Stress Management for Counsellors and the Different Interventions to Manage Stress

by

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Abstract

The importance of developing stress management and self-care techniques is important for counsellors and health practitioners alike. We must learn to find balance in both our personal and professional lives and tune into our emotions in order to continue working long into our careers as therapists. My intent with this capstone project is to explore the root of stress and the different interventions that could be used to understand and treat it. Different theories and models will be explored to understand the root of stress and how to approach it effectively. This capstone will offer a proactive approach to stress management. My research focuses on the following subject areas; 1. The symptoms and signs of burnout to spot it before it's too late; 2. Self-care practices and techniques; 3. The contributors to increased stress levels both professionally and personally; 4. Current tools counsellors can learn and use to navigate their burnout or stress. I will work towards those goals by researching a variety of theoretical perspectives, their benefits, and limitations, and comparing them to current strategies. By critiquing those theories and their interventions, I aim to create a set of recommendations for counsellors dealing with the stressors of their work environment.

Keywords: burnout, countertransference, preconscious, transference, vicarious trauma.

Dedication or Acknowledgement

I dedicate this Capstone project to my mother. As a result of my experiences in this Master of Counselling program, I learned just how important it was to connect with my mother on a deeper level. Thank you, Mom, for being by my side through thick and thin and for raising me with strong faith in humans, as well as for showing me what unconditional love looks like. I would also like to thank my father, all my siblings, and the rest of my community for allowing me to understand the importance of education, and for their eternal optimism for my success. Lastly, I would like to acknowledge, my counselling instructors who have been supportive through the journey of my master's counselling program. They have provided me with the time and close attention in my times of research and clarification for answers when I felt stuck and became unmotivated to dig deeper at times. In addition, they encouraged me and developed my strengths in a gentle way that understood me and fostered growth. For that, I'm forever grateful.

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Chapter 1: Introduction

Given the demands of the counselling profession, counsellors inevitably encounter significant stress and emotional exhaustion. They are tasked with maintaining compassion, warmth, cultural sensitivity, impartiality, and complete presence when addressing clients' emotional and challenging concerns. As our job necessitates substantial emotional resilience to effectively assist clients, it is imperative for counsellors to prioritize their own emotional well-being and mental health.

This capstone aims to explore the root of stress for counsellors and the different interventions that could be used to understand and treat it. In this chapter, I will discuss the framing of the research, the purpose statement of the capstone and the research question. In the next chapter, I will review the literature on different theories and models to understand the root of stress and how to approach it effectively. Chapter 2 will contain a theoretical perspective, the basis for an intervention, and its benefits and constraints compared to different strategies in use at this time. In Chapter 3, I will provide a practical application of the research.

Background Information: Framing the Problem

When counsellors neglect their well-being and fail to prioritize consistent self-care practices, they become vulnerable to burnout and compassion fatigue, which can disrupt their ability to effectively serve clients. This disregard for self-care not only leads to burnout and compassion fatigue but also contributes to secondary traumatic stress (Friedman, 2017). Burnout is a significant issue within the healthcare profession, often underestimated despite its profound impact. It manifests as cynicism, decreased job performance, and diminished empathy, affecting professionals at any career stage if not addressed (Coaston, 2017; Friedman, 2017). Literature emphasizes the importance of self-care in mitigating practitioner burnout and enhancing stress

management skills. Ethically, neglecting our own needs as mental health professionals risks projecting them onto clients or hindering our ability to provide a safe and supportive environment for clients to share their experiences; ultimately, burnout can lead to clinical impairment.

According to the ACA Code of Ethics, counsellors should "monitor themselves for signs of impairment from their own physical, mental, or emotional problems" (American Counseling Association, 2014, p. 9). The ACA Code of Ethics is clear when it comes to counsellor impairment, stating that in order to protect their clients, counsellors should stop counselling while impaired and seek out methods of solving these issues such as working with peers or supervisors to work through that impairment (American Counseling Association, 2014). Impaired counsellors can cause harm to clients by interfering with the work of counselling, violating trust within the counselling relationship, and breaching ethical codes (Lawson et al., 2007). The ACA Code of Ethics notes that counsellors should take an alternative lens when it comes to reviewing the literature on impairment in order to monitor their own work for potential problems (American Counseling Association, 2014). Furthermore, the ACA Code of Ethics advises counsellors to "engage in self-care activities to maintain and promote their own emotional, physical, mental, and spiritual well-being" (American Counseling Association, 2014, p. 8).

Purpose Statement

This research intends to establish how stress management tools for counsellors could be implemented to combat overwhelm and burnout proactively. Utilizing a self-compassionate approach to self-care proves effective in recognizing and addressing signs and symptoms of burnout (Volpe et al., 2014).

Research Question

How can counsellors feel more at ease on the job and elsewhere through self-care and mindfulness? This capstone researches the necessity self-care and stress reduction in counselling and how different interventions can foster connection, integration, and emotional regulation for counsellors so that fatigue, existential vacuum, and burnout are not experienced in the long run.

Significance of the Study

This capstone aims to help reframe and redefine how we approach our relationships with stress management, focusing on the well-being of counsellors and maintaining the longevity of our careers. Typically, from a clinical manager's perspective, there is more of an emphasis on assessment and achievement at work and less importance is placed on the internal experience of counsellors. Sometimes, there is no way around prioritizing self-care goals and overall well-being. The very structure of mental health work is focused on measuring achievements and being of service to others struggling with stress and other mental health issues. I aspire to provide a framework to shift the priority from routine work into a more holistic view of the counsellor's internal experience and connection to those in their community.

Theoretical Framework

The theories this capstone will explore are Psychoanalysis, Existential, and Cognitive behaviour therapy theories, with applicable interventions. I will go in-depth into all of them in Chapter 2, exploring how to apply those theories to manage the counsellors' stress and how applicable they are.

In psychoanalysis theory, the unconscious aspects of personality are considered to exist, and it is explained that a human being's volitional instincts make him or her struggle with balancing the various forces within his or her psyche (Munteanu, 2019).

Existential theory contends that anxiety arises from a lack of confidence in the ever-evolving meaning of life and in one's place in the universe, which encompasses the material world, the "world" of interpersonal connections, and one's relationship with oneself (May & Yalom, 1995).

In Cognitive Behaviour Therapy, clients' interpretations and attributions of their actions, ideas, pictures, self-statements, and associated processes lead to difficulties. (Kazdin & Wilson, 1978).

Positionality Statement

Stress management is critical to a counsellor's professional and personal life. As a counsellor, I have learned that the nature of the work can be emotionally demanding and challenging. By implementing self-awareness, self-care, support networks, and effective coping strategies, counsellors can better manage the emotional demands of their work and their problems and provide the best possible support to their clients.

In conclusion, effective stress management is a continuous journey. It is essential to prioritize self-care, maintain boundaries, seek support, and continually reflect on your well-being. Doing so can provide better care for your clients and ensure your mental and emotional health.

Definition of Terms

- **Burnout**: Burnout is when one feels empty, psychologically spent, unmotivated, and beyond caring. Burnout victims frequently give up on making improvements in their circumstances. If feeling overwhelmed by obligations is what extreme stress feels like, then burnout is the feeling of being completely dried out (Ruotsalainen et al., 2015).

- **Countertransference**: the counsellor's unconscious or conscious responses to their client and their client's transference. The counsellor's own psychological needs or internal conflicts bring about these feelings. They may be inadvertently revealed in the counselling process or consciously done so, or they may remain unexpressed (Heiman, 1950).

- **Preconscious**: This describes something that is not conscious at the moment but has the potential to become conscious at any time (Hermans et al., 2006).

- **Topographic Model**: Freud's topographic model of the mind, suggests that the mind includes three specific regions: conscious, preconscious, and unconscious (Goff, 1990).

- **Transference**: The redirecting of feelings about one person onto another person. In counselling, this generally occurs when a client transfers their feelings about someone else in their life onto their counsellor (Klein, 1952).

- **Vicarious Trauma**: This is the result of being exposed to trauma that you did not personally experience. You may have heard about it from another person indirectly (Raunick et al., 2015; Sprang et al., 2019).

Chapter Summary

In this chapter, I discussed the importance of stress management and self-care for counsellors in their personal and professional lives. In the next chapter, I will review the literature on some theories and interventions from different points of view and the difference in their applicability.

Chapter 2: Theoretical Frameworks & Literature Review

In this chapter, I will review the literature on therapist stress management including the different theories and interventions. The theories and interventions that will be discussed are the following: Psychoanalytic, Existential, culturally responsive, and socially just (CRSJ) framework, Solution-Focused Brief Therapy (SFBT), Narrative Therapy, and Cognitive Behavior Therapy (CBT). In this section, I will provide a description of these theories/frameworks and interventions, with an emphasis on self-care, purpose, connection, and relationship.

Psychoanalysis Theory

Psychoanalysis, originating in the 1800s through the work of Sigmund Freud (1856-1939), is renowned for its foundational role in the field of counselling and psychotherapy. It posits a deterministic perspective, contending that events are not random but rather determined and constructivist. Psychoanalysis serves as the cornerstone of modern counselling and psychotherapy, with subsequent theories and approaches building upon its foundations to develop more sophisticated techniques and interventions (Munteanu, 2019). Key concepts within psychoanalysis include:

- personality structure;

- The topographic model (unconscious, preconscious, and conscious);

- The structural/functional model: id, superego, and ego;

- Instincts/innate drives: libido or sexual/life instinct (Eros) and death instincts;

- Analysis of resistance;

- stages of psychosexual development (oral, anal, phallic, latency, genital);

- free association (clients self-observation);

- Interpretation (such as dream interpretation);

- Transference and countertransference;

- Oedipus complex;

- Anxiety (realistic, moral, neurotic);

- Defense mechanisms.

Psychoanalysis underscores the presence of unconscious elements within the personality, positing that individuals are propelled and guided by their unconscious instincts. This dynamic within the psyche presents challenges in achieving equilibrium (Munteanu, 2019). Psychoanalysis acknowledges the intricate interplay between consciousness and unconsciousness, the inherent tension between instinctual drives for gratification and moral constraints, as well as the complex interaction of life and death energy forces. The theory aims to elucidate and address such phenomena (Munteanu, 2019).

Psychoanalytic Theory to Counselling

For psychoanalysis to be successful, there should be an increase in the client's self-awareness and a stronger understanding of what is motivating their behaviour (Jung, 1951, p. 3). Psychoanalysis delves into the shifts of unconscious drives, motivations, and fantasies. Enhanced insight enables individuals to navigate these fluctuations, leading to positive behavioral changes as a natural consequence (Cramer, 2000; Westen, 1998). Freud proposed that by identifying early conflicts and traumas, clients could grasp and incorporate their connection to present-day functioning.

In psychoanalysis, it is important for the analyst to remain attentive and allow the client to engage in the process of self-observation. That process begins with free association, in which the client discusses whatever comes to mind as the analyst is actively listening and paying attention to the client's verbal and non-verbal cues, any change to their emotional responses, and

any omissions and incongruities. As a result of this process, themes and patterns of psychological

functioning are able to freely emerge (Munteanu, 2019). We then move into analysis of

resistance, during which the client is resisting therapy either by directly opposing the analyst or

by actively preventing self-observation. The analyst assists the client in this process by reflecting

that resistance back to them and bringing any possible unconscious factors into consciousness

(Munteanu, 2019). Next, there is the examination of transference, where the client unconsciously

attributes their suppressed emotions regarding others in their life onto the analyst, who assumes a

neutral stance. This approach allows the client to replicate their past relational dynamics,

fostering self-awareness and understanding, which are then scrutinized before gradually

resolving the transference (Munteanu, 2019). Eventually where we arrive is increased insight as

a result of free association, resistance and transference, allowing clients to see their current

situation from a different perspective and find the motivation to change their behaviours in a way

that will move them forward.

     A therapist can use psychoanalysis to work through their own stress by engaging in self-

analysis, which involves exploring their unconscious thoughts, feelings, and motivations. By

gaining insight into the root causes of their stress, the therapist can develop a deeper

understanding of themselves and their reactions. This process can help them identify patterns of

behavior that contribute to their stress and work towards resolving underlying conflicts.

Additionally, a therapist can use psychoanalytic techniques such as free association, dream

analysis, and transference to gain insight into their own emotional processes and work through

unresolved issues. Through this introspective process, the therapist can develop a greater sense of

self-awareness and resilience, which can help them better manage their stress both personally

and professionally.

Existential Theory

Existentialism is renowned for its focus on the authentic self and its exploration of fundamental questions regarding human existence, including themes such as anxiety, isolation, loneliness, despair, and grief (Munteanu, 2019; Rowan, 2017). Within existentialist thought, psychopathology originates when individuals begin to experience existential anxiety, existential guilt, and a sense of existential vacuum or valuelessness (Munteanu, 2019).

An example of this could be seen in a counsellor who is burnt out, experiencing significant stress and is impaired in their ability to work. They may begin to question the meaning and purpose of their life or their work. They may find themselves grappling with existential anxiety or dread about the uncertainty of the future and the ultimate meaning of their existence. This could be a result of their work and feeling an inability to help clients make changes in their lives or perhaps something came up in their life that has them contemplating their mortality. The counsellor could also feel remorse or blame themselves for not living authentically or not aligning their life with their true values. They may feel a sense of responsibility for their dissatisfaction or recognize opportunities that have come and gone. This could lead to a sense of emptiness – feeling like their life lacks purpose or that their work no longer brings any meaning to it. Existential therapy aims to explore these issues to help the counsellor confront and address the underlying existential concerns.

Existentialism says we can become self-aware, and we have free-will, which brings with it a certain responsibility (Munteanu, 2019). Under the right circumstances, we can make meaning out of our existence; people can expand their self-awareness and comprehend their own mortality; to achieve full humanity, individuals must seek meaning in their existence through the

creation of something that enriches life, engaging in direct experiences, and acknowledging certain immutable aspects of fate (Munteanu, 2019; Das, 1998).

Existentialists assert that as humans, our pursuit of meaningful connections with others imbues our lives with purpose and significance (Munteanu, 2019). This quest for meaning renders anxiety an inherent aspect of human existence, compelling us to adapt and thereby gain insight and enlightenment. Within Existential Psychotherapy, personality development unfolds through three distinct modes: our external environment (Umwelt), our interpersonal interactions with others (Mitwelt), and our internal relationship with ourselves (Eigenwelt) (Munteanu, 2019).

Existentialist Approach to Counselling

As previously noted, purpose and meaning serve as guiding forces in our lives, preventing us from succumbing to nihilism and a sense of meaninglessness. Existentialists like Viktor Frankl, Rollo May, and others argue that we possess the agency to choose our actions, shape our destinies, and realize our fullest potential. Existential therapy, focusing on the present, aids clients in understanding and deriving meaning from their own suffering (Munteanu, 2019).

Within the existential framework, we grapple with universal experiences of suffering, guilt, and impermanence (Das, 1998). Although these experiences can destabilize or destroy the patterns of meaning we have already established, they also provide new areas of meaning, in this context, the logo therapist endeavors to assist individuals in discovering the meaning of their lives, not by offering direct instruction, exhortation, or preaching, but through engaging in a process of Socratic dialogue. (Das, 1998).

Viktor Frankl created the psychotherapy modality known as logotherapy. In logotherapy, the term "logos" denotes meaning or purpose, highlighting the main focus of this therapeutic

method. According to Frankl, people are driven by a "will to meaning," which is the need to find and create significance in life (Frankl, 1984, p. 125). Logotherapy, rooted in Frankl's existential principles, enables individuals to discover meaning and purpose, recognizing our unique human capacity to perceive meaning. This approach offers clients benefits in terms of the correlation between finding a sense of meaning in life and their psychological or physical well-being (Schulenberg, 2008). Frankl proposed a four-step process for this type of work (Frankl, 1984, p. 127), it follows below:

1. De-reflection: assisting clients to divert their attention from the immediate problem;

2. Attitude modulation: viewing predicament from a different perspective;

3. Creating an openness to new meanings, and;

4. Making new commitments and pursuing new goals.

Frankl (1984) states that clients can connect with new sources of meaning and find their own resources within them to get there (Das, 1998). Socratic dialogue using their own words, "the client is guided through a journey of self-discovery using this tool in logotherapy" (Frankl, 1984, p. 125). The absence of meaningful goals and meaningful interactions with others frequently leads to feelings of boredom and a sense of futility in life. Therefore, it is essential to cultivate values and establish profound connections with people in order to discover meaning and purpose in life.

In order to find meaning and purpose, one has to "be able to fight resistance and accept anxiety in the process of treatment" (Frankl, 1984, p. 125). Existential therapy works on resistance to change and learning from experience, which actively working through the self-imposed obstacles that prevent us from learning so that we can find room for acceptance of our reality.

Noel Burch (1976) introduced the skills-learning process, a technique designed to aid individuals resistant to change in acknowledging and embracing their current challenges, and in discovering or forging a new purpose, thereby motivating them to strive towards their new goals.

During the initial phase of the skills-learning process, the therapist listens attentively and clarifies the client's worldview, gaining insight into whether the client perceives themselves as an active agent or a passive recipient in their life. This phase illuminates both the client's and therapist's assumptions, fostering awareness of the underlying issues (Adams, 2016).

In the second phase, clients explore their existence within the context of time, space, and relationships, recognizing connections between themselves and various elements of their environment (Adams, 2016). This newfound awareness may evoke feelings of anxiety, frustration, or anger as clients confront the limitations of their perspectives and the responsibility to initiate change (Adams, 2016).

The third phase facilitates a shift in the client's thinking and emotional experience as they take the courageous step of letting go of their old self and previous patterns of thought (Adams, 2016).

Finally, in the fourth phase, clients emerge stronger and more resilient, perceiving the world and their surroundings from a renewed perspective. They gain confidence, attentiveness, and inner strength, experiencing reduced anxiety and frustration (Adams, 2016).

Existential therapy offers therapists a framework to navigate their own stress and existential dilemmas effectively. Therapists can explore existential themes such as meaning, freedom, isolation, and mortality, helping them gain a deeper understanding of their values and authentic self. By embracing authenticity, therapists can alleviate the pressure of maintaining a facade of perfection, fostering a more genuine and fulfilling approach to their work. Additionally,

therapists can find meaning in their profession, viewing their work as a contribution to a larger

purpose. Through personal growth and the cultivation of existential resilience, therapists can

confront their fears and anxieties, developing the psychological fortitude to cope with stress and

adversity. Overall, existential therapy provides therapists with tools to not only address their

stress but also enhance their self-awareness, leading to more empathetic and effective therapeutic

practices.

Similarities and Difference of Psychoanalysis and Existential Theory

The psychoanalytic perspective elucidates the view of human nature as the interplay

between instincts for life and death; how we navigate this tension dictates whether we thrive in

life through embracing growth and creativity, or decline through succumbing to self-destructive

tendencies and aggressiveness (Munteanu, 2019). The existentialist perspective on human nature

presents an optimistic outlook as it states that individuals possess the freedom to make choices,

and when provided with suitable opportunities, we can discover values and meaning in our

existence. This is facilitated by our ability to broaden our self-awareness and grasp the concept

of our mortality. From birth, we carry the potential to achieve full humanity and derive

significance from our existence (Munteanu, 2019).

While the Existentialist view promotes freedom, counsellors need to establish boundaries

to prevent burnout or impairment in their work. This also means recognizing the importance of

setting limits on workload, managing client caseloads, and establishing self-care practices to

avoid burnout. Counsellors may be motivated to align their professional work with personal

values to derive meaning from their work. Furthermore, mindfulness practices align with the

Existentialist perspective by encouraging us to be present. Mindfulness is an effective tool for

counsellors to manage stress and connect with the present, while preventing themselves from being overwhelmed on the job.

The Culturally Responsive Socially Just Framework

The CRSJ is defined as a conceptual framework that explains how cultural identities, social locations, lived experiences, and sociocultural contexts can affect the relationship between a counsellor and a client, how cases are conceptualized, how counselling goals are co-constructed, and what interventions are implemented as part of collaborative change processes (Collins, 2018). The CRSJ Framework emphasizes the significance of social identity and culture in shaping individuals' mental health, underscoring the need to comprehend these elements comprehensively for assessment and diagnosis (Collins, 2018). This framework also highlights the multicultural nature of counselling, emphasizing the inseparable connection between culture and counselling practice (Collins, 2018). Moreover, it shifts the focus from traditional individualistic psychological theories to acknowledging and embracing the sociocultural contexts of individuals' lives (Collins, 2018).

Recognizing the pervasive influence of culture in society and its impact on individuals internally and externally enables an understanding of how internalized oppression may affect individuals based on their cultural or group affiliations. Integrating these factors into counselling acknowledges their role in shaping individuals from diverse backgrounds and cultures, fostering cultural mindfulness and social justice in counselling practice. Culturally aware and socially just approaches also enhance counsellors' ability to develop comprehensive case conceptualizations (Collins, 2018).

Cultural competence can act as a protective factor against burnout by fostering positive connections with clients. A counsellor who is culturally aware is better equipped to navigate

cultural differences, reducing the potential for misunderstandings and frustration that could

contribute to burnout. This can also serve to create a stronger sense of trust and connection

between counsellors and clients, which can make counsellors feel more satisfied in their work.

Furthermore, engaging in socially just work aligns with most counsellors' personal values of

fairness, equity and diversity. Integrating your personal values into your professional life can

bring more meaning to your work and prevent burnout.

Cognitive Behavior therapy (CBT)

CBT is an approach to therapy that is effective when difficulties arise from clients'

perceptions and attributions of their behaviours, concepts, images, self-statements, and related

processes (Wilson & Kazdin, 1978).

The use of CBT and its different applications is one of the few evidence-based

approaches for stress management and other mental health disorders such as depression and

anxiety. For example, Amer et al. (2023) chose CBT interventions and brought them into

interactive formats by integrating gamification. One example is an Arabic mobile application

called Sokoon – meaning relaxation and relief. The computerized CBT intervention gamified

app Sokoon has the following features: relaxation, gratitude, self-compassion, problem-solving,

social skills, behaviour activation, and cognitive structuring (Amer et. al., 2023). In Arabic,

sukoon denotes peace of mind. Customers' sense of security and protection is strongly depicted

by the brandmark, which combines two human hands to express peace of mind.

This study has shown the app to be practical and has received positive reviews from

users; those users reported that feelings of anxiety and sadness were reduced. In this study, the

authors found that Sokoon was found to reduce the rate of depression, anxiety, and stress

disorders (Amer et al., 2023). Mobile-based health interventions have become easily integrated

into participants' lives, thus future treatments based on this intervention could be effective as they tie-in with more computerized-CBT interventions (Amer et al., 2023). Studies on cognitive behavior therapy interventions using games have demonstrated potential benefits for alleviating symptoms in mild to moderate cases of Diagnostic Autism Spectrum Disorder. The incorporation of gamification into community health education holds promise in capturing public interest and attracting gamers to engage with health promotion materials during their leisure time (Amer et al., 2023). A gamified app outperforms the non-gamified counterpart in terms of self-reported resilience, as well as other indicators of well-being and anxiety reduction. This provides evidence that the incorporation of gamification can effectively promote positive health outcomes, including the reduction of symptoms associated with depression and anxiety (Amer et al., 2023). One downside to computerized health interventions through the use of CBT is that they often show low adherence levels. As a result, it's important to consider user adherence when developing psychotherapeutic intervention tools to strengthen remote support and bonding (Amer et al., 2023).

Applying elements of cognitive behavior therapy in internet-based interventions (IBIs) has been found to be an effective approach to treating depression and other stress disorders; two major CBT components- behavioral activation (BA) and cognitive restructuring (CR) are found to affect the patterns of symptom changes and dropout rates (Brose et al., 2023). Regardless of the sequence of the two components, in online interventions, behavioral activation and cognitive restructuring have been deemed to be most effective due to the dysfunctional cognitions found in individuals with depression and other stress disorders; it is suggested that maladaptive schemas can trigger a depressed mood, leading to unfavorable consequences for both motivation and behaviour. (Brose et al., 2023). The primary objective of treatments is to address dysfunctional

cognitions. Regarding depression, behavioral and functional perspectives underscore the crucial role of reinforcement, particularly the lack of positive reinforcement in individuals experiencing depression (Brose et al., 2023). The network perspective on depression contends that ongoing and simultaneous causal interactions among dysfunctional thoughts, negative emotions, and a deficit in positive reinforcements are prevalent in depression. Considering the interconnected relationship between thoughts, feelings, and behavior, it becomes feasible to break the cycle at various stages. By disrupting the downward spiral, there is a likelihood that symptoms will diminish (Brose et al., 2023).

Therapists can use CBT techniques to manage their own stress effectively. By identifying and challenging negative thoughts that contribute to stress, therapists can reframe their thinking to be more balanced and realistic. Additionally, engaging in stress-reducing activities such as mindfulness, exercise, and hobbies can help manage stress levels. Setting clear boundaries between work and personal life, seeking support from colleagues or supervisors, and practicing stress management techniques like deep breathing or meditation are also beneficial. By applying these strategies, therapists can improve their mental well-being, prevent burnout, and enhance their ability to support their clients.

Solution Focused Brief Therapy (SFBT)

While Solution-Focused Brief Therapy (SFBT) does acknowledge individuals' problems to identify solutions, its primary focus lies in highlighting the importance of solutions and strengths rather than dwelling on the problems themselves. Unlike traditional therapy approaches, SFBT does not necessitate delving deeply into an individual's childhood or past experiences; instead, it concentrates on the present moment during sessions to pave the way for a future where the individual's issues have less impact on their life (Franklin & Hai, 2021). The

objective of SFBT is to identify and implement solutions tailored to the specific problem or problems the individual is currently confronting.

SFBT is particularly effective for individuals facing typical to high levels of life stressors but is not recommended for severe mental health conditions like major depressive disorder or schizophrenia. (Franklin & Hai, 2021). One common technique in SFBT is the miracle question, which Kayrouz and Hansen (2020) say gives clients an opportunity to envision the future they want for themselves. The use of this intervention is beneficial because gives the client a chance to identify their end goal and describe in great detail how the individual's life will change by the time they have reached their end goal. Another technique, called scaling questions, is when we ask clients to use a numerical scale ranging from 1 to 10 to rate their priorities, goals, satisfaction, issues, and hope, and that also gives the counsellor a chance to assess their client and to learn what their client's motivation-level is like for the specific end goals being discussed. The research of Kayrouz and Hansen (2020) focuses on adapting this question to cultures where a miracle might not fit into their worldview. Instead of a miracle, they adapted this question to focus on the client's strengths, which keeps it in line with the core tenets of SFBT, asking about how they bounced back from adversity or difficulties in the past. It's also similar to an exception question, which is another common technique within SFBT. The authors suggested that counsellors think of many different variations of this type of question so that they can best align with clients from a diverse range of different cultural backgrounds.

Narrative-Deconstruction and Storytelling Techniques

Narrative therapy harnesses the innate human inclination towards storytelling, positioning the client as the expert capable of unveiling their issues through narrative expression and the exploration of associated emotions (White, 1989). Its aim is to unearth opportunities for growth,

meaning-making, and enhanced self-awareness (Ackerman, 2017). Guiding individuals towards

healing and personal evolution, narrative therapy centers on the stories they construct and their

perceptions thereof, empowering them to navigate through adversity utilizing their own strengths

and sense of purpose. Characterized by respect and absence of blame, narrative therapy regards

the individual as the authority, enabling them to disentangle their problems from their identity

and perceive them as challenges with solutions (Ackerman, 2017).

Narrative therapy can be a powerful tool for therapists to navigate their own stress and

challenges. By employing narrative techniques, therapists can externalize their stressors, viewing

them as separate from themselves and thereby gaining a more objective perspective. This process

can help therapists identify and challenge unhelpful narratives they may hold about their stress,

such as feeling inadequate or overwhelmed. Additionally, narrative therapy encourages therapists

to explore alternative, more empowering narratives that can shift their relationship with stress.

Through this process, therapists can develop a deeper understanding of their own experiences,

cultivate resilience, and find new ways of coping with the demands of their profession.

Formal Assessment

In counselling, formal assessments are tools counsellors use to gather structured and

standardized client information. These assessments aid in understanding clients' experiences,

identifying specific issues, and informing the counselling process. For instance, if a client

initially shows signs of depression but, over the course of the first four sessions, experiences a

worsening of symptoms, the counsellor must reassess and adjust the client's priorities

accordingly (Gottfredson, 2003). An example of such an assessment is the Stressful Life Events

Questionnaire (SLESQ). The SLESQ is a self-report measure with 13 items. This questionnaire

asks respondents to provide the frequency of those stressful events, the duration of them and any

other specific details of those events that would have added to their stress, such as hospitalization. Essentially, the counsellor needs to reevaluate the therapeutic approach's effectiveness in response to newly emerged or exacerbated symptoms. Utilizing formal assessments ensures an accurate evaluation of symptoms, enhancing the counsellor's capacity to conceptualize the client's case appropriately and in a therapeutic manner (Prince & Heiser, 2000).

Therapists can use this information to assess their own level of stress by applying similar principles to themselves. Just as they would reassess and adjust their approach with a client showing worsening symptoms, therapists can reflect on their own experiences and symptoms to gauge their stress levels. By regularly assessing their stress levels, therapists can better understand how external stressors may be impacting them and make adjustments to prioritize self-care and well-being. It can also help them recognize when they may need additional support or resources to manage their stress effectively.

Chapter Summary

In this chapter, I reviewed the literature on some theories and interventions that might be used to address stress management for counsellors: psychoanalytic theory, Existential theory, CBT theory, Narrative Therapy, Solution brief therapy (SFBT), and Culturally Responsive and Socially just Framework (CRSJ) framework.

Chapter 3: A Stress Management Toolbox for Counsellors

Discussion

Over the course of my research for this project, I have come to appreciate managing my own stress and self-care even more than previously, especially due to the circumstances in my personal life at the time I am writing this. This project came along at a time when I myself was becoming burnt out. So, the research was a helpful reminder and creating the application section for this chapter helped give me a compass to guide my way out of burnout. I have come to appreciate just how broad our field is in terms of approaches and techniques. In the course of my research, I covered psychoanalysis, existentialism, Cognitive-Behavioral Therapy, Narrative Therapy and Solution-Focused Brief Therapy, among others. As it pertains to stress management, I find myself connecting with CBT and SFBT given their practical applications and solution-oriented styles. Narrative Therapy, though, is perhaps what has given me the courage to continue in my own research and work. The way in which Narrative Therapy externalizes problems and takes a non-blaming approach to help us find our purpose. As the literature indicates, Narrative Therapy works well with stress reduction and self-care. With that said, Existential Therapy, with its focus on helping clients find meaning in their suffering, is also a useful approach when it comes to burnout and stress reduction. Just as with anything else in our field, there are many approaches that are beneficial for our clients – it is important to find the approach that you connect with as a counsellor.

In terms of limitations to the research base, some of the research I included in this project is quite old and the field of counselling has evolved significantly since it was completed. In addition, not all the theories discussed here have strong empirical support, even though they have been historically very significant to the development of the counselling field. Furthermore,

although I have done my best to include work from outside North America, it is possible that the

research discussed here is not applicable across cultures and certain cultural biases may be

present.

Further research might explore how this work does translate to other cultures, building

off what has been done here, specifically to do with the Culturally Responsive Socially Just

Framework. Further research could also explore how the approaches discussed in this project

might be integrated, given the popularity of the eclectic approach.

Application

I wanted to create a toolbox for counsellors to use as part of their daily practice, or for

practitioners who are burnt out to reflect on to see where they can find areas in their life that they

might be able to adjust and decrease the stress they are facing or simply find their way out of the

overwhelm they currently find themselves in.

This is not meant as a cure-all for burnout or stress, but it is a launching point for each

individual clinician to find the self-care practices that work best for them. My hope is that each

counsellor will explore what self-care means to them and these ideas will help decrease stress

levels.

We start with self-care, which is such a uniquely individual practice. At its core, I like to

think of self-care as involving a few key areas: Sleep, exercise, nutrition, average daily screen

time, and social support. These are areas I assess for as part of my own counselling practice

when I first meet a new client. I want to know how they would rate each of these in their own life

and get them to explain their rating on a scale of 1-10 (1 being terrible, 10 being amazing). For

low scores, I ask them to describe how it could be better and whether or not it is something they

want to change in their life. For high scores, I ask about what habits help maintain that. What is

interesting is that despite these being fairly generic subjects, each answer is unique to each person. When some people talk about exercise, they will mention low-intensity things like going for walks, for others it means intense exercise like going to the gym, and of course there are answers in between, answers that involve social connection and answers that involve solitude. Everyone thinks of self-care in their own way. Therefore when you hear prescriptive ideas around self-care that you do not connect with, there is no need to force those into your life. I personally find exercise is a great way to connect with my body and mind. But for others it might not be an effective tool. My hope here is that when you are using this toolbox that you will not try to put a force-feed yourself self-care strategies. Find those strategies you connect with and implement those into your life in a way that fits.

Self-care, says Bush (2015), is an ethical imperative for counsellors. Ignoring or not making self-care a priority puts you at risk for additional stress or burnout. Additionally, you may not be as capable of holding space for your clients, especially those suffering through trauma. Your clients will not receive the support they need and you may face further emotional, mental and physical consequences as a result of vicarious trauma.

Bush (2015) notes the difference between macro and micro self-care. Her work focuses on micro self-care that therapists can engage in during the course of their workday in order to ground, energize and relax, which I think are three important components of anyone's self-care toolbox.

Bush briefly mentions macro self-care in her work, referring to it as more over-arching aspects of a self-care toolbox. I want to expand more on this as part of our self-care strategy. Some of the components of macro self-care she discusses are exercise, hobbies, relationships and nutrition.

Bush (2015) calls exercise a cure for stress, depression and many other presenting concerns in counselling. Exercise can take many forms. It does not have to be a high-intensity workout. It can be a walk in your neighbourhood to start your day. It can be riding a bike to work on occasion. There are varying levels of exercise that can help relieve stress and act as protective factors towards burnout. In our toolbox, movement is a daily activity to help regulate our bodies. We challenge counsellors to find the level of movement that suits their routine and their body. For some of you that might mean a spin class, for others it will mean a walk around the block. Do not judge your exercise levels, instead focus on finding the activity that brings you peace of mind. However, if the activity is not bringing your stress levels down, it might be time to think about shifting your perspective into trying something different.

Hobbies can enrich your life and connect you to others all around the world. It is sometimes difficult to include your hobbies as part of your day-to-day life but when appropriate, spending an hour or even less after your workday on your hobby can help bring balance to your life. You could even share your hobbies with your family, partner or friends (or take an interest in their hobbies to foster stronger relationships). As part of your toolbox, include a hobby or hobbies that you think could be part of your day. Not everything in your toolbox needs to be done each day, but it is available when you are feeling stressed or disconnected from the world around you and need a moment to place yourself in a different context.

Relationships have a healing power says Bush (2015), but they can also bring tremendous stress and anxiety to our lives. It's important to invest in your relationships, especially those that bring stability to your life. According to Bush (2015), satisfying mutual connections outside of work allows counsellors to better create powerful therapeutic relationships on the job. It might also be helpful to cut out the negative relationships from your life. That might not always be

possible, and when that is the case, some form of therapy – be it couples counselling or family counselling – might be appropriate to help strengthen those relationships or prevent them from causing further stress to you and those around you.

According to Bush (2015), being aware of how your body responds to certain aspects of your diet, such as sugars, gluten, meat and dairy, can help you take control of your diet and find the right path for you. Ignoring this is an easy way to find yourself in poor health. By connecting with your body and understanding what helps it operate (and what shuts it down), you can keep yourself in good health and your body will thank you.

What I love most about self-care is how unique, individual and creative it can be. According to Bradley et al. (2013), the creative process itself can be soothing and energizing. Their work refers to a flow state that creators find themselves in when they fully engaged in creativity. When this happens, any anxieties or fears fall by the wayside. The creative process becomes all-encompassing, which makes it the perfect form of self-care for counsellors.

Flow can come from all sorts of creation. It could be making some form of art or playing music, it could be writing or spoken-word poetry, it could be playing – maybe video games, card games or board games or even free play. There are endless possibilities for the creative process. No matter what you create, it is how you engage yourself in that process that can serve as a coping mechanism (Bradley et al., 2013).

Although some counsellors might not think of themselves as creative individuals necessarily, I would challenge that notion. Bradley et al. (2013) note that counselling itself is a creative process. You are creating a relationship with someone, creating connection, creating opportunities for growth, creating space for processing difficult emotions. You are a creative, too, and you put lots of time and effort into your creative process at work. I challenge you to find

something creative outside of the workplace if you have not already to engage in. While your art might not wind up in a museum or your music will not be played on the radio, that does not make it any less of a tool for stress relief. Bradley et al. (2013) say that releasing stress should be the primary goal rather than judging your creativity. Find joy in the creative process – find your flow state. Find the creative activity that melts your worries away and immerse yourself in it.

This clashes somewhat with Bush (2015) who refers to some of these things as distractions that provide only temporary relief. The author mentions video games in the same breath as recreational drug use. And certainly, there are ways people can play video games in unhealthy ways – but gamers also create communities and connect with one another. Research by Colder Carras et al. (2018) found that video games can relieve stress and provide an opportunity for connection. This was especially the case during the pandemic when in-person social connection was eliminated overnight. Research by Ballard and Spencer (2023) focused on the time period at the start of the pandemic and found that video games were an important vehicle for social connection. Some games provide more opportunities for social connection than others, but generalizing all games as simply distractions misses the holistic view of what they can be.

Research by Skovholt and Trotter-Mathison (2016) identified some significant professional stressors that participants in their research faced, such as clients who made their own competency feel challenged, feeling as if therapy was stuck or frozen with a certain client, a peer relationship that experienced a breach, and personal events or crises that had a negative effect on their ability to work.

They said that despite these stressors, participants in their study became more competent in their roles as counsellors over time, alleviating some of them. For example, they were able to learn how to set boundaries and establish limits on their roles as helpers, including elements such

as how their practice was structured or the size of their caseload or the amount of responsibility they took on. Such limits or boundaries gave counsellors more control over their work lives, making them better able to handle more difficult cases when they came about. The research also found that counsellors became more confident in their abilities over time and less likely to feel like their competency was being challenged. Overall, they noticed feeling less anxious about their performance as a counsellor. Notably, the experience of endings with clients as those clients moved on or simply never came back became seen as more of a natural part of the work.

Participants noted that having peer support was crucial to their development, particularly at the start of their career. Accessing your peer network for support could be as easy as calling a colleague to check in on them or meeting a peer for lunch or coffee, or going for a walk with one of the therapists who works in your office during a break. Connecting with one another and supporting one another is a significant part of your development and could act as a protective factor when dealing with major stressors. That ties in well with another element of a positive work environment that this research found to be key to alleviating stress or avoiding burnout, and that's peer relationships that enrich your life. One other protective factor that the authors noted from their research was having multiple roles within their work, such as different types of clients or different types of sessions or taking on responsibilities within a professional association, or within your office. One example could be volunteering to organize a quarterly social event for therapists at your group practice or agency. This additional role could bring energy to your day and also help build strong relationships with your peers.

Skovholt and Trotter-Mathison (2016) found a number of protective factors amongst their participants that helped them through stress and prevent burnout. Some of those protective factors, interestingly, included actively engaging in stressful professional issues. By taking on

these challenges, they showed themselves that they had the ability to manage future situations. That experience also gave them the perspective to be able to view new challenges in a more positive or hopeful way. This made it easier for them to reach out to their peers or look for resources to help them through these difficult situations. Similarly, another protective factor was the way in which they resolved their own personal difficulties. By acknowledging these issues rather than ignoring them, participants in this research said that they found themselves more aligned with their clients. Furthermore, being lifelong learners made participants better able to handle stressors. Not only did the knowledge they gained from learning they took on throughout their work lives help them with their cases at work, it gave them energy when they saw that learning have an impact on the job. This does not mean you have to go out and spend thousands of dollars on trainings or courses, rather it is a sign that occasionally reading about your work – magazines, books, online articles, or watching videos online to learn from other practitioners, can help you handle future difficulties.

The research also found a number of ways in which the participants nurtured themselves, such as through their personal lives or activities that restored their body and mind. There was no general theme among the participants' activities outside of being restorative and giving them a distraction from stressors they face at work. The aim of these activities was to provide an opportunity to connect with their social network and reconnect with themselves. There is no use in filling in the blanks for what these activities were – they are unique and individual to each person. The point here is to find what fills your cup and include it in your life. Find the people who fill your cup and make more time for them. Find what makes your stressors melt away and make it a priority in your life. It is an ethical imperative. What is more, the authors found that

strong relationships that included intimacy and support were the most nurturing and healing aspects of their lives.

What I found most interesting from Skovholt and Trotter-Mathison's (2016) work was the self-care action plan they created. It's a seven-step action plan that helps counsellors assess where they are at in terms of the balance in their lives between self-care and other-care. In Step 1, you assess the stress level of your work, let's put that on a scale of 1-10 (1 being low, 10 being high). In Step 2, you assess your balance between self-care and other-care on a scale of 1-10 (1 being poor, 10 being amazing). In Step 3, you assess your self-care from a professional standpoint on a scale of 1-10 (1 being non-existent, 10 meaning it could not be better). In Step 4 you assess your personal self-care on a scale of 1-10 (same scale as previous). And in this particular step, they ask that you consider several different realms in which you could be caring for yourself – your emotional self, financial self, humourous self, loving self, nutritious self, physical self, playful self, priority-setting self, recreational self, relaxation self. In a therapy session we can pause with a client, at this part of the action plan and ask them to think of one way they could nurture themselves in each of those specific areas. Examples could be saving for retirement or watching a tv show you enjoy, eating healthy, or going for a hike.

Once the client has done that, we can continue to Step 5, reviewing positive self-care strategies and reminding the client of what drains their cup. It is the latter part of this article Skovholt and Trotter-Mathison's (2016) point out a series of things that are the opposite of self-care, like lacking fun in life or perfectionism, or a toxic work environment, or saying yes to unreasonable asks. At this stage, I would suggest asking the client to identify what sorts of things in your life drain your cup and keep you from relaxing.

Step 6 is an assessment of the client's strengths and weaknesses when it comes to self-care. The therapist would ask them to be honest with themselves about where they struggle and to give themselves a pat on the back for the strengths they show when it comes to self-care. Maybe eating healthy and getting exercise is easy for them, or maybe they know how to treat themselves when they are feeling stressed. Whatever their strength is, they should lean into it. And as for their weaknesses, think about ways in which they've tried and failed in those areas. Were there any similarities between those failures? How can they learn from them? And how might they approach those situations in the future knowing the importance of that self-care going forward?

Finally, Step 7 is to create their own action plan for putting all that self-care into practice. And that's where our work really begins. The Toolbox I've created is a guide for them to put their self-care action plan into practice.

The Self-Care Toolbox for Counsellors: The Building Blocks of Your Toolbox

Regular Exercise

Find a level of regular activity that works for your body to keep your connected to your body.

Adequate Sleep

Find the sleep schedule and sleep hygiene that fits best into your life and keeps you refreshed and able to support your clients.

Healthy Nutrition

Find the diet that energizes your body and fits into your budget.

Enriching Relationships and Social Support

Invest in relationships that make you feel safe and secure, while cutting out or limiting relationships that are toxic or draining.

Hobbies that Fill your Cup

Find and make time for hobbies that you enjoy and can take your mind off of the stressors you face on a day-to-day basis.

Self-Care Best Practices

Mindfulness and/or Meditation

Practice mindfulness to stay present and reduce stress. If Meditation is something you find personally effective, include it in your day. If you've never tried meditation or mindfulness, try sneaking them into an activity you already do during the course of your day such as going for a walk or stretching. Consider Progressive Muscle Relaxation, Yoga or Tai Chi as activities that could help assist you in this process.

Deep Breathing Exercises

To reduce stress, take a few minutes for a deep breathing exercise in order to relax your body and mind.

Journaling

Regularly reflect on what's causing stress in your work and personal life. Processing situations that made you feel uncomfortable or uncertain and journaling your way to solutions, acceptance, comfort or whatever your goal may be for a specific journal entry can be helpful in reducing stress and preventing burnout. If you are having trouble getting started in journaling, try writing a letter to a person you are having difficulties with – you do not have to show them the

letter, but this can help put your thoughts out there and better understand how you feel about that situation.

Reduce Screen Time

Schedule breaks from technology and recognize when your screen use is causing stress in your life. Take time to become aware of what applications or devices drain your energy and bring added stress, and which technologies bring you joy or relaxation. Some people might find that a complete technology detox or sabbatical could be helpful, but for others this could remove things from their lives that bring them joy. Find the right balance for you.

Accessing Therapy Yourself

If you are not already in therapy yourself, practice what you preach and start looking for a therapist of your own. Complete some consultations and find the right fit for you to process difficult emotions that you cannot on your own or do not want to burden your social support network with. If finances are a concern, look for a therapist with a sliding scale or work with a student counsellor.

Self-Care at Work

Time Management

To prevent against feeling overwhelmed by your schedule, take control of it (if possible). Learn how many sessions are too many for you in the course of a day. Learn where you need to schedule breaks in your schedule in order to continue supporting your clients throughout the day. Ensure there is time for eating, using the washroom, writing notes, decompressing in between sessions, and anything else you may need in the course of your day to support your clients.

Setting Boundaries

Establish boundaries in your work life to prevent against engaging in dual relationships (where possible), adhere as closely as possible to the time limit set out by your sessions, be mindful of physical boundaries with clients as well – avoiding physical touch unless it's appropriate in a cultural sense and the client has consented, setting boundaries around accepting gifts from clients that could create a power imbalance or improper relationship, and use self-disclosures only when appropriate and when you are comfortable doing so.

Supervision and Peer Consultation

Seek regular supervision, especially when feeling challenged by a particular client. Engage with your peers to provide them support and receive support through sharing experiences and self-care strategies.

Professional Development

Seek out and take part in regular professional development that fits into your budget and makes sense for your scope of practice. Learn therapeutic techniques that would benefit your clients in order to feel more engaged in your work.

Regularly check in with how you are doing with your self-care practices. Are there practices you do not enjoy or find tedious? Pull them out of your toolbox and find something else that better fits your life. Are there practices that you like but are not sure how to get started with? Look for resources online or ask your social support network for help. Make your self-care plan uniquely you.

Reflection

While developing this toolbox and reviewing the literature for this Capstone, I found myself reflecting on my own self-care strategies and finding areas that I was not taking care of

myself as well as I could be. I have dealt with some significant personal tragedies while writing this project and I would not have gotten through it without my social support network including my family, friends and peers at CityU. To me, it is an ethical imperative to be engaging in self-care as a means of proactively reducing stress and preventing burnout. I know that had I not had the social support in my life over these past few months that I would not have been capable of completing this project or being able to sit with clients during my internship. I have suffered significant losses within my family, and that in some ways connects me to my clients. I find joy in my connections to those clients, for however long they last. Grief is a powerful stressor, and yet something that connects us all. We all suffer grief in our own way and it is something that we must all experience at some point. Without self-care, I would have been incapable of surviving these past few months. But thanks to the tools at my disposal, I was still able to feel connected to my work. I certainly felt overwhelmed at times and sought out social support to assist me through those difficult times. There were instances where I did not think I would make it through this program, as self-doubt and imposter syndrome crept in to take advantage of my state of overwhelm.

The self-care practices that I personally most connect with and my classmates are probably tired of hearing of include going for a cold dip in the ocean and playing competitive soccer. I like self-care practices that involve a mind-body connection. I find that in some cases, practices that involve solitude help me connect with my mind. In other cases, practices that involve social connection and interaction bring joy and decrease stress. Most of all, what I find is consistent across the self-care practices I connect most with is being outside in nature. Connecting my body, mind and spirit with the external world brings me comfort and reinvigorates my body and mind.

For me, although I am a physical person, going to the gym is not something that fills my cup, it does the exact opposite. The lack of connection I feel at the gym and how everyone is there for a purpose and that purpose does not involve even acknowledging the people around them makes me despise the gym. It could be a positive thing in the right circumstances, but our society has become so lacking in interpersonal connection that we do not even speak to each other in public. I believe this adds to the stress we experience on a day-to-day basis and contributes to burnout. People are living lives of isolation and loneliness. And that's part of the reason I suggest social support as an important element of the self-care toolbox. I find that for men especially, we can live lives of complete isolation without even intending to do so. Men in particular often find it difficult to reach out for support when they need help (I am no different) or even when they need someone to talk to in order to process a difficult life event. Negative life events will occur whether or not you have been practising self-care.

From a counselling perspective, I would like to see more of an emphasis on self-care put into our work and starting from our graduate programs. Although self-care is often preached within our Master of Counselling program, it does not always feel as though it is okay to actually engage in it. When students become overwhelmed, overburdened or are dealing with a tragedy in their personal life, there is not always an option to engage in self-care. It appears to differ from instructor to instructor and empathy for the student's plight is not always there. Certainly, some instructors are understanding and provide students with support or the occasional extension for an assignment, or excuse an absence from class when it is unavoidable. But this is not always the case. And in a counselling program of all things, I would hope that we can start practising what we preach and provide students opportunities for self-care rather than make them feel like they are trying to skip class or miss an assignment. In my personal opinion, there should be an entire

course devoted to self-care and stress reduction. The course should be self-paced, self-taught, with no assignments and be an individual exploration of self-care for each person. Each student will keep a journal on self-care throughout the class in whatever way they connect with – be it written, spoken or some other form of tracking their self-care.

From there, I would like to see professional associations take a stronger lead on this as well. Workshops on self-care do the exact opposite of their intention. They cost money, take away from time I would normally either be making money or engaging in self-care myself. Instead, I would like to see professional associations create social events that have absolutely nothing to do with counselling. These events could take any form at all, be generally inexpensive or free to take part in and be accessible to a wide population. These events could be held every couple of months or even just every quarter. The point would be to create social connections between counsellors and give participants something fun to do to take their mind off their work while still being around like-minded people. I believe in the power of social connection and right now there's not a strong enough emphasis on that in our professional sphere (or our personal lives for that matter).

Ethically we are causing harm by not promoting self-care more than we currently are as a profession. And when we do, the financial cost associated with this "self-care" feels unethical – it certainly does not align with my values and gatekeeps "self-care" or provides the appearance that it must cost money to engage in. The opposite is true. I am a firm believer that self-care can cost next to nothing or simply be part of something you would have otherwise spent money on. I feel like there are people taking advantage of the lack of self-care practices in our profession and financially profiting off of it.

Burnout is a real consequence of the work we do. We cannot ignore its impacts on ourselves and the knock-on effects that has on our clients and everyone around us. By taking control of self-care in a unique way that connects with who you are as a person and as a counsellor, you can guard against burnout and better manage your stress levels. It's my hope that this project provided you with the guidance necessary to make self-care a priority in your life.

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Appendix A

STRESSFUL LIFE EVENTS SCREENING QUESTIONNAIRE - REVISED

The items listed below refer to events that may have taken place at <u>any point in your entire life</u>, including early childhood. **If an event or ongoing situation occurred more than once, please record all pertinent information about additional events on the last page of this questionnaire. (**<u>Please print or write neatly</u>**).**

1. Have you ever had a life-threatening illness?

   No _____ **Yes** _____   If yes, at what age? _____

Duration of Illness _____

Describe specific illness _____

2. Were you ever in a life-threatening accident?

   No _____ **Yes** _____   If yes, at what age? _____

Describe accident_____

Did anyone die? _____   Who? (Relationship to you)_____

What physical injuries did you receive? _____

Were you hospitalized overnight? No_____ Yes _____

3. Was physical force or a weapon ever used against you in a robbery or mugging?

   No _____ **Yes** _____   If yes, at what age? _____

How many perpetrators?_____

Describe physical force (e.g., restrained, shoved) or weapon used against you.

Did anyone die? _____

Who?_____

What injuries did you receive? _____

Was your life in danger? _____

4. Has an immediate family member, romantic partner, or <u>very close</u> friend died because of accident, homicide, or suicide?

   No _____ **Yes** _____   If yes, how old were you? _____

How did this person die? _____

Relationship to person lost _____

In the year before this person died, how often did you see/have contact with him/her? _____

Have you had a miscarriage? No _____ Yes _____ If yes, at what age?_____

5. At any time, has anyone (parent, other family member, romantic partner, stranger or someone else) ever <u>physically forced</u> you to have intercourse, or to have oral or anal sex against your wishes, or when you were helpless, such as being asleep or intoxicated?

   No _____ **Yes** _____   If yes, at what age? _____

If yes, how many times? 1 _____, 2-4 _____, 5-10 _____, more than 10_____

If repeated, over what period? 6 mo. or less _____, 7 mos.-2 yrs. _____, more

        than 2 yrs. but less than 5 yrs. _____, 5 yrs. or more _____.

Describe force used against you (e.g., fist, belt)_____

Were you ever injured? _____ If yes, describe _____

Who did this? (Relationship to you) _____

Has anyone **else** ever done this to you? No _____   Yes _____

8. As an adult, have you ever been kicked, beaten, slapped around or otherwise physically harmed by a romantic partner, date, family member, stranger, or someone else?

      No _____ Yes _____   If yes, at what age? _____

If yes, how many times? 1 _____, 2-4 _____, 5-10 _____, more than 10_____

If repeated, over what period? 6 mo. or less _____, 7 mos.- 2 yrs. _____, more

    than 2 yrs. but less than 5 yrs. _____ , 5 yrs. or more _____.

Describe force used against you (e.g., fist, belt) _____

Were you ever injured?_____ If yes, describe_____

Who did this? (Relationship to you) _____

If sibling, what age was he/she_____

Has anyone **else** ever done this to you? No_____ Yes _____

9. Has a parent, romantic partner, or family member repeatedly ridiculed you, put you down, ignored you, or told you were no good?

      No _____ Yes _____   If yes, at what age? _____

If yes, how many times? 1 _____, 2-4 _____, 5-10 _____, more than 10_____

If repeated, over what period? 6 mo. or less _____, 7 mos.- 2 yrs. _____, more

    than 2 yrs. but less than 5 yrs. _____ , 5 yrs. or more _____.

Who did this? (Relationship to you) _____

If sibling, what age was he/she_____

Has anyone **else** ever done this to you? No_____ Yes _____

10. Other than the experiences already covered, has anyone ever <u>threatened</u> you with a weapon like a knife or gun?

   No _____ **Yes** _____ If yes, at what age? _____

If yes, how many times? 1 _____ , 2-4 _____ , 5-10 _____, more than 10_____

If repeated, over what period? 6 mo. or less _____, 7 mos.- 2 yrs. _____, more

   than 2 yrs. but less than 5 yrs. _____, 5 yrs. or more _____.

Describe nature of threat _____

Who did this? (Relationship to you) _____

Has anyone **else** ever done this to you? No_____ Yes _____

11. Have you ever been present when another person was killed? Seriously injured? Sexually or physically assaulted?

   No _____ **Yes** _____ If yes, at what age? _____

Please describe what you witnessed _____

Was your own life in danger? _____

12. Have you ever been in any other situation where you were seriously injured or your life was in danger (e.g., involved in military combat or living in a war zone)?

   No_____ **Yes**_____

If yes, at what age? _____ Please describe. _____

_____

13. Have you ever been in any other situation that was extremely frightening or horrifying, or one in which you felt extremely helpless, that you haven't reported?

   No_____ **Yes**_____

If yes, at what age? _____ Please describe. _____

_____

The interviewer should determine if the respondent is reporting the same incident in multiple questions, and should record it in the most appropriate category.