

Become a Better Therapist

GUIDING WITH PURPOSE

A Self-Discovery Workbook for Counselors

CASSIE JEWELL, M.ED., LPC, LSATP

DEDICATION

To the incredible IRC staff at VHC—especially Dr. Davis, Aileen, Natalia, and the dedicated nursing team. Your exceptional care and support meant the world to me. Thank you!

ACKNOWLEDGMENTS

The journey of creating *Guiding with Purpose* has been both personal and profound. I'm deeply grateful to the people who stood beside me, inspired me, and helped bring this project to life.

First and foremost, I extend my heartfelt gratitude to the dedicated mental health professionals who show up every day with compassion and courage. Your commitment to growth, resilience, and ethical practice is the heartbeat of this profession. I hope this workbook becomes a trusted companion in your journey of self-reflection and renewal.

To my loving partner, Seferino—your steady support and unwavering belief in me have been my anchor through every chapter, both in this book and in life. Thank you for your patience, your love, and for reminding me of my purpose when I needed it most. Your patience, encouragement, and faith in me never wavered, even when mine did. Your quiet strength and kind heart are woven into every page of this book.

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To the readers and followers of the Mind Remake Project—your feedback, engagement, and shared dedication to personal and professional development have been a continual source of motivation. Your voices echo in the pages of this workbook.

And finally, to every counselor, therapist, and mental health professional who picks up this book: thank you for choosing this work. Your commitment to self-discovery not only deepens your practice but transforms the lives of those you serve.

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Guiding with Purpose: A Self-Discovery Workbook for Counselors

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Site: www.mindremakeproject.org

Email: CassieJewellLPC@gmail.com

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About the Author

Cassie Jewell is a mental health clinician and the founder of Mind Remake Project, a site she developed for sharing free self-help resources and information for consumers and mental health professionals. Cassie has a master's degree in counseling from the University of Tennessee at Chattanooga (with a bachelor's in psychology). Cassie is a licensed professional counselor (LPC), a licensed substance abuse treatment practitioner (LSATP), and a board-approved clinical supervisor in Virginia.

In addition to her website and clinical work, Cassie has published two workbooks on grief, offering support and guidance to those navigating loss. She finds joy in creativity, whether through writing, developing new resources, or exploring innovative ways to enhance mental health.

Outside of her professional life, Cassie is an avid traveler who loves experiencing new places and cultures. At home, she shares her space with her loving fiancé and two beloved rescue dogs, who serve as a constant source of drool, fur, and companionship.

All of the materials in this workbook can be reproduced or downloaded and printed for free for educational, therapeutic or self-help purposes with appropriate citation. All the exercises in this workbook as well as supplementary materials can be found at

[Minhttps://mindremakeproject.org/2025/04/03/guiding-with-purpose](https://mindremakeproject.org/2025/04/03/guiding-with-purpose).

Introduction

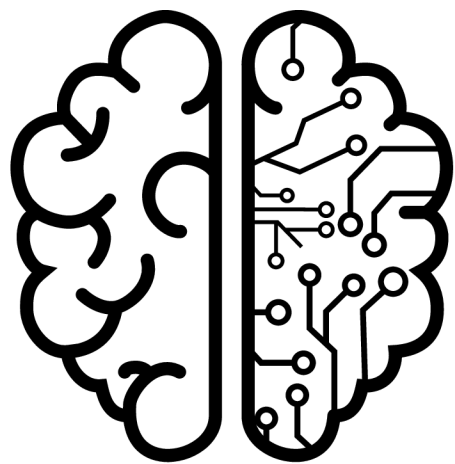
In his 1993 preface to *On Being a Therapist*, Jeffrey A. Kottler observed., “The process of psychotherapy flows in two directions, obviously influencing the client but also affecting the personal life of the clinician. This impact can be for better or for worse, making the helping professions among the most spiritually fulfilling as well as the most emotionally draining human endeavors. Some of us flourish because of this work. We learn from those we try to help and apply what we know and understand to ourselves. And some of us become depleted and despondent. Over time we may become cynical, indifferent, or stale ... Whether we like it or not, the decision to be a therapist is also a commitment to our own growth.”

This workbook is designed for a range of mental health professionals, from those just beginning their journey to seasoned practitioners. It's for the enthusiastic first-semester counseling or social work student, as well as the recent graduate struggling with self-doubt or imposter syndrome, questioning their abilities. It's also for the experienced therapist who recognizes that their once tried-and-true methods are losing effectiveness, prompting a need for change and renewal.

More than just a guide for helping clients, this workbook acknowledges that therapy is also about our own growth, resilience, and ability to sustain ourselves in the face of the pain we witness. To thrive in this field, we must remain not only effective but also inspired and engaged. Ultimately, this workbook isn't just about becoming a better therapist; it's about becoming a more intentional, authentic human. As you move through these pages, you'll deepen your self-awareness, refine your skills, and strengthen your capacity to support others.

This is an interactive workbook with questions for reflection and self-awareness, and tools to assess and challenge your abilities and attitudes.

What inspired you to pick up this workbook, and what personal goals or changes are you hoping to achieve by exploring its content? Whether you're seeking clarity, growth, or a deeper understanding of yourself, this is your space to set intentions and envision the transformation you'd like to experience. Take a moment to jot down your thoughts.



CHAPTER 1: WHAT MAKES A THERAPIST EFFECTIVE?

LEARNING OBJECTIVES

- 1) Analyze how client factors, the counseling relationship, hope/expectations, and therapeutic interventions influence therapy outcomes.
- 2) Examine the critical role of the counseling relationship in facilitating client change.
- 3) Explore the impact of trust, rapport, and empathy in building an effective therapeutic alliance.
- 4) Identify and reflect on personal biases assessment (external activity).
- 5) Evaluate your current level of empathy and implement strategies to enhance empathic engagement.
- 6) Review and apply fundamental counseling skills and techniques to strengthen therapeutic effectiveness.

In 1999, Asay and Lambert suggested that a specific breakdown of common factors contributes to success in therapy (Chen & Giblin, 2018). The breakdown:

- Client factors (40%)
- The counseling relationship (30%)
- Hope/expectations (15%)
- Specific techniques (15%)



If this breakdown is accurate, an effective therapist must balance prioritizing the therapeutic relationship with applying evidence-based techniques tailored to the client's presenting concerns. Rosenthal (2011) found that **“a technique is often the factor that the client insists is responsible for his or her change and remembers as the zenith, or high point, of treatment”** (p. 5).

At the same time, client factors-such as motivation and insight-account for half their likelihood of success. It's essential to recognize that clients are not only the experts of their own lives but also the primary stakeholders in their healing process.

The Counseling Relationship

As a graduate student in counseling or social work, your curriculum likely included core courses in counseling theories, ethics, multicultural competence, human development, career counseling, assessment and diagnosis, statistics, addictions, group work, and perhaps specialized electives such as play therapy, trauma counseling, or couples therapy.

While these foundational courses provide a valuable toolkit of techniques, research indicates that these skills contribute only about 15% to client success.

Even interventions like the miracle question or empty chair technique have limited impact on their own. While a diverse set of therapeutic tools is important, true healing and growth depend on the strength of the therapeutic alliance and the client's motivation and level of functioning.

In 2018, I wrote about what makes the therapist-client relationship effective and therapeutic, "With regard to the client-counselor dynamic, an effective therapist recognizes that the relationship is central to the therapeutic process; it's the key to healing and growth. A client must trust the counselor before they feel safe enough to share their pain, humiliation, or guilt. Traits like warmth, humor, and transparency foster an honest and caring relationship. Counseling skills are important, but can only go so far without a trusting relationship."



Building Trust

According to Adler (1964, p. 73), "The first rule in treatment is to win the patient" (Chen & Giblin, 2018). Research indicates that trustful collaboration is critical for therapy outcomes (University of Zurich, 2020). A trusting alliance between practitioner and client is a large contributor to the therapeutic relationship. And trust requires honesty.

QUESTIONS FOR REFLECTION

Why is honesty necessary for trust to emerge?

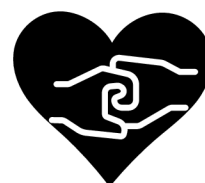
What do trust and honesty look like in a therapeutic relationship versus a relationship you might have with a friend or romantic partner?

Do your clients trust you? How can you foster that trust?

Consider a time when you weren't honest with a client. What did you say or do? How did the individual respond?

What could you have said or done differently?

Clients develop trust in you not only through your actions but also through the boundaries you maintain. Your demeanor, combined with the interest and empathy you convey, is essential in building that trust. As Chen and Giblin (2018) noted, "Clients desire to work with a therapist who provides them with complete honesty." However, clients may initially be guarded when entering counseling and may test you to assess whether you are genuinely trustworthy.



QUESTIONS FOR REFLECTION

What are some ways clients have ‘tested’ you in the past and how did you respond? _____



How could you have responded more effectively? _____

When clients trust you, they’re more likely to open up and become vulnerable. Honesty is freeing, allowing clients to let down their guard and feel safe. They’re free to address the issues they came to therapy for.

Building Rapport

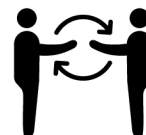
Although the therapeutic relationship is a significant predictor of successful patient outcomes, graduate programs often do not prioritize ‘soft skills’ training in rapport-building and relationship development with clients.

The foundation of any practitioner-patient relationship is rapport, built on both time and trust. The effort invested in establishing this connection leads to better outcomes. Moreover, rapport-building begins instantly—within seconds of greeting a new client. They take in your appearance, assess for judgment, notice the books on your shelves, and interpret your warmth through your smile, all while forming their first impressions of you.

In your own words, define rapport:

Morrison (2008) defined rapport as “the feeling of harmony and confidence that should exist between patient and clinician” (Chen & Giblin, 2018). He noted that rapport develops gradually over time, but that there are certain techniques you can use to speed it up. Morrison suggested taking on a relaxed stance, using neutral facial expressions, and even using praise sparingly to align with the client and enhance rapport.

“The wider your responding skills, the more your client will be receptive to your influence” (Chen & Giblin, 2018, p. 50). To enhance responsiveness, Chen and Giblin introduced the **SOLER** principle: **Square, Open, Leaning forward, Eye contact, and Relaxed**, which encourages active and engaged listening.



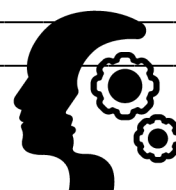
Research indicates that experienced therapists achieve better results than “extremely inexperienced” therapists, but primarily because they are more effective at establishing rapport early on. They are also more successful in engaging clients who were otherwise difficult to reach (Chen & Giblin, 2018).

To build rapport, also consider using the client’s own language. While we’re trained to use person-first, non-stigmatizing terms—like “undomiciled” instead of “homeless” or “a person with alcohol use disorder” instead of “alcoholic”—this can sometimes create distance if it differs from how the client describes themselves. If a client refers to themselves as an alcoholic and shares stories about being homeless, responding with clinical language may come across as detached or even judgmental. In these cases, it would be appropriate to use their terms. Mirroring their language shows that you’re listening and meeting them where they are, which strengthens rapport and fosters connection (Chen & Giblin, 2018).

Validation and acceptance are also key to building rapport. You don’t have to agree with a client’s actions to validate their emotions. For example, while you may not condone a client slashing their boss’s tires, you can acknowledge their anger and recognize that, in the moment, it may have brought them a sense of relief. Validating their feelings without judgment helps foster trust and openness, making it easier to engage in meaningful conversation about their experiences and choices.

List five specific ways that you can build rapport with clients:

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____



If traditional rapport-building strategies aren't working, think outside the box. Some clients may be reluctant to engage due to distrust, discomfort, or simply not knowing how to connect. In these cases, creative approaches like humor, music, or shared experiences can help break the ice.

For example, humor can be a powerful tool—self-deprecating jokes, playful exaggeration, or even something as silly as stomping around making fart noises (as I once did with a resistant young adult client) can shift the dynamic and create a moment of shared laughter. Music is another universal connector—asking about favorite artists, referencing a song lyric, or even playing background music can make the interaction feel less clinical and more natural.

Other out-of-the-box strategies include engaging in a casual activity together (e.g., doodling, tossing a stress ball, or playing a simple game) or using metaphors and storytelling to spark conversation. **The goal is to meet the client where they are, making the interaction feel less like an interrogation and more like a genuine human connection.**

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____

On a scale from 1-10, with '1' being 'inept' and '10' being 'expert,' how skilled are you at building rapport with your clients? Place a mark on the line below.

<-----1-----2-----3-----4-----5-----6-----7-----8-----9-----10----->



What do you think it would take for you to make the jump to the next highest number?

What's preventing you from doing so?

Do you have a more difficult time building rapport with clients who are more different than similar from you? _____ Yes _____ No

If so, consider implicit (unconscious) biases you may hold. (We all have them.) According to Shah and Bohlen (2023), "Implicit bias is the attitude or internalized stereotypes that unconsciously affect our perceptions, actions, and decisions. These unconscious biases often affect behavior that leads to unequal treatment of people based on race, ethnicity, gender identity, sexual orientation, age, disability, health status, and other characteristics."

To test your implicit biases, visit: <https://implicit.harvard.edu/implicit/takeatest.html>

QUESTIONS FOR REFLECTION

What did you learn about your hidden biases?

How can you overcome these biases to better build rapport with individuals of different races, ethnicities, gender identities, etc.?

Beyond biases, we all have personal preferences that can influence our interactions with clients. In 2021, I wrote an article outlining practical strategies for working with clients who may be challenging or even offensive. **Key suggestions include:**

1) Reframe the terms 'like' and 'dislike.' Instead of viewing clients in terms of personal preference, consider whether they seem relatable or unrelatable to you. Discomfort may stem from fear or misunderstanding—we often fear what we don't understand.

2) Strengths-based approach.. Every client has positive qualities. Actively recognizing their strengths can help reshape your perspective and foster a more productive therapeutic relationship.

3) Practice empathy. If you find someone unlikeable, imagine what it feels like to be in their shoes. They are likely aware that others find them unlikeable. Feeling unwanted or rejected is deeply painful, and acknowledging this can help cultivate empathy.

4) Recognize self-protective behaviors. Some people present as abrasive or offensive as a defense mechanism (Kross, 2017).

5) Consider countertransference. Ask yourself: *Who does this client remind me of?* Unexamined personal reactions can shape how we perceive and respond to clients.

6) Keep neurological factors in mind. Personality changes due to brain injuries can affect how a person interacts with others. Consider the case of Phineas Gage, who survived a traumatic brain injury but underwent a dramatic shift in personality, becoming irritable and impulsive.

By approaching challenging clients with curiosity, empathy, and self-awareness, you can strengthen the therapeutic alliance and create a more effective space for growth.

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Empathy

“Much of clients’ suffering can be traced to a lack of mutual empathy in their lives” (Chen & Giblin, 2018).

A strong therapeutic relationship is the foundation of effective therapy, and empathy is key to building this connection. The sooner this bond is established, the greater the therapist’s ability to support the client and address their concerns effectively. **Without a solid therapeutic alliance, the chances of meaningful progress decrease significantly.**

Empathy is a cornerstone of the counseling relationship, shaping the depth of connection and trust between you and your client. Unlike sympathy—feeling *for* someone—empathy is about feeling *with* them, stepping into their experience without becoming consumed by it or viewing them with pity.

On a scale from 1 to 10 (with ‘1’ being ‘extremely difficult’ and ‘10’ being ‘extremely easy’), how challenging is it for you to feel empathy for your clients?

Place a mark on the line below to reflect your experience:

←-----1-----2-----3-----4-----5-----6-----7-----8-----9-----10----->

Are there times when you struggle to empathize instead of sympathize? Does it become harder during times of personal stress, exhaustion, or burnout? *Are there certain types of clients or situations that make it more challenging?*

____ Yes ____ No

Consider what’s happening in your life when empathy feels unreachable. Do you recognize any patterns?

Are there times when you struggle to either empathize or sympathize *at all*?

____ Yes ____ No

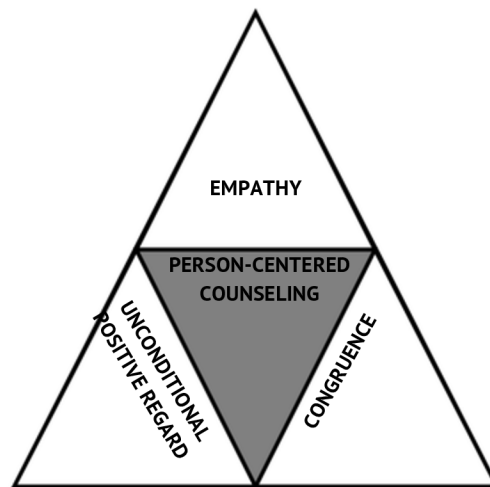
If so, are there any patterns regarding what’s happening in your life at the time?

Empathy is the ability to understand and share the feelings, thoughts, and experiences of another person. It involves recognizing someone else's emotions, seeing things from their perspective, and responding in a compassionate and supportive manner.

According to Chen and GIBlin (2018), to respond empathetically, we must:

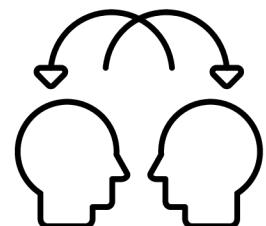
- Suspend our own needs temporarily
- Set aside our own agenda and judgment
- Stay tuned into our own inner reactions

Rogers viewed empathy (being listened to and understood) as one of the cornerstones of person-centered therapy, along with congruence and unconditional positive regard (McLeod, 2024).



Rogers described empathy as the counselor's ability to "enter the client's phenomenal world, to experience the client's world as if it were your own world without ever losing the "as if" quality. Empathy involves two specific skills: *perception* and *communication* (Welfel & Patterson, 2005 in McLeod, 2024).

Effective responding requires a strong foundation in empathy, a key element in building trust and understanding. Gladding (2018) identified two types of empathy in counseling: *primary empathy* and *advanced empathy*. **Primary empathy** refers to "the ability to respond in such a way that the counselor has understood the client's major themes" (p. 128). In contrast, **advanced empathy** involves "the process of helping clients explore themes, issues, and emotions new to their awareness" (p. 128).



SELF-ASSESSMENT: How Empathetic Are You?

Instructions: For each question, choose the response that best reflects your typical approach in clinical or professional settings.

_____ **1. When a client shares a deeply personal struggle, your first instinct is to:**

- A) Offer a safe, nonjudgmental space and validate their emotions.
- B) Relate by sharing a similar experience to build rapport.
- C) Provide immediate guidance or solutions to alleviate distress.

_____ **2. A client expresses frustration about their progress in therapy. You respond by:**

- A) Acknowledging their feelings and exploring their concerns collaboratively.
- B) Reassuring them that progress looks different for everyone.
- C) Encouraging them to focus on the positive rather than their frustration.

_____ **3. When working with a client whose values or beliefs differ from yours, you:**

- A) Actively seek to understand their perspective without judgment.
- B) Acknowledge the differences but focus on therapeutic goals.
- C) Maintain neutrality and avoid discussing conflicting viewpoints.

_____ **4. A client minimizes their own trauma or distress. How do you approach this?**

- A) Gently explore their perception while validating their experience.
- B) Accept their perspective but subtly challenge cognitive distortions.
- C) Acknowledge their feelings without further exploration.

_____ **5. A client struggles to articulate their emotions. Your approach is to:**

- A) Help them explore and label their emotions with curiosity and patience.
- B) Offer common emotional experiences to guide the conversation.
- C) Focus on behavioral strategies rather than emotional exploration.

_____ **6. When a client exhibits resistance or defensiveness, you typically:**

- A) Approach with curiosity, exploring the underlying reasons for resistance.
- B) Acknowledge the resistance and gently guide them forward.
- C) Reframe the conversation to keep the session productive.



Scoring



Mostly A's: Highly Empathetic & Self-Aware – You demonstrate strong clinical empathy, emotional attunement, and reflective practice, fostering deep therapeutic connections.

Mostly B's: Moderately Empathetic & Goal-Oriented – You balance empathy with structure but may benefit from deepening reflective listening and emotional validation skills.

Mostly C's: Practical but Emotionally Reserved – While effective, you might rely more on cognitive approaches than emotional attunement, potentially missing deeper emotional needs.

According to the Greater Good Science Center, empathy can be cultivated and enhanced throughout the lifespan. In 2012, Krznaric defined empathy as “the ability to step into the shoes of another person, aiming to understand their feelings and perspectives, and to use that understanding to guide our actions.” Furthermore, he maintained that neuroscientists have identified “a 10-section ‘empathy circuit’ in our brains which, if damaged, can curtail our ability to understand what other people are feeling.”

Krznaric developed the following six habits for enhancing empathy:



1-Cultivate curiosity about strangers. Stay open-minded and seek to understand different perspectives by engaging with people outside your usual social circles.

2-Challenge prejudices and seek common ground. Instead of focusing on differences, look for shared experiences and values that connect you with others.

3-Step into someone else's shoes. The Native American proverb, “Walk a mile in another man's moccasins before you criticize him,” encourages experiencing life from another's perspective to foster deeper understanding.

4-Be an empathetic conversationalist. Practice active listening by being fully present, absorbing what others are saying, and responding with genuine curiosity. In turn, open and share your own thoughts and feelings to build connection.

5-Act for social change. Engage in movements or initiatives that promote justice and equality, using empathy as a driving force for positive impact.

6-Extend empathy beyond your comfort zone. It's easy to empathize with those who seem vulnerable, but true empathy involves understanding those we may view as adversaries-whether billionaires, CEOs, or corporations-challenging us to see the humanity in all.

For an online interactive (self-scoring) test for empathy based on three scientifically validated, see https://greatergood.berkeley.edu/quizzes/take_quiz/empathy from Greater Good Science Center.



Clinical Skills & Interventions

Although client factors account for 40% of a client's success, a skilled therapist can foster hope and strengthen self-efficacy. The therapeutic process itself sparks optimism, as clients are motivated by the belief that change is possible.

To enhance effectiveness, therapists must not only develop strong clinical skills but also cultivate a broad knowledge of evidence-based techniques tailored to address clients' unique needs and symptoms.

Basic Counseling Skills

For each skill listed below, rate your level of confidence in using it on a scale from 1 to 5, with 1 = Not Comfortable to 5 = Very Comfortable.

Nonverbal skills: Using body language, facial expressions, tone of voice, gestures, posture, eye contact, and other nonverbal cues



Active listening: Fully concentrating and minimizing distractions while remaining in the present moment



Encouraging: Using verbal ("I see," "Go on," or "that makes sense") and nonverbal (nodding, smiling) cues to support, reassure, and motivate clients as they express themselves



Simple reflection: Repeating what the client has said to demonstrate understanding



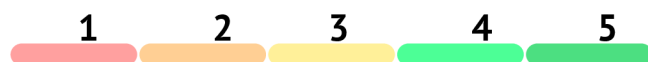
Reflecting feeling: Identifying and verbalizing the client's emotions



Reflecting meaning: Identifying and verbalizing the underlying significance of the client's statements



Clarifying: Asking questions or rephrasing statements to clear up ambiguities and confirm meaning

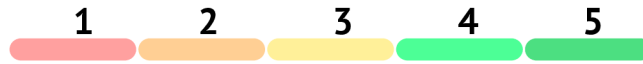


Basic Counseling Skills (cont.)

Paraphrasing: Summarizing the client's statement without adding interpretations or changing the meaning



Open questioning: Asking broad, exploratory questions that encourage clients to express their thoughts, feelings, and experiences



Confronting: Pointing out contradictions between a client's words, actions, or beliefs



Silence: Pausing the conversation, allowing the client to process their thoughts and emotions



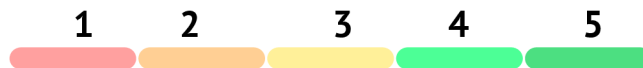
Goal-setting: Collaboratively identifying specific, measurable, and meaningful objectives



Problem-solving: Helping clients to identify challenges, explore possible solutions, and implement effective strategies to overcome difficulties



Summarizing: Condensing key points from a client's statements to reinforce understanding, highlight progress, and bring focus to the session



For each skill you rated **2 or lower**, use the space below and on the next page to outline how you plan to intentionally incorporate these skills into your next session. Set specific goals for practice and reflection. Continue refining these core counseling skills until you can confidently rate each one as a 4 or 5.

QUIZ: Name That Skill

1-Counselor: “It sounds like you’re feeling powerless, but I also notice that sometimes when we talk about these issues, you focus on how others are treating you rather than what you can control. Have you thought about how your own reactions might be playing a role in these situations?”

2-Counselor: “It sounds like you’re not just frustrated with the situation; you’re questioning its -- purpose in your life. It seems like you’re searching for something more.”

3-Counselor: “You’re feeling stuck, but you’re also motivated to make changes. Let’s start small; if you could improve just one thing about your daily routine, what would it be?”

4-Counselor: “Over the last few minutes, we’ve talked about how things have become overwhelming for you, how you feel guilty when you take time for yourself, and how that’s impacting your personal life. You also mentioned wanting better balance but not knowing where to start. Does that sound right?”

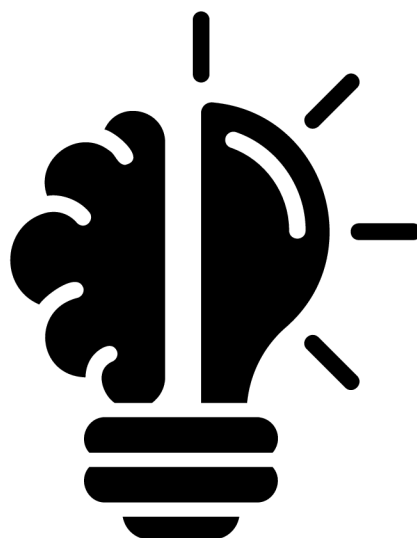
5-Counselor: “In the past, how have you used coping strategies to manage similar situations?”

6-Counselor: “It seems like you’re feeling drained and frustrated from everything that’s been happening.”

7-Counselor: “Let’s break this down together. What are the main obstacles you’re dealing with in this situation?”

8-Counselor: “I see. Say more on that.”

Answer Key: 1. Confronting 2. Reflecting meaning 3. Goal-setting 4. Summarizing 5. Open questioning 6. Reflecting feeling 7. Problem-solving 8. Encouraging



Counseling Interventions & Techniques

There are countless counseling interventions designed to support clients with various symptoms, many of which align with specific therapeutic theories. Below are three commonly used theoretical approaches, each with associated techniques.

Challenge yourself: Choose a skill or intervention you're less familiar with, thoroughly research how to apply it, and integrate it into an upcoming session. Afterward, reflect on the experience and write about it.

Cognitive Behavioral Therapy (CBT): 10 Interventions

- 1 Behavioral experiments
- 2 Thought records
- 3 Scheduling pleasant activities
- 4 Exposure (situation exposure hierarchies, flooding, systematic desensitization)
- 5 Journaling
- 6 Cognitive restructuring
- 7 Functional assessment (ABCs)
- 8 Reframing
- 9 Homework
- 10 Roleplay

Source: <https://www.unk.com/blog/15-core-cbt-techniques-you-can-use-right-now/>

Dialectical Behavior Therapy (DBT): 4 Skills

- 1 Mindfulness
- 2 Distress tolerance
- 3 Emotion regulation
- 4 Interpersonal effectiveness

Source: <https://dbtselfhelp.com/>

Motivational Interviewing (MI): 10 Techniques

- 1 Affirmations
- 2 Advice/feedback
- 3 Asking permission
- 4 Normalizing
- 5 Open-ended questions
- 6 Reflective listening
- 7 Summaries
- 8 Change talk
- 9 Pros/cons (decisional balancing)
- 10 Readiness/confidence to change ruler

Source: <https://www.nova.edu/gsc/>

I selected _____ because _____
 [_____]

I attempted this approach on _____ (date).

Things that went well or were helpful: _____

Things that didn't go well or were unhelpful: _____

"Just as a pianist needs the piano as the medium to express the music in her mind, the therapist needs skills and techniques as the medium to connect with clients. Through proper use of skills and techniques, the therapist plots a course of working through clients' complicated life problems" (Chen & Giblin, 2018).

Challenge yourself each week to explore new counseling theories and techniques. Use the SkillsPractice page (make copies!) at the back of this workbook to record your reflections and insights. Continue this practice until you feel confident applying a diverse range of interventions. You are not limited to the approaches listed above-refer to Appendix 1 for a more comprehensive list of counseling modalities.



CHAPTER SUMMARY

The chapter reinforced that while interventions matter, the therapeutic relationship is a stronger predictor of positive client outcomes. Trust, empathy, and rapport-building are fundamental skills that counselors must intentionally develop to foster meaningful change.

CHAPTER 2: TRAITS OF EFFECTIVE & INEFFECTIVE THERAPISTS

LEARNING OBJECTIVES

- 1) Identify and analyze the traits and characteristics of effective counselors.
- 2) Develop a personalized action plan to enhance counseling effectiveness.
- 3) Recognize ineffective counseling responses.
- 4) Practice and refine empathetic communication skills for effective client engagement.

Effective Counselors

When examining the qualities of an effective therapist, I turned to crowdsourcing, gathering insights from diverse online communities. The responses highlighted key traits of an effective therapist, including:

- ☐ Actively listens
- ☐ Is kind and compassionate
- ☐ Practices honesty
- ☐ Is transparent
- ☐ Puts a lot of thought into what they say
- ☐ Educates their clients (coping skills, symptoms, stress management, etc.)
- ☐ Conveys warmth
- ☐ Reflects and validates feelings
- ☐ Understands human behavior and mental disorders
- ☐ Is non-judgmental
- ☐ Sets and adheres to healthy boundaries
- ☐ Is genuine (and genuinely cares for their clients)
- ☐ Has a wide range of techniques and a variety of tools
- ☐ Is humble (and gives advice sparingly)
- ☐ Creates a safe place for healing
- ☐ Is knowledgeable (evidence-based practices, current research, etc.) and intelligent
- ☐ Possesses emotional intelligence
- ☐ Is respectful
- ☐ Experiences and conveys empathy
- ☐ Has a sense of humor

- ☐ Is curious
- ☐ Has patience
- ☐ Is trustworthy
- ☐ Recognizes and values other perspectives

Additionally, effective therapists demonstrate *resilience*, *optimism*, and a *deep faith in humanity*. They embrace *courage*, *self-acceptance*, and *personal accountability* while fostering the same in others. Committed to *continuous growth*, they cultivate *self-awareness*, pursue *professional development*, and prioritize *regular self-care* to sustain their well-being and effectiveness.

QUESTIONS FOR REFLECTION

Which of the above characteristics resonate most with you?

Which traits do you believe you need to strengthen?

Choose three characteristics you'd like to develop further. For each, create a concrete action plan outlining specific steps you will take to cultivate and integrate these traits into your practice.

Trait #1:

ActionPlan:

Trait #2:

ActionPlan:

Trait #3: _____

ActionPlan: _____

35

In 1980, Glass, Smith, and Miller speculated on how therapist variables, such as ethnicity, years of experience, etc. impacted counseling outcomes. Interestingly, shared gender and/or ethnic background between therapist and client had little impact on therapy outcome, and male therapists were generally just as effective as female therapist (Chen & Giblin, 2018).

Research found that shared values, lifestyles, and life experiences between a client and therapist contributed to more positive therapy outcomes. Additionally, a therapist’s well-being and emotional stability were linked to successful results, emphasizing the importance of regular self-care to prevent burnout. Furthermore, therapy was more effective when the therapist and client had well-aligned expectations (Chen & Giblin, 2018).

Think of a current client whose values or lifestyle differ significantly from your own. During your next sessionwith them, observe your emotions and reactions closely. Afterward, take a moment to reflect and jot them down. Then, repeat this exercise with a client whose values and lifestyle align more closely with yours.

Compare your reflections. Are there any significant differences?

☐ Yes ☐ No

If so, which list contains more positive observations? Consider whether this pattern reveals something important for you to be more mindful of. A noticeable difference may suggest implicit bias, which can impact your ability to build trust and rapport with clients.

Imagine that you’re the client; would you feel safe, heard, and valued in your own sessions?

Interestingly, self-disclosure had no significant impact on treatment effectiveness-except in one key area. When therapists used self-disclosure with clients from different cultural backgrounds, it enhanced trust and transparency, leading to better outcomes (Chen & Giblin, 2018).

Using Affirmations/Validations

“Our validation of clients’ experiences has a powerful effect on the client’s morale and on the therapeutic rapport based on two reasons” (Chen & Giblin, 2018):

1) Encouragement. Validation is a source of encouragement, which gives clients the strength they need to endure their hardships.

2) Respecting clients’ resilience. Affirmation/validation focuses on clients’ strengths and capabilities (Chen & Giblin, 2018).

Validations should be used thoughtfully and in moderation. Overusing them may cause clients to feel that you are solely focused on the positive, potentially diminishing the depth of their experience. Additionally, validations must be sincere; otherwise, they may come across as insincere or ineffective (Chen & Giblin, 2018).



Regarding therapist factors, the strongest predictor of positive outcomes was therapist competence-which, notably, did not always correlate with years of experience. This reinforces what I discovered through crowdsourcing: effective therapists are *knowledgeable, emotionally intelligent, adaptable, and committed to continuous personal and professional growth*. Gladding referred to this as “expertnesss, which he defined as the degree to which counselors are perceived as knowledgeable and informed about their specialty” (201, p. 122).



Do you view yourself as a competent therapist?

☐ Yes

☐ No

If you answered no, remember that competence is built over time through ongoing learning and practice. Expanding your skillset, exploring different counseling theories, and refining your technique will naturally enhance your effectiveness.

If your doubts stem from being a new therapist, keep in mind that while competency influences treatment outcomes, the therapeutic relationship is more critical-and the most significant factor of all is the client's motivation (Chen & Giblin, 2018).

QUESTIONS FOR REFLECTION

Can a therapist possess all the traits of an effective clinician and still struggle to be truly great?

____ Yes

____ No

Why or why not?

Are your clients making progress towards their goals

____ Yes

____ No

Do your clients feel empowered and heard in sessions?

____ Yes

____ No

How do you know?

Ineffective Counseling

Long (1996) identified seven response styles in everyday communication that can hinder communication and weaken the therapeutic relationship (Chen & Giblin, 2018):

“The One-Upper – This person turns conversations into competitions, always needing to outdo the other speaker. If a client shares an experience, the one-upper responds with something even more impressive, shifting the focus to themselves rather than truly listening.

The Discounter – Rather than validating the client's experiences, the discounter minimizes or dismisses them-either through unnecessary reassurance or by belittling their concerns. This can make clients feel unheard and invalidated.

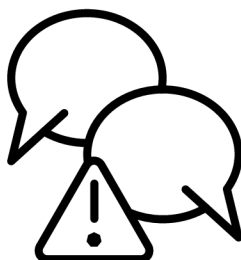
The Expert – The expert always has the right answer and may speak in a condescending or superior manner. Instead of fostering collaboration, they assume a position of authority, which can create a power imbalance in the counseling dynamic.

The Advice-Giver – Similar to the expert, the advice-giver tells clients what they “should” do, offering solutions rather than helping them explore their own. This can discourage autonomy and self-discovery.

The Cross-Examiner – This response style feels more like an interrogation than a conversation. The cross-examiner bombards clients with rapid-fire, closed-ended questions, making them feel pressured, defensive, or even judged.

The ‘Canned’ Counselor – While they may sound supportive, canned counselors rely on generic, surface-level responses like “I see” or “I understand” without actively engaging in the conversation. Their lack of presence makes clients feel unheard and unimportant.

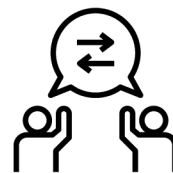
The Problem-Solver – More focused on fixing than listening, the problem-solver jumps in with solutions before fully understanding the issue. This can come across as dismissive and may undermine the client’s ability to work through their own challenges.”



QUESTIONS FOR REFLECTION

Do you identify with any of the seven ineffective responders?

☐ Yes ☐ No



Which one do you identify with the most? _____

What learning processes were involved in developing this response style? _____

Have you ever unintentionally dismissed or invalidated a client's feelings? _____

What are some ways you can improve? _____

QUIZ: Identify the Ineffective Responder



- 1) "You'll be fine. It's not that big of a deal."
- 2) "I completely understand what you're going through."
- 3) "You shouldn't let him treat you that way. You need to start standing up for yourself."
- 4) "Have you considered talking to your doctor about the side effects or asking him to prescribe something else?"
- 5) "What time did you get home? What did she say? Was she angry?"
- 6) "Six hours of sleep is manageable. I only get a few hours every night myself."
- 7) "I know what I'm talking about here, and I think you're making a serious mistake by not listening to what he said."

Answer key: 1) Discounter, 2) 'Canned' counselor, 3) Advice-giver, 4) Problem-solver, 5) Cross-examiner, 6) One-upper, 7) Expert

CHAPTER 3: ETHICAL DECISION-MAKING

LEARNING OBJECTIVES

- 1) Examine and interpret the American Counseling Association's (ACA) Code of Ethics.
- 2) Apply ethical decision-making models to resolve complex ethical dilemmas.
- 3) Analyze the NAADAC Code of Ethics and its implications for addiction professionals.
- 4) Analyze the NASW Code of Ethics in the context of professional practice.

The American Counseling Association's mission is "to enhance the quality of life in society by promoting the development of professional counselors, advancing the counseling profession, and using the profession and practice of counseling to promote respect for human dignity and diversity." The ACA established a code of professional ethics, values, and principles as a guide for practicing as an effective therapist.

The ACA's professional core values include:

- **enhancing human development** throughout the life span
- **honoring diversity and embracing a multicultural approach** in support of the worth, dignity, potential, and uniqueness of people within their social and cultural contexts
- **promoting social justice**
- **safeguarding the integrity of the counselor-client relationship**
- practicing in a **competent and ethical manner**

These professional values provide a framework for the ethical principles in the following sections. The principles are the foundation for ethical behavior and decision-making.

Citation: American Counseling Association. (2014). ACA code of ethics.
<https://www.counseling.org/resources/aca-code-of-ethics.pdf>

Human development:

In what ways do you adapt your therapeutic approach to support clients' personal development in a manner that's appropriate for their developmental stage?

Multicultural approach:

How do you support diversity in your practice or personal life?

Justice:

How do you ensure that you provide equitable treatment to all clients, regardless of their background, identity, or financial situation?

Fidelity:

How do you demonstrate trustworthiness in your professional relationships?

Have you ever struggled to maintain a commitment to a client? ____Y ____N

If so, how did you handle it? _____

Veracity:

How do you approach situations where honesty might be difficult or uncomfortable in therapy? _____

Reflect on a time when telling the truth was especially important in a session?

The ACA's fundamental principles of professional ethical behavior are:

- **autonomy**, or fostering the right to control the direction of one's life
- **nonmaleficence**, or avoiding actions that cause harm
- **beneficence**, or working for the good of the individual and society by promoting mental health and well-being
- **justice**, or treating individuals equitably and fostering fairness and equality
- **fidelity**, or honoring commitments and keeping promises, including fulfilling one's responsibilities of trust in professional relationships
- **veracity**, or dealing truthfully with individuals with whom counselors come into professional contact

QUESTIONS FOR REFLECTION

Autonomy:

How can you balance respecting a client's autonomy while also offering guidance when you believe they are making harmful choices?

Nonmaleficence:

Have you ever been in a situation where your actions (or inaction) could have unintentionally caused harm to a client?

____ Yes ____ No

If so, how did you respond, and what did you learn from it?

Beneficence:

In what ways do you actively promote your clients' wellbeing beyond the therapy room?

How do you ensure that your work benefits both individuals and society?

Justice:

How do I ensure that I treat all clients equitably, regardless of their background, identity, or personal circumstances?

Fidelity:

How do I support clients in ways that uphold their dignity and autonomy while remaining committed to their best interests?

Veracity:

How do I navigate situations where complete honesty might cause distress or harm to a client?

Ethical Dilemmas

The Counseling Relationship

Confidentiality vs. Cultural Considerations

A counselor, Alex, is working with a 17-year-old client, Maria, who comes from a culturally conservative family. Maria has been struggling with depression and anxiety, partly due to her family's strict expectations and pressure to conform to traditional gender roles.

During a session, Maria discloses that she has been questioning her sexual orientation but fears her family's reaction if they were to find out. She explicitly asks Alex not to share this information with her parents, as she believes it could lead to rejection or even being forced to leave home.

However, Maria's parents have been actively involved in her therapy and frequently request updates on her progress. They believe that as her legal guardians, they have the right to know what is discussed in sessions. They have also expressed concern about Maria seeming more withdrawn at home and have started pressing Alex for more details.

Ethical Questions for Consideration:

•**Confidentiality vs. Parental Rights:** How should Alex balance Maria's right to confidentiality with her parents' legal rights and concerns for her well-being? _____

•**Cultural Sensitivity:** How might Maria's cultural background influence her fear of disclosure? How should Alex approach the situation in a culturally competent way?

Trust & Client Welfare: How can Alex maintain trust with Maria while also ensuring her safety and mental health needs are met?

Limits of Confidentiality: Under what circumstances, if any, would Alex be justified in breaking confidentiality?

Ethical Decision-Making: What steps should Alex take to navigate this situation ethically, based on the ACA Code of Ethics?

Confidentiality & Privacy

Boundary Crossing vs. Client Trust

Jordan, a licensed counselor, has been working with Chris, a 32-year-old client struggling with social anxiety and low self-esteem. Over the course of therapy, Chris has made significant progress in developing confidence and social skills.

One day, while Jordan is out grocery shopping, they unexpectedly run into Chris, who excitedly approaches them. Chris expresses gratitude for the impact therapy has had and asks if they can chat for a few minutes. Chris also mentions that they would love to connect on social media to "stay inspired" by Jordan's insights outside of sessions.

Jordan feels torn. They want to honor the therapeutic relationship and maintain trust, but they also recognize that interacting socially or online could blur professional boundaries. If Jordan refuses, they worry that Chris might feel rejected or lose trust in the therapeutic alliance.

Ethical Questions for Consideration:

Maintaining Boundaries: How should Jordan respond to Chris's request while ensuring appropriate professional boundaries?

Trust & Therapeutic Relationship: Would declining to engage in conversation or connect on social media harm the client's trust in the counselor?

Cultural Competency: How might cultural differences influence Chris's expectations about counselor-client relationships? _____

Confidentiality Risks: What are the potential risks of engaging with a client outside of therapy, even in a casual setting? _____

Ethical Decision-Making: How can Jordan uphold ethical standards while also preserving the therapeutic alliance? _____

Professional Responsibility

Advocacy vs. Professional Boundaries

Taylor, a licensed counselor, works at a community mental health clinic that serves a diverse population, including low-income clients. Over time, Taylor notices that several of their clients, particularly those from marginalized communities, are struggling to access mental health services due to systemic barriers such as high copays, transportation difficulties, and long waitlists.

Taylor is passionate about advocating for better mental health care access and decides to write a blog post about the clinic's challenges, calling for systemic change. In the post, they share anonymized stories of client struggles to highlight the issue. The blog post gains traction on social media, and a local journalist reaches out, asking Taylor to discuss these concerns in an interview.

However, Taylor's supervisor expresses concern that speaking publicly about the clinic's issues could reflect poorly on the organization and potentially violate professional ethics. The supervisor reminds Taylor that counselors have a duty to their clients but must also uphold professional integrity and ensure accurate, responsible communication with the public.



Ethical Questions for Consideration:

Advocacy vs. Professional Responsibility: How can Taylor advocate for systemic change while maintaining professional integrity and their responsibility to the clinic? _____

Confidentiality & Client Welfare: Even though client details were anonymized, could sharing their experiences publicly create ethical concerns? _____

Nondiscrimination & Access to Care: What ethical obligations does Taylor have to advocate for clients facing barriers to mental health services? _____

Professional Boundaries: Is it appropriate for Taylor to discuss internal clinic challenges publicly, or should they seek other avenues for advocacy? _____

Ethical Decision-Making: How can Taylor balance their role as a counselor with their duty to promote broader systemic changes in mental health care? _____

Relationships With Other Professionals

Collaboration vs. Professional Conflict

Riley, a licensed counselor, works at a community mental health center and often collaborates with other professionals, including social workers and psychiatrists, to provide comprehensive care for clients. One of Riley's colleagues, Dan, is another counselor at the center who has been handling a high caseload and seems increasingly burned out.

Lately, Riley has noticed that Dan has been missing important client details in documentation, arriving late to sessions, and making dismissive remarks about clients in team meetings. One of Riley's clients, who previously saw Dan, expressed feeling invalidated and unheard during their sessions.

Riley is concerned that Dan's behavior may be affecting the quality of client care but doesn't want to damage their working relationship or create workplace tension. Riley also knows that reporting a colleague's potential ethical violations is a serious matter and should not be done lightly.



Ethical Questions for Consideration:

Client Welfare vs. Collegiality: How can Riley address concerns about Dan's professional conduct while maintaining a collaborative and respectful working relationship?

Duty to Clients: What responsibility does Riley have to ensure that clients receive competent care, even when concerns involve a colleague? _____

Professional Communication: What would be the best way for Riley to initiate a conversation with Dan about these concerns?

Reporting Ethical Violations: At what point does Riley have an ethical obligation to escalate the issue to a supervisor or licensing board? _____

Workplace Dynamics: How might addressing this issue impact Riley's relationship with Dan and the broader team, and how should Riley navigate this professionally? _____

Evaluation, Assessment, & Interpretation

Culturally Biased Assessment vs. Client Wellbeing

Sam, a licensed counselor, is working with Luis, a 17-year-old high school student who recently immigrated to the U.S. with his family. Luis has been struggling academically and socially, and his school has requested a psychological assessment to determine whether he has a learning disability.

Sam administers a standardized cognitive and academic assessment commonly used in the U.S. education system. However, during testing, Luis seems confused by some of the questions and struggles with sections that rely on cultural knowledge he may not have been exposed to. His parents, who primarily speak Spanish, express concerns about whether the test fairly represents Luis's abilities.

When reviewing the results, Sam notices that Luis scored significantly lower than expected, but Sam is unsure whether this reflects an actual learning disability or if cultural and language barriers affected his performance. The school is eager to move forward with an Individualized Education Plan (IEP) based on the results, but Sam is hesitant, knowing that an inaccurate assessment could impact Luis's future academic opportunities.

Ethical Questions for Consideration:

Cultural Fairness: How can Sam ensure that the assessment results are not biased against Luis due to cultural or linguistic differences? _____

Client Wellbeing: Should Sam advocate for additional culturally appropriate assessments, even if it delays the school's intervention plan? _____

Informed Decision-Making: How should Sam communicate the potential limitations of the assessment to the school and Luis's family in a way that respects their concerns? _____

Alternative Approaches: What steps can Sam take to supplement the assessment with other tools or observations that may provide a more accurate picture of Luis's abilities?

Ethical Decision-Making: How can Sam balance professional responsibilities to the client, the school, and ethical standards in psychological assessment? _____

Supervision, Training, & Teaching Dual Relationships in Supervision



Dr. Avery, a licensed counselor and clinical supervisor, oversees Jamie, a graduate student completing their internship at a community counseling center. Throughout the semester, Dr. Avery has been providing Jamie with regular feedback and recognizes that Jamie has strong clinical skills but struggles with self-confidence in sessions.

One evening, Jamie sends Dr. Avery a friend request on social media and a message thanking them for their support. Jamie also shares that they've been feeling overwhelmed and would love to grab coffee outside of supervision to talk informally. Dr. Avery values a supportive supervisory relationship and wants to foster a positive learning environment, but they also know that dual relationships can be ethically complicated.

Additionally, Dr. Avery is aware that they will be responsible for evaluating Jamie's performance at the end of the semester, which could impact Jamie's ability to graduate. Dr. Avery wonders whether meeting informally or engaging on social media would blur professional boundaries and create an ethical conflict.



Ethical Questions for Consideration:

Maintaining Professional Boundaries: Would accepting Jamie's friend request or meeting for coffee compromise the supervisor-supervisee relationship?

Dual Relationships: How can Dr. Avery balance being supportive while maintaining ethical and professional integrity?

Fair & Honest Evaluation: Could forming a more personal relationship with Jamie influence Dr. Avery's ability to fairly assess their performance?

Social Media Ethics: How should supervisors handle social media interactions with students and supervisees?

Alternative Approaches: What are ethical ways Dr. Avery can support Jamie's concerns while keeping appropriate boundaries?

Research & Publication

Research Bias vs. Ethical Responsibility

Dr. Taylor, a counselor and researcher, is conducting a study on the effectiveness of a new mindfulness-based intervention for reducing anxiety in marginalized communities. To ensure a robust sample, Dr. Taylor partners with a local mental health clinic that primarily serves low-income clients of diverse racial and ethnic backgrounds.

During the study, Dr. Taylor notices that participants from certain cultural backgrounds are not responding as positively to the intervention as others. Concerned that these findings might complicate the publication process or reduce interest in the intervention, Dr. Taylor considers omitting or de-emphasizing the data from these participants to make the results appear more universally effective.

At the same time, Dr. Taylor is aware that accurately representing the findings, even if they show disparities, is crucial for ethical research. However, they worry that reporting these complexities could reduce future funding opportunities and limit the intervention's implementation.

Ethical Questions for Consideration:

Integrity in Research: Is it ethical for Dr. Taylor to omit or downplay findings that do not align with the desired outcome of the study?

Bias in Research: How can Dr. Taylor ensure that the study is designed and reported in a way that respects diversity and minimizes bias?

Professional Responsibility: What obligation does Dr. Taylor have to accurately report findings, even if they challenge the effectiveness of the intervention?



Impact on Clients: Could misrepresenting or omitting data lead to harm if the intervention is implemented without fully understanding its limitations?

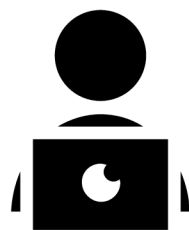
Balancing Advocacy & Ethics: How can Dr. Taylor promote research that supports marginalized communities while also maintaining ethical integrity in reporting results?

Distance Counseling, Technology, & Social Media **Confidentiality Risks in Telehealth Counseling**

Harper, a licensed counselor, recently began offering telehealth services to expand access for clients in rural areas. While Harper has received some training on distance counseling, they are still learning about best practices for ensuring confidentiality and security.

One of Harper's clients, Max, is experiencing significant distress and discloses personal details about a high-conflict relationship during an online session. Midway through, Harper notices that Max is in a shared living space, with someone walking in the background. Harper asks Max if they are alone, but Max quickly changes the subject.

Concerned about confidentiality, Harper debates whether to continue the session, knowing that Max may not have access to a fully private space. At the same time, Harper doesn't want to risk invalidating Max's need for support. Additionally, Harper worries about potential breaches in confidentiality due to the client's location and whether the online platform they are using is fully compliant with legal and ethical telehealth standards.



Ethical Questions for Consideration:

Client Confidentiality: Should Harper continue the session knowing that Max may not be in a private or secure environment?

Informed Consent: How can Harper ensure that clients fully understand the risks of discussing sensitive topics in non-private settings? _____

Ethical & Legal Compliance: What steps should Harper take to ensure that their telehealth platform and practices meet professional ethical and legal standards? _____

Balancing Access & Security: Should Harper limit telehealth sessions to clients who can guarantee privacy, even if it means reducing accessibility for some individuals? _____

Crisis Considerations: If Max is in a potentially unsafe situation, what ethical responsibilities does Harper have to intervene while still respecting Max's autonomy? _____

Resolving Ethical Issues

Reporting a Colleague's Ethical Violation

Lee, a licensed professional counselor, has recently learned that their colleague, Dr. Smith, has been engaging in questionable ethical practices. A client confided in Lee that Dr. Smith frequently shortens sessions without adjusting billing and has made comments that seemed dismissive of the client's cultural background.

Lee is conflicted. Reporting Dr. Smith could strain their professional relationship and potentially impact workplace dynamics. However, Lee recognizes that client welfare and trust in the profession are at stake. Lee considers addressing the concerns directly with Dr. Smith, but they worry about how their colleague will respond.

At the same time, Lee feels uncertain about whether the issue is serious enough to report to a supervisor or an ethics board. Lee wants to act ethically but is unsure of the best course of action.

Ethical Questions for Consideration:

Responsibility to Clients: Does Lee have an ethical duty to report Dr. Smith's behavior to protect clients from harm?

Direct Communication vs. Formal Reporting: Should Lee attempt to address the concerns directly with Dr. Smith first, or should they immediately seek consultation with a supervisor? __

Professional Integrity: How can Lee balance maintaining a professional working relationship with ensuring ethical standards are upheld? _____

Severity of the Violation: At what point does an ethical concern become serious enough to warrant formal action? _____

Consultation & Support: What resources or professional guidance should Lee seek before deciding?

Source: <https://www.counseling.org/resources/ethics>



NAADAC's Code of Ethics

Like the ACA, NAADAC (The Association for Addiction Professionals) has an ethical code. NAADAC recommends considering the following when making ethical decisions:

Citation: National Association of Social Workers. (2021). Code of ethics of the National Association of Social Workers. NASW Press. <https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English>

- **Autonomy:** To allow each person the freedom to choose their own destiny.
- **Obedience:** The responsibility to observe and obey legal and ethical directives.
- **Conscientious Refusal:** The responsibility to refuse to carry out directives that are illegal and/or unethical.
- **Beneficence:** To help others.
- **Gratitude:** To pass along the good that we receive to others.
- **Competence:** To possess the necessary skills and knowledge to treat the clientele in a chosen discipline and to remain current with treatment modalities, theories and techniques.
- **Justice:** Fair and equal treatment, to treat others in a just and fair manner.
- **Stewardship:** To use available resources in a judicious and conscientious manner; to give back.
- **Honesty and Candor:** To tell the truth in all dealing with clients, colleagues, business associates and the community.
- **Fidelity:** To be true to your word, keeping promises and commitments
- **Loyalty:** The responsibility to not abandon those with whom you work
- **Diligence:** To work hard in the chosen profession, to be mindful, careful and thorough in the services delivered
- **Discretion:** Use of good judgment, honoring confidentiality and the privacy of others
- **Self-improvement:** To work on professional and personal growth to be the best you can be
- **Non-maleficance:** Do no harm to the interests of the client
- **Restitution:** When necessary, make amends to those who have been harmed or injured
- **Self-interest:** To protect yourself and your personal interests.

Source: <https://www.naadac.org/code-of-ethics>



CHAPTER SUMMARY

This chapter explored the ethical codes governing counselors, addiction professionals, and social workers, while also presenting ethical dilemmas that challenged critical thinking skills.

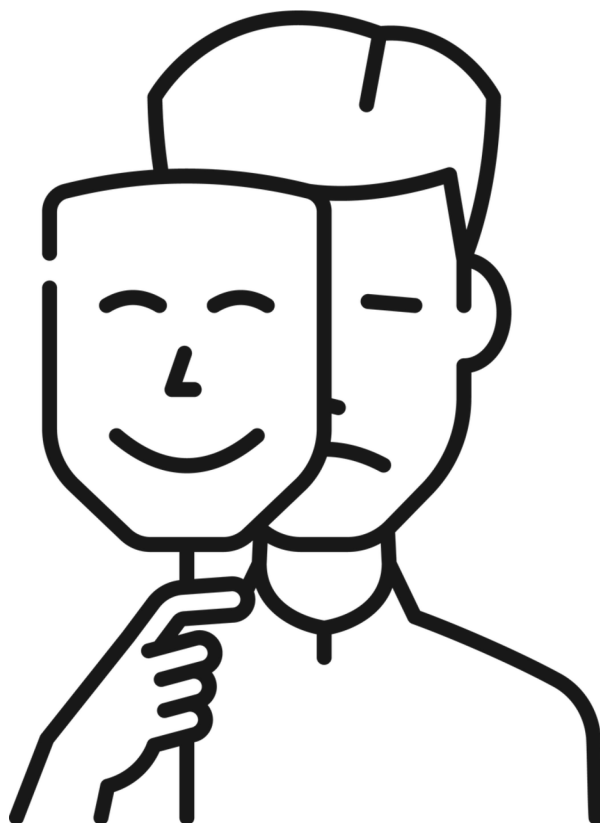
CHAPTER 4: IMPOSTER SYNDROME

LEARNING OBJECTIVES

- 1) Define and understand imposter syndrome, including its key characteristics.
- 2) Examine the imposter cycle and identify different types of imposter experiences.
- 3) Reflect on and assess your own imposter tendencies through self-exploration.
- 4) Analyze the underlying causes of imposter syndrome and apply strategies to overcome it.

What Is Imposter Syndrome?

“An imposter is a person who pretends to be someone else, typically to deceive others. Essentially, an imposter is someone who is not who they claim to be. This can involve various forms of deception, from simple impersonation to complex schemes.” (AI-generated definition)



Imposter syndrome is characterized by a persistent feeling of inadequacy, despite achievement. Individuals experiencing imposter syndrome often struggle with self-doubt and have difficulty internalizing their accomplishments, attributing them to luck or timing rather than their own abilities (Bravata et al., 2020). Mistakes are viewed as personal failures rather than setbacks or minor obstacles.

While not a formal mental health diagnosis, imposter syndrome can contribute to or exacerbate conditions like anxiety, depression, and stress (El-Ashry et al., 2024).

Workplace research indicates a link between imposter syndrome and difficulties maintaining work-life balance, potentially contributing to higher rates of burnout (Bravata et al., 2020). Imposter syndrome can affect anyone, but it's more prevalent among women and in marginalized groups (Huecker, Shreffler, McKeny, & Davis, 2023). It's common, particularly among women, to feel unprepared for a challenge unless they are fully equipped. Research indicates that while men tend to apply for jobs when they meet just 60% of the qualifications, women typically wait until they meet nearly all the requirements. Similarly, women often hesitate to seek promotions, believing they must be thoroughly prepared before taking the next step, whereas many men confidently step forward, trusting they can handle obstacles as they arise (*Psychology Today*, (n.d.)). Imposter syndrome also is more common in younger individuals, with rates tending to decrease with age.

Imposter syndrome is highly prevalent among students in healthcare professions (Huecker, Shreffler, McKeny, & Davis, 2023). Younger counseling graduates are particularly susceptible to imposter syndrome. Entering the field with limited professional and life experience can be daunting. Furthermore, the intangible nature of therapeutic work—unlike mending a physical wound—often leaves new counselors questioning their effectiveness. Without concrete, immediate evidence of positive impact, they may struggle with self-doubt, wondering if their interventions are even helpful, or worse, potentially detrimental.

Have you ever felt like a fraud? ____ Yes ____ No

The imposter cycle describes a pattern that occurs when someone with imposter syndrome faces an achievement-related task. Their response typically falls into one of two extremes: over-preparation or procrastination.

The over-preparer believes they must work harder than others to achieve the same outcome. This excessive effort reinforces the false perception that their success is not due to ability but rather to overcompensation—further fueling feelings of being an imposter.

The procrastinator, on the other hand, delays the task until the last minute, leading to rushed preparation. This reinforces their fear of being exposed as a fraud because they attribute any success to luck or last-minute effort rather than skill or competence.

Although both types may feel a temporary sense of accomplishment upon completing the task, they struggle to internalize their success. As a result, the cycle repeats itself, reinforcing self-doubt and imposter feelings (Huecker, Shreffler, McKeny, & Davis, 2023).

Research suggests that there are five different subtypes of imposters:

The perfectionist: Driven by an unrelenting need for flawlessness, this type equates anything less than perfect with failure. Their harsh self-criticism and the inherent impossibility of achieving perfection lead to persistent self-doubt and a sense of inadequacy. This fear of imperfection can also cause them to avoid new challenges and opportunities for growth.

The expert: This type of impostor feels like a fraud because they believe true expertise requires knowing everything about a subject. They feel compelled to master every detail and step in the process to be considered legitimate. When they encounter gaps in their knowledge or realize there is still more to learn, they see it as a personal failure rather than a natural part of growth.

The natural genius: This type experiences imposter syndrome when faced with challenges that don't come easily. Accustomed to mastering new skills or concepts with apparent ease, they doubt their inherent abilities when this natural fluency falters. They may feel like a fraud, questioning their intelligence and competence. The belief that truly capable individuals should effortlessly grasp anything leads to feelings of failure when they struggle, reinforcing their sense of being an imposter.

The soloist: This imposter type equates needing assistance with weakness or failure. Accustomed to self-reliance, they feel inadequate when forced to seek help, viewing it as an admission of incompetence. The belief that true success comes from independent achievement makes asking for support a source of shame and reinforces their imposter feelings.

The superhero: Driven by a relentless pursuit of excellence, this type experiences feelings of failure whenever they fall short of their exceptionally high standards. They invest tremendous effort, driven by the fear that anything less equates to inadequacy. Striving to excel in every aspect of their lives, they push themselves to the limit, yet still grapple with the nagging feeling that they aren't doing enough.



QUESTION FOR REFLECTION

Which of the imposter types do you relate to the most? _____

SELF-ASSESSMENT: Imposter Syndrome

Use the following scale to answer the questions below:

1=Rarely or Never 2=Sometimes 3=Frequently or Always

I work excessively hard to prove myself. _____

I feel incompetent at school or work. _____

I'm a perfectionist. _____

I'm afraid others will find out that I don't know what I'm doing. _____

My achievements are attributed to luck or timing. _____

I doubt myself and my abilities. _____

I struggle to accept praise or compliments. _____

I have a fear of being exposed as a fraud. _____

I don't measure up to my colleagues or peers. _____

I avoid trying new things for fear of failure. _____

TOTAL: _____

If you scored 21 or higher, you may have imposter syndrome.

Take an online interactive (self-scoring) test from

Psychology Today for imposter syndrome:

[https://www.psychologytoday.com/us/tests/personality/imposter-syndrome-test?](https://www.psychologytoday.com/us/tests/personality/imposter-syndrome-test?msockid=3e6392a403796a801c6d870402256b00)

[msockid=3e6392a403796a801c6d870402256b00](https://www.psychologytoday.com/us/tests/personality/imposter-syndrome-test?msockid=3e6392a403796a801c6d870402256b00)



What Causes Imposter Syndrome?

According to *Psychology Today*, “Up to a third of high achievers may think they are frauds, and about two-thirds of adults have experienced this feeling at one point in their lives.”

Imposter syndrome doesn’t stem from a single cause but is influenced by various factors. Personality traits like perfectionism and neuroticism (characterized by self-doubt, worry, and irritability) can contribute to it. It’s common, particularly among women, to feel unprepared for a challenge unless they are fully equipped. Research indicates that while men tend to apply for jobs when they meet just 60% of the qualifications, women typically wait until they meet nearly all the requirements. Similarly, women often hesitate to seek promotions, believing they must be thoroughly prepared before taking the next step, whereas many men confidently step forward, trusting they can handle obstacles as they arise. A competitive upbringing, especially with high parental expectations, may also play a role. Additionally, attachment styles, cultural influences, and religious beliefs can shape feelings of self-doubt and inadequacy. These factors interact in complex ways, reinforcing the persistent fear of being exposed as a fraud despite evident success (LaPalme, Luo, Cipriano, & Brackett, 2022).

Overcoming Imposter Syndrome

Emotion regulation and cognitive restructuring both play a role in overcoming imposter syndrome (LaPalme, Luo, Cipriano, & Brackett, 2022). Emotion regulation refers to the processes individuals use to influence, manage, or modify their emotional experiences and expressions. It involves recognizing, understanding, and controlling emotions in ways that help achieve personal goals, maintain well-being, and adapt to social or environmental demands.

Cognitive restructuring is a process used to help individuals identify, challenge, and modify distorted or unhelpful thoughts. The goal is to replace negative thinking patterns with more balanced, rational, and constructive thoughts, leading to healthier emotional and behavioral responses.

Key steps in cognitive restructuring include:

- Identifying negative or irrational thoughts (e.g., “I’m a failure.”)
- Examining the evidence for and against the thought
- Challenging cognitive distortions (e.g., all-or-nothing thinking, catastrophizing)
- Developing more balanced, realistic thoughts (e.g., “I made a mistake, but I can learn from it.”)
- Practicing and reinforcing new thinking patterns

QUESTIONS FOR REFLECTION

Do you set unrealistic expectations for yourself? _____ Yes _____ No

If so, what would a more balanced expectation look like? _____

What strategies can you use to reframe self-doubt when it arises? _____

How can you celebrate your achievements, big or small, without downplaying them? _____



CHAPTER SUMMARY

This chapter explored imposter syndrome and its connection to persistent self-doubt despite accomplishments. It examined how individuals often credit success to luck while perceiving mistakes as personal failures. Research indicates that imposter syndrome is associated with anxiety, burnout, and work-life imbalance, especially among younger professionals and marginalized groups. The chapter identified common imposter subtypes and analyzed contributing factors such as personality traits, upbringing, and cultural influences. Finally, it introduced strategies for overcoming imposter syndrome.

CHAPTER 5: BURNOUT & COMPASSION FATIGUE

LEARNING OBJECTIVES

- 1) Define and differentiate between burnout and compassion fatigue.
- 2) Identify risk factors that contribute to burnout and compassion fatigue.
- 3) Recognize early warning signs of emotional and physical exhaustion related to burnout and compassion fatigue.
- 4) Examine the effects of burnout and compassion fatigue on professional effectiveness and personal life.

What Is Burnout?

“Burn-out is a syndrome conceptualized as resulting from chronic workplace stress that has not been successfully managed. It is characterized by three dimensions:

- feelings of energy depletion or exhaustion;
- increased mental distance from one’s job, or feelings of negativism or cynicism related to one’s job; and
- reduced professional efficacy” (World Health Organization, 2019).

Burnout negatively impacts your physical and emotional health, including cardiovascular problems, pain, sleep issues, and depression (Norwegian University of Science and Technology, 2024).

Research suggests that burnout often stems from a misalignment between an individual’s unconscious needs and the demands and opportunities presented in the workplace. These mismatches can significantly elevate the risk of burnout, with greater disparities leading to higher susceptibility (Brandstätter, Job, & Schulze, 2016).

Stress and excessive workload are major contributors to burnout, and research indicates that stress and burnout reinforce each other. Increased stress leads to burnout, which, in turn, intensifies stress. Symptoms of burnout in the workplace include exhaustion, cynicism, and diminished performance (Johannes Gutenberg Universität Mainz, 2020).

Perfectionism, which is linked to imposter syndrome, is a known risk factor for burnout (Hill & Curran, 2016). Burnout also has a strong association with depression—one study found that 90% of participants experiencing burnout also met the criteria for depression (Bianchi, Schonfeld, & Laurent, 2014). Additionally, burnout is closely tied to depersonalization and a diminished sense of personal accomplishment (Swider & Zimmerman, 2010).

More recently, researchers found that employees experiencing information overload and a persistent fear of missing out on critical updates were at a higher risk of burnout and mental health challenges (Marsh, Perez Vallejos, & Spence, 2024).

“Gallup analysis has shown that career wellbeing -- liking what you do every day -- has the strongest impact on overall wellbeing. People with high career wellbeing are more than twice as likely to be thriving in their life overall” (Pendell, 2022).

“Unfortunately, thriving career wellbeing is not the norm. **Only 20% of employees strongly agree that they like what they do every day.** And even more feel chronically burned out: *28% of U.S. employees say they feel burned out at work very often or always*” (Pendell, 2022).

SELF-ASSESSMENT: Burnout Symptoms Checklist

Check the symptoms below that apply to you:



Emotional Symptoms

- ☐ Persistent feelings of exhaustion or fatigue
- ☐ Increased irritability or frustration
- ☐ Feelings of detachment or cynicism
- ☐ Decreased motivation or sense of purpose
- ☐ Frequent mood swings or emotional outbursts
- ☐ Increased feelings of anxiety or depression
- ☐ Projection of anger or blame
- ☐ Lowered functioning in nonprofessional situations

Cognitive Symptoms

- ☐ Difficulty concentrating or making decisions
- ☐ Forgetfulness or mental fog
- ☐ Decreased creativity or problem-solving abilities
- ☐ Negative or self-critical thinking
- ☐ Whirling thoughts
- ☐ Decreased self-esteem
- ☐ Feeling overwhelmed by responsibilities
- ☐ Loss of meaning
- ☐ Preoccupation with trauma

(cont. on the following page)

Physical Symptoms

- ☐ Frequent headaches or muscle tension
- ☐ Changes in appetite (overeating or loss of appetite)
- ☐ Sleep disturbances (insomnia or excessive sleeping)
- ☐ Increased susceptibility to illnesses (weakened immune system)
- ☐ Gastrointestinal issues (stomach pain, nausea, or bloating)

Behavioral Symptoms

- ☐ Accident proneness
- ☐ Withdrawal from work or social interactions
- ☐ Increased use of alcohol, drugs, or unhealthy coping mechanisms
- ☐ Avoiding responsibilities or procrastinating frequently
- ☐ Losing things
- ☐ Decreased productivity and performance
- ☐ Self-harm behaviors
- ☐ Irritability or impatience with colleagues, clients, or family members
- ☐ Clingy
- ☐ Nightmares
- ☐ Hypervigilance

Work-Related Symptoms

- ☐ Loss of enthusiasm or passion for work
- ☐ Feeling unappreciated or undervalued
- ☐ Increased errors or mistakes in work tasks
- ☐ Difficulty setting boundaries between work and personal life
- ☐ Considering quitting or changing jobs frequently

If you checked multiple symptoms, it may be a sign that you're experiencing burnout.

Risk Factors & Warning Signs

According to Gallup (2020), the top five contributors to burnout are:

1) Unfair treatment at work

2) Unmanageable workload

- Unclear communication from managers
- Lack of manager support
- Unreasonable time pressure

The Toll of a Toxic Workplace: It's Not Worth Sticking It Out

Have you ever worked in an environment where blame is the default response? Where fear stifles employees, making them hesitant to speak up or share ideas? A toxic workplace can be emotionally exhausting, contributing to stress, anxiety, and, ultimately, burnout.

One of the biggest drivers of workplace burnout is toxic leadership. A toxic boss may feel threatened by your competence, constantly highlighting your mistakes while taking credit for your achievements. They might micromanage, dismiss your ideas, and foster an environment where employees feel undervalued, powerless, and trapped.

If you're stuck in a job where toxicity is the norm, burnout is almost inevitable. Prioritizing your mental health and well-being is essential. This could mean practicing self-care, setting firm boundaries, or—if possible—seeking a new opportunity, even if it requires financial sacrifices. No paycheck is worth enduring a workplace that steadily erodes your confidence and energy. If you're not thriving at work, it may be a sign that it's time to move on.

Collecting Badges

Before becoming a clinical supervisor, I completed several training courses on clinical supervision. I was surprised by the strong emphasis on self-care—something I hadn't given much thought to before. At the time, I had a supportive supervisor, a healthy work-life balance, and minimal exposure to extreme workplace toxicity.

Since then, I've come to understand why self-care is essential for therapists. An impaired therapist is not only less effective but also at risk of causing harm. Prioritizing wellbeing isn't just a personal necessity—it's an ethical responsibility. As a gatekeeper, I have a duty to safeguard the wellbeing of my clients, my supervisees' clients, and even future clients who have yet to walk through the door. If a resident counselor is struggling to detach from work or meet their basic needs, it's a red flag. Without awareness and intervention, their effectiveness—and ultimately, their clients' welfare—may be at risk.

In one of my supervision classes, the facilitator played a TEDTalks clip.. I can't recall the speaker's name or their exact words, but the message struck a chord. The speaker described a particular type of burnout—the kind where we "collect badges." You can also think of it as wearing a cape. Some of us take on more than we can handle, but instead of recognizing the danger, we wear it like a badge of honor.

Covering an overnight shift when I was already sleep-deprived and unwell? *That earned me a badge.* An award. And those badges became justifications for continued self-neglect: I worked so hard—*I deserve this extra glass of wine. I deserve this extra slice of cake.* Over time, this mindset became part of my identity. I saw myself as the one who could handle anything—the person who never took off the cape.

But in reality, none of us are invincible. We may not even recognize when we're burned out because we've convinced ourselves that we're above the need for self-care. The more badges we collect, the easier it becomes to excuse unhealthy behaviors. And the deeper this mindset takes root, the harder it is to recognize when we've reached a breaking point. We start to believe we're superheroes.

Don't collect badges. It's not worth it. And remember to take off the cape when you get home each day. You're human. Humans need nourishment—physically, emotionally, and spiritually. You sustain yourself through regular self-care, not by pushing yourself beyond your limits and calling it an achievement.

By the time you realize you're beyond burned out, recovery may not be as simple as taking a weekend off. You may need to step away from helping others until you're able to care for yourself again.



My moment of reckoning came when I was driving home from work one day and found myself wishing I'd get into a minor car accident—nothing major, just enough to land me in the hospital for a few days so I could finally rest. That was when I realized my way of thinking wasn't normal. It forced me to take self-care seriously.

Taking on more than you can handle and neglecting yourself in the process doesn't make you a better employee or a good counselor. It makes you *less* effective. That's why the emphasis on self-care in clinical supervision is so critical.

Resilience is a protective factor against burnout. The definition of resilience is “the capacity to recover quickly from difficulties” ([Oxford Dictionary](#)).

Do you consider yourself a resilient person? ☐ Yes ☐ No

Traits that foster resilience:

Adaptability
Faith/understanding the meaning and one's purpose
Positive outlook
Skills and talents that are valued by self and community
General acceptance by others

Environments that foster resilience:

Public safety
Availability of health care
Access to green spaces
Prosocial organizations such as sports teams or clubs



Fortunately, resilience is not a fixed personality trait that you either have or don't. It's something you can develop and foster by practicing self-care and self-compassion.

What Is Compassion Fatigue?

Compassion fatigue is the emotional and physical exhaustion that can result from prolonged exposure to the suffering of others, often leading to a decreased ability to empathize or feel compassion. It is sometimes referred to as secondary traumatic stress and primarily affects professionals in caregiving roles, such as therapists, healthcare workers, social workers, and first responders. Dr. Rachel Gallardo defined compassion fatigue as “that state of mental exhaustion where you care about the work you are doing for people around you but you don't have the energy and/or motivation to actually do something about it. You are emotionally detached from the situation and it's hard to rally yourself to help these individuals or pursue the items necessary for you to meet personal and/or professional goals” (Southwick & Charney, 2021).



Compassion Fatigue vs. Burnout

Burnout and compassion fatigue are both forms of exhaustion, but they stem from different causes. Burnout results from prolonged workplace stress and is marked by exhaustion, cynicism, and decreased effectiveness. In contrast, compassion fatigue is a more immediate response to the emotional toll of caring for others in distress, often developing suddenly after exposure to intense trauma (Psychology Today, n.d.).

Empathy is essential for professionals in high-stress, emotionally demanding roles—such as military personnel, first responders, humanitarian aid workers, healthcare providers, therapists, domestic abuse advocates, moderators of harmful online content, and journalists covering war and disaster. However, the more these individuals immerse themselves in others' suffering, the greater the risk of internalizing their heartbreak and devastation.

The good news is that compassion fatigue is reversible, whereas burnout, once it takes hold, has long-lasting effects that cannot be undone (Southwick & Charney, 2021). Practicing self-care and self-compassion can help prevent both burnout and compassion fatigue, allowing individuals in these roles to sustain their wellbeing while continuing their vital work.

Preventing and Managing Compassion Fatigue

- **Self-Care & Boundaries** – Prioritizing rest, healthy habits, and work-life balance.
- **Supervision & Peer Support** – Engaging in debriefing or consultation with colleagues.
- **Therapy or Counseling** – Seeking professional support to process secondary trauma.
- **Mindfulness & Self-Compassion** – Practicing awareness and kindness toward oneself.

Self-care is not something you can push into the future. Don't wait until you have more time or fewer obligations. Self-care is not a luxury; it's a necessity. The authors of *Beyond Addiction* (2014) pointed out that self-care is something you have control over when other parts of your life are out of control. We'll delve more into both self-care and self-compassion in the next chapter.

Assess your level of self-compassion on the following page.

Self-Compassion Scale

Citation: Neff, K. D. (2003). Development and validation of a scale to measure self-compassion. *Self and Identity*, 2, 223-250

HOW I TYPICALLY ACT TOWARDS MYSELF IN DIFFICULT TIMES

Please read each statement carefully before answering.

To the left of each item, indicate how often you behave in the stated manner, using the following scale:

1-5 with 1=Almost never 5=Almost always

- ____ 1. I'm disapproving and judgmental about my own flaws and inadequacies.
- ____ 2. When I'm feeling down I tend to obsess and fixate on everything that's wrong.
- ____ 3. When things are going badly for me, I see the difficulties as part of life that everyone goes through.
- ____ 4. When I think about my inadequacies, it tends to make me feel more separate and cut off from the rest of the world.
- ____ 5. I try to be loving towards myself when I'm feeling emotional pain.
- ____ 6. When I fail at something important to me I become consumed by feelings of inadequacy.
- ____ 7. When I'm down and out, I remind myself that there are lots of other people in the world feeling like I am.
- ____ 8. When times are really difficult, I tend to be tough on myself.
- ____ 9. When something upsets me I try to keep my emotions in balance.
- ____ 10. When I feel inadequate in some way, I try to remind myself that feelings of inadequacy are shared by most people.
- ____ 11. I'm intolerant and impatient towards those aspects of my personality I don't like.
- ____ 12. When I'm going through a very hard time, I give myself the caring and tenderness I need.
- ____ 13. When I'm feeling down, I tend to feel like most other people are probably happier than I am.
- ____ 14. When something painful happens I try to take a balanced view of the situation.
- ____ 15. I try to see my failings as part of the human condition.
- ____ 16. When I see aspects of myself that I don't like, I get down on myself.
- ____ 17. When I fail at something important to me I try to keep things in perspective.

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- ___ 18. When I'm really struggling, I tend to feel like other people must be having an easier time of it.
- ___ 19. I'm kind to myself when I'm experiencing suffering.
- ___ 20. When something upsets me I get carried away with my feelings.
- ___ 21. I can be a bit cold-hearted towards myself when I'm experiencing suffering.
- ___ 22. When I'm feeling down I try to approach my feelings with curiosity and openness.
- ___ 23. I'm tolerant of my own flaws and inadequacies.
- ___ 24. When something painful happens I tend to blow the incident out of proportion.
- ___ 25. When I fail at something that's important to me, I tend to feel alone in my failure.
- ___ 26. I try to be understanding and patient towards those aspects of my personality I don't like.

Coding Key

Self-kindness Items: 5, 12, 19, 23, 26

Self-judgment Items: 1, 8, 11, 16, 21

Common humanity items: 3, 7, 10, 15

Isolation items: 4, 13, 18, 25

Mindfulness items: 9, 14, 17, 22

Over-identified items: 2, 6, 20, 24

Subscale scores are computed by calculating the mean of subscale item responses. To compute a total self-compassion score, reverse score the negative subscale items before calculating subscale means - self-judgment, isolation, and over-identification (i.e., 1 = 5, 2 = 4, 3 = 3, 4 = 2, 5 = 1) - then compute a grand mean of all six subscale means.

Average scores for the Self-Compassion Scale are around 3.0 on the 1-5 Likert scale, a score of 1-2.5 indicates low self-compassion, 2.5-3.5 indicates moderate, and 3.5-5.0 is an indication of high self-compassion (Neff, 2003a).

Source: <https://positivepsychology.com/self-compassion-scale/#what-is-the-self-compassion-scale-scs-incl-pdf>

Online self-scoring version of the test: <https://self-compassion.org/self-compassion-test/>



CHAPTER SUMMARY

This chapter explored the concepts of burnout and compassion fatigue, their risk factors, symptoms, and their impact on professional and personal wellbeing. The learning objectives focused on defining these conditions, identifying early warning signs, and understanding their effects on effectiveness and overall health.

CHAPTER 6: SELF-CARE & SELF-COMPASSION

LEARNING OBJECTIVES

- 1) Assess your self-care practices and recognize areas for improvement
- 2) Define self-care and self-compassion and explain their importance in maintaining professional effectiveness and personal well-being.
- 3) Identify common barriers to practicing self-care and self-compassion
- 4) Develop a personalized self-care plan that includes physical, emotional, mental, and relational wellbeing strategies
- 5) Practice self-compassion techniques, such as mindfulness, self-kindness, and positive affirmations

In the previous chapter, you assessed your level of self-compassion. Now, let's assess for self-care.

SELF-CARE ASSESSMENT

Score your answer: 0=Rarely or never 1=Sometimes 2=Often 3=Almost always or always

PHYSICAL

- ___ 1) I exercise for 30 minutes or longer at least five days a week.
- ___ 2) I avoid fast food restaurants.
- ___ 3) I drink plenty of water (about half an ounce per pound of body weight) throughout the day.
- ___ 4) I avoid foods and beverages with added sugar (including soda).
- ___ 5) I don't smoke cigarettes or use tobacco products.
- ___ 6) I avoid alcohol or drink moderately (one or fewer drinks per day).
- ___ 7) I don't use recreational drugs or misuse prescription medications.
- ___ 8) I eat multiple servings of fruits and vegetables most days.
- ___ 9) I avoid processed foods.
- ___ 10) I avoid red meat.
- ___ 11) I avoid fried foods.
- ___ 12) I eat moderate portions and don't overindulge.
- ___ 13) I drink black coffee and/or unsweetened tea.
- ___ 14) When taking medication, I take as prescribed (or as directed).
- ___ 15) I see a medical provider for an annual physical exam or as recommended.
- ___ 16) I go to bed and get up around the same time every day.

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___ 17) I have enough energy to complete daily tasks and duties.

___ 18) I take care of myself when ill (e.g., staying home from work/school, getting plenty of rest, going to the doctor, etc.)

Physical TOTAL: _____

EMOTIONAL/SOCIAL

___ 19) I trust and can count on close friends and family members.

___ 20) I talk about the things that are bothering me.

___ 21) I have and use healthy coping skills to manage stress.

___ 22) I am honest and authentic.

___ 23) I treat others with courtesy and respect.

___ 24) I am optimistic.

___ 25) I feel good about myself.

___ 26) I know what my values are and I live my life accordingly.

___ 27) I communicate assertively (not aggressively, passively, or passive aggressively).

___ 28) I (respectfully) express my wants and needs in relationships.

___ 29) I am flexible and adapt in new situations.

___ 30) I can be alone without feeling lonely and I take time to myself when needed.

___ 31) I am able to problem-solve and make effective decisions.

___ 32) I accept feedback in a non-defensive manner.

___ 33) I experience a wide range of emotions, but am not controlled by them.

___ 34) It's okay when others disagree with me.

___ 35) I am not defeated by my mistakes and am able to learn from them.

___ 36) I set and manage realistic expectations for myself and others.

Emotional/Social TOTAL: _____

INTELLECTUAL

___ 37) I spend less than one hour per day watching television.

___ 38) I take on tasks that challenge me.

___ 39) I enjoy my work, a hobby, and/or classes at school.

___ 40) I am open to trying new things.

___ 41) I am open to learning new skills.

___ 42) I read for leisure.

___ 43) I engage in meaningful activities.

___ 44) I have a variety of interests.

___ 45) When given the opportunity, I volunteer to take the lead or work with a group.

___ 46) I keep up with local and/or world news.

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- ___ 47) I am open to traveling to different countries and/or learning about different cultures.
 ___ 48) I single-task (as opposed to giving divided attention to multiple things).
 ___ 49) I have short-term educational, vocational, or intellectual goals.
 ___ 50) I have long-term educational, vocational, or intellectual goals.
 ___ 51) I am able to learn and grow from different perspectives.
 ___ 52) I am able to form my own opinions about things.
 ___ 53) I use critical thinking skills when faced with a dilemma.
 ___ 54) I am curious about many things.

Intellectual TOTAL: _____

SPIRITUAL

- ___ 55) I believe in something greater than myself.
 ___ 56) I meditate or practice mindfulness on a daily basis.
 ___ 57) I regularly spend time outside, in nature, or in green spaces.
 ___ 58) I feel a sense of connection to others, the world, and/or a higher power.
 ___ 59) I engage in religious or spiritual services or practices (including creative expression through art, poetry, dance, music, etc.)
 ___ 60) I pray or journal.
 ___ 61) I believe life is meaningful.
 ___ 62) I believe I have a purpose.
 ___ 63) I enjoy contributing and helping others.
 ___ 64) I hope to leave the world a better place.
 ___ 65) I practice gratitude.
 ___ 66) I am compassionate and empathetic.
 ___ 67) I feel in tune with my body, emotions, desires, and needs.
 ___ 68) I have personal standards and morals in life.
 ___ 69) I am generous.
 ___ 70) I take regular breaks from social media and electronic devices.
 ___ 71) I practice self-compassion and kindness.
 ___ 72) I have a desire to live up to my full potential in life.

Spiritual TOTAL: _____

Add up the points in each section for 4 separate scores, specific to life area, and record them below. The highest you can score for any individual section is 54.

Physical: _____ Emotional/Social: _____ Intellectual: _____ Spiritual: _____

46 or higher = Excellent self-care

31-45 = Above average self-care with some inconsistencies

16-30 = Limited to average self-care with some inconsistencies or deficits

15 or lower = Poor self-care with severe deficits

Which area(s) did you score high? _____
Low? _____

For areas you scored low, consider increasing self-care practices and/or engaging in them more regularly. (To determine specific behaviors to modify/eliminate, refer to any "Rarely or never" responses on the assessment.)

Are there patterns in your self-care habits? ____ Yes ____ No

If so, what are they? (For example, you may consistently exercise and eat well, but ignore medical advice, or you may address emotional needs while neglecting your potential for intellectual growth.) _____

Now, for your overall self-care score, add the totals from each section and record the total below. A higher score indicates better self-care. (Additional scoring information is provided on the following page.)

My Overall Self-Care Score: _____

180 or higher

You have an advanced awareness of and engage in regular self-care, which helps to protect you from burnout and compassion fatigue. Overall, you strive to make healthy choices for yourself to increase your capacity to flourish, although it's not always easy. You generally have a positive regard for yourself and others, along with a desire to thrive and grow. Although at times you are susceptible to burnout or compassion fatigue, you consciously choose not to give into negativity.

135-179

Your self-care is above average. However, there may be one or more areas in which you do not engage in self-care or a single area with severe deficits. While you sometimes make healthy choices for yourself, there is room for improvement.

90-134

You sometimes practice self-care in some areas but are not taking care of yourself in other ways. There may be one or more areas with severe deficits. Strive to take better care of yourself and to be more consistent.

45-89 You are not taking care of yourself or may be causing harm in most life areas. You have unmet or unrecognized needs and wants. There are severe deficits in all or most life areas. When you ignore your self-care needs, you are impaired and cannot be effective as a therapist.

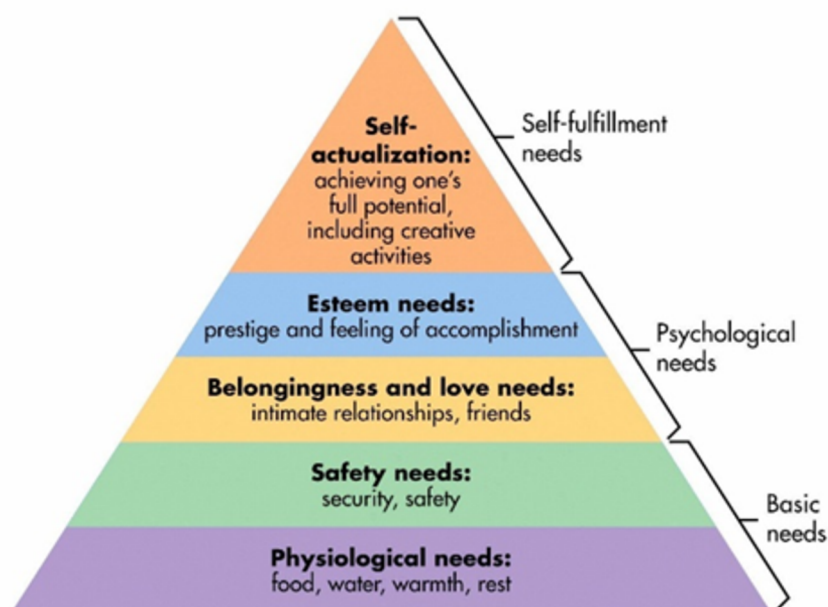
44 or lower

Your self-care is significantly lacking, and some of your most basic needs are going unmet. This not only affects your well-being but may also impact those around you, including your clients. Neglecting self-care can diminish your ability to provide effective counseling. If improving self-care remains a challenge over time, consider seeking professional support. Prioritizing your well-being is essential for both you and the individuals you serve.

You're likely familiar with Maslow's Hierarchy of Needs. "Maslow's hierarchy of needs is a motivational theory in psychology comprising a five-tier model of human needs, often depicted as hierarchical levels within a pyramid. Our most basic needs (physiological needs, e.g., food, water, shelter, etc.) must be met before our psychological/emotional needs can be met. Once those needs are met, a person's self-actualizing needs—realizing personal potential, self-fulfillment, seeking personal growth, and peak experiences—be met beyond self-actualization, they represent the human desire to connect with a higher reality, purpose, or the universe" (Simply Psychology).

Let's borrow from this theory and apply it to self-care. The pyramid on the next page represents Maslow's Hierarchy of needs.

MASLOW'S HIERARCHY OF NEEDS

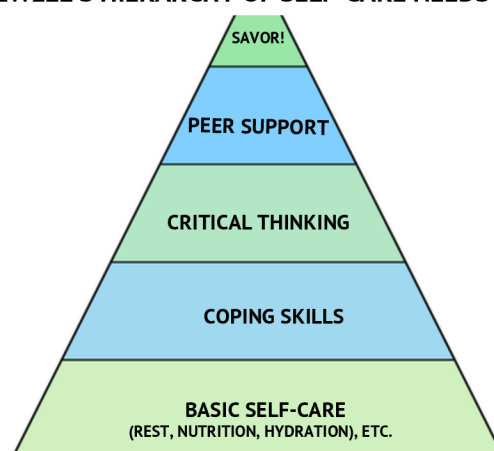


Source: <https://www.simplypsychology.org/maslow.html>

Now let's visualize self-care needs on a hierarchy. The most basic self-care needs are

1. Eat well and stay hydrated
2. Sleep well
3. Exercise enough (stay active)
4. Avoid mood-altering drugs (including alcohol)
5. Treat illness (with medical care, adequate rest, etc.)

JEWELL'S HIERARCHY OF SELF-CARE NEEDS



Jewell's Hierarchy of Self-Care Needs provides a structured approach to self-care, emphasizing the importance of building a strong foundation. **Layer 1: Basic self-care** needs includes essential elements such as adequate sleep, nutrition, hydration, and physical activity. Building upon these fundamental requirements, **Layer 2: Coping skills**, focuses on developing distress tolerance, emotion regulation, and self-soothing techniques such as relaxation and grounding exercises. **Layer 3: Critical thinking**, addresses the importance of challenging irrational thoughts and beliefs. This layer also includes problem-solving and effective decision-making. **Layer 4: Peer support & healthy relationships** highlights the value of professional collaboration and consultation as well as having supportive relationships in our personal lives. Finally, the top tier focuses on *savoring*: treating and pampering ourselves by receiving massages, purchasing new attire, or enjoying relaxing baths. Jewell's Hierarchy of Self-Care Needs outlines a tiered approach to self-care, building from fundamental needs to occasionally treating ourselves.

To illustrate the hierarchy's importance, consider a therapist battling cancer. Purchasing a new outfit will not alleviate the physical and emotional challenges of their illness. Just as a person with a broken leg cannot run a marathon by simply buying new running shoes, a therapist neglecting basic self-care cannot achieve true well-being through superficial pampering alone. By diligently working through each layer of the hierarchy, a therapist cultivates resilience, emotional stability, and a clear perspective, ultimately enabling them to flourish both personally and professionally.

See Appendix 3 for a 'self-care menu' designed to enhance self-care practices.

The Cambridge Dictionary definition of flourishing is "growing or developing successfully" (Cambridge University Press. (n.d.).

Positive psychologist and professor Dr. Lynn Soots (n.d.) described flourishing as the following:

"Flourishing is the product of the pursuit and engagement of an authentic life that brings inner joy and happiness through meeting goals, being connected with life passions, and relishing in accomplishments through the peaks and valleys of life" (Ackerman, 2018).



For more on flourishing, please refer to Appendix 2. To enhance your self-care practices and create a self-care improvement plan, use the template on the following pages.

What are my favorite ways to treat or pamper myself?

SELF-CARE IMPROVEMENT PLAN

1. Physical Self-Care

Taking care of your body through healthy habits and activities.

- **Current Strengths:**
- **(What are you already doing well?)**
 - _____
 - _____
 - _____
 - _____
- **Areas for Improvement:**
- **(What aspects of physical self-care do you want to enhance?)**
 - _____
 - _____
 - _____
 - _____
- **Action Plan & Goals:**
- **(List specific steps you will take to improve physical self-care.)**
 - _____
 - _____
 - _____
 - _____
- **Progress Tracking & Notes:**
- **(Monitor and reflect on your progress.)**

[illegible]

SELF-CARE IMPROVEMENT PLAN (CONT.)

2. Emotional/Social Self-Care

Managing emotions, building supportive relationships, and practicing self-compassion.

- **Current Strengths:**
- **(What are you already doing well?)**
 - _____
 - _____
 - _____
 - _____
- **Areas for Improvement:**
 - _____
 - _____
 - _____
 - _____
- **Action Plan & Goals:**
- **(List specific steps you will take to improve your emotional/social self-care and wellness.)**
 - _____
 - _____
 - _____
 - _____
- **Progress Tracking & Notes:**
- **(Monitor and reflect on your progress.)**

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Engaging in activities that stimulate the mind and encourage growth.

- _____
- _____
- _____
- _____
- _____

- [illegible]

- _____
- _____
- _____
- _____

-
- This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins or other markings on the paper.

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There is a small black dot in the top left corner, likely representing a hole punch or a mark. The paper appears to be a standard notebook page.

SELF-CARE IMPROVEMENT PLAN (CONT.)

What motivates you to improve your self-care?

How will you celebrate your progress?

Commitment Statement:

I commit to taking small, consistent steps toward my self-care improvement plan to enhance my overall wellbeing.

Signature: _____

Date: _____

“I have come to believe that uncaring for myself is not self-indulgent. Caring for myself is an act of survival.”

-Audre Lorde

POWERFUL PRACTICES!

17 Self-Care Ideas for Mental Health Professionals

1) Take small breaks throughout the day. Spend a few moments sitting in silence, browse funny memes, joke with a coworker, or take your lunch outside; by the end of your workday, you won't feel as drained.

2) Meditate. Spend at least 5-10 minutes a day, in the morning or between sessions, meditating or listening to guided imagery recordings.

3) Schedule an appointment weeks in advance for a facial or massage. You'll have something to look forward to!

4) Don't neglect your basic needs. Drink water, choose healthy foods, exercise, and get plenty of sleep. *Don't take your health for granted.* Don't take your body for granted. Do something today that communicates to your body that you desire to care for it. *Tomorrow is not promised.*

5) Reach out to people in your support network. When experiencing burnout, we have a tendency to think we're weak or less capable. We may struggle to admit what we're going through. However, seeking support during these times is more important than ever.

6) Don't bring your work home with you. It can be difficult to not think about the problems a client is experiencing or to check your email, but it's crucial to have balance in your life. If you let your work consume you, you'll soon find yourself depleted and with nothing to give.

7) Take the time to thank or praise your colleagues. Sometimes, it seems as though we're in a thankless field. Spread positivity by expressing gratitude and giving compliments. (I also like to pass along the praise I hear for someone else!)

8) Be kind to yourself. Be realistic. Practice positive self-talk and forgive yourself for the mistakes you make. Acknowledge that you're not always going to know the right thing to say, nor will you be able to help every client you see.

Talk to yourself like you would to someone you love.

Brené Brown



POWERFUL PRACTICES!

17 Self-Care Ideas for Mental Health Professionals (cont.)



9) Treat yourself to your favorite beverage at least once a week. Enjoy a Starbucks coffee or a kombucha tea during the workday. Consider surprising a coworker with one too!

10) If you work in a shared office space or residential setting, **get up and communicate in-person instead of sending an email.** (You can always follow-up with an email to recap the convo if needed.) Human interaction throughout the day is far more rewarding than staring at a screen.

11) Take a short “nature bath”! Multiple studies have found that being outdoors improves mood and reduces stress. If you work in an urban setting, nurture a potted plant or listen to nature sounds in your office to promote relaxation.

12. Bring your furry friend to work. Pets make us happy; one study found that having a dog in the office made a positive difference by reducing stress and making the job more satisfying for other employees.

13) Update the lighting in your office. Natural light exposure in the office is linked to a better quality of life. If possible, take advantage of sunlight during the day by keeping the blinds open.

14. Find self-care ideas online. I recommend the Self-Care Starter Kit from University at Buffalo School of Social Work and Dr. Kristen Neff’s Self-Compassion site.

“I found in my research that the biggest reason people aren’t more self-compassionate is that they are afraid they’ll become self-indulgent. They believe self-criticism is what keeps them in line. Most people have gotten it wrong because our culture says being hard on yourself is the way to be.”
-Kristen Neff

15. Stretch! Yoga is known to reduce stress and improve mood. Take a class or simply practice stretching exercises throughout the workday.

16. Listen to music while typing your notes. I love paperwork... *Said no therapist ever.* Play your favorite tunes to motivate you and make the time pass quickly.

17. Immerse yourself in quiet with a silent commute. After listening to talk all day long, it’s soothing to listen to absolutely nothing on your way home. Recharge with silence.

Source: <https://mindremakeproject.org/2020/09/30/17-self-care-ideas-for-mental-health-professionals/>



POWERFUL PRACTICE!

Meditation and guided imagery are both effective tools for self-soothing and self-care. Here's a nature-based guided imagery script:

Gently close your eyes and imagine yourself stepping into a hidden forest. Every hue of green imaginable surrounds you. Feel the cool shade beneath the canopy, where sunlight filters through, and a balmy breeze rustles the leaves.

This sacred sanctuary is yours alone, a space where you can fully immerse yourself in nature and find peace.

Take several slow, deep breaths, each breath filling your lungs with the forest air. As you exhale, soften your shoulders, and let the tension melt away.

Imagine the tranquility of this place as a glowing light, bathing your body, mind, and spirit. Root your feet firmly to the ground, connecting with the soothing strength of the ancient forest.

Now, let your thoughts drift like clouds across the vast sky. Let them come and go without judgment, simply observing them.

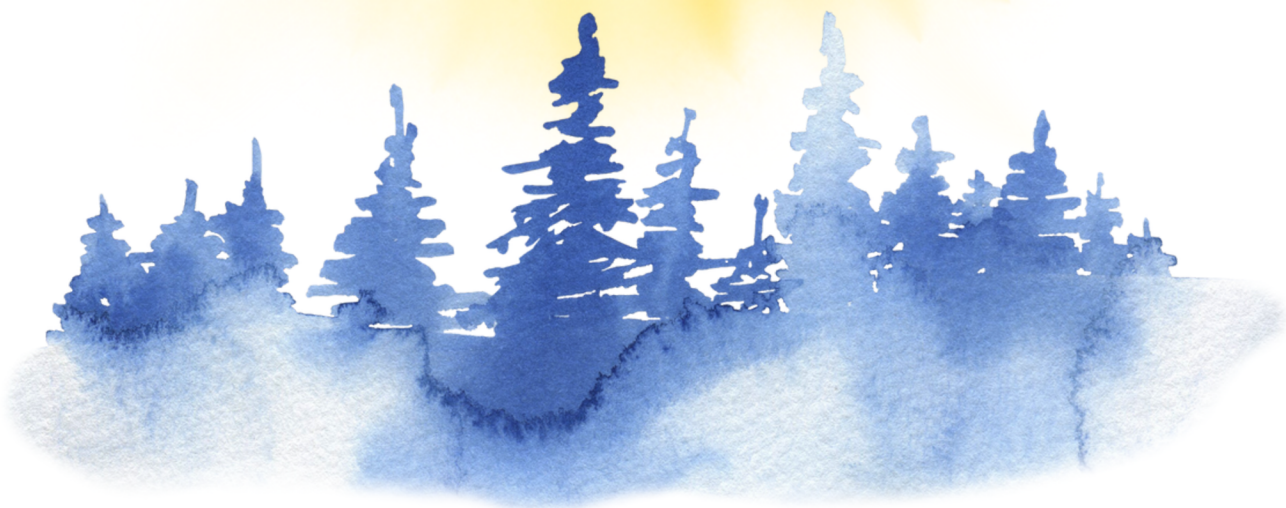
Shift your attention to the trees. Do they stand tall and noble, ancient giants with their arms raised in silent strength? Or, perhaps you find yourself in a younger forest, the trees vibrant and playful, their branches intertwining and dancing with joy.

To your right, a tree glows otherworldly blue, its leaves reflecting the sunlight like sparkling gems. The trunk, slender and white, shoots upwards in countless curves, its branches adorned with emerald-like leaves.

To your left, a colossal form emerges, a sentinel of the forest. Its trunk, washed in shades of copper and bronze, is the widest you've ever seen. With bark etched in amber ridges and umber trenches, the trunk rises straight and tall before embracing the sky with stately branches, leaves the richest, deepest green.

Ahead, a wise elder stands guard. Its gnarled trunk is anchored by endless roots that tumble and twist earthward, plunging deep into the forest soil. Branches wind upwards like reaching fingers, their leaves sage with whispers of gossamer.

Now, gaze skyward. Does the sun blaze brightly, reigning supreme, illuminating the tapestry of green and gold below? Perhaps a morning's glow paints the scene, unfolding in shades of blush with dew-kissed rays that dance softly through the trees, whispering of warmth to come. Or, maybe the sun bids farewell, casting fiery arrows and ruby light in a defiant burst before its final descent.



Lower your gaze. Perhaps you see a carpet of fragrant moss, earthy and rich. Imagine sinking your toes into its softness, feeling the coolness against your skin. Maybe you stand on a blanket of fallen leaves that whisper of seasons past in shades of russet and silt.

Perhaps lush greenery and brush join the symphony of green, or rare blossoms unfurl their petals. Let your gaze wander and appreciate the diverse beauty underfoot.

In this stillness, you can almost hear the trees growing. Stems pushing through the soil, leaves unfurling, reaching for the sunlight. Embrace nature's symphony, allowing the soothing sounds to wash over you.

Inhale deeply. Let the refreshing fragrance of sun-kissed leaves fill you. The air carries the heady perfume of the forest, tinged with the bittersweet bite of decaying flora. As you breathe in, do you detect the vibrant, chlorophyll-rich fragrance of newly unfurled leaves or hints of crisp pine and frost?

Inhale again, and savor the sharp scent of mineral heat as it radiates from sun-warmed rocks after the rain. Perhaps you detect the delicate nectar of wildflowers, or the distant, salty tang of the ocean carried on the wind.

Remember, this haven is yours to return to, a refuge anytime you seek solace, a secret forest that waits for you in the quiet corners of your mind.

by C. Jewell

For audio-visual experience, please visit: https://youtu.be/Deg_h44eCIA

CHAPTER SUMMARY

This chapter explored the essential role of self-care and self-compassion for mental health professionals, highlighting their importance in sustaining both personal wellbeing and professional effectiveness. Readers were guided in assessing their current level of self-care and introduced to Jewell's Hierarchy of Self-Care Needs, a structured framework for prioritizing self-care. The chapter emphasized the importance of developing a personalized self-care plan and making an intentional commitment to maintaining self-care practices. Additionally, it included practical strategies for integrating self-care into a demanding workweeks as well as a guided imagery script for relaxation and mindfulness.



END-OF-WORKBOOK FINAL REVIEW & REFLECTION

Consider what you wrote when you first started this workbook. Did you find the answers you were looking for? Where are you at in your journey now compared to then? _____

CHAPTER 1: What Makes a Therapist Effective?

What basic counselling skills or techniques have you mastered since starting this workbook?

What skills or technique are you going to focus on next? _____

CHAPTER 2: Traits of Effective & Ineffective Therapists

How have you further developed your ability to build rapport with clients? What's working and what's not? _____

CHAPTER 3: Ethical Decision-making

Has the way you practice changed since working through multiple ethical dilemmas? If so, how?

CHAPTER 4: Imposter Syndrome If you identify with imposter syndrome, have you implemented the suggestions for overcoming imposter syndrome in this workbook? How effective were they and how do you feel about yourself now? _____

CHAPTER 5: Burnout & Compassion Fatigue Are you or were you burned out or experiencing compassion fatigue? What steps are you taking or have you taken to recover? _____

CHAPTER 6: Self-Care & Self-Compassion In the past week, how have you practiced self-care and self-compassion. How is your Self-Care Improvement Plan coming along? What are you doing to enhance your professional growth?

RESOURCES

SCIENCE-BACKED APPS

Healthy Minds Program

“The ground-breaking Healthy Minds Program uses neuroscience, contemplative traditions, and skill-based learning methods to help you develop the skills for a healthy mind, now in the palm of your hand. Translating pioneering neuroscience into tools for everyday life, our unique framework guides you through the four pillars of the science of training the mind.”

Guided meditations for awareness, connection, insight, and purpose.



Apple Store Rating: 4.9 stars (672 ratings)

Google Play Rating: 4.7 stars (1,032 ratings)

Psyberguide Rating: 3.67 (credibility) and 4.38 (user experience)

Subscription: No, but you must sign up for a free account

Insight Timer

“We offer the largest free library of guided meditations on earth and the world’s most loved meditation Timer, for free.”

95,000 guided meditations, stories, and soundscapes for sleep, recovery and healing, stress and anxiety, performance, health and happiness, relationships, and spirituality. You can also access live events, discussion groups, and classes.



Apple Store Rating: 4.9 stars (305K ratings)

Google Play Rating: 4.9 stars (125,993 ratings)

Psyberguide Rating: 3.33 (credibility) and 4.38 (user experience)

Subscription: No. You have the option of creating a free account.

SCIENCE-BACKED APPS (CONT.)

Mindfulness Coach

“Practicing mindfulness means grounding yourself in the present moment. Mindfulness has been shown to be helpful for reducing stress and coping with unpleasant thoughts and emotions. Mindfulness Coach will help you practice mindfulness meditation.”

Mindfulness training and practices. You can also use this app to set goals and log your progress.



Apple Store Rating: 4.7 stars (4K ratings)

Google Play Rating: 4.8 stars (5,230 ratings)

Psyberguide Rating: 3.00 (credibility) and 3.30 (user experience)

Subscription: No

MindShift CBT

“Break free from anxiety and stress using this free evidence-based anxiety management app. MindShift CBT uses scientifically proven strategies based on Cognitive Behavioral Therapy (CBT).”

Learn about anxiety, listen to guided meditations, track your moods, journal, and set goals with this top free app.



Apple Store Rating: 4.4 stars (206 ratings)

Google Play Rating: 4.0 stars (1,432 ratings)

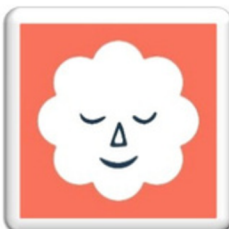
Psyberguide Rating: 3.67 (credibility) and 4.29 (user experience)

Subscription: No, but you must sign up for a free account

MyLife Meditation: Mindfulness

“Fit mindfulness seamlessly into your daily life, with meditation, breathing, yoga, guided journaling and more.”

Track your moods and listen to guided meditations.



Apple Store Rating: 4.8 stars (17K ratings)

Google Play Rating: 4.6 stars (25,805 ratings)

Psyberguide Rating: 4.33 (credibility) and 4.48 (user experience)

Subscription: \$9.99/monthly (Non-premium content available without subscription, account sign-up is free)

SCIENCE-BACKED APPS (CONT.)

Oak – Meditation and Breathing Exercises

“Oak helps you decompress by transforming your meditation practice from an experiment into a habit. We support you from your first session to your 500th, with mindful, loving-kindness, and sleep meditations as well as unguided sessions and breathing exercises. Individualize your meditations by duration, and customize with silence or calming background sounds. Oak tracks your progress and encourages you to continue building a healthy meditation practice.”

Meditations and breathing exercises for relaxation and sleep. You can also access a mantra meditation course with this top free app.



Apple Store Rating: 4.8 stars (28K ratings)

Google Play Rating: 4.2 stars (119 ratings)

Psyberguide Rating: N/A

Subscription: No

Smiling Mind

“Smiling Mind is a unique tool developed by psychologists and educators to help bring balance to your life.”

One of top free apps for meditation with guided meditations and tools for mindfulness.



Apple Store Rating: 4.6 stars (341 ratings)

Google Play Rating: 3.8 stars (3,704 ratings)

Psyberguide Rating: 4.67 (credibility) and 4.84 (user experience)

Subscription: No, but you must sign up for a free account text

The Tapping Solution

“Lower your stress levels, reduce anxiety, overcome fears, relieve pain, get better sleep, and so much more. All made possible with access to hundreds of meditations in the Tapping Solution App. You’ll learn how to use Tapping (also known as EFT, or Emotional Freedom Techniques), to lead a happier and healthier life.”

Tapping meditations and audiobooks.



Apple Store Rating: 4.8 stars (7.4K ratings)

Google Play Rating: 4.6 stars (6,098 ratings)

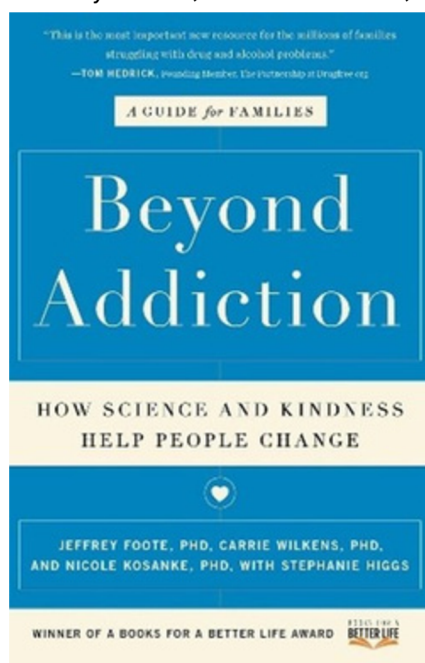
Psyberguide Rating: N/A

Subscription: \$94.99 yearly (some content available without a subscription, account sign-up is free)

BOOKS

Beyond Addiction: How Science and Kindness Help People Change

Jeffrey Foote, Carrie Wilkens, Nicole Kosanke



AMAZON: The groundbreaking method that upends current treatment models and “offers collective hope to families of substance abusers” (Kirkus Reviews), helping loved ones conquer addiction and compulsion problems through positive reinforcement and kindness—from the leaders in progressive addiction treatment in the US.

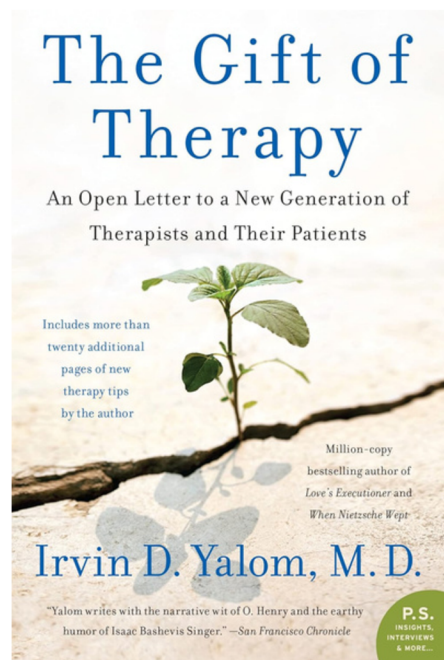
Beyond Addiction goes beyond the theatrics of interventions and tough love to show family and friends how they can use kindness, positive reinforcement, and motivational and behavioral strategies to help someone change. Drawing on forty collective years of research and decades of clinical experience, the authors present the best practical advice science has to offer.

Delivered with warmth, optimism, and humor, Beyond Addiction defines a new, empowered role for friends and family and a paradigm shift for the field. This new approach is not only less daunting for both the substance abuser and his family, but is more effective as well. Learn how to use the transformative power of relationships for positive change, guided by exercises and examples. Practice what really works in therapy and in everyday life, and discover many different treatment options along with tips for navigating the system. And have hope: this guide is a life raft for parents, family, and friends—offering “reminders that although no one can make another person change, there is much that can be done to make change seem appealing and possible” (*Publishers Weekly*).

BOOKS (CONT.)

The Gift of Therapy: An Open Letter to a New Generation of Therapists and Their Patients (2017)

by Irvin Yalom



AMAZON: The culmination of master psychiatrist Dr. Irvin D. Yalom’s more than thirty-five years in clinical practice, *The Gift of Therapy* is a remarkable and essential guidebook that illustrates through real case studies how patients and therapists alike can get the most out of therapy. The bestselling author of *Love’s Executioner* shares his uniquely fresh approach and the valuable insights he has gained—presented as eighty-five personal and provocative “tips for beginner therapists,” including:

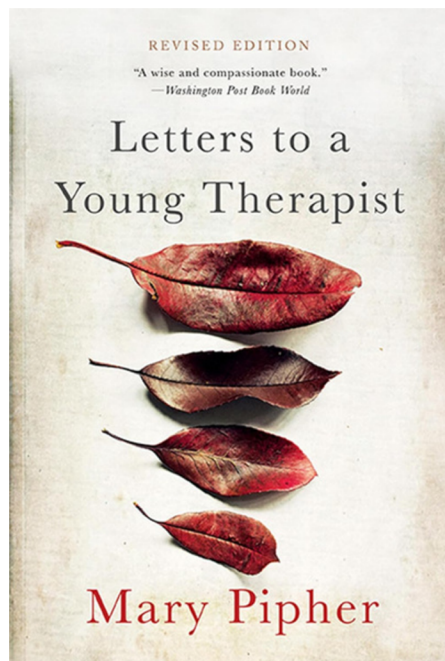
- Let the patient matter to you
- Acknowledge your errors
- Create a new therapy for each patient
- Do home visits
- (Almost) never make decisions for the patient
- Freud was not always wrong

A book aimed at enriching the therapeutic process for a new generation of patients and counselors, Yalom’s *Gift of Therapy* is an entertaining, informative, and insightful read for anyone with an interest in the subject.

BOOKS (CONT.)

Letters to a Young Therapist (2016)

by Mary Pipher



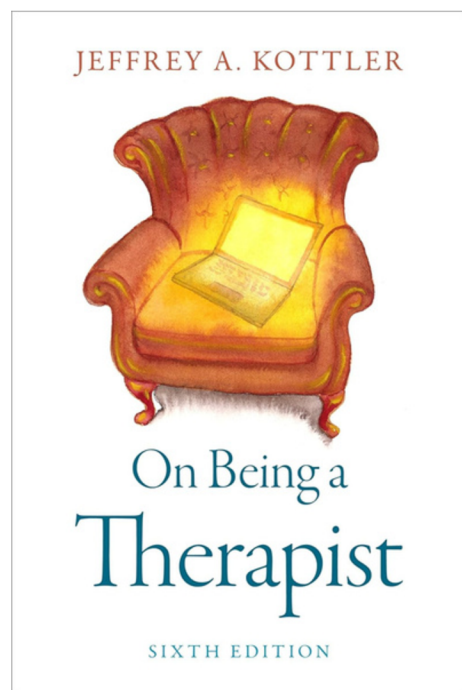
AMAZON: Mary Pipher's groundbreaking investigation of America's "girl-poisoning culture," *Reviving Ophelia*, has sold nearly two million copies and established its author as one of the nation's foremost authorities on family issues. In *Letters to a Young Therapist*, Dr. Pipher shares what she has learned in thirty years as a therapist, helping warring families, alienated adolescents, and harried professionals restore peace and beauty to their lives. *Letters to a Young Therapist* gives voice to her practice with an exhilarating mix of storytelling and sharp-eyed observation. And while her letters are addressed to an imagined young therapist, every one of us can take something away from them.

Long before "positive psychology" became a buzzword, Dr. Pipher practiced a refreshingly inventive therapy -- fiercely optimistic, free of dogma or psychobabble, and laced with generous warmth and practical common sense. But not until now has this gifted healer described her unique perspective on how therapy can help us revitalize our emotional landscape in an increasingly stressful world. Whether she's recommending daily swims for a sluggish teenager, encouraging a timid husband to become bolder, or simply bearing witness to a bereaved parent's sorrow, Dr. Pipher's compassion and insight shine from every page of this thoughtful and engaging book.

BOOKS (CONT.)

On Being a Therapist 6th Edition

by Jeffrey A. Kottler



AMAZON: For more than thirty years, *On Being a Therapist* has inspired generations of mental health professionals (and their clients) to explore the most private, confusing, and sacred aspects of helping others. In this thoroughly revised and updated sixth edition, Jeffrey Kottler explores many of the challenges that therapists face in their practices today, including pressures from increased technology, economic realities, and advances in theory and technique. He also examines the stress factors that are brought on from managed care bureaucracy, conflicts at work, and clients' own anxiety and depression. This new edition includes updated sources, new material on technology, new challenges that therapists face as a result of the global pandemic, and an emphasis on teletherapy and navigating ethics and practice logistics remotely. Generations of students and practitioners in counseling, psychology, social work, psychotherapy, marriage and family therapy, and human services have found comfort, support, and renewed confidence in *On Being a Therapist*, and this sixth edition builds upon this solid foundation as it continues to educate, inform, and inspire helping professionals everywhere.

PODCASTS

All In the Mind with Sana Qadar - ABC listen

All in the Mind is an exploration of the mental: the mind, brain and behaviour – everything from addiction to artificial intelligence.

Ask The Therapist Podcast - Sarah D Rees

Welcome to Therapists Corner, where we explore the world of therapy, mental health, and the inner workings of the mind. Join me, Sarah, a therapist with over 20 years of experience who delivers a range of therapy and runs a successful private practice; Sarah opens the door to the therapy room. Whether you're a therapist, curious about therapy, or simply interested in understanding the complexities of the mind, this podcast is for you. Get ready for conversations with experts in the field, insights into therapy practices, and a glimpse behind the scenes of private practice. Grab a cup of tea, cosy up, and join us for enlightening discussions that will leave you feeling empowered and informed.

The Couples Therapist Couch Podcast

Shane Birkel, Couples Therapist, Podcaster, Speaker, Educator & Licensed Therapist

I help individuals and couples who want to feel satisfied in their connection with their partner, but feel like no matter what they do it just leads to stress and frustration.

Inside Mental Health Podcast

Inside Mental Health is an award-winning weekly podcast that approaches psychology and mental health in an accessible way. Listen as our host Gabe Howard speaks candidly with experts, celebrities, and other notables to break down complex topics into simpler terms.

Let's Talk About CBT

Let's Talk About CBT is a podcast about cognitive behavioural therapy: what it is, what it's not and how it can be useful. Listen to experts in the field and people who have experienced CBT for themselves. A mix of interviews, myth-busting and CBT jargon explained, this accessible podcast is brought to you by the British Association of Behavioural and Cognitive Psychotherapies. www.babcp.com

PODCASTS (CONT.)

Clearly Clinical ®

We offer affordable CE membership, we have the strongest CE approvals in the US, we highlight expert presenters from historically-marginalized communities, and we also make donations to social justice causes. Ongoing donations are directed to The Trevor Project, and we have also previously donated to Black & Brown Founders, the NAACP's Legal Defense Fund, Black Women's Blueprint, and The Center for Reproductive Rights.

Private Practice Marketing | Therapist Paperwork | Therapist Podcasts

We spent the past 15+ years learning everything we could about branding, marketing, and entrepreneurship as private practitioners and we want to share what we've learned with you! Marketing shouldn't be a mystery! You deserve to feel inspired by working with clients you LOVE and get paid well for it! It's totally possible to build and grow your dream practice! We've applied our step-by-step proven systems and worked with tons of therapists who are getting amazing results! We want to show YOU how to get them too. Let us help you fill your practice with clients you LOVE and live the life you've always dreamed of!

Psychiatry & Psychotherapy Podcast

226 episodes with 258.25 potential CME units and 24 self-assessment CME units

Join David Puder as he covers different topics on psychiatry and psychotherapy. He will draw from the wisdom of his mentors, research, in-session therapy and psychiatry experience, and his own journey through mental health to discuss topics that affect mental health professionals and pop psychology enthusiasts alike. Through interviews, he will dialogue with both medical students, residents and expert psychiatrists and psychotherapists, and even with people who have been through their own mental health journey. This podcast was created to help others in their journey to becoming wise, empathic, genuine and connected in their personal and professional lives.

Shrink Rap Radio | Psychology Interviews: Exploring brain, body, mind, spirit, intuition, leadership, research, psychotherapy and more!

When outside of the pod, "Dr. Dave" is also known as David Van Nuys, Ph.D. He is Emeritus Professor of Psychology at Sonoma State University and served as that department's Chair for seven years. The department has a longstanding reputation for its commitment to humanistic, transpersonal, and existential approaches to psychology. He has also taught psychology at the University of Montana, the University of Michigan, and the University of New Hampshire. He has served as a dissertation advisor for doctoral students at Saybrook Institute and the Institute for Integral Studies, among others.

PODCASTS (CONT.)

The Trauma Therapist Project

My name is Guy Macpherson. I bring together people and resources. I love doing it and I've done it for as long as I can recall. With a Doctorate in clinical psychology, and with The Trauma Therapist Project and The Trauma Therapist Podcast I bring together resources for clinicians and therapists of all kinds who are starting out on their trauma-informed journey. For the last several years I have dedicated myself to the study of trauma, post-traumatic growth, and most recently, the intersection of trauma and psychosis, specifically assessing and treating signs of early psychosis. My inspiration comes from working with the courageous individuals determined to learn and find meaning from the trials they have endured. My inspiration also comes from personal experience: My brother is a Navy SEAL veteran who suffered with PTSD.

The Virtual Couch Podcast - Apple Podcasts

The Virtual Couch is a podcast hosted by Tony Overbay, a marriage and family therapist, humor columnist, and motivational speaker who works with many individuals and couples in various areas including marriage, sexual addiction, and parenting. Tony and his guests hope to revive listeners with tools and strategies to help break negative patterns and embrace new and exciting challenges in their lives.

WEBSITES

Addiction Technology Transfer Center (ATTC) Network

The ATTC Network is a multidisciplinary resource for professionals in the addictions treatment and recovery services field.

Anxiety Canada | Self-help Resources, Programs & Services

Our mission is to reduce the barrier of anxiety and related disorders so people can live the life they want. We offer trusted resources and programs to help individuals find relief from anxiety and obsessive compulsive disorder (OCD).

ASAM - American Society of Addiction Medicine

ASAM is a distinguished medical society that encompasses more than 8,000 physicians, clinicians, and related professionals who specialize in addiction medicine.

Black Lives Matter

Black Lives Matter is working inside and outside of the system to heal the past, reimagine the present, and invest in the future of Black lives through policy change, investment in our communities, and a commitment to arts and culture.

Born This Way Foundation

Born This Way Foundation's mission is to empower and inspire young people to build a kinder, braver world that supports their mental health.

The Centre for Addiction and Mental Health | CAMH

Information for screening, diagnosing and treating mental health and addictions.

Centre for Clinical Interventions

CCI develops and provides evidence-based treatments to adults experiencing complex anxiety, mood and eating disorders.

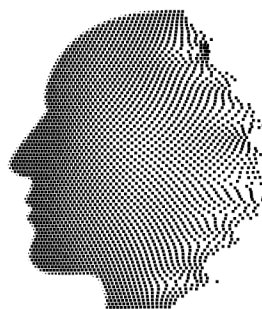
David Baldwin's Trauma Information Pages

These Trauma Pages focus primarily on emotional trauma and traumatic stress, including PTSD (Post-traumatic Stress Disorder) and dissociation, whether following individual traumatic experience(s) or a large-scale disaster. The purpose of this award winning site is to provide information for clinicians and researchers in the traumatic-stress field. Specifically, my interests here include both clinical and research aspects of trauma responses and their resolution.

APPENDIX 1: COUNSELING TECHNIQUES & MODALITIES

Acceptance & Commitment Therapy (ACT)
 Adlerian
 Animal-Assisted Therapy
 Applied Behavioral Analysis (ABA)
 Art Therapy
 Attachment Theory
 Behavioral Activation
 Behavioral Therapy
 Bibliotherapy
 Biofeedback
 Brief Solution-Focused Therapy
 Cinema Therapy
 Cognitive Behavioral Therapy
 Cognitive Processing Therapy (CPT)
 Cognitive Therapy
 Compassion-Focused Therapy (CFT)
 Critical Incident Stress Debriefing
 Dance Movement Therapy
 Dialectical Behavior Therapy (DBT)
 Drama Therapy
 Dream Analysis
 Ecotherapy
 Emotionally Focused Therapy (EFT)
 Equine-Assisted Psychotherapy
 Existential Therapy
 Eye Movement Desensitization & Reprocessing (EMDR)
 Family Systems
 Feminist Theory
 Gestalt Therapy
 Gottman Method Couples Therapy
 Holistic Therapy
 Humanistic Psychology
 Hypnotherapy
 Illness Management & Recovery (IMR)
 Imago Relationship Therapy
 Inner-Child Therapy
 Integration/Eclectic
 Internal Family Systems
 Interpersonal & Social Rhythm Therapy (IPSRT)
 Interpersonal Psychotherapy (IPT)
 Jungian Analysis
 Logotherapy
 Milieu Therapy (Therapeutic Community)
 Mindfulness-Based Cognitive Therapy (MBCT)
 Mindfulness-Based Stress Reduction (MBSR)
 Moral Reconnection Therapy (MRT)
 Motivational Enhancement Therapy (MET)
 Motivational Interviewing (MI)
 Multicultural Counseling
 Multimodal Therapy

Music Therapy
 Narrative Exposure Therapy
 Narrative Therapy
 Nonviolent Communication (NVC)
 Object Relations Therapy
 Pastoral Counseling
 Person-Centered/Client-Centered
 Play Therapy
 Positive Psychology
 Psychedelic-Assisted Therapy
 Psychoanalytic or Psychodynamic Theory
 Psychodrama
 Psychoeducation
 Rational Emotive Behavior Therapy (REBT)
 Reality Therapy/Choice Theory
 Sandplay Therapy
 Schema Therapy
 Sex Therapy
 Social Cognitive Theory
 Social Emotional Learning (SEL)
 Social Learning Theory
 Solution-Focused Brief Therapy (SFBT)
 Systematic Desensitization
 Transactional Analysis (TA)
 Trauma Resiliency Model (TRM)
 Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)
 Wilderness Therapy



Important Notice: Many of these therapeutic modalities require specialized training and expertise. Do not attempt to practice such approaches without formal education, certification, and supervision.

APPENDIX 2: FLOURISHING

To flourish in life, take the time to savor, practice gratitude, build healthy relationships, do random acts of kindness, and be your best self as much as possible, and know your worth (Davis 2021). (See Appendix 3 for worksheets and handouts on gratitude and random acts of kindness.)

Flourishing Scale

The Flourishing Scale is a brief 8-item summary measure of the respondent's self-perceived success in important areas such as relationships, self-esteem, purpose, and optimism. The scale provides a single psychological well-being score.

Citation: Diener, E., Wirtz, D., Tov, W., Kim-Prieto, C., Choi, D., Oishi, S., & Biswas-Diener, R. (2009). New measures of well-being: Flourishing and positive and negative feelings. *Social Indicators Research*, 39, 247-266.

Using a 1–7 scale (with 1=Strongly disagree and 7=Strongly agree), indicate your agreement with each item by recording that response for each statement.

- _____ 1. I lead a purposeful and meaningful life.
- _____ 2. My social relationships are supportive and rewarding.
- _____ 3. I am engaged and interested in my daily activities.
- _____ 4. I actively contribute to the happiness and well-being of others.
- _____ 5. I am competent and capable in the activities that are important to me.
- _____ 6. I am a good person and live a good life.
- _____ 7. I am optimistic about my future.
- _____ 8. People respect me.

TOTAL: _____

Scoring Instructions: Add the responses. The possible range of scores is from 8 (lowest possible) to 56 (highest possible). A high score represents a person with many psychological resources and strengths.

“According to Seligman (2011), ‘*To flourish is to find fulfillment in our lives, accomplishing meaningful and worthwhile tasks, and connecting with others at a deeper level—in essence, living the “good life”*’ (Ackerman, 2018).

APPENDIX 3: SUPPLEMENTARY MATERIALS

Self-Care MENU

Create a menu with your favorite ways to practice self-care as well as things you want to try.

Starters

List ideas for self-care that you can do to start your day out right. Ideally, these things shouldn't take up too much time. Self-care starters should be bite-sized!

Examples: Coffee on the deck, daily inspirational reading, affirmations, etc.

- ☐ _____
- ☐
- ☐ _____
- ☐
- ☐ _____
- ☐
- ☐ _____
- ☐
- ☐ _____
- ☐
- ☐ _____
- ☐
- ☐ _____
- ☐
- ☐ _____
- ☐

Seasonal Specials

Self-care that you can only do seasonally.

Examples: Sledding, sunbathing, spring picnic, autumn hayride, etc.

- ☐ _____
- ☐
- ☐ _____
- ☐
- ☐ _____
- ☐
- ☐ _____
- ☐
- ☐ _____
- ☐

Entrées

Self-care "mains," ways to recharge that you have more time to devote to.

Examples: Visit a museum, walk in the park, watch your favorite show, at-home spa day, etc.

- ☐ _____
- ☐
- ☐ _____
- ☐
- ☐ _____
- ☐
- ☐ _____
- ☐
- ☐ _____
- ☐
- ☐ _____
- ☐
- ☐ _____
- ☐
- ☐ _____
- ☐

Entrées to Share

List self-care ideas that you can do with another person!

Examples: Exchange self-care menus to share ideas, trade massages with a loved one, play a game of chess, etc.

- ☐ _____
- ☐
- ☐ _____
- ☐
- ☐ _____
- ☐
- ☐ _____
- ☐
- ☐ _____
- ☐
- ☐ _____
- ☐
- ☐ _____
- ☐
- ☐ _____
- ☐

Sides

Little things you can do for self-care that you can add to your daily routine.

Examples: Use your favorite pen, watch a funny TikTok, pat a dog, smile, etc.

- ☐ _____
- ☐
- ☐ _____
- ☐
- ☐ _____
- ☐
- ☐ _____
- ☐

Desserts

Luxurious ways to treat yourself or indulge; use sparingly!

Examples: Get a mani/pedi, buy yourself something nice, etc.

- ☐ _____
- ☐
- ☐ _____
- ☐
- ☐ _____
- ☐
- ☐ _____
- ☐
- ☐ _____
- ☐
- ☐ _____

Beverages

Think *literally* for this section! List beverages (or frozen treats) that complement your self-care practices or that you can use to treat yourself.

Examples: A glass of your favorite fancy beverage, Starbucks Frappuccino, hot mulled cider, a milkshake, etc.

- ☐ _____
- ☐
- ☐ _____
- ☐
- ☐ _____
- ☐
- ☐ _____
- ☐



Self-Care MENU

Additional Ideas

This image shows a full page of handwriting practice paper. It features 18 identical sets of horizontal guidelines arranged vertically. Each set consists of three lines: a top solid line, a middle dashed line, and a bottom solid line. To the left of each set of lines is a small square box, intended for writing the number or letter corresponding to that row. The entire page is white, providing a clean background for practicing letter formation and alignment.

Notes

[illegible]

“An empty lantern provides no light. Self-care is the fuel that allows your light to shine brightly.”

-Unknown



6 DIMENSIONS OF GRATITUDE

Think about the following six dimensions of wellness: physical, emotional, social, occupational, financial, and spiritual. Now, for each category, write something you are grateful for.

Physical

(Example: I am grateful that I rarely get sick.)

Emotional

(Example: I am grateful that I am free of depression.)

Social

(Example: I am grateful for my relationship with my sister.)

Occupational

(Example: I am grateful that I have a supportive boss.)

Financial

(Example: I am grateful that I have an emergency fund set aside.)

Spiritual

(Example: I am grateful that I live in a wooded area.)



DAILY AFFIRMATIONS *for Self-Love*

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I AM...

- ☐ Adventurous
- ☐ Brave
- ☐ Brilliant
- ☐ Capable
- ☐ Confident
- ☐ Determined
- ☐ Imaginative
- ☐ Independent
- ☐ Vivacious
- ☐ _____
- ☐ _____

AND TODAY I WILL...

- | | |
|--|--|
| <input type="radio"/> Be content | <input type="radio"/> Learn something new |
| <input type="radio"/> Be fearless | <input type="radio"/> Live life to its fullest |
| <input type="radio"/> Go on an adventure | <input type="radio"/> Love and be loved |
| <input type="radio"/> Inspire others and be inspired | <input type="radio"/> Practice kindness and compassion |
| | <input type="radio"/> _____ |
| | <input type="radio"/> _____ |

MY TOP 3 CORE VALUES ARE...

A PERSON I CARE ABOUT IS:

AND TODAY I WILL...

- ☐ PAY THEM A MEANINGFUL COMPLIMENT OR TELL THEM HOW MUCH I CARE
- ☐ EXPRESS APPRECIATION FOR THEM BEING IN MY LIFE
- ☐ TELL THEM ABOUT SOMETHING THAT'S BOTHERING ME AND FEEL COMFORTED
- ☐ OFFER TO LISTEN IF THEY HAVE SOMETHING ON THEIR MIND
- ☐ GIVE AND RECEIVE AFFECTION
- ☐ _____
- ☐ _____

MY GOAL FOR TODAY IS...

A CHALLENGING PERSON IS:

AND TODAY I WILL...

- ☐ AVOID OR IGNORE THEM AND CHANNEL MY ENERGY INTO MY DAILY TASKS AND ACTIVITIES
- ☐ MAINTAIN DIGNITY AND SELF-CONTROL, NOT ALLOWING MY EMOTIONS TO RULE
- ☐ PICK MY BATTLES
- ☐ PRACTICE ASSERTIVENESS
- ☐ VIEW THEIR WORDS AND ACTIONS AS A REFLECTION OF THEM, NOT ME
- ☐ _____
- ☐ _____

MY SUPERPOWER TODAY IS...

- | | |
|-----------------------------------|---|
| <input type="radio"/> Coffee | <input type="radio"/> My therapist |
| <input type="radio"/> Fuzzy socks | <input type="radio"/> A good night's rest |
| <input type="radio"/> Optimism | <input type="radio"/> Cute kitten videos |
| <input type="radio"/> Consulting | <input type="radio"/> _____ |

VALUES LIST

Acceptance
Accountability
Achievement
Adaptability
Adventure
Ambition
Attractiveness
Authenticity
Autonomy
Balance
Beauty
Boldness
Calmness
Career
Cleanliness
Cleverness

Comfort
Commitment
Common Sense
Compassion
Competency
Competition
Confidence
Consistency
Contentment
Contribution
Courage
Creativity
Credibility
Curiosity
Decisiveness
Determination

Diversity
Education
Efficiency
Empathy
Equality
Fairness
Faith
Fame
Family
Fidelity
Flexibility
Forgiveness
Freedom
Friendship
Fun
Generosity

Gentleness
Happiness
Health
Honesty
Honor
Hope
Humility
Humor
Idealism
Imagination
Independence
Innovation
Insight
Integrity
Intellect
Justice

VALUES LIST (CONT.)

Kindness
Knowledge
Learning
Logic
Love
Loyalty
Modesty
Motivation
Nature
Objectivity
Openness
Optimism
Originality
Patience
Peace
Perseverance

Personal Growth
Playfulness
Pleasure
Poise
Power
Practicality
Productivity
Recognition
Reliability
Religion
Reputation
Resourcefulness
Respect
Restraint
Romance
Security

Self-awareness
Self-care
Self-sufficiency
Selflessness
Sensitivity
Service
Simplicity
Spirituality
Spontaneity
Stability
Status
Success
Talent
Teamwork
Thoughtfulness
Tolerance

Toughness
Tradition
Transparency
Trust
Trustworthiness
Wealth
Willpower
Wisdom



For free printable values cards (with definitions), visit:

mindremakeproject.org/wp-content/uploads/2023/08/Value-Cards-REVISED-8.6.23-1.pdf

Questions

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FOR SELF-DISCOVERY

1. Who am I when no one is around?
2. What are my personal boundaries?
3. What values are most important to me?
4. How do my values impact my choices and actions?
5. What is my personal "code for life"? What rules or ethics do I abide by?
6. What expectations do I have for myself?
7. What advice would I give to my younger self?
8. Am I living up to my full potential in life? If not, what is holding me back?
9. If I die today, how will I be remembered? How do I want to be remembered?
10. What (or who) am I holding on to that I need to let go? What are the reasons I've held on to them? What could happen if I let go of them?
11. What are my resentments? What role do I play in each resentment?
12. For what moment today (or recently) am I the most grateful? The least grateful?
13. When today (or recently) did I ask for what I needed? When today (or recently) did I not ask for what I needed? What was the outcome?
14. What was my biggest struggle today?
15. What helped me most with my negativity today (or recently)? What helped me least with my negativity today (or recently)?
16. What are some of my biases? Where did they come from?
17. What parts of myself do I tend to hide from others and why?
18. What is my definition of love?
19. What qualities do I look for in a friend? Am I someone I'd want to be friends with? Why or why not?
20. What are my relationship values?
21. What is a reoccurring dream that I have?
22. What are my biggest regrets in life?
23. What are my motivations in life?
24. How have I changed in the past year?
25. What do I want to change the most about myself and why?



DAILY SELF-INVENTORY FOR MENTAL HEALTH PROFESSIONALS



DAILY SELF-INVENTORY FOR MENTAL HEALTH PROFESSIONALS

Author: Cassie Jewell, M.Ed., LPC, LSATP

Date: December 29, 2019

1. Did I cause harm (physical or emotional) today, intentionally or unintentionally, to self or others?

Yes

No

2. If so, how, and what can I do to make amends and prevent reoccurrence?

3. Have I treated everyone I've come across with dignity and respect today?

Yes

No

4. If no, how did I mistreat another/others? What were my underlying thoughts/feelings/beliefs?
How can I improve in this area?

5. Have I imposed my personal values on a client (or clients) today?

Yes

No

6. If so, which values, and what steps can I take to prevent this from happening in the future?
(Note: professional counselors are to respect diversity and seek training when at risk of imposing personal values, especially when they're inconsistent with the client's goals.)



7. Currently, what are my personal biases and how can I overcome them?

8. Have I done anything today that has not been in effort to foster client welfare (i.e. self-disclosure for self-fulfilling reasons)?

Yes

No

9. If so, what were my motives and how can I improve on this?

10. On a scale from 1-10 (1 being the least and 10 the greatest), how genuine have I been with both colleagues and clients? _____

11. On a scale from 1-10, how transparent have I been with both colleagues and clients? _____

12. What specific, evidence-based counseling skills, tools, and techniques did I use today? Am I certain there is empirical research to support my practices? (If no, how will I remedy this?)

13. Have I practiced outside the boundaries of my professional competence (based on education, training, supervision, and experience) today?

Yes

No



14. What have I done today to advance my knowledge of the counseling profession, including current issues, evidence-based practices, relevant research, etc.?

15. What have I done today to promote social justice?

16. Have I maintained professional boundaries with both colleagues and clients today?

Yes No

17. Did I protect client confidentiality to my best ability today?

Yes No

18. To my best knowledge, am I adhering to my professional (and agency's, if applicable) code of ethics?

Yes No

19. On a scale from 1-10, what is my level of "burnout"? _____

20. What have I done for self-care today?

- ☐ Exercise
- ☐ Healthy snacks/meals
- ☐ Meditation
- ☐ Adequate rest
- ☐ Adequate water intake
- ☐ Regular breaks throughout the workday
- ☐ Positive self-talk
- ☐ Consultation
- ☐ Therapy
- ☐ Other: _____
- ☐ Other: _____



AREAS FOR IMPROVEMENT:

AREAS IN WHICH I EXCEL:

PROFESSIONAL AND/OR SELF-CARE GOALS FOR TOMORROW:

Source: <https://mindremakeproject.org/2019/12/29/daily-self-inventory-for-mental-health-professionals/>



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Notes

[illegible]

SkillsPractice

I selected _____ because _____
[_____

I attempted this approach on _____ (date).

Things that went well or were helpful: _____

Things that didn't go well or were unhelpful: _____

I selected _____ because _____
[_____

I attempted this approach on _____ (date).

Things that went well or were helpful: _____

Things that didn't go well or were unhelpful: _____

I selected _____ because _____
[_____

I attempted this approach on _____ (date).

Things that went well or were helpful: _____

Things that didn't go well or were unhelpful: _____

Notes

[illegible]

Notes

[illegible]

