU MUST RETURN ALL EQUIPMENT YOU BORROW FROM THE HELDESK FOR RESEARCH PURPOSES

Appendix 3

ETHICAL PRACTICE CHECKLIST (BSc/MSc/MA)

SUPERVISOR: Gordon Jinks

ASSESSOR: John Turner

STUDENT: Ani De La Prida

DATE (sent to assessor): 14/06/2013

Proposed research topic: A qualitative study of client and counsellor experiences of using a digital art application via ipad as compared to using traditional art materials in therapy

Course: MA Counselling and Psychotherapy

- | | |
|--|-----|
| 1. Will free and informed consent of participants be obtained? | YES |
| 2. If there is any deception is it justified? | N/A |
| 3. Will information obtained remain confidential? | YES |
| 4. Will participants be made aware of their right to withdraw at any time? | |
| 5. Will participants be adequately debriefed? | YES |
| 6. If this study involves observation does it respect participants' privacy? | YES |
| 7. If the proposal involves participants whose free and informed consent may be in question (e.g. for reasons of age, mental or emotional incapacity), are they treated ethically? | YES |
| 8. Is procedure that might cause distress to participants ethical? | NA |
| 9. If there are inducements to take part in the project is this ethical? | NA |
| 10. If there are any other ethical issues involved, are they a problem? | NA |

APPROVED

	YES, PENDING MINOR CONDITIONS	
--	----------------------------------	--

MINOR CONDITIONS: Applicant should discuss the wording of the interview questions and consent form for very young participants (primary age); I am confident the applicant and supervisor could resolve any issues without need for further review. It perhaps should be noted however, for future applications/research of this nature,

that there is vagueness in the methodology/participant recruitment that seems unnecessary – a more formal ethics process would likely demand a clear statement of who definitely will be recruited and might challenge the utility of a study on just 5-6 people who could all be of radically different ages (as the reviewer I feel the process described is ethically sound, but wondered why the study is not just about the use of the ipad app in primary age children OR secondary OR adults).

Assessor initials: JT Date: 02.07.2013

RESEARCHER RISK ASSESSMENT CHECKLIST (BSc/MSc/MA)

SUPERVISOR: Gordon Jinks

ASSESSOR: John Turner

STUDENT: Ani De La Prida

DATE (sent to assessor): 14/06/2013

Proposed research topic: A qualitative study of client and counsellor experiences of using a digital art application via ipad as compared to using traditional art materials in therapy

Course: MA Counselling and Psychotherapy

Would the proposed project expose the researcher to any of the following kinds of hazard?

- | | | |
|----|--|----|
| 1 | Emotional | NO |
| 2. | Physical | NO |
| 3. | Other
(e.g. health & safety issues) | NO |

If you've answered YES to any of the above please estimate the chance of the researcher being harmed as: HIGH / MED / LOW

APPROVED

YES		
-----	--	--

MINOR CONDITIONS:

REASONS FOR NON APPROVAL:

Assessor initials: JT Date: 02.07.2013

For the attention of the assessor: Please return the completed checklists by e-mail to ethics.applications@uel.ac.uk within 1 week.

Appendix 4

UNIVERSITY OF EAST LONDON

School of Psychology
Stratford Campus
Water Lane
London E15 4LZ

Researcher

Ani de la Prida

ani@delaprida.orangehome.co.uk

Telephone number 07921 331069

A qualitative study of client and counselor experiences of using a digital art application via ipad as compared to using traditional art materials in therapy

Invitation sheet (Adult version)

This is to provide you with the information that you need to help you decide whether to participate a research study which I am conducting as part of my Counselling & Psychotherapy MA.

Project Description

I am interested to find out about the experience of using digital art with an ipad in therapy as compared to using traditional art materials. My aim is to help develop counselling knowledge and practice in this area.

I will be conducting interviews lasting approximately 40 minutes using a semi-structured format. I will ask questions on your experience of using digital art in therapy, and of technology in general. Interviews will be recorded and transcribed and I will supply you with a copy to read through if you wish prior to beginning my analysis, and we can remove anything you aren't happy with.

I don't consider that there is any risk to you in participating, or any particular benefit to you directly. I consider it unlikely that the interview will stimulate any painful issues, but if in the unlikely event that it does I will ensure that relevant support is available from myself or by referral.

Confidentiality of the Data

I will password protect, and code data to ensure anonymity and confidentiality. The data will be stored with my supervisor in a locked cabinet at the University of East London, and will be destroyed later, usually after two years.

I would like permission to keep any images on file for use when teaching or for possible publication, and there is a space on the consent form to say if you are happy for this. Any images used will be anonymised.

Location

The interviews will take place at our usual place of meeting, either at my home address in Brentwood, or in a counselling room at WHCM in Chelmsford (delete where relevant depending on participant) at a time that suits you.

Disclaimer

You are not obliged to take part in this study and I don't want you to feel coerced. You are free to withdraw at any time without disadvantage to yourself and without any obligation to give a reason. Should you withdraw once analysis of your data is underway I reserve the right to use your anonymised data in the write-up of the study and any further analysis that may be conducted. I will check with you before starting my analysis.

Please feel free to ask me any questions. If you are happy to continue please sign the consent form attached. Please retain this invitation letter for reference.

If you have any questions or concerns about how the study has been conducted, please contact the study's supervisor :

Max O'Neill, School of Psychology, University of East London, Water Lane, London E15 4LZ. (Tel: 020 8223 4107, Email m.h.oneill@uel.ac.uk)

or

Chair of the School of Psychology Research Ethics Sub-committee: Dr. Mark Finn, School of Psychology, University of East London, Water Lane, London E15 4LZ.
(Tel: 020 8223 4493. Email: m.finn@uel.ac.uk)

Thank you,

Ani de la Prida

Date:

UNIVERSITY OF EAST LONDON

Consent to participate in a research study (Adult)

A qualitative study of client and counselor experiences of using a digital art application via ipad as compared to using traditional art materials in therapy

I have read the information sheet relating to the above research study and have been given a copy to keep. The nature and purposes of the research have been explained to me, and I have had the opportunity to discuss the details and ask questions about this information. I understand what is being proposed and the procedures in which I will be involved have been explained to me.

I understand that my involvement in this study, and particular data from this research, will remain strictly confidential. Only the researcher(s) involved in the study will have access to identifying data. It has been explained to me what will happen once the research study has been completed.

I hereby freely and fully consent to participate in the study which has been fully explained to me. Having given this consent I understand that I have the right to withdraw from the study at any time without disadvantage to myself and without being obliged to give any reason. I also understand that should I withdraw once analysis is underway, the researcher reserves the right to use my anonymous data in the write-up of the study and in any further analysis that may be conducted by the researcher.

I give permission for any images to be kept and used in the future for educational purposes or publication YES/NO

Participant's Name (BLOCK CAPITALS)

.....

Participant's Signature

.....

Researcher's Name (BLOCK CAPITALS)

.....

Researcher's Signature

.....

Date:

UNIVERSITY OF EAST LONDON

School of Psychology
Stratford Campus
Water Lane
London E15 4LZ

Researcher

Ani de la Prida

ani@delaprida.orangehome.co.uk

Telephone number 07921 331069

A qualitative study of client and counselor experiences of using a digital art application via ipad as compared to using traditional art materials in therapy

Invitation sheet (Parent/Carer version)

This letter is to provide you with the information that you need to help you decide whether to consent to your son/daughter participating in a research study which I am conducting as part of my Counselling & Psychotherapy MA.

Project Description

I am interested to find out about the experience of using digital art with an ipad in therapy as compared to using traditional art materials. My aim is to help develop counselling knowledge and practice in this area.

I will be conducting interviews lasting approximately 30-40 minutes using a semi-structured format. I will ask questions on the experience of using digital art in therapy, and of technology in general. Interviews will be recorded and transcribed and I will supply your son/daughter with a copy to read through prior to beginning my analysis.

I don't consider that there is any risk in participating, or any particular benefit to participants directly. I consider it unlikely that the interview will stimulate any painful issues, but if in the unlikely event that it does I will ensure that relevant support is available from myself or by referral.

Confidentiality of the Data

I will password protect, and code data to ensure anonymity and confidentiality. The data will be stored with my supervisor in a locked cabinet at the University of East London, and will be destroyed later, usually after two years.

I would like permission to keep any images on file for use when teaching or for possible publication, and there is a space on the consent form to say if you are happy for this. Any images used will be anonymised.

Location

The interviews will take place in our usual place of meeting at my home practice address in Brentwood.

Disclaimer

Your son/daughter is not obliged to take part in this study and shouldn't feel coerced. Participants are free to withdraw at any time without disadvantage and without any obligation to give a reason. Should he/she withdraw once analysis of the data is underway I reserve the right to use the anonymised data in the write-up of the study and any further analysis that may be conducted. I will check with participants before starting my analysis.

Please feel free to ask me any questions. If you are happy to consent please sign the consent form attached prior to your son/daughter's participation. Please retain this invitation letter for reference.

If you have any questions or concerns about how the study has been conducted, please contact the study's supervisor :

Max O'Neill, School of Psychology, University of East London, Water Lane, London E15 4LZ. (Tel: 020 8223 4107, Email m.h.oneill@uel.ac.uk)

or

Chair of the School of Psychology Research Ethics Sub-committee: Dr. Mark Finn, School of Psychology, University of East London, Water Lane, London E15 4LZ.
(Tel: 020 8223 4493. Email: m.finn@uel.ac.uk)

Thank you

Ani de la Prida

Date:

UNIVERSITY OF EAST LONDON

Consent to participate in a research study (Parent/Carer)

A qualitative study of client and counselor experiences of using a digital art application via ipad as compared to using traditional art materials in therapy

I have read the information sheet relating to the above research study and have been given a copy to keep. The nature and purposes of the research have been explained to me, and I have had the opportunity to discuss the details and ask questions about this information. I understand what is being proposed and the procedures in which my son/daughter will be involved have been explained to me.

I understand that my son/daughter's involvement in this study, and particular data from this research, will remain strictly confidential. Only the researcher(s) involved in the study will have access to identifying data. It has been explained to me what will happen once the research study has been completed.

I hereby freely and fully consent to my son/daughter participating in the study which has been fully explained to me. Having given this consent I understand that I have the right to withdraw my son/daughter from the study at any time without disadvantage and without being obliged to give any reason. I also understand that should I withdraw once analysis is underway, the researcher reserves the right to use the anonymous data in the write-up of the study and in any further analysis that may be conducted by the researcher.

I give permission for any images to be kept and used in the future for educational purposes or publication YES/NO

Participant's Name (BLOCK CAPITALS)

.....

Parent/Carer's Name (BLOCK CAPITALS)

.....

Parent/Carer's Signature

.....

Researcher's Name (BLOCK CAPITALS)

.....

Researcher's Signature

.....

Date:

UNIVERSITY OF EAST LONDON

School of Psychology
Stratford Campus
Water Lane
London E15 4LZ

Researcher

Ani de la Prida

ani@delaprida.orangehome.co.uk

Telephone number 07921 331069

A qualitative study of client and counselor experiences of using a digital art application via ipad as compared to using traditional art materials in therapy

Invitation Sheet (Child and Young Person version)

This letter is to help you decide if you want to be part of a research project that I am doing as part of my Masters Degree at the University of East London.

Project Description

I want to find out what its like to use an ipad in therapy, compared to using usual art materials. I hope this will help me and others develop how we work with clients.

Because you are under 18 years I will need a parent/carer to agree to you taking part.

I'll need to interview you for about 30-40 minutes. I will have some questions written down about using the ipad and technology in general, but will also ask you to tell me what you think.

I'll record us, and then will give you a copy of the typed interview which you can take home or we can read through together if you want to. You can take out anything you're not happy with. I will then use this typed copy to analyse for my project.

I don't think this can hurt or upset you in any way, and there isn't any particular benefit to you. I'll talk with you after the interview to see how you feel, and if you find that doing this upset you in some way we could talk it through in our counselling sessions.

Confidentiality of the Data

I will use codes and password protection to make sure no one can work out who you are from the recording or typed material. This information will then be stored with my Supervisor at University of East London in a locked cabinet, and will be destroyed later, usually after two years.

I would like permission to keep any images on file for to use when teaching or for publication, and there is a space on the consent form to say if you are happy for this. Any images you let me use will be anonymised.

Location

The interviews will be where we usually meet at my home practice address at a time that suits you.

Changing your mind

You don't have to take part in this study and I don't want you to feel pressured into taking part. You can change your mind and pull out at any time. Your parent/carer can also ask that you pull out of the study.

If you change your mind that is ok, anytime before I have started the analysis. You don't have to explain why. I will check with you before starting my analysis.

Any questions ?

If you are happy to continue please sign the form and I will give an information sheet and consent form to your parent/carer.

If you have any questions or concerns about how the study has been conducted, please contact the study's supervisor :

Max O'Neill, School of Psychology, University of East London, Water Lane, London E15 4LZ. (Tel: 020 8223 4107, Email m.h.oneill@uel.ac.uk)

or

Chair of the School of Psychology Research Ethics Sub-committee: Dr. Mark Finn, School of Psychology, University of East London, Water Lane, London E15 4LZ.

(Tel: 020 8223 4493. Email: m.finn@uel.ac.uk)

Thank you

Ani de la Prida

Date:

UNIVERSITY OF EAST LONDON

Consent to participate in research study (Child and Young Person version)

A qualitative study of client and counselor experiences of using a digital art application via ipad as compared to using traditional art materials in therapy

The information sheet has been read to me, the project has been explained and I have been given a copy to keep. I have been able to ask questions, and I understand what I'm being asked to do.

I understand that only those involved in this study will be able to know who I am or what I have said in this project. It has been explained to me what will happen once the research study has been completed.

I freely and fully agree to be part of this project which has been fully explained to me. I understand that I can change my mind, and that it is ok if I pull out and I don't have to explain why. I also understand that if I do withdraw once analysis has started, the researcher can still use the written material in the project.

I give permission for any images to be kept and used in the future for teaching or publication
YES/NO

Participant's Name (BLOCK CAPITALS)

.....

Participant's Signature

.....

Researcher's Name (BLOCK CAPITALS)

ANI DE LA PRIDA

.....

Researcher's Signature

.....

Date:

Appendix 5 Analysis examples

Themes - underlined
sub themes - italics

overview of themes, emerging subthemes, and initial thoughts and analysis

1.Views and attitudes to new technology

Net-generation/ net paradigm - we're not in same paradigm (link to lit search)

Makes me feel stupid and old

Young have no fear of it

Older participants ;

Mistrust

It wont work

Don't know how it does it

Took ages to believe emails go somewhere

It'll turn out to be detrimental

Not as good as it seems

Don't understand it so how can I trust it

Dislike

It stops us communicating

Boring

Changing things

Scary

It might break

Might press the wrong button

Muck it all up

Unhealthy

addictive

Nuisance - burden

Takes up time to learn

Cant be bothered

My life works without it

Is it necessary

Child and Young Person view - almost missing ?! I reflected below ;

Start of analysis ;

New technology isn't 'new' for net generation

4. How it was used in sessions

Photography - visual record

Art app - drawing and writing

Google - for reference

My notes - games - on line and off line on ipad

- ***Explore, monsters,***
- ***Show me - Dr.Who***

Link to lit search - gaming therapy, interactive table, role play etc

5. Digital art vs traditional materials

Ipad

Quicker

Easier to use

Messy without mess

Can do more

Less creative

Easy to delete

Mistakes (here or under therapeutic-ness - or both)

Easy to fix

Just press a button and its gone

Less nervous of making mistakes

Sort of UPR experience ?

Example of initial colour coded analysis

Print screened - new terminology? Meant to say screen print? 320
Not bothered if I kept digital image it on ipad or not (why? Is it because it feels anonymous - less personal than work on paper?) 326
Ipad Usefulness in session 7 (336)
Ipad Less useful for drawing some things 340
Ipad more useful for drawing things that she can't say (directly referring to usefulness within therapy- does it create a distance between difficult material and self? Or does this refer more to art? But then she contradicts this, implying ipad more useful because of ease of use ?) 340
Ipad for drawing no more useful than paper 347
Ipad (art app) Easier, neater, 353
Ipad (art app) less messy 356
don't need to worry about mess/smudges with ipad 356
(This client chooses the less familiar material of pastels in order to develop drawing skills. Would another client choose ipad in order to develop skills if they didn't have one at home?) 374
definitely would use ipad again , not sure how many times 386
Ipad didn't add anything to session 398
Ipad didn't take anything away from session 405
Using ipad made no difference to session 411
Ipad Easier than writing or drawing 456
Easy to undo /rub out mistakes on ipad (Client gestured rub out / undo function) 466
Ipad useful when I don't want to write or draw (referring to other uses , ie googling, photography) 478
Ipad art app useful if I want to draw or write 481
Ipad felt different to drawing with paper 488
Ipad felt Easier 489
Felt Righter (more right - more familiar ?) 489
I preferred it - using ipad in session 494
Ipad Gives you a bit more detail 495
Most likely to make mistakes when drawing 503
Ipad closing down rather than opening up choices 2122
Some resistance, to using ipads in therapy 2128
Might narrow their vision 2131
Idea that screen technology might be un-therapeutic 2132
Idea that ipad might be helpful to establish a relationship with young people (reference to age) 2134
This is the language they use (ipad/technology) 2138
usefulness of ipad in session 9 or 10 2148
ipad -practical to use 2147
ipad pleasant 2149
ipad pleasurable 2149
ipad took nothing away from session 2153
Confused - conflicting thoughts about ipads 2168
(Conflict/incongruence) made judgements about ipad that don't match her experience 2179

critical parent perspective regarding new technology /ipad

Enjoyed , Really enjoyed 2196

(Same skills worked for facilitating ipad or images on paper - don't need new skills?) 2200

Was a deep experience 2202

Technology - unsure, takes effort and though, not yet easy for me 2214

Unsure of technology 2218

Not trusting 2218

Don't like new technology 2296

New technology It scares me 2230

New technology Makes me feel stupid and old 2236

Is this really necessary (do we need technology) 2239

Could have done it in half the time the old fashioned way 2240

Feel even older 2241

Sad - technology changing things - has killed conversation 2248

Appendix 6

Data examples

Notes

Digital Art Therapy Interview

<http://vimeo.com/70799998> [accessed 1.12.14]

1. notes taken from recorded interviews from study by Natalie Carlton Nov 2011
2. Barabara 'Basia' Mosinski
3. She works using digital audio/visual equipment in therapy, also making websites with clients as therapy . She was a performance artist first, so used digital recording equipment , it often didn't work so she learned how to use it. (used digital technology in her work prior to using in therapy)
4. Brian Austin
5. digital painting, 3D animation and illustrator with ipad , uses all of these in therapy with clients. He was an illustrator for 20 years, digital animation before retraining. (used digital technology in his work prior to using in therapy)
6. Jon Ehinger
7. Collage artist, creative media specialist, electronic arts background, graphic designer - digital
8. Uses digital audio visual - green screen with clients, and a variety of digital media (used digital technology in his work prior to using in therapy)
9. Bob Woolf
10. psychotherapist and arts therapist , lecturer, design and photography background, he was a photographer and took a year sabbatical to learn how to use digital equipment and switched over (used digital technology in his work prior to using in therapy)

11. applications - how its being used

12. a) Brian - 3D animation with groups of disadvantaged adolescents, a therapist and digital animator work together over 12 weeks to enable the group to develop and animate a story -(amazing!)
13. b) Jon - Hospital psychiatric in patients - digital video and a green screen to create , moving backgrounds to 'transport' patients to different places , for example an in-patient can experience and process other environments, being in Paris or on the moon. (wow!)
14. c) Bob - phototherapy, using cameras and mac, collage with photos and painting over it, remaking the past - ie photograph old photos and rearrange family groups, remove a person, put self as an adult into old photos, who would you stand next to etc -(powerful)
15. d) digital video - and web creation, recording narratives , recording and playback opportunity is exciting, for example a client talking about trauma, abuse. Editing software helpful as it acts like memory, can be useful in desensitising by

watching over and over again working with clients (powerful - don't understand the website thing though)

16. inherent qualities in digital arts media

- 17. less affect at times, (clients feel less emotion) can be a benefit or disadvantage, allows defense movability - can move around physically (recording video)
- 18. fast - instant
- 19. easy for all ages to work with
- 20. can change things easily and quickly
- 21. documenting - creates a record automatically

22. extracts

- 23. it has to be natural for therapist
- 24. therapist needs to be comfortable using it , needs to be a fluid process - so learn how to use it!
- 25. It's a tool
- 26. As the membership (art therapists association) changes (becomes younger) they'll automatically be using it more
- 27. We have to integrate it (digital)
- 28. Digital media is accessible for clients
- 29. Digital media art therapy is the future
- 30. Theyouth want to do it - we need to serve their needs
- 31. We need to become experts
- 32. Inevitable
- 33. Artists are usually the first to explore new technology
- 34. It is important to have skills (in this order)
- 35. 1.theoretical
- 36. 2.experiential
- 37. 3. technology
- 38. there is a hunger for it(digital knowledge and skills) from other therapists
- 39. now is a good time to study the use of digital media in therapy
- 40. validity of technology (use)
- 41. it (digital technology) can be a gift BUT it can be overload of sensory experience in the youth -creates ADD in kids
- 42. technology is an art form
- 43. it is having an impact on our psyche
- 44. ipad useful for clients who are autistic
- 45. we are evolving, gravitating towards it
- 46. it cant all be bad
- 47. we are evolving with it
- 48. if we aren't comfortable with technology we will haveproblems with what is coming, the future, we'll be left in the dust
- 49. we don't know whats happening - this might be the only way we communicate in the future
- 50. I don't see myself as a technological person - I made the change

JG phone call notes

JG - phone call notes

she clarified the transcript and that she had said one of her supervisee's clients had brought their own ipad to sessions. 51. the counsellor had initially found it difficult 52, for the client it was a natural thing to bring in, it was an everyday object, 53 some concern about difficulty focussing on session, on therapeutic process, but counsellor accepted it and it became part of the process 54.

iPad reflections on sessions for research journal

- a) 19.11.13 two clients used the ipad today, strange as for weeks none have and then today two.
- b) Client c boy aged 8, session 2 I inadvertently had left the ipad in the room, and when he noticed it I thought OK. He was excited and said he'd used one before, he asked if I had games on it. My internal response was that I stiffened, I think I am prejudiced towards games, I answered no I didn't think so - and when he looked he found some, seems I had 'forgotten' that I had any installed.
- c) Then he saw one my son had downloaded, and then I worried as wasn't sure if it was suitable for his age group, I said I'd need to check but luckily we couldn't open it. Made me realise that I should delete anything not suitable. Or perhaps I should have an alternative desktop that I open for clients with restricted access - is this even possible.
- d) Strange feeling again when client seems more competent with the ipad than me. He asked to go on line, again I was concerned as I hadn't discussed any boundaries with him, or put parental limits on. He asked if he could go to 'miniclip' which is a site I know, then he chose a game and started to download. Another concern, what if something a client downloads has a virus? Do I limit what any client can download? Do I limit internet searches?
- e) I found myself directing him towards an art app - he didn't like it, he scrolled through other artwork - luckily mine, because I hadn't opened the app for him, and he was fast. I need to find a way to lock folders.
- f) The game was ok, a two dimensional skateboarding game. He played and I sat alongside, commenting. I found this challenging at times, he played for most of the session - I started to wonder what mum would think if he told her he'd sat and played with ipad?! What if he wasn't allowed to play?! Need to think this through. Also difficult at times for me to engage with him, I found myself switching off emotionally from his activity, I did force myself back trying to empathise, but it sounded mechanical to me.
- g) There were lots of actions and commentary that could be metaphor, which I could reflect back - for example "I keep missing the danger signs, I can go back and do it again, spotted them now, I did it, I fell over again, can't get it right, I'm not giving up" etc. So why do I not like this 'play' in therapy, I think it isn't as therapeutic!! My material and prejudice. Cultural? My paradigm?
- h) at one point he used the loo, and didn't wash his hands, my response internally was that I didn't want him using MY ipad! Have never considered hygiene, but also the ipad is more precious to me than my pencils and toys, and this was part of my reaction too. C rated the session 10 out of 10, yet I didn't like it.

- i) Client E girl aged 16 .E came in , is often very uncomfortable and non-communicative. She chose to use the ipad and wanted me to suggest a theme. I did, she spent ages drawing and then rubbed it out - I was gutted ! This wouldn't happen with paper !
- j) Then she said "oh no, somethings happening and it keeps rubbing out', but its ok its only mine" she had accidentally opened another image, and touched the rubber. I was surprised as I have not seen a teenager need help with technology - again my assumptions. I closed the page and assured her that it was screen shot so we hadn't lost anything. She said it didn't matter.
- k) Then she asked for another theme, I suggested a flower, she spent 1/2 hour drawing, I facilitated the image a little but mostly nothing meant anything, said she couldn't connect to it. It was a rose, a painted rose like Alice in Wonderland, except E's rose turned out wrong. thorns on it that were dangerous, and a random blue bit, a mistake.
- l) Then she started to fiddle with a scab left by a nose stud, she picked inside her nose - my internal response was that I didn't want her to use MY ipad with dirty hands ! Then I realised I hadn't disinfected it from earlier client ! Not even sure how to disinfect an ipad. Twice in one day I have been challenged to think about hygiene and ipads, and the danger os using something precious to me with clients
- m) 25th nov client cc 10 year old girl. I was surprised when she suggested using the ipad. She was talking about monsters and dr.who and asked if I knew what 'crying angels' were , I said no, ans she said ' I could show you' so I handed over the ipad. Again I was worried about not having locked down images but I was more relaxed.
- n) She googled and found the crying angels. The ipad was simply part of the session, a useful tool . She used it to google lots of monsters and dr.who trivia, much of the session was about what she or I would be scared of. What mythical creatures she knows, or I know. She talked about liking stories with paradoxes. She wanted to know a lot about me , bonding? Maybe, or maybe using me to project onto or to start to open up conversationally. She didn't like the crying angels because they were silent but screaming on another dimension, they got you when you weren't looking. She rated the session 8 out of 10. Every session has had a different feel , mum is so erratic , maybe cc is too?
- o) Client c 26th nov session 3.When c came in the first thing he asked for was the ipad, he went straight to the skateboard game , I felt disappointed . Again I found it hard to engage , I had to force myself to move around to sit next to him and to interact with a commentary. After a while it got easier, maybe my unfamiliarity with working in this way contributes, although clearly I have some prejudice. I found myself wrestling internally with wanting to limit his time on it and wanting to remain non- directive.
- p) After a while he got bored and tried a different app, it didn't work . Then he tried a drawing app, which he didn't like . He then played pac man. The he found another app, Zoloft, where you drag shapes to make things. He created a being thingi but because I didn't know how to save it we lost it . I felt terrible - he just shrugged and said he would make it again. He did , it was slightly different and we tried to save it but lost it ! But we saw the original had been saved in the gallery - he laughed , he made a third thing and we saved it .

- q) I found it easier to work with this app, maybe because it is art based? I couldn't get the screenshot to work, very frustrating . Maybe it doesn't work in this app? I found my son and he showed me , so annoying when I can't work things in session!
- r) Then about halfway through the session c got bored with the ipad and chose to use materials in the room,I felt relieved. He used sand and water to make a swimming pool, played with transformers , then we played four in a row. He asked me to try my best , so I did. Then he chose to end slightly early so he could stroke my dog. His dog died three weeks ago. Stroking the dog felt important , he seemed to really relax and enjoy that she liked him

Appendix 6

Transcription examples

229	C1: ↓ Yeah	
230		
231	Ani: Is that because it takes	Longer with paper
232	longer to do the thing that	
	you're doing?	
233		
	C1: Mmm	
234		
235	Ani: Ok (.) erm so thinking about	
236	using it and the touch and feel	
237	of it how does that compare to	
	the paper?	
238		No need to organise materials
239	C1: (4.6) It's just like instead	
240	of organising (.) instead of like	
241	spending ages looking for the	Quicker to find colours you want
242	colour you want you can just	
243	click on like if it was just	
244	hiding under a bit of paper of	You can just click (this expresses ease of use in a number of ways)
	something	
245		
	Ani: How do you mean?	
246		
	C1: Like	
247		
248	Ani: It's easier to find the	
249	colour that you want on the	
	screen?	
250		
	C1: Yeah	
251		
252	Ani: Like if you wanted a certain	Don't have to look for things as materials available
	colour paper and it wasn't there?	
253		
	C1: Yeah	
254		
255	Ani: Cos you don't have to look	
	for it?	
256		
	C1: Yeah	
257		
258	Ani: Ah ok (.) and what's it like	
259	kind of using your finger instead	
	of a pencil?	
260		Just easier using finger to draw
	C1: Dunno just easier	
261		
262	Ani: Just easier (.) yeah that's	
263	the thing isn't it (.) Ok (.) so	
264	(.) did you (.) I didn't email	
265	the image to you did I I just	
	printed it out?	
266		
	C1: Yeah	
267		
268	Ani: So did you have any thoughts	
269	about confidentiality? Like did	
270	you worry that I would suddenly	
271	just like put it up on Facebook	
	or something?	

229	C1: ↓ Yeah	
230		
231	Ani: Is that because it takes	
232	longer to do the thing that	
	you're doing?	
233		
	C1: Mmm	
234		
235	Ani: Ok (.) erm so thinking about	
236	using it and the touch and feel	
237	of it how does that compare to	
	the paper?	
238		
239	C1: (4.6) It's just like instead	
240	of organising (.) instead of like	
241	spending ages looking for the	
242	colour you want you can just	
243	click on like if it was just	
244	hiding under a bit of paper of	
	something	
245		
	Ani: How do you mean?	
246		
	C1: Like	
247		
248	Ani: It's easier to find the	
249	colour that you want on the	
	screen?	
250		
	C1: Yeah	
251		
252	Ani: Like if you wanted a certain	
	colour paper and it wasn't there?	
253		
	C1: Yeah	
254		
255	Ani: Cos you don't have to look	
	for it?	
256		
	C1: Yeah	
257		
258	Ani: Ah ok (.) and what's it like	
259	kind of using your finger instead	
	of a pencil?	
260		
	C1: Dunno just easier	
261		
262	Ani: Just easier (.) yeah that's	
263	the thing isn't it (.) Ok (.) so	
264	(.) did you (.) I didn't email	
265	the image to you did I I just	
	printed it out?	
266		
	C1: Yeah	
267		
268	Ani: So did you have any thoughts	
269	about confidentiality? Like did	
270	you worry that I would suddenly	
271	just like put it up on Facebook	
	or something?	

Longer with paper

No need to organise materials

Quicker to find colours you want

You can just click (this expresses ease of use in a number of ways)

Don't have to look for things as materials available

Just easier using finger to draw

229	C1: ↓ Yeah	
230		
231	Ani: Is that because it takes	Longer with paper
232	longer to do the thing that	
233	you're doing?	
234	C1: Mmm	
235	Ani: Ok (.) erm so thinking about	
236	using it and the touch and feel	
237	of it how does that compare to	
238	the paper?	
239	C1: (4.6) It's just like instead	No need to organise
240	of organising (.) instead of like	materials
241	spending ages looking for the	
242	colour you want you can just	Quicker to find
243	click on like if it was just	colours you want
244	hiding under a bit of paper of	
245	something	
246	Ani: How do you mean?	You can just click
247	C1: Like	(this expresses ease
248	Ani: It's easier to find the	of use in a number of
249	colour that you want on the	ways)
250	screen?	
251	C1: Yeah	
252	Ani: Like if you wanted a certain	Don't have to look for
253	colour paper and it wasn't there?	things as materials
254	C1: Yeah	available
255	Ani: Cos you don't have to look	
256	for it?	
257	C1: Yeah	
258	Ani: Ah ok (.) and what's it like	
259	kind of using your finger instead	
260	of a pencil?	
261	C1: Dunno just easier	Just easier using
262	Ani: Just easier (.) yeah that's	finger to draw
263	the thing isn't it (.) Ok (.) so	
264	(.) did you (.) I didn't email	
265	the image to you did I I just	
266	printed it out?	
267	C1: Yeah	
268	Ani: So did you have any thoughts	
269	about confidentiality? Like did	
270	you worry that I would suddenly	
271	just like put it up on Facebook	
	or something?	

229	C1: ↓ Yeah	
230		
231	Ani: Is that because it takes	Longer with paper
232	longer to do the thing that	
	you're doing?	
233		
	C1: Mmm	
234		
235	Ani: Ok (.) erm so thinking about	
236	using it and the touch and feel	
237	of it how does that compare to	
	the paper?	
238		No need to organise materials
239	C1: (4.6) It's just like instead	
240	of organising (.) instead of like	
241	spending ages looking for the	Quicker to find colours you want
242	colour you want you can just	
243	click on like if it was just	
244	hiding under a bit of paper of	You can just click
	something	(this expresses ease of use in a number of ways)
245		
	Ani: How do you mean?	
246		
	C1: Like	
247		
248	Ani: It's easier to find the	
249	colour that you want on the	
	screen?	
250		
	C1: Yeah	
251		
252	Ani: Like if you wanted a certain	Don't have to look for things as materials available
	colour paper and it wasn't there?	
253		
	C1: Yeah	
254		
255	Ani: Cos you don't have to look	
	for it?	
256		
	C1: Yeah	
257		
258	Ani: Ah ok (.) and what's it like	
259	kind of using your finger instead	
	of a pencil?	
260		Just easier using finger to draw
	C1: Dunno just easier	
261		
262	Ani: Just easier (.) yeah that's	
263	the thing isn't it (.) Ok (.) so	
264	(.) did you (.) I didn't email	
265	the image to you did I I just	
	printed it out?	
266		
	C1: Yeah	
267		
268	Ani: So did you have any thoughts	
269	about confidentiality? Like did	
270	you worry that I would suddenly	
271	just like put it up on Facebook	
	or something?	

2895	to go ↓ I don't really want to talk about it	
2896	Ani: Mmm	
2897	C4: [And that-	
2898	Ani: Would have caused a problem]	
2900	C4: Yeah (.) So yeah no I would have-	
2901		
2902	Ani: So did you (.) did you think at all about how it's stored or any thoughts or concerns about how I was storing it on the iPad or anything?	No concerns about storing on ipad
2903		
2904	C4: No no	
2905		
2906	Ani: So where do you think it is?	
2907		
2908	C4: What on the iPad?	
2909		
2910	Ani: Yeah do you think I have it on the iPad or do you think it's just disappeared or-?	
2911		
2912	C4: ↑ Don't know ↑ I don't know (.) I know you printed it off (.) And I assumed that's in a file somewhere I've not really given it a thought	Therapy is safe enough to not give it a thought
2913		
2914	Ani: Ok	
2915		
2916	C4: No (.) I don't know (.) I don't know what happens to those things	
2917		
2918	Ani: Nothing (.) I've kept it safe in a folder on there and I would have thought I would have mentioned it-	
2919		
2920	C4: Yeah-	
2921		
2922	Ani: But you didn't have any concerns that I was-	
2923		
2924	C4: I think you did mention it Ani but because it wasn't any particular concern of mine it's just gone in- yeah	
2925		
2926	Ani: So how would it be (.) just out of interest if that accidentally got deleted? How do you think that would be for you?	
2927		
2928	Deleted from the iPad on there not from your folder	
2929		
2930		
2931		
2932		
2933		
2934		
2935		
2936		
2937		
2938		
2939		

61

2895	to go ↓ I don't really want to talk about it	
2896	Ani: Mmm	
2897	C4: [And that-	
2898	Ani: Would have caused a problem]	
2900	C4: Yeah (.) So yeah no I would have-	
2901		
2902	Ani: So did you (.) did you think at all about how it's stored or any thoughts or concerns about how I was storing it on the iPad or anything?	No concerns about storing on ipad
2903		
2904	C4: No no	
2905		
2906	Ani: So where do you think it is?	
2907	C4: What on the iPad?	
2908	Ani: Yeah do you think I have it on the iPad or do you think it's just disappeared or-?	
2909		
2910	C4: ↑ Don't know ↑ I don't know (.) I know you printed it off (.) And I assumed that's in a file somewhere I've not really given it a thought	Therapy is safe enough to not give it a thought
2911		
2912	Ani: Ok	
2913	C4: No (.) I don't know (.) I don't know what happens to those things	
2914		
2915	Ani: Nothing (.) I've kept it safe in a folder on there and I would have thought I would have mentioned it-	
2916		
2917	C4: Yeah-	
2918	Ani: But you didn't have any concerns that I was-	
2919		
2920	C4: I think you did mention it Ani but because it wasn't any particular concern of mine it's just gone in- yeah	
2921		
2922	Ani: So how would it be (.) just out of interest if that accidentally got deleted? How do you think that would be for you?	
2923	Deleted from the iPad on there not from your folder	
2924		
2925		
2926		
2927		
2928		
2929		
2930		
2931		
2932		
2933		
2934		
2935		
2936		
2937		
2938		
2939		

61

2895	to go ↓ I don't really want to talk about it	
2896	Ani: Mmm	
2897	C4: [And that-	
2898	Ani: Would have caused a problem]	
2900	C4: Yeah (.) So yeah no I would have-	
2901		
2902	Ani: So did you (.) did you think at all about how it's stored or any thoughts or concerns about how I was storing it on the iPad or anything?	No concerns about storing on ipad
2903		
2904	C4: No no	
2905		
2906	Ani: So where do you think it is?	
2907	C4: What on the iPad?	
2908	Ani: Yeah do you think I have it on the iPad or do you think it's just disappeared or-?	
2909		
2910	C4: ↑ Don't know ↑ I don't know (.) I know you printed it off (.) And I assumed that's in a file somewhere I've not really given it a thought	Therapy is safe enough to not give it a thought
2911		
2912	Ani: Ok	
2913	C4: No (.) I don't know (.) I don't know what happens to those things	
2914		
2915	Ani: Nothing (.) I've kept it safe in a folder on there and I would have thought I would have mentioned it-	
2916		
2917	C4: Yeah-	
2918	Ani: But you didn't have any concerns that I was-	
2919		
2920	C4: I think you did mention it Ani but because it wasn't any particular concern of mine it's just gone in- yeah	
2921		
2922	Ani: So how would it be (.) just out of interest if that accidentally got deleted? How do you think that would be for you?	
2923	Deleted from the iPad on there not from your folder	
2924		
2925		
2926		
2927		
2928		
2929		
2930		
2931		
2932		
2933		
2934		
2935		
2936		
2937		
2938		
2939		

61

1159	C3: No no no no]	
1160	Ani: You can't really be bothered	In the session with the ipad this client used an ipad for the first time so I didn't need to ask the question
1161	to even really think about it	
1162	that much (.) is that what you mean?	
1163		
1164	C3: Yes yes	Infrequent user, has only used ipad once
1165	Ani: Ok, so with your phone (.)	
1166	do you have a phone that you can	
1167	text on (.) and take photos and	
1168	all that?	
1169		
1170	C3: Well, I've got a very old	Got an old phone, really old one
1171	phone (.) erm (.) that I'm using	
1172	as to text and it's a Nokia a	
1173	really old one (.) now I've had I	Uses wrong terminology - she sounds dismissive/ unsure ?
1174	thing for two months another	
1175	Nokia that I think is the sliding	
1176	new model that is apparently one	
1177	of the new ones ((phone ringing))	
1178	Ani: [The touch one?	
1179	C3: Yes, the touch one] I do	Enjoys the touch screen
1180	enjoy having it but I don't use	
1181	it as a phone (.) I use to check	
1182	my emails and (.) erm just to	Doesn't use it for calls
1183	play with it but I-	
1184	Ani: You don't use it as a phone?	
1185	C3: No I'm going through the	Uses to check emails
1186	process. What's it been two	
1187	months? (.) I've just started to	
1188	think about maybe transferring	Play with it
1189	the chip whatever it is into the	
1190	ne(h)w pho(h)ne ((laughing))	
1191	Ani: ((laughing))	2 month process to get used to phone - reluctance to use it
1192	C3: ((laughing))	
1193	Ani: So you've got two pho(h)nes	
1194	on the go?	doesn't use/know correct terminology - sim card
1195	C3: Ye(h)s ((laughing))	
1196	Ani: One that you've got to know	
1197	before you've (.) I feel like (.)	
1198	before you've risked transferring	
1199	your data over because it feels	
1200	like you not trusting of it (.)	
1201	or weren't trusting of it am I	
1202	getting that right?	
1203	C3: Well I like the erm hhh I- I-	
1204	the texting I find on the new	
1205	phone it's taking (.) erm taking	Takes longer to use new technology
1206	me longer to write on the	

1113	~ end ~	
1114		
1115	~ Session three start ~	
1116		
1117	Ani: Right so that's recording	
1118	(.) So I'll put that there (.) So	
1119	(0.6) the question, the first	
1120	question I'd like to ask is how	
1121	would you describe your feelings	
1122	towards new technology? (.) And	
	your experience of new	
	technology?	
1123	C3: Erm (.) disinterested	Disinterested
1124	Ani: Disinterested?	
1125	C3: Detached (.) bored	Detached
1126		Bored
1127	Ani: ↑ Bored?	
1128		Bored
1129	C3: Bored (.) erm (.) at the same	Disinterested
1130	time as being disinterested there	Intellectual curiosity
	is a more intellectual curiosity	rather than wanting
1131	(.) rather than wanting to apply	to apply or use,
	and use it. So more of an	observer
1132	observer type-	
1133	Ani: Ahh ok-	
1134		
	C3: Observer type relationship	Observer
1135		relationship to
1136	Ani: So (.) ok (.) Something that	technology
1137	you know is there	
1138		
1139	C3: (0.4) Nod my head when people	Need to know
	talk about it so that I know	something of it Also
1140	something of it (.) er (.) not	feigning knowledge ?
1141	really being drawn to discovering	
1142	what it is	Not drawn to
		discovering it
1143	Ani: So you've not really been	
1144	using it (.) not really using it	
1145	a lot (.) is that what you mean?	
1146		
1147	C3: Yes (.) so I suppose I am	Resistant to new
1148	quite resistant to new stuff and	stuff- like technology
1149	I have (.) so I'm making sense of	(working out why)
1150	it (.) because I used to be very	
1151	(0.4) curious about everything	
1152	erm (.) but now as far as	
1153	technology is concerned such as	Not excitable about
	new telephones and these tablets	new phones and
1154	and (.) these new solutions I'm	tablets
1155	not as excitable (.) it's just a	Just a thing to me
	thing no- to me	
1156		
	Ani: [Right so it's not a thing	
1157	you get very excited about using	
1158		

	you was	my ipad and not a dedicated ipad - a risk for me. Would I also worry if it wasn't mine ? I think so - an expensive item)
1071		
1072	C2: The iPad was up there and the	
1073	water was down here so I didn't	
1074		
1075	Ani: Right ok (.) so is there	
1076	anything that you'd like to tell	
	me about using iPads? Anything I	
1077	didn't think of to as (.), or	
1078	anything else that comes to your	
1079	mind?	
1080		
1081	C2: Errm (1.6) Yeah (0.8) are	Using ipad feels
1082	they a bit more (.) I know I said	more personal to me-
1083	this but in a different way (.)	to look back on
1084	but a bit more personal because	
1085	(.) erm (0.4) when you (.) when I	
1086	say personal (.) I mean like to	
1087	myself (.) cos like when I	
1088	normally did the writing or	
	drawing I like showed you but on	
1089	the thingy (.) on the pad (.) it	
1090	would be a little bit more	
	personal to look back on for me	
1091		
	Ani: So there's something that	
1092	feels more personal for you	
1093		
1094	C2: Yeah	
1095	Ani: Yeah cos although you said	
	it again it's important to say it	
1096	again	
1097		
1098	C2: Yeah	
1099	Ani: Mm ok (.) anything else you	
1100	think it would help me to know?	
1101	(.) About using the iPads?	
1102	C2: Not really I think I've	
	covered the (.) what we use it	
1103	for	
1104	Ani: [Mm ok	
1105		ipad helpful
	C2: And how it helps	
1106		
	Ani: Well alright I think that	
1107	the end	
1108		
1109	C2: Yeah	
1110	Ani: So shall we switch all the	
	recording things off? So how was	
1111	that then B--?	
1112		
	C2: "Yeah it was alright"	
	Ani: Right so let's switch these	
	off	