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A Phenomenological Study of Felt Sense Among Beginning Counselors

Perry Peace, Sondra Smith-Adcock

This qualitative study explored the lived experiences of felt sense among six graduate counseling students. Each participant engaged in two semi-structured interviews and completed a journal of felt sense experiences. A hermeneutic phenomenological method was used to analyze interview transcripts and journals. Findings, as well as implications for counselor education, supervision, and counseling practice, are discussed.

Keywords: felt sense, counselor preparation, counselor development, phenomenology

Felt sense, how counselors experience inner thoughts, feelings, and bodily sensations and use the information during counseling sessions, has been the subject of some debate among counselor educators (Coll, Dumas, Trotter, & Freeman, 2013; Fauth & Williams, 2005; Howard, Inman, & Altman, 2006; McTighe, 2011). Prominent theories of counselor development often view beginning counselors as having limited self-awareness and high anxiety; they are expected to arrive at complex thinking and self-awareness after a period of dependency on supervisors and focus on external factors (Loganbill, Hardy, & Delworth, 1982; Skovholt & Ronnestad, 1992; Stoltenberg, 1981). Developmental theorists suggest that felt information in the beginning counselor is often experienced as potentially distracting and overwhelming (Fauth & Williams, 2005; Williams, 2008). In contrast, other authors contend even the novice counselor's awareness of felt sense can provide valuable information about the therapeutic relationship (Howard et al., 2006), and may normalize the uncomfortableness associated with felt sense (Tannen, Daniels, & Koro-Ljungberg, 2017). This viewpoint implies that even early in training, counselors bring an innate wealth of knowledge and experience that are part of a holistic approach to counselor preparation (Coll et al., 2013; Gibbons, Cochran, Spurgeon, & Diambra, 2013). While developmental perspectives hold steadfast in counselor

education that portray students as externally rather than internally focused, few studies have closely explored how counselors-in-preparation understand their inner experiences and use felt information (Peace & Smith-Adcock, 2018; Tannen et al., 2017).

Felt Sense and Counselor Development

Eugene Gendlin (1964, 1981) proposed that the human body is the primary way in which people create meaning out of experience, or "a body-sense of meaning" (1981, p. 11). Gendlin referred to information directly and immediately felt by the individual but not necessarily known in a cognitive sense as a "felt datum" (Gendlin, 1962, p. 243). From this perspective, understanding how the body is informed by previous life experiences and cultural worldview contributes to how humans make meaning of felt experiences. Gendlin's (1969) focusing-oriented therapy is based on the belief that the body acts as a container and holds a deeper wisdom than cognition or emotions. Hendricks (2007) describes *focusing* as recognizing when words, images, or gestures come from a felt sense, and accessing their experience of the world not merely as an interpretation of the mind, but also through our bodies. It follows that if counselors can be taught to engage their minds when working with clients, they also can be taught to engage in

bodily awareness and access their own internal resources. Prior studies have explored *focusing* with a range of presenting problems as well as diverse client populations (Greenberg & Watson, 1998; Hendricks, 2001). However, these works have emphasized *focusing* as an orientation to counseling and as a set of therapeutic techniques (Gendlin, 1996).

Counselor development literature uses constructs related to felt sense, including therapeutic presence (Geller & Greenburg, 2002, 2012; Tannen et al., 2017), congruence (Omylinskya-Thurston & James, 2011), embodied self-awareness (Fogel, 2009), and mindfulness (Christopher et al., 2011; Greason & Cashwell, 2009). Similar processes across these models indicate a holism in the way counselors use their own thoughts, emotions, and bodily sensations to intentionally guide their work with clients. Common processes include counselors' openness to experience, an awareness of somatic or bodily sensations when they arise, acceptance of these experiences without judgment, and intentional sharing of the information in session as appropriate (Peace & Smith-Adcock, 2018). Of studies related to counselors' felt sense, a majority have focused on the inner experiences of advanced, or expert, counselors (Geller & Greenburg, 2002; Omylinskya-Thurston & James, 2011), with only a few studies exploring the inner experiences of counselors-in-preparation (Howard et al., 2006; Tannen et al., 2017; Williams, Polster, Grizzard, Rockenbaugh, & Judge, 2003). In one qualitative study of counselors-in-training, Howard et al. (2006), concluded that some students may have greater insight into their own reactions to clients than is acknowledged in traditional counselor development models. A recent qualitative study of beginning counselors focused on mindfulness as a way to help beginning counselors stay therapeutically present and grounded in their bodies (Tannen et al., 2017). In the current study, we explore felt sense as a central phenomenon underlying these developmental experiences. To date, we found no studies focused specifically on how counselors-in-preparation perceive the development of felt sense, and use it in their clinical practice.

In the current study, we used hermeneutic phenomenology to explore the lived experiences of felt sense in counselors-in-training. Additionally, we explored how they make meaning of and use felt information in counseling sessions. For the purposes of

this study, felt sense is defined generally as information gained from inner awareness on the part of the counselor that may be related to the person of the counselor, the client, or the therapeutic encounter. The following research questions guided this inquiry: What are the lived experiences of felt sense among counselors in the beginning phases of their development? Specifically, we asked: How is felt sense experienced? How is information gained from felt sense used?

Method

Due to a lack of knowledge regarding how felt sense is experienced by counselors-in-training, interpretive phenomenology introduced by Heidegger (1962) was chosen to "understand unique individuals and their meanings and interactions with others and the environment" (Lopez & Willis, 2004, p. 726). Heidegger's hermeneutic phenomenology views the researcher and participant as products of a human interaction wherein each has an effect on the research process and knowledge is cocreated, deepening our understanding of human phenomenon rather than seeking to explain it (Lopez & Willis, 2004). Consistent with Gendlin's definition of felt sense, we also framed the current study in humanistic philosophy. Gendlin's theory of felt sense as embodied knowing parallels the humanistic principle of viewing the person as a holistic being and a belief in trusting that person's inner awareness as a resource. Humanistic counseling is a reference for interpreting how felt sense is experienced and used by counselors-in-preparation within the therapeutic encounter. "Humanistic counseling is based on fostering the development of the whole person and rests on the understanding that the capacity for personal growth and change comes from within the human being" (Coll et al., 2013, p. 54).

Participants and Sampling

Institutional Review Board (IRB) approval was obtained prior to recruitment efforts for the study. Study recruitment included an IRB-approved recruitment message that was emailed, posted on bulletin boards, and handed out in person to a group supervision class the researchers visited to talk about the

study. Students enrolled in counselor education and counseling psychology degree programs were invited for participation in the study. We used a purposeful sampling approach to invite counseling students to participate who were currently working with clients and had some experience with the phenomenon of felt sense (Flynn & Korcuska, 2018; Patton, 2014). During a brief screening interview, researchers discussed the phenomenon of felt sense generally (e.g., an inner experience felt when you are with your clients), but no formal definition of felt sense was provided. The final sample consisted of six women who ranged in age from 21 to 27 years old. For phenomenological studies, a sample size of six is considered adequate if there is rich and detailed data related to the phenomenon (van Manen, 1990). Five of the six participants identified as Caucasian and one participant identified as Hispanic-Latino. Participants' clinical experience ranged from 4 months to 3 years, with an average of 12 months. Participants were practicing in a variety of clinical settings, including a university counseling center, a crisis center, the university's career counseling center, an outpatient behavioral health clinic, and school mental health programs.

Data Collection

Data sources consisted of two semi-structured interviews that were transcribed by the researchers for coding purposes and data from personal journals in which participants recorded felt sense experiences between interviews. Interviews are appropriate data sources for phenomenological inquiry (Koro-Ljungberg, Yendol-Hoppey, Smith, & Hayes, 2009). Interviews ranged in length from 30 minutes to 2 hours. In the first interview, background information was obtained, and questions were asked related to becoming a counselor, theoretical orientation, and how they personally defined *felt sense experiencing*. At the first interview, participants were asked to complete a journaling activity to describe a minimum of three felt sense experiences that occurred between the first and second interview, and instructions were given on how to record each experience. In the journal entries, participants reported their experience of felt sense in the body, what was happening at the time, what they did with the information, and the outcome. The length of time between interviews ranged from 9 to

42 days and was scheduled based on how long it took participants to record a minimum of three felt sense experiences. The average length was 25 days. Journal entries were processed at the start of the second interview.

Data Analysis

A reflexive and interpretative data analysis procedure was used to make meaning of participants' experiences (Saldaña, 2016; Sloan & Bowe, 2014). To analyze data, we used an inductive coding process that combined van Manen's hermeneutic phenomenological approach (1990) with Creswell's (2014) qualitative analysis structure. Van Manen's (1990) hermeneutic alertness was adopted by the researchers as a way of reflecting on the data rather than accepting meanings at face value. Data analysis progressed in a hermeneutic circle by shifting between parts of the text and reflecting on the interviews as a whole (Sloan & Bowe, 2014). Consistent with this approach is the process of *bridling*, introduced by Dahlberg (2006). Instead of putting their perspectives aside, bridling suggests researchers can both acknowledge they have preconceptions of the phenomenon and restrain their perspective sufficiently to allow for the participants' meanings to emerge. In bridling our perspectives, it is necessary to clarify our role as researchers. Our intention is to be transparent regarding our biases and potential influences on the research. In keeping with our interpretive framework, we are both humanistically-oriented counselors who highly value the therapeutic relationship as a significant factor in the effectiveness of counseling and counselor preparation. We also hold the perspective that the counselor as a person is a holistic and vital aspect of the therapeutic process and the therapeutic relationship, and should be a focus of counselor preparation.

The coding procedure began by reading interview transcripts and listening to interview recordings, to get a sense of participants' overall experiences. Next, interviews were coded into first order codes or meaning units for each interview (Saldaña, 2016). Coding was performed by repeatedly listening to audio recordings and rereading participant interviews and journal entries, and the first and second authors met to discuss coding. Finally, a process of phenomenological reduction and eidetic variation

were used to explore the essence of felt sense and find experiences that were universal, or at least shareable, between the participants (Ajjawi & Higgs, 2007). Memos were used to record thoughts and insights experienced by the researchers, but the memos were not coded as data (Saldaña, 2016). For member-checking purposes, participants and researchers discussed the accuracy of transcripts, journal entries, and emerging themes between the interviews (Saldaña, 2016). Member-checking procedures help to cocreate knowledge and interpret a “fusion of horizons,” which was recorded in the form of an essence statement defining the lived experience of felt sense in beginning counselors (Lopez & Willis, 2004). Findings were then summarized in an illustration.

Trustworthiness

Hefferon and Gil-Rodriguez (2011) identify four broad principles to establish trustworthiness in an interpretative phenomenological approach, including sensitivity to context, commitment and rigor, transparency and coherence, and impact and importance. We also remained transparent by journaling, writing memos, and writing a subjectivity statement to clarify preconceived notions and potential bias. Member-checking procedures were utilized as a way to ensure participant views were accurately represented within the research process and to address the sensitivity of the developmental and interpersonal context of the counselor preparation program. Multiple iterations and reflexive coding of the data as well as coding meetings were used to ensure coherence, impact, and importance of the study findings.

Findings

Data analysis resulted in four composite themes related to felt sense. Themes included that counselors describe the felt sense as innate and instinctual, it typically originates in the gut, it is impacted by core values and context, and it is a guide to relational and clinical intuition. Pseudonyms are used.

Felt Sense as an Innate Instinctual Response

Descriptions of the felt sense experience often occurred as a reaction to an event in a counseling session, whether it was related to the counselor, the client, or an interaction. Felt sense experiences were described as being immediate, fleeting, a nagging sensation, or subtle. Participants noted that their instinctual reactions seemed to operate at a subconscious level, and they entered the counselor’s awareness when the bodily sense was strong or processed verbally. One participant (Kelly) described felt sense in the following way:

I think a good way for me to describe it is like, if there’s equilibrium, like if everything’s cruising along pretty well, it’s not that it’s not there [referring to felt sense], I just don’t examine it. And so when I do have stronger feelings in any way, it’s easier for me to notice, but it’s a clue to what’s going on for me, also.

Kelly further shared, “I notice when I’m comfortable with someone and I notice when I’m *uncomfortable* with people, too. So like, on both sides of the extreme.” Kelly noticed her own instinctual reaction to a client and focused on dynamics with the client during the session. Maria discussed having a strong felt sense reaction when she felt concerned for a client. She stated, “I feel like *scared*, a little bit — like scared *for* the client. Just feeling really protective over them or feeling scared that something will happen to them. It’s like an eerie kind of feeling, too.”

Felt Sense as Experienced (or Originating) in the Gut

All participants discussed body awareness during sessions or when exploring a felt sense reaction, which varied from tightness in the chest or an uneasy stomach to raised hairs on the arms or the feeling of energy coursing through the body. The nature of felt experiences varied, as did the meaning attributed to the sensation. However, there were also similarities across experiences. Participants described sensations that varied in intensity and duration, and often, as having a bodily cue to shift their awareness. Every

participant discussed sensations in the lower belly or gut and the chest or heart area of the body. Some participants also indicated changes in body temperature and described the sensations as being fluid in nature, shifting or moving as the counselor–client dynamic changed or as the counselor decided what to do with felt information.

While bodily sensations and feelings varied, they typically originated in the area of the abdomen/lower belly/stomach or from the chest/heart area/lungs. Gina described the following:

I would feel it in the pit of my stomach and I would feel this really uncomfortable feeling right there [participant places hands on her lower abdomen] and I knew it every time but I couldn't put a word on it. I just knew it was there. And I would go around and around in my head.

Gina also recounted a different type of felt sense experience, which she contrasted to the experience described earlier:

[The felt sense experience] felt very comfortable and didn't feel as heavy; it felt almost relieving. A little bit like — just a poof of air almost, to say like right here, right now, we can get each other on a different level. It's not in the same spot, it's higher up and it feels kind of in my heart area. It's kind of like a dull ache, higher up, more where I'm breathing.

Participants commented on experiencing temperature changes, such as warmth in the heart area. Kelly shared, “Yeah, definitely in my chest, kind of like, it starts in my stomach and like moves up. I guess, like maybe a rush of warmth.” And Nicole had a similar experience, and stated, “I felt a sense of warmth all over. It was really interesting; I feel like it came from my heart.”

Maria shared a variety of felt sense experiences, including feelings in the stomach and chest but also experiences that moved beyond these areas of the body. When she was asked about the concept of felt sense during the first interview, she stated the following:

I think about, like, when your hairs go up [participant motions to her arms when talking about experiencing hair going up]. That happens to me frequently, actually, in certain situations or with certain clients... and that's accompanied by this weird — like a temperature change or something... it's like a cold energy feeling.

The felt sense may occur at a preverbal level and this seemed to cause difficulty for the beginning counselors. Kelly shared her difficulty finding language to describe somatic experiences: “I kept feeling like I didn't have the words to express it. So that was frustrating for me.” When asked about her description of the felt sense as a primal sense, she stated, “I think that's why I have such a hard time describing how I feel. Because it just like happens.” Other participants shared difficulty and frustration in finding language to describe their experiences.

Felt Sense as Impacted by Core Values, Beliefs, and Personal Context

Felt sense was observed to be impacted by the counselor's core values, beliefs, and personal context. In addition, there are both internal and external influences on these core values and beliefs. Jenna shared about a core sense of self when she stated the following:

I think that's what you're connecting to and you can just tell when something feels true. There's no uneasiness. It's just like pure connection, without fear or expectation or judgment. It's pretty immediate, you know, like you're not really thinking about it. It's just more of a feeling.

After discussing a felt sense experience, Nicole stated that she attributed it to incongruence with her values:

It feels good to share that that's where that came from and to call it out and say what it is. I always feel like I have to pretend that those values aren't there but they come through. There's no way they couldn't or I wouldn't be myself. It's why I'm doing what I'm doing. It's my why.

When discussing the origin of felt sense, Jenna commented on her understanding of a core self. She stated:

I think that's probably the most true thing that's going on, you know, the core self. I feel like that's where your gut feelings come from. That's true to your deepest self. So, yeah, I mean, I think that's the closest that I can come to getting a clue about what's really important or really going on. I imagine that's where it comes from [referring to her felt sense experiences].

Beginning counselors also questioned themselves or took things personally when there were

problems in the therapeutic relationship, whether they were related to the client, the counselor, or the interaction. Maria related having an empathic response to the client's experience, but was also aware that she might be projecting her own felt sense onto the client and assuming they would react in a similar way to her. She stated, "I actually feel the same stomach thing when I feel challenged or shame or embarrassment in front of a client. I notice the same thing when I'm noticing incongruency, but also when I actually name the discrepancy that I see. My theory is that I must be anticipating that *they're* going to feel embarrassed or ashamed."

Felt Sense as a Relational Barometer to Guide Clinical Intuition

When beginning counselors experienced a felt sense reaction, they presented it as having a choice of whether to share the information with the client as a hypothesis, withhold the information with the intention of processing it further in supervision, or ignoring it. Counselors' decisions seemed dependent on their awareness of and comfort level with the felt sense.

Some participants described noticing the felt sense but not having a clear indication of what was triggering it. Kelly described her experience as she stated, "I guess if I had to describe it, I would say that there's something not quite right." She later commented, "It's just like — it's not all there! You're not telling me everything! It's a sense of... there's more information to be had. A sense of something missing, I guess, like the picture's not complete."

Beginning counselors in this study shared how they determined whether felt sense was either a reaction to the client, in which case it was therapeutically beneficial to share it; a personal reaction that might need to be processed further in supervision; or a dynamic in the relationship that might be beneficial to process with the client. As Kelly stated, "I guess a lot of times, I'll maybe have a gut feeling about something and I just kind of ask them about that (if it feels) like there's something else there." She also shared the following example of how she decides what to do with the information from her felt sense experience: "I try to use it in session as a productive way of exploring things, but also notice it in myself and try to relax a little bit and realize that this person's eliciting

a reaction in me, and bookmark that to explore later, as well."

In contrast, Maria shared more trepidation about sharing her experience with the client. During the first interview, she shared the following:

I never thought about actually telling the client what I experienced.... I never really thought about saying that until my supervisor mentioned it one time. So I just kind of sit there and in order to stay present, I just take a deep breath or I'll take a sip of water or I'll go like that [runs hands over arms to smooth hair down] to my arms or something or to my sweater.

Jenna said her felt sense shifted as a result of sharing information with the client. She stated, "It felt kind of like warmth — like a connectedness, and relaxation. You can kind of take a deep breath, and it's freer. I picture it as being *lower* [places hands on lower abdomen], more grounded, just kind of settled." In contrast, Nicole described a situation where she did not acknowledge her internal experience. She described feeling "small, really unimportant" and stated that what she decided to share "was super incongruent with what was happening on the inside." She talked about wanting to appear a certain way with the client, but then she realized she was not acting on her internal experience, which left her feeling incongruent.

Essence Statement

Beginning counselors in the current study seemed to relate their felt sense experiences to a core self or core truth embedded in the counselor's personal context and beliefs about self and others that shape their worldview, moral standards, and integrity. Felt sense was observed to be related to clinical intuition and decision making through understanding innate instincts and body awareness that occurs at a precognitive or preverbal level, so it seemed to be difficult for participants to find language to express embodied experiences. Increased self-awareness and body-awareness was observed to help beginning counselors make sense of this valuable source of information that can be understood as an emerging framework for felt sense in counselors-in-training. As illustrated in Figure 1 the core self is the center of a feedback loop. Components of body awareness are listed on the right side and self-awareness on the left

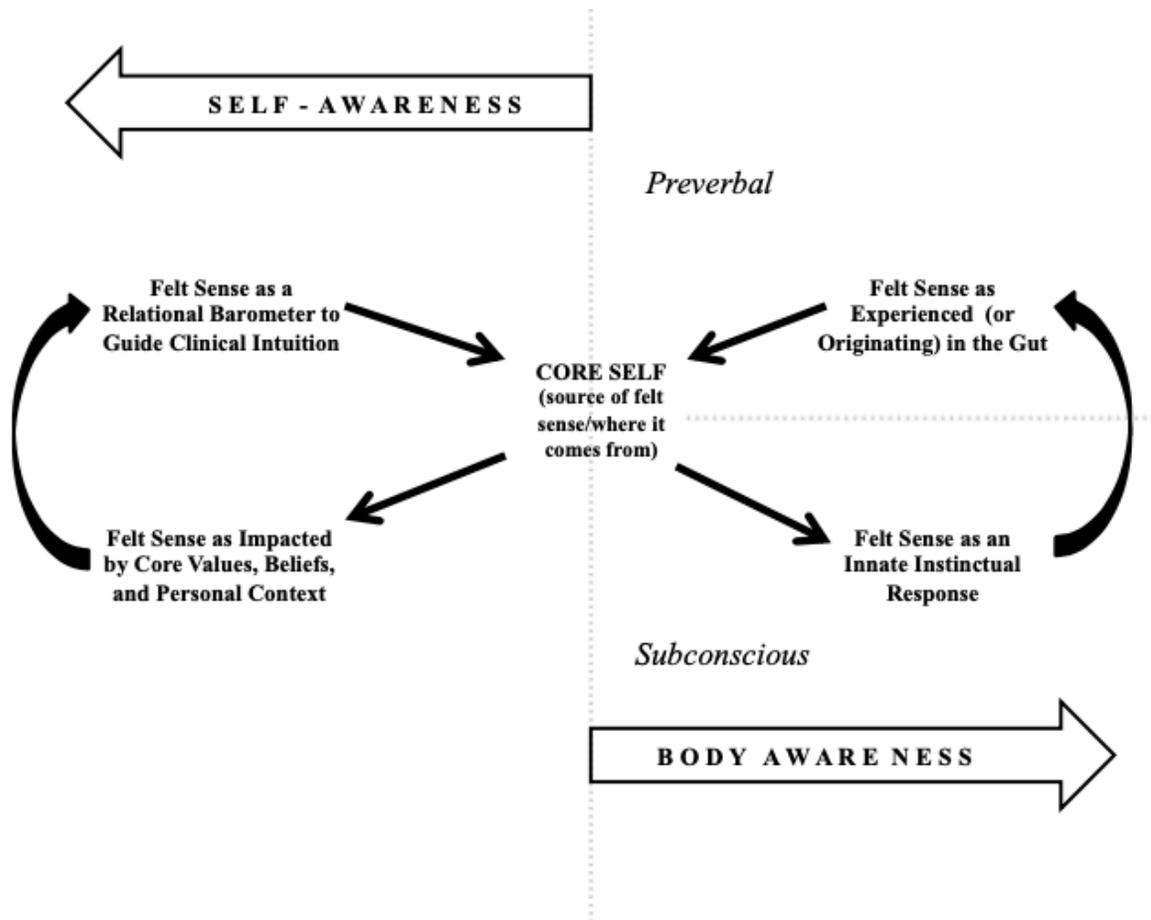


Figure 1. Felt Sense Phenomenon

side, to show a flow between body and self-awareness. A gut feeling cued whether the counselors' decisions were consistent with the core self and not biased by attempts to rationalize or act in a socially desirable manner. Counselors' meaning-making of felt experiences can then be transformed to self-awareness through the use of felt sense information and the decisions counselors make in response. When counselors shared their reactions or acknowledged incongruence with the client as clinically appropriate, discomfort would often shift back to a level of equilibrium, as can be seen in Figure 2. It seems the felt sense provided a source of information to the counselor when it was within their awareness. Though participants varied in the extent to which they were body-aware and self-aware, this essence held true for all.

Discussion

Consistent with Howard et al. (2006), Gibbons et al. (2013), and Tannen et al. (2017), findings of the current study suggest that counselors-in-training can display a relatively higher level of self-awareness than most developmental models suggest, supporting a holistic model of counselor preparation. Counselors were able to focus on felt information and reflect on how the experiences related to them personally and informed their interactions with the client. While counselors-in-training may lack the level of clinical experience as experts in the field, they are not void of instinctual responses; when they focus, the body can be their guide. Our findings contribute to literature that suggests counseling students can focus on embodied information and use felt sense to guide decisions (Howard et al., 2006; Tannen et al., 2017).

The current study findings were also supportive of prior developmental perspectives (e.g., Fauth &

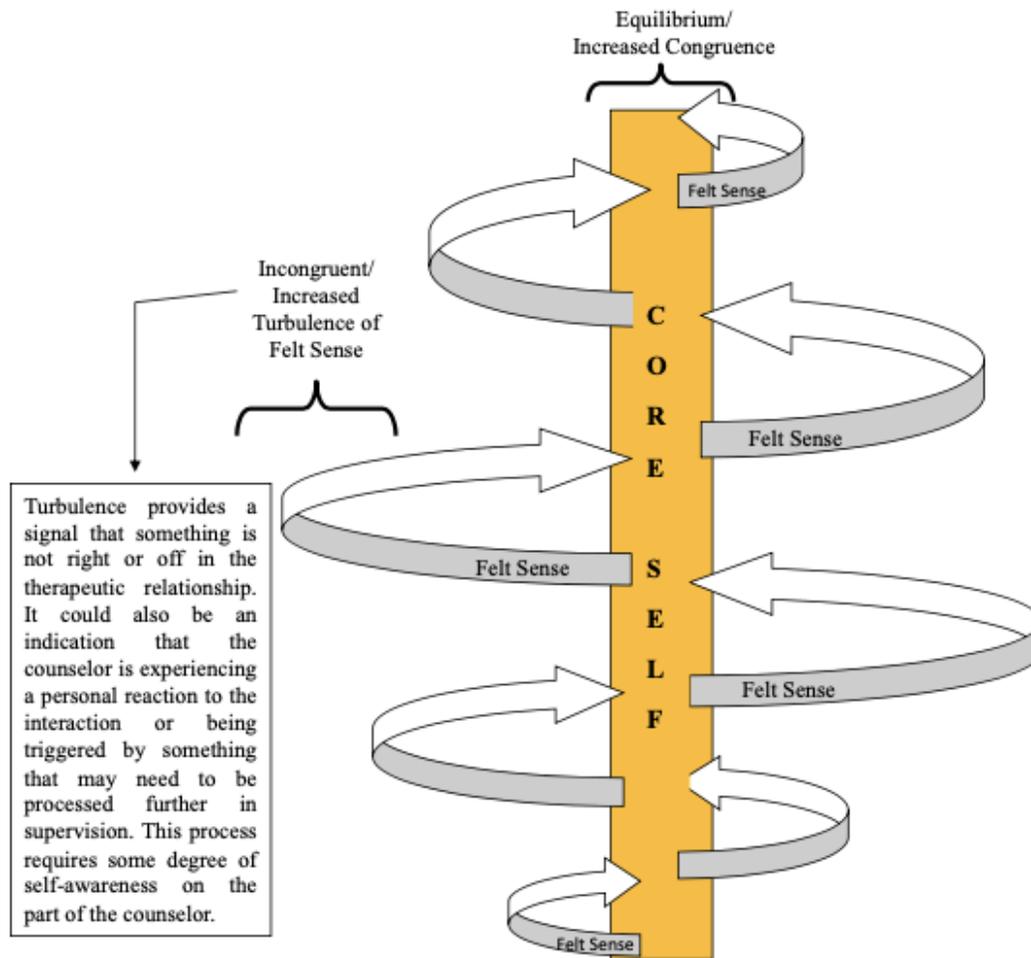


Figure 2. Felt Sense as a Relational Barometer

Williams, 2005; Williams, 2008) in that some beginning counselors experienced felt information as distracting and overwhelming, or tuned it out if they did not recognize it as a reaction to the client or the therapeutic relationship. However, in contrast to the current study, Fauth and Williams (2005) and Williams (2008) focused specifically on in-session anxiety and self-awareness. In our study, students focused both on the distracting and helpful aspects of felt sense, and in addition to experiencing some anxiety, they also reported being able to attend to felt information appropriately, translate felt information into personal meanings, and use it intentionally with their clients. We interpret this finding as a process. Though counselors-in-training understood felt sense as an innate form of information, a level of self-awareness was required in order to tune into and understand the body's signals. Variability in counselors' comfort

level with their felt sense experiences informed whether they perceived felt information as distracting or helpful in their work. In addition, the counselors in the current study varied in whether they chose to share felt sense information with their client. For instance, one counselor with high awareness and high comfort levels with felt sense shared that she was more distracted if she did not share the experience. Other counselors described it as a risk and expressed the level of vulnerability they felt. Counselors differed not only in their experience of the felt sense, but also in the choice about what to do with the information. In essence, the counselors-in-training in the current study were capable of exploring whether the felt sense was related to the client, the counselor, or the interaction between the counselor and client, and deciding when to utilize the information or process it further in supervision.

In the current study, counselors-in-preparation shared internal coping strategies consistent with those of expert therapists in Omylinska-Thurston and James' study (2011). Similar to experienced counselors, the counselors in the current study named coping strategies such as distancing by shifting eye contact or taking a drink of water, making sense of the discomfort, or noting the experience to process later in clinical supervision. Much like the expert clinicians studied by Omylinska-Thurston and James, the counselors-in-training described feeling increased anxiety or vulnerability at times of feeling incongruence with the felt sense and their work with clients. The current study extends findings of Omylinska-Thurston and James' to identify possible sources of inner experiences for counselors-in-preparation. Counselors in the current study articulated that felt sense emanates from a core self, and feelings of congruence or incongruence are related to their deepest values, drives, and morals.

When counselors shared their felt sense experiences, they noted changes in clients and the counseling process, as well as trust in their intuition. Witteman, Spaanjaars, and Aarts (2012) define clinical intuition as "automatic responses that are based on knowledge acquired through significant, explicit learning from textbooks and in clinical practice... intuitive processes operate at least partially without peoples' awareness and result in feelings, signals or interpretations" (pp. 19–20). As counselors-in-training became more open to felt sense, they seemed to trust that the body's instinctual responses hold important information and gain trust in their abilities to make sense of it in their work with their clients. Therefore, we suggest that counselors' lack of professional experience may be both a hindrance and a help, as they also seem to be open and able to take advantage of innate forms of information. Therefore, these findings support the conclusions of other authors who have recommended that counselor preparation might be the best time to introduce concepts related to counselors' inner experiences to normalize the discomfort and uncertainty associated, and to begin to develop relevant skills for understanding and using felt information in counseling (Christopher et al., 2011; Tannen et al., 2017).

Implications for Counselor Education and Supervision

Taking a holistic view of counselor development implies that student counselors bring with them an embodied and innate wealth of knowledge and felt experiences to build on in counselor preparation (Howard et al., 2006). In their interviews, counselors-in-training stated that felt sense had not been emphasized in their program. Because most counselors-in-training in the current study described increased self-awareness of felt sense, counselor educators might consider providing opportunities to allow students to focus on body awareness and felt information. However, it should be noted that for counselors in the current study, body awareness alone did not necessarily translate into increased comfort with utilizing felt sense experiences in sessions. Exploring with students the ways in which they understand and use felt sense may benefit students in their early clinical practice.

Because felt sense is experiential, counselors-in-training seemed to have difficulty finding language to make meaning of their felt sense experiences. The simple use of the term *felt sense* or related constructs (embodied self-awareness, focusing, presence, intuition) helped to name this elusive concept. Focusing on language could allow counselors-in-preparation to more fully articulate their inner experiences and send a message to beginning counselors that felt sense can be a valuable resource. Focusing on felt sense reactions could also offer a way for counselors-in-training to explore their deeper core values and instincts, and may aid in developing trust in their clinical intuition early in their professional development as well as guide their theoretical orientation.

Based on the current findings, it also seems important that counselors-in-training have space to explore their inner process in clinical supervision sessions (McTighe, 2011). Counselors in the beginning phases of their development are often impacted by clients but may not realize or have the opportunity to explore their embodied reactions further unless prompted by a supervisor. Though counseling students seem to vary on self-awareness of felt sense experiences, the act of focusing on felt responses may help them to learn to make sense of this information and integrate it into their theoretical orientation of

choice. Importantly, by modeling transparency, increased body awareness and reflection on felt sense, supervisors reinforce the counselor's exploration of their own internal experience, which leads them to do the same with their clients, thus creating the potential for increased relational connection and depth in the therapeutic relationship.

Limitations and Future Directions

The study sample lacked diversity in ethnicity as well as gender. Women may have a way of knowing that influences their felt sense and clinical intuition. Though we did not situate the findings in the shared context of gender, there may be interpretations of the current findings that are particularly related to women's experiences of being in a counselor preparation program. The study sample was also limited to one university. Though homogeneity is not a limitation of qualitative research (Patton, 2014), future studies of felt sense in counselors-in-training across other campuses with more counseling students are needed. In the current sample, some participants reported having less experience with felt sense than others due to differing levels of self- and body-awareness, limiting their ability to reflect on their experiences with the phenomenon (Creswell, 2013; Moustakas, 1994; van Manen, 1990). To address this limitation, researchers coconstructed definitions of felt sense with participants, and each participant reported increased awareness of felt sense experiences during the study period.

Future research is needed to validate the current findings related to felt sense in counselors-in-training. In particular, future studies should examine how counselors develop awareness of felt sense and how these skills can be developed during counselor preparation. More research is also needed concerning how counselors' felt sense is experienced and utilized across different cultural groups and with diverse clients. Future qualitative and quantitative studies can examine interpersonal dynamics occurring between the counselor and client in-session, and the reciprocal process between counselor and client.

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