Chapter # 3

HOW TO BE A PSYCHOTHERAPIST AND REMAIN HAPPY?
Shaping resilience of psychologists, psychotherapists in training and certified psychotherapists working in counseling business: A theoretical analysis

Angelika Kleszczewska-Albińska
The Maria Grzegorzewska University, Poland

ABSTRACT
Providing counseling services means being exposed to suffering and all sorts of difficulties on a regular basis. Being a professional, empathetic listener who stays attentive and responsive to other people's needs can result in emotional exhaustion of a professional. Taken together with no regular self-care and self-help it can lead to compassion fatigue or work burnout. Therefore, in order to maintain good quality of life and mental health it is needed to remain resilient. The main aim of the article is to offer a theoretical analysis of steps needed to maintain resilience in psychologists and psychotherapists working in counseling business. It includes an analysis of the current data considering the mental health of psychologists and psychotherapists working in counseling business and a discussion considering possible ways to enhance the quality of life and mental well-being of mental health professionals. It also includes some ideas concerning preventive programs and components of educational curricula that should be offered to psychologists and psychotherapists working in counseling business. The text serves as a theoretical introduction and a basis for development of future preventive programs for psychologists and psychotherapists as well as a foundation for a research in the field of well-being and a quality of mental health of psychologists and psychotherapists working in the counselling business.

Keywords: resilience, counseling business, preventive programs, mental health of psychologists and psychotherapists.

1. INTRODUCTION

Psychological services offered in psychotherapy and counseling business cover a broad range of activities from diagnosis through psychological support and short term interventions to long term psychotherapy. Professionals who offer psychological help and support engage in varied complex activities that require certain skills and abilities. In order to be effective at their work they should present high quality empirically based knowledge and be familiarized with current research results considering efficacious methods of intervention. Additionally, they should be engaged in continuous development. While working with different patients experiencing various problems and needs, professionals in counseling business have to present certain levels of flexibility, highly developed communication skills, interpersonal abilities, emotion regulation skills, empathy, and highly developed sensitivity to interpersonal, social and emotional cues. All mentioned above factors are strongly connected to internal psychoemotional resources of professionals that can diminish without proper care. In result psychologists and psychotherapists who do not practice self-care can experience decrease in levels of well-being and quality of life, increase of mental health complaints or professional burnout.

Empirical studies show that psychologists and psychotherapists present an elevated levels of burnout symptoms (e.g. McCormack, MacIntyre, O'Shea, Herring, & Campbell, 2018; Van Hoy & Rzeszutek, 2022) and symptoms of other mental health problems (e.g. Probst, Humer, Stippl, & Pieh, 2020; Tay, Alcock, & Scior, 2018). According to the research results, psychotherapists are especially prone to early maladaptive schemas of self-sacrifice, emotional deprivation, and unrelenting standards (e.g. Pilkington, Spicer, & Wilson, 2022; Simpson et al., 2019; Young, Klosko, & Weishaar, 2003), which can lead them to ignore any signs of their emotional needs. Relatively frequently mental health professionals perceive self-care as a privilege or one of possible alternatives rather than an obligation (Mueller, Kennerley, & Westbrook, 2010). In the long term such attitudes and beliefs can cause a decrease in quality of life, and increase in the levels of symptoms of mental problems. Therefore, it can be stated that providing psychological support and help for others without adequate self-care can result in serious consequences for the mental health of professionals, so in order to effectively help others psychologists and psychotherapists need to stay attentive to their own mental condition.

Self-care and willingness to attend individual's emotional needs observed in psychologists and psychotherapists is embedded in declarative knowledge (i.e. general psychological knowledge about mental health and its conditions) procedural knowledge (i.e. practical knowledge required to solve problems and cope with mental health problems) and reflective knowledge (i.e. an ability to search for alternative sources of information and an adequate practical use of knowledge) (Bennett-Levy, & Thwaites, 2007). It means that in order to cope with emotional difficulties psychologists and psychotherapists experience in their professional life they have to stay attentive to their own emotional needs and actively apply the knowledge they have, especially since many of them share a belief that having the knowledge about efficacious coping methods is equivalent to coping (e.g. Bennett-Levy, 2006; Mueller at al., 2010). An active engagement in self-care practices requires high levels of awareness of one's condition, having necessary tools that can be applied when needed and an adequate organization of mental, emotional, social and physical space to cope with difficulties and take care of an individual's needs.

Resilience is defined as successful adaptation to challenging mentally burdensome experiences, acquired especially through an ability to flexibly cope with adversities and difficulties. It can be perceived both as a process of adaptation and an outcome of such a process (APA, n.d.). Among factors corresponding to high resilience are effective coping strategies, availability of social resources, and individual beliefs about the world as a relatively safe and predictable place and other people as relatively kind to others. It is crucial for psychologists and psychotherapists to cultivate, practice and develop their resilience since it is expected that as professionals they will be able to cope not only with their own emotions but with emotional burdens and various problems of their patients as well. The research conducted up to date demonstrates that the resources and skills associated with resilience can be developed and enhanced and can serve as protective factors increasing the quality of life of psychologists and psychotherapists (Justin, Haroon, & Khan, 2023).

The main aim of the presented article is to offer a theoretical analysis of steps needed to develop and maintain resilience in psychologists and psychotherapists working in counseling business. It starts with an analysis of the current data considering the mental condition of professionals offering psychological services in mental health business, followed by a discussion on possible ways to enhance quality of life and mental well-being of psychologists and psychotherapists. In the following paragraphs a short description of methods applied in the conducted analysis is given, next research results devoted to mental

health of professionals and information concerning factors shaping its condition are presented. After that, the description of possible ways to enhance and prevent mental well-being of psychologists and psychotherapists is given, as well as some ideas that can be applied in training processes offered to psychologists and psychotherapists in training. The text serves as a theoretical introduction and a basis for development of future preventive programs for psychologists and psychotherapists as well as a foundation for a research in the field of well-being and a quality of mental health of psychologists and psychotherapists working in the counselling business.

2. METHODOLOGY OF THE CONDUCTED ANALYSIS

Presented paper contains a narrative review aimed at describing the specific conditions corresponding to the quality of mental functioning of psychologists, psychotherapists in training and certified psychotherapists working in counseling. It focuses specifically on mental health conditions, the ways professionals' well-being is protected, and possible solutions that can be used during the development or maintenance of resilience of professional counselors.

The central question guiding the literature review was: What is the general level of well-being of professionals working in the field of psychological counseling, how is the mental health of psychologists, psychotherapists in training and certified psychotherapists protected, and how can it be improved? In order to answer the above mentioned question the relevant literature was selected. Among the inclusion criteria there were: the year of publication (after 2000), the type of the article (research paper or metaanalysis), the availability of the full text. The review was therefore prepared with a selection of relevant literature. The main key words used were: psychotherapists, counseling, well-being, mental-health, self-care, burnout prevention, resilience. Searched databases included EBSCO, Google Schoolar, Medline, and Web of Science.

All the articles identified during the search were later critically analyzed whether they meet the above mentioned inclusion criteria, and at the same time whether they concern: (1) the description of mental health condition of psychotherapists, psychotherapists in training or counselors, (2) the description of preventive programs aimed at development, enhancement or maintenance of mental health and well-being of professionals working or studying in the field of counseling, (3) the description of activities aimed at developing and maintaining the resilience of mental health specialists.

Based on the analysis the main patterns of findings were identified. Contradictory results were addressed. Areas that were not explored sufficiently were noticed. Based on the findings the solution aimed at prevention of mental health for counselors was presented and accompanied with some ideas on how to enhance teaching curricula for psychology and psychotherapy training with special courses dedicated to the development of self-care practices of future professionals.

3. MENTAL CONDITION OF PSYCHOLOGISTS AND PSYCHOTHERAPISTS WORKING IN COUNSELING

According to the conducted review of the literature it can be stated that for many years the mental health of psychologists and psychotherapists working in counseling remained insufficiently attended while researchers intensively concentrated on the well-being of patients attending psychotherapy. Among the studies that were conducted before 2020 there were analyses of well-being of professionals working with highly

traumatized patients or in potentially traumatizing conditions (e.g. Bowden, Smith, Parker, & Boxall, 2015; Frajo-Apor, Pardeller, Kemmler, & Hofer, 2016), some research on stress levels of clinical trainees (e.g. Cushway, 1992; Pakenham, & Stafford-Brown, 2012), and data concerning the resilience levels in trainees or early-career professionals (e.g. Kolar, von Treuer, & Koh, 2017; Lamb, & Cogan, 2016). There was also research on burnout levels at early stage of professional career of clinical psychologists (e.g. Volpe et al., 2014). This approach changed especially during and after the COVID-19 pandemic, and currently there is a growing amount of data concerning the functioning of professionals offering psychological help and support to others.

The data published until now shows varied indicators of symptoms of psychological burnout observed in psychologists and psychotherapists, ranging from 6% to over 50% (e.g. Berjot, Altintas, Grebot, & Lesage, 2017; Van Hoy, & Rzeszutek, 2022), and some evidence of elevated levels of anxiety and depressive symptoms, substance misuse and insomnia (e.g. Van Hoy, & Rzeszutek, 2022). At the same time there is still a research gap considering the general nation-wide or cross-cultural studies on well-being of psychologists and psychotherapists.

While analyzing the condition of mental health of psychologists and psychotherapists various components including intraindividual, interindividual and environmental factors should be taken into account (e.g. Williams, Reed, Self, Robiner, & Ward, 2020). Among intraindividual components are: personality traits (e.g. extraversion, neuroticism), temperamental features (e.g. emotional reactivity, endurance, perseverance), levels of emotional intelligence, and biological proneness to mental problems. Interindividual factors include social contacts and quality of social interactions, perceived social support as well as explicitly and implicitly presented social expectations toward the roles and attitudes of a professional (e.g. Goodyear, & Sera, 2022; Patel, Swift, & Digesu, 2021). Environmental components contributing to the mental condition of psychologists and psychotherapists include the overall social climate of a workplace, professional isolation, work load and work-life balance (Kleszczewska-Albińska, 2020). The abovementioned factors are not unique for psychologists or psychotherapists, but taken together with specific conditions corresponding to fulfilling professional duties can contribute to a significant decrease in mental health and well-being of mental health professionals (e.g. Williams et al., 2020).

The specific settings requiring involvement in asymmetric relationships, elevated interpersonal engagement of psychologists and psychotherapists in professional relationships and high attentiveness to the needs and problems brought by patients can result in decrease of well-being of professionals (e.g. Bamforth, Rae, Maben, Lloyd, & Pearce, 2023). Among other factors leading to the decrease of a quality of life observed in psychologists and psychotherapists working in counseling are case complexities and difficulties with emotion management corresponding to professionals' dysfunctional beliefs about themselves and their professional competencies (Kleszczewska-Albińska, 2020). The mentioned above components can cause insomnia, elevated symptoms of anxiety or depression (Schaffler et al., 2022) as well as somatic symptoms such as back pain, headaches, and gastroenteritis (Rupert, & Kent, 2007).

The decrease in quality of well-being and mental health issues observed in psychologists and psychotherapists are also correlated with an external pressure from clients (e.g. Bamforth et al., 2023). It was proved that patients are more prone to engage in psychotherapeutic relationships with professionals perceived as mentally stable and satisfied with their lives (Wogan, & Norcross, 1985). Additionally, there is a correlation between psychotherapists' well-being and their professional effectiveness (Laverdière, Kealy, Ogrodniczuk, & Morin 2018) which means that the more mentally unstable and

vulnerable the therapist is the worse the outcomes of their work are. And while performing poorer they experience even higher levels of vulnerability, psychological discomfort, and work dissatisfaction, which in turn decreases professionals' well-being.

According to the research conducted up to date there is a lack of agreement whether the mental condition of psychologists and psychotherapists engaged in counseling is relatively poor, neutral or satisfactory (e.g. Posluns, & Gall, 2020; Schaffler, Probst, Pieh, Haid, & Humer, 2024; Van Hoy, & Rzeszutek, 2022), so further research in this area is needed. While analyzing the factors corresponding to quality of mental health and well-being of professionals working in counseling several factors should be taken into consideration, including: symptoms of depression and anxiety, levels of general and work-related stress, work load, work-life balance, patients' complexity, exposure to patients' traumatic histories, excessive situational stress and intensive work-related emotions. Also, the description of mental state of psychologists and psychotherapists working in counseling services has to include data on their self-care levels.

4. PREVENTION OF MENTAL HEALTH OF PSYCHOLOGISTS AND PSYCHOTHERAPISTS

Since psychoemotional condition of professionals providing psychological help and support to others influences both specialists' efficacy, and their clients functioning (e.g. Posluns, & Gall, 2020) it is crucial to analyze the protective factors, and plan activities aimed at supporting mental condition of psychologists and psychotherapists working in counseling. Mental health of psychologists and psychotherapists depends on many different factors that should be considered while planning self-care practices. It is important to underline that the research on positive aspects of mental health professionals' well-being is less frequent than studies on mental health problems suffered by psychologists, psychotherapists and counselors (e.g. Van Hoy, & Rzeszutek, 2022). The studies conducted up to date prove that older, i.e. more experienced professionals report higher levels of general well-being in comparison to younger psychotherapists (e. g. Summers, Morris, Bhutani, Rao, & Clarke, 2021). It was also discovered that better quality of life of counselors corresponds to the involvement with self-care practices (e.g. Yip, Mak, Chio, & Law, 2017). Additionally, work settings enabling maintenance of work-life balance, and access to professional support proved to be important factors supporting high levels of well-being of professionals (e.g. Summers et al., 2021). Therefore, taking into consideration the data presented above it can be stated that while planning preventive programs for mental health professionals intraindividual, interindividual as well as environmental factors should be taken into account. At the same time planning preventive activities is important for professionals themselves – both in personal and professional life, for their job performance and clients they work with.

In order to develop or maintain high levels of well-being mental health professionals need to be self-aware about their strengths and weaknesses. They need to know how to organize their work settings and entire environment so it will fit best their temperamental needs. Using the knowledge about their personality traits can help professionals to adequately plan their professional and leisure activities in such a way to optimize their functioning (e.g. Pereira, Pires, & Neto, 2024). In order to improve or maintain levels of their interpersonal skills psychologists and psychotherapists can get involved in any type of interpersonal training, developmental groups etc. While taking care of environmental components psychologists and psychotherapists should analyze their work and personal environment and verify whether they do have personal spaces to rest and take care of

themselves in a preferred way. In other words, taking care of their well-being psychologists and psychotherapists have to maintain high levels of attentiveness toward their needs and emotions, and pay attention to the consequences external features have on them (e.g. Watson, Walker, Cann, & Varghese, 2021).

Taking care of their well-being and mental health psychologists and psychotherapists should therefore plan the time for self-care practices such as leisure activities, time with meaningful others, sport or psychological practices such as mindfulness. Due to the complexity of counseling processes professionals have to regularly supervise their work as well as engage in consultations or other types of meetings gathering professionals discussing their work outcomes (e.g. Gönültaş, Meydan, & Sağkal, 2024; Rønnestad, Orlinsky, & Willutzki, 2024). Whenever it is needed psychologists and psychotherapists should also engage in personal psychotherapeutic processes that can help them to improve their mental functioning, address specific issues they struggle with, and improve coping mechanisms they have (e.g. Posluns, & Gall, 2020). Crucial for general well-being and mental health of professionals is a sense of belonging to a greater community, therefore being a part of a professionally oriented group of people can enhance the quality of life of psychologists and psychotherapists (e.g. Dose, Desrumaux, Bernaud, & Hellemans, 2019; Toubassi, Schenker, Roberts, & Forte, 2023). All the above mentioned factors should be additionally embedded in a relatively stable balanced environment in which professionals set adequate boundaries between professional and personal life (e.g. Ohrt, & Cunningham, 2024).

Factors mentioned above can serve as a starting point for preventive programs aimed at enhancement and maintenance of well-being, mental health and resilience of psychologists and psychotherapists. In the literature there is some data concerning the programs for an improvement of the well-being of therapists. Such programs most often offer interventions based on evidence-based approaches, including, among others, cognitive-behavioral approach, acceptance and commitment therapy, behaviorally oriented stress reduction methods, mindfulness, dialectical behavioral oriented skills etc. (e.g. Barnett, Johnston, & Hillard, 2006; Duncan, & Pond, 2024; Wise, Hersh, & Gibson, 2012). Such interventions relatively often are presented as tools for reduction of burnout symptoms, and a way for enhancing resilience and psychological flexibility, but in most cases these activities are presented in a short-term period while mental health professionals do need long-lasting support programs.

Hypothetically, such a long-lasting program, based mostly on various empirically-based interventions should start with a thorough diagnosis of individuals' needs and identification of factors contributing to increased stress levels. The process of psychoeducation during which professionals are reminded about the limits of their interventions and their responsibility for their patients should follow the diagnosis process. In the next step a supportive group should be formed for professionals who volunteer to participate in it. Additionally, an optional meeting with other mental health professionals should be offered to psychologists and psychotherapists participating in such preventive programs. What is crucial, all of the abovementioned activities and interventions should not be obligatory but rather voluntary.

An active participation in supportive groups should result in development of resilience, better understanding of individual strengths and weaknesses and enhancement of self-efficacy (e.g. Rippon, Shepherd, Wakefield, Lee, & Pollet, 2022). Based on the experiences of other people gathered in a supportive group participants can learn more about themselves, their attitudes and beliefs corresponding to therapeutic processes they are involved in. Also, they will be able to share their own experiences and gain support and

guidance they need for themselves. During individual sessions professionals will be able to deepen their knowledge about themselves and their dysfunctional beliefs, and to understand the impact their past experiences have on their present counseling services and general professional well-being and mental health.

The next step of enhancing or maintaining resilience should be devoted to the recognition and application of individually fitted adaptive ways of coping. Based on previously identified individual histories, psychologists and psychotherapists should re-evaluate their coping mechanisms, and make necessary modifications in that area when needed. Another important factor corresponding to the maintenance of resilience is self-compassion (e.g. Li, Malli, Cosco, & Zhou, 2024). Therefore, based on their knowledge concerning personal strengths and weaknesses, psychologists and psychotherapists participating in the supportive program should evaluate their approach to self-compassion and, if needed, introduce necessary changes in it. Additionally, participants of supportive group meetings can learn how other professionals deal with their critical thoughts and how they overcome unpleasant emotions which can be a useful tool for introducing any modifications in that area.

Generally speaking while helping psychologists and psychotherapists to sustain good mental condition and to enhance resilience it is important to learn how they cope with professional difficulties. It is crucial to learn about their previous experiences and adversities and to recognize the main problems they are facing in the current situation, then to help them identify the most adaptive coping strategies they can apply in different conditions. In order to increase resilience levels it is necessary to develop self-compassion, maintain supportive relationships with others, and learn how to ask for help from others when it is necessary (e.g. Chye, Kok, Chen, & Meng Er, 2024; Helmreich et al., 2017). All the suggested steps needed while enhancing and maintaining resilience of psychologists and psychotherapists working in counseling are given in Table 1.

The hypothetical activities described in Table 1. can be used independently or as modules of a complex preventive program. Such activities can help psychologists and psychotherapists to maintain good mental health, overcome adversities, and model adequate coping behaviors to others. Greater resilience can serve as a factor decreasing the risk of psychological crises (Hall et al., 2023). Whenever support and simple activities aimed at increasing levels of resilience are not sufficient it is recommended to search for empirically-based therapeutic interventions such as cognitive-behavioral therapy. Development, enhancement, and maintenance of psychologists' and psychotherapists' resilience can result in an increase of the general well-being of professionals themselves as well as in the quality of life of their patients. Data published up to date proves that psychologically stable individuals helping others contribute to better functioning of persons they offer their support to (Bamforth et al., 2023).

Table 1.
Elements of proposed hypothetical resilience enhancement program for psychologists and psychotherapists working in counseling based on evidence-based psychological interventions.

Type of activity	Module	General aim of the module
Supportive groups	Recognizing individual strengths, weaknesses, and needs	Learning about oneself, one's needs, abilities, and skills
	Developing self-supportive network	Giving individuals an opportunity to meet other professionals who share similar experiences and learning from them
	Strengthening individual skills	Giving individuals an opportunity to develop and enhance their skills while helping others experiencing similar difficulties
	Psychoeducation	Providing current empirically-based knowledge on compassion fatigue, burnout, coping strategies, self-compassion, normalizing individual's experiences
	Activities aimed at strengthening individual abilities to help others	Giving individuals an opportunity to share their knowledge with other group members, encouraging people to help other group members
	Activities aimed at strengthening individual abilities for self-help and search for help from others	Giving individuals an opportunity to learn from their own experiences, encouraging individuals to ask for help from others, reinforcing individual's behaviors aimed at searching support from others
Individual work with a professional	Recognition of individual needs	Recognition of basic problems that cause individual's emotional suffering and impede performing professional duties
	Recognition of individual styles of coping with adversities	Analysis of adaptivity of preferred coping styles, finding the best, most adaptive ways of solving work-related problems
	Recognition of individual preferences in self-care	Identification of self-care methods used by an individual on a daily basis, finding the best individually fitted methods of self-care
	Supportive sessions	Discussing the outcomes of individual sessions, identifying problems, and looking for solutions

5. SHAPING RESILIENCE OF PSYCHOLOGISTS AND PSYCHOTHERAPISTS DURING THE PROCESS OF EDUCATION

As it was already stated, resilience is perceived as one of the most important features enabling mental health specialists to remain emotionally stable, and protected in the light of emotionally demanding work settings (e.g. Kunzler et al., 2020; Pereira, Barkham, Kellett, & Saxon, 2017). At the same time, it is not properly, thoroughly researched nor is it included in regular teaching curricula for psychology students or psychotherapists in training. Until now there were several studies aimed at analysis of the significance of resilience for counselors functioning (e.g. Kay, 2016). In other research projects resilience was analyzed in the supervision settings (e.g. Coaston, 2019; Milne, 2009). There were also several, mostly pilot, empirical programs devoted to resilience development and maintenance offered in training programs for clinical psychologists (e.g. Delany et al., 2015; Joyce, et al., 2018) as well as studies in which specific features corresponding to resilience enhancement were analyzed (e.g. Hopkins, & Proeve, 2013; Pereira, et al., 2017; Robins, Roberts, & Sarris, 2019; Rogers, 2016). All of the above mentioned studies were rather anecdotal. They didn't result in introduction of systematic changes in teaching curricula nor in preparing specific modules or programs devoted to resilience enhancement in psychotherapists trainees or certified psychotherapists. Based on the data gathered up to date it seems important to address this issue in the nearest future.

In current curricula of master programs in psychology or certification training courses for psychotherapists the topics of self-care and resilience are usually offered as optional rather than obligatory elements of the study program. Similarly, the well-being of professionals rarely serves as an important and obligatory topic of supervisory training or supervision process itself. Such a situation can contribute to the reinforcement of psychologists' and psychotherapists' belief that self-care is optional rather than indispensable (Baker, & Gabriel, 2021; Posluns, & Gall, 2020), but as it was already stated, providing adequate psychological support and help to others is possible only when professionals are self-aware and maintain a relatively good mental condition (Kunzler et al., 2020; Pereira et al., 2017).

High levels of resilience require meeting certain criteria, including positive, empathetic, trustworthy and compassionate interpersonal relationships, sense of belonging, an ability to ask for help from others and accept the support they offer. Resilience also corresponds with high levels of self-awareness, self-acceptance, and adaptive ways of coping and regulating emotions (e.g. Connelly et al., 2017; Shrivastava, & Desousa, 2016). While providing help and support for others it is important to be attentive not only to the patients' needs but also to one's own feelings. It is therefore recommended to stay in touch with other professionals working in the field, have leisure time, engage in pleasant activities and hobbies. Crucial for sustaining a good mental condition is working in a supportive community. Offering help to others requires being attentive to oneself, and taking care of one's own emotional and mental condition (Zerban et al., 2024).

To underline the importance and the meaning of professional's resilience and well-being for the quality of counselling processes all the abovementioned elements should be incorporated in curricula of teaching programs for MA psychology students, psychotherapists and supervisors in training. Attention given to those factors during training processes can help practitioners to understand the importance of self-care and resilience for professionals' well-being and effectiveness of offered psychological help. Table 2 includes a short description of the components that should be introduced as obligatory elements of professionals' training programs. All of the elements given below

are identified as features hypothetically important for mental health of professionals based on the previous studies concerning resilience, but were not yet empirically tested in the settings of certified psychology or psychotherapy training programs curricula.

Table 2.
Hypothetical components of resilience-enhancing training module for psychologists and psychotherapists working in counseling.

Component of a module	Component's characteristics
Self-awareness	Awareness of one's emotions and needs is crucial to recognize the situations in which an individual feels good or bad and helps to decide what type of activity to undertake in order to take care of one's needs in professional settlements Awareness of personal strengths and weaknesses is important to carry on activities congruent with personal properties and is needed for planning and executing specific activities in professional settlements Awareness of self-care engagement helps an individual to decide how to take care of themselves and develop certain skills and abilities in work environment Awareness of an ability to solve problems and deal with difficulties is crucial to overcome any difficulties corresponding to extremely complex or new types of cases an individual works with
Intrapersonal skills	Styles of coping with difficulties abilities to flexibly apply coping strategies adequate to different situations, helpful in dealing with difficult interpersonal situations with patients Styles of problem solving abilities to overcome different types of difficulties experienced at different stages of diagnostic or therapeutic processes Levels of mental flexibility an ability to modify behaviors, coping or problem solving strategies to the most effective ways applicable in counseling processes Personal schemas and beliefs an ability to address personal beliefs and schemas interfering with diagnostic or therapeutic processes Self-efficacy an ability to plan and carry on diagnostic or therapeutic interventions necessary for achieving patients' therapeutic goals Self-esteem an ability to overcome difficulties observed in interpersonal relationships with patients Hardiness an ability to flexibly operate with specific tasks, coping mechanisms and problem solving strategies according to patients' needs without development of compassion fatigue or secondary traumatic stress
Interpersonal skills	Communication styles an ability to flexibly adjust communication strategies to patients' needs and developmental stages, and to adequately present information considering nuances of therapeutic relationships with respect to both patient's and professional's personal boundaries Other awareness an ability to observe, interpret and react to patients' behaviors, emotions and needs and being aware of the influence those factors have on professional's functioning Interpersonal relationships an ability to form meaningful, safe relationships in which a professional can receive social support they need

Environmental awareness	Awareness of environmental cues and its meaning plays an important role in forming professional's self-awareness, and in development and maintenance of meaningful relationships with patients, helps to maintain professionals' personal boundaries Awareness of the personal meaning of work helps professionals to maintain attentive and motivated even in complex and difficult therapeutic situations, prevents professionals from excessive engagement in their patients' life and functioning Awareness of the personal meaning of leisure activities is crucial to sustain work-life balance, and to effectively fulfill professional duties

Offering systematic training modules aimed at resilience enhancement and well-being of psychologists and psychotherapists can serve as a useful tool enhancing the quality of life of professionals and increasing the effectiveness of therapeutic processes. Helping different, especially complex and/or traumatized, patients requires from professionals extreme personal contributions. Such an involvement is better approachable with professionals' high levels of resilience (Wicks, 2007). Due to high levels of resilience professionals are able to sustain highly empathetic but not tired with helping (i.e. less prone to compassion fatigue), and less likely to experience secondary traumatic stress. As research shows resilience can be developed in many different ways (e.g. Helmreich et al., 2017; Joyce et al., 2018; Liu et al., 2020; Schäfer et al., 2024). It can be enhanced and maintained with highly developed emotion regulation skills and self-awareness. It is connected to high flexibility and coping skills. It also corresponds to awareness of one's strengths and weaknesses, abilities to maintain work-life balance and high attentiveness to self-care practices. As Wicks (2007) suggests in order to develop and maintain high levels of resilience psychologists and psychotherapists working in counseling business should learn about themselves, their beliefs, and maladaptive schemas. They also need to take care of themselves, especially through meeting and soothing their needs and managing emotions. To fulfill all those requirements they should receive systematic, organized and obligatory training. This way during their education process professionals will receive a clearly stated message about the importance of self-care and resilience for effective fulfilment of professional duties.

6. CONCLUSIONS

Resilience serves an important role and seems crucial for high levels of well-being and effectiveness of psychologists and psychotherapists working in counseling business. Since resilience – understood as a process of successful adaptation to difficulties and challenging life events and a mechanism protecting professionals from compassion fatigue and secondary traumatic stress – can be developed or increased, special attention should be given both to preventive programs and training modules devoted to resilience enhancement. In order to develop or maintain high levels of resilience, professionals working in counseling business have to, among others, take into consideration their needs and sustain supportive relationships. Since resilience is based on previous experiences, its development requires an ability to learn from previous situations, to have an open mind, accept changes, and practice self-compassion.

The ideas presented in the article are theoretical ones, and can serve as an introduction to the future research on effectiveness of specific resilience-enhancing programs devoted to psychologists and psychotherapists. In the next steps, the focus should be directed to

in-depth diagnosis of the psychoemotional condition of psychologists and psychotherapists. Based on the quantitative and qualitative research generalized information on psychoemotional needs of psychologists and psychotherapists should be described and utilized in the process of construction of preventive programs aimed at enhancement of resilience levels of psychologists and psychotherapists working in counseling business. In the next step short-term and long-term effectiveness of such programs should be empirically verified. Additionally, in near future such preventive programs should be offered as a part of obligatory training courses that help professionals maintain high quality of life and good mental health.

REFERENCES

American Psychological Association (n.d.). *Resilience*. Retrieved from https://dictionary.apa.org/resilience

Baker, C., & Gabriel, L. (2021). Exploring how therapists engage in self-care in times of personal distress. *British Journal of Guidance and Counselling, 49*(3), 435–444.

Bamforth, K., Rae, P., Maben, J., Lloyd, H., & Pearce, S. (2023). Perceptions of healthcare professionals' psychological wellbeing at work and the link to patients' experiences of care: A scoping review. *International Journal of Nursing Studies Advances*, *5*, 1-21.

Barnett, J. E., Johnston, L. C., & Hillard, D. (2006). Psychotherapist wellness as an ethical imperative. In: L. Vande Creek, & J.B. Allen (Eds.), *Innovations in clinical practice: Focus on health and wellness* (pp. 257-271). Sarasota: Professional Resources Press.

Bennett-Levy, J. (2006). Therapist skills: A cognitive model of their acquisition and refinement. *Behavioural and Cognitive Psychotherapy, 34*(1), 57-78.

Bennett-Levy, J., & Thwaites, R. (2007). Self and self-reflection in the therapeutic relationship. In P. Gilbert, & R.L. Leahy (Eds.), *The therapeutic relationship in the cognitive behavioral psychotherapies* (pp. 255-281). Hove: Routledge/Taylor & Francis Group.

Berjot, S., Altintas, E., Grebot, E., & Lesage, F. (2017). Burnout risk profiles among French psychologists. *Burnout Research, 7*, 10–20.

Bowden, G. E., Smith, J. C. E., Parker, P. A., & Boxall, M. J. C. (2015). Working on the edge: Stresses and rewards of work in a front-line mental health service. *Clinical Psychology & Psychotherapy, 22*(6), 488–501.

Chye, S. M., Kok, Y. Y., Chen, Y. S., & Meng Er, H. (2024). Building resilience among undergraduate health professions students: identifying influencing factors. *BMC Medical Education, 24*(1), 1168. https://doi.org/10.1186/s12909-024-06127-1

Coaston, S. C. (2019). Cultivating self-compassion within the supervision relationship. *The Clinical Supervisor, 38*(1), 79–96.

Connelly, E. B., Allen, C. R., Hatfield, K., Palma-Oliveira, J. M., Woods, D. D., & Linkov, I. (2017). Features of resilience. *Environment Systems and Decisions, 37*, 46–50.

Cushway, D. (1992). Stress in clinical psychology trainees. *British Journal of Clinical Psychology, 31(*2), 169–179.

Delany, C., Miller, K. J., El-Ansary, D., Remedios, L., Hosseini, A., & McLeod, S. (2015). Replacing stressful challenges with positive coping strategies: A resilience program for clinical placement learning. *Advances in Health Sciences Education, 20*(5), 1303–1324.

Dose, P. E., Desrumaux, P., Bernaud, J. L., & Hellemans, C. (2019). What makes happy counselors? From self-esteem and leader-member exchange to well-being at work: The mediating role of need satisfaction. *Europe's Journal of Psychology, 15*(4), 823-842.

Duncan, S., & Pond, R. (2024). Effective burnout prevention strategies for counsellors and other therapists: a systematic review and meta-synthesis of qualitative studies. *Counselling Psychology Quarterly, 38*(3), 526–555.

Frajo-Apor, B., Pardeller, S., Kemmler, G., & Hofer, A. (2016). Emotional intelligence and resilience in mental health professionals caring for patients with serious mental illness. *Psychology, Health & Medicine, 21*(6), 755–761.

Gönültaş, M., Meydan, B., & Sağkal, A.S. (2024). The examination of the counseling supervision effect on personal and professional development of first-time supervisees. *International Journal of Psychology and Educational Studies, 11*(4), 342-356.

Goodyear, R. K., & Sera, H. (2022). Clients' influence on psychotherapists and the treatment they provide. In: J.N. Fuertes (Ed.), *The other side of psychotherapy: Understanding clients' experiences and contributions in treatment* (pp. 295–316). Washington: American Psychological Association.

Hall, C.E., Wehling, H., Stansfield, J. South, J. Brooks, S.K., Greenberg, N., Amlôt, R. & Weston, D. (2023). Examining the role of community resilience and social capital on mental health in public health emergency and disaster response: a scoping review. *BMC Public Health, 23*(1), 2482. https://doi.org/10.1186/s12889-023-17242-x

Helmreich, I., Kunzler, A., Chmitorz, A., König, J., Binder, H., Wessa, M., & Lieb, K. (2017). Psychological interventions for resilience enhancement in adults. *Cochrane Database and Systematic Reviews, 2*. https://doi.org/10.1002/14651858.CD012527

Hopkins, A., & Proeve, M. (2013). Teaching mindfulness-based cognitive therapy to trainee psychologists: Qualitative and quantitative effects. *Counselling Psychology Kurateli, 26*(2), 115–130.

Joyce, S., Shand, F., Tighem, J., Laurent, S.J., Bryant, R.A., & Harvey, S.B. (2018). Road to resilience: a systematic review and meta-analysis of resilience training programmes and interventions. *BMJ Open, 8*(6), e017858. https://doi.org/10.1136/bmjopen-2017-017858

Justin, M., Haroon, Z., & Khan, M.A. (2023). Hardiness, coping strategies and professional quality of life among practicing clinical psychologists. *Academic Journal of Social Sciences, 7*(1), 124-136.

Kay, S.A. (2016). Emotion regulation and resilience: Overlooked connections. *Industrial and Organizational Psychology, 9*(2), 411–415.

Kleszczewska-Albińska, A. (2020). Creating a healthy work environment for the well-being of a cognitive behavioural psychotherapist. *Psychiatria i Psychologia Kliniczna, 20*(4), 283-290.

Kolar, C., von Treuer, K., & Koh, C. (2017). Resilience in early-career psychologists: Investigating challenges, strategies, facilitators, and the training pathway. *Australian Psychologist, 52*(3), 198–208.

Kunzler, A.M., Helmreich, I., Chmitorz, A., König, J., Binder, H., Wessa, M., & Lieb, K. (2020). Psychological interventions to foster resilience in healthcare professionals. *Cochrane Database Systematic Review, 7*(7), CD012527. Retrieved from: https://pubmed.ncbi.nlm.nih.gov/32627860/

Lamb, D., & Cogan, N. (2016). Coping with work-related stressors and building resilience in mental health workers: A comparative focus group study using interpretative phenomenological analysis. *Journal of Occupational and Organizational Psychology, 89*(3), 474–492.

Laverdière, O., Kealy, D., Ogrodniczuk, J.S. & Morin, A.J.S. (2018). Psychological health profiles of Canadian psychotherapists: A wake up call on psychotherapists' mental health. *Canadian Psychology / Psychologie canadienne, 59*(4), 315–322.

Li, X., Malli, M. A., Cosco, T. D., & Zhou, G. (2024). The relationship between self-compassion and resilience in the general population: Protocol for a systematic review and meta-analysis. *JMIR Research Protocols, 13*, e60154. https://doi.org/10.2196/60154

Liu, J. J. W., Ein, N., Gervasio, J., Battaion, M., Reed, M., & Vickers, K. (2020). Comprehensive meta-analysis of resilience interventions. *Clinical Psychology Review, 82*, 101919. https://doi.org/10.1016/j.cpr.2020.101919

McCormack, H.M., MacIntyre, T.E., O'Shea, D., Herring, M.P., & Campbell, M.J. (2018). The prevalence and cause(s) of burnout among applied psychologists: A systematic review. *Frontiers in Psychology, 9*, 1897. Retrieved from https://doi.org/10.3389/fpsyg.2018.01897

Milne, D. (2009). Can we enhance the training of clinical supervisors? A national pilot study of an evidence-based approach. *Clinical Psychology & Psychotherapy, 17*(4), 321–328.

Mueller, M., Kennerley, H., & Westbrook, D. (2010). *Surviving as CBT therapist.* Oxford: Oxford University Press.

Ohrt, J. H., & Cunningham, L. K. (2024). Wellness in mental health agencies. *TPC Journal, 2*(1). Retrieved from: https://tpcjournal.nbcc.org/wellness-in-mental-health-agencies/

Pakenham, K.I., & Stafford-Brown, J. (2012). Stress in clinical psychology trainees: Current research status and future directions. *Australian Psychologist, 47(3)*, 147155. https://doi.org/10.1111/j.1742-9544.2012.00070.x

Patel, M., Swift, S., & Digesu, A. (2021), Mental health among clinicians: What do we know and what can we do? *International Urogynecology Journal, 32*(5), 1055-1059.

Pereira, J.-A., Barkham, M., Kellett, S., & Saxon, D. (2017). The role of practitioner resilience and mindfulness in effective practice: A practice-based feasibility study. *Administration and Policy in Mental Health and Mental Health Services Research, 44*(5), 691–704.

Pereira, R., Pires, A.P., & Neto, D. (2024). Therapist self-awareness and perception of actual performance: The effects of listening to one recorded session. *Research in Psychotherapy, 27*(1), 722. https://doi.org/10.4081/ripppo.2024.722

Pilkington, P.D., Spicer, L., & Wilson, M. (2022). Schema therapists' perceptions of the influence of their early maladaptive schemas on therapy. *Psychotherapy Research, 32*(7), 833–846.

Posluns, K., & Gall, T.L. (2020). Dear mental health practitioners, take care of yourselves: A literature review on self-care. *International Journal for the Advancement of Counselling, 42*(1), 1-20.

Probst, T., Humer, E., Stippl, P., & Pieh, C. (2020). Being a psychotherapist in times of the novel coronavirus disease: Stress-level, job anxiety, and fear of coronavirus disease infection in more than 1,500 psychotherapists in Austria. *Frontiers in Psychology, 11*, 559100. Retrieved from https://doi.org/10.3389/fpsyg.2020.559100

Rippon, D., Shepherd, J., Wakefield, S., Lee, A., & Pollet, T.V. (2022). The role of self-efficacy and self-esteem in mediating positive associations between functional social support and psychological wellbeing in people with a mental health diagnosis. *Journal of Mental Health, 33*(6), 721–730.

Robins, T. G., Roberts, R. M., & Sarris, A. (2019). The effectiveness, feasibility, and acceptability of a Dialectical Behaviour Therapy skills training group in reducing burnout and psychological distress in psychology trainees: A pilot study. *Australian Psychologist*, *54*(4), 292-301. doi:10.1111/ap.12389

Rogers, D. (2016). Which educational interventions improve healthcare professionals' resilience? *Medical Teacher, 38*(12), 1236–1241.

Rønnestad, M. H., Orlinsky, D. E., & Willutzki, U. (2024). Exploring influences of supervision on psychotherapists' professional development: correlates across career-level cohorts. *Counselling Psychology Quarterly, 38*(2), 297–319.

Rupert P., & Kent J. (2007). Gender and work setting differences in career-sustaining behaviors and burnout among professional psychologists. *Professional Psychology: Research and Practice, 38*(1), 88–96.

Schäfer, S. K., von Boros, L., Schaubruch, L. M., Kunzler, A. M., Lindner, S., Koehler, F., Werner, T., Zappalà, F., Helmreich, I., Wessa, M., Lieb, K., & Tüscher, O. (2024). Digital interventions to promote psychological resilience: a systematic review and meta-analysis. *npj Digital Medicine, 7*, 30. https://doi.org/10.1038/s41746-024-01017-8

Schaffler, Y. Kaltschik, S., Probst, T., Jesser, A., Pieh, C., & Humer, E. (2022). Mental health in Austrian psychotherapists during the COVID-19 pandemic. *Frontiers in Public Health, 10*, 1011539. https://doi.org/10.3389/fpubh.2022.1011539

Schaffler, Y., Probst, T., Pieh, C., Haid, B. & Humer, E. (2024). Prevalence of mental health symptoms and potential risk factors among Austrian psychotherapists. *Scientific Reports, 14*(1), 3888. https://doi.org/10.1038/s41598-024-54372-7

Shrivastava, A., & Desousa, A. (2016). Resilience: A psychobiological construct for psychiatric disorders. *Indian Journal of Psychiatry, 58*(1), 38-43.

Simpson, S., Simionato, G., Smout, M., van Vreeswijk, M.F., Hayes, C., Sougleris, C., & Reid, C. (2019). Burnout amongst clinical and counselling psychologist: The role of early maladaptive schemas and coping modes as vulnerability factors. *Clinical Psychology and Psychotherapy, 26*(1), 35-46.

Summers, E., Morris, R., Bhutani, G., Rao, A., & Clarke J. (2021). A survey of psychological practitioner workplace well-being. *Clinical Psychology and Psychotherapy, 28*(2), 438–451.

Tay, S., Alcock, K. & Scior, K. (2018). Mental health problems among clinical psychologists: Stigma and its impact on disclosure and help-seeking. *Journal of Clinical Psychology, 74*(9), 1545–1555.

Toubassi, D., Schenker, C., Roberts, M., & Forte, M. (2023). Professional identity formation: linking meaning to well-being. *Advances in Health Science and Education Theory and Practice, 28*(1), 305-318.

Van Hoy, A., & Rzeszutek, M. (2022). Burnout and psychological wellbeing among psychotherapists: A systematic review. *Frontiers in Psychology, 13*, 928191. Retrieved from https://doi.org/10.3389/fpsyg.2022.928191

Volpe, U., Luciano, M., Palumbo, C., Sampogna, G., Del Vecchio, V., & Fiorillo, A. (2014). Risk of burnout among early career mental health professionals. *Journal of Psychiatric and Mental Health Nursing, 21*(9), 774–781.

Watson, T., Walker, O., Cann, R., & Varghese, A.K. (2021). The benefits of mindfulness in mental healthcare professionals. *F1000 Research*, *10*, 1085. https://doi.org/10.12688/f1000research.73729.2

Wicks, R.J. (2007). *The resilient clinician*. Oxford: Oxford University Press.

Williams, A. M., Reed, B., Self, M. M., Robiner, W. N., & Ward, W. L. (2020). Psychologists' practices, stressors, and wellness in academic health centers. *Journal of Clinical Psychology and Medical Settings, 27*(4), 818-829.

Wise, E. H., Hersh, M. A., & Gibson, C. M. (2012). Ethics, self-care and wellbeing for psychologists: Reenvisioning the stress-distress continuum. *Professional Psychology: Research and Practice, 43*(5), 487-494.

Wogan, M., & Norcross, J.C. (1985). Dimensions of therapeutic skills and techniques: Empirical identification, therapist correlates, and predictive utility. *Psychotherapy: Theory, Research, Practice, Training, 22*(1), 63–74.

Yip, S., Mak, W., Chio, F., & Law, R. (2017). The mediating role of self-compassion between mindfulness and compassion fatigue among therapists in Hong Kong. *Mindfulness, 8*(2), 460–470.

Young, J.E., Klosko, J.S., & Weishaar, M.E. (2003). *Schema therapy: A practitioner's guide*. New York: Guilford Press.

Zerban, M., Puhlmann, L.M.C., Lassri, D., Fonagy, P., Montague, P.R., Kiselnikova, N., Lorenzini, N., Desatnik, A., Kalisch, R., & Nolte, T. (2023). What helps the helpers? Resilience and risk factors for general and profession-specific mental health problems in psychotherapists during the COVID-19 pandemic. *Frontiers in Psychology, 14*, 1272199. https://doi.org/10.3389/fpsyg.2023.1272199

AUTHOR INFORMATION

Full name: Angelika Kleszczewska-Albińska
Institutional affiliation: The Maria Grzegorzewska University
Institutional address: Szczęśliwicka 40 Street, 02-353 Warsaw, Poland
Short biographical sketch: PhD in psychology, certified cognitive-behavioral therapist and schema therapist. Experienced, child psychologist. Working in the field of psychotherapy and counseling with children, adolescents, and adults. Specializes in research on repression and sensitization of emotional stimuli, well-being and burnout in psychologists and students at different educational levels. Works mostly in clinical psychology, psychology of individual differences, and psychology of emotions.