Becoming a Therapist

On the Path to Mastery

Thomas M. Skovholt

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Published by John Wiley & Sons, Inc., Hoboken, New Jersey. Published simultaneously in Canada.

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Library of Congress Cataloging-in-Publication Data:

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Skovholt, Thomas M.
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Becoming a therapist : on the path to mastery/Thomas M. Skovholt.
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p.; cm.

Includes bibliographical references and index.

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ISBN 978-0-470-40374-7 (pbk. : alk. paper); ISBN 978-1-118-17818-8 (ebk);
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ISBN 978-1-118-17819-5 (ebk); ISBN 978-1-118-17817-1 (ebk)

I. Title. [DNLM: 1. Psychotherapy. 2. Counseling. 3. Mental Disorders—therapy.

4. Professional Role. 5. Vocational Guidance. WM 420]

616.89'14—dc23

2011029296

Printed in the United States of America.

For Lisa

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Preface

The therapy and counseling professions offer hope and promise for those who enter through their educational gates toward professional development. To learn a lot and then use that knowledge to help people translates into rewarding and meaningful work. Welcome to this world!

This book describes the world of the therapy and counseling professions and specifically the landscape of the novice journey. I aim to paint a portrait of key features of the world of the beginner and what is called the universality of experience effect. More specifically, my intention is to provide a positive trinity of validity, clarity, and hope for novices, their teachers, and their supervisors.

I aim to create a map of sorts—one that highlights the peaks as well as the valleys, one that outlines the routes that lead to higher ground. I am hopeful that some readers will have a recognition reflex to terrain descriptions, such as the valleys and hills, the rocks and soil, and the watering holes. I hope that the map of terrain descriptors will help in navigating the journey all of us, as novices, must take. The goal is to lay out the future regarding the work life of therapists and counselors. It is a here-is-what-to-expect approach, especially regarding the inner landscape of the world of the therapist and counselor.

The different therapy and counseling professions are a loose grouping of career fields that are both distinct and similar. These distinct fields include counseling and clinical psychology, social work, school counseling, addictions counseling, marriage and family therapy, medicine, community counseling, pastoral counseling, nursing, academic advising, health and life coaching, family law, and other related fields where the professional helping relationship—the working alliance—is a central curative factor. The helping relationship is central to teaching, too. Many books focus on the unique features of each of these fields and how they deserve a place in the occupational sunshine of the helping professions.

This book is different and focuses much more on the similar aspects of the various fields. Decades ago, Henry, Sims, and Spray (1971) examined four of these fields and

PREFACE

concluded that they were so alike they should merge and become the fifth profession of psychotherapist. Although that never happened, the Henry book made a big impression on me. In this book, I bridge the microdifferences between specific therapy and counseling career fields as part of a bigger view. The key similarity is that all of these fields focus on using the helping relationship to improve the life of the other. We are fellow travelers with those who are in the client-patient-student role as we seek and explore and try out solutions to enrich human life, often one life at a time.

Ethics are the bedrock of the work. The other's well-being is illuminated and at center stage. Novices are often frightened by ethics because they worry that they will easily make a major ethical blunder. I think it is better not to be so anxious about making mistakes but rather to take a positive view and dedicate oneself to being highly ethical in one's work life as a therapist or counselor. Knapp and VanderCreek (2012) have contributed a wonderful book on positive ethics.

Another point relates to the importance of questions versus answers. When each of us enters a career field, we naturally search for answers. If we know the answers, then we do not feel so lost, so stupid, so incompetent. That makes sense. But I have come to the conclusion that good questions are just as important as answers. Why is that? you may ask. The reason is because the answers change as the field evolves. So much in this field—in terms of specific answers—has changed over the last decades. Humans are so complex that answers, while attempting to reduce the complexity, often end up becoming disappointments. Clear, concise ways of seeing and doing things (e.g., three steps to this, a quick method for that, one theoretical approach as best for everything) get replaced. Over the past decades, this has happened over and over again in the therapy and counseling fields. So, when the person no longer can trust the former clear answers, it is so valuable to have good, solid questions to rely on. Really good questions keep us in the search—the exciting career long search—for ways to understand people and help them live positive and meaningful lives.

With a balance between answers and questions and a focus on the inner world of the therapist and counselor, we go forward with this book. Now, on to Chapter 1 and our exploration of this career area of therapy and counseling.

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Knapp, S. J., & VanderCreek, L. (2012). Practical ethics for psychologists: A positive view, 2nd edition. Washington, DC: American Psychological Association.

Acknowledgments

I would first like to acknowledge my editor at John Wiley & Sons, Inc., Marquita Flemming. Job of the Old Testament is famous, very famous for his patience. Marquita has shown Job-like patience with me and the writing of this book. It has taken a long time to try to say what I think is important for novice therapists and counselors. Marquita has been wonderful with her vision, leadership, and support of my efforts over a number of years with this book. Thanks to her.

My thanks also to editor Lisa Gebo. Like many other authors in the human services, I benefited from her editorial generosity and her passion for the work in this field and its potential to reduce human suffering and increase human happiness.

Sherry Wasserman at John Wiley & Sons gave encouraging direction as I searched through the world of permissions hell. Without her, I would still be there and this book would be like an airplane waiting in line for takeoff.

I was fortunate that professor and counselor educator Sherri Cormier agreed to carefully read the whole manuscript. She provided expertise in counseling and therapy, high-level editing skill, and feedback—that great avenue for improvement. Of course, the roads not taken with his book and its deficiencies are mine alone to claim.

Appreciation to these people for graciously offering their opinions on various parts of these chapters: Yvonne Beech, Carolyn Burke, Sally Hage, Julie Heidemann, Moshe Israelashvili, Lisa Langenhahn, Mary Mullenbach, Rosie O'Brien, L. P. Smith, Alexandra Stillman, and Rhonda Wood.

Sandie Wick, Fran LaFave, Ed Hughes, and John and Marie Braun provided professional environments in Minnesota where I have been able to work as a practitioner. It has made all the difference.

The many, many counseling and therapy students at the University of Florida, the University of Minnesota, and Hacetteppe University in Turkey who have taught me so much about our field—thanks to you. A special note of appreciation to my doctoral

advisees—such treasured working relationships for me and so much pleasure too as I watched them enter the professional world. The University of Minnesota has been a wonderful academic home for over 30 years. I have been lucky to have a position there—and in my home state too!

There were the fortunate years of graduate study at the University of Missouri and the formative years of working at the University of Chicago Hospital and studying in Chicago too.

I have been a fellow traveler with many, many clients in therapy and counseling. They have taught me so much during those courageous times when they have sought to find a way to feel less distress and be more joyful, often when no solution seemed apparent. How could I know about the complex ambiguity of counseling without all the clinical hours? Clients have taught me about the great hope and promise of therapy and counseling. It is gratifying to be the practitioner when the client finds a way to an emotionally richer, happier, more meaningful life; to a life of contribution and positive attachments. During those times I feel fortunate to be in this field.

Appreciation is also expressed to my advisor at Missouri, Joe Johnston, and mentors Phyllis Epley, George Meyer, Norman Moen, Helen Roehlke, Paul King, Harry Grater, and Sam Scher.

Gratitude for my parents, Joe and Elvera, and my family of Glen, Anna, Jane, Annie, Rachel, David, Iztchel, Lisa, and Rachel. And Danny, Hanna, Julius, and Abby. And a special note of welcome to niece Karla who has joined the counseling field.

A special thanks to five friends who have given the gift of friendship over many years: Dan Detzner, Mike Pearson, John Romano, Helge Rønnestad, and John Sullivan.

In 1990, I heard Rollo May speak at a conference. Later I asked him to autograph his book, *The Courage to Create*. Ever since, I have had that book where I write, hoping for inspiration and direction. Looking at the book title has given me encouragement—the oxygen that keeps us humans hopeful as we keep trying to express our ideas and make a contribution.

Opening Up Your Life to the Excitement of the Therapy and Counseling Professions

15 QUALITIES FOR THE THERAPIST/COUNSELOR

All career fields have key qualities, attitudes, and skills that are needed for success. For the architect, it includes proper spatial calculations; for the tree trimmer, obsession with safety is valuable; the psychometric psychologist hates measurement error; the chef seeks a well-timed mix of ingredients; for the baseball player, it is seeing the ball and its secrets when coming out of the pitcher's hand. In order to excel at the work, each of these occupations calls for the mastery of specific attitudes and skills. What are therapists' difficult-to-master attitudes and skills? What key qualities do we need? These are important questions for emerging practitioners.

Key Quality 1: Enthusiasm Within Insecurity

Helge Rønnestad and I wrote years ago about the emotional reactions of the beginner in our field. These emotions seem to be timeless and are part of the rite of passage into the work whether one begins in the early decades of the 21st century or decades earlier.

Enthusiasm and insecurity are predominant affective expressions. The beginning graduate student feels very excited about learning how to help others yet very insecure about her/his knowledge of therapy/counseling procedures and one's own ability to succeed.

—Skovholt & Rønnestad, 1995, p. 24

Some of the material in this book appeared earlier in: Skovholt, T. M. (2001). Elevated Stressors of the Novice Practitioner. *The Resilient Practitioner* (pp. 55–75). Boston, MA: Allyn & Bacon; Skovholt, T. M. & Trotter-Mathison, M. (2010). Elevated Stressors of the Novice Practitioner. *The Resilient Practitioner* (2nd ed., pp. 79–104). New York, NY: Routledge; and Skovholt, T. M., & Rønnestad, M. H. (2003), "Struggles of the Novice Practitioner," *Journal of Career Development*, 30, 45–58.

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The excitement and the fear, the known and the unknown, the certain and the uncertain. These are the conditions for novices entering the therapy and counseling professions. Like other explorers, such as Lewis and Clark in North America and Jane Goodall in Africa, novices enter a personally unexplored wilderness.

A bounty of unknown sensations, stretching experiences, new perspectives, and skills await them. Our profession, wherein we commit ourselves to being helpful to others, is at the center of this world. There is a thrill about the novice practitioner voyage into this world, about the steps taken to be a practitioner of helping and human development. To get there, novices must enter the vast unknown. Explorers are to be applauded for their risk taking. The joy when entering the helping professions is the anticipation of an effective professional career of service to others. Professional development is about cultivating a style and skill level that optimizes the human development of those clients who invite us into their lives. If done right—with respect, caution, and skill—the counseling process can be of benefit to others.

Key Quality 2: Courage

If you pay attention to the world you see a lot of pain. . . . Francesca was in therapy after a brutal date rape. Sue Anne came because her husband had just killed himself.

—Pipher, 2003, p. 53

Therapists/counselors must possess immense courage. Our enemies are the distress trilogy of anger, anxiety, and depression that invade the lives of our clients. We must stand up to these crippling emotions and not be afraid. How can we help our clients if we are afraid of their distress?

We must wade into the anxiety and fear, despair and hopelessness, anger and rage, and stand in the pool of the client's distress with fortitude, patience, and serenity. We must show the client that we are not afraid; if they see that we are not afraid, they need not be afraid. We stand up to fear, we do not give in to despair, and we are relentless in understanding the sources of rage while helping the other to heal. Courage must envelop us as we attack the limits that these emotions put on our clients as they try to live, grow, and extend themselves into full lives. It is easy to back down from life, from the existential realities that are in front of us as human beings, to shrivel into the routines that give us comfort and security. Just as muscles become less flexible when not stretched, the human will is more susceptible to ongoing emotional distress when it is not engaged.

Courage also involves not being intimidated by our clients. One of the reasons to get more education and have more degrees is to be immunized from being afraid of accomplished people who come to us as clients. Our clients do not need us to be intimidated by them or be jealous of them. These things get in the way of what they need—our

intense focus on helping them. So, if your client is a lawyer, a doctor, a chief executive, a professor, a wealthy person, a beautiful person, a wonderful artist, or has one or another admired trait, it does not matter. Or if your client seems so different from you, lives differently from you, has made choices different from yours, it is the same. All our clients need the same thing, no more or less: our best efforts at being a helpful practitioner in their lives.

Having courage when working as therapists and counselors, as guests in the lives of our clients, can be difficult. Meeting this challenge is helping to head off the client's ontological anxiety, a term used by theologian Paul Tillich (1952) to describe that life is not on track. This courage of practitioners, a more subtle kind than that of the boxer and firefighter, is still courage. It is an occupational essential for effective counselors and therapists. During education and training, emerging practitioners learn how to have and show this courage.

There is also the courage of novices when entering practice as students in training. Novices enter practice as a new canoeist enters white water—with anxiety, some instruction, a crude map, and some previous life experience. However, all of a sudden, the client is in front of student practitioners, telling a very personal, real story. The story often comes in a form and structure that is unique. The student experience is like the sudden rush of water, rocks, and rapids demanding instant understanding and reaction. Novices often have the urge to both call the emergency phone number 911 and appear calm, collected, and professional—whatever that is. In a study of novices in the related field of medicine, the most stressful situation was the white-water experience—having to make clinical decisions while very confused (Zeigler, Kanas, Strull, & Bennet, 1984).

Key Quality 3: Profound Empathy and Cultural Competence

We tend to forget the complexity of the process [of being empathetic]. It is extraordinarily difficult to know really what the other feels; far too often we project our own feelings onto the other.

—Yalom, 2002, p. 21

The work of therapists/counselors is also difficult because it demands that we gather information and understand the other in a way that goes against our basic nature. The human senses of touch, sight, hearing, smell, and feel are all designed to give each of us information to be safe as an individual. The information is to help each of us in our own personal survival and well-being.

We process data in our brains to understand the situation we are in and to make judgments. We do this to increase our own safety in many areas, such as physical, emotional, spiritual, financial, interpersonal, and intellectual. This constant sensory perception and processing is an amazing way that we, as a species, have developed to live and thrive. It has given us the capacity to grow, multiply, and dominate all living things.

Opposed to this ingrained natural response, therapists/counselors are required to use their hearing, smelling, feeling, seeing, and touching to sense the world and life of the other, to experience the movie of the other's life. It is *not* natural. It a difficult and potentially exhausting request. And it is an enormous gift to the other. This gift propels much of the positive power of our work.

In my classes, I often ask students to describe their reactions to a common experience, such as the view outside the classroom window. During this exercise, all students look at the same view yet their descriptions differ dramatically: One student says she sees the far, large white building; another, the close oak trees; a third, the people on the sidewalk, a fourth brings up the pale blue sky as that which got his attention. Most often we dismiss such differences as cute, interesting, and funny and then move on. Yet thinking deeply about these instant perceptual differences can shake us as we realize that we actually live in a world that appears the same but can be experienced very differently.

Years ago, in an interviewing class, I asked a Jewish Israeli woman and Palestine Muslim man to talk about their common world. They could not do it. Although they were both English speakers, they had no shared language. Neither had the ability to see and feel the other's perspective. Each had a worldview that was too ingrained. I remember a similar experience in the prime days of the nuclear showdown of the Cold War. On a television show, Soviet and American citizens were asked to have a dialog. I recall feeling frightened when they could not do it. They had so little understanding of each other. I thought, at a time when each has scores of missles directed at the people of the other country, how could USA-USSR differences ever be bridged?

Cultural competence is a central skill here. It consists of having awareness, knowledge, and skills that can connect the practitioner to the client regardless of diversity differences such as ethnicity and social class (Goh, 2005; Sue, Arredondo, & McDavis, 1992; Vasquez & Vasquez, 2003; also see Chapter 5 in this book).

The job of therapists/counselors is to excel at seeing and feeling the world of the other. It is hard work. It is not natural; it is like swimming not with the current but instead voluntarily going upstream *against* the current. It is an occupation that stretches the natural self like yoga or as the physical therapist stretches us. We must understand the world through the eyes of the other in order to be highly effective in helping. It is not natural to swim upstream, to put ourselves in such a challenging empathy situation, but it is an occupational essential.

Practitioners must also maintain the self while perceiving the world through the eyes and ears of the other. The task of counselors/therapists is to maintain their human perceptual system while taking on the client's at the same time.

This is a way that counseling and therapy work is different from the interpersonal help offered by family and friends. Practitioners must maintain a dual reality: a strong sense of one's self while at the same time accurately perceiving the world through the senses of the other. Some naturally skilled helpers, early on in life, develop the capacity to easily and accurately feel another's distress; they have the perceptual maturity and empathy to hold onto multiple perspectives and gather data through multiple channels at the same time.

Key Quality 4: One-Way Helping Relationship Embedded in the Cycle of Caring

Therapists must be experts in fostering relationships with individuals who have difficulty doing so.

—Clarkin & Levy, 2004, р. 211

The one-way helping relationship gives the work its power. Clients' lives, and all their nuances, command center stage. Their hopes, their joys, their fears, their needs draw therapist energy and focus. It is like the parent's focus on the young child—the focus is on the needs of the child. So too, the teacher, the nurse, the family law attorney, the physical therapist, and many other helping fields focus on the needs of the other as part of the power of the occupation. My life might be about me, but the work is about the client.

This focus on the other is not easy. One study of physician-patient relationships, for example, found that physicians focused on themselves to a surprising amount; physician self-disclosure occurred in 34% of first-patient visits. The article title shows the problem: "Physician Self-Disclosure in Primary Care Visits: Enough about You, What about Me?" (McDaniel et al., 2007).

It can be especially hard to focus on the client when the client is not able to be positive and engaging. For example, Strupp and Hadley (1977) found an appallingly poor pattern of reaction by trained therapists to challenging client behavior. When clients expressed negativity, the therapists responded with negativity, often in a subtle way unrecognized by the therapists themselves. And these were trained therapists. It is important to be able to respond to client negativity in more therapeutic ways than just with more negativity. Anybody can respond negatively to negativity. Doing so is just basic human 101.

Those in the helping professions offer a one-way caring relationship—that is the meaning of the helping professions, the caring professions, the helping/healing/teaching professions, whatever term we use. But it is difficult because we too are human. We too have needs. We too want to be heard. We too want to explain our position. We too want to defend ourselves.

Therapy is a one-way caring relationship; it is not two-way. When the one-way becomes the two-way, the ethical becomes the unethical, the effective becomes the ineffective, the great gift becomes of little value. What is the work like in the ideal therapeutic relationship? It is a one-way caring relationship.

The Cycle of Caring, described in more detail in Chapter 8, is a blueprint of the work of helpers. Practitioners have to develop competence in all four seasons of the four-season cycle. When we begin with a new person, it is like the spring of new beginnings. Here, hope and an empathetic connection with the other (client, student, patient, advisee, supervisee, mentee) take hold. Then there is the summer of engagement, when hard work and sweat take over. Finally, it is time for autumn, when it is time to part. 6

The engagement between practitioner and client may be brief, and autumn may arrive quickly, as with a one-session meeting. But autumn always comes, just as all relationships have both beginnings and endings. And autumn is the time for noticing the changes and getting ready to disengage. Winter is a time for self-care, a time of solitude, retreat, reflection, and re-creation. Winter is necessary for spring to occur. And spring comes again in the Cycle of Caring, and the practitioner engages again with another person. The one-way helping relationship within this four-season cycle is the essence of the work. Practitioners repeat it thousands of times during a 30- to 40-year career.

Key Quality 5: Intensive Listening

A basic pact about communication is the ever present reality of miscommunication. When others talk at us, we often hear most of all the echoes of our own thoughts and feelings.

The ability to listen intensively is fundamental to the work. Listening appears easy; in fact, however, the intensive listening of therapy and counseling is very difficult. Why is it so difficult to do a behavior that is so simple that everybody does it? It does not make sense. Something so common cannot be so difficult.

Evolutionary psychologist Geoffrey Miller (2000) argues that the evolved human is set up for the advantages that talking gives: "Scientists compete for the chance to give talks at conferences, not the chance to listen" (p. 350). Given that the evolutionary advantage is with talking, Miller says that the kind of intensive listening done by therapists and counselors "requires an almost superhuman inhibition of our will to talk."

Listening and not talking, Miller says, is unnatural. We have evolved to talk more than listen. "Our hearing apparatus remains evolutionarily conservative, very similar to that of other apes, while our speaking apparatus has been dramatically re-engineered . . . this anatomical evidence suggests that speaking somehow brought greater hidden evolutionary benefits than listening" (Miller, 2000, p. 351).

The act of intensive listening takes enormous energy both because it is hard work to focus so much and because it is unnatural, given our evolved natural talking self. In addition, the listening has to be at a deeper level than just cataloging content. Affective sensitivity is crucial. As we listen, we have to be tentative about our understanding of what we hear and try very hard to understand the complexity of another person. Those we listen to try to explain their 3-dimensional reality within the limitations of language. Language is such a limitation because it is such an abstraction of symbols used to describe something much bigger and more complex.

Key Quality 6: Embracing the Unknown, the Murky, and the Paradoxical as the Concrete

Another difficulty is the nature of the work and how it is so hard to quantify. As a society, we value work that we can touch, see, and know using traditional ways of knowing:

logical, linear, sequential thinking and content areas like math, science, and engineering. We all know what this kind of thinking is and can do it, or not do it, to some degree. This is a known world. The therapy and counseling field is different, and the difference makes it hard for others to understand and value it. In our professional lives, we are privy to a flow of emotions and patterns that is similar to abstract art. Competence in navigating this world is very different from competence in navigating the logical, linear world.

In addition, in therapy and counseling, we enter the personal lives of the people we serve; we are guests in their lives. And our conversations with them are private. So, comfort with the unknown, the private, the unexplainable, the ambiguous is another key quality in therapy and counseling work. There is less concrete data of success than we would like, especially in a world that likes to measure and quantify. We work in the abstract art of emotions rather than linear patterns, and we do it within a confidential world that cannot be shared with others.

Sometimes our deeper realities are paradoxical, like the word "bittersweet," which is a rich word because it contains a more complex reality: bitter *and* sweet. The realities of counseling are often like this, and people are often drawn to the field because of these more nuanced ways of understanding. Table 1.1 is a chart using paradoxical language to understand master therapists from our research projects.

Table 1.1 Paradoxical Characteristics of the Master Therapist			
Drive to mastery	AND	Never a sense of having fully arrived	
Able to deeply enter another's world	AND	Often prefers solitude	
Can create a very safe client environment	AND	Can create a very challenging client environment	
Highly skilled at harnessing the power of therapy	AND	Quite humble about self	
Integration of the professional/ personal self	AND	Clear boundaries between the professional/ personal self	
Voracious broad learner	AND	Focused, narrow student	
Excellent at giving of self	AND	Great at nurturing self	
Very open to feedback about self	AND	Not destabilized by feedback about self	

Source: Skovholt, Jennings, & Mullenbach, 2004, p. 132.

Key Quality 7: Accepting and Managing the Public's Uncertainty about Us

Managing the public's uncertainty about us as therapists is one of the most difficult parts of the work. If someone at a party or public gathering asks our occupation and hears "psychologist," a variety of different reactions are common. Some respond with admiration and respect and are drawn to the word "psychologist" because they know

that practitioners in this field are good people who are trying to help others. Others are drawn to it because the academic field is the science of human behavior, and that seems fascinating. But another reaction can be, in the long run, very stressful for mental health practitioners. It is the reaction of caution, of fear, of discomfort, of dislike.

Some people's discomfort is based, in part, on the assumption that we can perhaps almost read minds. This reaction seems to come out of the psychoanalytic tradition and the impact of Freud that has entered the cultural fabric at an unarticulated level. Freud spent a lot of time describing his theory of humans as being governed by unacceptable impulses that are mostly unconscious. According to this theory, they can be dug up and accurately interpreted by the practitioner. (Note: This is not a current view of most practitioners.) The Freudian and psychoanalytic way of thinking about human life, at least the public view of it, has deeply affected how the public thinks about psychological practitioners. The term "shrink" is not a term of endearment. If positive psychology or cognitive-behavioral methods had been developed first, before psychoanalysis, the fear factor would not be so strong.

I remember the time a female client, at a first appointment, said, "I don't know what is worse: going to the dentist, the gynecologist, or you, the psychologist." I said to her, "So, that is the list I am on. I hope I am not in first place." She just smiled. Then I turned to her husband and said, "I suppose for you, it would be the dentist, the urologist, and me." I had hoped he would vigorously object, but he nodded in agreement. Oh my, I thought—to be feared by people one is trying to help. That is unfortunate. The couple's indicators of discomfort did lead us to discuss how difficult it can be to ask for help with very personal concerns. So, that was a positive part. But this example shows the ambivalence others have about practitioners in the helping professions.

Coming to a helping practitioner often means facing and discussing painful realities of the past and the present and having to face decisions that can be terrifying. The soft lights, pastel colors, comfortable chairs, and available tissues of the counseling room are intended to help soak up the pain and reduce the anxiety. It may help a little—although male clients usually are not comforted by such settings. No matter the setting, counseling work for the client is often very difficult.

It is an occupational stressor to be a kind, nice person who wants to help others and to be greeted by discomfort and suspicion. Learning how to manage this reality is important for practitioners. It starts in the novice years, when others start reacting to us differently because we are training to be a counselor or therapist.

Key Quality 8: Energized by Asking Questions and Searching for the Truth

Most of the craziness in the world—violence, addictions, and frenetic activity—comes from running from pain.

When starting a therapy relationship, I tell the other person that one of the first goals is to fill out a blank canvas. When it is filled out, the client can say "Yes, that is my life." It is so empowering to be accurate about one's life. That way, a person can know what is right and what is wrong, what needs to be fixed, what can be left alone, and what is shining bright right now. It is like having a home inspection before purchasing, but in a more personal way. Clarity about our own good news and not-so-good news helps us move forward in an accurate way.

Yes, the truth can be empowering, but we have a strong system of defenses to keep the pains of the truth at bay. Yoga stretches the body, but sometimes the body, especially when it is tight and inflexible, does not want the pain of being stretched no matter how it might—eventually—help. Think of these words: "The only thing worse than feeling pain is not feeling pain" (Pipher, 2003, p. 54). We often actively keep away from truths that ultimately can set us free. Going fast down the wrong road ultimately does not work very well, but stopping, turning around, and then going down the right road is difficult. Having a trained therapist help us find our right road can be very helpful.

To help others go after their human truth, we must do that ourselves. Therapist Pipher (2003) writes: "I am blind in one eye, moody, unfashionable, directionally impaired, claustrophobic, and easily tuckered out. And those flaws are just the ones I'll confess to" (p. xviii). We must, like Pipher, learn to be accepting and comfortable with our own flawed humanness. Then we can help our clients fill out the blank canvas. And they can then go on illuminated by their truth.

To help clients—and ourselves too—find the truth, we need to love questions. Here, Alice Walker tells us about loving questions:

I must love the questions themselves
As Rilke said like locked rooms full of treasure to which my blind and groping key does not yet fit.

and await answers
as unsealed letters
mailed with dubious
intent
and written in a very foreign
tongue.

and in the hourly making of myself

no thought of Time
to force, to squeeze
the space
I grow into.
—Alice Walker, in White, 2004, pp. 227–228

Key Quality 9: Knowing Suffering and Going Beyond It

She had a deformity of the upper back/spine. And that is probably what saved her.

—Alice Walker, in White, 2004, p. 221

Here Alice Walker is discussing the sensitivity and intensity of the work of Eudora Welty, a white Southern woman writer of privilege, whose own suffering helped her see and feel beyond her privilege and write powerful prose about race and segregation.

We do not work in joy clinics, where people rush in because they are bursting with good news and are about to explode with the thrill of it all. No, we specialize in despair, betrayal, fear, hopelessness, ignorance, and the lack of the privileges bestowed on some by class, race, gender, trauma, immigration, lack of education, disability, and other unfortunate realities.

We must know suffering personally and not shut it off. In our study of master therapists (Skovholt et al., 2004), we found that they did just that: They had personal histories of suffering. But the suffering of the master therapists was not so intense, with scarring so deep, that they were unable to reach out to others. Nor did they have to manage scarring pain by shutting it off at a deep level. Shutting it off at a deep level means the individual has no access to profound emotion and runs from an internal, or external, confrontation with strong emotions. This shutting off at a deep level means the person cannot succeed as a therapy and counselor practitioner.

For many therapists, their own intense losses; their own confusion and self-distress; their own anger, anxiety, depression is the fuel for the suffering. There are also plenty of other sources of suffering: the cultural alienation that happens with the global movement of so many refugees and immigrants, the rejection within peer hierarchies, the ever-present culture of competition with its winners and losers, among others. All of these can serve as suffering factories.

One kind of suffering is that described by the existential writers like Rollo May (1983). These writers tell us about the fallout that awareness of mortality brings: being forgotten, being insignificant, only passing through, being pushed off the planet by the next generation. For example, about being forgotten: How often do you think about your great-grandparents or visit their graves?

The existential realities should be enough to generate a factory's worth of painful feelings. Usually other painful realities propel us to this work. Knowing suffering from the inside is invaluable for practitioners. The internal experience of suffering helps as

practitioners enter the cave of pain and hurt that fills the client's world. You cannot just read about suffering; to be really known, it has to be felt. Even this necessity is not sufficient. Although we need to know what suffering feels like, we cannot assume that our experience of suffering is similar to that of our clients or that our remedies will work for everyone.

One of the great ironies of the helping professions and especially the helping fields like counseling and therapy is that often it is healing our own distress that propels some of our interest in the work. Here is the irony: We enter very altruistic work out of selfneeds, yet eventually we must be transformed. We must go from cocoon to butterfly and become altruistic caregivers of others in order to be skilled helpers. I say more about this under key quality II.

Those entering the field are most effective if they can access their own personal suffering to use as an internal mental schema for the enormous energy of connecting with and caring about their clients. It is best if practitioners are happy and joyful in their lives and also can access suffering. Understanding the world of distress and using it to make a profound impact in the lives of others—that is the idea for practitioners.

Key Quality 10: Exciting to Be in the Novel Rather than Read It

Generally people read novels and watch movies to experience a broader intensity about human life. Therapists and counselors do that too. But we also have a more profound version of human reality, which we experience when meeting with our clients. Right in front, yes, right in front of us, is the intensity of human life.

The novel is the life of the client. Novices can no longer sit back, watch, and have the privilege of passivity, free to critique other players on the stage or to daydream about other realities. Now it is riveting and real. Novices are in the counseling session as the helper. And as real as anything is the need to do more than feel or to think. Now novices must act. But, how to act and in what measured ways about what dimensions? It is like watching a movie going at double speed and being asked to react to what is most important. It is all coming fast, and everything seems important. With the first client meetings, the novice experience of being overwhelmed and unsure can emerge and be expressed in one or more forms of anxiety. Much of the doing something is staying the course of intense dedication to the client and his or her welfare. Trusting the process, an elusive idea, is central to the acting and doing of the work.

In the counseling interaction, we are in a vivid human drama, a human drama that is much more engrossing than the average novel.

Key Quality 11: Signing Up for the Intense Will to Grow

For most people, commencement is an end. It happens at graduation when school is finished. It signals being done. However, this is not an accurate definition of the word. The dictionary defines "commencement" as the beginning. And that is a good way of thinking

of professional development in the counseling and therapy professions. We become our own internal teachers when school is over and others no longer tell us what to learn and when to learn it. Beginning the novice voyage means signing up for education, learning, development—forever. The master therapists in our sample (Skovholt et al., 2004; Chapter II of this book) were committed to their own development; we labeled this attribute the "intense will to grow." It was essential to the emergence of their expertise.

There are many things to learn and ways to learn. One kind is the learning that is part of the intensive academic classes of graduate school. Parallel to this is the learning in practicum, which is just as intense but often very different. And then there is the intensive learning about oneself—the introspection, the psychologizing about oneself that occurs especially early in one's career. Put these three kinds of learning together, and beginners often feel that their education is intense. And it is!

Counseling is about human behavior and how to modify it in a way that brings positive results. Understanding the complexity of the profession is hard, more than anything, because *Homo sapiens* are the most complex of all species. Ants are complicated enough, but people! And that complexity means continual learning as you go, a constant adding and revising. Signing up for this work is signing up to be a student of human behavior in the classroom of life that never has a bell ending the class. It is exhilarating to live this life, but do not sign up for it if you already have the answers or want shortcuts. An important point in therapist and counselor development is when students begin to realize that entering into this knowledge world leads to questions as much as answers and that uncertainty keeps pace with certainty. Some want to get a few answers and apply them and feel competent with one theory or one treatment plan. These are useful short-term solutions. Students also need to keep open and keep learning and let human behavior be as complicated as it is. The intense will to grow is a necessity for this process.

The key for beginners is to realize that learning about human complexity does not stop after school is over. The pace and intensity may be different and the sources of knowledge do not tilt toward classes in the same way. But keeping at it and continuing to understand people at a deeper level is part of walking on the practitioner path for the decades that one is in the field. It is a pleasure most of the time, to keep learning and growing.

Key Quality 12: Addressing Personal Motives for the Work

Often people enter the helping and related career areas because of deeply felt experiences in their personal lives. Physicians sometimes choose their work because of a tragic loss to illness of someone close to them. Teachers may become very invested in teaching others how to learn because of their own frustrations in school. This was true of counselor educator Gerald Corey (2005), who ended up writing very readable books because of his own frustration with the education he received and the horrible feelings he endured concerning his own school failure. Another example is addiction work, which often attracts those who have been caught by chemical abuse.

Derald Wing Sue (2005), a prominent leader in multicultural counseling, describes such a personal motive base for his work. He wrote: "I will never forget that incident [of racial harassment as a child]. It taught me several important lessons in life that have remained with me to this day and form the basis of my professional work" (p. 75).

In the highly altruistic helping fields, the original motivation for the work is often deeply self-focused. The paradox is that the focus must change eventually from deeply self-oriented to deeply other-oriented. There is a big shift necessary in this work. Do novice practitioners, entering this work with strong self-needs, know they are entering work that depends ethically, and for its power and value, on an intense focus on the other rather than the self? This is a great paradox of the work: entering the career for self-needs only to learn in time how the work must be about the other's needs. And in addressing the needs of the other, we can grow ourselves. Addressing this topic of self-needs and the needs of the other is one of the growth areas for the early practitioner.

Key Quality 13: Wanting Meaning More than Money

Therapy-type work usually does not produce a large income. Lower income is generally associated with fields that involve a focus on intense human needs, such as counseling, teaching, social work, and religious careers.

Big money is possible, but it usually comes from owning a large counseling clinic, authoring a very popular inventory or self-help book, or working in a business setting with executives where the fees are much higher. Most practitioners work where there is more need but less money.

Finding meaning and purpose from the work is the bigger currency, as explained in the next quotations.

I rarely hear my therapist colleagues complain that their lives lack meaning. Life as a therapist is a life of service in which we daily transcend our personal wishes and turn our gaze towards the needs and growth of the other. . . . There is extraordinary privilege here. And extraordinary satisfaction, too.

—Yalom, 2002, p. 256

Our goals of understanding others' points of views, alleviating human suffering, and enhancing relationships are noble goals.

—Pipher, 2003, p. 179

Although not a therapist, Ann Dunham, President Obama's mother, worked with poor people in a helping role. The values in this kind of work are similar to the values of therapists and counselors. Her daughter Maya (President Obama's half sister) said about their mother:

She gave us a very broad understanding of the world. . . . She hated bigotry. She was very determined to be remembered for a life of service and thought that service was really the true measure of a life.

—Scott, 2008, p. 17

Transcending the self is a key ingredient to higher-level human functioning as outlined by many major religions and by psychological concepts of the happy life. Seligman, Martin, Rashid, and Parks (2006), leaders in Positive Psychology, contend that happiness consists of three parts: the Pleasant Life, where Positive emotions are abundant in the person's life; the Engaged Life, where the person is involved and absorbed with projects and people; and the Meaningful Life, where a strong sense of meaning is present in the person's life. They found that higher life satisfaction was robustly correlated with Engagement and Meaning. In the helping professions we have the possibility of all three pathways to a rich life and happiness.

I came upon a similar idea when I was a graduate student reading Frank Riesman's description of the helper therapy principle, the idea that the helper benefits as much as the client by the interaction. Years ago, I explored this idea in an article (Skovholt, 1974) that discussed how the helper benefits through principles of social exchange theory and direct reinforcement.

Key Quality 14: Energized by Integrity

Integrity as a key quality expresses itself in two ways.

- 1. There is integrity when the intervention, offered to people in need, has validity.
- 2. There is integrity when practitioners work within an active ethical stance.

A statement about the first kind of validity comes from an esteemed psychotherapy research book. This volume, consisting of 854 pages and 18 chapters (Lambert, 2004), offers dizzying detail. Lambert and Ogles summarize what psychotherapy does in this way:

Psychotherapy facilitates the remission of symptoms and improves functioning. It not only speeds up the natural healing process but also provides additional coping strategies and methods for dealing with future problems. Providers as well as patients can be assured that a broad range of therapies, when offered by skilled, wise, and stable therapists, are likely to result in appreciable gains for the client.

—Lambert & Ogles, 2004, p. 180

A great profession, devoted to public welfare, stands on the rock-strong foundation of validity of its methods. Without validity, a profession devoted to human welfare

ultimately offers only the poisonous effects of fraud. When emotionally vulnerable people are manipulated and used, then we have fraud. A helping profession standing on sand, with no validity, ultimately gets washed away. It may take time, but eventually it happens. And for good reason. Most of the invalid methods in the helping professions offer clients methods that involve little practitioner training, are constructed to benefit the practitioner more than the client, and overreach by promising everything to everybody with one strategy.

Part of the validity rock-strong foundation of counseling and therapy is not promising too much. "Change that looks too good to be true most generally is" (Pipher, 2003, p. 43). Lawyers can help us when we have legal difficulties, but they cannot make us free of legal worries; physicians can help us ward off disease but cannot make us bacteria free for life; so too with therapists and counselors. When we are highly trained and dedicated to the highest skill and ethics of practice, we can offer help but not a problem-free life.

Our profession of therapy and counseling, devoted to reducing human suffering and increasing human competence, does not overpromise. As described by Lambert and Ogles (2004), the research suggests that overall we can, with the right conditions, offer positive change for our clients; some really benefit, some do not benefit at all, and many fit in between. There is overall validity to the work but few quick miracles.

The second kind of integrity concerns client welfare. Clients can easily feel vulnerable in therapy and counseling. It is very important for practitioners not to misuse this vulnerability. This is the core of ethics and integrity in the work. The welfare of the client is the number-one concern; all other issues are secondary.

Signing up to act with integrity and be energized by it is a key when entering this field.

Key Quality 15: Learning to Be Very Patient

Why can't we offer what some self-help and pop psychology books offer: a simple, easy-to-learn formula explaining human behavior terms with a few, easy-to-learn remedies for quickly solving problems? Doing so is a powerful seduction because terrified and suffering people are not comforted by hearing that human life is complex and that change takes time.

In the United States, we aspire to be a country of equal opportunity and equal achievement. Yet there remains a great canyon between the ideal and reality. Why? Why can't we fix this gap? University of Kansas researchers have found that by age 3, children of professional parents knew 1,100 words and children of parents on welfare knew 525 words (Tough, 2006). Paul Tough goes on to say:

By age 3, the average child of a professional heard about 500,000 encouragements and 80,000 discouragements. For the welfare children, the situation was reversed: they heard, on average, about 75,000 encouragements and 200,000 discouragements. (p. 48)

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By age 3, such gaps! The gap between deficit and growth in human development can be closed, but doing so is not quick, fast, or easy. We can do profoundly good work, but we should not overpromise.

Intensive training in the behavioral sciences informs practitioners that human life is complicated. Improving it takes time. This is the way it is. We cannot offer a shortcut around suffering, loneliness, and despair. Reflecting on the time issue, Pipher (2003) says:

Last night I read a case history about deep brief therapy, an approach that lasts a few sessions but profoundly changes the clients involved. It struck me as a bonus concept. Relationships take time. When we suggest that high-quality advice can be given under rushed conditions, we undercut what we can offer people—a calm place to carefully explore their situations. Furthermore, we are likely to harm people if, while we are ignorant about many aspects of their lives, we jump in with radical advice and grandiose plans to transform them. (p. 26)

We do offer an incubator of human growth and development that can, over time, gradually transform lives. The hope that change is possible sustains all of us, including seasoned practitioners.

These are 15 key qualities for the work. Now on to a few more topics in this chapter.

CENTRAL EXCITEMENT OF THE WORK

What was once accepted as human fate can now be changed. We now have words for conditions that can be defined and changed, such as chemical dependency, test anxiety, depression, domestic abuse, learning disabilities, psychological trauma, attachment disorder, and body image. In the past, we were born into a genetic vulnerability and, perhaps later, developed a condition (e.g., alcoholism), and that was our lot. Now therapy and counseling, and many other methods too, can improve our lives.

People often come for help because they have an unsolvable problem that needs to be solved. People are usually very active and skilled problem solvers. They find ways to solve problems every day. Even daydreaming can be a useful way to solve problems.

Sometimes, as people, we encounter problems that do not need to be solved. We shelve them, forget about them, and find other ways to do things. The crisis floats away. At other times, our problem-solving methods are not creative enough and even avoidance does not work. Then we have the unsolvable problem that has to be solved. In the body, this situation is often expressed in the form of one or more parts of the distress trilogy of anger, anxiety, and depression, similar to the engine light coming on in the car to signal a problem. And there also arises the demoralization that Frank and Frank (1991) have so eloquently described as central to clients when they come to us. This situation of being stuck (cannot live with him, cannot live without him) with a profound