ABSTRACT
This article presents the concepts of the reflective practitioner, evidence-based practice, and different ways of doing qualitative research. By asking questions beginning with “what” and “how” qualitative research seeks the specific quality typical of a phenomenon. Today, one of the most used methods in qualitative research is Grounded Theory. A pattern of meaning-carrying units becomes visible among the observations or answers to open questions, and are then coded into categories. This coding process is described; it is called constant comparison and is pursued until a saturation of a theme occurs, which crystalizes the central meaning of a phenomenon. Useful standards of the themes of validity and reliability in qualitative research are presented.

Keywords: qualitative research, Grounded Theory, constant comparison, saturation

Background
Presenting research in body psychotherapy/somatic psychology¹ is not only a way of demonstrating the results of our body psychotherapy methods and outcome studies, but also a way of communicating the impact of our work to other therapeutic communities, to the medical profession, government departments, and health insurance companies. The results of the survey on Body Psychotherapy Practice and Research (Jokić, Röhricht, Young, 2019) presented in this IBPJ issue clearly show that body psychotherapists have a high level of interest in research, and have a variety of research experience. Nonetheless, the authors of the survey express the necessity of developing and deepening the research culture within the body psychotherapy community, as well as providing resources that increase the empirical support for our profession. This will further the acknowledgment of body psychotherapy as a leading modality and will address the issue of relational embodiment in clinical and other contexts. This text is a short report of the 2018 EABP Berlin Congress, where the author gave a presentation on qualitative research.

Two Ways of Generating New Knowledge
Usually, research methods generating new knowledge are divided into two branches: deductive and inductive (Eneroth, 1984). A discourse on the role of rationality and intuition in scientific work finds its place in the distinction between a context of

¹ The term somatic psychology is mainly used in the United States. For the simplicity of the following text only the term body psychotherapy will be used.
Deduction means that we start with a general theory from which we hypothesize an individual situation, and then test this hypothesis. Test groups and control groups must be representative, and a random sample of the cohort is tested in an experimental design called the randomized controlled trials (RCTs). The result proves the hypothesis right or wrong, applicable or not applicable for treatment. It should be possible to repeat the result.

• Induction means that we start from the individual and go to the general. Through observation from practice, theories are generated, which could be valid for a greater population. This results in the discovery of patterns and signs that could prove probability for interpretation and suggest useful methods for treatments. It should be possible to repeat the method, which must be described in detail.

These two ways of doing research both contribute to the understanding of clinical practice. This presentation concentrates on a short introduction of qualitative research, and a more detailed presentation of Grounded Theory.

Qualitative Research
Qualitative research seeks the specific quality that is typical of a phenomenon (Eneroth, 1984; Malterud, 2014; Denscombe, 2017). It answers questions beginning with “what” and “how” rather than “what percentage,” “how large is the population,” and “what is true or false, significant or not.”

O’Hara (2012) claims that the field of psychotherapy needs a new epistemology that incorporates both research-based and practical-based knowledge. Eneroth (1984) argues in his book with the wonderful title How Do You Measure “Beautiful”? that hidden within qualitative research methods is a new worldview, different from the worldview that looks at numbers and quantitative data.

By formulating our practical clinical work with clients, we take a first step toward becoming reflective practitioners, which starts a process of systemizing our observations in the framework of research. Schön (1987) defined this reflection in practice as knowing-and-reflecting-in-action. The practitioner utilizes a repertoire of images, understanding, and actions to reframe a troubling situation so that problem-solving actions are generated. This leads to developmental insights; experience alone does not necessarily lead to learning (Schön, 1987). This reflective practitioner position could start a professionalization of body psychotherapy, which would support the development of a research culture in our field. In medicine the term evidence-based medicine was coined in the mid of 1990s (Sacket, 1996) and presented systematic reviews of the effects of health care. Sacket defines evidence-based medicine as “integrating individual clinical expertise with the best available external clinical evidence from systematic research”. Evidence-based medicine is based on deductive as well as inductive research.

In the field of psychology, clinical reflective work led to the creation of a document called Evidence-Based Practice (2005) by the American Psychological Association (APA). Evidence-based practice means the integration of the best clinical expertise and available research within the context of the characteristics for serious mental illness. The APA Council of Representatives adopted a policy statement on Evidence-Based Practice in Psychology to assist psychologists in identifying appropriate interventions for their settings and those they serve. This document includes advanced clinical training initiatives, and contact information for experts on specific interventions.
Qualitative research:
• Is often used when new areas are to be researched;
• Is about experience and ideas;
• Is asking questions beginning with “how” and “what”; 
• Can generate hypotheses or deepen a subject;
• Is used to understand a phenomenon and its interconnectedness;
• The same data can be interpreted towards more than one theoretical framework;
• The reader must be able to follow the well-described process or method;
• It should be possible to repeat the method although the result can vary;
• A pre-understanding of the subject by the author must be reported;
• An expression often used by the author is: she/he is like a “participating observer”.

Methods of Qualitative Research
Methods of qualitative research often used are:
• Questionnaires, interviews, observations, case studies, videos (empirical evidence);
• A-B-A-designs: a single subject design using defined tests at the beginning and end of a session to evaluate the effect of a single treatment;
• Naturalistic studies: observation of the behavior and self-reflection of a real therapist-client dyad from both the therapist and client perspective using a questionnaire;
• Grounded Theory.

Grounded Theory
Sociologists Glaser and Strauss were the founders of Grounded Theory (Glaser and Strauss, 1967, 2005, 2006). Although Grounded Theory was first applied in sociology, it is today the most used qualitative method in a variety of areas such as psychology, medical sociology, pedagogies, caring sciences, and economics (Sbaraini et al., 2011; Corbin & Strauss, 2015).

Glaser and Strauss wrote Awareness of Dying and The Discovery of Grounded Theory: Strategies for Qualitative Research, which in the 1960s were the first examples of theories generated out of observations and interviews in the practical field, instead of theories tested from hypotheses. Glaser and Strauss believed that they had discovered a theory because of the new method of observing meaning-carrying units until a pattern became visible.

Over a six-year period, and in six different hospitals, Glass and Strauss studied the phenomena of the interrelationship between the hospital staff and the patients who were in the terminal stage of their lives. This had never been done before. They coded the huge number of answers into categories, discovered patterns in the answers, and came up with a new approach to managing the dying process. This led to the staff becoming more aware of how to respond and talk to patients in different stages of their dying process. As a result, patients needed fewer drugs, and their close relatives or friends could be called to come at the appropriate time.

The following quote from their book gives an indication of the mentality in the 1960s:

Once upon a time a patient died and went to heaven but was not certain where he was. Puzzled, he asked a nurse who was standing nearby, “Nurse, am I dead?” The answer she gave him was, “Have you asked your doctor?”

This illustrates how novel and astonishing it was to questions the caregiving staff and not only the doctors. Research revealed that the emotional-social aspects of the caregiver/patient relationship were more efficient than the medical treatment procedures.
We, as body psychotherapists, are just at the beginning of exploring and coding our therapeutic process. Grounded Theory, by using induction before hypothesis, is a useful qualitative method. We are also at the beginning of communicating the value of our work to health authorities and other therapeutic communities.

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The following is an example of the process of Grounded Theory used the field of body psychotherapy that forms the basis for formulating a theory. An initial question might be:

*Are there certain methods in body psychotherapy that you often use at the beginning of a therapy?*

Body psychotherapists might suggest that a client work on one of the following:

- **Grounding, feeling their feet on the floor;**
- **Making contact with their breathing;**
- **Observing their breathing;**
- **Standing and swaying backwards and forwards;**
- **Therapist putting his/her hands on the client’s chest and asking them to sense the breathing movements while the therapist talks.**

The answers to such an open question are coded and categorized in a *constant comparison, until saturation*. This means that no more categories are being discovered which contribute to the understanding of the field being studied. The aim in Grounded Theory is to crystalize the central meaning of a phenomena, not to find every single description of qualities (Eneroth, 1984).

**Kinds of Coding**

- **Open coding.** Directly describing in words that mirror the content the *feeling their feet on the floor* and giving it a code name.
- **Axial coding.** Trying to find *key categories* through association between different open codes, such as *grounding*.
- **Selective coding or ideal types.** Focusing on the identified key categories and using them to formulate *a concept or core category*. For example: *Treatment methods in the beginning of body psychotherapy are suggested to be grounding and encourage contact to one’s own breathing.*

Grounded Theory has one declared goal: to explain what “a truth” is out of the empirical data collected – without speculation or preconceived attitudes. Literature studies are also integrated into the collection of data. Articles and books on grounding and breathing, which support the open question answers, amplify the example above. Through short formulations, the concepts lead to focusing on how the key categories are related to each other. In our example we could state that *without a safe grounding experience, it can be difficult and/or scary to breathe more deeply.*
Summary of the Steps in Grounded Theory

- **Sampling.** Who is participating? How are you finding them? Describing the sample in detail;
- **Data collection.** Interviews, open written questions including collecting literature;
- **Data analysis.** Constant comparison of the answers, coding, and categorizing them until saturation has been reached, which gives a theoretical sampling process;
- **Interpretation.** Building a concept, a hypothesis, or a theory based on the theoretical sampling, including literature.

Validity and Reliability in Grounded Theory

As in quantitative research, the theme of validity and reliability is of great importance. Here are some useful standards:

- **Sample size.** The key to making Grounded Theory a trustworthy method is to generate enough data, so that the illuminated patterns, categories, properties, concepts, and dimensions of the given phenomena can emerge. It is not so much about the number of people participating, but about the number of ideas linked to the theme being investigated (Thomson, 2011).
- **Triangulation.** Data is compared with two “other legs,” like in sailing, when you validate your own position by knowing the distance between two other points on the map. Here you validate with other groups in other countries, and/or with the index list at the end of books you have read. Are your key categories and core category listed there? (Malterud, 1998),
- **Pragmatism.** The acceptance of “a truth” depends on how useful the findings are in the practical field. For example, can grounding and breathing be used as body psychotherapy exercises that invite new experiences? (Starrin et L., 1997; Corbin & Strauss, 2015),
- **Correspondence.** The truthfulness of a concept relates to its correspondence to reality. In our case, it is linked to the initial question, and to our field of body psychotherapy (Starrin et al., 1997; Corbin & Strauss, 2015).
- **Coherence.** The truthfulness of a concept consists of the correspondence to other theoretical concepts of a similar character (Starrin et al., 1997; Corbin & Strauss, 2015).

Computer Programs

There are software programs that expand the possibilities of Grounded Theory by processing more information faster. The software detects the common open codes and puts them into axial coding (NVivo, CAQDAS: Computer Assisted/ Aided Qualitative Data Analysis).

Conclusion

Body psychotherapists are only beginning to explore and code their therapeutic process. We are also slowly learning how to communicate what it is we actually do to health authorities, and other therapeutic communities. To support this process, it is important to encourage practitioners to undertake qualitative research using induction, as this can easily be done in private practice where the majority of our members work.
Christina Bader Johansson, MSc, is an accredited EABP body psychotherapist and a Swiss Chartered Psychotherapist (Eidg. Anerkannte Psychotherapeutin), as well as a chartered physiotherapist and teacher. Originally from Sweden, she worked in a private practice near Zürich, before moving back to Sweden in 2017. She was the President of the Swiss National Association of the EABP (CH-EABP) for 6 years, and worked in collaboration with others in Kosovo, teaching body psychotherapy to psychologists. She has written 4 books on the theme of body psychotherapy and integrated physiotherapy (in Swedish and German). Currently she is offering supervision in body psychotherapy via Skype.

Email: cbaderjohansson@gmail.com

REFERENCES