Novice Therapists’ Perception and Use of Self-Care

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Abstract

Self-care is necessary for psychotherapists to prevent burnout and to provide ethical services for clients. Counselling students often recognize the need for self-care, but neglect to implement it, preventing them from building the necessary practices to endure hardships related to practicing psychotherapy. Previous research, such as Butler and colleague’s work (2017), has examined the importance of self-care in counselling education, but has not examined how it is applied in practice. Therefore, this project’s research questions included: 1) How do novice therapists engage in professional self-care? 2) How do novice therapists bridge the gap between conceptual knowledge and practice of professional self-care? 3) What are the barriers to self-care? Thematic Analysis (TA) was used to distil meaning from common experiences of participants. Four psychotherapists with an average of 1.5 years of experience were interviewed using an in-depth semi-structured interview protocol. Eighteen subthemes were generated from the data, further categorized under four themes: (1) obstacles to self-care; (2) work-life balance; (3) pathways to self-care; and (4) effects of self-care. Implications of this research include structured self-reflection in counsellor training programs, integration of flexibility and self-care provisions in workplace cultures, and a strong policy emphasis on the need for counsellor self-care and improving professional guidelines to allow for counsellor self-care practices.

Keywords: Therapist self-care, ethical therapeutic practices, psychotherapy, counsellor education
Novice Therapists’ Perceptions and Use of Self-Care

CHAPTER I

INTRODUCTION

The act of providing counselling to others can be considered an act of putting oneself into the lives of another to guide and support them through their subjective difficulties. As such, by providing counselling, one is providing themselves for clients. Through client needs, counsellors may face many difficulties in building a relationship and walking through the challenges being faced by clients, and subsequently being able to sustain a healthy, balanced life of their own outside of client needs. The Canadian Counselling and Psychotherapy Association (CCPA) defines counselling as “the skilled and principled use of relationship to facilitate self-knowledge, emotional acceptance, and growth and the optimal development of personal resources,” and does not recognize a difference between counselling and psychotherapy (“The Profession & Regulation,” n.d.). The College of Registered Psychotherapists of Ontario (CRPO) defines psychotherapy as, “[occurring] when the Registered Psychotherapist (RP) and client enter into a psychotherapeutic relationship where both work together to bring about positive change in the client’s thinking, feeling, behaviour and social functioning,” (“What is Psychotherapy?,” n.d.). For the purpose of this research, therapy and counselling will be used in an interchangeable manner.

Psychotherapy acts as a support and provides people with tools to effectively cope and overcome presenting challenges, enabling them to live their best lives. However, for therapists themselves, the act of providing therapy may act as a challenge, and thus increase their risk of negative outcomes such as burnout and compassion fatigue (Mayorga, Devries, & Wardle,
Burnout is often a result of a prolonged emotional strain, and can result in feelings of helplessness, negative attitudes about work and self, anger, and a loss of confidence (Everall & Paulson, 2004). Up to 67% of mental health workers have reportedly experienced significant levels of burnout in their career (Morse, Salyers, Rollins, Monroe-DeVita, & Pfahler, 2012). Similarly, compassion fatigue occurs when therapists take on and subsequently experience client traumas, resulting in symptoms similar to Post-Traumatic Stress Disorder (PTSD), including avoidant or numbing behaviours of anxiety associated with the client (Figley, 2002). Compassion fatigue negatively affects therapists’ abilities to effectively support and assist clients due to the high cost of extensive amounts of compassion that is required in a psychotherapeutic profession (Figley, 2002). Specifically, when therapists are experiencing negative impacts, such as burnout or compassion fatigue, they are more likely to lack empathy when working with clients, damage the therapeutic relationship, violate therapeutic boundaries, provide inadequate care to clients and increase the risk of unethical conduct (Everall & Paulson, 2004; Thompson, Frick, & Trice-Black, 2011). Due to the damage that negative impacts of providing therapy, such as burnout and compassion fatigue, can cause for clinicians and clients alike, it is important to examine experiences of burnout and how it may be prevented as a way of providing a better future for the profession.

As those who provide support and care, therapists should be more likely to recognize the symptoms of burnout and compassion fatigue and seek help for themselves. However, rather than seeking help when the signs arise, therapists are often reluctant to admit they require help, causing further damage to themselves and providing detrimental services to their clients (Everall & Paulson, 2004; Roach & Young, 2007). Similarly, in counsellor education programs, while students have been shown to recognize the need for self-care as a way of preventing burnout and
compassion fatigue, often their efforts towards maintaining self-care decrease during their studies (Butler, Carello, & Maguin, 2017). Thus it leads to the question of why therapists, who provide help to other people, are reluctant to admit that they need help too? What is stopping therapists from using the help they provide to others?

Self-care may be used as a proactive resource to prevent negative therapist outcomes. Self-care can act as a protective agent against stress side effects and burnout symptoms through maintaining personal psychological well-being (Ayala, Ellis, Grudev, & Cole, 2017; Figley, 2002), yet ambiguity remains as to how to implement and positively encourage self-care into education and professional organizations (Ohrt & Cunningham, 2012; Thériault, Gazzola, Isenor, & Pascal, 2015; Thompson et al., 2011). Moreover, while many North American ethical standards have emphasized the need for self-care in mental health practitioners, they have neglected to provide explicit ways in which practitioners can implement it into their own lives (Bradley, Whisenhunt, Adamson, & Kress, 2013). Furthermore, it has been suggested that self-care be a proactive mechanism to prevent burnout and compassion fatigue and to continue acting in an ethical manner (Killian, 2008; Shannon, Simmelink-McCleary, Im, Becher, & Crook-Lyon, 2014; Zahniser, Rupert, & Dorociak, 2017). However, as stress levels rise, it has been shown that self-care behaviours become increasingly more neglected (Ayala et al., 2017), despite the ethical considerations of such behaviours. What more could be done as a way of promoting self-care practices in both education and professional standards? How may self-care be implemented as a proactive resource rather than a reactive solution?

Various studies have identified the importance of self-care in the lives of helping professionals to reduce the risk of burnout and compassion fatigue (e.g., Figley, 2002; Foss-Kelly & Protivnak, 2017; Williams, Richardson, Moore, Gambrel, & Keeling, 2010). However,
in what ways is it possible to encourage the use of self-care within the profession to reduce the risk of negative outcomes? While factors such as large caseloads and minimal agency resources have been shown to have a negative impact on counsellor well-being, other factors such as access and use of adequate supervision and feeling valued within an organization have increased overall employee well-being in mental health agencies (Ohrt & Cunningham, 2012). Additionally, by specifically addressing and using concrete methods for training students in self-care practices, students may be able to transfer such methods into their roles as a novice professional and engage in self-care as a preventative measure (Myers et al., 2012; Thériault et al., 2015). Conversely, it has also been suggested that it is the individual counsellor’s ethical imperative to ensure self-care strategies and plans are in place for their professional well-being (Thériault et al., 2015). Thus it remains unclear as to where the responsibility lies to implement and encourage professionals to be proactive in preventing burnout and compassion fatigue.

Though research regarding self-care in the psychotherapy profession is a growing field, results remain vague and theoretical in nature. Qualitative research into how self-care is implemented into the lives of working professionals can allow counsellor education programs and professional organizations alike to see what is valuable to those in the field and what has been helpful in the past. By providing such information, future programs and policies may be implemented as a way of better supporting therapists, reduce the rates of burnout and compassion fatigue, and increase ethical and effective services to clients.

This research study will be divided into five chapters. This chapter introduces the topic of self-care and how it relates to the profession of counselling, as well as briefly outlines the impacts of self-care and the necessity of it for novice counsellors. The second chapter reviews the current literature on the topic of counsellor self-care. Specifically, this chapter is divided into
sections exploring: (a) how self-care has been defined; (b) the consequences of neglecting self-care; (c) the use of self-care among counsellors; (d) previously explored barriers to engaging in self-care; (e) the ethical implications of self-care; (f) the role of self-care within counsellor education; (g) various self-care mechanisms; (h) the conceptual framework used within this study; (i) a condensed synthesis of the available research, and lastly, (j) this research project’s research questions. The third chapter will examine this study’s methodology. Specifically, it will describe this project’s research design, the participants, data collection and analysis, and tools to ensure overall trustworthiness. The fourth chapter of this study explores the themes generated from this project, along with supporting verbatims from participants. The fifth and final chapter includes the discussion of the findings from this study. It will outline a summary of the main results found and describe connections to existing literature as well as explores notable findings. This chapter will conclude with the limitations of this study, recommendations for future research, and implications of this project’s findings.
CHAPTER II

LITERATURE REVIEW

The purpose of this chapter is to examine the existing literature as it relates to perspectives and findings regarding counsellor self-care. This section will begin with examining factors that contribute to the definition of self-care, including professional standards of practice and the various aspects of self-care that exist to promote overall wellness. It will then explore the possible consequences of neglecting self-care, such as work-related distress, burnout, compassion fatigue. It will continue to explore how the literature views self-care use among counsellors currently, including the specific developmental phase of novice counsellors and how self-care exists in such a phase. Fourthly, this section will examine the ethical implications of self-care, specifically how ethical practice and the use of self-care are related. Fifthly, the role of counsellor education and training programs will be explored as to how self-care currently exists and the professional opinions as to what the responsibility of such programs are when it comes to developing counsellor self-care. Sixthly, this section will examine the literature’s stance on specific self-care mechanisms that could be used to promote overall well-being. Seventhly, a conceptual framework that will guide the study is offered. This section will then summarize the explored studies in a literature synthesis and conclude with the research questions prior to exploring this study’s methodology.

Definition of Self-Care

Moore et al. (2011) succinctly defined self-care for helping professions as, “[enhancing] well-being and involves purposeful and continuous efforts that are undertaken to ensure that all dimensions of the self receive the attention that is needed to make the person fit to assist
others” (p. 545). Rather than simply caring for one’s self, self-care within helping professions often involves maintaining a balance between the professional self and the personal self in order to both decrease stress and increase emotional tolerance and maintain personal boundaries when working with clients (Bressi & Vaden, 2017; Williams et al., 2010). More than maintaining a high quality of professional conduct with clients, self-care within helping profession has also been linked to maintaining counsellor well-being as a whole (Butler et al., 2017; Pope & Vasquez, 2011). Counsellor self-care has also been shown to integrate all aspects of well-being, including emotional, mental, spiritual, and physical self-care (Barlow & Phelan, 2007). Thus, it can be said that self-care is important in order to maintain an inner equilibrium and effectively care for clients in a therapeutic setting.

Through the breakdown of self-care into the different areas of a person’s life, they may be able to engage in behaviours that are fulfilling in different areas and contribute to a different area of their overall wellness. Due to the intensity of the emotions experienced within this profession, emotional self-care for a counsellor involves being aware of their individual emotional needs and engaging in a way that is fulfilling those needs (Jennings, Sovereign, Bottorff, Mussell, & Vye, 2005). To manage the demands of the field, emotional self-care would allow counsellors to manage the emotions of others without experiencing negative side effects (Barlow & Phelan, 2007). As the name suggests, physical self-care involves attending to one’s physical needs (Barnett, Baker, Elman, & Schoener, 2007). Due to the stressful nature of the counselling profession and the physical side effects of such stress, physical self-care can be used to mitigate such effects. Mental self-care has been defined as, “actions taken to endorse self-awareness and healthy decision-making,” (Bloomquist, Wood, Friedmeyer-Trainor, & Kim, 2015, p. 294). Counsellor self-awareness is an important aspect of the profession as it can be
used as a tool to prevent compassion fatigue (Merriman, 2015), provide a way to alter decisions and reactions to stressors (Caldwell, 1984), and further the understanding of what could interfere with their overall wellness (Haddock & Falkner, 2017). Furthermore, spiritual self-care has been defined as, “the set of spiritually-based activities that a person engages in to maintain or promote continued personal development and well-being in health and illness,” (White, Peters, & Schim, 2011, p. 53). As such, spiritual self-care involves finding meaning beyond the self, in relationships, and in clinical practice and involves strengthening the self (Dombo & Gray, 2013). While self-care may have different dimensions, it is important that each dimension is fulfilled in a way that is useful for the counsellor themselves to provide the best services for clients.

**Consequences of Neglecting Self-Care**

While maintaining regular self-care practices can be beneficial to counsellors and those within helping professions, there may also be risks to neglecting self-care. As a whole, stress is inescapable (Caldwell, 1984). Over time, stress can also become distress to counsellors as it becomes harmful (Caldwell, 1984). Within the psychotherapy profession, stressors can relate to the relational nature of being able to hear difficult narratives from clients, recognizing and managing strong emotions in session, and dealing with complex cases (Bressi & Vaden, 2017). Moreover, working with clients who have experienced trauma or other “tough stuff” can attribute to acute distress (Killian, 2008). Outside of the sessions themselves, aspects of the profession such as professional conflicts, receiving criticisms from supervisors, and seeing a heightened amount of clients can contribute to counsellor stress (Rodolfa, Kraft, & Reilley, 1988). The inevitable stress that accompanies a helping profession therefore requires self-care to diminish the negative effects of such stress.
Research has also shown that novice professionals are at a heightened risk of work-related stress (Colman et al., 2016; Dorociak, Rupert, & Zahniser, 2017). Negative effects of work-related stress on counsellors may include body tension, headaches, lack of energy, tunnel vision or feelings of being disconnected, sleep disturbances, and increased anxiety or panic within themselves (Killian, 2008). Not only can occupational stressors have an impact on the counsellor’s physical body and overall well-being, but they can also impact their work with clients. As stressors can deplete internal resources, it can translate into a counsellors’ decreased ability to cope with and respond to the needs of their clients (Harr, 2013). Consequently, the quality of the services being provided to clients would decline and clients would experience the negative impacts of their therapist’s occupational stressors. Due to individual sensitivities to stressors and the consequences of such stressors (Caldwell, 1984), it is important to note that counsellors may also be affected by occupational stress in subjective ways, thus highlighting the individual nature of self-care. For example, counsellors who have entered the field from an objective standpoint have been shown to experience less stress in comparison with those who have entered the field with a personal motivation based on their own history of trauma (Harr, 2013). Thus, counsellors must be aware of subjective stressors and mechanisms to manage such in order to avoid negative impacts to both themselves and their clients.

Without self-care to manage occupational stress and distress, helping professionals such as counsellors and psychotherapists are at a heightened risk of facing detrimental consequences such as burnout and compassion fatigue (Mayorga et al., 2015). Due to the empathetic and compassionate nature of providing counselling, psychotherapists seem to be naturally at risk for developing compassion fatigue and burnout specifically, as both result from the prolonged emotional strain of being in a compassionate and helping role. (Everall & Paulson, 2004; Figley,
2002). While both compassion fatigue and burnout have the ability to negatively impact the therapeutic relationship by inhibiting counsellors’ ability to effectively use empathy and compassion with clients and heighten the risk for boundary violations (Everall & Paulson, 2004; Turgoose & Maddox, 2017), they differ in their presentation. Specifically, burnout is a result of excessive demands, both psychological and emotional, made on people who are in a position of helping others and has been primarily evident in those within occupations that are highly involved with other people and require much of the person themselves (Jackson, Schwab, & Schuler, 1986). As it manifests within people, burnout may include not only a drain on emotional reserves, but also negative attitudes and feelings towards clients, and a decreased sense of personal and professional accomplishment (Kottler, 2017). Not only does burnout affect a counsellor and their personal well-being, but it can negatively impact their relationships and work with clients. Clients of therapists experiencing burnout are often at a heightened risk of receiving poor care and inattention to severe and complicated presenting issues (Thompson et al., 2011).

Similarly, compassion fatigue results from counsellors re-experiencing client traumas and can produce an inner tension and preoccupation within the counsellor (Figley, 2002), and may present as symptoms that are similar to PTSD (O’Brien & Haaga, 2015). In a counselling setting specifically, compassion fatigue has been defined as, “a product of exposure to the suffering of clients, with little to no emotional support in the workplace, and poor self-care,” (Merriman, 2015, p. 371). Moreover, compassion fatigue includes a heightened sense of isolation alongside feelings of helplessness and overall confusion (Figley, 2002). While both burnout and compassion fatigue can negatively impact the provision of counselling to clients, self-care has been shown to be important in both the prevention and the treatment of each condition.
(Merriman, 2015; Wardle & Mayorga, 2016). However, therapists often are unable to recognize the negative effects of a lack of self-care in their own lives or are reluctant to seek help or prioritize self-care, leading to negative consequences for both the therapist and the clients they serve (Everall & Paulson, 2004; Roach & Young, 2007). When therapists are unable or unwilling to self-identify symptoms of burnout, they are more likely to make decisions for themselves that ultimately harm others (Kottler, 2017). Through this literature review, I will examine the importance and ethical considerations of self-care in a professional context, the role of self-care in counsellor education, as well as provide examples of practical self-care suggestions for therapists in the field as a way of establishing the state of the current research in psychotherapist self-care.

While a lack of self-care can allow the negative impacts of occupational stressors to impact work with clients and has the potential to develop into counsellor burnout and compassion fatigue, the use of self-care can foster compassion satisfaction (Harr, 2013). Compassion satisfaction has been defined as the pleasure that comes with being able to do the job well (Stamm, 2005). It can also assist counsellors in being able to manage the day-to-day stressors of the occupation (Harr, 2013). As such, compassion satisfaction can be an important factor in the professional lives of therapists. However, it is also been shown that more experienced professionals report higher levels of compassion satisfaction (Avieli, Ben-David, & Levy, 2016), highlighting the need for novice professionals’ use of self-care. In addition to the pleasure of being able to enjoy one’s work, it has been shown that the more compassion satisfaction is experienced, the higher the standard of ethical behaviours within a counselling setting (Avieli et al., 2016). Thus it is important to foster compassion satisfaction within one’s self to allow for high standards of ethics and for clients to be properly cared for.
The risks of ignoring the needs of the self, outweigh the benefits of constantly putting others first, however, as stress levels increase, self-care often becomes progressively neglected (Ayala et al., 2017). Therapists are in a profession that continuously requires caring for others, but without caring for themselves, therapists could face consequences such as burnout and compassion fatigue, potentially forcing a change of profession (Figley, 2002). Additionally, self-care can protect individuals from the negative side effects of stress, which include health issues, interpersonal problems, cognitive impairment, emotional distress and more (Ayala et al., 2017). Stress can not only have negative impacts on individuals, but it can also worsen overtime when left unattended to (Barnett et al., 2007). As such, it has been suggested that self-care should be a preventative mechanisms for counsellors, rather than a retroactive solution (Barnett et al., 2007). In order for the negative side effects of stress, compassion fatigue, and burnout to be prevented, self-care must be a conscious effort from the beginning of one’s career.

Use of Self-Care among Counsellors

Theoretical approach to self-care. In order to succeed in a caring profession such as psychotherapy, self-care is not only important, but necessary. While the profession involves active caring for clients, therapists are humans themselves and are thus susceptible to biases, errors, and distortions, even while clients prefer to view them as all-knowing and perfectly stable individuals (Kottler, 2017). Therapists are bringing their human selves into therapy sessions and must be able to manage their personal boundaries in order to effectively enter and leave the client’s life space. For example, an existential therapist would help a client by placing themselves into the client’s world and become a part of their life to understand their subjective values and way of being (Bakris, 1977). Within existentialism, it has also been argued that a counsellor can only help people to make sense of their lives if they have first been able to make
sense of their own life and has reached a place of clarity (van Deurzen, 2012). In other words, counsellors are unable to assist clients through their struggles without first having to find individual meaning and achieve clarity in their subjective world. Similarly, humanistic therapists would fully immerse themselves in a client’s life space, using their language, understanding where they find meaning, and the nature of their individual feelings (Barton, 2000). Humanism would argue that a counsellor’s inherent personality characteristics are the most important factors in embracing and activating client potential, rather than the skills and learned capacity of a counsellor (Hansen, 2005).

Moreover, theories that have previously proposed counsellor neutrality and anonymity have developed over time to understand how a counsellor’s personhood may become a part of the counselling process. Traditionally, it has been suggested that Freud developed psychoanalysis involving therapist neutrality and anonymity to ensure that therapists are able to maintain objectivity within the practice of treating patients (Schachter & Kächele, 2007). However, such views have been modified in contemporary psychoanalytic theory. Specifically, there has been an increased interest in how clients within a therapeutic relationship can unconsciously seek out the vulnerabilities and subjective parts of the therapist which can then be amplified and become an integrated part of the therapeutic work being done (Rizq, 2007). Thus, therapists must be able to manage their own emotions and maintain inner equilibrium if they are to enter a client’s space and walk alongside them to achieve mutually agreed upon therapeutic goals. Due to this development in traditional psychoanalytical theory and the common relational elements in psychotherapy theoretical orientations, it necessarily follows that the relationship built between counsellors and clients is a valuable aspect of therapy and requires therapists to
manage individual emotions and struggles faced in their lives as a way of ensuring effectiveness of treatment and maintaining focus on the client and their needs.

**Practical use of self-care.** Though self-care is necessary, it is not often implemented by therapists in an effective manner. Uncertainty surrounding how to practically and effectively teach students about self-care has resulted in a lack of self-care implementation in education programs (Thériault et al., 2015), thus inhibiting the development of self-care regimes to be transferred into their career. Rather, research has shown that counsellors who have recently entered the profession engage in fewer self-care behaviours in comparison to late-career counsellors (Dorociak et al., 2017), highlighting the need for increased education on self-care and the development of plans for students to implement in their careers from the start.

Throughout counsellor development, differences in stress management, self-care and burnout levels have been observed. Particularly, it’s been shown that as counsellors develop, their stress tolerance of clinical work increases and they are more able to come to terms with their professional responsibilities, such as maintaining balanced therapeutic relationships (Rodolfa et al., 1988). Professionals with more experience have also reported lower levels of burnout and secondary traumatic stress than those with less experience (Avieli et al., 2016). Moreover, novice counsellors have been shown to be more prone to work-related stress and rely on the external feedback and support to navigate the transition and development of autonomous professional functioning (Rønnestad & Skovholt, 2003). As counsellors develop they have a tendency to better manage the stress of clinical work and understand the limits of their responsibilities within the therapeutic relationship to ensure more of a balance (Rodolfa et al., 1988). Through heightened stress levels in addition to feelings of responsibility over the therapeutic relationships with clients, novice counsellors can be said to be in a developmental phase that is more prone to
distress and negative impacts without the mitigating effects of self-care. Conversely, more senior professionals have been shown to have a sense of self-acceptance and satisfaction with their work, as well as being regarded by others as a well-established professional (Rønnestad & Skovholt, 2003). As such, novice professionals may be aided through the concrete implementation of self-care development in order to facilitate the transition to novice professional and provide them with skills to transfer into the field. Without the education and training in the importance of self-care, therapists may fail at implementing it because many are under the false belief that they are to be a model of health for others and are immune to mental health issues as a practitioner (Dayal, 2013). Therefore, novice counsellors would have minimal background information in what self-care is, why it is important, or how to implement it as a professional skill to use throughout their careers.

Self-care allows therapists to be their best selves as well as provide the best service they can for their clients. Studies have shown that self-care activities can increase overall well-being, as well as decrease stress levels in therapists (Mayorga et al., 2015). Additionally, good self-care practices are able to positively affect all areas of a person’s life. By actively practicing self-care and improving their overall well-being, therapists are also able to simultaneously increase their professional quality of life (Lawson & Myers, 2011). Counsellors working with clients who have a history of trauma can use self-care as a way of mitigating the effects of hearing such traumas each day (Alani & Stroink, 2015), thus not only making it easier to go into work each day, but also making it easier for counsellors to prevent vicarious trauma and being negatively impacted by the traumas of others.

Not only is self-care beneficial for the therapist themselves, but it is also beneficial for the clients with whom they are working. When therapists conduct effective self-care, they are
more likely and able to assist their clients in focusing on and enhancing their own self-care and overall well-being (Mayorga et al., 2015). Therapists are therefore better able to provide help in increasing client well-being when they are actively pursuing overall well-being in their own lives. Therapy itself has been shown to be effective when the therapist is empathetic, works collaboratively with the clients, and is attentive to their individual issues, however, these aspects of therapy may be diminished when the therapist is ignoring their self-care needs, thus providing clients with an inadequate and possibly harmful service (Morse et al., 2012).

**Barriers to Engaging in Self-Care**

While self-care can be considered important for counsellor well-being, there are barriers to engaging in self-care behaviours. Due to the wide variation in how individuals manage stress and their subjective consequences of stress, self-care may involve heightened self-awareness and understanding of the individual impacts of professional stress in order to determine their subjective self-care needs (Caldwell, 1984; Rodolfa et al., 1988). Without self-awareness of individual needs, it can become more difficult to engage in appropriate self-care behaviours. Self-care behaviours can also become a secondary priority when counsellors are faced with responsibilities at home (Alani & Stroink, 2015). Overall busyness as well as high degrees of responsibility can lead to the neglect of self-care behaviours, and can make it difficult to prioritize individual wellness.

Being able to balance caring for the self and caring for others is a persistent challenge for therapists and those within a caring profession (Bradley et al., 2013). The perception that counsellors are to be a model of perfect health, including mental health, for others has prevented counsellors from seeking needed help and engaging in self-care behaviours (Dayal, 2013). Counsellors may also face barriers such as limited time, lack of finances, and uncertainty as to
where to reach out for help (Bearse, McMinn, Seegobin, & Free, 2013). Additionally, therapists are often reluctant to seek needed help for themselves (Roach & Young, 2007), creating a professional stigma around protecting practitioners against similar mental health issues their clients face. Rather than being open and active in seeking help, therapists seem to have the belief that they are not able to seek the mental health care that they are providing for others. Therapists are easily able to promote the concept of self-care to their clients, but they are not effectively implementing it into their own lives (Williams et al., 2010). By being stigmatized against implementing regular self-care practices, therapists are simultaneously denying their clients from the help they are seeking as well as increasing amounts of potentially irreversible damage for themselves. Though it is a challenge, by engaging in self-care activities, therapists can more effectively help their clients.

Novice professionals may face additional barriers to self-care due to the stage of their professional development. Contrary to students, who are told how to develop throughout their program, novice professionals are adjusting to being in charge of their own development (Skovholt, Grier, & Hanson, 2001). For example, novice counsellors are having to learn how to be assertive about their individual wellness (Skovholt et al., 2001). Novice counsellors have also been shown to experience insecurity, lack insight and boundary control, and rely upon others for professional direction (Alves & Gazzola, 2011). As such, self-care may be negatively impacted. For example, it has been hypothesized that when professionals struggle to maintain boundaries between their personal and professional lives, they tend to take on the responsibility of client welfare (Rodolfa et al., 1988). This may, in turn, lead to increased levels of stress and higher rates of distress and burnout for counsellors. As such, the state of counsellor development for
novice therapists can also relate to difficulties engaging in self-care behaviours and the barriers that exist for this population.

**Ethical Implications of Self-Care**

Self-care is not only conceptually important, but it is also an ethical imperative as a lack of self-care has the ability to negatively impact therapeutic work with clients. When therapists do not take care of themselves and neglect their own psychological needs, they can become insensitive or uncaring, damage the therapeutic relationship, or cause the client’s presenting symptoms to worsen (Malinowski, 2014). Thus, when therapists are not taking care of themselves, they are unable to effectively care for their clients. Therapists’ lives and emotional well-being have an impact on the work they are able to do with clients and its effectiveness as well as the emotions required for a helping profession (Kottler, 2017). Higher levels of burnout and secondary traumatic stress have also been shown to compromise the standards of ethical behaviours for counsellors (Avieli et al., 2016). Clients are put further at risk when working with therapists experiencing burnout or a lack of self-care as it may exacerbate their current symptoms and they may receive subpar attention to their presiding problems (Thompson et al., 2011). For example, if a client is working with a therapist on a perceived inability to maintain close relationships and a therapist is experiencing burnout and therefore facing difficulties in providing empathetic care, a client may perceive this as being another example of their inability to have close relationships with others. Rather than the therapist addressing and building a strong therapeutic relationship with this client, they may unintentionally show the client another example of being unable to sustain relationships in their lives, exacerbating their presenting problem further. As such, self-care becomes an ethical imperative to provide services that are beneficial to clients and maintain the quality of the therapeutic work being done.
Due to the damage that counsellors may be risking when they do not engage in self-care behaviours, there is increasing recognition and encouragement for the active engagement in self-care behaviours. In fact, self-care has been implemented in the ethical standards in various accreditation standards across North America (Bradley et al., 2013). For example, the Canadian Counselling and Psychotherapy Association (CCPA) state in their standards of practice that counsellors must attend to their overall well-being to ensure they are able to provide high quality services to clients (Standards of Practice, 2015). Furthermore, the College of Registered Psychotherapists of Ontario (CRPO) includes the competencies of Safe and Effective Use of Self as a way of ensuring psychotherapists engage in self-reflection and gain understanding of their interactional patterns, personality characteristics, and subjective context safe work with clients (“College of Registered Psychotherapists of Ontario – Definitions,” 2015). However, the literature contributing to understanding how self-care impacts how counsellors, particularly novice counsellors, are able to practice safely and effectively is limited. By recognizing and enforcing the need for self-care, governing agencies can ensure professionals are providing the best possible services for their clients.

Self-Care in Counsellor Education

Due to the ethical implications of self-care, it is important for therapists to know and understand its importance and effectiveness prior to entering the field. During the novice professional development stage, it has been shown that therapists put the skills and knowledge they acquired during their training to the test for their effectiveness and validity when they are working in the field (Rønnestad & Skovholt, 2003). It necessarily follows that therapists would also be testing the effectiveness of the self-care understanding and skills developed during counsellor education when it comes to being a practicing novice therapist. Increasingly, it is
becoming a recognized need to implement self-care practices into counselling education programs as counsellors must be aware of the potential consequences to both themselves and their clients if they neglect their selves (Roach & Young, 2007; Thériault et al., 2015). This awareness should begin at the start of the program as a way to create a self-care culture and better prepare students for the professional world (Everall & Paulson, 2004). Moreover, by providing specific training on self-care throughout counsellor education, preventative methods may be implemented for students to transfer into practice in order to reduce burnout rates and professional impairment (Bradley et al., 2013). By beginning a culture of healthy self-care behaviours within training programs, it can add to the attitude of self-care as a preventative mechanism within the profession (Barnett et al., 2007). Education is meant to prepare students for the professional world, thus additional self-care resources in counsellor education may help counsellors to become better prepared and more resilient to the challenges they will face throughout their career (Butler et al., 2017). By including self-care training in counsellor education, lasting changes may be made before they are necessary and hence reduce the risk of counsellor impairment and client harm (Ohrt & Cunningham, 2012).

Moreover, the issues that arise during sessions and transitioning to being a professional during the training years require increased self-care behaviours in comparison to other stages of counsellor development (Kottler, 2017). Additionally, novice counsellors continue to seek external individuals to rely on and mentors to facilitate the feeling of being able to confidently and competently practice in an independent manner, as well as an increased sense of professional autonomy when learning the nuances of the profession (Rønnestad & Skovholt, 2003), increasing the need for self-care to remain able to effectively bring the self into and out of therapy sessions with clients while learning how to be a professional. However, it has been suggested that novice
counsellors have yet to have the experience to be able to differentiate themselves from others, particularly clients (Schwing, Lafollette, Steinfeldt, & Wong, 2011), possibly resulting in heightened stress and decreased ability to adequately create professional boundaries. It has also been shown that both students and novice counsellors are at a heightened risk of negative therapist impacts, such as compassion fatigue, as they do not have the mediating effects of practical experience and the wisdom that accompanies experience (Harr, 2013), highlighting the importance of self-care implementation within this stage of counsellor development. While it has been said that self-care involves self-awareness of subjective occupational stress, triggers, and subsequent ways of addressing and managing the individual impacts of such (Caldwell, 1984; Rodolfa et al., 1988), it has also been suggested that novice counsellors may face issues in gaining self-awareness of the boundaries and motivations of their role as a counsellor (Schwing et al., 2011). As such, novice counsellors may struggle with understanding the individual impact of the provision of counselling and the accompanying stress on themselves due to a lack of experience and therefore be more susceptible to the negative impacts of occupational stressors. Additionally, as counsellors are in charge of their own development, contrary to students who are guided through their development (Skovholt et al., 2001), it is important for students to be taught about the importance of and how to engage in self-care behaviours as a way of transferring skills and knowledge to their careers. Moreover, novice counsellors are faced with the transition of understanding clients on an individual level and acting in manner that is beneficial to them, rather than doing the “right” thing based on the taught procedure (Hayward et al., 2013). This transition to self-directed practice coupled with anxiety and uncertainty regarding therapeutic relationships (Schwing et al., 2011) may result in professional impairment due to negative effects of stress without self-care. Due to the increased responsibility and accompanying stress and
anxiety during the transition from student to novice professional, it follows that self-care is a necessary component of professional well-being, development, and competency. Thus, it is important for counsellors to be actively taught the required skills for a professional setting as they will require such skills early in their practice, making therapist self-care an important and necessary asset to the counsellor curriculum for effective therapy to take place upon graduation.

There has been research with mixed results as to the ability to incorporate self-care into counsellor education. Barriers exist for students to practice self-care, including time constraints and depleted energy levels in addition to learning effective skills to help people in a therapeutic setting (Mayorga et al., 2015; Myers et al., 2012). Therefore, self-care may be neglected and the habits may never form for therapists to be proactive in a professional setting and prevent consequences such as burnout and compassion fatigue. Furthermore, according to Rønnestad and Skovholt’s counsellor development phases (2003), a novice professional is facing an adjustment of being on one’s own. Primarily, they are attempting to confirm that their training had validity to it (Rønnestad & Skovholt, 2003). As such, they would be testing the skills they learned when faced with those circumstances, including self-care mechanisms and their importance. It necessarily follows that students should be taught about the importance of self-care and how to implement it effectively into their career. Conversely, it has been suggested that self-care is typically viewed as the individual responsibility of students, rather than providing educational resources and support to promote it (Pakenham, 2015). Other studies have suggested the need for concrete approaches to self-care (Myers et al., 2012; Thompson et al., 2011). For example, rather than perpetuating the stigmatized idea that counsellors should be a perfect model of health, psychological issues in counsellors and those in training should be acknowledged and normalized throughout education to create a culture where these issues can be openly discussed.
NOVICE THERAPIST SELF-CARE

(Dayal, 2013). It has also been suggested that students be required to complete a self-care plan within their education or to make it a goal for their learning (Harr, 2013). Thus, by providing concrete strategies for counsellors in training, they may be better able to apply these skills to their future careers and prevent future negative therapist outcomes. To create longevity for students, it has also been suggested that self-care education not only be applicable for the students in their current phase of development, but also that it should also focus on self-care applicability and development across the professional lifespan (Barnett et al., 2007). As such, self-care education has the potential to not only impact students within their education, but also continue to impact them into their careers and engage in such behaviours.

Counsellors in training can be further assisted in developing self-care strategies through supervision in their clinical experiences. Supervision is a critical resource, and can be deemed more important than peer support as a type of self-care for therapists (Malinowski, 2014). Supervisors may be able to help students recognize the need for self-care and promote its use through their flexibility, support, and by modelling self-care behaviours for their students (Thompson et al., 2011). By both showing students what it looks like and being open to talking about the student’s personal needs, supervisors are able to set up healthy self-care practices for students to carry into the field, enabling them to better manage occupational stress, and become more resilient to prevent burnout. Moreover, through modelling self-care and acting as professional role models to students and novice professionals, an overall climate of supportive self-care and help-seeking behaviours can be created within the organization (Barnett et al., 2007). Studies have shown that having time and access to adequate and appropriate supervision is a resource to promote wellness for therapists (Ohrt & Cunningham, 2012). While organizations as a whole can assist counsellors in their well-being by distributing their workload
to limit traumatic exposure to individuals and providing employee assistance programs to help counsellors process personal trauma, supervision can be considered engaging in self-care behaviours in and of itself (Killian, 2008). Supervisors can provide valuable information and strategies for students and novice counsellors to understand the importance of self-care and gain their own effective strategies to use throughout their career.

**Self-Care Mechanisms**

Specific strategies and resources are required for therapists to use as a way of promoting overall well-being. However, these strategies are often influenced by many factors, including workplace and education level. For example, Lawson and Myers (2011) found that younger mental health professionals working with a high percentage of PTSD survivors benefitted from peer support and encouragement, while psychologists found positive self-talk, regular breaks from work, professional development programs, and turning to spirituality to be beneficial to their overall well-being. Professional uses of self-care may be influenced by numerous outside factors, such as the clientele counsellors are regularly exposed to, counsellors’ educational level, and subsequent amounts of supervision they have obtained. Additionally, studies have identified the benefits of creative outlets as self-care strategies through such outlets’ use as a coping mechanism, and by increasing self-awareness, and aiding in problem-solving techniques (Bradley et al., 2013). Therapists have the ability to use creative strategies as a way of keeping themselves well in addition to developing further in other aspects of their life.

Different self-care strategies may also exist within different areas of wellness, including emotional, physical, mental and spiritual wellness. Due to the emotional nature of the work, it can be deemed imperative that counsellors manage their own emotions. Counsellors can ensure their own emotional regulation through active engagement in mindfulness (Duffy, Guiffrida,
Araneda, Tetenov, & Fitzgibbons, 2017). Emotional self-care may also involve being aware of individual emotional needs and actively fulfilling those needs, such as maintaining contact with meaningful people (Jennings et al., 2005). Physical self-care involves taking care of the body and may include activities such as healthy eating and increased physical exercise (Moore et al., 2011). By attuning to physical requirements for health, counsellors are not only helping their physical bodies to thrive, but they are also engaging in positive career sustaining behaviours (Barnett et al., 2007). Counsellors are not only working with the mental health of others, but their own, thus necessitating mental self-care. As such, methods for ensuring it can include seeking personal counselling (Dayal, 2013) and engaging in mindfulness techniques to increase the engagement in meaningful activities and aspects of life (Wise, Hersh, & Gibson, 2012).

Additionally, spiritual self-care can be used as a tool of strengthening the self (Dombo & Gray, 2013). While spiritual self-care can include activities that are faith-based, such as engaging in prayer or attending organized religious services, it can also include taking rests throughout the day to restore the mind, body, and spirit, meditating alone or in groups, and engaging in activities that allow a counsellor to be still and to quiet their mind (Dombo & Gray, 2013). Therefore, it is important for each area of wellness to be addressed in the self-care activities of counsellors.

Therapists may also develop their own strategies within an organized plan in order to actively prioritize self-care. A wellness plan focuses on prevention rather than reacting and providing a solution after a therapist has already burned out (Cummins, Massey, & Jones, 2007). By implementing a wellness plan, counsellors may be able to implement self-care from the beginning of their careers rather than recognizing a need for it after damage has been done. Moreover, a wellness plan should include self-care in all areas of life, including both professional, and personal wellness (Cummins et al., 2007), as a way of promoting and
increasing overall wellness. As a whole, counsellors should also be self aware in order to identify and understand their individual reactions in therapy sessions as a way of ensuring the provision of competent, ethical services to clients (Pieterse, Lee, Ritmeester, & Collins, 2013). However, each counsellor is different and therefore requires different types, and ways of implementing self-care into their own lives (Cushway, 1995). As such, the individualistic nature of self-care suggests that self-reflection and self-awareness would be required to develop an effective wellness plan and recognize subjective needs to be filled.

Due to the subjective nature of self-care, it is imperative that counsellors be able to find mechanisms that work well for them as individuals. Moreover, wellness is not a finite goal, but rather a process of adjustment and changes to fill subjective needs at varying times (Haddock & Falkner, 2017). Thus, counsellor self-care is personal and the responsibility to engage in activities that are beneficial to the individual lies with the individual. As such, self-awareness can be considered a tool of self-care in of itself. The unconscious reactions to stressors or events can be altered through self-awareness and self-understanding (Caldwell, 1984), thus individual actions to alter reactions must be taken. Self-awareness of personal risk factors and warning signs of distress can assist counsellors in assessing themselves throughout their career and making necessary adjustments to ensure wellness is maintained (Barnett et al., 2007). While counsellors can be aware of the need of and conceptually understand what self-care can be, this awareness does not automatically lead to immediate and explicit engagement in self-care behaviours (Alani & Stroink, 2015). Thus, self-care can be considered not only actions that are done to better personal wellness, but it also includes acting on those needs and fulfilling a responsibility to the self.
Conceptual Framework

This study examined novice therapists’ individual experiences with self-care and explore possible ways in which self-care in a professional context may be effectively managed. Due to the subjective nature of individuals, including their personal needs and stress tolerances, self-care requirements would vary with each person. Self-care needs are also influenced by individual factors such as counsellors’ personal experiences, values, and overall self-awareness and thus are fluid rather than a static entity (Pieterse et al., 2013). People are able to use their own life spaces and contexts as a way of determining their self-care requirements and in which ways it may be beneficial to them. The personhood of the counsellor and their experiences are significant in a helping profession, allowing each to be different and require different needs (Hunt, 2014; Kennedy & Black, 2010). Each person is therefore able to construct mechanisms in which they can fill their individual needs based on their life space, rather than following a broad, overarching and general self-care system.

This study took a constructivist approach as individuals construct meaning from their subjective experiences. Through the use of constructivism, it is understood that knowledge is not objective, but rather is a construction from people’s individual experiences and how they have derived meaning from those experiences (Schwandt, 1994; Yilmaz, 2008). By looking at individual experiences of self-care, I was able to see what has been beneficial to overcome barriers to self-care as a way of promoting similar strategies for counsellors in the future. Constructivism also understands that realities are social constructs of the individual mind, but constructions may also be shared between people (Mills, Bonner, & Francis, 2006). This study allowed the individual constructs of the importance and barriers of self-care to be examined, as well as how self-care as a shared construct can be better implemented, encouraged, and
influential in the lives of therapists. Through the search for meaning in self-care, I was able to find commonalities as to how participants prioritize it in their lives and see the room for improvement within the profession to make it more prevalent.

A constructivist approach can also integrate the views of self-care from the profession as a whole with how therapists personally conceptualize self-care. Constructivism allows people to integrate existing knowledge with new and personal experiences and knowledge (Yilmaz, 2008). This study therefore attempted to see the relationship between counsellor’s conceptual understanding for the need of self-care due to its ethical implications (Bradley et al., 2013) and individual experiences and perceptions of self-care within the profession. As such, this study examined how counsellors find meaning from subjective experiences of self-care as a way of promoting its use within their lives and in the profession as a whole.

**Literature Synthesis**

Throughout the literature, it has become clear that self-care is a necessary component for therapists to be effective in their profession. Not only can a lack of self-care add to the impact of stress, such as through health problems and cognitive impairments (Ayala et al., 2017), but it can also create ethical dilemmas (Everall & Paulson, 2004) and disrupt the therapeutic process with clients (Thompson et al., 2011; Turgoose & Maddox, 2017). Thus, self-care is an ethical issue as therapists can cause more damage to both clients and themselves when it is neglected.

While it is encouraged for counselling education programs to promote self-care within the training, the lasting effects of self-care training has rarely been studied. Through the inclusion of self-care into counsellor education, students may become more resilient to professional challenges (Butler et al., 2017), implement preventative self-care mechanisms, and
reduce professional impairment in the future (Bradley et al., 2013; Ohrt & Cunningham, 2012). However, constraints of being a student (Mayorga et al., 2015) as well as the view that it is the responsibility of the student alone (Pakenham, 2015) provide alternative arguments to integrating self-care into counsellor education curriculums.

Though self-care seems to be understood on a conceptual level, a practical level remains to be difficult to implement into the lives of practicing counsellors. Though suggestions such as creative outlets can be used to promote self-care and self-awareness (Bradley et al., 2013), each counsellor has individual experiences and as such have different needs (Hunt, 2014; Kennedy & Black, 2010). Additionally, while specific wellness plans are suggested as a preventative measure (Cummins et al., 2007), counsellors do not often follow through on the conceptual understanding of the need for self-care to promote wellness (Bradley et al., 2013). Thus, the barriers to self-care must be explored in order to be reduced for future counsellors.

**Research Questions**

Three research questions were used to examine novice therapists’ self-care usage. The first question addressed how novice counsellors engage in self-care to aid in their professional development. The second question addressed the gap between understanding the need for self-care and acting on that need. The third question addressed what has prevented novice therapists from engaging in self-care behaviours.

1. How do novice therapists engage in professional self-care?
2. How to novice therapists bridge the gap between conceptual knowledge and practice of professional self-care?
3. What are the barriers to self-care?
The following section addresses this study’s methodology. In this chapter, aspects including a Thematic Analysis research design, inclusion criteria and participant recruitment, ways in which data were collected, and protocols for data analysis will be discussed. The section will conclude outlining the methods used to increase this study’s trustworthiness.
CHAPTER III

METHODOLOGY

This study’s qualitative nature has provided a framework of shared meanings and experiences as a way to further explore effective self-care strategies into both counsellor education and the profession as a whole. By using a qualitative study, I was able to examine participants’ individual experiences with self-care to gain understanding of the ways in which self-care has been constructed, both by individuals and by the profession through their experiences and perspectives of self-care within the field. The participants in this study were new to the profession, therefore have had recent exposure to counsellor education as well as have faced some of the challenges within the profession. As such, they were able to speak to personal barriers, systemic factors, and areas of improvement for the profession in terms of novice counsellors’ use of self-care. For the purpose of this study, self-care included conscious behaviours or actions that participants actively engage in to reduce work-related strains and stress (Ayala et al., 2017). Focus was placed on self-care as it relates to their professional context. Participants were able to reflect on their experiences both within the profession and with their own self-care and therefore were able to provide individual definitions and derived meanings based on their constructed realities.

Research Design

A Thematic Analysis (TA) qualitative research approach was used to examine participants’ individual experiences and derived meanings from their self-care practices. A total of four (4) participants were recruited who were registered under a professional College, including the College of Registered Psychotherapists of Ontario (CRPO) and the Ontario College
of Social Workers and Social Service Workers. Participants were also recruited based on having up to five (5) years of active counselling experience, as it has been shown that a counsellor is considered a novice professional during the first few years of their practice, accounting for variations in individual professional development standards (Rønnessad & Skovholt, 2003). In-depth semi-structured interviews lasting 45-60 minutes were conducted with each participant following an interview protocol examining questions in regards to participant experiences with self-care, educational influences on self-care, perceived barriers to self-care and ways to overcome those barriers. Interviews were designed to elicit rich descriptions and meanings from individual experiences of the participants. Additionally, a qualitative method allowed for individual perspectives and experiences to be integrated into the view of self-care in the psychotherapy profession as a whole. A qualitative method was also able to shed light on specific methods of self-care used by participants and how their experiences enabled them to build self-care into their professional lives.

**Participants**

Participants recruited for this study were required to fulfill inclusion criteria. As such, inclusion criteria for this study included up to five (5) years of counselling experience in Canada, a professional designation, such as a Canadian Certified Counsellor (CCC) or the ability to register under a professional College such as the CRPO, and a strong proficiency in English with the ability to thoroughly depict their professional experiences with self-care. Participants for the current study were recruited through a means of purposeful and convenience sampling. I submitted requests to recruit employees of community agencies listed in the University of Ottawa Counselling Psychology Compendium. The written letter that was sent to community agencies can be found in Appendix A, and the recruitment flyer can be found in Appendix B. As
such, I was able to use convenience sampling to recruit from the immediate geographic area of the research and participants were located within the Ottawa region. Recruitment began in March 2019 and was completed in May 2019. When responding to the recruitment call, potential participants were asked how many years they have been practicing as a therapist, their professional memberships and/or regulatory bodies they are a part of, and whether they had a strong proficiency in English to depict their experiences with self-care. They were also sent a recruitment letter, which outlined the purpose of the study, inclusion criteria, and what was involved with participation, which can be found in Appendix C. Purposeful sampling was used as a way of ensuring participants adequately met inclusion criteria and were able to provide rich and meaningful descriptions of their individual experiences (Seidman, 2006). Through this study, participants were able to engage in intentional self-reflection regarding their self-care practices as a way of identifying personal mechanism and insight, as well as contribute to the literature influencing future policies and education standards to improve professional expectations for the benefit of future therapists. Thus, participants benefitted by actively adding to the current literature and understanding of the professional implications of self-care to create better practices in the future as well as engaged in self-reflection of the efficacy of their own self-care practices as a way of guiding their practices in the future.

Data Collection

After ethics approval was obtained, participant recruitment and data collection began. Participants showed that they met inclusion criteria and were subsequently approved for participation in this study. A time was then selected to conduct an in-depth, semi-structured interview lasting 45-60 minutes per participant. All interviews took place over the phone, allowing for minimal disruption throughout their day and maintaining confidentiality. This
The interview protocol was pilot tested among the Counselling and Psychotherapy Research team at the University of Ottawa to ensure that the structure, technique and objectives of the interview were in line with the purpose of this research study (Seidman, 2006). After the initial pilot study, I was able to make the necessary adjustments in both the protocol and my interviewing techniques prior to interviewing participants. For example, I was able to adjust the questions to make them broader in nature, allowing participants to speak to their individual experiences and then probe for further details when necessary. When meeting with participants, the interview began with an explanation of the study, including the research purpose, the consent to be audio recorded, confidentiality and privacy protocols, and the permission to use their interview data for the purposes of this study. The informed consent form for this study can be found in Appendix D. After consent was obtained, demographic information was gathered, including age, gender, level of education, professional membership(s), and years of practice. This was done as a way of ensuring inclusion criteria were met and to accurately depict the stories of participants in their individual contexts while maintaining confidentiality. Once such information was obtained, the interview focused primarily on participants’ experiences with self-care in their professional lives. Specifically, it focused on their perceived importance of self-care, influencing factors of their self-care development, their experiences with actively implementing self-care into their professional lives, and the role self-care has played in transitioning from advanced student to novice professional.

The interview guide was developed as a way of guiding the conversation surrounding participant experiences with self-care and the relationship it had with their professional competency and well-being. The interview guide was in-depth and semi-structured in nature to align with the perspective of interviewing as a way of eliciting information from participants that
are based in their subjective lived experiences (Seidman, 2006). Through creating questions that are initially broad in nature, I was able to gain the initial perspective of the participants, probe for further descriptions, and allow them to guide the direction of the interview through their experiences.

Questions were created to fall under the categories of the research questions. The first research question examining how participants engage in self-care as it relates to their profession was reflected in interview questions such as, “Tell me about your practice of self-care,” “How do you personalize self-care?” and “What has influenced your self-care?” These interview questions provided an opportunity to build upon the literature’s understanding of the subjective reactions to occupational stressors and the requirement of self-reflecting in their individual practices (Caldwell, 1984). Moreover, the literature described novice professionals as typically engaging in fewer self-care behaviours in comparison to those with more experience (Dorociak et al., 2017). As such, these questions were aimed at identifying the methods and ways in which novice counsellors in this study engaged in self-care behaviours as they relate to their professional well-being and allowed me to build upon their experiences to understand their perceived importance of self-care and how it impacts them as individuals.

The second research question examining how novice therapists are able to bridge the gap between conceptual knowledge and practice of self-care within their profession was reflected in questions such as, “How did you learn about self-care?” and “What has helped you to engage in self-care?” These questions were aimed at gaining a further understanding of the spectrum between conceptual understanding of self-care and the practice of it. For example, the literature has provided insight into the benefits of implementing self-care in counsellor education (Bradley et al., 2013) as well as integrating it into the overall work environment (Barnett et al., 2007).
Moreover, novice counsellors have been shown to rely more heavily on external feedback to navigate professional transitions (Rønnestad & Skovholt, 2003), thus raising the question of whether self-care among novice counsellors is a result of intrinsic motivation or external reinforcement. As such, these questions were aimed at identifying how self-care was initially learned, probing when necessary to identify roles of institutions and other factors facilitating the understanding of self-care, and how participants subsequently moved conceptual knowledge into action.

The third research question addressing what barriers to self-care exist was reflected in interview questions such as, “What has prevented you from engaging in self-care in the past?” and “What would make it easier to engage in self-care?” Concepts from the literature such as the tendency for counsellors to be reluctant to seek the help they provide to others (Roach & Young, 2007) and the persistent challenge of balancing caring for the self and caring for others (Bradley et al., 2013) guided the interview’s questions as it was aimed at recognizing the barriers that exist in the workplace, within the profession, and within the individual counsellors. Moreover, the novice counsellor professional development phase has shown a need to learn how to be assertive about their wellness and are faced with being in charge of their own development, rather than being guided through development in training programs (Skovholt et al., 2001). Therefore, these questions were aimed at addressing perceived barriers to self-care as they relate to the developmental phase of a novice professional to gain insight into how assertiveness can be gained or how professional development can be eased in the future.

The interview guide was used as a reference throughout the interview to ensure information for each research question was obtained, but the semi-structured nature allowed participants to guide the interview and for their individual experiences to be at the forefront of
the conversation. As such, I began each interview using the interview guide and referred to it when questions were exhausted through probing and asking questions based on participant experiences. The semi-structured interview guide can be found in Appendix E. During this interview, participants were audio recorded and interviews were manually transcribed at a later date. All identifying features were removed from transcripts through the use of pseudonyms for anonymity to be maintained. Participants were debriefed at the completion of the interview, allowing them the chance to voice concerns about revealed information or ask questions about the study as a whole. They were also given my contact information as well as my supervisor’s and that of the institutional ethics board as a way of increasing transparency and providing them ways to ask questions after the completion of the interview.

After interviews were transcribed, participants were sent a password protected Word document with their transcripts. By doing so, they were able to review their transcript and report changes to disclosed information during the interview. They were given seven (7) days to request changes made. Three participants did not request to make changes to their transcripts and one participant clarified specific words missed in the initial transcript. As such, changes were made to the transcript in an immediate manner and was communicated with the participant.

**Data Analysis**

Transcripts were firstly analyzed individually and subsequently analyzed across the data set to examine meaning and experiences of all participants. This was done through the use of Thematic Analysis (TA). The purpose of this data analysis technique is to identify patterns that are relevant to the research question, while also making sense of participants’ shared experiences across the data set (Braun & Clarke, 2012). TA also allowed for the opportunity to better comprehend the potential issues of self-care in the counselling profession (Alhojailan, 2012). An
inductive TA approach was used to analyze data in a bottom-up manner and allow participant experiences and voices to guide the data analysis (Braun & Clarke, 2012; Tuckett, 2005). As such, the themes are directly drawn from participant accounts, allowing it to be closely connected with the data itself (Braun & Clarke, 2012). Through the use of a bottom-up approach, themes and subthemes were able to be shaped with each additional transcript. Consistent with a constructivist stance, an inductive approach allows for participants’ experiences and the realities they have constructed to be directly related to the findings from the research and for results to reflect the shared constructions across participants. As such, participant experiences and their individual constructions were able to guide analysis and for their voices to be salient. Thus data were analyzed using a six-step process as outlined by Braun and Clarke (2012). After a transcript was created, I made initial notes as a way of becoming familiar with the data and began noticing relevant connections in the data to the research questions. In analyzing the first transcript, concepts from the literature were used to guide the analysis. This was done by connecting emerging ideas and concepts in the transcripts to similarities and contrasts to existing studies. For example, the literature’s description of novice counsellors relying on external feedback to facilitate professional development and independent professional function (Rønnestad & Skovholt, 2003) was used to frame the overarching role of supervision in the first participant’s experiences of self-care in their professional role. In subsequent transcripts, the concepts and codes previously generated were used to guide analysis through the examination of similar or contrasting concepts. The second step involved creating initial codes by coding everything that could be related to the research question in an inclusive, thorough, and systematic manner. The third step of data analysis involved finding similarities between codes and subsequently creating a theme. In this stage, I was looking for themes that not only connected to one another, but also
was able to connect to the data set as a whole, allowing for consistency and heightened understanding of the broader subject matter (Braun & Clarke, 2012). After creating these themes, I reviewed them in relation to both the coded data and the data set as a whole to ensure the relevant and important aspects of data were represented and that themes were related to the overall tone of the data set in relation to the project’s research questions. I then defined and named themes by selecting specific extracts of the data to present and thus develop a personal understanding of each theme using participant voices. The final step in data analysis was producing the final report by highlighting participant experiences as they relate to this project’s research questions.

**Trustworthiness**

As research requires standards of which to establish trust, it necessarily follows that this research project required trustworthiness criteria to ensure a methodologically sound study and themes accurately depict participants’ individual and shared experiences. As the essence of qualitative research is vastly different from that of quantitative research, different standards of practice to determine the worth of the study must be applied (Krefting, 1991). Major aspects of establishing a trustworthy qualitative study include its credibility, transferability, dependability, and confirmability (Guba, 1981).

**Credibility.** A study’s credibility can be increased by acknowledging the existence of multiple realities among people, and as such can be created through the use of member checks with participants and peer debriefing (Guba, 1981). In this study, credibility was ensured through the use of member checks, by sending transcripts of participant accounts to study participants upon completion of the transcript. By using member checks and sending transcripts to participants, collaboration was able to occur, as participants were afforded the opportunity to
further reflect on their experiences and elaborate further if they wish (Tracy, 2010). Additionally, I was able to use peer debriefing with my supervisor to receive critique and insight from others on best interviewing technique, avenues of participant accounts to explore with further participants, and to ask questions when needed.

**Transferability.** Transferability refers not to how generalizable a study is, but rather whether findings in a specific context are likely to exist in other, similar contexts (Guba, 1981; Tracy, 2010). In qualitative studies, transferability can be increased through the use of purposive sampling and eliciting rich descriptions from participants (Guba, 1981). This study used purposeful sampling as a way of increasing transferability, as it allowed for a wider range of the population to find similarities within the study to their own lives (Seidman, 2006). Additionally, interviews were designed to elicit rich descriptions about the contexts in which self-care behaviours exist, are hindered, or the role of their environment and education history. By doing so, it allowed for a context surrounding self-care to be better understood, and for similarities to be drawn between participants and readers.

**Dependability.** A qualitative study’s dependability refers to consistency and stability within a study, specifically as it relates to the process of conducting the study and the procedures used (Riege, 2003). However, minimal variance within the data is accounted for by the various perspectives and realities that human participants experience (Guba, 1981). As such, the use of external auditors and the creation of audit trails allows for the variance to be minimized, and for dependability to be increased (Guba, 1981). My supervisor, Dr. Nicola Gazzola, acted as an external auditor and examined the processes of the study to ensure that data methods and analysis were understandable and documented well to prevent researcher bias from influencing results (Guba, 1981; Riege, 2003). For the current study, an audit trail was created and included
participant communications, field notes, research activity, and detailed accounts of the processes taken throughout the study. The data analysis followed a three-level audit, allowing for codes, overarching themes, and the overall structure to be verified by Dr. Gazzola and for dependability to be increased throughout the study.

**Confirmability.** A qualitative study also must include confirmability, which is the acknowledgement of the subjective nature of qualitative research and that the researcher has an active role in interpreting data in a meaningful manner (Morrow, 2005). Confirmability within a research project may be increased through the use of researcher reflexivity, as it enables the researcher to understand and be transparent in where the interpretations are stemming from and how they have been impacted (Guba, 1981). In addition to being subjected to auditing from an external auditor to ensure that interpretations and decisions were made in the most meaningful way possible (Krefting, 1991), this study employed researcher reflexivity in the form of field notes and reflexive journaling after participant interviews.

The following chapter will outline the results found from this present study. It will be presented in relation to the four themes found on the use of self-care among novice counsellors and the subthemes that fall under such themes.
CHAPTER IV

RESULTS

Descriptive Analyses

A total of four interviews were conducted with four participants. Interview length ranged from 43 minutes to 67 minutes with an average of 53 minutes. Table 1 (below) provides a description of the demographics of the participants in this study, using the pseudonyms assigned to each person. This information was gathered by way of asking demographic questions prior to completing the interview. Three out of four participants were female and one participant was male. Two participants had a Masters degree in Counselling Psychology and were registered under the College of Registered Psychotherapists of Ontario and two participants had a Masters degree in Social Work and were registered with the Ontario College of Social Workers and Social Service Workers. Participants’ ages ranged from 25 to 41 with an average age of 33.75. Years of experience ranged from one year to two years with an average of 1.5 years actively providing counselling outside of educational requirements. Additionally, it is worth noting that one participant mentioned experiencing burnout previously and one participant mentioned experiencing work-related anxiety in the past.
The purpose of this study was to examine the perceptions and use of self-care among novice therapists in order to gain a further understanding of the role self-care plays in the developmental stage of novice counsellors. Data collection and data analysis followed Braun and Clarke’s (2012) Thematic Analysis and were conducted simultaneously. The research questions that informed this study were as follows:

Table 1

Participant Demographic Information

<table>
<thead>
<tr>
<th>Participant</th>
<th>Allison</th>
<th>Regina</th>
<th>Owen</th>
<th>Rebecca</th>
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<tr>
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<td>1.75 years</td>
<td>2 years</td>
<td>1 year</td>
</tr>
</tbody>
</table>

The purpose of this study was to examine the perceptions and use of self-care among novice therapists in order to gain a further understanding of the role self-care plays in the developmental stage of novice counsellors. Data collection and data analysis followed Braun and Clarke’s (2012) Thematic Analysis and were conducted simultaneously. The research questions that informed this study were as follows:
1. How do novice therapists engage in professional self-care?

2. How do novice therapists bridge the gap between conceptual knowledge and practice of professional self-care?

3. What are the barriers to self-care?

A total of eighteen subthemes were generated from the data. The full list of subthemes and themes and the associated transcript verbatims can be found in Appendix F. These subthemes were then categorized into four overarching themes: (a) obstacles to self-care, which included two subthemes; (b) work-life balance, which included five themes; (c) pathways to self-care, which included six subthemes; and (d) effects of self-care, which included five subthemes. The following four sections will include a description of each theme as well as detailed descriptions and accounts of each subtheme. Verbatims will be provided for each subtheme to provide lived examples of such experiences.

Obstacles to Self-Care (2 Themes)

The following two themes were identified as key obstacles to the engagement in self-care among participants. These obstacles, while they varied in nature, were able to fall into two subthemes: work-related obstacles, and life-related obstacles. Each theme will be further elaborated separately.

1. **Work-related obstacles to self-care.** When describing what stood in between themselves and engaging in self-care, participants mentioned work-related barriers. Specifically, participants mentioned that workplace requirements outside of meeting with clients, such as heavy paperwork demands and time constraints of paperwork in addition to seeing clients prevented them from engaging in self-care within the workplace. The statement from Regina
highlights the difficulties in engaging in work outside of seeing clients and asserting her needs for professional self-care.

I feel like for me there’s an importance in reading and research and learning new things and I feel like there’s a lot of pressure to see clients in order to, you know it’s a business, gotta keep moving forward. That’s where I think I feel the most pressure. So if somebody cancels, for instance, I have a hard time saying, “Ok leave that space open,” so I can either catch up on some notes, or I can do a little bit of reading or research (Regina, 169-174)

Participants mentioned that maintaining their professional duties, such as engaging in research or remaining up to date with client notes, constituted professional self-care, as they were not creating additional stress. However, due to pressures of the workplace, Regina mentioned difficulties in asserting her professional self-care needs and as a result neglecting them.

Furthermore, Allison described heavy paperwork requirements as filling her time outside of meeting with clients, preventing peer supervision and taking her appointed breaks throughout the day. Owen described work outside of client requirements, such as preparing materials for workplace presentations, as taking time away from self-care as it required him to do such preparations outside of work time, resulting in feeling overwhelmed at times.

In addition to workplace requirements, such as paperwork, participants also described pressures to see clients and volume of their caseload as being deterrents to self-care. Allison described the pressures within her workplace to see clients and its result on her:

The workplace cultural expectation that we are just going to do whatever we can to service our clients and to do our best to ensure that they can attend their weekly appointments often means that we put the clients first and our needs kind of come after. (Allison, 424-427)

The pressure to see clients or accommodate existing clients results in clinician needs becoming a secondary priority. Participants mentioned organizations being client-centred and encouraging therapists within the organization to accommodate clients wherever possible, resulting in
neglecting personal self-care needs or filling work-day schedules with clients, thus preventing the engagement in professional self-care. Thus, workplace barriers related to self-care include both the paperwork and organizational requirements as well as the heavy caseloads many therapists face.

2. Life-related obstacles to self-care. Participants described experiencing barriers in their personal lives, in addition to professional barriers, to self-care. Specifically, family constellation and demands resulted in time restraints as well as depleted energy levels, which acted as barriers to self-care. Allison described her experiences:

Managing my household, making sure that I have ample time with my husband and my kids seems to take priority over other things so buying a gym pass has been my goal for maybe a year, and I still don’t have it because I can’t fathom where I would possibly fit 3 workouts in a week into my schedule right now. Reading for my own pleasure has taken a backseat, I had picked it up for a while and I was reading novels again and now it’s gone back to taking a backseat because reading on my own time would mean having to put time aside that I would otherwise potentially be spending with my husband or trying to squeeze a minute somewhere in on my weekends and when my kids are awake, we usually all spend time together so we don’t tend to take breaks from our kids in that sense. (Allison, 225-235)

Personal responsibilities prevented the active relaxation or engagement in self-care behaviours. Specifically, the needs of her family have been prioritized above her individual self-care, therefore acting as a barrier to her engagement. Rebecca also described personal situations and diminished energy levels in her personal life as being deterrents to self-care. Thus, self-care and its impact on work can not only be influenced within the workplace, but personal factors may also play an important role in the engagement in activities.

Work-Life Balance (5 Themes)

Participants noted that a significant part of their self-care practice related to their ability to strive for a work-life balance. Specifically, participants described various aspects of their lives
which both assisted in their abilities to maintain a work-life balance effectively as well as contributed to the overall importance of self-care for them. The following five subthemes outline aspects of striving towards a work-life balance that were significant for participants and include: importance of intentionality; recognizing the importance of self-care; difficulties in walking the walk; need to have good work-life boundaries; and self-care is subjective.

1. **Importance of intentionality.** Intentional conversations and workplace factors surrounding self-care in the profession, its importance, and how it can be maintained allowed participants to engage in such behaviour further. Owen and Rebecca described:

> Like in our field it’s so spoken about, it’s become part of the zeitgeist of our field I think, of our time, and I think it helps us model that to clients, and I think that’s what helps, that it’s just becoming such a big word in our field and I think that’s really helped me to take it seriously. (Owen, 165-169)

> I think [the workplace culture] helps promote [self-care] because then we have strategic meetings where we discuss a whole range of things and we have a health and well-being team, we have a culture and diversity team, so people can choose where they want to go and I think this is the one [inaudible] where people are really able to express how they’re feeling and for some people maybe lifting that burden off their chest is self-care, for me I feel like seeing different groups develop at work where I feel comfortable expressing my needs and concerns is something that improves my well-being at work and doesn’t have me stressed about different things (Rebecca, 277-285)

Intentional conversations and available resources allowed novice counsellors in this study to engage further in self-care behaviours through highlighting the importance of it and making it easier for them to engage in such behaviours. Owen’s description of the professional culture promoting self-care allowed him to recognize the importance of self-care and subsequently put it into action. Rebecca highlighted the role of her workplace in creating an accessible space for her to engage in self-care behaviours, creating an easier opportunity to engage in self-care at work. Therefore, intentional conversations and actions promoting self-care subsequently increased self-
care behaviours of participants, allowing them to not only have the opportunity to learn about self-care, but also to engage in self-care activities accordingly.

Participants described being able to be intentional about their self-care practices after learning from negative experiences of neglecting and being passive about caring for themselves, further highlighting the need for work-life balance. Regina and Rebecca discussed how they have learned about the importance of self-care after experiencing negative effects from not engaging in such activities:

I experienced burnout a number of times myself, so I think that through my own experiences I’ve learned that you really need to take care of yourself because no one else is going to. (Regina, 71-74)

So I figured, I noticed the effects of when I did these things I felt much better and calm and regulated compared to had I not done it because I can feel the difference if I’m feeling tense and stressed and I’m not able to do some of my self-care practices because of whatever reason, I can see the difference between before and after. So I notice when I do these things, I feel much better and I’ve taken time out for myself. (Rebecca, 62-67)

Regina and Rebecca both highlighted experiences by which they were made to understand that self-care is a necessary component of their lives. Furthermore, Allison described workplace stress as being a motivating factor in incorporating self-care practices into her daily life as it allowed her to intentionally and proactively manage her stress. This was further discussed as being an intentional effort to implement and maintain work-life boundaries. Owen discussed his high levels of dedication to his professional practice and work with clients but being intentional about taking opportunities to engage in activities outside of work that strengthen him. As such, participants were not only able to learn from professional experiences to engage in self-care activities with intention, but they were able to create and maintain a work-life balance by being intentional both within their workplace and with their personal self-care.
Self-care practices were also intentional in the form of understanding needs in the moment and reacting accordingly, rather than allowing the distress to grow. Rather than maintaining her normal routine and bedtime after a long day, Allison described going to bed early after a long day as an intentional form of self-care, as it allowed her to get the rest she needed both in the moment and to feel more rested the next day. Therefore, she was able to understand her needs in the moment and react in a manner that promoted her overall well-being over her normal routine. While Rebecca described a supportive workplace environment conducive to self-care within the workplace, she further expressed the need to be intentional about self-care at home to maintain balance. As such, she was able to be intentional about her needs in both her work and professional lives, allowing for balance. As such, being intentional about self-care needs also meant being able to recognize needs in the moment and engaging in activities accordingly in both the workplace and at home to ensure balance.

Being intentional about self-care did not only mean engaging in practices with intention, but also observing actions and doing actions for the sake of self-care, rather than having a secondary purpose. Owen describes being able to bring his self-care practices into the room:

In terms of even, if I’m really going to dissect self-care, it’s even what I choose to wear to work. What I have on my walls, like on my walls or even if I buy a plant for work, even creating the work space as a place that I love. Even looking at something that’s on the walls during a session and something that just provides literally joy just by looking at it, that, for me, helps the self-care in the room, in the session. (Owen, 57-63)

Participants were able to use activities that were seemingly minor, such as wall hangings or the choice of clothes, as self-care activities due to the awareness they have drawn to their self-care needs and fulfilling them accordingly. Allison described being able to be mindful about washing dishes in order to create self-care practices out of household responsibilities. Furthermore, participants described intentional self-care efforts taken to create and maintain work-life balance.
Owen discussed the separation between his professional and personal lives through acts such as not being connected professionally while he is at home. As such, participants were not only able to recognize the need for self-care, but also were able to make intentional choices to fulfill such a need and create a sense of work-life balance.

2. Recognizing the importance of self-care. Participants discussed the role of their education in building their conceptual understanding of self-care and the importance of it throughout their careers. Allison and Owen noted the valuable lessons of self-care they learned in their graduate degrees:

   I would absolutely say that I learned about [self-care] through my Master’s because while I had engaged in certain self-care activities prior to my Master’s degree, I didn’t really realize the full importance of it until we started discussing it and I had to contend with the anxiety that comes with the pressure of a Master’s level education, working with clients who have a lot of emotional needs and feeling a lot of internal pressure to do a really good job (Allison, 165-171).

   [I learned about self-care] through the program, no two ways about it. Yeah in the Master’s program they really highlighted the importance of it, it was a new term for me at the time, and really seeing how in a field where we’re giving so much of ourselves, it’s crucial for us to meet our own needs (Owen, 145-148)

By having the conceptual knowledge from their educational programs, novice counsellors in this study were able to create work-life balance and understand why it is an important aspect of the profession before facing the negative impacts of not using it, such as negative effects of stress, burnout, or compassion fatigue. Rebecca also discussed the importance of education in creating an understanding of what self-care is and then subsequently taking the initiative to find behaviours and activities that worked for her through trial and error. Furthermore, participants were able to use such conceptual understanding and trial and error to find mechanisms that worked for them to strive towards work-life balance, such as partaking in activities outside of work or limiting the time spent on work outside of the office. As such, participants in this study
were able to gain a conceptual knowledge of self-care through education programs, allowing them to recognize the importance of it and motivating them further to engage in such behaviours and create their own work-life balance.

Participants also recognized the importance of self-care through client work. Specifically, knowing that if they are encouraging clients to take care of themselves, they should be doing so as well. Regina and Owen highlighted the importance of their client work and the impact that it has had on their self-care practices:

I think that [education] can lay the groundwork in terms of focusing on the importance as well and the link between, like we all want to give good care and good quality care to our clients, right? So I think that piece around the link and how, you know we’re not able, I tell my clients, for instance, all the time, the ones with kids, “if you’re not taking care of yourself you’ll get to the point where you’re not able to take care of your kids.” And I think that’s comparable in terms of our clients, if we don’t take care of ourselves, we’re not going to be able to help take care and guide and counsel our clients. (Regina, 241-248)

[Self-care] means listening to your own needs before you can help someone else with theirs. (Owen, 425-426)

Participants mentioned the impact both education and client work had on understanding the need for self-care. Rebecca described her conceptual understanding as being integral in understanding what self-care is and allowing her to further learn from her experiences of self-care. Participants mentioned the importance of being able to not only talk the talk with clients, but also walking the walk. Regina described needing to take care of herself prior to being able to counsel clients, thus requiring to have a work-life balance to be able to do both in an effective manner. Recognizing that they should be listening to what they are telling clients was a factor in enhancing their own understanding of the importance of self-care as a whole.
In addition to the foundation education has provided and working with clients directly, participants also mentioned understanding the importance of self-care and thus engaging in it after professional experiences reinforced its need. Allison outlined her experiences:

I also felt that [self-care] was something that I had to do because, the difference between supervisors is that sometimes it was reinforced that I needed more improvement and I needed to work harder or that I was lacking in understanding, so sometimes self-care seemed more of a chore that I didn’t necessarily want to engage in, but I felt there was an obligation because I was lacking skills or lacking knowledge (Allison, 285-290)

Allison felt the pressure from supervisors to engage in self-care as a professional development tool to enhance her practice with clients. As such, following the guidance of supervisors, it became important for her to engage in self-care due to lacking knowledge or experience. Therefore, conceptual knowledge of the importance of self-care from educational programs was able to be built upon and reinforced in the workplace through feedback and client work.

3. Difficulties in walking the walk. Despite talking to clients and their families about the necessity of engaging in self-care, novice therapists in this study were found to have difficulties in doing so themselves. While striving for work-life balance in their lives, participants were struggling to maintain such a balance. Allison and Owen described:

I actually find that that happens a lot, like this week for example, owing to when my families have appointments, at the end of the week I will have worked 41 hours and I’m only supposed to work 37.5, so I will have worked overtime, which I don’t get paid for but I can use it the next week and reduce my workload next week having worked overtime. The problem is that with the paperwork being as heavy as it is, I almost never take my hours back the next week because I, my workload suffers if I take the hours back. (Allison, 404-411)

I work hard on it. [Self-care is] work. (Owen, 494)

While recognizing the need for self-care, Allison reported struggling in maintaining balance due to work requirements and the heavy caseload that she has experienced. Owen described self-care as being work, and thus making it implicitly more difficult to engage in it when faced with
heightened levels of stress. Thus, participants described experiences of facing difficulties in engaging in behaviours they have discussed with clients as being beneficial.

As novice professionals, participants noted the difficulties in engaging in self-care in of itself. While recognizing the need for self-care, Allison and Regina described the negative aspects of engaging in beneficial activities:

I think, for me, deadlines are what gets in the way of giving myself that 30-minute break away from my computer, because I’m constantly aware of the things that have to be inputted into my computer and discharges that are coming up, so that often, I think pressures me to just push on through and to put aside those other elements of self-care that I would normally have done or was doing when I first started at my current position. (Allison, 273-278)

Yesterday I took a sick day. I just wasn’t feeling in the right headspace to provide counselling services and my supervisor, although she encourages us to take time when we need, proceeded to tell me how upset the clients were and that they were crying, so it’s like, you know, it’s on one hand it’s said that self-care is more important, but on the other hand there’s a level of guilt I think that’s implicit when one takes some time off, or not implicit, it’s attached to you, yeah I don’t know, I can’t think of the right word, but yeah it’s like, it’s laid out on you. (Regina, 52-59)

While she was able to recognize the need to have breaks throughout the day, Allison’s engagement in such breaks created tension due to time constraints and consciousness of upcoming deadlines. Moreover, Regina discussed the guilt attached with taking time off in order to prioritize her overall well-being. Due to negative feelings associated with the engagement in self-care, such as guilt and preoccupation with awaiting tasks, participants faced increased difficulty in engaging in the same behaviours which they advise to clients.

4. Need to have good work-life boundaries. Boundaries between work and home were found to be a significant piece of self-care for novice therapists in this study. Creating work-life boundaries and maintaining them as best as possible has impacted participants in being able to
enjoy their time at home without the concerns of work. When discussing the negative impacts of not maintaining healthy work-life boundaries, Regina said:

> An impact is it bleeds over into your home life for sure. I think, the stress and the tiredness and not having energy and not wanting to, you know you feel like you’ve talked to people all day so you don’t want to talk to your spouse anymore or at length about any particular issues, like the need to, I feel more of a need to shut off and shut down when I’m home, so checking out, things like checking out and just being on my phone or watching TV or sleeping more, like if I haven’t given myself a good balance, then I’m less engaged in other activities outside of work. (Regina, 199-206)

Participants noted that not maintaining boundaries had consequences for their lives and overall well-being. Allison described being able to maintain boundaries through the use of self-compassion to allow herself to let the burdens of the day go so she is able to enjoy the company of her family. Conversely, Rebecca mentioned her need to maintain work-life boundaries at work through her preventative efforts of allowing her home life to impact her work.

Participants also mentioned that creating and maintaining work-life boundaries allowed them to enjoy their professional lives more. Owen described his experiences of maintaining boundaries and engaging in self-care as:

> So it’s kind of walking away from the work so that when I’m back I’m excited and I’m very happy to say that when I go to work in the morning, very rarely I do not want to go. Like I love going to work, so that I think is really, so that’s it. (Owen, 105-108)

Owen’s self-care practice allowed him to not only maintain work-life boundaries, but because of such boundaries he was able to heighten his enjoyment of his work life. While participants mentioned that maintaining work-life boundaries assisted in their home lives through ways of being able to connect with partners and families and to disengage from the concerns of work, it also has allowed them to increase the quality of their work life as they are able to walk away
from the concerns and not be continuously plagued by them. Thus work-life boundaries are necessary for heightened quality of life in both areas.

5. **Self-care is subjective.** Self-care was not found to be an action that could be prescribed using specific mechanisms, but rather participants found that through their use of self-care to find a work-life balance, they had to find mechanisms that worked for them as individuals. Owen and Rebecca’s examples below highlight their need for self-reflection and introspection to find what would help them:

For myself, overall I think one of my values is moving at the beat of your own drum and listening to what makes you happy and not necessarily having to, like sometimes I feel like there’s maybe societal expectations of what it is to be an adult or, exactly like an adult, and for me I feel like it’s more like, not really listening to that, and really listening to what makes me happy. (Owen, 11-16)

At least for me, working out for me is something I figured out is good for me when I’m feeling stressed because I just did it, because I needed that energy to do it. So maybe people, and like I said it’s trial and error, maybe people trying out different things that they like and using that as an outlet for them to release and to take care of themselves, I feel like that will help them understand and know the importance of it and, yeah because even now, like I think when we talk to people about self-care people think it’s more about going to the spa or hanging out with friends, I don’t know, anyways it’s different for everyone, I can’t really speak for everyone, but I think people really taking the time to think deep about what helps them feel good and whatever it is that will help them understand the importance of self-care. (Rebecca, 357-368)

Participants recalled being able to self-reflect on not only how they are feeling and determining their need for self-care, but also reflecting on activities that can fulfill them and create the desired work-life balance. Regina discussed trying a variety of activities and continuously implementing different strategies to strive towards work-life balance. More than reflecting on activities in general, Allison discussed knowing what her needs were from day-to-day and that activities that are self-care can vary accordingly to achieve micro-levels of work-life balance daily. As such, participants discussed experiences of finding self-care practices through
understanding themselves and their needs, making their practices meaningful and effective for them as individuals.

Pathways to Self-Care (6 Themes)

Through their introspection and background knowledge of understanding the need for self-care, participants discussed specific strategies used to create practical and helpful pathways towards their individual self-care needs. The following six themes outline pathways participants described using in order to implement and maintain self-care practices and include: disengaging; being self-reflective/mindful; work it into workplace culture; schedule time for self-care; supervision; and connect with others.

1. Disengaging. Rather than engaging in an additional activity, such as with active self-care mechanisms, participants described experiences where they would disconnect from professional activities in a way that allowed them to take a break but did not subsequently provide additional energy as other self-care mechanisms may have provided. Thus, rather than actively engaging in another activity, participants used disengagement as a self-care strategy as it allowed them to engage in self-care in the moment in a manner that did not require additional work. While it was found that self-care needed intent and that it was work, Allison and Regina described disengaging when they no longer had the energy to engage in activities that would re-energize them to the same extent:

I also find that I just waste time instead of acknowledging that I need a break and doing something that would help me re-energize so I find myself scanning something useless online, or [laughs] browsing amazon and making a useless purchase instead of engaging in an activity that would actually help me reset (Allison, 330-334)

I think, the stress and the tiredness and not having energy and not wanting to, you know you feel like you’ve talked to people all day so you don’t want to talk to your spouse anymore or at length about any particular issues, like the need to, I
feel more of a need to shut off and shut down when I’m home, so checking out, things like checking out and just being on my phone or watching TV or sleeping more, like if I haven’t given myself a good balance, then I’m less engaged in other activities outside of work. (Regina, 199-206)

Due to the demands of the profession, participants mentioned finding that energy would be lacking in terms of engaging in their individual self-care responsibilities on top of their professional and personal responsibilities. Allison discussed disengaging when she felt that she needed a break but engaged in an activity that did not provide her with any additional energy. While she described this activity as an act of wasted time, she was able to remove herself from activities that were draining her energy levels and provide herself with a break that she felt she needed. Other descriptions highlight the need for alternative activities that provide additional energy, highlighting that disengaging can be considered a momentary self-care act, rather than a sustainable activity. Regina discussed that prolonged periods of neglecting her self-care needs resulted in decreased energy and an increased tendency to disengage, allowing her to take a break from the immediate demands, but was not able to sustain or re-energize her as alternative wellness activities would have done. Thus, it became clear that proactive and ongoing self-care activities would be required. Rebecca discussed her need to disengage in the moment when she found her work-life balance being compromised:

So I do try to set boundaries, and of course I do give my best in session in my recommendations and resources provided, however in those moments I would try to, when I try to when I’m thinking of these things, or just stuck in those thoughts, I would do something that I like. So usually I would watch a show, like something that’s very light, that doesn’t involve a lot of attention and nothing dramatic, like a comedy show or animation, like South Park, or whatever. And I feel like that takes me away from that, so I try not to let myself stay in that way of thinking about certain things. (Rebecca, 203-211)

When recognizing unhelpful thought patterns at home, Rebecca was able to disengage from those patterns by diverting her attention and focusing on a lighter subject. Additionally, Owen discussed being able to disengage from work worries and concerns when going home to maintain
healthy work-life boundaries. Thus, both feelings of stress and the overlap between work and home reinforced the need for both disengaging from work and being able to prevent deep thought for periods of time.

2. **Being self-reflective/mindful.** Self-care requires ongoing self-reflection due to the fluid nature of self-care. It also requires mindfulness to determine inner feelings, management strategies, and available resources to cope. Rebecca discussed her experiences as being integral in determining how she’s feeling and what she requires in order to feel good:

   It means me taking the time off for myself to do things that I enjoy and things that make me feel good. Things that make me feel like I’m able to notice the difference when I’m stressed or maybe feeling burnt out or maybe feeling like I don’t have anymore to give (Rebecca, 374-377)

Through her experience, Rebecca was able to recognize that she feels better when engaging in self-care practices, and thus is consistently mindful of how she is feeling and what she requires to feel adequate and functional. Owen discussed his experiences of learning of the importance of self-reflection through the recognition of being stretched too thin professionally and learning to say no. From those experiences, he has been able to engage in self-reflection in order to prevent such feelings from happening again.

Participants also mentioned using mindfulness strategies in order to engage in self-care activities. Allison and Owen discussed integrating mindfulness strategies into their personal lives in order to not only maintain work-life balance, but also to engage in self-care activities to increase their overall well-being:

But now mindfulness might look like being mindful while I’m doing an activity that, something like washing dishes, and mindfulness can be used while I’m washing dishes, but before I attempted to be mindfulness always in a very professional sense, if you will, that I tried to somehow link it back to this is a skill that I need to achieve, this is something that I need to get good at, so that I can train my clients on how to use it, whereas now it might be something that I just, I
do just for the sake of, just exploring what it’s like for me. So being mindful of what water feels like on my hands when I’m washing the dishes, and how many times I might circle the scrub brush on a plate before I decide this is plate seems, this seems like the right number for me and now I can rinse it. (Allison, 491-501)

Sometimes I can overthink about something, and I really use and I try to use that self-compassion that Kristin Neff, she talks about self-compassion, I don’t know if you’re familiar with that, so it’s really treating yourself as you would a friend. And sometimes I even write that down. So if I’m ruminating, “ugh why did I say this at the office?” and it just spirals, then after that’s been helpful to okay to say, “what would I say if a friend of mine brought this up?” And that treating myself with that kindness. (Owen, 263-269)

Both Owen and Allison were able to integrate mindfulness strategies into their home lives as a way of walking the walk that they discuss with clients and maintaining their overall well-being. Regina discussed mindfulness strategies such as meditation as mechanisms she uses to maintain her overall well-being. Participants used mindfulness as a mechanism of both self-reflection to gain insight into their emotional and psychological well-being and a tool to maintain well-being and work-home boundaries.

3. Work it into workplace culture. Professional self-care responsibilities align well with what novice therapists in this study perceive to be available or could be available in their workplace culture. An example from Allison highlights the blended nature of such approach:

Whereas in my new workplace, I still believe in things like getting my own therapy if I reach a point where I’m dealing with that same level, but I feel much more at ease so I don’t find myself stressing about some of those strategies and tools that I had used at my previous workplace in terms of professional development because I feel like where I’m working now, a lot of that self-care is blended right into the culture. There’s an expectation where I work now that if you’re sick, that you stay home. And if you’re family is sick, then you should prioritize your family. And these were some things that in my last workplace, they weren’t as encouraged, so as a result I might put myself through 3 days of working with clients but feeling completely under the weather and not very present. So self-care is built into my workplace where I am right now. (Allison, 127-138)

In order to reinforce the need for work-life balance, participants described workplace cultures integrating wellness and well-being into the workplace itself, relieving the burden from
counsellors. Owen discussed his workplace as being team-oriented, allowing him to connect with others and engage in a way that fulfills his self-care needs in the moment. Rebecca also discussed having team meetings with others in order to relieve tension and burdens from counsellors within the agencies, allowing her to maintain and improve her own well-being within the workplace. As such, novice counsellors within this study were able to have easily accessible resources to be able to implement self-care into their own lives, but ultimately had to take advantage of such resources to be able to use it as a pathway towards their own self-care.

Workplace cultures not only reinforce the need for self-care through explicit discussions surrounding such, but also through activities built into the days. Owen and Rebecca highlight the important aspects of their day as relating to professional self-care:

In the workplace, I do really like my workplace and I’m really close with my colleagues and it’s genuine rapport, these are people also that I revere, that I learn from, and at the workplace we have lunch from noon to 1 and it’s like, I’m Italian, so it just feels like everyday from noon to 1 I’m sitting down in an Italian feast. We eat lunch together, we laugh, we learn about each other, it’s like very lighthearted, and after that 1 o’clock I’m back with my clients and I’m ready to go. That has been incredibly helpful for self-care to have that social interaction from noon to 1 that it’s even sacred in my books. (Owen, 49-57)

And then coming to the weekly lunches that we do, and when I say weekly lunches, it’s not with leadership. It’s not like with my supervisor, it’s just the fellow therapists. So when we meet, we’re discussing, and this happens at work, so we just discuss, some personal stuff but also work-related stuff, you know like how we feel we’re doing, what we think of the supervisors, how we’re managing our cases (Rebecca, 97-102)

Aspects of their workplace outside of explicit self-care activities were able to act as self-care throughout the day. Owen highlighted daily lunches with his colleagues as a way of connecting with others and also his personal heritage, creating meaning in his self-care practices. Rebecca discussed being able to casually connect with colleagues in order to discuss the workplace and engage in a less professional sense where she is still able to fulfill her professional self-care
needs. Thus, participants highlighted their ability to work self-care into their individual perception of the workplace culture. They were able to fulfill individual needs of self-care through the resources available at their workplace and as such, were able to highlight self-care as being a part of their workplace culture.

While some workplaces have built in self-care mechanisms into the culture of the organization, participants also the desire for more to be done within their workplaces in order to promote self-care among novice counsellors. Regina noted how she would like it to occur in her workplace:

I think leaders who demonstrate the importance of self-care like by practicing it themselves. So leaders who are not afraid to say, “you know what I’m sick I’m not coming in today,” or agencies that promotes taking, for instance, mental health days, having mental health days, calling it a mental health day and not being shy about that. A real promotion of that. The encouragement of saying how you’re feeling at work and not about it being about numbers and how many clients you’ve seen, but more about the quality of work that is done (Regina, 212-219)

She has noted that modelling is important within a workplace to ensure that counsellors not only know that they should take care of themselves, but actively show how it can be done within the workplace. As such, the top-down approach would allow for further reconciliation between the conceptual knowledge and practice of self-care among novice therapists. Therefore, the organizational culture of a workplace has the opportunity to facilitate novice therapists’ use of professional self-care through weaving it into the days, having explicit and ongoing conversations, and implementing leadership modelling of self-care use.

4. Scheduling time for self-care. Novice therapists within this study described experiences of scheduling self-care into their regular routines due to time constraints and to enforce the need for it in their lives. Owen and Rebecca discussed their experiences:
So Wednesday evenings I do go to meditation, as I mentioned, and I do go to Mass on Sundays, so having that schedule keeps that in check. Then I try to go to gym two times a week minimum, so knowing that that is scheduled in helps. (Owen, 398-401)

I also try to incorporate it into my routine so yeah. It’s kind of like I have to do it. (Rebecca, 67-68)

Participants found that having a time and an activity set aside for self-care purposes facilitated their engagement and allowed for it to be a regular practice. Regina also described the need for a commitment to her schedule or others in cases of booking a session with a personal trainer, for example, as being facilitative in nature as it held her accountable to those activities. However, due to the time required to do so and increasingly busy schedules, there are times when it is difficult to do so. Allison described time constraints as being a main barrier to her professional self-care practice and that if there were reduced requirements, she would be able to actively build such practices into her day. As such, when possible, scheduling self-care activities proactively allowed participants to be held accountable and the need for them to engage in self-care was reinforced.

Pre-emptive scheduling also took the form of having an activity to look forward to in the near future. Regina discussed from her experiences:

I think [self-care is] more a concerted effort and then the practicing of the routine of that, I think is helpful for me. I find, for instance, even planning a vacation, like I took some time and I planned all my vacation for the rest of the year, I planned it all at once, and that’s not something that’s required. I can take it as I want, but knowing that every 3 months, for instance, I take a week off, is something new I’m trying this year. (Regina, 275-281)

By scheduling self-care in advance, it was able to act as self-care in the moment as well as provide a joyous activity to look forward to. Owen explained that, for him, it was important to have an activity to look forward to as it allowed him to maintain levels of happiness as well as
create an inner sustenance for himself. By both scheduling and looking forward to activities, participants were able to create lasting benefits from their self-care practices.

5. **Supervision.** Due to their limited professional experience, novice therapists in this study identified supervision as being a main source of self-care in the workplace. Supervision allowed for participants to grow their professional knowledge and practice by providing client-specific feedback, as explored by Regina and Rebecca:

> I think supervision is extremely important if to help check you in terms of how you’re doing, do you need a break, do you have enough time in between sessions, how are you doing with some of the clients where you feel like you’re not being overly helpful or effective as a practitioner and where you’re feeling like you need a bit of help, I think that’s something that makes self-care important too, right, the more complicated some of the situations are that you’re dealing with with clients and I think having a feeling of being successful in your practice as a clinician is important, I think, an important piece of self-care. (Regina, 142-150)

> So I feel like supervision is something that keeps me in check and it provides me with that constructive criticism because obviously no one wants to hear all the time that they’re doing good, they want some feedback as well, and some criticism. So for me, it helps me work on my strengths and my weaknesses and it helps me know that even if I feel like I didn’t do good or I didn’t do as well as I wished to do with certain families or clients, or just in work, be treatment plans or whatever, then I know I can work on it for the next time. And I feel like that’s what the supervisor does, she helps you, she would help me identify what needs work and what I’m doing good in, which helps me moving forward. (Rebecca, 232-242)

Supervision was a useful tool in order to maintain high standards of practice with clients and to help participants to feel better about the counselling they are providing to clients, diminishing self-doubts and enhancing professional well-being. Owen discussed feeling energized by being able to take intervention suggestions from his supervisor and using them with clients to enhance their therapeutic work together. Moreover, rather than enhancing and providing solutions to counsellors, Rebecca also highlighted that it was important for her to learn about the criticisms that her supervisor had in her work in order to provide areas of improvement. Specifically, she
expressed that it was important for both her strengths and weaknesses to be built upon. Therefore, participants found that supervisors were helpful to not only improve direct work with clients, but also to feel better about the work being done with clients.

Supervision also included several aspects to make it an effective form of professional self-care for novice therapists, namely validation for the work being done with clients and empathy of the struggles they face as novice therapists. Allison and Owen discuss the role validation plays in their supervision:

Well the supervision piece is one of the ways that I engage in regular professional self-care because I always find supervision to be validating and I gain a lot through the insight that’s offered from my supervisor or my colleagues, when we engage in peer supervision, I find that having someone on the outside look in often helps me self-reflect and I really do take what I gain from supervision and I apply it to my practice moving forward, so if I find that I’m being too hard on myself and I bring this to supervision that my supervisor or my colleagues’ perspectives is, I hear their words later when I go into another session, or I’m reflecting on a session later down the road, I’m really cognizant of that prior supervision session and I take those messages and I apply them so that I can be more gentle to myself and more accepting of myself as a therapist. So I’m not critical the way I used to be, owing to how I engage with my supervision, which for me is a big part of my self-care. (Allison, 430-443)

I have a supervisor, who I mentioned, she used to be my supervisor when I was an intern, and I pay out of pocket, and it’s a place where I can vent, I can really be my self, she validates my work, that’s huge. A supervisor who can validate and can say, “you know what, you’re doing a good job. Clients are lucky to have you.” (Owen, 371-376)

Validation was a key element found in effective supervision for novice counsellors in this study. The validation and expression of feelings in a supervision session allowed for Allison to maintain work-life boundaries and to prevent her from bringing personal stresses into sessions with clients. Owen discussed making supervision a priority in his professional self-care through the active payment for services due to the validation and empathy he is able to receive from his supervisor, making it worth the cost for him.
Supervision also provides novice counsellors in this study with the opportunity to engage in further self-reflection on their own self-care practice. Regina and Owen explained the role of supervision:

I definitely think the modelling piece is really huge, so even modelling in supervision, the practice of self-care and the practice of sometimes we make mistakes and we’re not always 100% on our game and the modelling that, “Okay that’s when I need to take a break and that’s maybe when you need to take a break,” and there not being a performance piece I think attached to that. (Regina, 219-224)

And also I know my manager last year was like, you know she brought it up, “[Owen] are you taking care of yourself too?” So she checked in with that, so having a manager that also values that I think it’s like that top-down I think is important because it shows that she values it, so it kind of validates that (Owen, 346-350)

Rather than providing them with the answers, supervision has provided novice counsellors in this study the opportunity to self-reflect on both their professional practice and their self-care and overall well-being. Allison discussed her experiences in supervision and found it useful for explicit discussions to be had around overall well-being and how she could maintain work-life boundaries. Thus, through having explicit discussions and asking questions surrounding well-being and self-care, supervisors are able to enhance the professional self-care engagement in novice counsellors as it becomes an explicit part of their professional practice.

6. Connecting with others. Novice counsellors in this study identified connecting with others as an important part of their self-care practices. Creating and maintaining connections in their personal life assisted in their professional self-care due to the sense of fulfillment it allowed them to have, as explained by Allison and Owen:

So sometimes I find that I do [personal and professional self-care] all together and I see it as a form of professional self-care because ultimately if I feel rested and I feel at ease and I feel like I’ve created connections in my life with my family, that I go back to work the next day feeling fulfilled and ready to start my day fresh. Whereas if I feel like I’ve missed a lot of family time and I feel like
I’m falling behind on my, not my responsibilities but if I feel like I haven’t had enough time to connect with my kids or with my partner then it unfortunately does sometimes carry forward into work (Allison, 65-72)

[Balance is] like making sure that I call my parents and I tell them I love them. It’s making sure that, like yesterday I met up with some friends and we watched the Brené Brown special. If someone invites me to a birthday, I almost always go, I know how important that is to maintain that. (Owen, 430-433)

Sustained personal connections allow novice therapists to feel well-rounded and heighten their overall well-being. Regina described her regular self-care including being able to spend time with family and friends outside of work as a way of separating herself from work. Similar to bringing work stressors home, creating personal connections with family and friends, as highlighted by Allison, allows novice counsellors to carry that feeling of fulfillment to work and a lack of doing so can also result in diminished feelings being brought into work and ultimately work with clients.

Creating professional connections with colleagues and a wider professional community also contributes to self-care for novice counsellors in this study. Allison and Rebecca described their experiences creating professional connections:

When I connect with my colleagues, there’s a greater sense of “I’m not alone with what I might be struggling with,” which also helps to reduce any stresses that I have. So I find that connecting, whether it’s connecting with a good book, or connecting with some of the other women that come to my workout class, or connecting with colleagues, just I’ve come to recognize that it just makes me feel like a more balanced person and ultimately I think that makes me a better therapist, it makes me enjoy my job because I know that when I go home I’m going to focus on home life, and when I’m at work, I focus on work (Allison, 466-474)

Like it could be about clients that we share, or clients that we’ve seen during walk-in and how do we feel because sometimes when clients come into walk-in I’m not always the one who’s seeing them, someone else is seeing them so we just share, and then I would say to get to that self-care practices that we do here professionally, what I would say I get out of it is a little bit of self confidence knowing that it’s not just you who’s probably stuck because sometimes we do get stuck in our own thoughts and think that, “oh I’m not doing too well,” or whatever. So just seeing that other people are going through it leaves you feeling
good and that you’ve learned something and that it’s not just you. (Rebecca, 111-120)

Creating professional connections with colleagues allows for a sense of community and not being alone in the possible negative feelings experienced during clinical work. Owen discussed his experiences being a part of a wider organization as being able to create a professional community where there is a wider support network. Regina also discussed connecting with colleagues and others in the field as assisting in enhancing and influencing her regular use of professional self-care. Therefore, self-care can be reinforced and facilitated by both personal and professional connections through a sense of community and feelings of support.

**Effects of Self-Care (5 Themes)**

After engaging in self-care behaviours, participants were able to not only conceptually understand the effects of self-care, but also see it in their own lives. Through the recognition of such effects, novice counsellors may be able to remain motivated and engaged in such behaviours as a way of maintaining overall well-being. The following five themes outline the effects participants noticed after engaging in self-care behaviours: diminishes self-doubts; less countertransference; lack of self-care negatively impacts clients; positively impacts work with clients; and facilitates emotional regulation.

1. **Diminishes self-doubts.** During their practice, participants described that engaging in professional self-care made them feel more confident about their abilities as a novice counsellor. The career transition from intern to novice professional can create tension and doubts for counsellors, reinforcing the need and engagement in self-care practices as highlighted by Allison:

   I was seeking regular supervision because I was anticipating, or I had a lot of self-doubt about my abilities, so I needed, not necessarily reassurance, but I
needed a lot of direction and guidance in terms of where I moved forward due to having a lot of thoughts around not being good enough or not doing things well enough for my clients. And I also found that as a result of the stress that I endured in my last workplace that I also found myself doing things like attempting to incorporate yoga or to find quiet time in my day where the purpose was for nothing other than to just sit peacefully and be okay with my thoughts and some of my intense emotions, so it was more mindfulness practice and things like that, but it was really all about focusing around my thoughts and my worries and my self-doubts as a new therapist because in my last workplace I had moved from being an intern and then I was hired and while I knew what my expectations were going from student and no longer having the title of “student” created a lot of self-doubts that I couldn’t kind of hide behind, “I’m a complete novice because I’m a student,” into “now I’m a professional with a title,” so it just added a lot of stress. (Allison, 104-120)

Allison described her experiences between being an intern and a novice professional and being unable to hide behind the title of “student”. Self-care practices allowed her to feel better about her professional practice and enhance her confidence levels. Regina expressed that when she engages in self-care, she feels as if she is practicing in a congruent manner with how she would like to practice and overall feels better about her professional abilities. Rebecca discussed feeling stuck with clients and understanding her own lack of knowledge and experience and engaging in self-care has allowed her to feel better about her practice and the work that she is providing for clients. As such, novice therapists’ engagement in self-care can assist in managing their feelings of self-doubt.

Confidence in their practice was also described as being an integral part of their self-care experience in of itself. Owen and Regina explained their perspectives of the relationship between confidence and self-care:

A supervisor who can validate and can say, “you know what, you’re doing a good job. Clients are lucky to have you.” To hear that every once in a while, it’s not, hmm what am I trying to say, like egotistical. Like I think it’s healthy where there could be an imposter syndrome that creeps up every once in a while, that can kind of lull it a bit, turn the volume down on that and give us that confidence. And that confidence is part of self-care too. (Owen, 375-381)
I think having a feeling of being successful in your practice as a clinician is important, I think, an important piece of self-care. (Regina, 148-150)

Engaging in various forms of professional self-care, such as seeking supervision, has allowed participants to have the necessary confidence in their professional abilities to maintain quality of service for clients and professional well-being. Allison discussed her experiences of self-doubts in her practice resulting in increased overall anxiety, suggesting that engaging in self-care that was relieving for her allowed her to increase her overall well-being as well. Thus, engaging in self-care not only increases confidence and can assist in the management of self-doubts, but having confidence in professional abilities is an important aspect of self-care in of itself.

2. Less countertransference. Ongoing feelings of countertransference can be managed through the engagement of self-care as noted by participants in this study. Specifically, Regina and Rebecca discussed how they have been able to engage in self-reflection through their self-care practices and identify countertransference:

I think because there’s a lot of reflection in my own practice where I’m thinking about transference and countertransference and I’m just really aware of my own stuff and if I’m bringing that to the table then I know, “hmm okay, I need to scale back, I need to watch myself,” (Regina, 91-94)

I feel like there would be a lot of countertransference [if I didn’t engage in self-care]. [inaudible]. I feel like it would just be a lot more, and I know in our profession we’re meant to do a lot of separation of affect, but I feel like there would be a lot of countertransference. So I would be, I think I would be speaking more with my emotions and I would be highly opinionated and I wouldn’t be able to be transparent in my thinking. (Rebecca, 163-168)

Professional self-care has been a tool that participants have used in order to diminish feelings of countertransference and heighten their awareness to such incidents. Allison discussed engaging in self-reflection and understanding her personal life in order to engage in acts of professional self-care before it becomes intertwined with client sessions. Novice therapists in this study found that when they did not engage in active self-care and countertransference increased, it impacted
their work in sessions with clients, including being more opinionated or solution-focused in sessions, rather than walking alongside the client. As such, ongoing self-care practice allowed them to manage countertransference and prevent it from interfering in work with clients.

3. **Lack of self-care negatively impacts clients.** Not engaging in self-care has negative effects as expressed by novice counsellors in this study. While self-care has positive benefits to counsellors, not engaging in it can negatively impact sessions with clients. Regina and Owen outlined how poor practices of self-care can result in a lack of presence with clients:

I think I feel an ethical responsibility to also make sure that I’m in a good headspace and in part of that is making sure that I take good care of myself. If I’m not eating well, and exercising, and getting good sleep and all the rest of that, then I’m not at my best and I think that directly impacts my work with my clients. (Regina, 82-86)

So let’s say if I didn’t sleep well, I might be tired in session. And when I’m tired in session I’m not able to focus, or maybe my mind’s going to drift a little more, or maybe I’m going to have compassion fatigue a little earlier. (Owen, 208-211)

When individual needs are not met, it is difficult to remain present in session with clients due to preoccupation and not being able to give more of the self than what novice counsellors may feel like they have. Allison described feeling under the weather but still going to work as it was seemingly required, but she was not able to be as present with clients as she felt she should have been. Rebecca explained that if she is not able to engage in her self-care practices, she feels as if she is not able to contribute to the client’s needs and is not as engaged with the client as she would like to be, resulting in practicing in a manner that is incongruent with how she would like to practice.

In addition to their presence in session, novice counsellors also noted that when they are not able to engage in fulfilling self-care practices, there can be a resulting negative attitude and feelings of apathy towards clients, as highlighted by Regina and Rebecca:
[When I’m not grounded in session] I notice things like, for instance, maybe some signs of some burnout or stress, like thinking, for instance that “oh I’ve heard this story before,” and “Oh all these client stories are the same, and they’re all the same,” and that kind of apathy I think is an indicator for me that I need to breathe. I also notice that I’m asking, like I said, I’m talking more, I’m listening less, I’m really really feeling the need to find a solution for the client as opposed to asking them the questions so that they come to a solution for themselves. Those are things I notice I do when I’m not as present or as grounded in a session. (Regina, 101-109)

So I would be, I think I would be speaking more with my emotions and I would be highly opinionated and I wouldn’t be able to be transparent in my thinking. So I would come up with a range of solutions without even giving the clients room to kind of express themselves and this is not something that I’m saying comes up, it wouldn’t be noticeable for clients, but I know I would notice it. Like I would feel like I’m being very non-transparent and being highly opinionated and you know sometimes we do get clients that come in and say, “oh you’re the expert, you should know what to do,” and then sometimes, and this is very rare, but I would tend to be very, what’s the word? I don’t know, opinionated is the word, so like just, or judgmental, like you’re a little bit judgmental so it’s like, “oh why are you doing this,” and just questioning a lot of their actions and behaviours instead of being more empathetic and, like I said, this is very rare, but I feel like when I just haven’t had the time to take time aside for myself and I’ve been going going without taking a pause, then of course it’s going to affect me mentally, physically, and there’s just not enough of me to give that I would just be saying whatever comes to the top of my head. (Rebecca, 166-182)

Not only can a lack of self-care result in a diminished sense of presence within sessions with clients, but it can also result in negative feelings towards clients or their situations. Regina described feeling apathetic towards clients when neglecting her own needs, possibly interrupting the therapeutic relationship and the work being done in session. Rebecca described feeling judgmental towards clients when neglecting her own needs due to a solutions-focused lens and a minimization of the client’s perspective in session. Therefore, it is clear that when novice therapists neglect their professional self-care needs, it can result in a lack of presence with clients in session and negative attitudes and feelings towards them and their presented issues.

4. **Positively impacts work with clients.** While a lack of self-care can negatively impact sessions with clients, engaging in regular and fulfilling professional self-care practices can also
result in a positive contribution to work with clients. Owen and Rebecca highlighted their experiences:

I just make sure I listen to, like I’m not only a counsellor. I want to remember that and what I bring into the room, even with clients is [name], and when I feel great, when my needs have been met with all these other interests, I know the person in the room is giving 110% because I met my own needs first. (Owen, 38-42)

If I engage with elements that inspire me, I notice that’s it’s also influenced my interventions with clients. So when I say that they see [name] in the room, maybe I’m going to talk about a book that I just read, that’s going to have therapeutic benefit of course, or a quote from a song, or it’s going to be a bit more individual. so, I really try to own that, or if there’s art on my walls and it’s very me, I know that’s part of the client experience too. So yeah, it’s kind of like I’m trying to meet my needs because I also want to meet others. (Owen, 498-505)

So I think the more I’m able to take care of myself, the more I’m also able to give my best to other people and I think that’s what makes a difference in my work. It’s something that I enjoy so in order to do that, I need to take care of myself. (Rebecca, 381-384)

When fulfilling their own needs, participants found that they were able to give more to their clients. Allison discussed being able to connect further with clients when she was able to engage in self-care behaviours that reinforced her work-life balance, as it allowed her to understand the difficulties surrounding maintaining such a balance on a personal level and resulting in an increase of empathy with clients. Regina not only conceptually understood the requirements of a therapist in session, such as the importance of non-verbal communication and how verbal communication is done, but also recognized that self-care was a necessary component in ensuring that these requirements in session were fulfilled to the highest extent possible for clients. As such, self-care can become a necessary requirement for work with clients as novice therapists in this study have identified that it enhances their practice and allows them to be the best therapists they can be.

5. **Facilitates emotional regulation.** Novice counsellors in this study also found that engaging in self-care practices allowed them to regulate their own emotions and facilitate the
growth of positive feelings. Specifically, engagement in self-care behaviours can result in feelings of being balanced, as expressed below:

Whereas now I look at it as I need to do it because it helps me be, it helps create balance in my life, and it helps me feel, like it does help me feel better about who I am as a therapist and who I am as an individual. (Allison, 291-293)

Like when we have balance in our life, I think that’s when we can feel happy. (Owen, 153-154)

Novice counsellors in this study highlight that balance is an important part of their self-care practice and, through the engagement of self-care, they are able to achieve a sense of balance for themselves. Owen highlighted that through that balance, positive emotions such as happiness can naturally occur. Regina expressed that practicing self-care allowed her to feel more balance and ready to face the challenges that awaited her in the professional field. Therefore, self-care allowed novice therapists to feel balanced and thus allowed for more positive emotions to follow.

Engaging in self-care also allowed participants to relieve stress and facilitate the management of negative emotions and growth of positive emotions. Owen and Rebecca spoke from their experiences:

because I feel like I’ve taken self-care so seriously, even now after the end of the year, I still feel, I don’t feel any compassion fatigue. I feel like even now I have a lot of energy, like I’m able to be so present with the clients and I really think that’s because I’m meeting own needs. (Owen, 211-214)

So I figured, I noticed the effects of when I did these things I felt much better and calm and regulated compared to had I not done it because I can feel the difference if I’m feeling tense and stressed and I’m not able to do some of my self-care practices because of whatever reason, I can see the difference between before and after. So I notice when I do these things, I feel much better and I’ve taken time out for myself. (Rebecca, 62-67)

Rather than resulting in compassion fatigue or high stress levels, self-care practices have allowed Owen and Rebecca to regulate their emotions and relieve the tension they have felt. Rebecca further elaborated that she has more motivation and enthusiasm when she is able to engage in
self-care practices, allowing it to positively affect her work and overall well-being. Allison described feeling less stressed and overall happier, further resulting in her being able to enjoy her place of work. Therefore, engaging in self-care behaviours does not solely have positive impacts on work with clients, but can result in heightened quality of life at work and overall well-being.

In sum, the following table lists the four themes found in participant accounts on novice counsellor self-care and the eighteen subthemes that fall under such themes.
Table 2

Summary of Themes and Subthemes of Novice Counsellors Use of Self-Care

<table>
<thead>
<tr>
<th>Themes</th>
<th>Subthemes</th>
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</thead>
<tbody>
<tr>
<td>1. Obstacles to Self-Care</td>
<td>1. Work-related obstacles to self-care</td>
</tr>
<tr>
<td></td>
<td>2. Life-related obstacles to self-care</td>
</tr>
<tr>
<td>2. Work-Life Balance</td>
<td>1. Importance of intentionality</td>
</tr>
<tr>
<td></td>
<td>2. Recognizing the importance of self-care</td>
</tr>
<tr>
<td></td>
<td>3. Difficulties in walking the walk</td>
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<td></td>
<td>4. Need to have good work-life boundaries</td>
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<tr>
<td></td>
<td>5. Self-care is subjective</td>
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<tr>
<td>3. Pathways to Self-Care</td>
<td>1. Disengaging</td>
</tr>
<tr>
<td></td>
<td>2. Being self-reflective/mindful</td>
</tr>
<tr>
<td></td>
<td>3. Work it into the workplace culture</td>
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<td></td>
<td>4. Scheduling time for self-care</td>
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<td></td>
<td>5. Supervision</td>
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<td></td>
<td>6. Connecting with others</td>
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<tr>
<td>4. Effects of Self-Care</td>
<td>1. Diminishes self-doubts</td>
</tr>
<tr>
<td></td>
<td>2. Less countertransference</td>
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<tr>
<td></td>
<td>3. Lack of self-care negatively impacts clients</td>
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<td></td>
<td>4. Positively impacts work with clients</td>
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<td></td>
<td>5. Facilitates emotional regulation</td>
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</table>
In the following final chapter, I will summarize the main findings from this study. Subsequently, main findings will be compared with the previous research and theories found in the field. A section will then examine notable findings, including findings contradicting those in the literature and surprising findings based on my previous expectations. The limitations of the study will then be discussed. This section will conclude with specific recommendations for future research and the practical implications of the results of the current study.
CHAPTER V

DISCUSSION

This study examined the perceptions of and use of self-care within a professional context among novice counsellors. Specifically, this study explored barriers to self-care and how self-care is used among novice counsellors due to the literature’s findings on the heightened professional distress levels and negative impacts of such on novice counsellors (Rodolfa et al., 1988) and the reduced use of self-care among this population (Dorociak et al., 2017). It also explored how novice therapists perceive and experience self-care, including specific actions and mechanisms used to overcome barriers and engage in self-care. Furthermore, this study explored novice counsellors’ conceptual understanding of self-care and how novice counsellors are able to bridge the gap between conceptual knowledge and engagement of self-care behaviours in light of the literature’s finding that therapists often promote self-care to clients with ease, but are reluctant to implement it in their own lives (Williams et al., 2010). The data analysis technique of TA was used to identify relevant self-care patterns and make sense of participants’ shared self-care experiences and perceptions (Braun & Clarke, 2012). Through this data analysis technique, four themes with eighteen subthemes that related to participants’ experiences with barriers to self-care, striving for a work-life balance, pathways to self-care, and the subsequent effects of self-care. Findings from this study added to the current literature through adding further evidence to that of previous studies and identifying additional and contrary information about novice professionals’ use of self-care. In this section, the results found from this study will be compared to current literature within the field in regards to novice therapists’ use of self-care. Subsequently, noteworthy results will be discussed, taking into consideration my own
speculations, and the implications of such findings. This section’s conclusion will include the study’s limitations, recommendations for further research, and implications.

**Summary of Main Results**

This study allowed further explanation and insight into the views and practices of self-care as it relates to the workplace within the novice counsellor stage of professional development, including the influences on self-care development, perceptions of self-care as a whole, and individual experiences and use of self-care. Participants identified obstacles to self-care as falling into two areas: work-related obstacles and life-related obstacles. As such, various aspects of their work, such as large caseloads, time constraints, and paperwork demands, alongside familial obligations, energy levels outside of work, and personal schedules, made it difficult to engage in regular and ongoing self-care practices. They also identified the importance of having a work-life balance. Through striving towards this balance, participants mentioned the need for healthy boundaries and understanding the importance of proactive self-care as a tool for their professional development. It was important for them to find a balance that worked for their subjective lives. Additionally, they described the pathways they were able to take towards their described need for self-care, including seeking supervision and connecting with others both professionally and personally. Participants described it being easier to engage in self-care behaviours if they are built directly into their workplace culture as well as proactively scheduling time for their activities. However, it was also important for them to remain aware of their individual needs and energy levels, and disengaging when needed as a form of self-care, rather than engaging in a specific activity. When engaging in self-care practices, participants noted that it assisted them in diminishing their own countertransference and self-doubts, as well as helped
their work with clients. They also noted that it helped them to regulate their own emotions and feel happier overall as well as increased their well-being.

Main Findings and Connections to the Literature

The workplace and self-care. When discussing what has prevented them from engaging in self-care behaviours, participants mentioned a number of work-related obstacles that exist, including time constraints and caseload demands. Workplace factors have been shown to be not only barriers to self-care, but contributors to the negative impacts of poor self-care practices, such as the experience of compassion fatigue or burnout (Bearse et al., 2013; Rodolfa et al., 1988; Turgoose & Maddox, 2017). Specifically, work overload was shown to be a contributing factor to the gradual onset of burnout (Wardle & Mayorga, 2016). Moreover, large caseloads, as reported by participants, can lead to a heightened risk of work-related stress and compassion fatigue (Rodolfa et al., 1988; Turgoose & Maddox, 2017). Through such work-related barriers to self-care, participants mentioned having more difficulties in being able to assert their needs for self-care throughout their day. This is compatible with their developmental stage as novice counsellors. In order to create a career with longevity, Skovholt, Grier, and Hanson (2001) report the necessity for counsellors to begin and continue asserting their wellness needs. Therefore, work-related barriers can add difficulty in novice counsellors’ abilities to be assertive about their needs and engaging in self-care.

Participants discussed the role of workplace culture in their self-care practices. Specifically, they reported the role of it being important in encouraging the ongoing use of self-care within the workplace and in the profession as a whole through the natural integration of reflective activities, supervision, and formal committees committed to counsellor psychological wellness. This is compatible with what has been found in the literature in regards to the
workplace role in counsellor self-care. Supportive work environments have been shown to be a factor in not only reducing compassion fatigue (Merriman, 2015), but also instilling the use of self-compassion in counsellors (Patsiopoulos & Buchanan, 2011), as noted as self-care strategies by several participants. Harr (2013) takes it a step further by saying that organizations have a responsibility to decrease workplace stress in employees as a way of maintaining their quality of life and the service they provide. While participants recognized that it was up to them to be engaged in their own self-care practices, they were also able to identify the role that workplace cultures play in facilitating a safe space to engage in such behaviours and encourage overall wellness. This is also compatible with their profession development phase, as it has been shown that early career counsellors have felt more feelings of support within their workplaces than those later in their careers (Dorociak et al., 2017).

**Supervision.** As expected, supervision played a major role in participants’ experiences of self-care in the workplace. Supervision not only helped participants to receive validation for the work being done with clients and increase their confidence levels, but it also allowed them to have explicit discussions about self-care and have the feeling of being held accountable by supervisors. Similar with participant accounts, validation and accountability have been shown to be important factors in supervision as it relates to counsellor self-care (Aten, Madson, Rice, & Chamberlain, 2008). The professional development phase of novice counsellors has shown to include a decreased sense of personal accomplishment (Dorociak et al., 2017) and a tendency to rely on external feedback in order to develop autonomous practice in their profession (Rønnestad & Skovholt, 2003). As such, it is a clear link between this professional development phase and the importance of supervision as a self-care tool. Due to these common experiences as a novice counsellor, it is unsurprising that both participants and the literature report the importance of the
relationship with supervisors as well as the accountability of the work being done with clients (Aten et al., 2008; Berzoff & Kita, 2010), as it allowed participants to feel confident and put their best foot forward with clients. Participants also noted the importance of having both explicit discussions and implicit forms of self-care within the office through modelled behaviours from leadership members, including supervisors. This is consistent throughout the literature (Aten et al., 2008; Merriman, 2015; Thompson et al., 2011), highlighting the need for it to be integrated throughout workplace culture to ensure self-care needs are understood and acted upon.

It is also important to note that participant experiences highlighted the importance of building on both strengths and weaknesses in their clinical work. Specifically, they expressed that they did not want to solely be validated, but to receive a level of criticism that would allow them to grow their professional practice. Interestingly, this is contrary to other studies, as it has been shown that criticism from supervisors can add to work stress (Harr, 2013; Rodolfa et al., 1988), which left unattended to can lead to burnout (Awa, Plaumann, & Walter, 2010). As such, further research could be required to gain understanding of the role of supervision in professional self-care among novice therapists.

**Subjectivity of self-care.** Participants in this study discussed experiences of figuring out what works for them in terms of their self-care practices, as well as putting in the time and effort into those activities because they were aware that the end result would make it worth it. Other studies have seemingly placed a focus on the role of education and training in developing self-care practices (Butler et al., 2017; Roach & Young, 2007; Thériault et al., 2015), as well as the role of mental health agencies in promoting a culture of wellness for counsellors (Barnett et al., 2007; Killian, 2008). While both education and organizations were spoken about being important factors in developing the understanding of and a safe space to practice self-care, participants in
this study placed more of a focus on recognizing their own responsibility for self-care practices as well as the work required to engage in and maintain such practices and overall wellness, suggesting an intrinsic motivation is an important factor in bridging the gap between conceptual understanding and practice of self-care. It was also found that being intentional about self-care practices was an important factor in maintaining a work-life balance and overall wellness for novice counsellors in this study. Similarly, the intentionality of self-care has been identified in the literature (Wise et al., 2012), as well as the importance of ongoing practices (Turner et al., 2005). As such, novice counsellors should expect to build intentional and ongoing practices into their routines as self-care is a continued practice and requires ongoing attention to maintain wellness.

Participants in this study also noted the importance of reflection and awareness in their self-care practices. Specifically, engaging in ongoing self-reflection and being aware of their individual needs at different times allowed them to practice self-care behaviours that would be beneficial for them in the moment. This is also consistent throughout research, as it’s been shown that self-awareness can assist in the coping of work stress and act as a preventative mechanism for compassion fatigue (Killian, 2008; Turner et al., 2005). Having such awareness is also connected with novice counsellors’ professional development phase. In their study examining the elements of master therapists, Jennings and colleagues (2005) found that master therapists are aware of their individual emotional needs and actively engage in the fulfillment of such needs as it prevents counsellors from causing undue and unintentional harm to clients. It compares, then, with the novice counsellors in this study who report continually engaging in self-reflection into their own emotional needs as a way of maintaining work-life boundaries and ensuring their needs are met.
Participants also noted the importance of having awareness into the individual needs due to its impact on their clinical work with clients. Several participants compared their wellness journey to the oxygen mask metaphor given on airplanes, that it is essential for a passenger to put on and fasten their own oxygen mask prior to helping someone else with theirs in the event of an emergency. They described that they would be unable to help or take care of others if they were not able to take care of themselves, thus reinforcing the need for self-care in their professional development. This is comparable with what is found in the current literature, as studies have found that counsellors must be able to help themselves before they are able to be the best therapist they can be for clients (Patsiopoulos & Buchanan, 2011). While it has also been shown that having the training and awareness of others’ needs and emotions can result in a heightened risk of neglecting one’s own (Barnett et al., 2007), it is imperative for counsellors to manage and handle their own emotional baggage and issues they are dealing with before being able to help clients do the same (Williams et al., 2010), thus reinforcing the need for emotional self-awareness, ongoing reflection, and persistent self-care practices.

**Implications and effects of self-care.** Participants were able to discuss the subsequent impact engaging in self-care, or lack thereof, had on their professional life and overall well-being. Unsurprisingly, participants noted the impact it had on their work with clients directly. Specifically, participants noted that when they did not engage in self-care practices, they found it more difficult to remain present in session or they reacted with apathy or judgment towards clients. Everall and Paulson (2004) also found that when self-care has been neglected, it can result in disrupted empathy with clients, more boundary violations, or unethical services. It has also been shown that experiencing burnout, which can result from a continued lack of self-care, can impair empathetic abilities and clinicians’ attentiveness with clients (Morse et al., 2012).
Conversely, engaging in self-care practices made novice counsellors in this study feel better about their work with clients. They felt that they were able to be more present and communicate empathy in an effective manner. They also found that they were more prepared to manage crisis situations with clients, as supported by Bressi and Vaden’s findings (2017) that self-care increases counsellors’ abilities to tolerate the strong affects that occur in client work. Therefore self-care, both in its practice and its absence, can have an impact on the feelings towards working with clients and the direct work done with clients in novice counsellor’s professional practices.

Self-care not only had an impact on the work being done with clients, but also on overall well-being of novice counsellors. Participants described not only feeling better about the work and interventions they were using with clients when engaging in various forms of self-care, but overall feeling more emotionally regulated, more motivated, and happier in both their professional and personal lives. Moreover, theoretical approaches such as Humanism require this of counsellors, as their personality characteristics are an integral part of embracing and activating client potential (Hansen, 2005). Engaging in self-care practices also help to reduce the risk of exhaustion or burnout through the maintenance of work-life boundaries (Alani & Stroink, 2015), as noticed by novice counsellors in this study. Novice counsellors in particular have been shown to experience difficulty in boundary control and heightened professional insecurity (Alves & Gazzola, 2011). As noted by the participants in this study, self-care practices have the ability to mitigate these effects, making it a crucial element of novice counsellor development and professional practice. Overall, self-care practices such as mindfulness have been previously shown to be able to increase emotional regulation (Duffy et al., 2017), as well as improving quality of life (Goncher, Sherman, Barnett, & Haskins, 2013).
Speculations on Notable Results

This section will discuss two particular themes from the data considered to be outliers due to my previous contrary biases or expectations, or contrary information from the literature gathered. They will also be discussed in relation to the study’s research questions, including my own exploratory understandings of such contradictions, and literature comparison when possible.

Professional stigma. Previous studies have suggested the existence of a professional stigma surrounding counsellor well-being and self-care. Therapists themselves have been shown to often be reluctant in regards to seeking and engaging in the help that they require (Roach & Young, 2007), despite encouraging clients to do the same in their lives. Moreover, they are able to speak with clients about implementing self-care into their lives, but have not been shown to effectively do so in their own lives (Williams et al., 2010). Counsellors also have been shown to believe there is a view that they are to be the perfect model of health, including mental health, for clients (Dayal, 2013). Due to this view, coupled with the overall reluctance to seek help and implement self-care, self-care can be said to have become a stigmatized idea within the profession.

Due to this apparent stigma, it was expected that there would be a greater discrepancy between the conceptual knowledge of self-care and the practice of it. In addition to literature stating that novice counsellors often engage in fewer self-care behaviours than those later in their careers (Dorociak et al., 2017), it was expected that self-care would be a known element, but that engagement in such activities would be minimal. However, participants described knowing what activities work for them, engaging in them regularly, and having the experiences of being supported in their self-care practices. While workplace support was not provided in the most
effective manner for all participants, they all reported engaging in it actively and having the self-awareness into their own needs.

From this discrepancy, there are a number of possible explanations. Due to the ages of some of the participants, and previous work within the social service field outside of the provision of counselling, previous experience of mental health burnout and being able to compare careers within the larger professional landscape may assist them in understanding their own needs and how to remain healthy in this field. Due to the self-reports of previous symptoms of burnout and compassion fatigue among older participants, it is possible that such experiences have been able to provide a framework for participants to learn from and engage in different behaviours that promote their individual wellness.

It is also important to note the role of the organization in employee mental health and overall well-being. Participants all mentioned the role their workplace culture, or the role they wished their workplace culture, would play to contribute to their overall well-being and encourage the use of professional self-care among counsellors. While the literature has recognized the importance of workplace factors in the use of counsellor self-care through supportive work environments and facilitating self-compassion (Harr, 2013; Patsiopoulos & Buchanan, 2011), it is contradictory to the notion of professional stigma preventing counsellors from seeking help or engaging in such behaviours. Due to such research, it was expected that workplaces may act as a barrier in more ways than they did. Though large caseloads and workplace time constraints did act as work-related barriers to self-care, this background made leadership or organizational cultural barriers seem plausible. Rather, most participants described being in supportive work environments, making it easier for them to engage in self-care and resulting in heightened well-being.
In regards to the discrepancy between the literature’s findings of a professional stigma against counsellors seeking help and participant accounts, it is possible that it is the culture of the specific workplaces of participants. It is also possible that different results would have been yielded if counsellors employed as independent contractors or private practitioners were participants within this study. As such, participants in this study worked in community agencies where a sense of community appeared to be built throughout most agencies. Due to the different types of settings in which novice counsellors can be employed, further research would be required to understand the role of the workplace culture, normative workplace cultures, and its impact on novice counsellor self-care behaviours. Moreover, it is possible that the types of therapy, specific issues addressed, and clientele would have an impact on the workplace positioning of self-care among novice counsellors. While the participants in this study mentioned working in community agencies, specific issues commonly addressed in therapy or clientele specialties were not discussed as contributing to their organization’s integration of self-care into their culture. Therefore, further research is required to examine possible impacts to an organization’s positioning of counsellor self-care based on clientele and common issues address and its overall effects on novice counsellor self-care behaviours.

**Ethical nature of self-care.** Self-care is a necessary component of the counselling profession due to the potential negative impact on clients. Specifically, a lack of self-care has been shown to result in unethical behaviour with clients and lower the overall standard counsellors set for themselves in terms of practicing in an ethical manner (Avieli et al., 2016). Counsellors who do not engage in self-care activities may also be at risk of damaging the therapeutic relationship through decreased levels of empathy with clients (Malinowski, 2014), or overall provide subpar service to clients (Thompson et al., 2011). Due to these potentially
detrimental effects, many ethical standards in counselling professions across North America have implemented counsellor self-care (Bradley et al., 2013), such as the CCPA’s standard of attending to counsellor’s well-being (Standards of Practice, 2015). Moreover, the CRPO’s Safe and Effective Use of Self competency relates to a counsellor’s use of self-care as it ensures counsellors are able to safely work with clients through understanding their own subjective contexts and interactional patterns (“College of Registered Psychotherapists of Ontario – Definitions,” 2015). For example, a counsellor may be able to engage in self-reflection as a way of understanding that the stressful nature of their context in the moment is creating barriers to appropriate work with clients, and self-care is necessary in order to provide ethical and adequate services. Therefore, the use of self-care among counsellors is an ethical imperative to ensure client work is the best it can be and no undue harm is done.

Due to the clear ethical implications of counsellor self-care, it was expected that participants would discuss their ethical obligations of engaging in self-care regardless of professional development phase. However, only one participant mentioned feeling ethically obligated to engage in self-care. While participants discussed ramifications aligning with the literature, such as disruptions to empathy (Everall & Paulson, 2004), and not being present with clients, they did not express feeling ethically obligated to engage in such self-care behaviours.

A reasonable explanation for such a discrepancy may lie in participant’s intrinsic motivation. Participant discussed positive effects of engaging in self-care, such as feeling more balanced, heightened motivation, and feeling more confident about their work. It necessarily follows that participants in this study may have found motivation for engaging in self-care behaviours from their experiences with it, rather than the obligations of the profession and ethical protocols. Further research would be needed to understand how novice counsellors
remain motivated to their ongoing self-care practices and the role of ethical standards in their overall well-being.

**Delimitations**

Though measures were taken to increase and sustain the trustworthiness of this qualitative study, several limitations remain. Due to the scale of this qualitative study, the sample size was small. Despite diversity in gender, professional and educational backgrounds, and workplaces included in this study, the limited sample size prevents findings to be saturated and therefore must be treated as preliminary and foundational to be built upon further. Furthermore, this sample was taken from one geographic area, and thus may represent a specific professional community. As such, results may have limited transferability to other geographic areas, populations served, or types of agencies available. Future research may be able to incorporate heterogeneity to better understand similarities and differences in novice counsellor self-care behaviours across clientele, agencies, and geographic regions.

While participants were able to conduct interviews either in-person or over the phone, all participant interviews were conducted over the phone. After researcher reflection, this was a beneficial data collection method to minimize interruption into participants’ time for self-care. By doing interviews over the phone, it would allow for participants to remain in a space that is comfortable with them, minimize interruptions throughout their day, and provide flexible scheduling. For participants with families, they were able to both attend to family needs in the moment during the interview, and participate in the study, allowing them to fulfill their needs and mitigate any possible additional stressors. Therefore, while participants had the option of an in-person interview, the use of telephone interviewing aligned well with the subject matter of this research project.
Participants in this study also worked within community agencies and did not report being hired as independent contractors or within private practices. Therefore, novice counsellors in other types of settings were not included and may have alternative experiences, perceptions, and use of professional self-care. Therefore, results may have limited transferability to novice counsellors practicing in other types of organizations.

The second research question examining how novice therapists are able to bridge the gap between conceptual knowledge and practice of self-care was insufficiently answered. While findings could be extrapolated to facilitate understanding of how participants were able to translate their conceptual knowledge into practice, such extrapolation would be research interpretation, rather than directly from participant accounts. Therefore, future research could benefit from asking novice counsellors directly how they are able to bridge such a gap, rather than examining both sides of the question and using researcher interpretations to understanding the connection between conceptual understanding and practical use of self-care.

**Recommendations for Future Research**

While this study may have limitations, recommendations for future research allow for the results to be further built upon and used in the development of research in this field. Future research should examine self-care across the professional lifespan. Through the examination of the perceptions, use, and experiences of professional self-care in stages such as internship, mid-career, and experienced professional, a better understanding may be gained in terms of how self-care impacts professional quality of life, subsequent professional impacts of self-care, and factors influencing self-care practices. By doing so, a coherent narrative may be understood in terms of both professional development and counsellor self-care, including the relationship that exists between them.
The scope of this study examined the use of self-care among novice counsellors in a professional context, and thus further research could explore both the relationship between professional and personal self-care and how professional well-being and quality of service may be impacted by personal self-care. Due to participants’ brief descriptions of the relationship between professional and personal self-care, this avenue may provide more understanding in the relationship between work and home life and how appropriate boundaries may be created and maintained.

While this study was able to identify strong themes among participants, its small sample size and area allows for further research to explore the self-care practices of novice counsellors in alternative settings and geographic locations. Furthermore, research aimed at answering the research questions used in this study using alternative research methods, such as a formal grounded theory approach, may allow for further themes and results to emerge from the data and for understanding on this phenomenon to grow.

Implications

One implication of this research is the development of self-care mechanisms for novice counsellors. Specifically, counsellor training programs could use this research to promote the understanding of and use of self-care beginning in training. Similar to previous studies, beginning the understanding and use of self-care within training programs may set counsellors up for success through building such mechanisms into their routines and professional habits early (Barnett et al., 2007). While the responsibility of acting on such reinforcements, training programs allow for the foundational skills for practicing in the field to be understood, learned, and practiced. Specific ways in which this may be beneficial include structured self-reflective practices allowing students to build on individual strengths and find useful tools for their
subjective well-being, explicit and normalized discussions surrounding self-care, and instruction on not only the benefits of engaging in self-care, but also the negative impacts of neglecting it.

Broadening the impact, another implication of this research is in the creation of supportive networks within agencies and building space into the workplace and work day for the engagement of self-care. Participants in this study mentioned several helpful characteristics of their workplaces, including: flexible hours; regular, appropriate, ongoing, and available supervision; and a sense of community. Elements based on this research and similar studies that could be improved within organizations include having a sense of control within the workplace (Awa et al., 2010), such as maintaining a caseload that is manageable to a counsellor’s subjective needs, and reduced paperwork requirements. Through such changes, workplace cultures may be able to provide counsellors with a safe space to discuss and engage in professional self-care. Moreover, as discussed by some participants, specific workplace committees designed to promote counsellor wellness may be a beneficial tool for organizations to integrate wellness and self-care into the fabric of the organization itself, possibly increasing the engagement of counsellor self-care. As such, workplaces may be able to create a supportive work environment, reducing the effects of distress (Harr, 2013), and increase the provision of quality services to clients.

A third and final implication of this research is on the professional policies and standards. Due to the lack of expression of self-care being an ethical imperative, policies may benefit from emphasizing the use of self-care as not only a professional tool, but a professional duty to prevent undue harm to clients. Through such an action, it may be able to create an overarching professional culture of self-care and integrating it into the foundation of the profession. Increased explicit messages from policies to engage in self-care and maintain wellness may make it easier
for counsellors to do so and further encourage clients to do so as well. Thus, through the 
strengthening of policies surrounding counsellor well-being and self-care, it may result in 
increased use of professional self-care among novice professionals, building lasting patterns and 
career longevity to assist clients in receiving adequate care.
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Appendix A: Request for Posting Text

To whom it may concern,
My name is Rachel Hammerton and I am seeking approval for the advertisement of a recruitment poster for a research study for employees at your facility. This study is a Master’s thesis study that will be conducted by myself and supervised by supervisor Dr. Nicola Gazzola.

The purpose of this study is to examine the use and perceptions of self-care among novice counsellors. The goal of this research is to build on the current understanding of self-care within the field of counselling, and to examine how self-care mechanisms are developed in novice counsellors, including what has been helpful or what has hindered these behaviours. Results from this study can inform self-care within counselling education programs through the understanding of specific mechanisms that have helped counsellors gain self-care practices and regimes in the field, as well as informing policies and organizational protocols of the self-care needs of counsellors as a way of further preventing negative therapist impacts such as burnout and compassion fatigue.

Criteria for participation:

- You have been practicing as a counsellor for 5 or fewer years
- You are a Certified Canadian Counsellor (CCC) or are eligible, or have, registered under a professional college such as the College of Registered Psychotherapists of Ontario (CRPO)
- You are willing to discuss your experiences with professional self-care
- You are fluent in the English language

Participants within this study would be asked to sit down for an interview lasting approximately 45-60 minutes to discuss their personal experiences with self-care, including how it is used, barriers to self-care and the personal importance of it. This interview will take place in a quiet, neutral location, and will be conducted in English. Upon consent, it will also be audio recorded to allow for an accurate record of our discussion and to be manually transcribed at a later date. All identified information will be removed from the data collected. Participants will be selected on a first-come first-served basis.

Participants will be asked to contact the main researcher if they are interested in participating in this study. I have also provided a recruitment poster for your facility and staff if you are willing to approve this advertisement.

If you have any questions or concerns about this research study, please do not hesitate to reach out and discuss them with me at [email address], at [phone number], or by contacting my supervisor Dr. Nicola Gazzola at [email address] or [phone number].

Thank you for your time and your consideration.

Best,

Rachel Hammerton, MA Candidate, Counselling Psychology
University of Ottawa
Appendix B: Recruitment Posting

RESEARCH PARTICIPANTS NEEDED!

Are you:

✓ A Canadian Certified Counsellor (CCC) or registered under a professional counselling College (College of Registered Psychotherapists of Ontario)?
✓ Practicing counselling for the previous 5 years or fewer?
✓ A graduate from a Masters or higher level counselling training program?
✓ Proficient in English?

If you answered yes to these questions, you are invited to volunteer in this research project exploring the experiences of self-care among novice therapists.

This study will involve:

✓ One 45-60-minute interview regarding your perceptions, experiences, and history of professional self-care

If you are interested in participating in this project or for more information, please contact:

Rachel Hammerton, MA of Counselling Psychology Candidate
Faculty of Education
[phone number] or [email address]

Please note that participants will be selected on a first-come, first-served basis.

This study has been reviewed and received approval from the Research Ethics Board of the University of Ottawa.
Appendix C: Recruitment Letter

To whom it may concern,

You are invited to participate in a research study I am conducting as a requirement for the completion of an M.A. degree in Counselling Psychology at the University of Ottawa.

The purpose of this study is to examine the use and perceptions of self-care among novice counsellors. The goal of this research is to build on the current understanding of self-care within the field of counselling, and to examine how self-care mechanisms are developed in novice counsellors, including what has been helpful or what has hindered these behaviours. Results from this study can inform self-care within counselling education programs through the understanding of specific mechanisms that have helped counsellors gain self-care practices and regimes in the field, as well as informing policies and organizational protocols of the self-care needs of counsellors as a way of further preventing negative therapist impacts such as burnout and compassion fatigue.

Criteria for participation:

- You have been practicing as a counsellor for 5 or fewer years
- You are a Certified Canadian Counsellor (CCC) or are eligible, or have, registered under a professional college such as the College of Registered Psychotherapists of Ontario (CRPO)
- You are willing to discuss your experiences with professional self-care
- You are fluent in the English language

If you volunteer as a participant for this study, I would ask you to take part of a 45-60-minute interview with me at a time that works best for you, and located at a neutral and quiet location. In this interview, I would ask you questions regarding your individual self-care journey and what has helped or hindered you developing your self-care mechanisms. In order to have an accurate record of our discussion, this interview will be audio recorded and transcribed later. All identifying information will be removed from the collected data. Participants will be selected on a first-come first-served basis.

If you are interested in participating or have any questions or concerns about this research study, please do not hesitate to reach out and discuss them with me at [email address], at [phone number], or by contacting my supervisor Dr. Nicola Gazzola at [email address] or [phone number].

Thank you for your time and your consideration.

Best,

Rachel Hammerton, MA Candidate, Counselling Psychology
University of Ottawa
Appendix D: Informed Consent Form

Researchers:
Rachel Hammerton
M.A. Candidate
Counselling Psychology
University of Ottawa
Tel: [phone number]
E-mail: [email address]

Dr. Nicola Gazzola
Professor, Thesis Supervisor
Counselling Psychology
University of Ottawa
Tel: [phone number]
E-mail: [email address]

You have been invited to participate in a study being conducted by Rachel Hammerton called *Novice Therapists’ Perceptions and Use of Self-Care*. This research project is being conducted as a requirement for the completion of Rachel Hammerton’s M.A. degree in Counselling Psychology at the University of Ottawa.

**Purpose of Study**
The purpose of this study is to examine how novice therapists perceive professional self-care and how they use it in their own lives. The goal of this study is to expand on the current understanding of self-care within the counselling profession and to explore what has been helpful in developing the regular use of self-care as well as what barriers exist to practicing these behaviours. From the information gathered during this project, counselling education programs may be able to implement and further build on helpful practices to instill healthy self-care behaviours in future counsellors along with informing governing bodies to further their policies and mandates allowing counsellors in the field to maintain their self-care and to prevent negative therapist outcomes such as burnout and compassion fatigue.

**Procedures**
If you agree to be a participant in this study, you will be interviewed about your individual self-care journey. This interview will be conducted in English and will take approximately 45-60 minutes to complete. Additionally, this interview will be audio recorded to provide an accurate record of our discussion for transcription later. All identifying information will be removed to protect your anonymity. After transcription, you will be sent an encrypted PDF of your transcribed interview to ensure accuracy of information. You will have seven (7) days to review and return to the interviewer with any desired adjustments, comments, or changes.

**Potential Risks and Discomforts**
There is a potential risk of discomfort during this conversation as self-care is personal in nature, and often a result of negative life aspects. As such, some emotional discomfort may be experienced during or after this interview. While the potential risk is minimal, you are open to informing the researcher during the interview of any feelings of discomfort or vulnerability. After the completion of the interview, you will be provided with the contact information of available local distress services should discomfort emerge, continue, or increase after the interview. Crisis Services Canada at 1-833-456-4566 is a free national resource available 24/7 to prevent suicide and assist in emotional distress, including local referrals.
Potential Benefits of Participation
By participating in this study, you will be given an opportunity to reflect on your current and active self-care mechanisms, allowing you to recognize individual efforts and areas of continued need for further wellness. Additionally, participation will allow for you to contribute to the body of knowledge about self-care behaviours among novice counsellors, including helpful experiences and barriers. As such, this information can allow for counselling education programs to enhance their protocols and better prepare future counsellors, as well as allowing existing policies to be updated to protect counsellor well-being.

Confidentiality and Anonymity
To protect and maintain participant confidentiality, all identifying information will be removed from audiotapes and transcripts. Any information revealed within this study that could reveal the identity of participants will remain confidential and will not be reveal to anyone outside of the main researcher and thesis supervisor. Specifically, an interviewee number that does not contain any identifiable information will be assigned to each participant.

Data Collection and Storage
The data collected from participants will include an audio recording and a transcription of the interview. All original data will be securely stored in a locked cabinet in Dr. Gazzola’s office. the data will solely be accessible to Rachel Hammerton and Nicola Gazzola. The data will be maintained and preserved for five years after the completion of the research study. After such time, all data will be destroyed and properly disposed of.

Participation and Withdrawal
Participation in this research study is completely voluntary in nature, and you are free to withdraw at any time. This means that you are able to withdraw from the interview at any point in time, even though you initially agreed to it. In such a case that you decide to withdraw from the study, your data will be destroyed and will not be used in this project. At any time, you are able to ask questions of the researcher and able to refuse to answer any given question without negative repercussions.

Two copies of this consent form are available, one of which is yours to keep for your own records. If you have any questions or concerns, you may contact the researcher or her supervisor. If you have any ethical concerns, queries, or complaints about this project, you can direct these to the Office of Research Ethics and Integrity at Tabaret Hall, 550 Cumberland Street, Room 154, at 613-562-5387.

I, _________________________________, understand the procedures described above and agree to participate in this study.

Participant’s signature: _____________________________ Date: _____________________

Researcher’s signature: _____________________________ Date: _____________________
Appendix E: Semi-structured Interview Protocol
Novice Therapists’ Perceptions and Use of Self-Care
Date: __________ (M/D/Y) Time of Interview: _________ Interviewee #: _________

A. Information for participants:
The purpose of this study is to further understand how novice therapists perceive, experience and use self-care. Specifically, in regards to professional self-care, this study is seeking to understand: 1) how novice therapists engage in professional self-care, 2) how novice therapists are able to bridge the gap between conceptual knowledge and practice professional self-care, and 3) the barriers to self-care. The information gathered from this study will inform counsellor education and policies to better support the use of self-care within the counselling profession.

B. Review consent procedures:
Before we begin the interview, I would like to review the informed consent document with you. I have a copy of the informed consent for you to take with you at the completion of the interview as well. If you have any questions or concerns prior to the interview, during the interview, or anytime after, please let me know.

C. Collect demographic information:
To start our interview, I am going to ask you a few demographic questions that may be relevant to your experiences of self-care.

1. What is your age? _______

2. What gender do you identify as? ______

3. What are your educational qualifications? ______________

4. What professional memberships and/or regulatory bodies are you a part of?
   a. Professional memberships? ______________
   b. Regulatory bodies? ______________

5. How many years have you been actively practicing counselling outside of your educational requirements? __________

D. Contextual interview questions:
I am now going to ask some questions regarding your experiences with self-care. The content may elicit emotional discomfort at times. If you become uncomfortable, experience emotional discomfort, or would like a break at any time during this interview, please let me know. To ensure accuracy, this interview will be audio recorded and later transcribed, with all identifying information removed.
1) Background/Understanding
   a. Tell me about your practice of self-care.
   b. How would you define self-care?
   c. How did you learn about self-care?
   d. What has influenced your self-care?

2) Practical
   a. In what ways do you think your work and your self-care are related?
   b. What has prevented you from engaging in self-care in the past?
   c. What has helped you to engage in self-care?
   d. What would make it easier to engage in self-care?

3) Importance
   a. What does it mean to you to engage in self-care?
   b. How does engaging in self-care affect you?
   c. How do you personalize self-care?
   d. What importance do you place on your self-care?
Appendix F: Categorized Codes

<table>
<thead>
<tr>
<th>Theme 1: Obstacles to Self-care</th>
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<tbody>
<tr>
<td><strong>Work-related obstacles to self-care</strong></td>
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<td>So I see the value in the things that I would like to build back in, I see the value in journaling and that self-reflection piece that I used to do at work, but I can’t actually see where I would fit journaling into my busy work day and it’s part of the reason why work has to get carried home. Before I wanted to bring it home. I don’t want to bring it home now, but I find that it’s so much paperwork there’s no other option. (Allison, 235-241)</td>
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<td>Well in the present I find part of the problem, while there’s lots of elements of self-care that happen in a less, it’s doesn’t seem very conscious because it’s just, it’s a natural progression that’s occurred throughout my day. We have a lot of, like where I work, I have a lot of paperwork expectations and a lot of data tracking that we have to do and so where there might be time to consult with colleagues and engage in peer supervision, which is something that I actually have the opportunity to do now, I find that I don’t actually have much chance to do it because my schedule rarely aligns with my colleagues (Allison, 249-257).</td>
</tr>
<tr>
<td>So really what it comes down to is a lot of the paperwork requirements of my position ensure that if I’m not actually meeting with clients, there’s not a lot of free time for some of that extra discussion or for that time for me. (Allison, 262-265)</td>
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<td>I think, for me, deadlines are what gets in the way of giving myself that 30-minute break away from my computer, because I’m constantly aware of the things that have to be inputted into my computer and discharges that are coming up, so that often, I think pressures me to just push on through and to put aside those other elements of self-care that I would normally have done or was doing when I first started at my current position. (Allison, 273-278)</td>
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<td>So definitely if I, if there was less to do with all the inputting of all the data, all the different forms we have to fill out, that I would think I would have more time to build some of these things in, I wouldn’t</td>
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feel pressure to sit at my desk through my lunch hours even though I am in fact supposed to be taking that time. (Allison, 345-349)

And when I first started making phone calls to my clients, really the way it works, typically, is that we ask clients when it’s best for them to set their appointment and then we try to work our schedules around them, and ultimately what ended up happening is that my clients were not available on Monday nights and instead of me sticking to, “this is my availabilities, if you are interested in sessions, this is when you can come in,” I accommodated for my families (Allison, 393-399)

The problem is that with the paperwork being as heavy as it is, I almost never take my hours back the next week because I, my workload suffers if I take the hours back. So part of the problem that I’m running into is that where I work currently, this expectation that we have to kind of fit families in where it works for families, means that sometimes I work longer hours than I should to accommodate my families (Allison, 409-414)

the workplace cultural expectation that we are just going to do whatever we can to service our clients and to do our best to ensure that they can attend their weekly appointments often means that we put the clients first and our needs kind of come after. (Allison, 424-427)

So there are lots of contentions, shall we say, in terms of which roles are important and just changes in terms of the overall structure of the agency. So, yeah, just changes in terms of leadership, for instance, and who’s going to run the agency, that’s one of the most current stressors. And in terms of how the agency manages and the information about self-care, I wouldn’t say that there’s a lot of focus on that. Yeah, I’d say it’s similar to other agencies I’ve worked at where there’s the message that self-care’s important but I don’t know that they practice it there, let’s put it that way. (Regina, 34-42)

it’s on one hand it’s said that self-care is more important, but on the other hand there’s a level of guilt I think that’s implicit when one takes some time off, or not implicit, it’s attached to you, yeah I don’t know, I can’t think of the right word, but yeah it’s like, it’s laid out on you. (Regina, 55-59)

Things like not making room in my schedule to take regular time off, that has been a factor. Feeling pressure maybe from the employer that this needs to happen and that needs to happen, and that kind of thing, so pressure in terms of workload. (Regina, 128-131)

I feel like for me there’s an importance in reading and research and learning new things and I feel like there’s a lot of pressure to see clients in order to, you know it’s a business, gotta keep moving forward. That’s where I think I feel the most pressure. So if somebody cancels, for instance, I have a hard time saying, “Ok leave
that space open,” so I can either catch up on some notes, or I can do a little bit of reading or research (Regina, 169-174)

For me, [self-care is prevented] when, to be honest, if I have to present something that takes my time away from my personal life. Like last year, it was a lot of material I had to create or engage with, like learn, and present, let’s say to the peer counsellors, so that prepping of that material, it took away from that self-care. I did at home and that, I have to say, is the one thing that removes me from that. (Owen, 280-285)

but fall last year was quite intense and there was a lot of changes at work, so it took away from that self-care. So it was challenging and when I didn’t have time for that self-care as much, I was overwhelmed for sure. (Owen, 287-289)

<table>
<thead>
<tr>
<th>Life-related obstacles to self-care</th>
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<td><strong>So I think I still see room for more self-care right now and I think the struggle that I’m having now compared to a few years ago when I was more engaged in self-care has to do with how my family constellation has changed</strong> (Allison, 209-212)</td>
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<td><strong>Managing my household, making sure that I have ample time with my husband and my kids seems to take priority over other things so buying a gym pass has been my goal for maybe a year, and I still don’t have it because I can’t fathom where I would possibly fit 3 workouts in a week into my schedule right now. Reading for my own pleasure has taken a backseat, I had picked it up for a while and I was reading novels again and now it’s gone back to taking a backseat because reading on my own time would mean having to put time aside that I would otherwise potentially be spending with my husband or trying to squeeze a minute somewhere in on my weekends and when my kids are awake, we usually all spend time together so we don’t tend to take breaks from our kids in that sense.</strong> (Allison, 225-235)</td>
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<td><strong>I would say laziness, being tired, maybe situations that happened [has prevented me from doing self-care]</strong> (Rebecca, 245-246)</td>
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<tr>
<td><strong>But the main [solution to self-care] is forcing myself to go because I know if it’s mainly out of laziness.</strong> (Rebecca, 266-267)</td>
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<th>Theme 2: Work-life Balance</th>
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<tr>
<td><strong>Importance of intentionality</strong></td>
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<td>And I also found that as a result of the stress that I endured in my last workplace that I also found myself doing things like attempting to incorporate yoga or to find quiet time in my day where the purpose was for nothing other than to just sit peacefully and be okay with my thoughts and some of my intense emotions (Allison, 108-112)</td>
</tr>
<tr>
<td>So those types of questions also helped me reflect on what self-care could look like for me and I guess learning about it has also just</td>
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been a bit of a process in terms of experiential learning, because I know now that self-care for me might look like going to bed earlier after I’ve had a 12-hour shift, rather than staying up until my usual time knowing that I’ve worked that many extra hours and it’s going to be harder for me to recover the next day (Allison, 177-183)

In theory, I tell myself when that happens that I need to take a break and I need to go see colleagues and just chat or to step out of the building, and sometimes I can do that, but sometimes that I also find that I just waste time instead of acknowledging that I need a break and doing something that would help me re-energize so I find myself scanning something useless online, or [laughs] browsing Amazon and making a useless purchase instead of engaging in an activity that would actually help me reset (Allison, 327-344)

I think that when I do consciously find the time to engage in self-care, whether that looks like attending my workout class or taking those breaks in my day, or connecting with colleagues and just sharing our current experiences with our work load or experiences with our clients (Allison, 457-461)

before I attempted to be mindfulness always in a very professional sense, if you will, that I tried to somehow link it back to this is a skill that I need to achieve, this is something that I need to get good at, so that I can train my clients on how to use it, whereas now it might be something that I just, I do just for the sake of, just exploring what it’s like for me (Allison, 494-498)

where I have modified self-care to make it work for me is a way in which it comes up in everyday activities and I try to be conscious about how it makes me feel and if it adds value or brings me a sense of happiness or joy, whereas before self-care was really just about professional development, and, “I need to get better at this because if I’m less stressed, I’ll be a better counsellor”. Now it’s more just about engaging in things that offer some sort of pleasure or offer some sort of sense of accomplishment, but without the pressure of trying to be better. (Allison, 506-514)

I experienced burnout a number of times myself, so I think that through my own experiences I’ve learned that you really need to take care of yourself because no one else is going to. (Regina, 71-74)

Things like not making room in my schedule to take regular time off, that has been a factor. (Regina, 128-129)

if I haven’t given myself a good balance, then I’m less engaged in other activities outside of work. (Regina, 205-206)

I think it’s more a concerted effort and then the practicing of the routine of that, I think is helpful for me. (Regina, 275-277)

So no, I think that planning goes into it, I don’t think, for me it’s not something that happens naturally. Even, for instance, eating properly, like making sure that at night I have time for meal prep
and then packing a healthy lunch for work and snacks, that’s not something that I do naturally, it’s again, it’s something that becomes easier with routine and practice, but it takes an effort. (Regina, 283-288)

I would say it’s vitally important to doing this job well. Does that mean that I always give the attention that it needs? No. But, I always go back to it when I’m struggling, I’m like, “oh, okay, I need.” (Regina, 331-333)

So even though I am working and I dedicate so much to my work and learning and growing, but if there’s a concert or something like that, I really take the time for that, even if it’s for out of town. Like things that have always provided that strength for me, I listen to that. (Owen, 18-22)

In terms of even, if I’m really going to dissect self-care, it’s even what I choose to wear to work. What I have on my walls, like on my walls or even if I buy a plant for work, even creating the work space as a place that I love. Even looking at something that’s on the walls during a session and something that just provides literally joy just by looking at it, that, for me, helps the self-care in the room, in the session. (Owen, 57-63)

I’m not a procrastinator, maybe when I was 18 I was, but in my 30s I’m far from it. So being on top of case notes, for me that’s self-care. Sometimes I might stay a little later at work, not too late I’m not exaggerated, but taking care of being up to date with my clients’ notes is self-care, it’s one thing out of my mind, I could go home at peace (Owen, 86-90)

Well at work, we have goals, which I’m sure the majority of workplaces or agencies implement, and one of my goals is to maintain self-care. So that helps me take that on. (Owen, 157-160)

Like in our field it’s so spoken about, it’s become part of the zeitgeist of our field I think, of our time, and I think it helps us model that to clients, and I think that’s what helps, that it’s just becoming such a big word in our field and I think that’s really helped me to take it seriously. (Owen, 165-169)

I do sometimes do work out of office hours, but that’s more for prep, for like let’s say, like I’m a supervisor for peer counsellors, I’m one of the supervisors, so there’s like, let’s say a presentation, and for me by nature, I practice what I’m going to say, articulate my thoughts, and although it is work outside of work, maybe I go to a coffee shop, I make sure that it feels less work-y [laughs]. Yeah, feels less like work but for me that’s also self-care because if I didn’t prep, it will cause a lot of distress. (Owen, 244-251)

And again, I really have to say, like I read somewhere, even buying a piece of jewelry that’s really you, that helps with self-care because every time you look at it you’re like, “ah I really love this,” and I know it’s so small and minute, but it’s really helpful. And
even I have two frames in my office that are very me and every
time I look at them even in session it’s like looking at something
that’s so me that gives me energy. (Owen, 417-422)

For me, it’s more about just taking the time for myself and not
worrying about work or home stuff or errands or, it’s just a way to
keep myself grounded and also get some sort of satisfaction from
doing things that I like, which is what I told you about (Rebecca,
22-25)

[Professional self-care is] more about yes taking time out of your,
so like not being at your desk, checking in with your supervisor,
doing a lot of consultation and debriefing just to make you feel
good and make sure that you’re doing the right thing and not just
completely getting burnt out without checking in. (Rebecca, 36-40)

So I figured, I noticed the effects of when I did these things I felt
much better and calm and regulated compared to had I not done it
because I can feel the difference if I’m feeling tense and stressed
and I’m not able to do some of my self-care practices because of
whatever reason, I can see the difference between before and after.
So I notice when I do these things, I feel much better and I’ve taken
time out for myself. (Rebecca, 62-67)

I feel like for the professional self-care, there’s always a reason to
do like a self-care practice. (Rebecca, 71-72)

So I know that if I’m being lazy then of course I’m going to force
myself to go because I know what the outcome is, which is me
feeling good, feeling great, and everything. And if I don’t go, I start
thinking, “well had I gone to this, and I would have been feeling
better, meaning that the next day blah, blah, blah, blah.” So
forcing myself to go is something that I really do to get myself to
do self-care (Rebecca, 258-263)

I think [the workplace culture] helps promote [self-care] because
then we have strategic meetings where we discuss a whole range of
things and we have a health and well-being team, we have a culture
and diversity team, so people can choose where they want to go and
I think this is the one [inaudible] where people are really able to
express how they’re feeling and for some people maybe lifting that
burden off their chest is self-care, for me I feel like seeing different
groups develop at work where I feel comfortable expressing my
needs and concerns is something that improves my well-being at
work and doesn’t have me stressed about different things
(Rebecca, 277-285)

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comfortable expressing my needs and concerns is something that
improves my well-being at work and doesn’t have me stressed
about different things. (Rebecca, 283-285)

Some of it happens naturally without me really planning to do it or
and I end up bringing myself to doing it and there’s not much effort
required. Whereas things like journaling, meditation, going to the gym – those ones I feel like have to be scheduled. Now the meditation one depends because I think sometimes I’ll do it before bed and it’s not like I schedule it but it’ll just happen. And then sometimes I’ll be like, “ok I really have to do it so I’m going to try to do it for this time of the day.” (Rebecca, 298-304)

I don’t know, anyways it’s different for everyone, I can’t really speak for everyone, but I think people really taking the time to think deep about what helps them feel good and whatever it is that will help them understand the importance of self-care. (Rebecca, 365-368)

So I think the more I’m able to take care of myself, the more I’m also able to give my best to other people and I think that’s what makes a difference in my work. It’s something that I enjoy so in order to do that, I need to take care of myself. (Rebecca, 381-384)

So I find that because a lot of my mental and emotional energy is given away during the week, I feel like making the time to do it, or to do something, one of those practices, at least once a week is very important to me and me putting aside my laziness and putting in more effort into doing it is really important for me. (Rebecca, 428-432)

**Recognizing the importance of self-care**

Well for me, I would say that it’s really important that I strike a balance between my work life and my home life (Allison, 17-18)

So sometimes I find that I do it all together and I see it as a form of professional self-care because ultimately if I feel rested and I feel at ease and I feel like I’ve created connections in my life with my family, that I go back to work the next day feeling fulfilled and ready to start my day fresh. (Allison, 65-69)

I would absolutely say that I learned about [self-care] through my Master’s because while I had engaged in certain self-care activities prior to my Master’s degree, I didn’t really realize the full importance of it until we started discussing it and I had to contend with the anxiety that comes with the pressure of a Master’s level education, working with clients who have a lot of emotional needs and feeling a lot of internal pressure to do a really good job, (Allison, 165-171)

I guess learning about it has also just been a bit of a process in terms of experiential learning, because I know now that self-care for me might look like going to bed earlier after I’ve had a 12-hour shift, rather than staying up until my usual time knowing that I’ve worked that many extra hours and it’s going to be harder for me to recover the next day (Allison, 178-183)

but sometimes on those nights when I roll in the door at 9 or 9:15 at night, we just go to bed right when I get in because I know that I need that now, whereas a few years ago I wouldn’t have looked at that as self-care, I would’ve looked at it as just I’m tired, but it’s
now conscious that it makes me, like being better rested means that I’m a better parent the next day and I’m not a cranky partner and it means that I can be fully present for my clients (Allison, 184-190)

I also felt that it was something that I had to do because, the difference between supervisors is that sometimes it was reinforced that I needed more improvement and I needed to work harder or that I was lacking in understanding, so sometimes self-care seemed more of a chore that I didn’t necessarily want to engage in, but I felt there was an obligation because I was lacking skills or lacking knowledge (Allison, 285-290)

but I make a conscious effort to create balance between my professional life and my home life and so striking that balance, which for me is a big part of my self-care, has also helped me be a better therapist because I used my own experience in creating that balance (Allison, 448-451)

So, going to a workout class doesn’t necessarily help me feel like more of a professional, but I do recognize that in doing those things that I am strengthening myself as a therapist because I’m taking the time for me, which is what I encourage my clients to do. (Allison, 462-466)

I define self-care as the thing that I would do just for me that contributes to my overall well-being. (Regina, 16-17)

I experienced burnout a number of times myself, so I think that through my own experiences I’ve learned that you really need to take care of yourself because no one else is going to. (Regina, 71-74)

I really notice that in this particular job, in terms of providing counselling services, that it’s super important to be grounded and to be in a good space yourself, so I think I feel an ethical responsibility to also make sure that I’m in a good headspace and in part of that is making sure that I take good care of myself. (Regina, 81-84)

I’m bringing that to the table then I know, “hmm okay, I need to scale back, I need to watch myself,” for instance if I’m maybe giving my opinion too much or if I’m doing all of the talking and I’m not asking as many questions as I should, like those are indicators for me that I am not as grounded as I need to be and I think it’s just a lot of self-reflection around that. Like you need to be very present and very grounded, I find, to do this specific job as a counsellor or a therapist. (Regina, 93-99)

I’m practicing more congruently with the way that I want to practice when I feel like I’m at my best, and I think that self-care directly relates to that, like when you start to feel burnt out, that’s an indicator, for me, that I need a bit of a break. (Regina, 120-123)
Being a little bit older, realizing the impacts of not taking care of myself has helped me be a little bit more assertive in terms of the need to take care of myself (Regina, 183-185)

I think the other piece is in the promotion of it internally and then the, the promotion of it by having a certain amount of days where you can take off for mental health, or in the encouragement of using sick days for mental health as well, and then I think reinforcing that, so not asking questions about somebody taking a sick day, and saying, “good for you for taking time for yourself,” to really reinforcing that as opposed to focusing on the negative impact for the business operation (Regina, 230-236)

I think that that can lay the groundwork in terms of focusing on the importance as well and the link between, like we all want to give good care and good quality care to our clients, right? So I think that piece around the link and how, you know we’re not able, I tell my clients, for instance, all the time, the ones with kids, “if you’re not taking care of yourself you’ll get to the point where you’re not able to take care of your kids.” And I think that’s comparable in terms of our clients, if we don’t take care of ourselves, we’re not going to be able to help take care and guide and counsel our clients. (Regina, 241-248)

I think it means that I am able to put myself first, like I encourage all of my clients to do. I think it means that I’m able to provide a better service. I think that it means I’m committed to being the best therapist that I can be when I’m engaging in good self-care. (Regina, 291-294)

I would say it’s vitally important to doing this job well. Does that mean that I always give the attention that it needs? No. But, I always go back to it when I’m struggling, I’m like, “oh, okay, I need.” Like I said before if I’m starting to see everybody’s problems as the same and one thing just bleeds into another, that’s when I’m like, “alright, maybe I need a long weekend this weekend,” or “maybe I need to go to bed a little bit earlier tonight,” that kind of thing. (Regina, 331-337)

I just make sure I listen to, like I’m not only a counsellor. I want to remember that and what I bring into the room, even with clients is [name], and when I feel great, when my needs have been met with all these other interests, I know the person in the room is giving 110% because I met my own needs first. (Owen, 38-42)

Also in the workplace, boundaries is huge. Like there was a period in one term where I felt like I was taking on too much and to listen to that, and my window of tolerance decreased because I didn’t have time for self-care as much. So for me, speaking to my manager, speaking to my supervisor, was essential self-care, like essential. Like I spoke to them and I said, “look, respectfully I feel like right now I took on too much.” And they’re like, “[name] yeah,
like what’s going on?” And I’m like, “look I just took on too much, I’m feeling a little overwhelmed, not a big deal.” I’m not being resistant to my workplace, it’s just I took on too much right now. And I even asked my supervisor, “how do I say no?” [laughs] like really. And it came from such a genuine place, she’s like “[name] makes sense, just say I’d like to be a part of the project, maybe not right now.” (Owen, 65-77)

So it’s kind of walking away from the work so that when I’m back I’m excited and I’m very happy to say that when I go to work in the morning, very rarely I do not want to go. Like I love going to work, so that I think is really, so that’s it. (Owen, 105-108)

[I learned about self-care] through the program, no two ways about it. Yeah in the Master’s program they really highlighted the importance of it, it was a new term for me at the time, and really seeing how in a field where we’re giving so much of ourselves, it’s crucial for us to meet our own needs, and I’m happy they did so because I’m happy that it’s a buzzword. It’s part of that wellness that we always highlight, or I highlight to clients. (Owen, 145-150)

And even just the culture in the field, like I can’t picture engineers, like I could be wrong, but I can’t picture engineers having a meeting and talking about self-care and how they’re going to talk about self-care with their clients. Like in our field it’s so spoken about, it’s become part of the zeitgeist of our field I think, of our time, and I think it helps us model that to clients, and I think that’s what helps, that it’s just becoming such a big word in our field and I think that’s really helped me to take it seriously. (Owen, 162-169)

So I think at one point when it was becoming overwhelming I really had to speak up and speak to my supervisor, my manager, and saying like, “look right now I think I took on too much right now,” and it was listened to. I guess I should’ve said no a little earlier or gone a different way but yeah you learn. And actually as even looking back, it was still one of the best years at work. (Owen, 297-302)

It means listening to your own needs before you can help someone else with theirs. (Owen, 425-426)

And I make sure that I’m not only one faceted. I do things that, for sure, inspire me. I try to attend to my different, the things that are important to me. (Owen, 437-439)

It’s knowing that there’s more to me than just being a counsellor, and I know that if I listen to that, I’m not only this, I could do it for a longer time and this could be my life vocation and when I’m going in the room they will be meeting with [name], not this robot. (Owen, 482-485)

Now I know that so many people that say, “whatever happens at work stays at work,” but I personally don’t think that’s true because we’re all human and I would say that if I didn’t have self-care
practices that I do now, or that I try to do, I think, and I mean it’s happened, is that you just end up getting stuck in a funk where you’re like, yes, you kind of go on autopilot, that’s the word I’m looking for. You just do things just because you have to and you feel yourself, you feel different. I would say I feel different when I haven’t tried to incorporate self-care practices (Rebecca, 138-146)

With clients I really create boundaries with them, but for myself yes, in what I do and that’s practicing self-care both professionally and personally, with professionally I’m able to debrief, and personally I’m able to do something light and kind of divert. (Rebecca, 217-220)

I just feel like self-care is something that everyone should incorporate. And I feel like education is something that will contribute to enabling people to learn more about it because maybe some people just don’t even know what self-care is and they don’t understand the importance and there’s some people that are stuck on the mindset that they don’t have time for it or they’re always too busy to incorporate it. And these are the same people that sometimes probably complain that they don’t have time for themselves. (Rebecca, 345-352)

I’m able to notice the difference when I’m stressed or maybe feeling burnt out or maybe feeling like I don’t have anymore to give. It’s about me just taking, it’s like having time to pause and just stay in an activity that makes me feel, it’s my time, basically. My personal time and focusing on my health and my well-being and yeah (Rebecca, 375-380)

Because I would have tried it and I would have known that doing certain things makes me feel good, and I mean there’s a list of things that I’d love to do that I feel like would make me feel even better and I do continue to find the time to do all these things (Rebecca, 417-420)

So I find that because a lot of my mental and emotional energy is given away during the week, I feel like making the time to do it, or to do something, one of those practices, at least once a week is very important to me and me putting aside my laziness and putting in more effort into doing it is really important for me. (Rebecca, 428-432)

And also being able to say no, is one of my biggest things, knowing that let’s say on weekends, if I put it in my schedule that I have to do something for a decent amount of hours, and then something else coming up and me being able to set my boundaries and knowing that this is me time and I don’t always have to say yes to everything. And knowing that you’re not going to make everyone happy, so doing what matters to me is always what I try to put first, unless there’s an emergency somewhere, but I always try to put my self-care practices first and put my laziness aside and talk myself
through it and motivate myself to do certain things, yeah that’s how I make it important. (Rebecca, 436-445)

**Difficulties in walking the walk**

I’m probably a terrible example of what self-care looks like because right now I’m also meeting with a physiotherapist and Monday nights happens to be one of the few nights that we can meet so I’m often losing my workout class for physio, which is still self-care in a lot of ways because I require the physio, but it’s about having some balance (Allison, 20-25)

I think, for me, deadlines are what gets in the way of giving myself that 30-minute break away from my computer, because I’m constantly aware of the things that have to be inputted into my computer and discharges that are coming up, so that often, I think pressures me to just push on through and to put aside those other elements of self-care that I would normally have done or was doing when I first started at my current position. (Allison, 273-278)

In theory, I tell myself when that happens that I need to take a break and I need to go see colleagues and just chat or to step out of the building, and sometimes I can do that, but sometimes that I also find that I just waste time instead of acknowledging that I need a break and doing something that would help me re-energize so I find myself scanning something useless online, or [laughs] browsing amazon and making a useless purchase instead of engaging in an activity that would actually help me reset (Allison, 327-334)

I actually find that that happens a lot, like this week for example, owing to when my families have appointments, at the end of the week I will have worked 41 hours and I’m only supposed to work 37.5, so I will have worked overtime, which I don’t get paid for but I can use it the next week and reduce my workload next week having worked overtime. The problem is that with the paperwork being as heavy as it is, I almost never take my hours back the next week because I, my workload suffers if I take the hours back. (Allison, 404-411)

I think I anticipated there would be, I don’t know, not that I expect other people to have organized meetings as a way of encouraging self-care, like it’s not other people’s responsibility to try to motivate other people to engage in self-care, but I like the idea that, or I was maybe under the impression that it was something that would happen more often to encourage people to take those breaks, you know in their week or perhaps bi-weekly to come out and engage in different types of activities that would promote self-care because I think for me, sometimes the barrier is thinking outside of my own box, is redefining self-care, so I know that sometimes I just need to come home and watch TV as a way of kind of separating myself from my work. (Allison, 354-364)

And in terms of how the agency manages and the information about self-care, I wouldn’t say that there’s a lot of focus on that. Yeah, I’d
say it’s similar to other agencies I’ve worked at where there’s the message that self-care’s important but I don’t know that they practice it there, let’s put it that way. (Regina, 38-42)

I just wasn’t feeling in the right headspace to provide counselling services and my supervisor, although she encourages us to take time when we need, proceeded to tell me how upset the clients were and that they were crying, so it’s like, you know, it’s on one hand it’s said that self-care is more important, but on the other hand there’s a level of guilt I think that’s implicit when one takes some time off, or not implicit, it’s attached to you, yeah I don’t know, I can’t think of the right word, but yeah it’s like, it’s laid out on you. (Regina, 52-59)

I tell my clients, for instance, all the time, the ones with kids, “if you’re not taking care of yourself you’ll get to the point where you’re not able to take care of your kids.” And I think that’s comparable in terms of our clients, if we don’t take care of ourselves, we’re not going to be able to help take care and guide and counsel our clients. (Regina, 244-248)

I would say it’s vitally important to doing this job well. Does that mean that I always give the attention that it needs? No. But, I always go back to it when I’m struggling, I’m like, “oh, okay, I need.” (Regina, 331-334)

Like saying no in certain situations is not always easy but it’s essential because if I was miserable in the workplace for such a long time I would quit, for sure. (Owen, 294-296)

I work hard on it. [Self-care is] work. (Owen, 494)

And also being able to say no, is one of my biggest things, knowing that let’s say on weekends, if I put it in my schedule that I have to do something for a decent amount of hours, and then something else coming up and me being able to set my boundaries and knowing that this is me time and I don’t always have to say yes to everything. And knowing that you’re not going to make everyone happy, so doing what matters to me is always what I try to put first, unless there’s an emergency somewhere, but I always try to put my self-care practices first and put my laziness aside and talk myself through it and motivate myself to do certain things, yeah that’s how I make it important. (Rebecca, 129-138)

I would say laziness, being tired, maybe situations that happened (Rebecca, 245-246)

I mean there’s a list of things that I’d love to do that I feel like would make me feel even better and I do continue to find the time to do all these things (Rebecca, 418-420)

**Need to have good work-life boundaries**

So for me self-care, is also reflecting on this, after I’ve left work, but then being kind enough to myself that I can let it go. So it’s taking that self-reflection piece home with me but not letting it burden me if I feel like I’ve had a bad session or if there are things
that I could’ve improved on, I try to acknowledge that but I make sure that I, once I’ve acknowledged it I leave it at the door and bring it back to work the next day, rather than letting it weigh on me through the evening. (Allison, 39-45)

Whereas if I feel like I’ve missed a lot of family time and I feel like I’m falling behind on my, not my responsibilities but if I feel like I haven’t had enough time to connect with my kids or with my partner then it unfortunately does sometimes carry forward into work. (Allison, 69-72)

Before I became a parent, I made my work often a priority. So my education was often first priority, my job was first priority, and then everything else came after that, which unfortunately included my husband. And when I had children my priorities shifted and my children and my husband became the priority and while sometimes work still gets in the way, I have to bring work home and that might mean my husband and I have to put our evening plans aside for a day. (Allison, 218-225)

Having more firm boundaries while, which somewhat contradicts what I was just saying about accommodating families and putting them first, I do have more firm boundaries in terms of what I’m willing to take home with me, which I didn’t do before and so I often found that it was, you know families did become, I shouldn’t say families because my priorities shifted a lot more when I had children, but I make a conscious effort to create balance between my professional life and my home life and so striking that balance, which for me is a big part of my self-care, has also helped me be a better therapist because I used my own experience in creating that balance and sometimes that’s an important piece of self-disclosure that I can share with my families. (Allison, 443-453)

So I find that connecting, whether it’s connecting with a good book, or connecting with some of the other women that come to my workout class, or connecting with colleagues, just I’ve come to recognize that it just makes me feel like a more balanced person and ultimately I think that makes me a better therapist, it makes me enjoy my job because I know that when I go home I’m going to focus on home life, and when I’m at work, I focus on work. There’s a crossover for sure, but I can better separate myself from my work life, which I couldn’t do before because self-care was really, self-care was all about being a better therapist, from a very almost academic standpoint of, “I need more knowledge, I need to read more, I need to know more about mental health,” whereas now self-care is more about being more relaxed, and feeling less stressed and feeling happy, like feeling like I can enjoy my workplace, so it’s different (Allison, 468-480)

An impact is it bleeds over into your home life for sure. I think, the stress and the tiredness and not having energy and not wanting to,
you know you feel like you’ve talked to people all day so you don’t want to talk to your spouse anymore or at length about any particular issues, like the need to, I feel more of a need to shut off and shut down when I’m home, so checking out, things like checking out and just being on my phone or watching TV or sleeping more, like if I haven’t given myself a good balance, then I’m less engaged in other activities outside of work. (Regina, 199-206)

I think it’s a fallacy to think that they don’t. I think they do impact each other, like I know, and that’s why I think self-care is so important because if I’m eating crappy or whatever, then I feel crappy, and yes that’s part of myself and that should be left separate from work, but then I don’t feel well and then I don’t do my best work. So I think those things really interlink with each other. (Regina, 313-318)

The support network, I make sure that, like I’m an extrovert by nature, so I make sure that I’m still in contact with friends and I make plans and I take the time to socialize and to get out of, like even a counselling mindset. (Owen, 22-25)

And I even asked my supervisor, “how do I say no?” [laughs] like really. And it came from such a genuine place, she’s like “[name] makes sense, just say I’d like to be a part of the project, maybe not right now.” And I really believe that they took it like he’s not being a resistance, he’s not being a jerk, for lack of a better term, but he’s just talking from a real place, and that helps, creating that boundary really helps. So boundaries for me is part of that self-care as well (Owen, 74-80)

Like I live in [city], and [city] is my, I have some family here of course, and I have a lot of friends here, but [city] though is really primarily my counselling home. And then when I go back to [other city] I catch up with other family and friends (Owen, 81-84)

So it’s kind of walking away from the work so that when I’m back I’m excited and I’m very happy to say that when I go to work in the morning, very rarely I do not want to go. Like I love going to work, so that I think is really, so that’s it. (Owen, 105-108)

Right now I mentioned to you that I looked at my email this morning, I don’t look at my emails at home. Like I don’t have an app on my phone for work emails, no I don’t. I really feel like I give a lot to my work and there’s that. I do sometimes do work out of office hours, but that’s more for prep, for like let’s say, like I’m a supervisor for peer counsellors, I’m one of the supervisors, so there’s like, let’s say a presentation, and for me by nature, I practice what I’m going to say, articulate my thoughts, and although it is work outside of work, maybe I go to a coffee shop, I make sure that it feels less work-y [laughs]. Yeah, feels less like work but for me
that’s also self-care because if I didn’t prep, it will cause a lot of distress (Owen, 241-251)

I don’t know in our field, it’s not like we bring client files home, so that’s been helpful too, like we can’t so it’s not like I do anything at home related to that. Yeah, I don’t know. It’s tough I just feel like I have a home life and a personal life and I try to attend to both, but that’s how much I could think of. (Owen, 269-273)

I do several different things that will help me with my self-care and that for me is to feel grounded, not like really worrying about work. (Rebecca, 4-6)

I wouldn’t say it’s trial and error for professional [self-care] because if I need to debrief, it’s more about that I need to release some stress talking to a supervisor or fellow co-worker about something, but it wouldn’t be anything like personal. (Rebecca, 77-80)

if I get a kid that’s like less than 5 years old, let’s just say 4 years, and is having, you know they have a very complex family situation and on top of that there’s mental health needs, and then on top of that there’s suicidal ideation. Of course I’m going to go home and think, or like maybe when I have the time to think, which is usually at night or when it’s quiet, there’s not a lot happening, you think about these things, like, “oh my God what’s happened to this kid, and they’re not being watched, or the parents aren’t being vigilant.” So I do try to set boundaries, and of course I do give my best in session in my recommendations and resources provided, however in those moments I would try to, when I try to when I’m thinking of these things, or just stuck in those thoughts, I would do something that I like. So usually I would watch a show, like something that’s very light, that doesn’t involve a lot of attention and nothing dramatic, like a comedy show or animation, like South Park, or whatever. And I feel like that takes me away from that, so I try not to let myself stay in that way of thinking about certain things. And also I’ll ensure to debrief, especially if I know right after the session if this is something I feel I could relate to or something that I feel like is going to keep me thinking, I always ensure to debrief with co-workers or with my supervisor, just to know that maybe what I gave is the right thing (Rebecca, 196-215)

Self-care is subjective

having worked somewhere previously where I carried a lot of my work home and I always made my work the priority, now that I’m in a new workplace where there really is that, there’s a really strong sense of you need to have balance and you need to create a life and a work style that fits for your life, that I’ve really tried to keep them separate. (Allison, 60-65)

I guess learning about it has also just been a bit of a process in terms of experiential learning, because I know now that self-care for me might look like going to bed earlier after I’ve had a 12-hour
shift, rather than staying up until my usual time knowing that I’ve worked that many extra hours and it’s going to be harder for me to recover the next day. Last night was a poor example [laughs] because I needed time with my husband, but sometimes on those nights when I roll in the door at 9 or 9:15 at night, we just go to bed right when I get in because I know that I need that now, whereas a few years ago I wouldn’t have looked at that as self-care, I would’ve looked at it as just I’m tired, but it’s now conscious that it makes me, like being better rested means that I’m a better parent the next day and I’m not a cranky partner and it means that I can be fully present for my clients (Allison, 178-190)

I think that, while there’s more that I could be doing in terms of self-care, that I do my best to be fully present and the odd time when I’ve had family stuff that unfortunately stirred up some emotions that I carried with me to work the next day, I made sure that I spent time speaking with my supervisor before I had to see a client, (Allison, 305-309)

mindfulness for example, when I used to use mindfulness, it was like I sit down, I read a book, and I follow the steps in the book and I try to engage in it in that way. And once I had learned about mindfulness I continued to apply that same practice. But now mindfulness might look like being mindful while I’m doing an activity that, something like washing dishes, and mindfulness can be used while I’m washing dishes (Allison, 488-493)

So being mindful of what water feels like on my hands when I’m washing the dishes, and how many times I might circle the scrub brush on a plate before I decide this is plate seems, this seems like the right number for me and now I can rinse it. So for me mindfulness is really about how I’ve taken some of those structured activities and I engage in them here and there, but in a way that just naturally falls into my day or falls into both my workplace and my home life. I don’t know if that really answers your question, but I definitely would say that I’m not engaging in as much self-care as I would like, but where I have modified self-care to make it work for me is a way in which it comes up in everyday activities and I try to be conscious about how it makes me feel and if it adds value or brings me a sense of happiness or joy, whereas before self-care was really just about professional development, and, “I need to get better at this because if I’m less stressed, I’ll be a better counsellor”. (Allison, 498-511)

I define self-care as the thing that I would do just for me that contributes to my overall well-being.(Regina, 16-17)

through my own experiences I’ve learned that you really need to take care of yourself because no one else is going to. (Regina, 72-74)
I think focusing on things that are important to me. If I’m not, I mean different people do different things (Regina, 320-321)

I’m planning to take regular intervals, right? So, it’s something, and I think it’s always trying out different things, for instance, like that. (Regina, 281-283)

For myself, overall I think one of my values is moving at the beat of your own drum and listening to what makes you happy and not necessarily having to, like sometimes I feel like there’s maybe societal expectations of what it is to be an adult or, exactly like an adult, and for me I feel like it’s more like, not really listening to that, and really listening to what makes me happy. (Owen, 11-16)

So wherever my stage of my life I try to look at that and what works for me, and that has been incredibly helpful. (Owen, 48-49)

I’m Catholic, I’m open-minded Catholic I always like to highlight that, but I do like to go to church again, and for me it’s provided just so much strength, I came from this Italian background of meatballs on Sunday and church and my grandmother’s house, and now the older I get, I’m reconnecting with that, and that’s been strong. (Owen, 100-105)

I’m a happy person by nature and I think the reason being is because I listen to what makes me happy and I live through my values and I think that’s where I’m coming from. (Owen 121-123)

And that’s where I think with a client, even as a counsellor, I think that’s why I chose this field, is because it’s not like if a client came to me and they said, “oh you know I need to be here,” and I’m like, “what do you want?” And I feel like in essence, that’s part of self-care. Listen to what you want. (Owen, 137-141)

[Self-care] means listening to your own needs before you can help someone else with theirs. (Owen, 425-426)

The more that I do things that are very [name] and they’ll always be [name]. Like always, I’m always going to go to the hipster coffee shop, I’m always going to want to know what’s cool in the music world. Like I don’t care how old I am, this is always going to be important to me, because it’s inspiring. The more I meet those needs, then after, and I’m an extrovert so I need to socialize with others, the more that my window of tolerance is higher and higher and I could take on, like a crisis client and not feel so depleted. (Owen, 452-459)

Yeah it’s almost like inherent, it’s almost ineffable. It’s just saying [pauses], that’s really hard to define. [pauses]. I don’t know, I guess there’s little things, they’re like the sum of it’s parts that makes me feel whole. They’re like listening to little interests of mine and attending to them that are so personal and then all these little things together are very me. (Owen, 464-469)

I would define it as a way to just take time for yourself, so whatever that looks like for anyone. For me, it’s more about just taking the
time for myself and not worrying about work or home stuff or errands or, it’s just a way to keep myself grounded and also get some sort of satisfaction from doing things that I like, which is what I told you about. (Rebecca, 21-25)

at least for me, working out for me is something I figured out is good for me when I’m feeling stressed because I just did it, because I needed that energy to do it. So maybe people, and like I said it’s trial and error, maybe people trying out different things that they like and using that as an outlet for them to release and to take care of themselves, I feel like that will help them understand and know the importance of it and, yeah because even now, like I think when we talk to people about self-care people think it’s more about going to the spa or hanging out with friends, I don’t know, anyways it’s different for everyone, I can’t really speak for everyone, but I think people really taking the time to think deep about what helps them feel good and whatever it is that will help them understand the importance of self-care. (Rebecca, 357-368)

It’s about me just taking, it’s like having time to pause and just stay in an activity that makes me feel, it’s my time, basically. My personal time and focusing on my health and my well-being and yeah. And being able also to share with others and help others because that’s what I do. So I think the more I’m able to take care of myself, the more I’m also able to give my best to other people and I think that’s what makes a difference in my work. (Rebecca, 377-383)

I feel like just knowing that it works for me and what works for me doesn’t necessarily work for everyone else and making them feel good, and the fact that it makes me feel good is how it’s personal for me. (Rebecca, 420-423)

**Theme 3: Pathways to Self-Care**

**Disengaging**

an expectation that we have in our workplace that we’re continuously reflecting on what we put out to our clients and how we’re perceived and where we can make improvements. So for me self-care, is also reflecting on this, after I’ve left work, but then being kind enough to myself that I can let it go. So it’s taking that self-reflection piece home with me but not letting it burden me if I feel like I’ve had a bad session or if there are things that I could’ve improved on, I try to acknowledge that but I make sure that I, once I’ve acknowledged it I leave it at the door and bring it back to work the next day, rather than letting it weigh on me through the evening. (Allison, 36-45)

sometimes that I also find that I just waste time instead of acknowledging that I need a break and doing something that would help me re-energize so I find myself scanning something
useless online, or [laughs] browsing amazon and making a useless purchase instead of engaging in an activity that would actually help me reset (Allison, 330-334)

so I know that sometimes I just need to come home and watch TV as a way of kind of separating myself from my work (Allison, 362-363)

Sometimes the pace of the environment in terms of seeing one client and maybe going over in my session and so a client comes in with maybe very high needs and maybe some, they’re in crisis or that type of thing, and then that one session bleeds into another session, then I don’t feel like I have a few minutes for myself to grab a drink of water, go to the washroom, focus on, “ok now I’m switching gears and I’m meeting with somebody else,” so things like that. (Regina, 131-137)

I think, the stress and the tiredness and not having energy and not wanting to, you know you feel like you’ve talked to people all day so you don’t want to talk to your spouse anymore or at length about any particular issues, like the need to, I feel more of a need to shut off and shut down when I’m home, so checking out, things like checking out and just being on my phone or watching TV or sleeping more, like if I haven’t given myself a good balance, then I’m less engaged in other activities outside of work. (Regina, 199-206)

I don’t really ruminate over clients. Like I don’t go home thinking about my clients that day, I’m just not built like that by nature. I’m very caring by nature, that’s not even a question, but I think, I don’t know, I was built in such a way where I don’t think about work when I’m home that’s related to clients (Owen, 255-259)

For me, it’s more about just taking the time for myself and not worrying about work or home stuff or errands or, it’s just a way to keep myself grounded and also get some sort of satisfaction from doing things that I like, which is what I told you about. (Rebecca, 22-25)

so for personal self-care, well for both yes, I do it to get that time for myself when I can and just take a moment to put myself in a bubble where I’m not thinking about the next thing on my list (Rebecca, 30-32)

for like working out its all about releasing tension and getting that one hour or two hours for myself and just relaxing. (Rebecca, 60-62)

So I do try to set boundaries, and of course I do give my best in session in my recommendations and resources provided, however in those moments I would try to, when I try to when I’m thinking of these things, or just stuck in those thoughts, I would do something that I like. So usually I would watch a show, like something that’s very light, that doesn’t involve a lot of attention
and nothing dramatic, like a comedy show or animation, like South Park, or whatever. And I feel like that takes me away from that, so I try not to let myself stay in that way of thinking about certain things. (Rebecca, 203-211)

**Being self-reflective/mindful**

I see myself doing a lot more self-reflection and I find that I do do that but it happens at work. I’m not sure, to me that’s part of my practice and it’s also part of, an expectation that we have in our workplace that we’re continuously reflecting on what we put out to our clients and how we’re perceived and where we can make improvements. (Allison, 34-39)

But now mindfulness might look like being mindful while I’m doing an activity that, something like washing dishes, and mindfulness can be used while I’m washing dishes, but before I attempted to be mindfulness always in a very professional sense, if you will, that I tried to somehow link it back to this is a skill that I need to achieve, this is something that I need to get good at, so that I can train my clients on how to use it, whereas now it might be something that I just, I do just for the sake of, just exploring what it’s like for me. So being mindful of what water feels like on my hands when I’m washing the dishes, and how many times I might circle the scrub brush on a plate before I decide this is plate seems, this seems like the right number for me and now I can rinse it. (Allison, 491-501)

So in my old workplace I was really invested in professional self-care and for me that looked a lot like continuously improving my skills, which I don’t necessarily see as self-care, but for me it was a lot of, “I need to be better informed, I need to learn about as much on a particular topic as I can, I need to do a lot of research, I need to request a lot of supervision,” there was a lot of self-reflection, and it came from a place of often feeling like I wasn’t doing a good enough job (Allison, 90-96)

I had to physically sit myself now and say okay now you’re going to do mindfulness, and now you’re going to journal. Whereas now I find this self-reflection and professional self-care comes out naturally in conversations and I find time for it throughout my day both at work and at home so it doesn’t seem as concrete as it did before (Allison, 150-154)

So I see the value in the things that I would like to build back in, I see the value in journaling and that self-reflection piece that I used to do at work, but I can’t actually see where I would fit journaling into my busy work day and it’s part of the reason why work has to get carried home (Allison, 235-239)

So I do things like yoga, meditation, I make sure to take some regular time off of work when I need to, I make sure that I take sick days when I’m sick or just not kind of feeling in the game then I take a little bit of time off. (Regina, 7-10)
I think because there’s a lot of reflection in my own practice where I’m thinking about transference and countertransference and I’m just really aware of my own stuff and if I’m bringing that to the table then I know, “hmm okay, I need to scale back, I need to watch myself,” for instance if I’m maybe giving my opinion too much or if I’m doing all of the talking and I’m not asking as many questions as I should, like those are indicators for me that I am not as grounded as I need to be and I think it’s just a lot of self-reflection around that. Like you need to be very present and very grounded, I find, to do this specific job as a counsellor or a therapist. (Regina, 91-99)

I meditate, every Wednesday I go to meditation group, I’m Catholic, I’m open-minded Catholic I always like to highlight that, but I do like to go to church again, and for me it’s provided just so much strength (Owen, 99-102)

sometimes I can overthink about something, and I really use and I try to use that self-compassion that Kristin Neff, she talks about self-compassion, I don’t know if you’re familiar with that, so it’s really treating yourself as you would a friend. And sometimes I even write that down. So if I’m ruminating, “ugh why did I say this at the office?” and it just spirals, then after that’s been helpful to okay to say, “what would I say if a friend of mine brought this up?” And that treating myself with that kindness. (Owen, 263-269)

I think the one thing that I would even highlight for myself is knowing when I have too much on my plate and listening to that and then saying no. I think once that is done, I am very strong with meeting my own needs. So I think that’s essential. (Owen, 309-312)

And then throughout the day if I feel low energy, I know most of the time, even right now, I’m high energy, I know that’s who I am, but I’m not always like this. So times of day when I’m low energy, I close the door and I take time to breathe and really meditate and mindfulness in session. I write down those, if I feel like there’s an imposter syndrome creeping in, I use that self-compassion on myself. (Owen, 401-406)

Yes I do, so for personal self-care, well for both yes, I do it to get that time for myself when I can and just take a moment to put myself in a bubble where I’m not thinking about the next thing on my list (Rebecca, 30-32)

So because we’re constantly talking to people and doing a lot of counselling services with people from different backgrounds and who have encountered several barriers, and I mean for some of them you’re able to relate and being in that position sometimes forces you to take a step back, not in the moment, but after at the end of your day, and just reflect and sit and think. You know, like
where I’m at now, how I’ve gotten there, and I feel like sometimes you can get stuck in your thoughts, like I mentioned earlier, and it could end up taking a toll on you, which ends up affecting your work, because you could be thinking too much about something. (Rebecca, 129-138)

I’m going to go home and think, or like maybe when I have the time to think, which is usually at night or when it’s quiet, there’s not a lot happening, you think about these things, like, “oh my God what’s happened to this kid, and they’re not being watched, or the parents aren’t being vigilant.” So I do try to set boundaries, and of course I do give my best in session in my recommendations and resources provided, however in those moments I would try to, when I try to when I’m thinking of these things, or just stuck in those thoughts, I would do something that I like. (Rebecca, 199-207)

Forcing myself to go is something that I’ve actually done and I feel like it works, but it’s also me knowing my limits. It’s me knowing that am I tired, and I kind of think through different things. (Rebecca, 356-357)

I think people really taking the time to think deep about what helps them feel good and whatever it is that will help them understand the importance of self-care (Rebecca, 366-368)

It means me taking the time off for myself to do things that I enjoy and things that make me feel good. Things that make me feel like I’m able to notice the difference when I’m stressed or maybe feeling burnt out or maybe feeling like I don’t have anymore to give (Rebecca, 374-377)

**Work it into workplace culture**

I see myself doing a lot more self-reflection and I find that I do do that but it happens at work. I’m not sure, to me that’s part of my practice and it’s also part of, an expectation that we have in our workplace that we’re continuously reflecting on what we put out to our clients and how we’re perceived and where we can make improvements. (Allison, 34-39)

now that I’m in a new workplace where there really is that, there’s a really strong sense of you need to have balance and you need to create a life and a work style that fits for your life, that I’ve really tried to keep them separate (Allison, 62-65)

Whereas in my new workplace, I still believe in things like getting my own therapy if I reach a point where I’m dealing with that same level, but I feel much more at ease so I don’t find myself stressing about some of those strategies and tools that I had used at my previous workplace in terms of professional development because I feel like where I’m working now, a lot of that self-care is blended right into the culture. There’s an expectation where I work now that if you’re sick, that you stay home. And if you’re family is sick, then you should prioritize
your family. And these were some things that in my last workplace, they weren’t as encouraged, so as a result I might put myself through 3 days of working with clients but feeling completely under the weather and not very present. So self-care is built into my workplace where I am right now. (Allison, 127-138)

We have a health and wellness, like a health and psychological wellness committee and I know that part of what they do is put together activities or opportunities for connection to encourage health and psychological self-care, and I was really impressed that we had this committee when I first started working there, but I think I anticipated there would be, I don’t know, not that I expect other people to have organized meetings as a way of encouraging self-care, like it’s not other people’s responsibility to try to motivate other people to engage in self-care, but I like the idea that, or I was maybe under the impression that it was something that would happen more often to encourage people to take those breaks, you know in their week or perhaps bi-weekly to come out and engage in different types of activities that would promote self-care because I think for me, sometimes the barrier is thinking outside of my own box, is redefining self-care, so I know that sometimes I just need to come home and watch TV as a way of kind of separating myself from my work. But self-care can look like many things and so I think when I started where I was, I had kind of hoped that I would hear more or there would be more opportunities in our workplace to engage in self-care, kind of as a collective community because I was hoping that I would find some new inspiration for ways that I can build that in, and unfortunately haven’t really found that our self-care, or health and wellness committee has really done as much as I believed that they might, just based on what I had heard that they do do (Allison, 349-370)

Well in the present I find part of the problem, while there’s lots of elements of self-care that happen in a less, it’s doesn’t seem very conscious because it’s just, it’s a natural progression that’s occurred throughout my day (Allison, 249-252)

I think leaders who demonstrate the importance of self-care like by practicing it themselves. So leaders who are not afraid to say, “you know what I’m sick I’m not coming in today,” or agencies that promotes taking, for instance, mental health days, having mental health days, calling it a mental health day and not being shy about that. A real promotion of that. The encouragement of saying how you’re feeling at work and not about it being about numbers and how many clients you’ve seen, but more about the quality of work that is done (Regina, 212-219)

I think the other piece is in the promotion of it internally and then the, the promotion of it by having a certain amount of days where
you can take off for mental health, or in the encouragement of using sick days for mental health as well, and then I think reinforcing that, so not asking questions about somebody taking a sick day, and saying, “good for you for taking time for yourself,” to really reinforcing that as opposed to focusing on the negative impact for the business operation (Regina, 230-236)

In the workplace, I do really like my workplace and I’m really close with my colleagues and it’s genuine rapport, these are people also that I revere, that I learn from, and at the workplace we have lunch from noon to 1 and it’s like, I’m Italian, so it just feels like everyday from noon to 1 I’m sitting down in an Italian feast. We eat lunch together, we laugh, we learn about each other, it’s like very lighthearted, and after that 1 o’clock I’m back with my clients and I’m ready to go. That has been incredibly helpful for self-care to have that social interaction from noon to 1 that it’s even sacred in my books. (Owen, 49-57)

Well at work, we have goals, which I’m sure the majority of workplaces or agencies implement, and one of my goals is to maintain self-care. So that helps me take that on. (Owen, 157-160)

And even just the culture in the field, like I can’t picture engineers, like I could be wrong, but I can’t picture engineers having a meeting and talking about self-care and how they’re going to talk about self-care with their clients. Like in our field it’s so spoken about, it’s become part of the zeitgeist of our field I think, of our time, and I think it helps us model that to clients, and I think that’s what helps, that it’s just becoming such a big word in our field and I think that’s really helped me to take it seriously. (Owen, 162-169)

And I’m an extrovert and working with a team that I really can say that I get along with everyone is something so important to me, and exactly that workplace culture has been a blessing. Of course it helps with self-care. And even when I feel overwhelmed, I know I can turn to my colleagues and I’m not talking bad about my workplace, it’s just I’m able to vent and air it out, and that’s like a muscle in of itself. So I believe in talk therapy in every which way, even if you’re speaking to a colleague. So I feel like that workplace culture is really helpful and I know people who work in heavier workplaces and it pains them, and that sucks, it really does because, it just sucks because what we teach clients is really like, we want to [inaudible] and feel at peace and for them to be themselves and how can we when we feel like we have to go to a place that doesn’t provide that, so I’m happy to say that yeah, for me it’s helped with the self-care. (Owen, 329-341)

And in terms of workplace [pauses], I don’t know there’s a lot, even at the workplace this week, they have a lunch for the staff or
we have a breakfast for the end of the year, and just building that sense of community strengthens, it’s like a team builder and that in of itself is part of that self-care. (Owen, 350-354)

Another thing professional self-care, just meeting with your fellow colleagues and discussing strategies and sharing learned experiences and learning (Rebecca, 42-44)

we have weekly lunches with our team that we do once a week. So like it’s not that, there’s always a reason to, so that is like catching up and maybe sharing our experiences with different clients, but not in a setting where we have to be taking notes or anything (Rebecca, 73-76)

And then coming to the weekly lunches that we do, and when I say weekly lunches, it’s not with leadership. It’s not like with my supervisor, it’s just the fellow therapists. So when we meet, we’re discussing, and this happens at work, so we just discuss, some personal stuff but also work-related stuff, you know like how we feel we’re doing, what we think of the supervisors, how we’re managing our cases (Rebecca, 97-102)

I think [the workplace culture] helps promote [self-care] because then we have strategic meetings where we discuss a whole range of things and we have a health and well-being team, we have a culture and diversity team, so people can choose where they want to go and I think this is the one [inaudible] where people are really able to express how they’re feeling and for some people maybe lifting that burden off their chest is self-care, for me I feel like seeing different groups develop at work where I feel comfortable expressing my needs and concerns is something that improves my well-being at work and doesn’t have me stressed about different things (Rebecca, 277-285)

I just feel like self-care is something that everyone should incorporate. And I feel like education is something that will contribute to enabling people to learn more about it because maybe some people just don’t even know what self-care is and they don’t understand the importance and there’s some people that are stuck on the mindset that they don’t have time for it or they’re always too busy to incorporate it. And these are the same people that sometimes probably complain that they don’t have time for themselves. So I think that the more research that is out there and I guess yours is focused on therapists and counsellors, but for people who are doing research in other areas I think the more research that is out there, people will be able to learn that people actually need this. (Rebecca, 345-355)

Schedule time for self-care

in my last workplace I recognized that I had anxiety, so it’s like I had to physically sit myself now and say okay now you’re going to do mindfulness, and now you’re going to journal. Whereas now I find this self-reflection and professional self-care comes out
naturally in conversations and I find time for it throughout my day both at work and at home so it doesn’t seem as concrete as it did before. I think, now that I’m talking and saying this all out loud, I think that’s why it’s not as clear in my mind, because it’s become more of a natural process, so when I do engage in particular activities it’s because I want to, not because I feel like I have to do it so that I can reduce my anxiety or so that I can be a better therapist. I recognize throughout the day that, the things that I’m doing at work are helping me be a better therapist so I don’t necessarily build these set times into my day. (Allison, 149-160)

So while I have other time for organic self-care, some of those structured activities that I had done before, that I had built into my routine, I don’t find that I have the time for it because it would impact or alter my time with my family, which I’m not really willing to do. (Allison, 241-244)

Well if I’m being frank, reduced paperwork would be wonderful and that’s with my job specifically, because I didn’t have this level of paperwork where I worked before, which would give me more time for professional self-care to be built into my day. (Allison, 342-345)

So for me mindfulness is really about how I’ve taken some of those structured activities and I engage in them here and there, but in a way that just naturally falls into my day or falls into both my workplace and my home life. I don’t know if that really answers your question, but I definitely would say that I’m not engaging in as much self-care as I would like, but where I have modified self-care to make it work for me is a way in which it comes up in everyday activities and I try to be conscious about how it makes me feel and if it adds value or brings me a sense of happiness or joy. (Allison, 502-509)

Things like not making room in my schedule to take regular time off, that has been a factor [has been a barrier to self-care]. (Regina, 128-129)

I think mostly what helps me is, yes scheduling it into my day. Any by doing that it’s almost like either making a commitment and signing up for a series of sessions of yoga, or I have a personal trainer that I work out with, so having those appointments scheduled I’m much more consistent in terms of taking care of myself when there’s an obligation to someone else and when I’ve paid a fee, for instance, and we’ve set up a time, as opposed to, “okay after work today I’m just going to go to the gym,” and there’s no accountability there. (Regina, 261-268)

I think it’s more a concerted effort and then the practicing of the routine of that, I think is helpful for me. I find, for instance, even planning a vacation, like I took some time and I planned all my vacation for the rest of the year, I planned it all at once, and that’s
not something that’s required. I can take it as I want, but knowing that every 3 months, for instance, I take a week off, is something new I’m trying this year. (Regina, 275-281)

I think focusing on things that are important to me. If I’m not, I mean different people do different things, for instance some people might not see it as important to go to the gym, have a trainer, that type of thing, for me I know that’s what I need. I don’t do as well with a willy nilly schedule, like I need to have something kind of structured. That’s how I think I personalize it, is by purposefully scheduling things, such as yoga, such as going to the gym, that kind of thing. (Regina, 320-326)

So Wednesday evenings I do go to meditation, as I mentioned, and I do go to Mass on Sundays, so having that schedule keeps that in check. Then I try to go to gym two times a week minimum, so knowing that that is scheduled in helps. (Owen, 398-401)

the key to happiness is always to have something to look forward to, and I really try to do that. Like I always try to have, like if I’m going to a comedy show in a couple of months, or I think I’m going to Vancouver in a couple weeks, or if I’m going to a rock concert or seeing this band that I like in a couple of weeks. Like always having that thing to look forward to I think really helps with that happiness and it does create that sustenance. (Owen, 409-415)

I also try to incorporate it into my routine so yeah. It’s kind of like I have to do it. (Rebecca, 67-68)

Whereas things like journaling, meditation, going to the gym – those ones I feel like have to be scheduled. Now the meditation one depends because I think sometimes I’ll do it before bed and it’s not like I schedule it but it’ll just happen. And then sometimes I’ll be like, “ok I really have to do it so I’m going to try to do it for this time of the day.” (Rebecca, 300-304)

So I find that because a lot of my mental and emotional energy is given away during the week, I feel like making the time to do it, or to do something, one of those practices, at least once a week is very important to me and me putting aside my laziness and putting in more effort into doing it is really important for me (Rebecca, 428-432)

And also being able to say no, is one of my biggest things, knowing that let’s say on weekends, if I put it in my schedule that I have to do something for a decent amount of hours, and then something else coming up and me being able to set my boundaries and knowing that this is me time and I don’t always have to say yes to everything. (Rebecca, 436-440)

Supervision

I was seeking regular supervision because I was anticipating, or I had a lot of self-doubt about my abilities, so I needed, not necessarily reassurance, but I needed a lot of direction and
guidance in terms of where I moved forward due to having a lot of thoughts around not being good enough or not doing things well enough for my clients. (Allison, 104-108)

If I have stresses and sometimes even stresses that aren’t related to work that I bring into the office, my supervisor has sat down with me and let me be sad in front of her and validated my feelings, which has helped me process them and then also let them go so that they don’t get carried into session. I can’t say that that’s happened more than once, but she’s really wonderful and very empathic, very validating, so we talk about different ways that we can be mindful in the moment and mindful when I go home (Allison, 138-145)

And then moving forward into my internship and into my workplace, I found that it was also discussed often times in supervision, just in terms of the, sometimes it might even be just a simple conversation in terms of, well what kinds of things are you doing for yourself when you feel this way, and how do you separate yourself from your work when you’re at home. So those types of questions also helped me reflect on what self-care could look like for me (Allison, 172-178)

I also felt that it was something that I had to do because, the difference between supervisors is that sometimes it was reinforced that I needed more improvement and I needed to work harder or that I was lacking in understanding, so sometimes self-care seemed more of a chore that I didn’t necessarily want to engage in, but I felt there was an obligation because I was lacking skills or lacking knowledge. (Allison, 285-290)

I think that, while there’s more that I could be doing in terms of self-care, that I do my best to be fully present and the odd time when I’ve had family stuff that unfortunately stirred up some emotions that I carried with me to work the next day, I made sure that I spent time speaking with my supervisor before I had to see a client, like I made sure to engage in, supervision for me is self-care because it helps me check in and verbalize where I’m at and have insight from another professional who can reflect some of it back to me and then also ask me questions or offer new perspectives that perhaps I hadn’t considered (Allison, 305-313)

Well the supervision piece is one of the ways that I engage in regular professional self-care because I always find supervision to be validating and I gain a lot through the insight that’s offered from my supervisor or my colleagues, when we engage in peer supervision, I find that having someone on the outside look in often helps me self-reflect and I really do take what I gain from supervision and I apply it to my practice moving forward, so if I find that I’m being too hard on myself and I bring this to supervision that my supervisor or my colleagues’ perspectives is,
I hear their words later when I go into another session, or I’m reflecting on a session later down the road, I’m really cognizant of that prior supervision session and I take those messages and I apply them so that I can be more gentle to myself and more accepting of myself as a therapist. So I’m not critical the way I used to be, owing to how I engage with my supervision, which for me is a big part of my self-care. (Allison, 430-443)

I think supervision is extremely important if to help check you in terms of how you’re doing, do you need a break, do you have enough time in between sessions, how are you doing with some of the clients where you feel like you’re not being overly helpful or effective as a practitioner and where you’re feeling like you need a bit of help, I think that’s something that makes self-care important too, right, the more complicated some of the situations are that you’re dealing with with clients and I think having a feeling of being successful in your practice as a clinician is important, I think, an important piece of self-care. (Regina, 142-150)

Yeah, checking in as a person in terms of how you’re doing, I guess checking around how you feel like you’re doing in your practice, calling me on particular things, so if I’m struggling with a particular client or maybe I’m focusing too much some of my own stuff or putting if I’m too closely related to the situation that a client is having, having a supervisor call you on that kind of stuff, I think that it all helps with being in check with taking care of yourself. (Regina, 153-159)

I definitely think the modelling piece is really huge, so even modelling in supervision, the practice of self-care and the practice of sometimes we make mistakes and we’re not always 100% on our game and the modelling that, “Okay that’s when I need to take a break and that’s maybe when you need to take a break,” and there not being a performance piece I think attached to that. (Regina, 219-224)

Supervision is so helpful for me in this field because we work in such a field that’s so anonymous, so having someone to talk to about these cases, which I can’t talk to anybody, it helps really see the forest from the trees and its helps me to vent. It’s just a safe space and that’s created such a muscle for me. (Owen, 185-189)

And also I know my manager last year was like, you know she brought it up, “[name] are you taking care of yourself too?” So she checked in with that, so having a manager that also values that I think it’s like that top-down I think is important because it shows that she values it, so it kind of validates that (Owen, 346-350)
Well supervisors I think in counselling is so we don’t feel like we’re alone with our sessions, so we deal with an array of concerns and issues in our field, and as much as I think I would like to think, “oh I can take on everything and I have all the answers,” no that’s humanly impossible and humbly I don’t. But if I feel stuck, I also really like providing, I get energized by providing a client with my best work and speaking with a supervisor who’s more experienced, who could lead me in a certain way, who could highlight certain interventions that I wouldn’t think of and then going back to that session and then after thinking, wow this session was powerful, I get energy from that. So that’s even a form of self-care. And also I have a supervisor, who I mentioned, she used to be my supervisor when I was an intern, and I pay out of pocket, and it’s a place where I can vent, I can really be my self, she validates my work, that’s huge. A supervisor who can validate and can say, “you know what, you’re doing a good job. Clients are lucky to have you.” (Owen, 363-376)

And for me, when I was taking on too much I spoke with that supervisor it gave me the space to share that and for her to hear that, so I didn’t feel like I was in a corner with these feelings, and then speaking with my manager after and her validating that was like, I can’t even tell you what a good feeling, it was like the weight, it was like I was holding a bag of rocks and putting it down. It was so essential, so supervision to get that, like it’s almost like my professional therapy and to explore with clients to help them, how it could best serve them, which that in of itself is energizing and helps with my confidence and helps with my professional happiness and integrity. (Owen, 381-390)

Whereas with professional self-care, it’s more about yes taking time out of your, so like not being at your desk, checking in with your supervisor, doing a lot of consultation and debriefing just to make you feel good and make sure that you’re doing the right thing and not just completely getting burnt out without checking in. (Rebecca, 35-40)

So I know for professional self-care I had mentioned that I will debrief with my supervisor or with a co-worker sometimes. So that’s, I’m having a reason to do it because let’s say I met with clients who I feel like are constantly, let’s say I feel stuck in helping them with the treatment or whatever, then I’d be able to go onto the next steps, which is check in or debrief with a co-worker or whoever. (Rebecca, 91-97)

So I would say that it plays a huge role because debriefing is, or supervision, whatever it is, it’s the point that helps you determine whether what you’re doing is right or wrong or that keeps your confidence level in check, so if I feel like I’ve had a situation or a
family that is not, that is tough for me to do because I don’t know
the answers to everything and sometimes I’ll go in having the
little knowledge I know about certain things and do my best and
then there’s sometimes when I really don’t know what just
happened, I don’t think I helped the family, or the child, or
whatever. So I feel like supervision is something that keeps me in
check and it provides me with that constructive criticism because
obviously no one wants to hear all the time that they’re doing
good, they want some feedback as well, and some criticism. So
for me, it helps me work on my strengths and my weaknesses and
it helps me know that even if I feel like I didn’t do good or I
didn’t do as well as I wished to do with certain families or clients,
or just in work, be treatment plans or whatever, then I know I can
work on it for the next time. And I feel like that’s what the
supervisor does, she helps you, she would help me identify what
needs work and what I’m doing good in, which helps me moving
forward. (Rebecca, 225-242)

Connect with others

which is still self-care in a lot of ways because I require the
physio, but it’s about having some balance, so for me it’s meant
trying to get back to reading for leisure/pleasure vs. reading
strictly for work, making sure that my husband and I have a few
nights a week where we hang out and there’s no expectations of
having to accomplish anything and [inaudible] after the kids have
gone to bed, trying to maintain a social life, which more recently
has been difficult, so trying to get out every once in a while with
friends, and making the most out of the time with my kids
(Allison, 23-31)

When I’m taking to parents who talk about the challenges of
balancing work life with raising a busy set of kids, so I find that
it’s also helped me be more empathic towards my own clients in
terms of how I understand their struggles and the challenges that
they face in striking that balance. (Allison, 453-457)

I think that when I do consciously find the time to engage in self-
care, whether that looks like attending my workout class or taking
those breaks in my day, or connecting with colleagues and just
sharing our current experiences with our work load or experiences
with our clients, I think a big part of it is that all of those things
help me feel more connected to not only myself, but to my
professional community. So, going to a workout class doesn’t
necessarily help me feel like more of a professional, but I do
recognize that in doing those things that I am strengthening
myself as a therapist because I’m taking the time for me, which is
what I encourage my clients to do. When I connect with my
colleagues, there’s a greater sense of “I’m not alone with what I
might be struggling with,” which also helps to reduce any stresses
that I have. So I find that connecting, whether it’s connecting with
a good book, or connecting with some of the other women that come to my workout class, or connecting with colleagues, just I’ve come to recognize that it just makes me feel like a more balanced person and ultimately I think that makes me a better therapist, it makes me enjoy my job because I know that when I go home I’m going to focus on home life, and when I’m at work, I focus on work (Allison, 457-474)

So sometimes I find that I do it all together and I see it as a form of professional self-care because ultimately if I feel rested and I feel at ease and I feel like I’ve created connections in my life with my family, that I go back to work the next day feeling fulfilled and ready to start my day fresh. Whereas if I feel like I’ve missed a lot of family time and I feel like I’m falling behind on my, not my responsibilities but if I feel like I haven’t had enough time to connect with my kids or with my partner then it unfortunately does sometimes carry forward into work (Allison, 65-72)

I guess definitely having a balance and spending some time with, outside of work doing other activities, spending time with friends and family, and other hobbies that I might enjoy, like reading or that type of thing. (Regina, 11-13)

I would say certainly some friends, some other colleagues in the field, have influenced the importance, like that message, some of my peers have influenced it and reinforced the message of self-care. (Regina, 78-80)

I’m much more consistent in terms of taking care of myself when there’s an obligation to someone else and when I’ve paid a fee, for instance, and we’ve set up a time, as opposed to, “okay after work today I’m just going to go to the gym,” and there’s no accountability there (Regina, 264-268)

The support network, I make sure that, like I’m an extrovert by nature, so I make sure that I’m still in contact with friends and I make plans and I take the time to socialize and to get out of, like even a counselling mindset. Being a part of the CCPA as well helps me to be connected because they offer workshops and they offer events, so that helps me to connect to the counselling community here in [city], and that’s provided such support as well, so I don’t feel like I’m only, like I’m not only communicating with people in my workplace, it’s also connecting me with others in the [city] community. (Owen, 22-30)

In the workplace, I do really like my workplace and I’m really close with my colleagues and it’s genuine rapport, these are people also that I revere, that I learn from, and at the workplace we have lunch from noon to 1 and it’s like, I’m Italian, so it just feels like everyday from noon to 1 I’m sitting down in an Italian feast. We eat lunch together, we laugh, we learn about each other, it’s like very lighthearted, and after that 1 o’clock I’m back with
my clients and I’m ready to go. That has been incredibly helpful for self-care to have that social interaction from noon to 1 that it’s even sacred in my books. (Owen, 49-57)

And I’m really connecting with others, it’s innate. We’re beings and we need to connect to others, that’s our nature. And I’m an extrovert and working with a team that I really can say that I get along with everyone is something so important to me, and exactly that workplace culture has been a blessing. Of course it helps with self-care. And even when I feel overwhelmed, I know I can turn to my colleagues and I’m not talking bad about my workplace, it’s just I’m able to vent and air it out, and that’s like a muscle in of itself. (Owen, 327-334)

[Balance is] like making sure that I call my parents and I tell them I love them. It’s making sure that, like yesterday I met up with some friends and we watched the Brene Brown special. If someone invites me to a birthday, I almost always go, I know how important that is to maintain that. (Owen, 430-433)

Another thing professional self-care, just meeting with your fellow colleagues and discussing strategies and sharing learned experiences and learning and yeah. (Rebecca, 42-44)

Like it could be about clients that we share, or clients that we’ve seen during walk-in and how do we feel because sometimes when clients come into walk-in I’m not always the one who’s seeing them, someone else is seeing them so we just share, and then I would say to get to that self-care practices that we do here professionally, what I would say I get out of it is a little bit of self confidence knowing that it’s not just you who’s probably stuck because sometimes we do get stuck in our own thoughts and think that, “oh I’m not doing too well,” or whatever. So just seeing that other people are going through it leaves you feeling good and that you’ve learned something and that it’s not just you. (Rebecca, 111-120)

having a companion do certain things with me [makes self-care easier]. So sometimes I’ll get friends to bake with me or workout together (Rebecca, 264-265)

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I was seeking regular supervision because I was anticipating, or I had a lot of self-doubt about my abilities, so I needed, not necessarily reassurance, but I needed a lot of direction and guidance in terms of where I moved forward due to having a lot of thoughts around not being good enough or not doing things well enough for my clients. And I also found that as a result of the stress that I endured in my last workplace that I also found myself doing things like attempting to incorporate yoga or to find
quiet time in my day where the purpose was for nothing other than to just sit peacefully and be okay with my thoughts and some of my intense emotions, so it was more mindfulness practice and things like that, but it was really all about focusing around my thoughts and my worries and my self-doubts as a new therapist because in my last workplace I had moved from being an intern and then I was hired and while I knew what my expectations were going from student and no longer having the title of “student” created a lot of self-doubts that I couldn’t kind of hide behind, “I’m a complete novice because I’m a student,” into “now I’m a professional with a title,” so it just added a lot of stress. (Allison, 104-120)

It felt forced before and it wasn’t always something that I enjoyed participating in and I think it’s because I dealt with a lot of self-doubt and stress about my abilities as a counsellor, so I engaged in it as a way, in theory, to help me feel better about my doubts, but it was questionable, I guess, as to whether or not it actually helped to provide me any relief, and I also felt that it was something that I had to do because, the difference between supervisors is that sometimes it was reinforced that I needed more improvement and I needed to work harder or that I was lacking in understanding, so sometimes self-care seemed more of a chore that I didn’t necessarily want to engage in, but I felt there was an obligation because I was lacking skills or lacking knowledge. (Allison, 280-290)

I really do take what I gain from supervision and I apply it to my practice moving forward, so if I find that I’m being too hard on myself and I bring this to supervision that my supervisor or my colleagues’ perspectives is, I hear their words later when I go into another session, or I’m reflecting on a session later down the road, I’m really cognizant of that prior supervision session and I take those messages and I apply them so that I can be more gentle to myself and more accepting of myself as a therapist. So I’m not critical the way I used to be, owing to how I engage with my supervision, which for me is a big part of my self-care (Allison, 434-443)

I try to be conscious about how it makes me feel and if it adds value or brings me a sense of happiness or joy, whereas before self-care was really just about professional development, and, “I need to get better at this because if I’m less stressed, I’ll be a better counsellor”. (Allison, 508-511)

So in my old workplace I was really invested in professional self-care and for me that looked a lot like continuously improving my skills, which I don’t necessarily see as self-care, but for me it was a lot of, “I need to be better informed, I need to learn about as much on a particular topic as I can, I need to do a lot of
research, I need to request a lot of supervision,” there was a lot of self-reflection, and it came from a place of often feeling like I wasn’t doing a good enough job. So I devoted a lot of extra hours outside of work. I had a lot of time at work to get some of this stuff done, but I also found myself carrying a lot of my workload home despite having the time at work to do it and my focus was continuously on being the best therapist that I could be, which meant sometimes putting hours into preparing for particular sessions to kind of ensure that I had prepared for all possibilities, which is ridiculous. (Allison, 90-102)

There’s a crossover for sure, but I can better separate myself from my work life, which I couldn’t do before because self-care was really, self-care was all about being a better therapist, from a very almost academic standpoint of, “I need more knowledge, I need to read more, I need to know more about mental health,” whereas now self-care is more about being more relaxed, and feeling less stressed and feeling happy, like feeling like I can enjoy my workplace, so it’s different. (Allison, 474-480)

I think having a feeling of being successful in your practice as a clinician is important, I think, an important piece of self-care. (Regina, 148-150)

Well I think that just generally I feel more confident about my practice when that happens. (Regina, 161-162)

That’s where, like I said, I see kind of an apathy towards some clients, for instance, like that’s where I see the, “ugh I don’t really want to see that client because I really, I have a hard time with them or our personalities don’t really jive,” or that’s where I see those things as being a bit more distinct, whereas if I’m caring for myself a little bit more, and I’m in a better, well-rested, well-grounded space, those things don’t impact me as much. (Regina, 189-194)

I think I feel happier, I feel more content, I feel balanced, I feel more prepared to take on the day, I feel more confident about the quality of work that I’m doing [when I engage in self-care]. (Regina, 299-301)

And even looking to what I wear to work, if I really like what I’m wearing, I feel like it gives me some confidence. And I listen to those little things that are sometimes not taught. (Owen, 63-65)

A supervisor who can validate and can say, “you know what, you’re doing a good job. Clients are lucky to have you.” To hear that every once in a while, it’s not, hmm what am I trying to say, like egotistical. Like I think it’s healthy where there could be an imposter syndrome that creeps up every once in a while, that can kind of lull it a bit, turn the volume down on that and give us that
confidence. And that confidence is part of self-care too. (Owen, 375-381)

It was so essential, so supervision to get that, like it’s almost like my professional therapy and to explore with clients to help them, how it could best serve them, which that in of itself is energizing and helps with my confidence and helps with my professional happiness and integrity. (Owen, 386-390)

So I know for professional self-care I had mentioned that I will debrief with my supervisor or with a co-worker sometimes. So that’s, I’m having a reason to do it because let’s say I met with clients who I feel like are constantly, let’s say I feel stuck in helping them with the treatment or whatever, then I’d be able to go onto the next steps, which is check in or debrief with a co-worker or whoever. (Rebecca, 91-97)

Like it could be about clients that we share, or clients that we’ve seen during walk-in and how do we feel because sometimes when clients come into walk-in I’m not always the one who’s seeing them, someone else is seeing them so we just share, and then I would say to get to that self-care practices that we do here professionally, what I would say I get out of it is a little bit of self-confidence knowing that it’s not just you who’s probably stuck because sometimes we do get stuck in our own thoughts and think that, “oh I’m not doing too well,” or whatever. So just seeing that other people are going through it leaves you feeling good and that you’ve learned something and that it’s not just you. So yeah it helps you at work in that you’re not just feeling stuck and burnt out and tired, but also learning that other people are going through it and what they’re doing to cope with it and yeah. (Rebecca, 111-123)

So I would say that it plays a huge role because debriefing is, or supervision, whatever it is, it's the point that helps you determine whether what you’re doing is right or wrong or that keeps your confidence level in check, so if I feel like I’ve had a situation or a family that is not, that is tough for me to do because I don’t know the answers to everything and sometimes I’ll go in having the little knowledge I know about certain things and do my best and then there’s sometimes when I really don’t know what just happened, I don’t think I helped the family, or the child, or whatever. So I feel like supervision is something that keeps me in check (Rebecca, 225-233)

**Less countertransference**

so striking that balance, which for me is a big part of my self-care, has also helped me be a better therapist because I used my own experience in creating that balance and sometimes that’s an important piece of self-disclosure that I can share with my families. When I’m taking to parents who talk about the challenges of balancing work life with raising a busy set of kids,
so I find that it’s also helped me be more empathic towards my own clients in terms of how I understand their struggles and the challenges that they face in striking that balance. (Allison, 449-457)

. If I have stresses and sometimes even stresses that aren’t related to work that I bring into the office, my supervisor has sat down with me and let me be sad in front of her and validated my feelings, which has helped me process them and then also let them go so that they don’t get carried into session. (Allison, 138-142)

I think that, while there’s more that I could be doing in terms of self-care, that I do my best to be fully present and the odd time when I’ve had family stuff that unfortunately stirred up some emotions that I carried with me to work the next day, I made sure that I spent time speaking with my supervisor before I had to see a client (Allison, 305-309)

I think because there’s a lot of reflection in my own practice where I’m thinking about transference and countertransference and I’m just really aware of my own stuff and if I’m bringing that to the table then I know, “hmm okay, I need to scale back, I need to watch myself,” (Regina, 91-94)

So because we’re constantly talking to people and doing a lot of counselling services with people from different backgrounds and who have encountered several barriers, and I mean for some of them you’re able to relate and being in that position sometimes forces you to take a step back, not in the moment, but after at the end of your day, and just reflect and sit and think. You know, like where I’m at now, how I’ve gotten there, and I feel like sometimes you can get stuck in your thoughts, like I mentioned earlier, and it could end up taking a toll on you, which ends up affecting your work, because you could be thinking too much about something. (Rebecca, 129-138)

I feel like there would be a lot of countertransference [if I didn’t engage in self-care]. [inaudible]. I feel like it would just be a lot more, and I know in our profession we’re meant to do a lot of separation of affect, but I feel like there would be a lot of countertransference. So I would be, I think I would be speaking more with my emotions and I would be highly opinionated and I wouldn’t be able to be transparent in my thinking. (Rebecca, 163-168)

And also I’ll ensure to debrief, especially if I know right after the session if this is something I feel I could relate to or something that I feel like is going to keep me thinking, I always ensure to debrief with co-workers or with my supervisor, just to know that maybe what I gave is the right thing. (Rebecca, 211-215)
Lack of Self-Care Negatively Impacts Clients

There’s an expectation where I work now that if you’re sick, that you stay home. And if you’re family is sick, then you should prioritize your family. And these were some things that in my last workplace, they weren’t as encouraged, so as a result I might put myself through 3 days of working with clients but feeling completely under the weather and not very present. (Allison, 132-137)

I think I feel an ethical responsibility to also make sure that I’m in a good headspace and in part of that is making sure that I take good care of myself. If I’m not eating well, and exercising, and getting good sleep and all the rest of that, then I’m not at my best and I think that directly impacts my work with my clients. (Regina, 82-86)

That’s when I notice things like, for instance, maybe some signs of some burnout or stress, like thinking, for instance that “oh I’ve heard this story before,” and “Oh all these client stories are the same, and they’re all the same,” and that kind of apathy I think is an indicator for me that I need to breathe. I also notice that I’m asking, like I said, I’m talking more, I’m listening less, I’m really really feeling the need to find a solution for the client as opposed to asking them the questions so that they come to a solution for themselves. Those are things I notice I do when I’m not as present or as grounded in a session. (Regina, 101-109)

Like if I am drowsy during a session, and I’m having a hard time keeping my eyes open [laughs] then I’m not at my best and I’m not asking the best questions. If I don’t feel like I’ve eaten well that day, it’s the same things, that contributes to, for instance, my level of alertness and attentiveness to the client. So I think these things are very directly related. I think I have more energy and more insight into the situation when I’m just in a better place, that I’ve invested some more energy into prepping for the session, I’ve looked back on my last notes that I’ve had with the client, all of those things. I’m practicing more congruently with the way that I want to practice when I feel like I’m at my best, and I think that self-care directly relates to that, like when you start to feel burnt out, that’s an indicator, for me, that I need a bit of a break. (Regina, 112-123)

Sometimes the pace of the environment in terms of seeing one client and maybe going over in my session and so a client comes in with maybe very high needs and maybe some, they’re in crisis or that type of thing, and then that one session bleeds into another session, then I don’t feel like I have a few minutes for myself to grab a drink of water, go to the washroom, focus on, “ok now I’m switching gears and I’m meeting with somebody else,” so things like that. (Regina, 131-137)
That’s where, like I said, I see kind of an apathy towards some clients, for instance, like that’s where I see the, “ugh I don’t really want to see that client because I really, I have a hard time with them or our personalities don’t really jive,” or that’s where I see those things as being a bit more distinct, whereas if I’m caring for myself a little bit more, and I’m in a better, well-rested, well-grounded space, those things don’t impact me as much. So some kind of hesitation or kind of wishing for a client to maybe not show or to cancel, that kind of thing, when I’m feeling overly stressed and I haven’t invested in the self-care and I don’t feel like I’m caught up on my notes and I feel overwhelmed and those kinds of things. (Regina, 189-198)

The encouragement of saying how you’re feeling at work and not about it being about numbers and how many clients you’ve seen, but more about the quality of work that is done [would help to engage in self-care]. (Regina, 216-219)

Like there’s so many reasons why a client may show up for an appointment. I work in a [post-secondary institution], so they might forget and then they’ll email me an hour later, “I’m so sorry [name],” there’s so many reasons, you don’t want to put that blame, but it kind of keeps us in check, saying you know what even if I worked in private practice, it keeps us on our toes, like if we’re not giving our best, a client doesn’t have to come back. And I think that’s a really good way for us to keep, even with the professional development and the self-care, it helps us keep us on our toes, so to speak. (Owen, 191-199)

So let’s say if I didn’t sleep well, I might be tired in session. And when I’m tired in session I’m not able to focus, or maybe my mind’s going to drift a little more, or maybe I’m going to have compassion fatigue a little earlier. (Owen, 208-211)

So let’s say if I meet my needs, I could go to work and I can be present, if I slept and ate well, if I hung out with people yesterday, I don’t feel like I’m deprived. And then when I’m in the session, it’s not like I’m sacrificing myself. (Owen, 448-451)

It’s knowing that there’s more to me than just being a counsellor, and I know that if I listen to that, I’m not only this, I could do it for a longer time and this could be my life vocation and when I’m going in the room they will be meeting with [name], not this robot. (Owen, 482-485)

I would say that if I didn’t have self-care practices that I do now, or that I try to do, I think, and I mean it’s happened, is that you just end up getting stuck in a funk where you’re like, yes, you kind of go on autopilot, that’s the word I’m looking for. You just do things just because you have to and you feel yourself, you feel different. I would say I feel different when I haven’t tried to incorporate self-care practices and I won’t lie, it would affect
work because let’s say I come into work and I’m tired or I haven’t been able to do something I enjoy, I’m not doing my best at work. Or I’d be forcing myself to do something and I’m not as engaged, I’m not able to contribute (Rebecca, 140-149)

So I would be, I think I would be speaking more with my emotions and I would be highly opinionated and I wouldn’t be able to be transparent in my thinking. So I would come up with a range of solutions without even giving the clients room to kind of express themselves and this is not something that I’m saying comes up, it wouldn’t be noticeable for clients, but I know I would notice it. Like I would feel like I’m being very non-transparent and being highly opinionated and you know sometimes we do get clients that come in and say, “oh you’re the expert, you should know what to do,” and then sometimes, and this is very rare, but I would tend to be very, what’s the word? I don’t know, opinionated is the word, so like just, or judgmental, like you’re a little bit judgmental so it’s like, “oh why are you doing this,” and just questioning a lot of their actions and behaviours instead of being more empathetic and, like I said, this is very rare, but I feel like when I just haven’t had the time to take time aside for myself and I’ve been going going without taking a pause, then of course it’s going to affect me mentally, physically, and there’s just not enough of me to give that I would just be saying whatever comes to the top of my head. (Rebecca, 166-182)

Facilitates emotional regulation

I learned about it through my Master’s because while I had engaged in certain self-care activities prior to my Master’s degree, I didn’t really realize the full importance of it until we started discussing it and I had to contend with the anxiety that comes with the pressure of a Master’s level education, working with clients who have a lot of emotional needs and feeling a lot of internal pressure to do a really good job (Allison, 165-171)

Whereas now I look at it as I need to do it because it helps me be, it helps create balance in my life, and it helps me feel, like it does help me feel better about who I am as a therapist and who I am as an individual (Allison, 291-293)

I find that it’s also helped me be more empathic towards my own clients in terms of how I understand their struggles and the challenges that they face in striking that balance (Allison, 454-457)

When I connect with my colleagues, there’s a greater sense of “I’m not alone with what I might be struggling with,” which also helps to reduce any stresses that I have. So I find that connecting, whether it’s connecting with a good book, or connecting with some of the other women that come to my workout class, or connecting with colleagues, just I’ve come to recognize that it
just makes me feel like a more balanced person and ultimately I
think that makes me a better therapist, it makes me enjoy my job
because I know that when I go home I’m going to focus on home
life, and when I’m at work, I focus on work (Allison, 466-474)

now self-care is more about being more relaxed, and feeling less
stressed and feeling happy, like feeling like I can enjoy my
workplace (Allison, 478-480)

where I have modified self-care to make it work for me is a way
in which it comes up in everyday activities and I try to be
conscious about how it makes me feel and if it adds value or
brings me a sense of happiness or joy (Allison, 506-509)

Now it’s more just about engaging in things that offer some sort
of pleasure or offer some sort of sense of accomplishment, but
without the pressure of trying to be better. (Allison, 511-514)

I think I feel happier, I feel more content, I feel balanced, I feel
more prepared to take on the day, I feel more confident about the
quality of work that I’m doing [when I engage in self-care].
(Regina, 299-301)

So it’s kind of walking away from the work so that when I’m
back I’m excited and I’m very happy to say that when I go to
work in the morning, very rarely I do not want to go. Like I love
going to work, so that I think is really, so that’s it. (Owen, 105-
108)

Like when we have balance in our life, I think that’s when we
can feel happy. (Owen, 153-154)

And when I’m tired in session I’m not able to focus, or maybe
my mind’s going to drift a little more, or maybe I’m going to
have compassion fatigue a little earlier. But because I feel like
I’ve taken self-care so seriously, even now after the end of the
year, I still feel, I don’t feel any compassion fatigue. I feel like
even now I have a lot of energy, like I’m able to be so present
with the clients and I really think that’s because I’m meeting own
needs. (Owen, 209-214)

Because when there’s less time for that personal stuff or less time
for that, then it becomes overwhelming and we could become
bitter, or our window of tolerance can become even smaller. So
the more I can say no and I can listen to myself and I have that
balance, wow, it’s like the best life. (Owen, 312-316)

And for me, when I was taking on too much I spoke with that
supervisor it gave me the space to share that and for her to hear
that, so I didn’t feel like I was in a corner with these feelings, and
then speaking with my manager after and her validating that was
like, I can’t even tell you what a good feeling, it was like the
weight, it was like I was holding a bag of rocks and putting it
down. It was so essential, so supervision to get that, like it’s
almost like my professional therapy and to explore with clients to
help them, how it could best serve them, which that in of itself is energizing and helps with my confidence and helps with my professional happiness and integrity. (Owen, 381-390)

Like always having that thing to look forward to I think really helps with that happiness and it does create that sustenance. And when I do client notes, sometimes I’m listening to music, so that helps with that process as well because always fed me. And again, I really have to say, like I read somewhere, even buying a piece of jewelry that’s really you, that helps with self-care because every time you look at it you’re like, “ah I really love this,” and I know it’s so small and minute, but it’s really helpful. And even I have two frames in my office that are very me and every time I look at them even in session it’s like looking at something that’s so me that gives me energy. (Owen, 418-422)

So I figured, I noticed the effects of when I did these things I felt much better and calm and regulated compared to had I not done it because I can feel the difference if I’m feeling tense and stressed and I’m not able to do some of my self-care practices because of whatever reason, I can see the difference between before and after. So I notice when I do these things, I feel much better and I’ve taken time out for myself. (Rebecca, 62-67)

I feel more motivated and enthusiastic when I do a lot of self-care practices compared to if I didn’t because it would end up, kind of affecting my work and I would be able to notice that, I’m pretty sure that people would be able to notice it too. (Rebecca, 153-156)

Like the baking and the meditation and the journaling, that is when I just feel like, I don’t know what mood or emotion I’d put on it, but it kind of just happens when, I’d say when I’m bored or when I’m feeling, I don’t know if I’d say blue, but I’ll use the term blue, but blue not meaning depressed or anything, but like just sad or in a funk or days when you just, I don’t know how I feel. Like I just feel like I’m floating, those are the days that I’ll do that, and then stressed and tense that’s when I’ll do the workout or something active. (Rebecca, 316-323)

The scheduled ones yes. I notice that I feel a little bit lighter, less tense, just feeling good kind of feeling. And then the ones that are not scheduled, like sometimes because it just happens randomly, not necessarily when I’m feeling blue or whatever, sometimes I’ll notice after, “oh I didn’t know I was feeling whatever emotion.” But I’ll feel good after, but without really pinpointing how I was feeling before, but I’ll notice that after I’ve been able to write or do whatever, I feel light. Like I don’t know, you just feel happier and lighter and I feel like nothing, like there’s no burden. (Rebecca, 330-337)
Yes it affects me positively and then on the days that I’m not able to do it then I can notice the difference. Or if I don’t do something for a prolonged period of time, then I can really notice a difference in my well-being. (Rebecca, 389-392)

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<th>Positively impacts work with clients</th>
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<td>I make a conscious effort to create balance between my professional life and my home life and so striking that balance, which for me is a big part of my self-care, has also helped me be a better therapist because I used my own experience in creating that balance and sometimes that’s an important piece of self-disclosure that I can share with my families. When I’m taking to parents who talk about the challenges of balancing work life with raising a busy set of kids, so I find that it’s also helped me be more empathic towards my own clients in terms of how I understand their struggles and the challenges that they face in striking that balance. (Allison, 448-457)</td>
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<td>So, going to a workout class doesn’t necessarily help me feel like more of a professional, but I do recognize that in doing those things that I am strengthening myself as a therapist because I’m taking the time for me, which is what I encourage my clients to do. (Allison, 462-466)</td>
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<td>I think I have more energy and more insight into the situation when I’m just in a better place, that I’ve invested some more energy into prepping for the session, I’ve looked back on my last notes that I’ve had with the client, all of those things. I’m practicing more congruently with the way that I want to practice when I feel like I’m at my best, and I think that self-care directly relates to that. (Regina, 117-122)</td>
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<td>So I think for me, I think especially for this job and I think it’s less important in other jobs, but I think because we need to be so present for the session and so aware of what we’re saying, how we’re asking questions, our body language, our tone, our timing, I think there’s so many factors that go into the therapeutic session that I think it’s vitally important to have good self-care. (Regina, 337-342)</td>
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<td>I just make sure I listen to, like I’m not only a counsellor. I want to remember that and what I bring into the room, even with clients is [name], and when I feel great, when my needs have been met with all these other interests, I know the person in the room is giving 110% because I met my own needs first. (Owen, 38-42)</td>
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<td>And it’s really true, like once I meet my needs first I can help others, and this field was just so focused on being the tool for somebody else. Like when I feel good, I know I’m giving the clients the best. I’m so present, like even in my non-verbal I feel like my eyes, I hope they convey that I care, but I can only do it if my needs are met (Owen, 94-98)</td>
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And I feel like when I take care of my needs, like let’s say I had a really good night with friends. I go home, I sleep like a baby, the next day I’m energized, there’s a spring in my step, really, I feel great. I’m on cloud nine. That feeling might fade, sure, it’s not going to last forever, like anything. But I know when I bring that in the room, when I feel great, like I slept well, I ate well, I went to the gym the night before, and even though it’s hard to a pulse of the implications of going to the gym, maybe it has that ripple effect. And then when I’m at work, I’m laughing with my colleagues, I’m very present in the session, there’s nothing gnawing at me. (Owen, 199-208)

But when I did have a great weekend, I’m like exuding an energy, and it gives my energy. Self-care, for me, gives me so much energy, and I can just feel it. I’m on with the client. (Owen, 218-220)

[Self-care] means listening to your own needs before you can help someone else with theirs. That’s what it means. (Owen, 425-426)

[Self-care] increases that window of tolerance. So [author], she did studies, she’s a TED talk speaker, and she’s a counsellor as well, and she did a talk about the window of tolerance. So when we’re not meeting our needs, our window of tolerance gets smaller and smaller and then anything could be like the straw that breaks the camel’s back. But the more I meet my needs, the more I could, my window of tolerance is higher. So let’s say if I meet my needs, I could go to work and I can be present, if I slept and ate well, if I hung out with people yesterday, I don’t feel like I’m deprived. And then when I’m in the session, it’s not like I’m sacrificing myself. (Owen, 443-451)

The more I meet those needs, then after, and I’m an extrovert so I need to socialize with others, the more that my window of tolerance is higher and higher and higher and I could take on, like a crisis client and not feel so depleted. (Owen, 456-459)

If I engage with elements that inspire me, I notice that’s it’s also influenced my interventions with clients. So when I say that they see [name] in the room, maybe I’m going to talk about a book that I just read, that’s going to have therapeutic benefit of course, or a quote form a song, or it’s going to be a bit more individual. so, I really try to own that, or if there’s art on my walls and it’s very me, I know that’s part of the client experience too. So yeah, it’s kind of like I’m trying to meet my needs because I also want to meet others. (Owen, 498-505)

I would say it affects different aspects of work if I’m not able to do self-care and when I do it I notice that I’m more enthusiastic, I’m more motivated, I feel like I’m able to go above and beyond,
like for certain clients, it means me looking for more resources, or making phone calls (Rebecca, 149-153)

So I think the more I’m able to take care of myself, the more I’m also able to give my best to other people and I think that’s what makes a difference in my work. It’s something that I enjoy so in order to do that, I need to take care of myself. (Rebecca, 381-384)

I would say yes [self-care] does keep me balanced because then I’m able to check myself and I guess professionally, yes, seeing how at work and professionally I’m performing, so doing that debrief with, or consulting with coworkers or my supervisor or leadership or whoever, it also keeps me in check. (Rebecca, 401-411)