# **Vocational Benefits and Costs of Conducting**

**Psychotherapy: The Case of School Counselors** 

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#### **Abstract**

The present work was carried out within a two-person intersubjective theoretical framework. The objective of the study was twofold: 1) to examine the psychological benefits and costs to school counselors of their role as psychotherapists and 2) to examine the significance of accounting for the subjective importance each counselor attribute to the various benefit/cost componenets. The study was conducted in two stages; qualitative and quantitative. Participants were 137 school counselors in junior high and high schools in Israel. The results clearly indicate that when evaluating the consequences of conducting psychotherapy, it is important to take into account the subjective importance of items' contents. The analysis revealed five benefit factors and four cost factors. Counselors benefitted from the inherent attributes of their profession, acknowledged some narcissistic gains and that conducting therapy improved their family and social relationships. On the cost side, one third noted the inherent attributes of their vocation as drawbacks; some felt that conducting therapy made them psychologically more vulnerable and it hurt their family and social relationships. Based on the relationship between benefit and cost scores we identified three profiles of counselors: rewarded, taxed, and least affected. We discuss the meaning of these and the other results for future research, and their practical consequences for therapists in general and school counselors in particular.

## Research and Theoretical Background

Theoretical approaches to therapists' personal involvement in conducting psychotherapy have changed over time. Begining with the psychoanalytic theory's requirement that the therapist constitute a clean slate for the patient's projections, continues with the existential and intersubjective approaches requiring the therapist's full personal involvement in the client-therapist relationship. The attitude toward countertransference has also undergone a parallel change, from complete condemnation by Freud to an therapeutically authentic "I and Thou" encounter. The discussion and debate over the tehrapists' personal involvement in the therapy resulted in awakening interest in the personal-professional life of the therapist (Guy, 1987; Kottler, 1991) and in the effect that the therapeutic experience may have on the therapists tehmselves (Berman, 1995; Leicester-Pao, 1999; Malpas, 2000).

The litrature on this subject is quite scant and much is dated. Some studies examine the burnout phenomenon among therapists (e.g., Gibson, 2009; Lederer, 2007; McLean, Wade, & Encel, 2003), but they do not address the specific factors affecting the personal costs and benefits of their work. Much of the litrature that address these factors are descriptive and contain conjectures and ideas arising from the personal experiences of therapists (e.g., Guy, 1987; Kottler, 1991) and little has been done to examine them empirically. The research we found (Guttmann & Daniels, 2001; Kramen-Kahn & Downing-Hansen, 1998; Mahoney, 1997; Schauben & Frazier, 1995) has shown that therapists do derive significant social and emotional benefits and incur costs as a result of the therapy they conduct. The benefits include rewards such as professional independence, prestige, intellectual stimulation, personal growth, feelings of significance, and the like. These benefits seem to cluster into four categories: vocational setting benefits (e.g., diversity, independence, intellectual stimulation), self-enrichment (e.g., self-discovery, personal growth), narcissistic gains (e.g., affirmation of one's worth, importance,

sense of power), and improved relationships with family and friends. The same studies show that the tolls exacted for conducting therapy are just as significant and stem in large part from the prolonged exposure to clients' problems, with a high level of personal involvement. The therapeutic situation places them under stress by the constant need for giving and the lonely work setting (Fine, 1980). The anxiety-provoking feelings of responsibility and doubts about the effectiveness of the therapeutic process are stress factors also identified in the literature (Kramen-Kahn & Downing-Hansen, 1998; Sussman, 2007). The tendency to overanalyze people and situations sometimes, therapists report, hampers their spontaneity in interpersonal relationships and has negative repercussions in their personal, familial, and social relationships (Farber & Heifetz, 1983). These and other drawbacks of their work also seem to fall into four categories: vocational difficulties (e.g., excessive workload, economic uncertainty), client-related issues (e.g., clients' dependence, suicide threats), personal tolls (e.g., emotional exhaustion), and outcome-related problems (e.g., uncertainties regarding the effect of therapy).

Participants in the studies that unveiled these benefits and costs were psychotherapists. Only Guttmann and Daniels (2001) investigated similar research questions with school counselors. Because of their common theoretical background and professional goals, the overlap between psychotherapy and counseling is greater than the differences between them (Teichmann & Barel, 2004; Klingman & Eisen, 1990). Nevertheless, some important differences are present, especially between full-time psychotherapists and educational counselors, including professional training, work settings, and the fact that counseling, represents only a portion of the duties of school counselors, albeit an important one. Erhard (1998) reported that in Israel over half of the school counselors' time is devoted to direct individual counseling with pupils and parents. Because of these similarities and differences and because of the lack of research involving school counselors, the

general question of the benefits and cost of psychotherapy to its practitioners in general and to school counselors in particular is still open. Guttmann and Daniels' (2001) study of school counselors investigated only the benefits they derive from their role as counselors. The present study has a twofold objective: to address the larger question (i.e., the benefits and costs of counseling for educational counselors) and to examine these benefits and costs in light of the subjective degree of importance attributed by each counselors to each item in the questionnaire.

#### Methods

To capture the complexity of the answers to our research questions we combined qualitative and quantitative research methods. First, we conducted indepth interviews and analyzed their content; next, we examined the generalizability of the interview results with quantitative research methods.

## Participants and Procedure

Participants in the study were female school counselors (very few men are school counselors in Israel). They were questioned with regard to their role as psychotherapists. In the Israeli school system school counselors perform short- and long-term psychotherapy with students of various ages and a wide range of social and psychological problems difficulties (whereas school psychologists are responsible primarily for conducting psychological testing). Their clientele and the therapeutic work are similar to those of most other child and adolescent therapists.

For the qualitative stage of the study, the first author interviewed five female school counselors. All had masters' degrees in school counseling, between 8 and 15 years of experience, and dedicated at least 40% of their time in school to individual counseling. The data for quantitative-statistical analysis were collected from 137 women, school counselors in junior high and high schools, who had a minimum of two years of experience in individual counseling, a B.A. degree, and devoted at least 30% of their time in school to therapeutic-counseling work (for further

participant characteristics, see Table 1). The counselors were recruited in part by mail and in part through school counseling team coordinators who distributed the questionnaires to the counselors in their districts. Two hundred and fifty envelopes containing the questionnaires and a letter from the Israeli National Educational Counselors Supervisor about the importance of the study were sent to counselors across the country. After telephone reminders, 137 questionnaires (47%) were retuned.

Table 1: Demographic characteristics of the participants.

Variable		N (%)	Variables		N(%)
Age	25-35	24(18)	Children	Without children	15(10.9)
	36-45	39(29)		Mother	122(89.1)
	46-55	60 (44)	Counselors of	7 <sup>th</sup> -9 <sup>th</sup> grades	45(33.1)
	Over 55	12(9)		10 <sup>th</sup> -12 <sup>th</sup> grades	91(66.9)
Years of experience	2-10	49(36)	time devoted to therapy	30%-39%	35(25.7)
	11-20	55(41)		40%-49%	39(28.7)
	21-30	28(21)		50%-59%	27(19.9)
	Over 30	3(2)		60%-69%	25(18.4)
				70% and above	10(7.4)
			Family status	Single	9(6.6)
Academic education	B.A.	11(8.1)		Married	114(83.8)
	M.A.	122(89.7)		Divorced	11(8.1)
	Ph.D.	3(2.2%)		Widow	2(1.5%)

### Interviews and Content Analysis

The five semi-structured, in-depth individual interviews were conducted in order to to identify specific issues and themes to be used later for the construction of The Psychological Consequences of Conducting Psychotherapy questionnaire (PCCP). Interviews lasted between 2 to 3.5 hours. They were recorded, transcribed, and content-analyzed by the first author. The interviewees were told about the nature of the study and its objective They were asked about their "thoughts and feelings with regard to personal, family, and interpersonal benefits and costs they can attribute to their work as counselors." Occasionally, specific topics were raised by the interviewer such as the effect of being a therapist on the relationship with spouses and children, and on personal growth. The interviews produced 117 unique statements, which were initially grouped together by the authors into "positive" and "negative" consequences and subsequently further divided into five positive and four negative general categories.

#### **Qualitative Analysis and the PCCP**

To validate the item-category fitness, ten expert judges (experienced psychotherapists) were asked to assign the 117 statements to the nine predetermined categories. More than three judges disagreed about the classifications of 45 items, which were therefore deleted. Kappa reliability among judges showed values of 0.67 to 0.85. The phrasing of the remaining 72 items was then modified to allow Likert-type answers on a 5-points scale. The final version of PCCP consisted of 72 items divided into two domains and 9 categories, as follows:

## **Psychological Benefits** (Cronbach's α=0.84)

(1) Inherent vocational benefits: includes items referring to satisfaction, intellectual stimulation, diversity, independence, team support, and status (7 items). For example, "My therapeutic work is very interesting" and "I derive much satisfaction from helping others" (Cronbach's α=0.71).

- (2) Self-improvement: includes items referring to self-discovery, dealing with personal issues and resolving them, and enhancing certain personal qualities (11 items). For example: "By treating others I can also work on myself" and "My therapeutic work cultivates my tolerance and compassion for people" (Cronbach's  $\alpha$ =0.72).
- (3) Narcissistic benefits: includes items referring to reinforcement of self-worth, self-importance, and self-confidence and dealing with dependence, separation, power, and intimacy (8 items). For example: "During my therapeutic work I receive self-approval and self-affirmation" and "The therapeutic relationship provides me with a sense of intimacy that I crave" (Cronbach's α=0.79).
- (4) Improved family relationships: includes items referring to relationships with spouses, children, and the family of origin (8 items). For example: "My therapeutic skills contribute positively to my relationship with my husband and children" and "Because of my therapeutic skills I gained a strong position in my extended family" (Cronbach's α=0.90).
- (5) Contribution to social life: includes items referring to social relationships and enrichment of friendships (2 items). The items are: "My therapeutic skills contribute to my ability to form more profound and satisfying social relationships" and "Because of my therapeutic work I am considered an authority among my friends" (Cronbach's α=0.69).

## **Psychological Costs** (Cronbach's $\alpha$ =0.81)

(1) Inherent vocational costs: includes items referring to professional dilemmas and conflicts, lack of interest, and limited ability to effect change (8 items). For example: "I find my workload overwhelming" and "I often find the conflict between my responsibilities toward my client and toward the school system taxing" (Cronbach's α=0.70).

- (2) Heightened vulnerability: includes items referring to emotional stress and burnout, the reawakening of personal problems, coping with trauma, transient intimate relationships, and loss (15 items). For example: "Occasionally, clients' problems reawaken my family and personal problems" and "The repeated need to terminate my close relationship with my clients is painful" (Cronbach's  $\alpha$ =0.83).
- (3) Costs in family relationships: includes items referring to negative consequences on relationships with spouses, children, and the family of origin (8 items). For example: "My family does not enjoy the same level of sensitivity and attentiveness that my clients do" and "I tend to overanalyze my family relationships" (Cronbach's  $\alpha$ =0.86).
- (4) Costs in social life: includes items referring to negative consequences on social relationship (5 items). For example: "Because of the meaningfulness of the relationships I have at work, I am easily dissatisfied with ordinary social encounters" and "Because of my therapeutic mindset I tend to be judgmental of others' behavior" (Cronbach's α=0.82).

The PCCP consisted of two parts and a total of 144 items. Part A cosisted of 72 statements preceded by the following instruction: "Please rank on a scale of one to five how true each of the following statement is for you (1-not true at all, 5-absolutly true)." Part B, the "Importance scale" contained the same 72 statements preceded by the following instruction: "Please rank on a scale of one to five how important the issue presented in each of the following statements is for you (1-not at all, 5-most important)." The rationale for part B is that the level of personal importance attributed to each of the psychological consequences is an essential part of the experience of that particular consequence and should therefore be considered for the evaluation. Thus for example, someone who ranks "At times my clients invade my privacy" as "very true" but "not at all an important issue for me" experiences that particular cost differently from someone who ranks the same cost

as "very important for me." We added the "Importance scale" to capture these differences (see also Guttmann & Lazar, 2004). Cronbach's  $\alpha$  for the scale was found to be 0.91 for psychological benefits and 0.95 for costs. For specific categories within each domain the range of Cronbach's  $\alpha$  was 0.79 to 0.96.

#### Results

To calculate the weighted psychological consequences of conducting psychotherapy (WPCCP) we created a 5x5 matrix. In it the subjective effect of an item is represented by multiplying the ranking of the psychological consequence and that of its importance. Thus for instance if "how true" an item was ranked 3 and its' importance was ranked 4, the item's wieghted score was 12. In order to determine how meaningful the importance scale is, we calculated the correlations between the "How true" and "How important" scales for each category. The results showed positive significant correlations for all categories (mostly in the middle range), extending from r=0.19 to r=0.67. These results indicated that participants distinguished between the two scales and provided further soppurt for the rational leading to the wieghted scale (WPCCP). The correlations between WPCCP's categories within each of the two factors (benefits and costs), were generally medium-to-high, and across the factors were small-to-non-significant, with two exceptions (see Table 2).

Table 2: Correlations between WPCCP categories within and across the two factors of consequences.

	Psychological Benefits		Psychological Costs					
	2	3	4	5	6	7	8	9
Inherent vocational benefits (1)	0.30**	0.46**	0.34**	0.33**	-0.13	0.23*	0.14	0.26**
Self-improvement (2)		0.58**	0.63**	0.42**	0.25**	0.27**	0.22*	-0.15
Narcissistic benefits (3)			0.62**	0.46**	-0.08	-0.20*	-0.28**	-0.17
Improved family relationships (4)				0.63**	0.24**	-0.11	-0.40**	-0.34**
Contribution to social life (5)					0.21*	0.22**	-0.24**	-0.22**
Inherent vocational costs (6)						0.68**	0.46**	0.40**
Heightened vulnerability (7)							0.59**	0.51**
Costs in family relationships (8)								0.45**
Costs in social life (9)								

To compare the means of the three scales and make distinctions between the points on the weighted scale more meaningful, we compressed the original 25point WPCCP scale into a 5 point-scale by dividing the mean value of each category by 5. On the descriptive level, the most important benefits category (see Table 3) was the inherent attributes of work (X=4.21). It s also apparent from the means of the "How important" scale that in general avoiding psychological costs is more important than gaining psychological benefits. Descriptive statistical analysis (Table 4) helped further identify noteworthy tendencies in participant responses. Seventy percent of the counselors indicated that their benefit from the inherent attributes of their profession was very-to-absolutly "true," but only 36% felt that it helped them improve themselves even "somewhat." Two-thirds of the participants acknowledged some narcissistic gains, and 80% indicated that conducting therapy improved, at least somewhat, their family and social relationships (60%). By contrast, 36% identified the inherent attributes of their vocation as drawbacks; and about one out of five participants stated that it was at least "somewhat true" that conducting therapy made them psychologically more vulnerable, and hurt their family (28%) and social (20%) relationships. Nevertheless, as shown in Table 3, the means of the benefits are higher than those of the costs, and the counselors' overall gain from conducting therapy is greater than its costs (X=2.70 vs. X=2.01). This finding is meaningful given that the mean values of importance were higher for costs than for benefits.

Table 3: Means and standard deviations of benefits and costs by the three scales, and the results of Pearson's r and t-tests between the *How true* and weighted scales.

	Factors	How important scale	How true scale (a)	Weighted scale (b)	Correlation between (a) and (b)	t-scores between (a) and (b)
	Inherent vocational benefits	4.21 (0.62)	4.01 (0.48)	3.31 <sup>a</sup> *** (0.47)	0.73	27.92**
	Self- improvement	2.91 (0.84)	2.99 (0.74)	2.12 <sup>d</sup> (0.58)	0.62	16.74**
Psychological Benefits	Narcissistic benefits	2.43 (0.86)	3.33 (0.55)	2.43° (0.62)	0.59	21.34**
	Improved family relationships	2.90 (0.76)	3.66 (0.71)	3.20 <sup>b</sup> (0.81)	0.65	8.731**
	Contribution to social life	2.64 (0.92)	3.41 (0.85)	2.44 <sup>c</sup> (0.72)	0.71	18.96**
	Inherent vocational costs	3.28 (0.52)	2.88 (0.47)	2.21 <sup>a****</sup> (0.51)	0.74	21.78**
Psychological Costs	Heightened vulnerability	3.10 (0.94)	2.63 (0.53)	2.04 <sup>b</sup> (0.55)	0.69	14.64**
	Costs in family relationships	3.80 (0.79)	2.32 (0.66)	1.93 <sup>b</sup> (0.73)	0.58	6.76*
	Costs in social life	2.88 (0.82)	2.45 (0.80)	1.88 <sup>c</sup> (0.76)	0.68	10.29**

<sup>\*</sup>p<0.01 \*\*p<0.001

<sup>&</sup>lt;sup>a</sup>\*\*\* results of post-hoc comparisons of benefits

<sup>&</sup>lt;sup>a\*\*\*\*</sup> results of post-hoc comparisons of costs

Table 4: Percentage of responses to the composite 5-point-scale of the WPCCP for each of the categories of the psychological benefits and psychological costs factors.

Psychological Benefits	Not true at all	Not true	Some- what true	Mostly true	Absolutely true
Inherent vocational benefits	0.0	1.5	29.2	56.2	13.1
Self-improvement	11.7	51.8	33.6	2.9	0.0
Narcissistic benefits	1.5	31.4	51.8	15.3	0.0
Improved family relationships	1.5	16.1	35.0	33.6	13.1
Contribution to social life	10.2	28.5	32.1	23.4	5.1
Psychological Costs					
Inherent vocational costs	4.4	59.1	32.8	3.6	0.0
Heightened vulnerability	18.2	60.6	18.2	2.9	0.0
Costs in family relationships	13.9	57.7	23.4	4.4	0.0
Costs in social life	33.6	46.0	16.8	2.2	0.7

The importance of taking into account the subjective value assigned by each participant to every item in the questionnaire is clear from the comparison between the scores on the "How true" and the weighted scales. Not only were all the weighted means found to be lower, but the results of all the dependent t-tests show that these differences are highly significant statistically (Table 3). A repeated measure ANOVA on the WPCCP means revealed a significant difference between the 5 categories of the psychological benefits ( $F_{(4,540)}$ =142.11; p<0.01), and LSD *post hoc* comparisons showed that the counselors benefited most from the inherent attributes of their work and least from self-improvement (see Table 3 further results). Similar results ( $F_{(3'405)}$ =22.52; p<0.01) were obtained when considering the costs. *Post hoc* comparisons showed that costs followed mostly from inherent attributes of the profession and least from its effects on social relationships (further results in Table 3).

The effects of the participants' demographic variables on the dependent variables are shown in Table 5. The results of Hoteling's t-test showed that having children had no effect on the levels of either benefits or costs. The results of the correlation tests between the WPCCP scores and years of experience, age, and the time devoted to therapeutic work showed some significance, but correlations were low and mostly between the cost factors and age.

Table 5: Pearson correlations between WPCCP factors and three demographic variables of participants.

Psychological Benefits	Years of experience	Age	Time devoted to therapy
Inherent vocational benefits	-0.06	-0.10	0.03
Self-improvement	-0.19*	-0.10	-0.14
Narcissistic benefits	-0.20*	-0.14	-0.06
Improved family relationships	-0.05	-0.02	-0.07
Contribution to social life	-0.08	-0.07	-0.11
Psychological Costs			
Inherent vocational costs	0.02	-0.18*	-0.12
Heightened vulnerability	-0.12	-0.25*	-0.13
Costs in family relationships	-0.23*	-0.26*	-0.07
Costs in social life	-0.11	-0.15	-0.13

## **Group Profile Analysis**

In an attempt to identify distinct groups among participating counselors based on degrees of benefit and cost, we performed a cluster analysis followed by ANOVA on the participants' demographic variables. The results revealed three distinct groups: the "taxed," the "rewarded," and the "least affected." The taxed, who made up 17% of the counselors, paid a high personal price for therapeutic work (M=2.44) in return for a medium level of benefits (M=2.69) (see Table 6).

The very small difference (0.25) between costs and benefits is the most noteworthy characteristic of this group. The counselors in this group were significantly younger and less experienced than those in the other two groups. The rewarded group (37% of participants) was characterized by a large difference (M=1.33) between high gain scores (M=3.23) and low costs (M=1.90). The least affected group was the largest (46% of the sample), scoring low both in benefits (M=2.22) and in costs (M=1.41).

Table 6: Means of dependent WPCCP factors by groups of participants (rewarded, taxed, least affected).

Psychological Benefits	Taxed	Rewarded	Least affected
Inherent vocational benefits	3.31	3.84	3.10
Self-improvement	1.99	2.54	1.44
Narcissistic benefits	2.42	2.94	2.02
Improved family relationships	3.17	3.73	2.80
Contribution to social life	2.58	3.14	1.74
Means total	2.69	3.23	2.22
Psychological Costs			
Inherent vocational costs	2.52	2.04	1.72
Heightened vulnerability	2.33	1.92	1.36
Costs in family relationships	2.70	1.84	1.44
Costs in social life	2.22	1.80	1.14
Means total	2.44	1.90	1.41

#### Discussion

The findings of this study reveal the scope and magnitude of the consequences of conducting psychotherapy. They highlight the complexity of the therapist-client relationship and can be understood within the framework of the two-person, intersubjective model (Green, 2000; Ogden, 1994; Stolorow, Atwood, & Orange, 2002).

## Positive Consequences

Our results show that despite the counselors' acknowledgement of the greater importance they attach to the negative consequences, the benefits of therapeutic work outweigh its percieved harms. The participants' satisfaction with the inherent vocational attributes of their work was found to be the highest and most important benefit. The high scores, however, may reflect the fact that this factor referred to the external characteristics of the participants' work, and was therefore easier to identify and acknowledge. Unlike psychotherapists, who reported enjoying a high social status (Guy, 1987; Sussman, 1995), counselors reported that the prestige and respect they enjoy comes from within the school system and not from their social standing. Indeed, Lezovsky's (1999) findings show that educational counselors' work satisfaction is derived not from extrinsic factors such as salary but from intrinsic ones such as satisfaction and interest, the ability to exert influence, and a sense of mission.

Two thirds of participants in the present study acknowledged some degree of narcissistic benefits. Counselors reported that they gained self-approval, self-importance, a sense of being significant and needed, and a sense of being in close and intimate relationships. In the interviews the counselors reported that the patients' neediness and gratitude also provided a feeling of satisfaction. These findings lend support to Sussman's (2007) suggestion that inherent in the psychotherapist-patient relationship is the potential to satisfy the therapist's narcissistic and omnipotent needs. These findings should not be a surprise since the

professional literature suggests that many therapists have experienced difficulties with early object relations and therefore with self and intimacy in a relationship (e.g., Cicone, 2003; DiCaccavo, 2002).

Benefits related to the processing of personal conflicts and to the learning of new coping skills were found to be the lowest. This result may be due to the complicated nature of this factors' content, which may threfore be more difficult to acknowledge than other factors. Still, one third of counselors thought that there is some truth in statements such as "my therapeutic work helped reduce my old anxieties and fears" and "Through my therapeutic work I developed new ways of dealing with my personal issues." Some counselors expressed greater openness during the interviews. They acknowledged that their therapeutic work helped them develop greater competences for dealing with issues in their personal life, and has granted them an opportunity for self-analysis and the processing of personal and internal conflicts. One counselor said, "my work with others involves a great deal of work on myself... all the time... Issues that used to frighten me no longer do." Many more counselors felt that their role as therapists positively affected their families (over 70%) and social (over 50%) relationships. The high percentage of counselors who felt that their work has helped improve their family and social relationships is anderstandable given the high relevance of their work to these life domains. The fact that the counselors reported a far more moderate impact of their work on the relationship with their spouses than with their children lends added support to this claim. Our results indicate that the counselors' work and therapeutic skills had a positive effect on their awareness of family members' needs and signs of distress, on their ability to provide support, and on their perceived authority on emotional issues.

### Negative consequences

Overall, avoiding the negative effects of therapeutic work was considered more important than enjoying its benefits and they did report fewer costs than benefits. The most frequently cited costs were aspects inherent in the profession. Over one third of counselors found some degree of truth in the statements "I often feel a strong conflict between my obligations to my client and to the system (school)" "I lack supervision," "my limited impact frustrates me," and the like. This factor is related to external work-attributes and is school-counselors specific. Lezovsky (2003) described the role of the school counselor as one of the more complex ones because of the fuzziness in its role definition and authority, and its being part of a highly structured system. Other cost factors are less role-specific, however, and therefore more generalizable to psychotherapists.

A little more than quarter of the counselors experienced negative consequences of their therapeutic work on their family relationships, and ranked avoiding these negative consequences as the most important factor. Results show that the counselors' main concerns were their tendency to over-analyze their family members and not being sufficiently available to support and meet their needs (mostly that of the children's). Although many more counselors reported that their work contributed to their family relationships, for some the dual role of mother and therapist apparently posed a conflict and a burden. One fifth of participants acknowledged the negative consequences of their work on their social relationships and on their sense of vulnerability, including the reawakening of family and inner conflicts, anxiety, emotional stress, and burnout. The counselors also noted feeling the heavy burdon of perpetual responsibility and concern for the welfare of their clients and of exposure to the painful aspects of life. These findings are consistent with those of Klingman and Cohen's (2004) and Buchanan, Anderson, Uhlmann & Horwitz (2006), who among others noted the hazard of being exposed repeatedly to difficult, troubling trauma stories. Clients' stories have the potential to enhance suspicious in personal relationships and a more cynical and pessimistic view of human beings. Being over-conscious and anxious about psychological issues in their and their family's personal lives was another reported major negative effect. As one interviewee said *At times I feel like it [psychotherapy] makes me over sensative psychologically*.

The negative repercussions on the counselors' social life were the lowest amongst the cost factors, This result may stem from the therapisits' lesser need for intimate interpersonal relationships outside their family and therapeutic work. As one of the interviewer said "Afer 4-5 hours of theraputic talk and with my family around, I don't have much patience for friends."

In addition to exploring the personal consequences of theraputic work, we examined the possibility of identifying counselors' effected profiles based on their responses to the WPCCP. We identified the following three Effected-profiles based on the counselors' positive and negative repercussion scores:

The rewarded exhibit the largest difference between the gains and losses from therapeutic work. Within the context of McLean, Wade, and Encel's (2003) model, these therapists may hold more realistic and rational beliefs about the therapeutic process. On the average, they are more seasoned, older, and more experienced than the taxed group, and appear to be more able to protect themselves and derive personal benefits from their work than do the other groups.

The taxed are the group most negatively affected by therapeutic work. They enjoy medium levels of benefits at similar levels of cost. They are on average younger and less experienced than counselors in the two other groups. Some studies found that in working with trauma victims, less experienced therapists reported greater stress related to emotional overload (Eidelson, D'Alessio & Eidelson, 2003; McLean, Wade & Encel, 2003; Perlman & Mac Ian, 1995). But in a study of therapists of children and adolescents, Gibson (2009) found no relationship between the therapists' demographic characteristics and the dimension

of emotional exhaustion in the burnout questionnaire. Thus, the question of personal and demographic characteristics that may differentiate between the groups, despite its theoretical interest and practical importance, remains unanswered. Future studies should examine the professional and personal difficulties of this group and investigate whether over the long term they burn out and leave the profession, remain taxed because of their inability to manage emotionally their work, or join the ranks of the unaffected and the rewarded.

The least affected counselors are characterized by relatively moderate levels of personal benefits and costs. Their average benefit scores are even lower than those of the taxed counselors and their average cost scores are lower than those of the rewarded counselors. This group contains a significantly higher percentage of counselors who did not undergo personal therapy than do the two other groups. This may reflect the ability of the least affected counselors to create an effective buffer between work and personal life, their low self-awareness, or their limited emotional involvement in the therapeutic work. The fact that this is the largest of the three groups may also reflect the unique nature of educational counseling in the school system. Although counselors are involved in psychotherapy, a significant amount of their time is devoted to systemic, educational, and organizational work, which may help dilute the emotional burden of therapeutic work.

The Effected-profile typology suggested here may constitutes a basis and a reference point for further research. Fist, we need to further validate the above typology. But once we do, one potential direction is to study individual differences, rather than group differences, that would account for either of the three types. Another direction could be to study what characteristics of the work-situation promote which type. Whichever direction, the study of benefits and costs of therapy for the therapists could be served by research that that has a sound base model and focuses on the study of individual differences in addition to group differences.

## Methodological Considerations

We derived the items of the PCCP questionnaire from in-depth interviews with counselors and followed Kramen-Kahn and Downing-Hansen's (1998) procedure that allowed for the uniqueness of our sample and enabled in-depth understanding of our results. The interviews and the ensuing follow-up content analysis led to the creation of the importance scale. Our results attest to the methodological significance of considering the subjective importance of every item in the PCCP scale. The significant differences found in all the categories between the PCCP and WPCCP scales proves the point.

Altough participants were school counselors, our study's results may be generalizable to psychotherapists in general with the exception to of Inherent vocational benefit and cost categories becouse thir work-situation specific content. The participating counselors devoted much of their time and energy to therapy, and our study focused only on that aspect of their work, It sould be noted that our results are in line with other studies investigating the same (although limited) research question with psychologists and psychiatrists.

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