How does the exchange of money impact the therapeutic relationship in private practice? Counsellors’ perspectives: a small scale qualitative study.

Lindsay Josephine Tonks

“Dissertation submitted to the University of Chester for the Degree of Master of Arts (Counselling Studies) in part fulfilment of the Modular programme in Counselling Studies.”

May 2013
ABSTRACT

Whether we like it or not, money occupies a very important place in the lives of most of us: it symbolises all that we value in society and may even be a metaphor for love. But how does it feel to use it as the medium of exchange in the depth of human interaction we seek to achieve in the therapeutic relationship? This small scale qualitative research used interpretative phenomenological analysis to explore the perspectives on their experience of the impact of the fee transaction of six counsellors in private practice, using semi-structured interviews. Findings suggested that the relationship of the self of the therapist with money played a key part, often leading to a difficulty in reconciling the taking of money with the therapeutic role and this became most apparent in the physical transaction, particularly when it was necessary to ask for money. Participants felt it was important to feel valued, but also that they were providing value for money. The fee represents one of the least well explored elements of the therapeutic alliance. It is barely covered in training programs and therefore the potential comparison between charging for psychotherapy in private practice and prostitution is avoided. It appears that the taboo status that money occupies in society is also to be found in therapy rooms.
DECLARATION

“The work is original and has not been submitted previously in support of any qualification or course.”

Signed: ..........................
ACKNOWLEDGEMENTS

My sincere thanks go to my research supervisor, Dr. Rita Mintz, for her support, challenge and encouragement; to my friends and family for their tolerance of my neglect, with particular thanks for his unstinting love and support to my husband, Chris and to my mother, for her unfailing belief.

I am sincerely grateful to the participants in the interviews, including the pilots, whose generosity and openness of sharing have made this study possible.

Finally, thank you to Benson and Baxter dogs for listening patiently to my ramblings every morning on their walk. Very few Labradors have such a grasp of the exigencies of a dissertation.
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<td>BACP</td>
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<tr>
<td>CBT</td>
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<td>EAP</td>
<td>Employee Assistance Programme</td>
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<td>EMDR</td>
<td>Eye Movement Reprocessing and Desensitisation</td>
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<td>IPA</td>
<td>Interpretative Phenomenological Analysis</td>
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INTRODUCTION

Reticence to discuss money has long been a cornerstone of British polite society, where it ranks alongside sex and bodily functions in the league of inappropriate topics. Introducing the subject to the purist sanctum of the therapeutic relationship, therefore, has the potential for huge discomfort and yet that is what is required of a therapist in private practice.

Throughout a long career in a highly commercial environment, I had no difficulty in squeezing “every last penny” out of transactions made on behalf of employers. In contrast, training for my second career as a counsellor, I worked happily for nothing to gain experience and later, employed by counselling agencies, I also avoided confronting the direct relationship between my therapeutic work and money.

On entering private practice, I was confident that my commercial background would stand me in good stead, but was surprised to experience reluctance to ask for payment for my work, which I found hard to comprehend, since I worked hard, my fees were modest and counsellor training is a long and expensive process.

My sense of the intrusion of financial transaction into the therapeutic relationship stimulated my curiosity about how other counsellors in private practice, essentially a lonely occupation, experienced the phenomenon. Preliminary investigation led me to think that discomfort in this area was relatively common and that it could be enlightening to explore and to share “what it is” to receive money for therapy. This study was designed to shed light upon the many influences and processes at work.
when money is exchanged for services in what is otherwise a quasi-spiritual encounter. To what extent does it intrude and how might exploration of any intrusion contribute to the therapeutic dyad and enhance that relationship?

I hoped that participation in the study would stimulate reflection and awareness on the topic, and 5 out of 6 of my participants expressed the view that participation had been a valuable source of reflection and had thrown up issues that they had not previously considered. Research into the issues around the fee exchange has not only increased my own awareness and understanding, contributing to my work as a therapist, but may also contribute to the wider body of research and be of benefit to the therapeutic community engaged in private practice, with potential learning which may extend beyond the field of psychotherapy.

Money occupies a very important place in the lives of most of us, whether we like it or not, so the relative paucity of literature on the subject of how to handle it in a therapeutic setting led me to wonder if even exploration of the topic is uncomfortable. The vast majority of what published data there is comes from research in the United States (Keuffel, 1996; Falkner, 2007; Hirsch, 2012) and is strongly founded in psychoanalytic theory (Monger, 1998; Beltsiou, 2005; Andrews, 2012). A consequence of this is that the literature refers frequently to the terms psychoanalyst and analyst and, for the purposes of this study, I will take these to be interchangeable also with the terms counsellor, therapist, psychotherapist and practitioner. Equally, client and patient are taken to mean one and the same.

It is difficult to introduce this topic without comment on the practice, which is not shared by any other sector of the helping professions, for those training in the
psychotherapeutic world to be unpaid for the work they do in gaining clinical skills. And offering our services for no payment does not end there. Many qualified therapists work only in the voluntary sector. The fact that it is a second career for perhaps the majority of us may be a contributory factor, since money pressures may be replaced in later life by the need to feel occupational satisfaction. Whatever our motivation, the fact that we have all, at some time or another, been required to work for free may have some bearing on how we feel about charging for our work.

As I reflected on how best to unravel the complicated factors surrounding the “fee relationship,” I was struck by the importance of the self of the therapist, which “pervades the therapeutic relationship” (Wosket, 1999, p.11), which, aside from client factors, is one of the most significant factors in therapeutic change (Clarkson, 1990; Stern, 1997; Cooper, 2008; Lapworth & Sills, 2010). Lewis, Armini & Lannon (2001) describe the person of the therapist as the “converting catalyst” and Bloomfield (1989) agrees “who we are with patients is more important than what we do.” It is the tool employed by most paradigms (Rogers, 1951; Jacobs, 2004; Lapworth & Sills, 2010) to pursue the goal of therapeutic change and is therefore the most significant influence on the relationship. It is for this reason that the participants’ own relationships with money are explored to as great an extent as the fee transaction itself.

The phenomenological epistemological underpinnings of this study are consistent with my own philosophy of the nature of knowledge. This small scale qualitative study using interpretative phenomenological analysis, based on semi-structured interviews with participants from a purposive sample, appeared the most appropriate method of gathering data that would permit the exploration of the lived experiences
(Smith, Flowers & Larkin, 2009) of the participants: using hermeneutics in an attempt to understand their understanding of the essence of the issue being researched. The practice of “epoche,” or bracketing off, of my own experiences and feelings, (McLeod, 2011) felt particularly important, since it was these feelings that generated my interest in this research.

The research was conducted with six integrative therapists in private practice in England, which alone provides rationale for the study, since the literature has little to offer from this perspective, although I understand that there is other recently completed research, but at the time of writing, this is not in the public domain. There are two studies of note on this topic. Power & Pilgrim (1990) interviewed 11 UK therapists to assess the real and symbolic significance of fee paying in the psychotherapeutic relationship and a study carried out in the United States by Keuffel (1996) explored the experience of therapists in relation to fee transactions and found that this is an area where there is insufficient understanding.

Describing money as a “token of exchange” (p.141) that we spend in the hope of gaining something for ourselves, Field & Hemmings (2007) suggest that it is through “the conduit of payment for the service in independent practice that money takes on a greater meaning.” The French psychoanalyst, Lacan (1966), building on Freud’s work, thought that the true significance of money is a function of the individual, so that money to me is money to you only with additional signifiers (descriptors) that contextualise it. According to Rowe (1997), the way we feel about money is central to how we live our lives. The only animal to use it, we recognise money, but don’t fully understand it, which she attributes to the many different meanings it holds. Attwood (2012) reminds us that it often carries a connotation that is synonymous with
love and believes that personal relationships with money affect all other relationships, while Bloom (1996) suggests that money is inextricably linked with our primal sense of survival, both in psychological and real terms and Rappoport (1983) refers to the metaphors for human relationships that are derived from money. Dimen (2012) offers the thought that “money reduces everything to its abstract capacity to be exchanged.” (p.113).

To define the therapeutic relationship in context, I turn to Josselson’s (1992) description of it as “nonmutual”, with “conscious and unconscious, loving and hating, conflictual and whole aspects” (p.20) and, in its roles of care giver and care receiver, replicating that of parent and child, although Gray (1994) points out that therapists are not their clients’ parents.

In what follows, I will review the literature on fee payment in private practice and the wider question of the implications of money in the therapeutic alliance. I will go on to discuss the research design and the methods of data collection and data analysis, including considerations of ethics and validity. Next, I will present the findings, which I will go on to discuss and to locate in the existing literature. Conclusions are presented in the final chapter.
A review of the literature places this study in the context of existing research. Search methodology is described in Appendix 2, p. 89. The societal view of money is a theme that runs throughout the literature, but is addressed here only insofar as it is relevant to the research topic, since it would constitute a major piece of work on its own. The literature is divided broadly as follows:

i Money as a societal taboo
ii Therapists’ internal conflicts around the fee
iii Therapy as a “love” relationship and the prostitution comparison
iv The need to address the fee transaction
v Concessions
vi The fee as a therapeutic tool
vii Missed sessions
viii The physical transaction
ix Third party involvement
x Conclusion

2.1 Money as a societal taboo

Reference to money as “taboo” runs through the literature like a seam of coal (Adler & Gutheil, 1977; Di Bella & Angelo, 1980; Herron & Welt, 1992; Canter, 1995; Keuffel, 1996; Tudor, 1998; Trachtman, 1999; Mellinger, 2009; Ben-Noam, 2010; Attwood, 2012). Described by Furnham & Argyle (1998) as less acceptable than sex or death as a topic, the “unclean” nature of money is supported by biblical references in the New Testament: (the love of) money as “the root of all evil” (1 Timothy, 6:10
[Revised Standard Version]), and “filthy” lucre (1 Timothy, 3:3 [Revised Standard Version]), although Covitz (1981) criticises the biblical theme as a potential source of neurosis in the wealthy, whom it may deter from the successful completion of psychotherapy. He argues that money is a necessity and that therapists perform best when remunerated appropriately, proposing that they should be well paid for taking on their patients’ problems, while Trachtman (1999) attributes to the money “taboo” its insufficient coverage in psychotherapy training.

Writing in Germany, Hilgers (2010) suggests that the money “taboo” and the high cost of psychotherapeutic training are factors in the inadequate ability of therapists to manage counter-transferential relationships with very wealthy or very poor patients, concluding that psychotherapy is limited by the constraints of social development, while Ben-Noam (2010) refers to the symbolic and taboo nature of money, saying that it often gives rise to strong interpersonal feelings, which can be beneficially explored if the notion of taboo can be set aside. Recent research by Andrews (2012) tries to address the taboo through developing critical consciousness of money.

2.2 Therapists’ internal conflicts around the fee
Adler & Gutheil (1977), addressing the particular anxieties involved in setting up private practice, explore the implications for self-esteem of practitioners and clients around the fee amount, including the transferential implications of giving and getting, particularly with regard to transferential rage, which can be focussed upon the fee, suggesting that therapists experience a sense of guilt from “selling a human relationship”, particularly if they derive other, non-material, benefit from the interaction, although Thistle (1998) reminds us that private practitioners who have space in their diaries always have a vested interest in keeping clients. Birnbach
(1999) writes that despite “heightened tensions” around money transactions in therapy, literature is sparse, explaining this as arising from a society which is more comfortable with discussing sex than money, and he emphasises the importance of therapists exploring their own feelings of resistance in the areas of fee setting and collection.

Pilgrim (1997) finds that it is the dichotomy between Freud’s fantasies about the day when free therapy would be available to all (Freud 1918/1968, p.167) and his insistence that the fee is an indispensible source of material for interpretation (Freud 1913/1968, p.133) that provides the foundation for therapists’ ambivalence about payment. He discusses the thought that, as a distinction arose, following World War One, between the general psychiatric population and private psychotherapy clients, the fee became a “fetish”, both as a wage and a symbol in the relationship. Myers (2007) agrees that therapists’ fee avoidance arises from fear of the knowledge that it is an “intrusion of their own need,” into the relationship, although confronting what she describes as a “treacherous interaction,” may lead to greater relational depth. Hirsch (2012) reminds us that we are “simply human when it comes to money and greed,” suggesting that economic dependence on patients creates an “inherent and profound conflict between self interest and patient interest,” (p.14) potentially resulting in excessive mutual dependency. He acknowledges, however, that his evidence for this is anecdotal, while Shanok (2012), proposes that “motivations to nurture and have our basic needs met need not, actually, be antithetical,” (p.182) so that we may safely feed ourselves as well as others.

Writing in the context of group therapy, Shapiro (2006), too, refers to the particular counter-transferenceal issues that might arise for a therapist trying to reconcile his role
of a healer with that of the business of clinical practice, advocating “thorough self-examination” for therapists to guard against the problems that emanate from their and their clients’ unconscious relationship with money. In the same context, Ros (2010) refers to the therapist’s need for money as a symbol of recognition and a reward for work done as well as to make a living, sufficient to stop us feeling a demand for gratitude, which can project an emotional demand on to clients. Frosch (2008) also acknowledges that many analysts are filled with shame over dependency on their patients for their livelihood.

Research conducted with British therapists by Power & Pilgrim (1990) concludes that fee-paying is essential for effective psychotherapy and is symbolically important for clients, although the strongest expression of this view is from those therapists most financially dependent upon fees and least expressive of ambivalence about receiving money, which might indicate an unconscious defence of their own need. Mullan (1996) concurs with their view of therapists’ ambivalence towards the fee, as does Ben-Noam (2010), proposing that therapists must address their own conflicted feelings about therapy as a “business” for the money taboo to be lifted.

Demonstrating great clarity on the subject, Murdin (2012) writes that all therapists have to deal with their own human greed and defences against it and are seeking narcissistic satisfaction as well as income, (p.151). She discusses the notion that we seek to learn from, and be healed by, participation in the therapeutic process with our clients and that our ability to tolerate and make therapeutic use of money issues is a function of the “symbolic emotional framework” from which our attitude to money derives, referring to Lacan’s (1954) words that money “neutralises something infinitely more dangerous … namely, owing somebody something” (p.204), proposing
that payment for therapy has the significance of cancelling the “debt” to the therapist, which echoes the debt of the infant to the primary caregiver and claims that the significance of money in the process is vital in revealing whether the client regards it as real or symbolic.

Examining the female experience of psychotherapy, Canter (1995) suggests that gender-related cultural difference, such as categorising women as nurturers, also has potential implications for the fee transaction. The tension between money and love is addressed by Dimen (2012), who observes that they “negate and undo one another and their contradiction funds alienation,” (p.113) and Tolley (2012) agrees, adding that taking money for “my humanity” feels essentially wrong. Research by Arbuckle (2012) exploring more generally the conflict between self-interest and concern for others, concluded that those with a high degree of empathy react to others’ situations much as to their own, perhaps contributing further understanding of fee ambivalence.

### 2.3 Therapy as a “love” relationship and the prostitution comparison

Explaining our discomfort at the introduction of money into the therapeutic relationship as arising from the point in childhood where we recognise objects as having a “rate of exchange”, Holmes (1998) draws on Fenichel’s (1946) pre-pecuniary developmental stage, equating to the pre-oedipal stage where a child perceives limitless supplies of available love and no sense of quid pro quo. There is conflict between the concept of the love relationship offered in therapy and fixed elements, such as fees. Payment for therapy, therefore, confirms that the depth of our encounter can go only so far, because, actually, it is a commercial transaction. Describing therapy as “emotional prostitution,” Smail (2005) postulates that materialism and society ultimately dictate psychological wellbeing or otherwise,
although Feltham (2006) explains this as Smail reminding us of our “common helpless and embarrassed embeddedness in capitalist economics,” (p.133). " Holmes (1998), too refers to the analogy of prostitution, while Pilgrim (1977) points to Freud’s acknowledgement of private practice as a necessary evil if he was to earn a living, suggesting that “once therapists opt to earn their living via private practice, it makes more sense to turn this into a therapeutic virtue than to dwell too long on the parallels with prostitution”(p.53).

Also addressing the prostitution comparison, Field & Hemmings (2007) remind us that having to pay a therapist for an emotional service that they are unable to find elsewhere may anger clients, who come to despise themselves and their therapists and that clients sometimes believe that we are “nice” to them only because they are paying us. This anger may be acted out in the way payment is made, such as by payment in coins for what is a relatively large invoice. Payment in cash may also evoke a sense of colluding against the system, creating the illusion of a layer of intimacy, if the client believes that cash represents undeclared income for the therapist.

Following remarks by U.K. Treasury Minister, David Gauke, about the “morally wrong” nature of payment in cash, recent debate in “Therapy Today” was sparked by Ryan (2012) exploring his own feelings about being paid cash: acknowledging an awkwardness compared with other forms of payment. He questions the potential impact on the relationship and draws our attention to the comparison with prostitution, saying the cash in his hand is “a reminder that I have just delivered a professional service, but a service that sets a time limit to the unconditional positive regard it offers” (p.36). Recent research by Scholar (2012) acknowledges the
prostitution comparison and refers to the tension between the loving relationship (therapy) and the business transaction, saying that the “personal meaning” that money holds is more significant and that unresolved issues around money may impact the therapeutic relationship, while research by Fitzpatrick (2012) questions whether the “commodification” of psychotherapy has changed its original intentions.

2.4 The need to address the fee transaction

Schulz (1988) acknowledges the fee as a neglected topic, considering it almost as important an area for focus as the presenting client issue. Proposing that the true significance of money, in all its forms, be addressed, she found that outcomes are improved where sufficient attention is paid to money issues, and Herron & Welt (1992) agree that a degree of therapists’ narcissism around the “complex phenomenon” is appropriate. Examining the implied significance of the fee transaction, they conclude that a reticence to deal with it may be harmful to the relationship, while Zur (2007) points to the fee as forming an essential part of the therapeutic frame, differentiating it from social and other interactions and identifying it as a “fee-for-service relationship”.

Research by Keuffel (1996) also refers to this “taboo topic,” which she suggests may generate shame, anxiety and worthlessness in therapist and client alike. Exploring therapists’ reluctance to address conscious and unconscious communication and feelings around money in the therapeutic relationship, she found evidence that this resulted from lack of understanding of the fee in the client dynamic; unconscious fear of conflict with the client; concern about the impact of the fee on the relationship; issues of the fee as representative of the therapist’s worth and the worth of her work and questions about the fee in the definition of therapy. She concludes that the
discomfort arises from conflict between the actual and metaphorical meanings of money, as highlighted in the fee transaction. Mccreary (2001), researching money and the care of the soul, concludes that depth therapists need to give more attention to the psychologically charged symbol of money and its impact on their work, while more recent research by Davigo (2006) proposes that the link between an individual’s attitude to money and their adult attachment style might usefully be explored in therapy. Later research into the influences of money on the sense of self by Beckman (2010) finds that discussing it addresses the fundamental fears of existence, belonging and survival.

2.5 Concessions

Freud (1913/1968) wrote that the exchange of money is necessary to keep the “whole relationship” in the real world, suggesting also that by acknowledging to clients the price at which he valued his time, he cast off “false shame” on this topic, (p.131). Tudor (1998) makes the fascinating point, drawing on Karpman’s (1968) drama triangle, amended by Clarkson (1987) to encompass the role of “bystander,” that adopting a sliding scale of fees for clients, in a sort of “Robin Hood” attempt to redress economic iniquities in society, may result in unintended consequences that are counter-therapeutic. First, it is hard to differentiate between true “victims” and those who have adopted the role of victim and secondly, there is a risk that a counsellor may find his role moving from rescuer to persecutor over time. Alternatively, the victim client, may, through growing resentment, gradually become persecutor. In terms of person-centred theory, he suggests that client incongruence, which arises from a discrepancy between experiencing and self-concept, may be reflected in the fee transaction, as he balances his financial experience (which may be comfortable) with his “self-picture” (which may feel impoverished), or vice versa,
Geistwhite (2000) also refers to the impact of the fee arrangement on the psychotherapeutic process even when there is no fee, drawing our attention to the potential impact of this on feelings of inadequacy or indebtedness; emphasising the need to attend to the dynamics of free therapy and Jacobs (2004) too, refers to the significance of clients paying, or withholding, fees in private practice, and suggests that the absence of a fee in the voluntary sector might create a disabling sense of “debt” in the client. This seems consistent with Rogers’ (1942) view that the agreement to pay a fee might constitute the first step in a new direction and thus be very empowering to a client who has the option to accept or reject the terms offered.

Bond, Alred & Hughes (2006) observe that clarity about fee payment minimises its potential impact on the relationship, since clients’ views about the significance of money vary so widely. They make the point that private practitioners probably appear to clients to be very well paid, but also that free therapy can have a negative impact on a client who, reliant on the therapist’s charity, becomes forced to express gratitude. Field & Hemmings (2007) question whether the prevalence of therapists offering their services free, compared with doctors, nurses or social workers, is a function of their sense of self-worth and sense of value of the work they do.

Mitchell (2012) suggests that free first sessions might be detrimental to the relationship, as clients may “feel the balance of power shifting away from them” or may feel obliged to stick with a counsellor who has “already invested something in them” (p.18). Tudor (1998) disagrees, arguing that free initial sessions are the therapeutic equivalent of window shopping, with no obligation to buy.
Berger (2012) owns that she experiences concern for her own income while offering concessions to clients and Orgel (2012), echoing the “selling love” theme, contends that, when adapting fees to patients’ circumstances, we must also consider their relationship with money; specifically whether it is inimical to a genuine loving relationship or whether it buys love. Newman (2012) describes a client, to whom she had allowed payment latitude, attempting to use the accrued debt as a lever to foster co-dependency in the therapist, fantasising that this would prevent her from being “abandoned”, but that once this was addressed, her client was able to move on.

2.6 The fee as a therapeutic tool

Arguing that counter-transference arising from deeply-held cultural and personal beliefs deters therapists from treating the fee therapeutically, Monger (1998) points to the importance of the fee in their livelihood, suggesting that therapists’ unresolved issues around money be addressed through training and personal therapy. Jacobs (2012) agrees, also acknowledging the temptation, albeit unconscious, for therapists to hold on to their clients and to their collusion in avoiding addressing actively the issue of money as “one of the most important, and neglected, problems facing psychoanalysis today,” (p.11).

Barth (2001) points to Freud’s (1908) connection between money and faeces, acknowledging its significance in our culture as a metaphor for power and autonomy. She suggests that failure to exploit its potential for therapeutic exploration may result in counter-therapeutic consequences, proposing its exploration may also prove useful in situations external to the therapeutic setting, while research by Beltsiou (2005) explores therapists’ feelings about money in therapy, both in real and symbolic senses, concluding that “money disrupts the illusion of mutuality between
therapist and patient” and suggesting that “a fruitful dialogue about money can only occur when analysts can tolerate their own subjectivity,” since greed, guilt and shame, as well as benevolence, may be evoked.

Lanza (1996) suggests that therapists’ personal and professional ambivalence about money means they are often more comfortable addressing clients’ issues with money than their own and that therefore they avoid exploring the origin of their feelings and the impact that these might have on their work with clients. Suggesting that two systems are operating: that of the client and his relationship with money and that of the therapist and his relationship with money, Field & Hemmings (2007) propose that where these systems overlap lies a “wealth” of opportunity for therapeutic work which is not available to contexts outside private practice. They wonder whether the implicit relative wealth of a client able to pay for counselling goes some way towards rebalancing the power dynamic, since they are “employing” the therapist. Pointing to the transference relationship in which clients’ infantile feelings may be projected on to the therapist, they suggest that the fee transaction at the end of the session may serve to assist the client in re-entering the adult world and Katz (2009) proffers a case study in which the defensive structure demonstrated through the client’s behaviour in relation to aspects of payment is explored.

Tudor’s (1998) detailed exploration of fees, from a person-centred perspective, concludes that issues regarding fees and their negotiation form an important element of the therapeutic relationship and that open, straightforward discussion about money in all areas of our profession, from training to the therapy room, helps to dispel the “taboo of filthy lucre”.


Motherwell (2010) points to the degree to which money can generate a sense of shame. It can represent power, love, security and even freedom, since its meaning is derived from influences such as culture, class, family systems and gender, which is why it may evoke such strong feelings. She suggests that its representation of a boundary in therapy means that any issues around money potentially shift that boundary, generating new feelings and meanings, but also providing valuable opportunities for exploration.

2.7 Missed sessions

Birnbach (1999) draws attention to the importance of dealing appropriately with addressing missed sessions and any associated resistance and further, draws attention to the potential for therapists and clients to collude to avoid acknowledging the displacement of aggression or sexual feelings on to issues around payment. Frosch (2008) also described shame over the issue of charging for missed sessions, while Ros (2010) suggests that in such circumstances, because of the complex nature of the two sets of needs, it is critical that the therapist has in awareness clarity about to whom the issues belong.

Blohm (2011) contends that the level of anxiety in therapists and clients alike around the issue of missed sessions and fees, is evidence of the depth of psychological impact, and that basic counter-transferential discomfort exists at conscious and unconscious levels, which deters practitioners from confronting the phenomenon. He proposes that relative social status, with its accompanying fantasies, is another factor that creates anxiety in the issue of payment for sessions not taken. Newman (2005), reflecting on the impact on the stability of the frame created by difficulties encountered in discussing fees and missed appointments, points to the neglect of
these issues in training programs. Freud (1913/1968) was unequivocal on the matter of missed payments: saying that patients had “leased” his time, whether or not they made use of it; that missed sessions probably constituted resistance and a desire to avoid repeating the discomfort of the previous session and that permitting non-payment deprives a client of the incentive to work towards a therapeutic ending. Murdin (2012) also challenges the ubiquitous 24 hour cancellation policy, saying that hardly any therapists can make use of the last minute availability it generates.

2.8 The physical transaction

Tudor (1998) suggests that any mistake made by a client in making out a cheque for therapy could represent a passive-aggressive response to the therapist, while Mellinger (2009) acknowledges that all payment for therapy might evoke guilt, defensiveness and aggression, but believes the use of cash makes this more overt, potentially creating doubt and suspicion, albeit unspoken and that cash falls into the category of “taboo”, because of its association with illegal, immoral, or back street transactions. He advocates exploration of this area as potentially fruitful, suggesting that payment by cheque, rather than cash, somehow sanitises the transaction.

Ros (2010) discusses messages conveyed by payment or mistakes in payment, such as the client’s need to be fed without feeding; tests of the therapist’s dependence; or client submission, which may be demonstrated by unasked-for payment in advance and Adams (2012), while suggesting that the type of payment makes no difference, also acknowledges that the electronic transfer of money has caused us to be “psychologically removed” from our earnings. Murdin (2012) also refers to the dilemma of cash payment, which she, too, suggests might put the therapist on the level of tradesman and/or tax evader, and she acknowledges the parallel with
prostitution in “offering a form of love.” Tolley (2012) makes the interesting point that cash is the only form of payment that fully protects a client’s confidentiality.

2.9 Third party involvement

Shapiro (2006) draws attention to the particular problems that might arise from a third party paying the bill, echoed by Meersand (2012), commenting that payment issues with parents often reflect their unresolved feelings about their child and the therapist. On the subject of third party payment, Field & Hemmings (2007) discuss the notion that this might reinforce a client’s sense of infantilisation, or that they are the “problem” which requires resolving through the collaboration of others, also referring to the part that envy, both in client and therapist may have to play.

2.10 Conclusion

There can be little dispute that the vast majority of the literature on the subject of payment for psychological therapy is rooted in psychoanalytic and psychodynamic theory. This may be because the nature of the topic requires exploration of material that is out of awareness, deeply buried or unconscious. This study may therefore contribute to filling a gap in the literature, as a contemporary study of the manifold complexities surrounding payment and receipt of the fee in private practice from the perspective of British counsellors, none of whom include psychoanalytic or psychodynamic influences in their integrative theoretical orientations.
3.1 Research philosophy and design

Historically, research philosophy was positivist, based on the view that knowledge is derived solely from objective observation of a fixed universe, where reality is absolute and where the analysis of constituent parts may lead to the understanding of the whole (Maykut & Morehouse, 1994). This is a nomothetic approach (King & Horrocks, 2010), using accepted principles to explain observed phenomena. Such research is from the epistemological standpoint of objectivism; where objects have an innate meaning distinct from any subjective awareness of them and typically characterised by quantitative methods, often seeking to support hypotheses whose basis in “fact” may suggest that the findings can be applied more generally and may be transferable to other situations.

Increasingly, the notion that such an approach is appropriate to the investigation of human experience, in all its richness, has met with challenge (Maykut & Morehouse 1994; Spinelli 2005; Smith, & Osborne 2008; McLeod 1999, 2003, 2011). Indeed, Rowan & Cooper (1998) suggest that treating people like things is methodologically wrong. The Realist ontological perspective, where factual and causal explanations exist for human behaviour and experience (Blaikie, 1993) is challenged by the Relativist position, which leans more towards a socially constructed reality, although Willig (1999) maintains that Relativist ontology exists within the constraints of a framework of Realism and that the two are not mutually exclusive. Holliday (2007) refers to them as very different ways of looking at the world and Lincoln & Guba
(1985) agree that the “complexity of human experience” demands rather different postulates from those of a Realist philosophy.

The epistemology underpinning my research is phenomenological, relying on my perception that the social world consists not of external, observable realities (Oliver, 2008), but rather derives from phenomena that are directly and subjectively experienced (Sanders & Liptrot, 1993) and acknowledges a multiplicity of subjective realities. Epistemological integrity (Marshall & Rossman, 2011) is a fundamental requirement of the philosophy and design of research methodology.

Initially conceived by Husserl (1927) as a philosophy that would contribute to the resolution of the conflict between subjectivity and objectivity and its implications for our assertions on the finite nature of reality, phenomenology suggests that the world and our perception of it are inextricably linked, so that they cannot be regarded as separate (Moustakas 1994; Willig 2008; Smith, Flowers & Larkin, 2009). Because of the constructionist nature of perception, each of us will perceive differently what might otherwise be regarded as “the same” experience. It proposes that the world is known only as far as our experience and/or interpretation of it (Husserl, 1927) and that experience, as something “that has happened,” is a legitimate area for study.

Phenomenological research is “animated by the desire to do justice to human existence” (Halling, 2002, p.20). Its methodology differs from traditional psychological research in its refusal to accept the possibility of observation as truly objective, but relies instead upon the notion that the life-world of the researcher cannot fully be separated from the subject of research. Husserl (1927) conceived that a researcher would refrain from yielding to the influence of pre-conceptions and
use self-reflexivity to achieve deeper exploration of what is presented and of how another being might experience a phenomenon: an egological approach resulting, potentially, in the bringing into awareness of further material, which, too, must be put to one side, constituting part of the co-construction of reality between researcher and subject. Zaner (1970) suggests that as consciousness reveals the presence of objects, so do objects reveal and clarify consciousness.

In phenomenological research, a conclusion should not be sought and is not necessary in an honest exploration of experience, nor should findings be adulterated by the expectation of findings. However, qualitative interviewing relies on the willingness and ability of participants to be accurate in their responses and assumes that appropriate material is in their awareness to be communicated. Notwithstanding the researcher’s endeavours to segregate his own material, it will serve to influence his findings and interpretation of his participants’ experiences at least to a degree. Of course, meanings are inevitably co-construed in the process of an interview (King & Horrocks, 2010).

The undeniable influence of the life world of the researcher on the process of qualitative enquiry (McLeod, 2003) is magnified by the acknowledgement of the hermeneutic nature of qualitative enquiry. This potentially leads to a questioning of the validity of such research, although Rennie (2007) argues that if the research is conducted in a sufficiently rigorous and transparent manner, so that it may be examined and verified as such, then it may result in a “fair representation of reality,” albeit the interpretative representation thereof, and advocates the provision of a substantial amount of supporting material, while McLeod (2011) suggests that in
counselling and psychotherapy, we are familiar with the balancing act between fact and perception, making this less of an issue.

Husserl’s student, Heidegger (1962), had a major influence on the development of a hermeneuetic approach to phenomenology. At first sight inconsistent with the “bracketing” notion originally conceived by Husserl (1927), researchers increasingly adopted a hermeneutic version thereof, encompassing as integral the interpretation, analysis and awareness of “what the researcher brings to the text” (Willig 2008, p.54). Smith et al. (2009) suggest that, in IPA, the researcher is engaged in double hermeneutics as the researcher endeavours to make sense of participants trying to make sense of their experience (p. 3). Phenomenology seeks to uncover not only what is presented to researchers, but also how it is presented. (Kvale, 1996).

A hermeneutics approach acknowledges that neither can description be achieved without that degree of interpretation implicit in the choice of language and phrasing, nor can understanding be achieved without a degree of assumption about what it is we are trying to understand: the hermeneutic circle (Schleiermacher, 1998).

Interpretative epistemology seemed the most appropriate approach to investigating the lived experience of the research participants and Schutz (1962, cited in Flick, 2002) claims that perception is not an inferior version of reality, but is a reality of its own. Miller & Glassner (2011) support detailed interview accounts as opportunities to study and explore the social world, while Silverman (2011) highlights the infinite interpretative challenges facing a qualitative researcher, compared with the positivist paradigm, which implies “right and wrong” answers.
To achieve “deep understanding of the essence” (Denscombe, 2003 p.104) of the phenomena experienced by my research participants, IPA seemed most appropriate, if I were to achieve the sought-after “comprehensive and authentic” (Mintz, 2010) understanding of the way my participants experienced the “phenomenon” inherent in the research question, despite this proving to be “exhausting, time-consuming and fraught with interpretative dangers” (Spinelli, 2005 p.137) and notwithstanding the acknowledgement that attempts to understand other people’s relationships with the world are necessarily interpretative (Smith et al., 2009). IPA’s idiographic nature provided further support for its choice. That is to say, its attention to the individual (in the sense that individual is distinct from general) or “the particular” (Smith et al., 2009) differing from the nomothetic nature of the majority of psychological research, which endeavours to identify “laws” or “nomoi” that influence behaviour.

3.2 Sampling

Qualitative research lends itself to the idiographic approach implicit in non-probability sampling, particularly in IPA, where samples are typically small and the results not intended to be generalised to the greater population (Dallos & Vetere, 2005). I selected participants on the basis of their likelihood to produce the most valuable data (Denscombe, 2003); a purposive sample, which Oliver (2008) reminds us has an element of subjectivity in the researcher’s assumptions about what characteristics might constitute a “good” sample. The choice of maximum variation sampling sought to gain an understanding of the views of their experience from the widest representative range of research participants, varying by theoretical orientation, gender and other factors in order to achieve this within a relatively small study and acknowledging that the sample is not random, while addressing variability (Maykut &
Morehouse, 1994; Lincoln & Guba 1985). The participant group is homogenous, having in common experience of the particular phenomenon that I sought to explore.

For reasons of cost and practicality, I restricted my sample to counsellors practising in the Midlands and North West of England, reflecting that this would not have a negative impact on validity, since results of the study were not intended to be generalised to the wider population. Participants were recruited through advertisements on the BACP research website; in “Therapy Today” magazine; counsellor networks of which I am a member and through direct approaches.

Selection criteria required that participants:

- Be counsellors or psychotherapists in private practice, qualified to at least diploma level.
- Have a minimum number of 400 post qualification hours.
- Have practised elsewhere since qualification.
- Have 12 months’ experience of private practice, with a minimum of 5 clients a week.
- Be in supervision.
- Have access to personal therapy.
- Be a member of a professional body, demonstrating an implicit ethical commitment.

Variable criteria included theoretical orientation, gender, ethnicity and age. Participants’ details are available on p. 33.
3.3 Sample Size

Phenomenological research, particularly IPA, indicates small samples. I chose a sample size of 6 participants, which is adequate to provide a breadth of experience to be explored, without risking becoming overwhelmed by data through attempting to use over-large numbers. Dallos & Vetere (2005, p.41) assert that beyond 7 (+/-2), a researcher may struggle to “hold in mind the unique characteristics of each participant”. Smith et al. (2009) consider a sample of 3 - 6 is reasonable for an IPA study and McLeod (2003) agrees that too many participants make it impossible to do justice to their contributions.

Following expressions of interest from prospective participants, I forwarded a simple questionnaire (Appendix 5, p.96) designed to determine their suitability and an Information Sheet, (Appendix 4, p.93) explaining the research in more detail and providing sufficient information to ensure informed consent. The first 6 candidates conforming to the inclusion criteria were 3 men and 3 women, with all participants describing their theoretical orientations as partly or wholly integrative. On receipt of completed questionnaires, I contacted the candidates to arrange interviews and created a matrix (Appendix 9, p.104) to keep track of the process with each participant and to ensure a transparent audit trail.

3.4 Data collection

The method of data collection must be a function of the planned method of data analysis and appropriate to the requirements of the research question. IPA favours semi-structured interviewing for generating data (Barbour, 2008, p.219), based on an Interview Guide, the use of which Smith et al. (2009) suggest is consistent with the notion of entry into the participant’s “lifeworld”, not only because its development
requires explicit reflection about what the interview needs to include, but also because it enables us to anticipate any particular difficulties, such as sensitive questions. Questions were designed to be open and non-directive, with focus used only to encourage elaboration.

This form of interviewing enables the researcher to maintain focus, while offering freedom to pursue unforeseen, but valuable, themes that arise because of a participant’s unique issues. Each interview may thus flow in a different direction, adding to the richness of the research, although this method may be criticised for insufficient attention to the impact of the interactional and relational investment of the interviewee, (Potter & Hepburn, 2005). Unstructured interviews might have offered greater flexibility in investigating participants’ phenomenological experiences, but the data would be harder to organise, which Maykut & Morehouse (1994) suggest may be challenging for the novice researcher.

I conducted two pilot interviews with colleagues who broadly met the criteria for my sample, using feedback from these to refine my Interview Guide (Appendix 8, p.101), recognising the challenge of the transition from therapist to researcher, which Dallos & Vetere (2005) describe as, paradoxically, both beneficial and problematic. Spong, (2011) suggests that consideration be given to the “meaning” participants may attach to a particular location, so interviews were held at participants’ therapy rooms. Interviews were between 45 and 65 minutes and digitally recorded.
3.5 Data Analysis

The phenomenological nature of IPA requires the researcher to use himself as a tool, immersing himself in the data until the process uncovers for him the essence of the phenomenon he seeks to explore, described by Willig (2008) as “what it is like to live a particular moment or situation” (p.67). Denzin & Lincoln (2000), suggesting that the precise methodology is a function of the particular phenomenon being explored, emphasise the need for a flexible and creative approach. Finlay (2011) reminds us of the need to remain grounded in the interview text; adopting “reflective focus”, “idiographic sensibility” and a “commitment to a hermeneutic approach”. IPA is iterative: data is examined repeatedly, with each inspection through a different lens, as new ways of understanding emerge, and hermeneutic as each new understanding of elements contributes to our comprehension of the whole and vice versa.

Identification of the researcher’s predispositions is essential to describing accurately the intended meanings of the participants (Spinelli, 2005), although IPA theory acknowledges that this is never entirely possible and there is further influence on the analytic process exerted by the participants themselves (Oliver, 2008) since data derived from an interview is inevitably co-constructed.

Having transcribed verbatim the recorded interviews, I read the transcripts, highlighting words and phrases that struck me and making brief notes in the margins, then re-read the transcripts and added more notes. I transferred the transcript to a 2-column format (Appendix 12, p.108; Appendix 14, p.123), including my initial notes, adding new comments, colour coded as descriptive, linguistic or conceptual, as suggested by Smith et al. (2009). I repeated this process, adding a column for emergent themes (Appendix 13, p.115; Appendix 15, p.132), which generated further
comments, leading to a slightly altered relationship with the data in what Smith (2007) “describes as “an iterative and inductive cycle.” I transferred the list of emergent themes, adding line numbers from the transcript, and cut them into “slices” which I arranged into clusters and stapled to larger sheets of paper, on which I wrote draft headings and from which I created a Master List of Clusters. This process was repeated for all 6 participants. I printed out the Master Lists for each participant on different coloured sheets (Appendix 18, p.145), for ease of identification, then created slices, tentatively placing them on sheets of paper, which I labelled, creating the Superordinate and Subordinate Themes, with each participant represented in different coloured ink (Appendix 19, p.146). Finally, I reproduced this in tabular form (p.34) and pictorially, (p.35).

3.6 Ethics

As a member of the BACP, I conform to its Ethical Framework (2010) and applied its ethical principles, such as non-maleficence, integrity and being trustworthy, to my work as a researcher. I adhere to the ethical research principles enumerated in the BACP document “Researching in Counselling and Psychotherapy” (Bond, 2004) and the guidelines in the University of Chester’s Research Governance Handbook (2011). My research was subject to the rigorous scrutiny of the Ethics Committee of the University of Chester. Underpinning ethical practice in research is the principle of Informed Consent, which ensures competence and voluntariness of participants (Bond, 2004; McLeod, 2003). Signed agreement was obtained from all participants at all stages of the process, including to the accuracy of transcripts and participants were reminded throughout the process of their right to pass on a question or to withdraw entirely. Participants were sent a brief version of the Interview Guide (Appendix 7, p.100) before their interviews.
Reference in the literature to counter-transferential reactions to the research topic was addressed by insistence on access to personal therapy. McLeod (2003) suggests a researcher might usefully imagine himself in the position of research participant in order to become sensitised to possible ethical or moral difficulties. I was acutely aware that “participants,” while rich sources of data, are, more importantly, human beings (Oliver, 2008). Therapists have the skills necessary to respond appropriately to sensitive material that might arise in interviews (McLeod, 2011) and must guard against using them manipulatively.

Audio recordings and transcripts were initially stored under pseudonyms in a password-protected file on my computer, from which they were deleted following transcription, when they were copied to CDs and locked away. Consent forms and other identifying data were locked away, separately from the CDs.

Given the potential of the research topic to expose issues of inappropriate or unethical practice, emphasis was placed on the application of BACP (2010) ethical principles, although as participants were self-selecting, it was unlikely to arise. However, I was conscious that over-emphasis on ethics could have the effect of closing down participants. No ethical dilemmas arose, although the possibility thereof gave me considerable cause for anxious reflection.
3.7 Validity and Trustworthiness

Quantitative research relies on the assumption that an objective reality exists and therefore permits of a routine set of validity checks and representative samples to be able to generalise findings (Willig, 2008, p.17). Qualitative researchers acknowledge that findings always bear the imprint of the researcher, however minimally, so reliability must be demonstrated differently. Maykut & Morehouse (1994) articulate the question: “to what extent can we place confidence in the outcomes of the study? Do we believe what the researcher has reported?” (p.145). Because of the “creative” nature of IPA, flexibility is needed in the selection of validity measures, since no one system is appropriate to all types of study (Smith et al. 2009) and because of the co-construction of meaning, there is a degree to which this research can never fully be validated. McLeod (2010) describes validity as that which is “true, reliable, plausible and useful” and points to Elliot, Fischer & Rennie’s (1999) guidelines for the “publishability” of qualitative research as the “clearest statement of best practice currently available” (2011, p.266). Dallos & Vetere (2005) agree, highlighting the importance of researchers identifying and disclosing their own prejudices; contextualising the participants; providing an audit trail; providing credibility checks; and ensuring that the research accomplished its tasks. Willig (2008, p.16) concurs with this latter element, defining validity as “the extent to which our research describes, measures or explains what it aims to describe, measure or explain,” although purists might argue that inclusion of the word “measure” leans too far towards the positivist paradigm. McLeod (2011) summarises his own suggestions for enhancing the validity of a study as 3 dimensional: the logic of the research design; the rhetorical structure of the study and the personal involvement of the researcher. Demonstration of constant epistemological and personal reflexive review helps to mitigate any unconscious influence on the process (McLeod, 2011), which
Denscombe (2003) suggests as important in avoiding one-sided reporting. Spong (2011) proposes 2 main components of validity: member checking and transparency, demonstrated through clear description of the process and justification of choices. Yardley's (2000) criteria, endorsed by Smith et al. (2009), address sensitivity to context; commitment and rigour (thoroughness); transparency and coherence and impact and importance.

This research demonstrates trustworthiness through:

- Coherent rationale and research design consistent with the stated philosophy
- Sample consistent with the stated aims of the study.
- The production of a procedural matrix (Appendix 9, p.104)
- Clear adherence to ethical underpinnings, with particular attention to this potentially sensitive area
- Maximising use of research supervision
- Demonstration of reflexivity
- Acknowledgement of my own position, while practising epoche
- Locating the study in existing literature, as demonstrated in the discussion
- Verbatim transcription of the interviews and member checks, including signed confirmation of accuracy of transcripts (Appendix 6, p. 99)
- A particularly comprehensive audit trail (Appendices 10-19, pp.105-147) clearly demonstrating and cross-referencing how themes emerge from the data and how clusters, super-ordinate and subordinate themes are generated
FINDINGS

Participants

“Angus” has been in Private Practice for 3 years. He describes his theoretical orientation as Person-Centred/Integrative and also practises as a CBT therapist. He works mainly with adults, but sometimes with children.

“Donald” has been in Private Practice for 15 – 20 years. His theoretical orientation is “integrative of a broadly humanistic and CBT framework.” He works with adults and some young people.

“Henry” is an integratively trained therapist who has been in Private Practice for about 5 years. He uses CBT, EMDR and Compassion Focussed Therapy, working with adults.

“Kylie” has been in Private Practice for 9 years. She describes herself as very much integrative, “but holding people with the core conditions”. She works in a wide variety of settings, predominantly with adults.

“Laura” has been in Private Practice for 1 year. From a Person-Centred background she trained also an integrative practitioner. She works with adults, children and young people.

“Sandra” has been in Private Practice for 3 years and works from a person-centred base, sometimes incorporating elements from her training to work with children and young people, characterising herself as Integrative. She works with adults, children and young people.
Table 1

<table>
<thead>
<tr>
<th>Superordinate Themes</th>
<th>Sub Themes</th>
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<tr>
<td>4.1 CORE OF THE THERAPIST</td>
<td>4.1.1 Balancing the therapeutic self &amp; the commercial self</td>
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<td></td>
<td>4.1.2 Being valued</td>
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<td>4.1.3 Providing value for money</td>
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<td>4.1.4 The influence of the therapist’s world</td>
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<tr>
<td>4.2 CONFRONTING PAYMENT</td>
<td>4.2.1 Asking for payment &amp; missed sessions</td>
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<td>4.2.2 The physical transaction</td>
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<td>4.2.3 Who pays the bill?</td>
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</tbody>
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The diagram overleaf represents these findings pictorially.
Diagram of findings

INFLUENCE OF THE THERAPIST'S WORLD

THERAPEUTIC SELF OF THE THERAPIST

NEEDS OF THE THERAPIST

COMMERCIAL SELF OF THE THERAPIST

Value for money

Being valued

Therapy

Payment

THE THERAPEUTIC RELATIONSHIP

BILL PAYER
4.1 The core of the therapist

In seeking to understand the complex nature of the impact of the fee exchange on the therapeutic relationship, we must first identify the influences on that transaction. Predominant amongst these are the participants to it: the therapist and the client. This study concerns itself with the experiences and perceptions only of therapists and finds that the self of the participants played the most significant part in shaping their approach to and experience of this issue. All participants referred to their own relationship with money and this is significant, as it is shaped by societal, cultural, familial, as well as philosophical and personal considerations. Private practice requires us to confront directly the experience and handling of the tensions between the therapeutic self and the need to earn a living and the need to be valued, but also to offer value.

4.1.1 Balancing the therapeutic self and the commercial self

Outstanding in the findings is the expression of difficulty in reconciling the therapeutic role with the taking of money. All but one participant referred to their awareness of a sense of discomfort around the fee transaction. On one side are the values espoused in counselling of warmth and unconditional acceptance; of giving in what is a one-sided relationship, where the client is all and the needs of the counsellor are intentionally obscured in the interests of beneficial therapeutic change in the client and on the other side is the starkly contrasting need to ask for money in return.

money and people, I feel, are very opposed and actually the work we’re doing is very heartfelt and very soul work and you start to
enforce money and it becomes a very different agenda, not only for me as an individual and how I practise, but also for the people that are coming here. (Kylie)

there’s me as the therapist; me as the business person. (Kylie)

Others agreed:

there’s a kind of, I was going to say “clash” then, I’m not sure if it is a clash, but it’s the counselling kind of acceptance; models of warmth and all of those kinds of things, versus the kind of business head. (Angus)

I think people should receive it for free, but people should be paid for their services. (Sandra)

I offered … when I realised we weren’t getting enough done in the hour, “I’ll do an extra half hour for nothing,” and yet I knew that it was well within the family’s financial capacity to pay. (Laura)

Henry’s perspective differs:

So almost, I make more conscious effort when I know I’m charging than when I know I’m free … (Henry)

Expression of the tension between the therapeutic and commercial selves of the participants is demonstrated in concern for affordability of the sessions. Most
participants, often without being asked, sacrificed all or part of the fee in what amounts to a degree of taking of responsibility for their clients’ ability to pay.

*when therapy was at a particular point, I would offer free sessions*

… (or), *I get a sense of them not being well off, I’ll say “can you afford this?”* (Donald)

*for me, it’s more about the person actually going through the whole process, rather than stopping because they can’t afford.* (Kylie)

*it’s not something that I’ve calculated; it’s something that morally, it’s there within me. I think “ok somebody’s on a pension, they can’t be affording to pay the full rate.”* (Laura)

*I have reduced that rate significantly for her to ensure that she can come and see me on a weekly basis.* (Laura)

And yet Laura’s concession policy is notionally commercial:

*I wait till we’re at the 6th session, then the whole 10% comes off for the 6 sessions.* (Laura)

Interestingly, Henry is the only participant for whom private practice is not a primary source of income and yet he perceives the relationship as a business one, but donates pro bono publico work at a voluntary agency once a week:

*this is counselling in a sort of business relationship and I don’t want to pussyfoot about that; it is a commercial relationship.* (Henry)
The balance between therapeutic and commercial aspects of their practice is influenced for Donald and Laura by their relationship with the client.

_It’s not something that we do carte blanche – it’s as I get to know that individual and as our relationship develops._ (Laura)

Donald suggests that the quality of the relationship compensates for fee sacrifice:

_If I like a client that I’m doing free sessions for, there’s no resentment at all … I am more likely to reduce fees for clients I like, or I am enjoying the work and those two usually equate._ (Donald)

### 4.1.2 Being valued

Despite the apparent primacy of their clients’ need for therapy over their own need for payment, the participants feel that they _deserve_ payment for the work they do.

_I am worthy of getting paid … (and)… I do value … that what I’ve got to offer is worth the fee._ (Angus)

_I don’t actually want to give that time and those skills away for free. I’m sorry I just don’t - that’s how I am. I’m valuing myself._ (Henry)

_I’m valuing myself … I’ve got no bloody pension here._ (Kylie)

_you’ve had your years of training, pouring your money in, and you do deserve, you do deserve to be paid._ (Sandra)

Importance is attached to recognition, by themselves and their clients, of the value of their work; not just through remuneration, but also through other forms of
acknowledgement. Donald, referring to a client who cancelled and ended at short notice, without paying the late cancellation fee, expresses frustration more through the implicit lack of value of his services than the lack of payment:

*He was telling me how much integrity he had; what a decent bloke he was, and then that happened and he never paid it. I get annoyed at that, ‘cos he was telling me how much he’d valued it and he really had gained from it.* (Donald)

And this is borne out by the complete lack of resentment he feels with another client:

*I got an awful lot from the relationship with her and therefore, when I did reduce fees, or see her for nothing, that was ok.* (Donald)

Some participants make the point that paying for something can equate to valuing it:

*I do have a belief that if we pay for something, we might get more out of it, or we might put more into it.* (Angus)

*I’m paying you this and therefore that’s how much I value the work.* (Kylie)

*the fact that people come and pay for themselves shows that they’re motivated and ready for change; willing to pay for help.* (Sandra)

Although this is harder to assess when therapy is free:

*sometimes, when you give that for nothing, people don’t value it: equally, sometimes when you give it for nothing, people do.* (Kylie)
Another angle is the sense of personal value felt by what participants felt when they
were paid for their work:

*it’s (fee income) always been important to me for my own personal
sense of worth and value.* (Laura)

*I do feel differently valued. It does boost my sense of self, sense of
self esteem, I don’t want to use the words “self-esteem”, but yes,
there’s a sense of “wow, you must really value this – you’re paying
me £40 an hour for this.”* (Donald)

although Angus suggests the contrary:

*if I think back to my years as a volunteer, I was probably more
enthusiastic actually, but I was still as happy, contented, fulfilled
and rewarded, without financial reward.* (Angus)

Sandra concludes that free counselling devalues the currency of therapy:

*people that do it for free are doing us a great disservice really, in
that people will always expect it if people carry on doing it.*

### 4.1.3 Providing value for money

Almost as an adjunct to being valued, it was very important to all the participants to
feel that they were providing value for money. This was largely expressed as the
belief that their clients were looking for value for money:

*there is a law of diminishing returns going on, whereby someone
will come in some desperate state and has no issues at all with
paying the money …. and they’ll reach a point where you can see,*
you can gauge, and sometimes I’ll say to them, “maybe you’ve reached that point where it’s still helpful, but it’s not worth forty quid.” (Donald)

Henry acknowledges the transferential implications of the notion:

I am aware that this is a transference, that I’m thinking the client in the private setting is looking for value for money and that their response to the relationship and the therapy will have within it some sort of seeking value for money and I know it comes from me, because I, in life, hate it when I don’t feel I’ve got value for money. (Henry)

As does Sandra:

It’s about my attitude to money as well. I think about what I would be happy paying … and my need to achieve value for money. (Sandra)

And Angus has addressed it, assuming that it is important to his client:

you’re paying me before we’ve had our first session. I’m just wondering, how do you know that you’re going to get your money’s worth? (Angus)

4.1.4 The influence of the therapist’s world

The relationship we have with money in the therapy room is inseparable from the relationship we have with money in the rest of our lives and this is influenced by many factors, significant amongst which is the impact of our upbringing. All the
participants referred to the influence that their earlier lives had exerted on their attitude to money generally and that this impacted their approach to the subject in their work.

I came from a family with not a penny to rub together really, so, to have £40 a session … there’s part of me that feels that I’m doing all right. (Angus)

my upbringing was to be very charitable, so I suppose that’s impacted on my attitude to giving people free sessions, or concessions now and (pause) my upbringing was also to be fairly frugal and not waste money, so that’s impacted as well, so there’s two things going on here. (Donald)

I’m from a very working class background; there was not a lot of money around and there was a real value attached to money. I think that as I’ve grown up … I still have that attitude and approach to it. (Laura)

I came from a working class background, you know, money was very tight and I was desperate to get to work to earn my own money… The problems with money began when I left work and followed my dream in counselling. (Sandra)
Kylie classified her upbringing as privileged, describing money as her motivating condition of worth:

*if money… is a very core part of your conditions of worth, then that’s going to be your driver,*

going on to relate her experience to client work:

*what’s interesting for me is seeing clients coming in and saying “oh my God, I’ve got everything and I feel shit” and, and actually, there is a massive, you know, chasm between the two.*

She relates the enlightenment she experienced from losing everything after a successful business:

*I ended with nothing and that was really incredibly important for me to do, because it challenged a lot of my beliefs…. Um, and I am very grateful for that, very grateful, yeah. Because incredibly painful as it was, it was also incredibly scary, not because I was on the bones of my arse, but actually, I had to face a lot of those demons that were in me about “oh my goodness, where am I, what are people going to think of me?”*

Henry’s earlier life also left its mark:

*in a previous career, I was an accountant, so … money is never far from my consciousness. (Henry)*
Laura acknowledges a shift in her attitude to being paid since she became a therapist:

*when I was an employee, you know, I could be quite indignant if my employers had got my salary wrong.* (Laura)

### 4.2 Confronting payment

The self of the therapist and their own relationship with money emerged as the most prominent influence on the fee transaction and therefore on the therapeutic relationship. Considerable anxiety was generated by the processes surrounding the transaction itself: asking for money; receiving money and managing the complications resulting from someone outside the therapeutic dyad footing the bill.

#### 4.2.1 Asking for payment and missed sessions

Discomfort asking for payment echoed the tension inherent in therapy as a business and consistent with the “value for money” theme of needing to provide something worthwhile in exchange for the fee. Reticence to ask was particularly apparent in respect of missed sessions, despite the contractual obligation of clients to pay if they failed to give minimum notice. Participants addressed asking for money in a variety of ways:

Henry avoids the issue, using ritual as a prompt:

*I’ll open my folder and put the receipt on the table and by the time I’ve got the calendar, they’ve always got the money out.* (Henry)
Laura speculates on the cause of her discomfort:

*I don’t know whether it’s because I’ve done it for nothing for so long
… I do have difficulty asking for it.*  (Laura)

comparing reluctance to ask for money from clients with reluctance to ask for money from her children:

*In fact, I’m rubbish at asking for money, in any situation, any. If my
daughters … have said “oh Mum, could you lend me some
money,”… I’ve never been able to ask for it back: I just can’t do it …
because in some respects, we are developing an attachment with
our clients, so, there will be some kind of residue of that: of me
being a parent and a Mum, … so yeah, there is probably something
of that.*  (Laura)

and wonders if practising at home exacerbates the issue:

*I have thought “if I actually operated from offices, would I feel less
embarrassed about asking for money?”*  (Laura)

as does Angus:

*I’m much more comfortable here (not at home) … asking for money.*

(Angus)

All participants shared experiences of clients making mistakes with payment, such as forgetting entirely to pay or paying the wrong amount and there was a range of responses in addressing these. The feelings these mistakes generated were not always consistent with how participants handled the issue with clients, but most
participants found it uncomfortable to address. Participants varied in their approach to clients leaving without paying:

*Occasionally they forget and I am interested about that and how to manage that … it’s not the most comfortable part of our session.*

(Angus)

“are you paying me?” … Slight embarrassment, but it usually gets results, because it’s said with (humour). (Donald)

a couple of times, when I have actually been at the front door with them, and I think “Oh God, they haven’t paid me” and I say “ooh, you haven’t paid” and I feel awful, I can’t help it, I just feel awful, so in that moment, I just think “Oh God, this is just so embarrassing.”

(Laura)

Angus describes a client’s reaction when she realises her mistake just after the session:

*I was working with someone else and (the previous client) knocked on the door “Angus, Angus, I’ve forgotten to give you the money” so … I did actually go out to the corridor, but plainly my next client was aware… that I came back into the session with cash in my hand… That prompted me (to remind clients in future), because she was really, really anxious about forgetting and she thought it was really, really important to me as well … and we did explore that in the next session, because she was really flustered when she came back…* 

(Angus)
Kylie acknowledges that sometimes clients are leaving very distressed:

_Course they are. I’m not going to sit here and go “before you go out of the door, you’d better give me your bloody money”, you know._ (Kylie)

but she acknowledges the tension with needing to be paid:

_I get a bit tetchy about that, really, because it’s money, isn’t it? ... I had a lady once who used to do it. She used to come ... she wouldn’t pay me. I’d see her the next time and she wouldn’t bring me the money and I’d be getting myself in a flap, thinking “oh my God, she isn’t going to pay me” and she left it and actually, she got into a pattern and now, she brings it all the time._ (Kylie)

Henry feels more comfortable:

_Well, I wouldn’t hesitate but to remind them._ (Henry)

Angus is pleased to have overcome his reluctance, but illustrates well the internal struggle that has to be overcome:

_the client gave me £30 instead of £40 ... I said to him in the next session “do you know that you gave me £30?” and I’m pleased that I could have let that go and the thought crossed my mind “oh, £10, so what?” but I did say to him and he was fine with it._ (Angus)

Donald explores his treatment of the shortfall of £1:

_I said “oh, you remember you gave me £35: actually it was only £34, but, you know, the coins looked like £35.” He was really_
shocked and I said “don’t worry about it; I just wanted to point it out”. I don’t know why I wanted to point it out, because I didn’t really want the pound back… Anyway, the next time, he paid me for the session, and he also produced this pound and said “ooh, I never forget” and we laughed about it. I could have let that pass, but, it was interesting that I pointed it out. I think it’s something about “something odd’s happened here, and I just want to point it out to you”. (Donald)

Participants were unanimous in their 24-hour cancellation policy, but most were even more reticent in asking for payment for missed sessions:

*can I charge for something that I haven’t provided as such?* (Angus)

when he cancelled on the day, he said “I will cover the cost of this”, but I won’t ask for it. I have a little bit of a difficulty asking for money. (Laura)

*It’s written in the contract. I want 24 hours’ notice given, or more and if not, the full fee will be payable, and I’ve never, never followed it through. … I’ve never had the balls, basically, to ask them.* (Sandra)

Donald and Henry are less ambivalent, although Donald indicates a degree of uncertainly by saying he will not pursue payment and Henry “underwrites” the unexpected in his clients’ lives:
Less than 24 hours’ notice, I charge the full fee. I say to people “that’s literally 24 hours’ notice”… although I won’t pursue them through the courts, but most people pay up. (Donald)

within 24 hours of the appointment, I will ask for the full fee. Of course, cancellation for unexpected reasons: illness and something like that I don’t claim on that fee. (Henry)

4.2.2 The physical transaction

Great significance is attached to the physical transaction of payment, particularly when it is in cash. How to receive payment generated further anxiety for some participants. Donald would like to count the money, but feels it would be inappropriate, although he trusts some clients to get it absolutely right:

*It sometimes feels, mistrustful to (count the money), so if I can, I’ll just fan it like you would a hand of cards, … but if it’s like a screwed up fiver and particularly if there’s coins as well, it feels wrong to actually go through it … Again, it depends on clients. Some clients, I know the money will be right.* (Donald)

Angus reflects on how clients hand over the cash and is sensitive to the potential implications of the different ways of receiving it:

*I find it interesting when clients say “there’s your forty pounds,” and put it on the side and there are clients also that will leave it on that table and there’s other clients that want to give it to me and sometimes I’m aware when I take the money, what do I do with it? Do I put it on the side? Do I put it straight in my wallet? Do I stuff it*
in my back pocket? You know, what is the right thing to do? I often
just opt for leaving it on the side … (Angus)

and the timing and medium of the payment feel significant to him.

I find it interesting how people pay – how people give me the
money. Some clients will give me the money at the start of the
session and I find that interesting… and … it’s always been,
notes… I mean I would accept pound coins and 50p’s or whatever,
but it’s never been change … it’s always been notes. (Angus)

Sandra notices where clients place the money:

the various ways of … some people like to hand it to you, some
people just leave it on the (side)... (Sandra)

How payment is made may imply something inappropriate about the transaction:

he handed me an envelope as he came in … as he was about to
go, I said “what about the payment?” and he said “well, that’s
what’s in the envelope” and I thought “oh my God” and “how
strange” that he wasn’t acknowledging it as a payment, it was more
like an under-the-counter … (Sandra)

Donald also describes the “envelope phenomenon”:

a 75 year old woman … she brought it in an envelope: a virgin
envelope. I said “why do you give me the money in an envelope?”
and she sort of said… It’s back to the prostitution thing, I think,
there was a sort of a – what was her exact response? “oh, I like to
give it in an envelope” – that sort of thing - and I think I said something like “oh, filthy lucre,” and she chuckled, and I said “there’s no need” and now she gives me notes, but she always places them on that table. (Donald)

He explains it:

Discomfort with a financial transaction for something so personal: back to the prostitution thing. I would imagine a lot of prostitutes are paid that way, you know, an envelope slipped onto the sideboard, or something. I often liken counselling to prostitution really … you're paying for a relationship, aren't you? (Donald)

But does not consider that this aspect of the work devalues it:

… so as much as it’s a prostitutional relationship, for me, and I think for many clients, it’s also a real one. (Donald)

And Sandra concurs:

‘Cos I read an article once … there were components of prostitution, you know, you just toss your money on the night stand as you're leaving, and yeah, it can sometimes, obviously not quite that dramatic, but it can sometimes feel like that. I was just trying to think maybe it’s worse when it’s not been a very successful session, or it’s ended a bit, you know how some can end a bit suspended somehow not quite rounded off. Maybe there’s some confusion or quandary still, um, yeah, I think that can hurt a bit more really. (Sandra)
The theme of inappropriateness continues with the cash/cheque debate:

I have this fantasy that lots of people pay me in cash and imagine I don’t pay tax and there’s something within me that wants to say “you know I pay tax on this, don’t you?” but I don’t say that, but I do say to people “I have a slight preference for cheques”. I guess I’m implying that…I wouldn’t like anybody to think that I accept cash in hand and don’t pay tax … Counselling is all about integrity and therefore, to have the possible implication in the background, “nudge, nudge, we both know that this isn’t quite above board,” I hate, so I don’t like the fact I get paid so much in cash. (Donald)

I think a cheque is better. Well, it’s more of a pain for me, but, it’s the cold hard cash, and sometimes, if people haven’t had counselling before and they’re coming in and asking “how do you pay?” It almost seems like a black market kind of thing, you know. Obviously, I haven’t got a credit card machine. It’s all a bit, what’s the word – a bit back street. (Sandra)

Angus disagrees:

I enjoy it, yes, cash, I’ve never had so much cash, you know… I’ve never handled so much actual cash. Before, it’s just … appeared on the screen on my laptop, you know … it’s nice to feel the money. (Angus)
Being paid is not always a pleasant experience. Sandra is sensitive to the way the money is paid:

   Oh, that was just awful, he, well, he chucked sixty quid on the thing and said “that’s for starters.” (Sandra)

Laura reminded a client that she had forgotten to pay:

   the money was snatched from her wallet and thrown at me, literally thrown at me, and so that was … quite an unpleasant experience. (Laura)

The mother of Sandra’s client adds a further dimension:

   I have to go out to the car and she hands the money through the window, and I think “God, what must the neighbours think?” I just squirm every time. (Sandra)

And the perceived success of the session has an impact:

   It’s the way I feel about the money that is the comment on the session really…JOB WELL DONE, you know I’ll virtually snatch the money off them, but, “that didn’t go so well, oh my God, I’m taking money as well,” that kind of thing. (Sandra)

4.2.3 Who pays the bill

A third party paying for the therapy adds to the complexity of the transaction and can affect the relationship in different ways. Donald reflects on his awareness of potentially colluding against the payer:
I’m encouraging him to stand up to his parents, if you like – doesn’t sound very “counselly” does it, but that’s what’s happening and in fact that’s what he needs – that’s what he wants, so in a sense we are colluding against the payer, and that’s an interesting dynamic.

(Donald)

And fears the impact may collude against the client:

Clients being paid for by insurance companies, following accidents, and I really struggle with that one … I suppose I start with quite a cynical attitude that, at the end of this process, when you’ve been through therapy, there’s going to be some sort of payout. If you get better, the payout is not going to be as good as if you don’t, so how… can you afford to get better here? Yes, that one does (affect the therapy), but it’s not satisfying work. On the other hand, I get paid very well. (Donald)

Sandra enjoys avoidance of the direct transaction:

I’m different with non-paying clients … the EAP clients – there’s just, there’s just a freedom there, it’s ridiculous, the freedom about people coming that are being paid by somebody else. I think it just changes a lot. (Sandra)

Although there are other pressures when parents are paying clients’ fees, such as the mother who explained the sacrifices required to pay for the child’s therapy:

you’re thinking “oh my God, they’re going to want great results.”

(Sandra)
and another parent in a similar position:

the first session, he’d been awake all night on his phone and he could barely string a sentence together. And I thought “my God, it’s going to be a long haul, and she can’t afford a long haul.” (Sandra)

Comparing these feelings with those of working for an occupational health company, which she invoices, thus avoiding the fee transaction:

I actually skip along to that. (Sandra)

Henry thinks it changes the way clients feel:

I sense that the clients treat me with a little bit more authority … where it’s being paid for by the insurance company, or third party. (Henry)

Donald acknowledges the impact of knowing that clients have to find the money:

I don’t want to sound less conscientious with the clients who don’t pay me directly, but perhaps I’m more conscientious with the clients who do pay me directly: not the physical giving, but the knowledge that they are paying from their own pocket. (Donald)

Laura describes another aspect of payment by a third party:

Mum was withdrawing therapy as a punishment to the child and I found that quite frustrating. (Laura)
Sandra concludes that direct payment for therapy impacts responsibility for the success of the session, which ceases to be mutual, but instead:

When it's an exchange of money, I think we think “the responsibility should be mine.” (Sandra)
“We learn about money and money issues in unspoken ways and the individual meanings are determined by one’s life circumstances.” (Lasky, 1999, p.7)

In seeking to explore the impact on the therapeutic relationship of the fee exchange, this study identified two overarching themes. The first, described as the “Core” of the therapists, encompassed their own relationships with and attitudes to money, the influence of their background on their attitudes to money and their needs from the therapeutic relationship, whether or not fully in awareness. Second was the impact of the transaction itself: ranging from reluctance to ask for money, through elements of the physical exchange of money to the impact of someone outside the therapeutic dyad financing the work.

Since my initial search for the research proposal, I avoided the literature, in an effort to maintain the bracketed-off approach necessary for IPA. This created a sense of having discovered “something new” when I revisited the literature prior to presenting this discussion.

5.1.1 Balancing the therapeutic self and the commercial self

The literature acknowledges the desire and belief therapists have that they are offering more than just a service in return for a fee, illustrated by Kylie’s “although this is a business, it’s also about people.” The participants voiced their recognition of private practice as a business, but most experienced the feeling that taking money was hard to reconcile with their sense of what it is to be a therapist, explained by
Adler & Gutheil (1977) as guilt generated by taking money in return for a human relationship and by Myers (2007) as the need to face up to the fact that we, too, want something from the proceedings, echoing Shapiro (2006). Hirsch (2012) attributes the fee ambivalence to the inherent conflict of interest between ourselves and our clients, although Shanok (2012) disagrees, suggesting that having our own needs met is not necessarily a contradiction of our motivation to help others.

The inconsistency between the therapeutic and commercial selves of the participants was particularly evident in their treatment of fee concessions. Only one participant offered no concessions to clients in private practice, separating concessionary work entirely, by volunteering, although he suggested that perhaps he made more effort in paid work. He reported no discomfort from the tension between therapy and commerce, in which he appears to concur with Zur's (2007) assertion of the fee as a means of acknowledging the true nature of the relationship. In wishing not to "pussyfoot" about this "commercial" relationship, he would find support in Freud (in Togel, 2009) who emphasises the importance of acknowledging to clients the value of his time.

Two participants, in an interesting contradiction to the notion of client autonomy, offered concessions without being asked and not necessarily as a function their clients' economic constraints. Of these, one practised a “formal” concession policy of a reduction on the price for 6 sessions, but only after all 6 had been taken, in a show of commercial realism entirely at odds with her approach of offering concessions if she felt they would help. She and one other participant offered the idea that far from the fee impacting the relationship, it was the quality of relationship that impacted the fee, or rather willingness to reduce or suspend it. Donald referred to enjoying the
work, which he equated with liking his clients and which compensated for and incentivised reduction of the fee, consistent with Adler & Gutheil’s (1977) reference to the potential for non-material benefit from the therapeutic interaction. Angus concurred “I’m getting paid for something I enjoy and that’s another factor.” The theme of non-financial reward is taken up by Murdin (2012) in her suggestion that therapists seek self-healing from working with their clients, which is a factor in the equation.

On balance, the literature does not appear to support price concessions. The notion of the potential for a client’s sense of indebtedness to the therapist, which may be disabling, appears often: the symbolic status of fee payment as reparation for the care received as an infant (Lacan, 1954); feelings of inadequacy (Geistwhite, 2000); disabling indebtedness (Jacobs, 2004); being forced to express gratitude (Bond et al., 2006); shifting the balance of power (Mitchell, 2012) and the corollary; the potential empowerment from the decision to pay a fee (Rogers, 1942).

### 5.1.2 Being valued

The study found that every participant referred to the importance of being valued for the work they do: an interesting aspect of the research, since it did not form any part of the interview questions. Statement of their value took different forms: 3 participants volunteered that they were worthy or deserving of being paid and one referred to the high cost of training, almost as if they were responding to a challenge. This may be explained by research by Keuffel (1996), who found that the fee in the therapeutic relationship had a metaphorical function in its representation of the worth of the therapist and the worth of the therapist’s work. One participant described the resentment or lack of it he felt with clients who showed they valued him, irrespective
of payment, although Ros (2010) suggests that therapists need money as a symbol of recognition, as well as to make a living. This theme was echoed by 4 participants, who suggested that paying for something equated to valuing it and demonstrated motivation.

The symbolic importance of being paid contributed to the sense of personal value of 3 of the participants. One described this as a boost to his self esteem and one as important to her personal sense of worth and value. Angus reported “there’s part of me that feels that I’m doing all right, if I can bring in £40 an hour,” although he also recalled feeling “as rewarded, without financial reward” during his years as a volunteer.

One participant discussed her sense that therapists working for nothing do a disservice to the profession, since it encourages people to expect free therapy. Two other participants factored this into the formulation of their pricing strategy; observing a duty to their colleagues: “I feel a bit of a responsibility to the professional community … not to undercut them,” (Henry). Field & Hemmings (2007) question the significance of the prevalence of free therapy, particularly in comparison with other helping professions, in affecting the self-worth of therapists and their sense of value of the work they do.

5.1.3 Providing value for money

Once again responding to a question that was not asked and staying with the theme of value, most participants described the importance of feeling that they were providing value for money. Anxiety in this area appeared to be projected on to their clients, whom they assumed were looking for value for money, although no evidence
for this was offered, so it might be interpreted by some as a defensive justification for charging.

One participant discussed the idea of a law of diminishing returns, where, after a certain point, although beneficial, therapy does not represent as good value for money as at the outset and, believing he can gauge this point, habitually addresses it with clients. Another participant also addresses value for money with clients who pay at the beginning of the session, particularly the first session, which Ros (2010) suggests may be a sign of the client’s submission.

Two participants acknowledged the transferential implications of their view that clients are looking for value for money, because it is something that they, too, seek and another considers payment for psychotherapy as an investment “they are paying for something and they expect a return on that.” (Laura)

Apart from Tudor’s (1998) research discussing fee issues entitled “value for money,” the literature is almost completely absent. It might be interesting to ask how a client would know whether he had achieved value for money in psychotherapeutic terms, or, indeed, how a therapist would know whether he had delivered it. Implicit in this fantasy of value for money is the idea that there are therapeutic “units” which correspond to monetary units, so that we may measure them, like for like. Of course, this would be consistent with Fenichel’s (1946) pre-pecuniary stage of development, where we learn that objects have an exchange value.
5.1.4 The influence of the therapist’s world

All the participants believed that their financial backgrounds, including upbringing, impacted their attitude to money generally and their practice specifically. There was a wide range of different perspectives. One found the twin influences of frugality and generosity had a dual impact on his practice: to offer free sessions and yet not to waste money, which may explain his decision to remind his client about the accidental underpayment of £1. Another expressed the importance of money resulting from a background where money was “very tight” and yet, despite describing herself as “desperate” to earn money, was nevertheless prepared to give up a well paid job to pursue her “dream” to be a counsellor. A third participant described the “real value” she still attaches to money, having grown up without much.

Another, from a privileged background, where the achievement of money became a condition of worth, reported that “I was driven by money, because … that was the only way I was going to belong.” Losing all her money gave her a different perspective, which she reported helps work with clients who are unhappy, despite believing they “have everything” and, specifically in terms of the fee, since “I am very considerate and very mindful about where people are financially and whether they can afford to pay for this or not and my drivers are incredibly different.”

That counsellors’ backgrounds influence their approach to money is almost a given. Motherwell (2010) points to money’s metaphorical representation of power, love and security; deriving its meaning from culture, class and family systems. During training, we are encouraged to explore the influence of culture, class, society and family on our values and beliefs; even to examine the implications of our own sexuality and religion, but not so money (save that it is sometimes, and in my view inaccurately,
treated interchangeably with class). The lack of attention to money in psychotherapeutic training is widely addressed in the literature (Monger, 1998; Tudor, 1998; Trachtman, 1999; Newman, 2005; Jacobs, 2012.)

5.2.1 Asking for payment

Participants related considerable anxiety when asking for payment, particularly for missed sessions. This is not uncommon. Birnbach (1999) reminds us of the importance of addressing our own reticence to ask for payment, attributing this to a society more comfortable with addressing sex than money. The act of asking for money forces us to confront the tension between our therapeutic and commercial selves and actively deny the “illusion of mutuality” (Beltsiou, 2005) in the relationship between ourselves and our client.

One participant used ritual to avoid direct confrontation, by placing the receipt on the table before the client paid. Another attributed her difficulty to having provided free therapy for so long, and, in a further example of the significance of the therapist’s world, compared her reluctance to ask for money from clients with reluctance to ask for money from her children, describing it as being a “residue of being a Mum.” This echoed Josselson’s (1992) description of the therapeutic relationship as replicating that of parent and child; Field & Hemmings’ (2007) comparison with the parent/child dynamic and is consistent with Canter’s (1995) proposition that cultural representations of women as nurturers might have implications for the fee.

She and one other attributed some of their difficulty to practising from home “when I worked privately from home, I wouldn't even send a message.” It is true that we do
not typically ask for money from visitors to our home, in whatever capacity they come. Research by Keuffel (1996) found that unconscious fear of conflict with the client contributed to our reticence to ask for money.

The literature suggests that mistakes in the fee have other significance: a passive-aggressive response to the therapist (Tudor, 1998); the client’s need to be fed without feeding; or a test of the therapist’s dependency (Ros, 2010). Mistakes in payment, particularly leaving without paying, provoked a range of responses; from Henry’s “I wouldn’t hesitate but to remind them” to Laura’s “‘ooh, you haven’t paid” and I feel awful.” Kylie and Angus reported letting clients leave without paying until the distress experienced by Angus’s client, leading to her interrupting the next session to put right her mistake, prompted Angus to remind clients to pay. He won the internal battle to address a client’s accidental underpayment of £10, contrasting with Donald, who felt no ambivalence about raising the issue of £1 underpayment.

The unanimity of a 24-hour cancellation policy did not result in unanimity of adherence. Angus’s questioning whether it is right to charge for a missed session was balanced with “well we’ve actually contracted to work together, you should have been here.” Henry and Donald were more comfortable charging, although did not always enforce their policy. There may have been some gender difference here, (Lasky, 1999) as Kylie reported rarely enforcing her policy and Sandra and Laura never enforced theirs; Sandra describing it as “never having the balls,” perhaps continuing the motif of shame that arises from economic dependency on clients (Frosch, 2008).
Birnbach (1999) discusses the potential for passive-aggression to be displaced on to fees for missed sessions, while Ros (2010) highlights the two sets of competing needs that are at work and Blohm (2011) points to the high level of associated anxiety as demonstrating the depth of psychological impact. The ubiquitous 24-hour cancellation policy would not have been supported by Freud (1913/1968), who regarded missed sessions as a form of resistance and considered that he had leased his time, whether or not his clients turned up. Perhaps more importantly, he suggested that payment for missed sessions incentivised clients to work harder.

5.2.2 The physical transaction

The taboo nature of money in society dates back to biblical times and nowhere is this more apparent than in its representation in the physical transaction of payment for therapy. Counsellors reported particular anxiety in relation to payment in cash; from whether to count it or where to put it, to the wider implications of cash transactions.

Three participants found particular significance in how they were paid. Angus wondered about the timing of payment; being paid in notes, rather than coins; being handed the money, rather than it being left on the side and what to do with it when he had it. Donald wanted to count the money, but was reluctant to appear mistrustful, although trusted some clients to be exact: “he’s a very nice man and … I know the money will be right.” Sandra also reflected on how money was exchanged, including being handed cash in an envelope, representing reluctance to acknowledge it for what it was and adding the air of an “under-the-counter” transaction and Donald, too, experienced this phenomenon with a female client. He attributed her reticence to pay directly to the taboo nature of money and discomfort arising from the parallels with prostitution “you’re paying for a relationship,” although he asserted that for all its
prostitutional components, it was a very real relationship. Sandra alluded to the prostitution comparison, which she experienced as something of a judgement on the session, feeling that it “hurt a bit more” when the session had not gone so well. Interestingly, the prostitution analogy was rejected entirely by those counsellors who did not specifically raise it.

In the literature, therapy has been likened to prostitution both in the sleazy, back-street nature of cash transactions and in its similarity to the sale of love for money; posing a challenge to our concept of therapy as a love relationship, in which payment serves as a contradiction, confirming the limited nature of the interaction (Holmes, 1998; Dimen, 2012; Orgel, 2012), although Zur (2007) regards the fee as a positive element in its identification of the relationship as boundaried. Paying for a relationship, in the form of therapy, may generate transferential rage (Field & Hemmings, 2007). Ryan (2012) refers to the prostitution theme when he describes cash payment for therapy serving as a reminder of the limited nature of the “unconditional positive regard it offers” (p.36), which Scholar (2012) acknowledges, although suggesting that the “personal meaning” of money is more significant.

Payment in cash may create a sense of intimate collusion between therapist and client, if it is seen as a tool for “beating the system” (Field & Hemmings, 2007). Mellinger (2009) agrees, because of the association with immoral or back-street transactions, suggesting that payment by cheque somehow sanitises the transaction. Also adopting the prostitution comparison, Murdin (2012) concurs that cash transactions might suggest tax evasion, while Tolley’s (2012) point that cash is the only method of payment that fully protects a client’s confidentiality is well made.
Two participants referred to their anxiety about being seen to be above board, preferring cheques for this reason, even though cheques are "more of a pain" (Sandra), although Angus expressed his enjoyment with handling "so much cash" as preferable merely to seeing it on the screen, which Adams (2012) suggests causes us to be "psychologically removed" from our earnings.

Sandra described her reaction to being paid as a function of the perceived success of the session, explaining that she virtually "snatches" the money if she thinks it's gone well, while experiencing shame if the session is less successful "oh my God, I'm taking money as well," consistent with Keuffel's (1996) research suggesting that fee is representative of the worth of the therapist's work. Two female participants reported unpleasant experiences of being paid. Following a particularly trying session Laura, reminded a client to pay, resulting in cash being thrown at her and Sandra was upset by a father "chucking" cash on the side in prepayment of his daughter's therapy.

5.2.3 Who pays the bill?

Particular problems may arise when a third party is responsible for payment (Shapiro, 2006). Meersand (2012) commented on the unresolved issues between parent and child, which may be reflected in the payment of fees for the child’s therapy. Sandra reported a textbook example of this, describing the mother who required Sandra to go out to the car to collect her money in what appears to be a passive-aggressive, transferential response to the mother’s resentment that her son needed therapy. Sandra’s hesitation to address this may reflect her sense of guilt for charging. Parents’ ability to afford their children’s therapy added a further dimension to her work and she described the sense of pressure to perform she experienced from one mother who said “he really needs the help and we can just about afford it" and
another, who’s son could not engage “it’s going to be a long haul and she can’t afford a long haul.” Laura experienced another form of the parent-child dynamic being played out in therapy with a client whose mother withdrew counselling as a punishment.

Donald explored the dynamic of collusion with his client against the parents who were footing the bill, but observed that the involvement of a third party may conspire against the client. He described as unsatisfying the impact on therapy of working with clients funded by insurance companies, following accidents, where compensation would be awarded in inverse proportion to the success of therapy, and wondered whether he experienced an enhanced sense of responsibility to clients he knew to be self-funding, while Henry believed that third-party funded clients treated him with more “authority,” perhaps consistent with Field & Hemmings’ (2007) suggestion of infantilisation that may result from clients financed by another party. The avoidance of the fee transaction that comes from being paid by third parties generated “freedom” in Sandra, who “skips along” to her work at an occupational health company, believing that “an exchange of money” destroys the “illusion” (Beltsiou, 2005) of the mutuality of the session, so that “the responsibility should be mine.”

The findings from practitioners with theoretical orientations integrative of a mixture of paradigms were consistent with those of largely psychodynamic studies in the past.
CONCLUSION

This study sought to explore counsellors’ experiences of the impact of the fee exchange on the therapeutic relationship. It found that money’s pervasive nature is insidious: at one level taken for granted, so that we are almost unaware of it and at another, provoking great anxiety. The significance of counsellors’ own relationship with money was highlighted in its impact on the therapeutic interaction, both to the degree that everything impacting the therapist impacts the interaction (“we are limited in the degree to which we can transcend the boundaries of our cultural conditioning” (Hofsteade, 1980)), and, more particularly, because of the specific anxieties that arise from a transaction that essentially trades money for a form of love.

The issue here appears to be the contrast that arises between the nurturing and relational nature of therapy: an interaction which is perhaps unique in its delivery of love in a professional setting, save for the very obvious comparison with prostitution, and the fact that it is also a commercial transaction necessary for therapists to eat. This may be particularly difficult where the therapist gains more from the relationship than solely money, which may largely be the case, since few therapists earn enough to be purely financially motivated.

Particular anxieties surrounding the fee were explored, including the physical transaction and importance the participants attached to providing “value for money,” a feature not apparent in the literature. Counsellors’ reluctance to place sufficient value on their work (Gale, 1999) might be disabling, since, in a capitalist society, money is the primary token of exchange and in a metaphoric context where therapy
is a journey, it is the fare paid in return for travel. It follows, therefore, that where little or no fare is paid, a second or third class journey may result.

The fee represents one of the least well explored elements of the therapeutic alliance. Barely covered in most training programmes, it can provoke powerful reactions, particularly in areas like its comparison with prostitution. Money’s taboo status in society means that some of the feelings expressed by the research participants may extend beyond the psychotherapeutic profession and be common to the wider population.

Limitations of this study include the potential for defensiveness, which might have elicited cautious responses from participants, due to the nature of the subject and deeper material may be hard to access through interview, given the archetypal nature of the significance of money. Ethical considerations might have prevented certain issues being explicitly addressed.

The issues addressed in this research may have value to the wider population of private practitioners in the helping professions. During the course of this study I have encountered considerable interest in its outcomes from other professionals, in osteopathy, podiatry and surgical medicine, who themselves have expressed experiencing discomfort around the fee.

Study of fee ambivalence in other helping professions could provide valuable data, as would exploration of client perspectives on the fee transaction. There is also scope to consider how prostitutes really experience the fee exchange, because it is likely that society makes assumptions about their perspective. A useful study could
be conducted to compare this with how therapists feel and even more interesting would be to explore and compare the feelings of their and our clients on the subject.
REFERENCES


BACP. (2010). British Association for Counselling and Psychotherapy Ethical Framework for Good Practice in Counselling and Psychotherapy (Revised ed.). Lutterworth, United Kingdom: BACP.


Myers, K. (2007). Show me the money: (The 'problem' of) the therapist's desire, subjectivity, and relationship to the fee. *Contemporary Psychoanalysis*, 44(1), 118-140.


APPENDICES

Appendix 1

**Reflexive statement**

*Even love has not turned more men into fools than meditation on the nature of money*

William Ewart Gladstone, 1859

I embarked on this research project expecting a straightforward, albeit challenging, path. The challenges I anticipated were intellectual and procedural: research, analytical and writing skills. I had the books and I had completed the research methods module and the research proposal, so all that remained was the research itself and that excited me greatly. I understood the topic (or so I thought) and I believed I could add usefully to the body of existing research.

First, I underestimated completely the personal investment in my research that would be involved. I lived, breathed, ate and slept the work, sometimes waking in the night to make notes. My sense of proportion disappeared and, although I hope I was able to be fully present for my clients and supervisees, pretty much everything else went on the back burner for a year. Most surprising to me was the disappearance of my self confidence. Every new task started with an agony of self doubt and fear of failure, played out as prevarication and internal struggles and quite a few tears. At the end of each task, I would review the process, resolving to learn and so simplify my approach to the next task, but this was not to be. Panic was the common factor. At the outset, I had been excited by the project, but by the end of writing the body of the dissertation, I felt like a snivelling wreck.

Recruiting participants appeared to be going well. There was considerable expression of interest in my topic. It amazed me how little of this translated into willing participants, but perhaps that was due its sensitive nature. The multi-faceted nature of money remains so under-examined in what it means to us as individuals. As I reiterated the “right to withdraw,” I became concerned that participants might,
indeed, withdraw before the conclusion of the research and this led to me recruiting 6 participants “just in case”, where 4 may have been sufficient, creating a great deal more work, although this became a happy accident, because the variety and richness of data from all my participants enhanced the work greatly.

My next shock was interviewing the pilot participants. I am an experienced therapist, so, mistakenly, believed I would be good at interviewing. The transition from therapist to interviewer did not go well. I was far too hesitant in the first pilot, feeling reluctant to challenge and by the second, I was so in love with my questions that I was shocked to hear myself debating a question with my participant. My confidence in my ability to conduct the “real” interviews was thus badly shaken. These went better than the pilots, but my fear of not getting through the questions may have prevented me from developing themes as otherwise I might have done. I found it hard to get right the balance between managing and directing the interviews.

I am not sure I entirely got at what I wanted to in this research. I think maybe I wanted to reach something unreachable: to get at thought processes that might expose the shadows of a counsellor’s being – their acknowledgement that, for all the ethical behaviour in the world, they have the capacity for a “kerching” moment, however fleeting, however forcefully rejected, because acceptance of our own base relationship with, and need for, money may facilitate exploration of it with our clients. Questions to elicit this type of response would have had huge potential for harm and offence and could not, therefore, be posed.

During transcription and analysis, it struck me that maybe I had asked the wrong questions, but I struggled to work out what the new questions should be. Perhaps fewer questions would have permitted more uncharted areas to be explored, but this could also have led to important areas being missed. I wonder whether heuristic methodology might have generated data with a different perspective.

This excerpt from my reflective journal expresses one of the hardest moments:

*I have finished the transcripts and I feel washed out. The interviews have been such a disappointing journey and I suppose I must have asked the wrong questions. I have been poor at transferring*
counselling skills to research – at one level trying to debate with my participants and at another level unwilling to challenge. I have done neither well. This is the best and the worst thing I have ever done. It is one of those things I most and I least regret. I feel terribly isolated and alone and have no idea what I should be doing or how I should be doing it or of time scales, or of whether I am normal. It is very difficult to marry this with client work and supervising work and I feel pushed to my limit. It is a personal development exercise when I have the least time, energy or emotional resources for it. The rest of my life is on hold and yet not invisible, so that it remains a constant reminder of my enduring sense of failure and incompetence, just when I had begun to develop a sense of competence in my clinical counselling work and the light at the end of the developing competence tunnel as a supervisor. It has brought me down to earth with a bump and affected everything. I desperately want it to be over, but it is mine and I cannot bear to let it go. (28/08/12)

The challenges I have undergone have changed me. I have found in myself resources of tenacity and determination beyond anything I previously believed I possessed. I think it was McLeod who said that however good is the result of our research work, we will always believe we could have done better and I am no exception to this rule. I have been fortunate in the patience and support of those around me and I have survived it. I have done my best to bring to my practice that which I have learned, not only in terms of the research question itself, but also the learning related to the impact on our self-concept when facing challenges that seem overwhelming. Therapists may become caught up in their image of themselves, but the symbolic importance of money as status and security and as a metaphor for parental love it may represent applies to therapist and client alike.

I have gained immeasurably from this work, to the point that I cannot imagine it will end here. I feel I have learned how to do it and I want to “have another go.” I am so fortunate to have had the opportunity to experience the process and I recognise that, through it, I will never be the same again.
Appendix 2

SEARCH STRATEGY, SEARCH TERMS & DATABASES

Search Resources

- Personal Books & Journals
- University of Chester Library Books
- Electronic Databases accessed through the University of Chester
  - Education Research Complete
  - PsycBOOKS
  - Psyc-INFO
  - PsycARTICLES
  - Psychology and Behavioural Sciences Collection
  - Pub Med.
  - SocINDEX with full text
  - Web of knowledge
- Other Electronic Databases
  - British Association for Counselling and Psychotherapy
  - British Psychological Society
  - Google
  - Google Scholar
  - Taylor Francis Online

Search Terms:

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Advertisements for participants

Lindsay Tonks

**Study: "How does the exchange of money impact the therapeutic relationship in private practice? Counsellors' perspectives: a small scale qualitative study"**

Counsellors currently in private practice are needed to participate in a postgraduate M.A. (Chester) qualitative research exploring how the exchange of money impacts the therapeutic relationship in private practice.

The intention of this study is to shed light upon the many influences and processes at work when money is exchanged for services in what is otherwise a quasi-spiritual encounter. To what extent does it intrude upon the therapeutic relationship and how might the exploration of such intrusions serve to enhance that relationship? These appear to be a relative paucity of literature on the subject and what literature there is, comes from the main, from research in the United States. Further, there is a strong psychoanalytic bias in the majority of studies conducted so far. Two similar studies have been conducted: one British, by Power and Pigott (1996) and one in the United States by Keeney (1996). My study, conducted more than 20 years later, might provide a fresh perspective, as contemporary influences impact not only counselling and psychotherapy, but society generally. In addition, it will be conducted in Britain, from the perspective of therapists from a number of theoretical orientations, and as such may add something original to the field.

Participants should have a minimum of 400 post qualification hours and over 12 months experience of private practice; be in supervision and have access to personal therapy. Selection will be on the basis of a brief questionnaire. The process will involve a semi-structured, face-to-face, digitally audio-taped interview of approximately 1 hour. Participants will be selected on the basis of maximum variation sampling, varying by theoretical orientation, gender, and other factors in order to achieve a sample most likely to generate a richness and diversity of data within what is a relatively small study. Great care will be taken to ensure the anonymity of participants, including the use of pseudonyms in the transcriptions, and participants' well-being will be paramount. The location of the interview can be negotiated to suit your convenience and I will pay reasonable travel expenses.

Email Lindsay Tonks at Lindsay.Tonks@londonmet.ac.uk
Study: “How does the exchange of money impact the therapeutic relationship in private practice? Counsellors’ perspectives: a small scale qualitative study”.

Counsellors currently in private practice are needed to participate in Postgraduate M.A. (Chester) qualitative research exploring how the exchange of money impacts the therapeutic relationship in private practice.

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Participants should have a minimum of 400 post qualification hours and over 12 months’ experience of private practice; be in supervision and have access to personal therapy. Selection will be on the basis of a brief questionnaire. The process will involve a semi-structured, face-to-face, digitally-audio-taped interview of approximately 1 hour. Participants will be selected on the basis of maximum variation sampling, varying by theoretical orientation, gender, and other factors in order to achieve a sample most likely to generate a richness and diversity of data within what is a relatively small study. Great care will be taken to ensure the anonymity of participants, including the use of pseudonyms in the transcripts, and participants’ well-being will be paramount. The location of the interview can be negotiated to suit your convenience and I will pay reasonable travel expenses.

Email Lindsay Tonks at support@lindsaytonkscounselling.co.uk or call 07946 761582
Counsellors in private practice needed to participate in Postgraduate M.A. qualitative research exploring how the exchange of money impacts the therapeutic relationship in private practice. Participants should have a minimum of 400 post qualification hours. Selection will be on the basis of a brief questionnaire. The process will involve a semi-structured face-to-face interview of approximately 1 hour. Email Lindsay Tonks at lindsay.tonks@ntlworld.com or call 07946 761582
Appendix 4

Information Sheet for Research Participants

“How does the exchange of money impact the therapeutic relationship in private practice? Counsellors’ perspectives: a small scale qualitative study”.

i) The Researcher: Lindsay Tonks

I am a student on the Postgraduate M.A. in Counselling Studies at the University of Chester and have completed research methods training at postgraduate level. I currently work in private practice as a counsellor and for an agency supporting survivors of sexual abuse as a supervisor. I am studying for the Postgraduate Certificate in Supervision at the University of Chester. I am in the process of accreditation as a counsellor by the BACP.

ii) The study: aims, objectives and rationale

My interest was sparked by my growing sense that, in private practice, payment adds an indefinable layer to my interaction with clients. I hope to shed light upon the many influences and processes at work when money is exchanged for services in what is otherwise a quasi-spiritual encounter. To what extent does it intrude upon the therapeutic relationship and how might the exploration of such intrusion serve to enhance that relationship? What literature there is to date derives largely from research in the United States and has a strong psychodynamic bias. I aim to provide a fresh perspective on the issue, as my research will be conducted in Britain and will use the experiences of therapists from a number of theoretical orientations.

iii) Inclusion Criteria for Participants

A brief questionnaire will be sent to interested prospective participants, or this could be completed over the phone, and there will be a follow-up discussion with the researcher, which could be by telephone or by meeting in person. Participants will be selected on the basis that they are most likely to generate richness and diversity of data within what is a relatively small study (4–6 participants). Prospective participants should:
- Be counsellors or psychotherapists qualified to at least diploma level and practising in private practice.
- Have a minimum number of 400 post qualification hours.
- Have been in private practice a minimum of 12 months, with a minimum of 5 clients a week.
- Have practised in an organisational context since qualification
- Be in regular supervision.
- Have access to personal therapy.
- Be a member of a professional body.

iv) Data Collection
The research will be conducted through the medium of face-to-face interviews with the researcher, and will be audio-taped for later transcription. Interviews will be of approximately 60 minutes’ duration. Transcripts will be sent to participants, who will be asked to confirm or challenge their accuracy. The location of the interview can be negotiated to suit your convenience and I will pay reasonable travel expenses.

v) Confidentiality and Data Protection
Great care will be taken to protect the identity of research participants, who will be invited to select pseudonyms for themselves for use in the transcribed versions of the interviews. Digital audio recordings will be stored on a computer during transcription in a password protected file. Once transcribed, they will be copied to CD and deleted from the computer. The CDs will be stored under lock and key and any identifying data of the participants will be kept under lock and key separately from the CDs. Data stored on the computer during data analysis will be password protected and categorised under pseudonyms. Data generated by the study will be accessible only by the researcher, my research supervisor, internal markers at the University of Chester and the external examiner. All information, including identifying details of participants, research data and recordings, will be stored for 5 years after the date of final publication and then will be destroyed by shredding in a cross-cut shredder. A copy of the dissertation will be held in the University of Chester and may be made
available electronically. Without further consent, some of the material may be used in conference presentations or published research papers.

vi) Right to withdraw

The researcher wishes to emphasise that at any point until the data generated has been analysed, participants have an absolute right to withdraw, unchallenged and without explanation, and any data pertaining to them will be destroyed.

vii) Ethical Governance

BACP (2010) ethical principles and the principles enumerated in the University of Chester Research Governance handbook will apply to this research, which has been approved by the Ethics Committee of the University of Chester’s Department of Social Studies and Counselling. It will be monitored by Dr Rita Mintz *, who is both Chair of the Ethics Committee and my Research Supervisor and who should be contacted in the event of dissatisfaction or complaint. Ultimately, participants have recourse to the complaints procedure of the BACP.

*(01244512038 or e-mail: r.mintz@chester.ac.uk )

viii) Potential Benefits to participants

It is hoped that the process of being interviewed, reading of the transcripts and subsequent reflection might facilitate enhanced self awareness and a greater understanding of the processes involved in the fee transaction, which may lead to improved functioning as a therapist.

ix) Potential Risks to participants

Ostensibly, there is minimal risk. However, the literature refers to counter-transferential reactions to the topic of research, which could potentially stir up sensitive issues. Care has been taken to protect participants from harm by insisting on access to personal therapy, but the researcher will remind participants of the right to withdraw, should any distress emerge.

x) Contact Details

Anyone requiring further information can contact me on 07946 761582 or email lindsay.tonks@ntlworld.com
Appendix 5

**Inclusion Questionnaire for Prospective Participants**

*How does the exchange of money impact the therapeutic relationship in private practice? Counsellors’ perspectives: a small scale qualitative study.*

Name:

Address:

Contact Telephone No:

Contact Email:

Are you a practising counsellor?

When did you qualify?

What are your post qualification supervised practice hours? (to the nearest 100)

Do you work in Private Practice?

How long have you been in Private Practice?

What is your average weekly client base in Private Practice?

Have you worked in an organisational context since qualification?

Are you in Regular Supervision?

Are you a member of the BACP, or similar organisation?

Do you have access to personal therapy?

What is your theoretical orientation?

What interested you about this study?

Any other information?
Appendix 6

RESEARCH CONSENT FORM

Study: “How does the exchange of money impact the therapeutic relationship in private practice? Counsellors’ perspectives: a small scale qualitative study”.

Researcher: Lindsay Tonks

Participant: …………………………………………………………………………………………………

I confirm that the above study has been fully explained to me.

I confirm that I have read and understood the Information Sheet provided, outlining the details of this study and that I have had the opportunity to ask questions and clarify details relating to it.

I confirm that my role as participant has been made clear to me.

I confirm that I believe I have been given sufficient information about the nature and purpose of the research study to give my informed consent to participate.

I confirm that I understand my right to withdraw from the study at any time and without giving a reason or explanation.

Signature of participant: ……………………………………………………………

Date: ……………………………………………………………

Signature of Researcher: ………………………………………………………………………

Date: ……………………………………………………………
UNIVERSITY OF CHESTER
MA in Counselling Studies
Consent Form - Digital Audio Recording of Interview

I ………………………………………………… hereby give consent for the details of a written transcript based on a digitally audio recorded interview between myself and ………………………………………………… to be used in preparation, and as part of, a research dissertation for the MA in Counselling Studies at the University of Chester. I understand that my identity will remain anonymous and that all personally identifiable information will remain confidential and separate from the research data. I further understand that the transcript may be seen by the Counselling Tutors and the External Examiner for the purpose of assessment and moderation. I also understand that all these people are bound by the British Association for Counselling and Psychotherapy (BACP) Ethical Framework for Good Practice in Counselling and Psychotherapy.

I understand I will have access to the transcribed material should I wish to, and would be able to delete or amend any part of it. I am aware that I can stop the interview at any point, or ultimately withdraw the interview before the publication of the dissertation. Upon completion of the research the recording will be destroyed. Transcripts will need to be kept by the University for a period of five years after which time they will be destroyed. Excerpts from the transcript will be included in the dissertation, but will exclude any personally identifiable material. Copies of the dissertation will be held at the University of Chester and may be available electronically via the University’s digital archive system.

Without my further consent some of the material may be used for publication and/or presentations at conferences and seminars. Every effort will be made to ensure complete anonymity.

Signed [Participant] ………………………………………………………………………
Date ……………………………………………………………………………………..

Signed [Researcher] ………………………………………………………………………
Date ……………………………………………………………………………………..
AGREEMENT TO ACCURACY OF TRANSCRIPT

Study: “How does the exchange of money impact the therapeutic relationship in private practice? Counsellors’ perspectives: a small scale qualitative study”.

Researcher: Lindsay Tonks

Participant: …………………………………………………………………………………………………………

I confirm that:

- I have received an anonymised, transcribed copy of the research interview that took place with the Researcher on ……………………..(date) and that I have had the opportunity to consider it.

- To the best of my knowledge and belief, it appears to be an accurate representation of the digital recording.

- I give my consent to the use of this transcribed material.

- I understand my right to withdraw from the study at any time and without giving a reason or explanation.

Signature of participant: ……………………………………………………………

Date: ……………………………………………………………
Appendix 7

Interview Schedule for Participants

Interview Guide- Participant Version

A broad outline of the questions you can expect

- Introduction

- About your practice

- Your approach to Fees

- Situations relating to clients and fees

- Money in the therapeutic relationship

- Exploring fees in client work and supervision

- Asking for money

- Own influences

- Perceptions of wealth

- Any other thoughts

- Close
Appendix 8

Interview Guide

1. Preamble
Thanks so much for agreeing to participate. Can I just confirm you have read and understood the information sheet and are still happy to participate? Can you sign the research consent form and recording consent form? Before we start, I should like to remind you that you have a right to withdraw at any time, that you have a right to “pass” on any questions that you choose and that the results of the study will be completely anonymised and that this recording will be transcribed under a pseudonym. Also that you will be sent the transcripts to agree or to challenge and that nothing will be done without your consent. Are you still happy to proceed?

2. Practice
Tell me a little about practice:
   - What sort of people make up your client base
   - From where do you get referrals
   - Theoretical orientation and way of working
   - Home, office or shared practice

3. Fees
   - How did you set them? What were the considerations?
   - What is your cancellation policy?
   - What is your concession policy?
   - Have you revised your fees?

4. Are there any situations with clients that stand out for you in relation to payment?

5. Could you try to describe an occasion where you feel that the financial aspect of therapy has impacted the process of the relationship, however minimally? Are there any other occasions?
6. How important an aspect of the power dynamic do you consider money to be in your practice? What do you think about client autonomy in terms of the client paying for themselves vs. being paid for? How important do you feel is the notion of their power in choosing to offer, or withhold, payment?

7. To what extent do you explore the fee transaction with clients? How easy do you find it to address the issue? Why do you think this is? For example, how would you feel about putting up fees with an existing client?

8. What money issues do you explore in supervision?

9. How easy do you find it to ask for money in counselling practice? What is your reaction if the client is about to leave and has forgotten to pay. What do you feel? What do you do?

10. To what extent do you feel your own financial background, including your upbringing, impacts your attitude to money? How does this impact your practice? (Limit answer here).

11. In what respects do you feel valued differently by clients when you are paid for your work? How do you think that impacts the therapeutic relationship? Do you think you work differently with paying clients? Have you experienced any difference between being paid in private practice and being paid in other counselling settings?

12. What might be your response to the view that paid counselling, particularly private practice, can be like prostitution, in offering a close personal relationship with another person for money?

13. What impact on the therapeutic relationship have you ever noticed because of your or your client’s perception of the other’s wealth?

14. How has working in private practice impacted your attitude to money? How important is fee income to you?
16. How does your approach to money differ in therapy practice from the rest of your life?

17. Is there anything else you feel is relevant to your experience of the fee transaction and its impact on your relationship with your client?

Close

Thank you for participating, for your co-operation and time etc.

Remind of right to withdraw.

Would you like to choose a pseudonym once the tape is turned off?

Thanks again. Stop tape.
## Table 2: Participants Matrix

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Appendix 10

Data Analysis Procedure

My intense relationship with the data began with the verbatim transcription of the recorded interviews, which Wheeler, McLeod & Elliot (2010) refer to as very time-consuming. However, the act of transcribing provided a new perspective on the interview, allowing me to hear it from a more objective view, as if I were not involved in the proceedings. I began to experience the emergence of themes and ideas, but in too tenuous a form to capture. Following transcription, I listened to the recording again, having a sense that I had missed something of the meanings through my attention to the words for the purpose of transcribing them. This proved to be the case and my perspective on the interview became altered somewhat. Next, I read the transcript through in detail, highlighting words and phrases that struck me and making brief notes in the margins. I re-read the transcript and added more notes. Willig (2008) suggests that the path of analysis involves initial encounter with the text through reading and re-reading it and making unfocused notes, which reflect initial observations; identifying and labelling themes; attempts to introduce structure-clustering of themes and finally the production of a summary table of structured themes.

I made a copy of the transcript in a 2-column format (Appendix 12, p.108; Appendix 14, p.120) with the transcript on the left and transferred my comments and added new comments that arose to the right hand column, dividing them into descriptive comments, linguistic comments and conceptual comments, as suggested by Smith et al. (2009). I colour coded these for clarity. I repeated this process in a 3-column format (Appendix 13, p.115; Appendix 15, p. 132), adding on the left a column for emergent themes. Re-reading the text to produce this led to me adding comments to the right hand column, as my search for emergent themes led to a slightly altered relationship with the data in this inductive and hermeneutic enterprise, or what Smith (2007) “describes as “an iterative and inductive cycle.

Next, I transferred to another sheet the list of the emergent themes extracted from the 3-column format. I created a further column to this list, in which I added page
and line numbers from the transcript, so that I would later be able to identify the in vivo quotes. I cut out each emergent theme, together with its location identifiers and spread the “slices” over the floor and sat in the middle and stared at them and moved them around, like pieces of a jigsaw, until some kind of pattern emerged. As I began to identify clusters of themes, I placed the slices on paper of a different colour, on which I wrote draft headings, according to the clusters I appeared to be identifying. I left these for some hours to allow a fresh perspective when I returned and finally made some adjustments, both to the positions of the slices and the draft headings and then stapled the “slices” to the coloured sheets, from which I created new “Cluster Lists” with excerpts of transcript to support them (Appendix 16, p.143; Appendix 17, p.144) and then a Master List of Clusters (Appendix 18, p. 145). I put this work to one side, so that it would have minimal impact on the next interview to be analysed, where the process would be repeated. This process was repeated for all 6 participants.

Next, I printed out the Master Lists of Clusters for all the participants, each on a different coloured sheet, for ease of identification, and cut them up and repeated the process of sitting on the floor and staring at the data. Again, I tentatively placed them on sheets of paper, to which I gave preliminary titles, also tentatively. These would form the Master Themes. Once finalised, I typed in the titles of the Clusters from each participant in different coloured ink (Appendix 19, p.146), for identification, on 3 separate sheets of paper, so that I could see at a glance the evidence to support my construction of Master Themes. Finally, I constructed them into tabular form, so that what had been mountains of data were represented on but a single sheet.
Appendix 11

Extracts from reflective journal

07/09/12 Panicking as have not received back one of the participant’s “agreement to accuracy of transcript” forms. Feeling very deskill as I embark on the 2nd analysis of Sandra, reading and re-reading chapters on Data Analysis, but end the day with a vague idea of how to proceed.

08/09/12 A little more confident and make some progress, but very, very slow. At this rate, I will be ready to submit in 2025. Concerned that I am putting too much of MY interpretation on the data, but I suppose it is MY version of Sandra’s lived experience that I am trying to capture. Glad when I am too tired to work any more, as very stressed. Encouraging email from dissertation supervisor.

09/09/12 Half way through the 2nd analysis of Sandra, I feel I am beginning to learn my trade as far as “exploratory comments” goes. I struggle to exclude material, as it all feels important, but am aware that I must be selective and that I must STICK TO THE THREAD of the research question.

10/09/12 Completed 2nd analysis of Sandra and starting on emergent themes. Although it feels that some of these have already made themselves known to me, I have tried to avoid their little voices and remain neutral, but I’m finding increasingly that the script and I have become a team and we begin to know what one another is thinking. As I commence the search for emergent themes, the familiar wave of fear sweeps over me as I venture yet again into an unfamiliar area, stepping over the threshold of my comfort zone and face yet another unknown. I feel an uncomfortable mixture of love and fear for this project and long for it to be over, while knowing I will mourn it’s passing. Final participant emailed to apologise for late return of consent form, so sigh of relief, mixed with recognition that I now have another interview to analyse, but at least my research will retain its balance of 3 male and 3 female participants.

12/12/12 Client who has previously been funded by mother and not truly engaged in the work has returned and is paying for himself. He said “when I’m paying for myself, it makes all the difference” so there is something in this money thing – I’m not imagining it!
| Original Transcript (Donald)  
<table>
<thead>
<tr>
<th>(Pages 2-5, lines 39-168)</th>
<th>Exploratory comments</th>
</tr>
</thead>
</table>
| **L:**  When it comes to your fees, how did you go about setting them? What were the considerations? | **Bottom of accredited counsellors’ rates**  
| **D:**  Erm, going rate, I suppose, er, I suppose…I think I might have started… I was probably charging (£)30 - it might have been a bit lower – (I) put it up gradually over the years. I think I stay towards sort of bottom of accredited counsellors’ rates. Um, I have tussled with myself when I put them up, because I, sometimes I, I, sometimes I supervise people who charge more than me and I think “that doesn’t seem right”, but I have an ethical thing really, well I suppose I do – a bit of a conscience and sometimes I will be rung up and asked by a firm “how much do you charge?” and I don’t have a set figure in my mind – guidelines - and sometimes I come off the phone thinking “that’s too much” or sometimes “it’s too little”, so it’s all a bit random really. | **Tussled, hesitant, process of raising rates**  
| **uncomfortable and yet.** | **Not right - ethical**  
| **Thoughtful - conscience** | **Too much, too little random judging**  
|
L: When you have those thoughts “it’s too much”, or “too little” what do you think is behind that: the sense that it’s too much or too little?

D: Um, I think I make a very good living from counselling. I love doing it. Um, I make probably as much as I would if I was still a teacher – possibly, possibly a little more – it’s difficult to know, when you’ve got your pension and so on. So, when I hear about people charging what I consider to be ludicrous fees – sort of (£)60+ an hour, I think there’s something a bit wrong about that – I mean, I charge (£)40, (£)40 in the day, (£)45 in the evening and, being a bit tight myself, I, you know, I often think “would I pay that?” I am amazed how many people are prepared to pay it, so there’s a little bit of... Perhaps it’s just because I’m getting older and money seems to be – it seems to be a lot of money. It’s amazing how many people are willing to pay £40, £45 an hour.

L: Yeah, and that feels like relatively a lot.

D: It feels relatively a lot, yes.

L: In terms of the value of money.

D: Yeah, and of course it’s not per hour, because, you know, you’ve got all your...
time in between…and I do get annoyed by EAPs who are bringing fees down, so I’ve been working for EAPs since 2001, I think, and 2 of them in particular used to pay £40 per hour in 2001. Now, over the years, it’s never gone up and recently, it’s come down (L: right), so it’s come down to £37 and some will push it even further and try £35, and that seems wrong and that’s… because they’re making an awful lot of money from this – obviously, if they’re paying me £37 an hour, what are they making, (£)70?, (£)80?

L: Right. Does that kick in to a sense of being valued less than is fair?

D: I suppose so, but I mean it’s market forces, isn’t it: they use me; I use them. I stay registered with them, because you never know when thing’s are going to take a downturn, when you might need them, but I don’t put myself out as much for them as I would have done at one time. For example, (£)37 payers, I won’t, unless I’m very interested in a case, I won’t take… I won’t do it in the evening for (£)37. It used to be the fact that EAPs paid more than I charged in private practice, (L: yeah), but that’s obviously reversed now.

L: Have you a cancellation policy?

D: I do. Um. Less than 24 hours’ notice, I charge the full fee, um, I say to people

Annoyed by EAPs bringing fees down

Some will push it even further and that seems wrong because they’re making an awful lot of money

Market forces dictate – removes from self?

Puts self out less now lower fees

Unless I’m very interested in a case

Worth sacrificing cash for interest. Cash not the only consideration.
“that’s literally 24 hours’ notice, so if you ring up at 24 hours and one minute, then you don’t have to pay anything; if it’s 23 hours, fifty-nine … I’ve never implemented that, but, um…. Very occasionally, I will waive it, or settle on a half, and, occasionally, probably twice a year maybe on average, people don’t pay. You know, I send them a reminder text or whatever, but I’ve never pursued anyone through the courts and I say to people that I won’t pursue them through the courts, but most people pay up.

L: Ok. And what about a concession policy?

D: Yeah, um, occasionally, I’ll work for free. I think this year I’ve seen two people for free. One of whom was a bit of a social acquaintance anyway and the other was word of mouth from a social acquaintance – both seeming to be quite hard up, so… Um, if either somebody asks for a concession, or I get a sense of them not being well off, I’ll say “can you afford this?” Um, and usually, people say “yes”, so I don’t think I’ve ever asked somebody and they’ve said “yes, they can afford it” and then I’ve told them I’ll charge less, but when people ask for a concession, I will sometimes give one. I have a policy, and which I’ve started stating to people, that I think sometimes counselling students, in particular, will say “I’m only a student, you know, can I have a concession?” and I’ll, I’ve started saying “if I assess, if I guess that your annual household income is higher than mine, then, no, I’m not going to

| Extremely precise policy | never implemented
| will waive it or settle on half
| won’t pursue through the courts
| transparency Refers to notion of court (right to payment) but waives right and shares this with clients. “I could, but I won’t”
| Occasionally, I’ll work for free
| Free therapy - quite hard up
| I’ll say “can you afford this?” social conscience
| Concession policy informally means-tested |
give you a concession” and then, if they tell me “well, I’m a single parent on benefits” or whatever, then I’ll give a concession.

L: Ok. Do you feel that there is any impact on the relationship when you’re charging less than your market rate?

D: If it’s the sort of “less” that I would normally charge, which might be five pounds, ten at the most, then probably not, but if it’s considerably less than that, if it’s free, (L: u-hum), or if it’s considerably less, um, which it is occasionally, then I think it probably does have an impact.

L: What sort of impact would you think it has?

D: Um. I would suspect people feel more grateful. I think if I’ve knocked a fiver off, people are unlikely to feel that grateful, um but I think if I’ve given it for free, or at a substantial discount, people feel more grateful, more responsible, I would think. I don’t have firm evidence for that, I guess it’s just guesswork.

L: Just your, your feeling. Does it have any impact on the way you feel in the therapy room that you’re doing it for nothing, or for less?

But takes clients’ word

If it’s free or if it’s considerably less, then I think it probably does have an impact

Degree of concession impacts relationship

Suspects people more grateful. Grateful = responsible? D perceives gratitude for substantial discount translates to (commitment?)
D: If it’s nothing, it does, yes. If I get messed about by somebody who’s… I’m doing it for nothing and they’re not particularly apologetic, then I will get miffed. I saw someone a while back and, well, it was the second one of the ones I was telling you about – it was a, it was a – it was someone close to me’s work colleague’s husband and the story was he was really well off and really desperate for help and I agreed to give him six sessions for nothing, which I did, and it seemed to help and then, at the end, he said “well, I’d like to carry on” …, but during this time I’d found out, actually, there’s two household incomes and one of them is a good salary. Ok, a lot of people are struggling these days, but it wasn’t what I would class as “hard up”, so I’m slightly miffed with that and then he decided to carry on, but he could only come monthly, only afford it and I thought “fair enough” and then he cancelled the first of those sessions and I didn’t see him for a long time. Interestingly, he’s recently back and paying full rate now, once a month, but I though that was a bit, a bit – I was a bit miffed by that really. On the other hand, it seemed to help him – the 6 free sessions, so, you know, it’s fair enough – I can afford it, so…it’s all right.

L: OK, but there is some impact on the relationship?

D: Yeah, I suppose whenever he’s coming, I’m reminded of that. I’m reminded of the fact, mmm, I think, I think you could have afforded to pay something. Um, his
perception probably was that he couldn’t, but I think that of the few over the years I’ve given free sessions to, that’s probably the only one I’ve got any sort of resentment towards.

L: Right. Ok. I’ve given you this (DD: Yeah), but you haven’t really valued it.

D: Yeah, I mean I…it does make a difference if I like a client. If I like a client that I’m doing free sessions for, there’s no resentment at all. If I, if I’m not that keen on them, then, especially if I think “actually you’ve got some money”, then…it tickles me really, that, on more than…on two or three occasions, one I can remember, somebody really very well off, you know, I would, I would guess, I don’t know, I think they might have been a solicitor or something like that, something of that order “ooh, that's a lot of money, I don’t think I can pay that” and it seems, there

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<td>Resentment (only this one because “cheated”)</td>
<td>It does make a difference if I like the client</td>
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<td>No resentment at all if I think “actually you’ve got some money”</td>
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<td>I am not greedy?</td>
<td>L: When it comes to your fees, how did you go about setting them? What were the considerations? D: Erm, going rate, I suppose, er, I suppose…I think I might have started… I was probably charging (£)30 - it might have been a bit lower – (I) put it up gradually over the years. I think I stay towards sort of bottom of accredited counsellors’ rates. Um, I have tussled with myself when I put them up, because I, sometimes I, I, sometimes I supervise people who charge more than me and I think “that doesn’t seem right”, but I have an ethical thing really, well I suppose I do – a bit of a conscience and sometimes I will be rung up and asked by a firm “how much do you charge?” and I don’t have a set figure in my mind –</td>
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**Hidden internal yardstick refers?**

L: When you have those thoughts “it’s too much”, or “too little” what do you think is behind that: the sense that it’s too much or too little?

D: Um, I think I make a very good living from counselling. I love doing it. Um, I make probably as much as I would if I was still a teacher – possibly, possibly a little more – it’s difficult to know, when you’ve got your pension and so on. So, when I hear about people charging what I consider to be ludicrous fees – sort of (£)60+ an hour, I think there’s something a bit wrong about that – I mean, I charge (£)40, (£)40 in the day, (£)45 in the evening and, being a bit tight myself, I, you know, I often think “would I pay that?” I am amazed how many people are prepared to pay it, so there’s a little bit of… Perhaps it’s just because I’m getting older and money seems to be – it seems to be a lot of money. It’s amazing how many people are willing to pay £40, £45 an hour.

**Love doing it – impact on fees?**

**Something wrong – there is a “right” fee to charge?**

Judge by own sense of vfm

A lot of money, so not right?

There is a “finite” value for money?

<table>
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<th>guidelines - and sometimes I come off the phone thinking “that’s too much” or sometimes “it’s too little”, so it’s all a bit random really.</th>
<th>Too much, too little random judging</th>
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<td>L: When you have those thoughts “it’s too much”, or “too little” what do you think is behind that: the sense that it’s too much or too little?</td>
<td>Good living, love doing it impactful on charges?</td>
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<tr>
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<td>Charges a function of his need?</td>
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<td>People charging ludicrous fees how assessed? Something a bit wrong about that A bit tight myself, would I pay that? amazed people value service that highly? getting older – trying to explain own feelings? seems a lot of money amazing? relating others’ value for money to his own sense of value?</td>
<td></td>
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</table>
My fees a function of their charges.
3rd party payer impact

Removes self from rate setting?

L: Yeah, and that feels like relatively a lot.

D: It feels relatively a lot, yes.

L: In terms of the value of money.

D: Yeah, and of course it’s not per hour, because, you know, you’ve got all your time in between…and I do get annoyed by EAPs who are bringing fees down, so I’ve been working for EAPs since 2001, I think, and 2 of them in particular used to pay £40 per hour in 2001. Now, over the years, it’s never gone up and recently, it’s come down (L: right), so it’s come down to £37 and some will push it even further and try £35, and that seems wrong and that’s… because they’re making an awful lot of money from this – obviously, if they’re paying me £37 an hour, what are they making, (£)70?, (£)80?

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| it’s not per hour justification of rate? |
| Annoyed by EAPs bringing fees down |
| Some will push it even further and that seems wrong because they’re making an awful lot of money |
| Market forces dictate – removes from self? |
Impact on relationship of fees

Interest compensates for cash?

Very precise policy, but never implemented

me; I use them. I stay registered with them, because you never know when thing’s are going to take a downturn, when you might need them, but I don’t put myself out as much for them as I would have done at one time. For example, (£)37 payers, I won’t, unless I’m very interested in a case, I won’t take…I won’t do it in the evening for (£)37. It used to be the fact that EAPs paid more than I charged in private practice, (L: yeah), but that’s obviously reversed now.

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Puts self out less now lower fees

Unless I’m very interested in a case

Worth sacrificing cash for interest. Cash not the only consideration.

Extremely precise policy never implemented

will waive it or settle on half

won’t pursue through the courts transparency

Refers to notion of court (right to payment) but
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<tr>
<td>Free as seemed hard up</td>
<td>D: Yeah, um, occasionally, I'll work for free. I think this year I've seen two people for free. One of whom was a bit of a social acquaintance anyway and the other was word of mouth from a social acquaintance – both seeming to be quite hard up, so… Um, if either somebody asks for a concession, or I get a sense of them not being well off, I'll say “can you afford this?” Um, and usually, people say “yes”, so I don’t think I’ve ever asked somebody and they’ve said “yes, they can afford it” and then I’ve told them I’ll charge less, but when people ask for a concession, I will sometimes give one. I have a policy, and which I’ve started stating to people, that I think sometimes counselling students, in particular, will say “I'm only a student, you know, can I have a concession?” and I'll, I’ve started saying “if I assess, if I guess that your annual household income is higher than mine, then, no, I’m not going to give you a concession” and then, if they tell me “well, I’m a single parent on benefits” or whatever, then I'll give a concession.</td>
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<tr>
<td>Important clients can afford</td>
<td></td>
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<tr>
<td>Concession function of relative means (D vs client)</td>
<td>L: Ok. And what about a concession policy?</td>
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<td></td>
<td>waives right and shares this with clients. “I could, but I won’t”</td>
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<tr>
<td>Impact of concession function of size of concession</td>
<td>Perceives gratitude for substantial discount = responsibility (commitment?)</td>
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<tr>
<td>L: Ok. Do you feel that there is any impact on the relationship when you're charging less than your market rate?</td>
<td>D: If it's the sort of &quot;less&quot; that I would normally charge, which might be five pounds, ten at the most, then probably not, but if it's considerably less than that, if it's free, (L: u-hum), or if it's considerably less, um, which it is occasionally, then I think it probably does have an impact.</td>
</tr>
<tr>
<td>D: If it's considerably less, um, which it is occasionally, then I think it probably does have an impact.</td>
<td>L: What sort of impact would you think it has?</td>
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<td>L: What sort of impact would you think it has?</td>
<td>D: Um. I would suspect people feel more grateful. I think if I've knocked a fiver off, people are unlikely to feel that grateful, um but I think if I've given it for free, or at a substantial discount, people feel more grateful, more responsible, I would think. I don't have firm evidence for that, I guess it's just guesswork.</td>
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<td>D: Um. I would suspect people feel more grateful. I think if I've knocked a fiver off, people are unlikely to feel that grateful, um but I think if I've given it for free, or at a substantial discount, people feel more grateful, more responsible, I would think. I don't have firm evidence for that, I guess it's just guesswork.</td>
<td>L: Just your, your feeling. Does it have any impact on the way you feel in the therapy room that you're doing it for nothing, or for less?</td>
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<td>L: Just your, your feeling. Does it have any impact on the way you feel in the therapy room that you're doing it for nothing, or for less?</td>
<td>If it's nothing, it does. If messed about Not particularly apologetic, I will get miffed</td>
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<tr>
<td>If it's free or if it's considerably less, then I think it probably does have an impact</td>
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<tr>
<td>Degree of concession impacts relationship</td>
<td></td>
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<tr>
<td>Suspects people more grateful. Grateful = responsible? D perceives gratitude for substantial discount translates to (commitment?)</td>
<td></td>
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<tr>
<td>Free work impacts if not valued.</td>
<td>D: If it’s nothing, it does, yes. If I get messed about by somebody who’s… I’m doing it for nothing and they’re not particularly apologetic, then I will get miffed. I saw someone a while back and, well, it was the second one of the ones I was telling you about – it was a, it was a – it was someone close to me’s work colleague’s husband and the story was he was really well off and really desperate for help and I agreed to give him six sessions for nothing, which I did, and it seemed to help and then, at the end, he said “well, I’d like to carry on” … , but during this time I’d found out, actually, there’s two household incomes and one of them is a good salary. Ok, a lot of people are struggling these days, but it wasn’t what I would class as “hard up”, so I’m slightly miffed with that and then he decided to carry on, but he could only come monthly, only afford it and I thought “fair enough” and then he cancelled the first of those sessions and I didn’t see him for a long time. Interestingly, he’s recently back and paying full rate now, once a month, but I though that was a bit, a bit – I was a bit miffed by that really. On the other hand, it seemed to help him – the 6 free sessions, so, you know , it’s fair enough – I can afford it, so… it’s all right.</td>
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<tr>
<td>Not being valued – miffed</td>
<td>Meant to say not well off? Desperate for help</td>
</tr>
<tr>
<td>Responding to need - desperate worthwhile as seemed to help</td>
<td>6 sessions Limit to free sessions</td>
</tr>
<tr>
<td>Sense of fairness</td>
<td>I found out 2 incomes</td>
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<tr>
<td>Provision of free therapy function of therapist’s ability to afford?</td>
<td>(objects to misrepresentation of wealth?)</td>
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<tr>
<td></td>
<td>Miffed because not really hard up? not treated fairly? Fair enough – fairness important looking for positives</td>
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<td></td>
<td>Miffed 3 x Miffed, but seemed to help him</td>
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<td></td>
<td>I can afford it so I will give it: (if I can afford it, I should give it?) it’s all right comforting himself?</td>
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<tr>
<td>Liking of client impacts approach to concession. No resentment at all</td>
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<td>L: OK, but there is some impact on the relationship?</td>
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<td>D: Yeah, I suppose whenever he’s coming, I’m reminded of that. I’m reminded of the fact, mmm, I think, I think you could have afforded to pay something. Um, his perception probably was that he couldn’t, but I think that of the few over the years I’ve given free sessions to, that’s probably the only one I’ve got any sort of resentment towards.</td>
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<tr>
<td>L: Right. Ok. I’ve given you this (DD: Yeah), but you haven’t really valued it.</td>
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<td>D: Yeah, I mean I…it does make a difference if I like a client. If I like a client that I’m doing free sessions for, there’s no resentment at all. If I, if I’m not that keen on them, then,</td>
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<thead>
<tr>
<th>I’m reminded that not fair?</th>
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<tr>
<td>I think “you could have afforded”</td>
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<tr>
<td>Acknowledges diff perception by client As if trying not to feel resentment towards client</td>
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<tr>
<td>Resentment (only this one because “cheated”)</td>
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<th>It does make a difference if I like the client</th>
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<tr>
<td>No resentment at all</td>
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<tr>
<td>if I think “actually you’ve got some money”</td>
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### Transcript of Interview with Sandra

L: Thank you. When it comes to your fees, how did you go about setting them – what were the considerations?

S: Well, I, um, did some market research. I looked around to see what the competition was doing, er, and I wanted really to pitch at something that I felt comfortable with, as well, um, and I took into account, you know, people that may have overheads and, um, so, gosh yeah, I’m going, I’m having to go back a long time now, but, um, well not that long. So, yeah, I think I had a sort of mentor at the time, from, via Business Link, (L: ok), and she helped me think about, you know, pitching it. She also was trying to get me to do packages as well, (L: right), which I never really got into, because I didn’t think it was me, um, not for counselling, anyway.

L: So what about it made you feel uncomfortable: the idea of packages?

### Exploratory comments

Comparing with elsewhere?

felt comfortable

taking into account client overheads? gosh, yeah

pitching

not me
S: Um, well for most things, it’s a great idea, but it’s just the counselling that I thought, um, it doesn’t seem, I just didn’t think it seemed ethical to say “well, you can have a…” I mean I haven’t ruled it out, but I just didn’t feel comfortable with the fact that, yeah “prepay for a bundle of 6” and it’s almost like saying, or I think it’s almost like saying “you’ll be really cured at the end of it”. (L: right), which I wouldn’t guarantee — of course, I wouldn’t guarantee anybody, but um, yeah, it was just, it just smacked of, um, that “buy one get one free” that I wasn’t happy with.

L: Yeah, so maybe distinguishing between the financial relationship in counselling and other kinds of commercial relationships, where you’re buying washing up liquid, or, (S: yeah), yeah.

S: Yeah, oh yeah, I was trying to think of other things — I mean, its almost like, um, a reward card thing, I mean, you go to the garden centre and, you know, you spend so much every time and then you get money off kind of thing, (L: mmm), yeah, I just didn’t want to go there, but I’ve not ruled it out, but I don’t think it’s for me.

L: It doesn’t feel comfortable. (S: No). Ok. Um, what’s your cancellation policy?
S: It’s um, (laughs), I don’t follow it through, unfortunately, but 24 hours. It’s written in the contract – 24 hours – er, I want notice given, um, 24 hour or more and if not, the full fee will be payable, and I’ve never, never followed it through.

L: What stops you?

S: It doesn’t happen very often, which is… I think it’s in the contract for the purpose of, um, letting them know that I’m serious about this, you know, and I am trying to run a business, and it’s very important to me that you turn up, or that you let me know that you’re not turning up and so it doesn’t really happen very often. I actually, um, don’t claim it, because I don’t think… well, there’s two…it happens in two different ways. Sometimes people don’t come and then never come again, in which case, I don’t think they’d pay and it’s a waste of my time chasing the payment and the other, er, where they are going to come back, I’ve never had the balls basically to, to ask them, but, I have to say, it happens very rarely.

L: Do you think it would take “balls”, as you describe it, to ask for, (S: yeah), the fact that you’ve been available, but you haven’t had that…

S: Yeah, yeah, crazy, I know, because, you know, logically, it’s …but I always think, I try and make sense of it…, um, where else, where else would that happen, um, you

| Laughs ironically. unfortunately |
| In the contract |
| Repeats “never”. Don’t adhere to cancellation policy |
| in the contract |
| I’m serious about this trying to run a business |
| important to me that you turn up |
| Sense that showing serious nature of counselling. I actually, um, don’t claim it because I don’t think…well, there’s two…it happens…. Hesitant? A bit uncomfortable admitting this? Don’t adhere to cancellation policy |
| waste of my time chasing the payment..the balls |
| Sense of some sort of judgement of self? Also sense that needs courage to ask for contracted payment? |
| Yeah, yeah, crazy Logically … try and make sense of it |
| Compares with elsewhere? |
know, you can basically not turn up and cancel anything, can’t you and not be charged for it, um, I was thinking maybe if you put a, say you put a deposit down on a holiday, or a hotel room, you know, most things, most things you can cancel and, um, I’ve not had… There’s a case outstanding at the moment where, um, most people give me enough notice, you know, it’s never really been a problem. The worst offenders are the, um, the free half hours that I offer, um, I think their bottle goes and they don’t turn up, which, um, … there’s nothing I can do about that.

L: Mainly people who aren’t existing clients, so you haven’t contracted with them yet. (S: Yeah). Ok.

S: Um, But yeah, um, for those, I mean one girl didn’t, um, turn up, and then she contacted me again and I said, “well you’ve foregone your… your right for, your right to a freebie – you’ve got to pay now” and that worked out ok. Um, so, yeah, I’ve lost my train of thought now, um, yeah, so I … Yeah, there’s one outstanding case - it’s a parent and a child and she… she cancelled with fifteen minutes’ notice. That I was quite annoyed about and, um, she vaguely said “I’ll book in again”, you know, whenever, so … and I’ve actually e-mailed her and said, um, I would be grateful if we could have a final session, because we also contract for that as well, with the child, because it’s really important. (L: Mmm). Um, and she has, um, she said “ok she’s on holiday next week and then I’ll arrange it after that” and that’s been a few weeks now, deposit down on a holiday or hotel room. Comparing with purely commercial (luxury?) ventures

worst offenders
I think their bottle goes Empathy for the “worst offenders”?
there’s nothing I can do about that. Bit apologetic here?

well, you’ve foregone your… right to a freebie – you’ve got to pay now and that worked out ok. Feared it would not?
I’ve lost my train of thought now, um, yeah, so I Reflective?

That I was quite annoyed about
actually (emailed her)
Reference to the contract
really important (emphasising client)
so that’s just hanging over me thinking “right what am I going to do?” – she definitely, she definitely needs, um, well I need, closure on the case in some way a) I’ve not seen the child and b) she gave me fifteen minutes’ notice of the cancellation, which I wasn’t happy about at all. In that case, I would chase the fee (L: right), um, but yeah, I’m still, that’s still open at the moment.

L: But it’s something that you find a little bit, (S: yes), you’re a bit ambivalent about, (S: definitely), claiming your rights under your contract (S: yeah, yeah), ok. Are there any..., ah, right, I haven’t asked you this...What is your concession policy, if any? Do you offer reduced rates to …?

S: I do, yes. Um, I offer a reduced, very reduced rate to students and OAP’s and to the unemployed. Actually it’s not that very reduced from the normal fee (laughs), um, …and then there’s a fee for, um, daytime clients and there’s a fee for evening clients and then there’s a different fee for businesses (L: right), um, which is usually the flat rate they’re offering, but if someone contacted me, I would quote a different rate for the work, (L: ok). Yeah.

L: Have you revised your fees at all?

S: Yes, I actually…I was actually looking at somebody’s website that had a different
rate for the evening and thought that was a brilliant idea, um, because, well, I’m busy in the evenings anyway, and the, um, the counselling appointments are precious and I thought “I do, I think I do deserve more for the evenings” and also it means that people are working, so they, (L: yeah), there’s more chance of them being able to afford, so, um, yeah, and so I put that, those, a bit more expensive, and, um, I was, for some reason, I talked this through with the mentor years ago, um, the rate for the child is like two pounds less than the rate for the adult, because I wanted it to be more accessible somehow, (L: mmm), but the faffing about that I have to do with the two pound change is just…so I just altered that now to be the same as the adults and also because it’s, you know, it’s as hard work, (L: yeah), if not harder, (L: yeah), than the adults. I don’t know why I ever thought that in the first place, but, yeah, you just learn as you go along.

L: But there’s almost something there about, it’s about the relationship with the client, rather than the amount of work, that you’re factoring into that thinking.

S: Mmmm, yeah, I think so, (L: mmm).

L: Are there any situations with clients that stand out for you in relation to payment?

S: Um, oooh. Well, a couple of weeks ago, one guy came – he’d been for his freebie
and then he came for his next one and, um, he, he handed me an envelope, um, as he came in... did he give me something else, I had a feeling he gave me two things, but that can't be right, anyway, so “that's for you” and then, you know, he has this notebook – he's the only client that's ever taken notes, but he has this notebook. Um, so we did the session, and I'd completely forgotten about the envelope and it didn’t really register what it might be, I know that sounds as though I’m really thick, so he was about to go when I, I said, you know, “what about the payment?” and he said “well, that’s what’s in the envelope” and I thought “oh my God” and I thought “how strange” that he wasn’t acknowledging it as a payment, it was more like an under-the-counter, (L: mmm), and I thought, you know “why, why put it in an envelope?” I thought there was something really quite strange about that. Um, and it’s just the various ways of ... some people like to hand it to you, some people just like leave it on the … but I know, I have forgotten to pay my supervisor, two different supervisors twice, and I’ve felt absolutely awful about that and I’ve seen their struggle in, um, one just couldn’t bear to mention it and let me go home and I realised when I got home, which I thought was a bit sad, um, and then the second one...

L: Sad how?

S: That she couldn’t bring herself to say, you know, “Sandra you’ve not paid me”, um, or, you know, so I thought she must have been really uncomfortable with that, he handed me an envelope

Sense that taking self back to that day

he has this notebook Repeats and explains “only client”

I’d completely forgotten the envelope and it didn’t really register what it might be. sounds as though I’m really thick.

This client unusual to her in more than one way

Oh my God I thought “how strange” that he wasn’t acknowledging as a payment. Under-the-counter sense that client sees fee transaction as “sleazy”? or session?

why put it in an envelope? really quite strange

Thoughtful

Comes back to self

I’ve felt absolutely awful I’ve seen their struggle couldn’t bear to mention it (empathising with her supervisor)

I thought was a bit sad

How do we know she struggled, she might also have forgotten? Or could we sense struggle at some level?
otherwise, you know, she’d have just said. I mean I’ve been working with her for years, (L: mmm), um, well probably not, probably eighteen months at that time. The, this other one that I’ve only seen a couple of times, she just sort of made a joke “are you going to pay me or what?” and I said “oh, God, I’m sorry,” but thankfully, I mean, I don’t have many, I don’t have many occasions …. Sometimes, they’re making their way out and I’ll have to say, you know, I certainly wouldn’t let anybody go without paying.

L: You wouldn’t?

S: No.

L: How do you feel when that happens – when they forget?

S: Awkward. (L: Mmm). It’s like … I mean I know they’re not trying to get away with anything, (L: yes), and it’s purely, you know, but it’s like, um, just like saying “that’ll be thirty pounds please” or whatever it is.

L: Do you think there’s anything about it being in your own home that makes a difference?
<table>
<thead>
<tr>
<th>S: Definitely. Yeah, yeah. Um, I mean I’d, well I’d, I’m different with non-paying clients, you know what I mean, sort of the EAP clients – there’s just, there’s just a freedom there, it’s ridiculous, the freedom about people coming that are being paid by somebody else. Um, I think it just changes a lot. Um, the outcome, yeah I was going to say, I feel that I need to give value for money and obviously that should be for all clients – they should get, they should get value for money in whatever way, um, but it’s just less of a, less of a problem, for the non-paying. Still get the same results, (L: mmm). Um…</th>
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<tr>
<td>L: So there’s something about the physical handing to you of money that puts some kind of constraint upon you, some kind of pressure to perform, (S: mmm, yeah), you feel (S: yeah)? Does it make a difference whether they give you cash or a cheque?</td>
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<td>S: Um, I think a cheque is better, yeah. Well, it’s more of a pain for me, but, yeah, it’s the cold hard cash, yeah, and sometimes, like if, um, if people haven’t had counselling before and they’re coming in and their like “how”, you know, “how do you pay?” It almost seems like a black market kind of thing, you know. Obviously, I haven’t got a credit card machine, um, it’s all a bit, er, what’s the word (giggle) – a bit back street.</td>
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<tr>
<td>Definitely, yeah, yeah I’m different with non-paying clients freedom it's ridiculous freedom about people coming that are being paid by somebody else. it just changes a lot…feel I need to give value for money obviously Repeats “they should get value for money” less of a problem, for the non-paying clients Value for money v. important and exerts it’s own kind of pressure, but stronger when cash changes hands? cheque is better (despite inconvenience) more of a pain for me But it’s the cold hard cash (implies “that causes the discomfort?) almost seems like a black market kind of thing it’s all a bit giggle back street Sense from words and giggle of something faintly risqué</td>
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### Appendix 15, Table 6

<table>
<thead>
<tr>
<th>Emergent Themes 1</th>
<th>Original Transcript (Sandra) (Pages 2-7, lines 24 - 224)</th>
<th>Exploratory comments 2</th>
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<tbody>
<tr>
<td>I need to feel right. Client needs.</td>
<td>L: Thank you. When it comes to your fees, how did you go about setting them – what were the considerations?</td>
<td>Comparing with elsewhere? felt comfortable Taking into account client overheads. gosh, yeah</td>
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<tr>
<td>I needs to feel right. Avoid overt</td>
<td>S: Well, I, um, did some market research. I looked around to see what the competition was doing, er, and I wanted really to pitch at something that I felt comfortable with, as well, um, and I took into account, you know, people that may have overheads and, um, so, gosh yeah, I'm going, I'm having to go back a long time now, but, um, well not that long. So, yeah, I think I had a sort of mentor at the time, from, via Business Link, (L: ok), and she helped me think about, you know, pitching it. She also was trying to get me to do packages as well, (L: right), which I never really got into, because I didn't think it was me, um, not for counselling, anyway.</td>
<td>pitching not me</td>
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**commercialism.**

**Ethical considerations**

I need to feel comfortable.

Avoid creating false impressions.

Avoid being over-commercial.

<table>
<thead>
<tr>
<th>L: So what about it made you feel uncomfortable: the idea of packages?</th>
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<tr>
<td>S: Um, well for most things, it's a great idea, but it's just the counselling that I thought, um, it doesn't seem, I just didn't think it seemed ethical to say “well, you can have a...”. I mean I haven't ruled it out, but I just didn't feel comfortable with the fact that, yeah “prepay for a bundle of 6” and it's almost like saying, or I think it's almost like saying “you'll be really cured at the end of it”. (L: right), which I wouldn't guarantee – of course, I wouldn't guarantee anybody, but um, yeah, it was just, it just smacked of, um, that “buy one get one free” that I wasn't happy with.</td>
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<td>discomfort</td>
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<td>Ironic owning tension</td>
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<td>I'm serious about this business.</td>
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Attend.

Tentative about right to contractual payment I don’t think they’d pay. Asking for late cancellation money takes balls.

Crazy, I know logically, yet don’t feel justified to claim entitlement. Compare commercial environments.

<table>
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<th>Right.</th>
<th>I don’t think they’d pay? waste of my time chasing the payment Hesitant? A bit uncomfortable admitting this?</th>
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<td>Deposit down on a holiday or hotel room</td>
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<td>Comparing with purely commercial (luxury?) ventures worst offenders</td>
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<td>Empathy for the “worst offenders”?</td>
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<tr>
<td>Topic</td>
<td>Description</td>
<td>Additional Notes</td>
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<td>Relieved sticking to rules worked out ok for her.</td>
<td>Think their bottle goes and they don’t turn up, which, um, … there’s nothing I can do about that.</td>
<td>1. I think their bottle goes Apologetic? there’s nothing I can do about that</td>
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<tr>
<td>Anger when pushed too far.</td>
<td>Acted upon righteous anger.</td>
<td>2. Your right, your right to a freebie – you’ve got to pay now … that worked out ok.</td>
</tr>
<tr>
<td>Contract applied for client benefit, but not own?</td>
<td>Interests of client.</td>
<td>Feared it would not? I’ve lost my train of thought now, um, yeah, so I Reflective?</td>
</tr>
<tr>
<td>More concerned interests</td>
<td>More concerned interests</td>
<td>That I was quite annoyed about actually (emailed her)</td>
</tr>
<tr>
<td>L: Mainly people who aren’t existing clients, so you haven’t contracted with them yet. (S: Yeah). Ok.</td>
<td></td>
<td>Reference to the contract really important (emphasising client)</td>
</tr>
<tr>
<td>S: Um, But yeah, um, for those, I mean one girl didn’t, um, turn up, and then she contacted me again and I said, “well you’ve foregone your… your right for, your right to a freebie – you’ve got to pay now” and that worked out ok. Um, so, yeah, I’ve lost my train of thought now, um, yeah, so I … Yeah, there’s one outstanding case - it’s a parent and a child and she… she cancelled with fifteen minutes’ notice. That I was quite annoyed about and, um, she vaguely said “I’ll book in again”, you know, whenever, so … and I’ve actually e-mailed her and said, um, I would be grateful if we could have a final session, because we also contract for that as well, with the child, because it’s really important. (L: Mmm). Um, and she has, um, she said “ok she’s on holiday next week and then I’ll arrange it after that” and that’s been a few weeks now, so that’s just hanging over me thinking “right what am I going to do?” – she definitely, she definitely needs</td>
<td></td>
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<tr>
<td>Client than her fee.</td>
<td>Needs, um, well I need, closure on the case in some way a) I've not seen the child and b) she gave me fifteen minutes' notice of the cancellation, which I wasn't happy about at all. In that case, I would chase the fee (L: right), um, but yeah, I'm still, that's still open at the moment.</td>
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<tr>
<td>Justifies the cancellation fee. Fee validity according to circumstances.</td>
<td>L: But it's something that you find a little bit, (S: yes), you're a bit ambivalent about, (S: definitely), claiming your rights under your contract (S: yeah, yeah), ok. Are there any..., ah, right, I haven't asked you this...What is your concession policy, if any? Do you offer reduced rates to...?</td>
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<tr>
<td>Social responsibility</td>
<td>S: I do, yes. Um, I offer a reduced, <strong>very</strong> reduced rate to students and OAP's and to the unemployed. Actually it's not that very reduced from the normal fee (laughs), um, ...and then there's a fee for, um, daytime clients and there's a fee for evening clients and then there's a different fee for businesses (L: right), um, which is usually the flat rate they're offering, but if someone contacted me, I would quote a different rate for the work, (L: ok). Yeah.</td>
<td></td>
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<tr>
<td>Irony sense</td>
<td>Struggling to identify the owner of the need, and still a sense of priority given to client?</td>
<td></td>
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<tr>
<td>undercharges?</td>
<td>I wasn't happy about at all</td>
<td></td>
</tr>
<tr>
<td>Separates self from fee - “there’s a fee”</td>
<td>In that case, I would chase the fee</td>
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</tbody>
</table>

**Struggling to identify the owner of the need, and still a sense of priority given to client?**

I wasn’t happy about at all  
In that case, I would chase the fee
<table>
<thead>
<tr>
<th>&quot;Precious&quot; appointments</th>
<th>L: Have you revised your fees at all?</th>
</tr>
</thead>
<tbody>
<tr>
<td>I deserve more for evenings</td>
<td>S: Yes, I actually...I was actually looking at somebody’s website that had a different rate for the evening and thought that was a brilliant idea, um, because, well, I’m busy in the evenings anyway, and the, um, the counselling appointments are precious and I thought “I do, I think I do deserve more for the evenings” and also it means that people are working, so they, (L: yeah), there’s more chance of them being able to afford, so, um, yeah, and so I put that, those, a bit more expensive, and, um, I was, for some reason, I talked this through with the mentor years ago, um, the rate for the child is like two pounds less than the rate for the adult, because I wanted it to be more accessible somehow, (L: mmm), but the faffing about that I have to do with the two pound change is just...so I just altered that now to be the same as the adults and also because it’s, you know, it’s as hard work, (L: yeah), if not harder, (L: yeah), than the adults. I don’t know why I ever thought that in the first place, but, yeah, you just learn as you go along.</td>
</tr>
<tr>
<td>Client perspective/social conscience</td>
<td>counselling appointments are precious I do deserve more (justifying self as deserving) people are working (sense of responsibility for clients’ ability to afford) for some reason self questioning? the rate for the child is like £2 less wanted it to be more accessible Faffing Idealism – importance accessibility to children. Conflict between idealism &amp; practicality? its as hard work, if not harder Justifying realigning the price? I don’t know why I ever thought that in the first place reflective here you just learn as you go along (not I)</td>
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<tr>
<td>Idealism vs. practicality – faffing.</td>
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<tr>
<td>Philosophical stance of accessibility for children – cheaper albeit harder work?</td>
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<tr>
<td>Importance of accuracy</td>
<td>relationship with the client, rather than the amount of work, that you’re factoring into that thinking.</td>
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<td>------------------------</td>
<td>------------------------------------------------------------------------------------------------------</td>
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<td></td>
<td>S: Mmmm, yeah, I think so, (L: mmm).</td>
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<td></td>
<td>L: Are there any situations with clients that stand out for you in relation to payment?</td>
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<td></td>
<td>S: Um, oooh. Well, a couple of weeks ago, one guy came – he’d been for his freebie and then he came for his next one and, um, he, he handed me an envelope, um, as he came in… did he give me something else, I had a feeling he gave me two things, but that can’t be right, anyway, so “that’s for you” and then, you know, he has this notebook – he’s the only client that’s ever taken notes, but he has this notebook. Um, so we did the session, and I’d completely forgotten about the envelope and it didn’t really register what it might be, I know that sounds as though I’m really thick, so he was about to go when I, I said, you know, “what about the payment?” and he said “well, that’s what’s in the envelope” and I thought “oh my God” and I thought “how strange” that he wasn’t acknowledging it as a payment, it was more like an</td>
</tr>
<tr>
<td>Prepared to ask for fee</td>
<td></td>
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<tr>
<td>Shocked</td>
<td></td>
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<tr>
<td>Impact client behaviour</td>
<td></td>
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<tr>
<td>Felt like improper transaction</td>
<td>under-the-counter, (L: mmm), and I thought, you know “why, why put it in an envelope?” I thought there was something really quite strange about that. Um, and it's just the various ways of ... some people like to hand it to you, some people just like leave it on the ... but I know, I have forgotten to pay my supervisor, two different supervisors twice, and I've felt absolutely awful about that and I've seen their struggle in, um, one just couldn't bear to mention it and let me go home and I realised when I got home, which I thought was a bit sad, um, and then the second one...</td>
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<tr>
<td>Strange</td>
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<tr>
<td>Long/good relationship means money can be addressed.</td>
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<tr>
<td>Importance of accuracy Discomfort reminding to Under-the-counter client sees fee transaction, or session as “sleazy”? why put it in an envelope? really quite strange Thoughtful Comes back to self I've felt absolutely awful I've seen their struggle couldn't bear to mention it (empathising with her supervisor) I thought was a bit sad</td>
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<tr>
<td>Discomfort reminding to</td>
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<td></td>
<td>How do we know she struggled, she might also have forgotten? Or could we sense struggle at some level? I've been working with her for years Implies relationship should have been strong enough to address fee issue? probably 18 months importance of accuracy? thankfully</td>
</tr>
<tr>
<td>Awkward. Concerned re implication for client being asked for fee.</td>
<td>pay I'll HAVE to say Commercial self overcomes ambivalence</td>
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<td>they're making their way out and I'll have to say, you know, I certainly wouldn't let anybody go without paying.</td>
<td>I certainly wouldn't let anybody go without paying despite reluctance, ultimately will address payment issue I'll HAVE to say</td>
</tr>
<tr>
<td>L: You wouldn't?</td>
<td>Awkward Seems concerned that asking for money might imply client trying to avoid payment that'll be thirty pounds please Sense that too commercial a transaction?</td>
</tr>
<tr>
<td>S: No.</td>
<td></td>
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<tr>
<td>L: How do you feel when that happens – when they forget?</td>
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<tr>
<td>S: Awkward. (L: Mmm). It’s like … I mean I know they’re not trying to get away with anything, (L: yes), and it’s purely, you know, but it’s like, um, just like saying “that’ll be thirty pounds please” or whatever it is.</td>
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<tr>
<td>L: Do you think there’s anything about it being in your own home that makes a difference?</td>
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<tr>
<td>S: Definitely. Yeah, yeah. Um, I mean I’d, well I’d, I’m different with non-paying clients, you know what I mean, sort of the EAP clients – there’s just, there’s just a freedom there, it’s ridiculous, the freedom about people coming that are being paid by</td>
<td></td>
</tr>
<tr>
<td>Feel I NEED to give value for money?</td>
<td>somebody else. Um, I think it just changes a lot. Um, the outcome, yeah I was going to say, I feel that I need to give value for money and obviously that should be for all clients – they should get, they should get value for money in whatever way, um, but it’s just less of a, less of a problem, for the non-paying. Still get the same results, (L: mmm). Um…</td>
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<tr>
<td>Value for money exerts own kind of pressure, but stronger when cash changes hands?</td>
<td>L: So there’s something about the physical handing to you of money that puts some kind of constraint upon you, some kind of pressure to perform, (S: mmm, yeah), you feel (S: yeah)? Does it make a difference whether they give you cash or a cheque?</td>
</tr>
<tr>
<td>Describes cash as cold, hard</td>
<td>S: Um, I think a cheque is better, yeah. Well, it’s more of a pain for me, but, yeah, it’s the cold hard cash, yeah, and sometimes, like if, um, if people haven’t had counselling before and they’re coming in and their like “how”, you know, “how do you pay?” It almost seems like a black market kind of thing, you know. Obviously, I haven’t got a credit card machine, um, it’s all a bit, er, what’s the word (giggle) – a bit back street.</td>
</tr>
<tr>
<td>Fears image of inappropriate activity</td>
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</tr>
<tr>
<td>“almost seems like a black market kind of thing” A bit back street: faintly risqué?</td>
<td>cheque is better despite more of a pain for me. But it’s the cold hard cash (implies “that causes the discomfort?”) Value for money exerts own kind of pressure, but stronger when cash changes hands? almost seems like a black market kind of thing. It’s all a bit giggle back street faintly risqué?</td>
</tr>
</tbody>
</table>
Example Donald Cluster Extracted from emergent themes

### Being Valued

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.122</td>
<td>Impact of concession function of size of concession</td>
</tr>
<tr>
<td>5.136</td>
<td>Free work impacts if not valued. Not being valued – miffed.</td>
</tr>
<tr>
<td>6.183</td>
<td>Takes non-payment personally?</td>
</tr>
<tr>
<td>6.190</td>
<td>Payment represents expression of value?</td>
</tr>
<tr>
<td>11.343</td>
<td>Scornfully</td>
</tr>
<tr>
<td>11.346</td>
<td>Physical Nature of payment as judgement of session?</td>
</tr>
<tr>
<td>14.448</td>
<td>D not being valued? Payment = valuing?</td>
</tr>
<tr>
<td>17.567</td>
<td>Self esteem linked to being paid</td>
</tr>
<tr>
<td>17.568</td>
<td>Being valued</td>
</tr>
<tr>
<td></td>
<td>Client valuing=client benefitting</td>
</tr>
<tr>
<td>20.658</td>
<td>D’s need to be valued?</td>
</tr>
<tr>
<td>22.722/4</td>
<td>Indignation – not properly valued?</td>
</tr>
</tbody>
</table>
Example Sandra Cluster Extracted from emergent themes

**Tension between commercial and philosophical**

3.79-81 Ironic owning tension between commercial & philosophical self.

3.88-92 Tentative about right to contractual payment – circs.
3.88-92 I don’t think they’d pay.
3.88-92 Asking for late cancellation money takes balls.
3.88-92 Crazy, I know logically, yet don’t feel justified to claim entitlement.
3.88-92 Compares commercial environments.

4.123-4 Justifies the cancellation fee. Fee validity according to circumstances.

5.149-52 Idealism vs. practicality – faffing.
5.149-52 Philosophical stance of accessibility for children – cheaper albeit harder work?

5.169 Prepared to ask for fee.

6.190 Discomfort reminding to pay.
6.190 I’ll HAVE to say.
6.190 Commercial self overcomes ambivalence.

16.535-8 Responsibility to profession.
16.535-8 Client expectations free service.
16.535-8 Philosophy of free provision vs. worth and need to be paid.
Master Lists of Clusters, colour coded by participant
Appendix 19

Superordinate and Subordinate Themes

Core of the therapist

S: My relationship with money
S: Valuing self/being valued
S: Ethical self – need to feel right
S: Tension between commercial and philosophical
S: Predominance of client needs and social philosophy/conscience
S: Discomfort commercialism
S: Value for money
D: Value for money
D: Relationship impacts fee
D: Own systems, values and needs
D: Being valued
D: Non-commercial self
L: Client needs Paramount
L: Own relationship money and Social Construction
L: Therapist’s Need to Give
L: Commercial Self
L: Relationship Impacts Fees
L: Value for Money
K: Influence of the Self of the Therapist
K: Commercial Self of the Therapist
K: Non-Commercial Self of the Therapist
H: Commercial self of therapist
H: Payment Influences approach to work
H: Needs of therapist
H: Value for Money
A: Commercial vs. Non-Commercial Self
A: Valuing Self and Providing Value

S: Sandra, D: Donald, L: Laura, K: Kylie, H: Henry, A: Angus
Sub-ordinate themes

**Balancing the therapeutic self & the commercial self**
- L: Commercial Self
- S: Discomfort commercialism
- K: Commercial Self of the Therapist
- K: Non-Commercial Self of the Therapist
- A: Commercial vs. Non-Commercial Self
- H: Commercial self of therapist
- S: Tension between commercial and philosophical
- D: Non-commercial self
- L: Relationship Impacts Fees
- D: Relationship impacts fee

**Being valued**
- S: Valuing self/being valued
- D: Being valued
- H: Needs of therapist and therapist community
- A: Valuing Self and Providing Value

**Providing value for money**
- S: Value for money
- D: Value for money
- H: Value for Money and client expectations
- A: Valuing Self and Providing Value
- L: Value for Money

**The influence of the therapist’s world**
- S: My relationship with money
- S: Ethical self – need to feel right
- D: Own systems, values and needs
- L: Client needs Paramount
- L: Own relationship money and Social Construction
- L: Therapist's Need to Give
- K: Influence of the Self of the Therapist
- S: Predominance of client needs and social philosophy/conscience
- H: Payment Influences approach to work
Confronting payment

S: Physical Transaction
S: 3rd party payer impact
D: Prostitution theme
D: The actual transaction
D: 3rd party payer impact
L: Difficulty asking for Money
K: Asking for money
H: Power of the Payer
H: Discomfort asking for payment
A: Therapist and Physical Transaction
A: Issues around Ambivalence asking for money

Sub-ordinate themes

Asking for payment and missed sessions
A: Issues around Ambivalence asking for money
H: Discomfort asking for payment
L: Difficulty asking for Money
K: Asking for money

The physical transaction
D: The actual transaction
A: Therapist and Physical Transaction
S: Physical Transaction

Who pays the bill
D: 3rd party payer impact
H: Power of the Payer
S: 3rd party payer impact

S: Sandra, D: Donald, L: Laura, K: Kylie, H: Henry, A: Angus