

Struggles of the Novice Counselor and Therapist

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The novice journey can be arduous. This article draws from empirical and conceptual literature on counselor and therapist development to describe seven stressors of the novice practitioner. The ambiguity of professional work is the major catalyst for novice stress. The elements are: acute performance anxiety, the illuminated scrutiny of professional gatekeepers, porous or rigid emotional boundaries, the fragile and incomplete practitioner-self, inadequate conceptual maps, glamorized expectations, and an acute need for positive mentors.

KEY WORDS: novice counselor; therapist; practitioner; stress.

In this article, we describe hardships that impact the counselor or therapist when encountering the demands of early practice. There are challenges everywhere: preparing for meeting the first clients, the interaction during the hour, and conceptually organizing the experience into a theoretical framework. As one colleague put it, "The requirements for the novice to access, integrate, synthesize and adapt information are exhausting" (M. Mullenbach, personal communication, 1999).

The major catalyst for the intense stress faced by the novice is the

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inherent, but often unknown to the novice, ambiguity of professional work. The microscopic examination, understanding, and improvement of the emotional life of humans—the most complex of all species—is much more difficult than the novice can imagine. To understand the ambiguity of the human condition, practitioners must use thinking patterns that are not linear, logical, or sequential. Expertise within the web of ambiguity takes years to master.

Over and over, Pica (1998) expressed surprise at his lack of preparation as a practicum student for all the ambiguity of practice: “Struggling with ambiguity is one of those unspoken aspects of clinical training that students do not comprehend until they begin their graduate program” (p. 361). The novice’s loss of professional innocence is most intensely felt when interacting with clients. Clients serve as primary teachers, a reality documented in critical incidents (Skovholt & McCarthy, 1988) and international survey research (Orlinsky, Botermans, Rønnestad, 2001).

Novices are aware of the professional confusion concerning ingredients of effective helping. One current major controversy concerns the empirically validated therapies versus common factors of helping (Norcross, 2002; Wampold, 2001). The variety of theoretical preferences among supervisors and experienced practitioners also can lead to a sense of uncertainty about professional tasks. Novice practitioners have not yet sorted and hierarchically organized the complex conceptual material that needs to be understood in order to perform optimally (Rønnestad & Skovholt, 1993). More importantly, beginners have not internalized conceptual knowledge so that they can operate from tacit and intuitive knowledge, the base used by experts (Chi, Glaser, & Farr, 1988).

Establishing a therapeutic alliance with the client requires the counselor/therapist to encourage the client’s explorative and affective engagement. It also demands that the counselor/therapist and client arrive at a mutually agreed upon conception of the task and objectives of their joint work (Bordin, 1994; Horvath & Greenberg, 1994; Wampold, 2001). The tasks of establishing a therapeutic alliance and working well together are much more difficult than the beginner envisions.

Many students are admitted to graduate school in the counseling and therapy professions because they excel at mastering the intellectual content in academic classes. However, this skill set does not translate directly to the complexity of practice. The difficulty of professional work is the genesis for the following seven major novice stressors. Our descriptions comes from the theory and research on counselor

and therapist development (Neufeldt, 1999; Rønnestad & Skovholt, 1993; Skovholt & Rønnestad, 1995; Stoltenberg & Delworth, 1987).

Acute Performance Anxiety and Fear

Fear stops all forward movement. (Axiom)

Beginning therapists of many professions and theoretical orientations from a variety of countries feel overwhelmed early in their careers (Orlinsky & Rønnestad, 2001). They lack the professional confidence that buffers the experience of anxiety when difficulties are encountered. The anxiety of self-consciousness, which leads to focusing on oneself, makes it more difficult to attend to the complex work tasks. Counselor and therapist anxiety impacts the quality of the work because attention cannot be directed toward optimally relating to the client. The individual's attention is directed toward reducing the external visible effects (e.g., trembling and wet hands, unsteady voice) and lowering the internal anxiety so one can think effectively. One novice in our research study said, "At times I was so busy thinking about the instructions given in class and textbooks, I barely heard the client" (Skovholt & Rønnestad, 1995, p. 27). In addition to pervasive performance anxiety, the novice may experience specific fears such as being speechless, with no idea what to say in reaction to a specific client's concern. Together, anxiety and fear about the unknown are like a one-two punch and can seriously heighten the stress level for the novice.

Illuminated Scrutiny by Professional Gatekeepers

For trainees, acceptable levels of practitioner skill seem like a "moving target with an elusive criteria" (Robiner, Fuhrman, & Ristvedt, 1993, p. 5).

Ethics are important in the helping professions because practitioners interact with people at vulnerable levels. Even after passing through numerous gates, a small percentage of incompetent and unethical practitioners damage clients. The profession responds to these events by increasing the number of gates and narrowing them to keep out those not suited for this kind of work.

Some of the high evaluation stress in the counseling and therapy

fields is because of a lack of task clarity and difficulty in defining expertise (Skovholt, Rønnestad, & Jennings, 1997). A classic quote from Raimy (1950) illustrates this: "Psychotherapy is an undefined technique applied to unspecified problems with unpredictable outcome. For this we recommend rigorous training" (p. 150). How can the field evaluate novices when the road to expertise is unclear? Yet, evaluation must occur because the public and the profession demand quality control of professional behavior. Consequently, the novice must try to meet ambiguous standards while living under the illuminated scrutiny of supervisors. The difficulty is magnified by the following reality: "Supervisors are not only admired teachers but feared judges who have real power" (Doehrman, 1976, p. 11).

Porous or Rigid Emotional Boundaries

The pain stayed with me residually when returning home. (A novice counselor)

The word "boundaries" has entered the lexicon of the contemporary helping professions and is used mostly to describe the not-to-be-crossed line between proper and improper contact between practitioner and client. It is a valuable term in defining the difference between "appropriate" and "inappropriate."

Although the novice is often helped in training and supervision to develop clarity regarding appropriate physical boundaries (i.e., to touch or not to touch), issues of boundaries can also be understood in a broader sense. How counselors and therapists regulate their emotions when relating to a client is a core challenge.

Why does the novice have such difficulty regulating emotional boundaries? We understand this difficulty by drawing on research on early human development (Tronick, 1989). Using this literature, professional development can be conceptualized as a self-other differentiation process where the counselor or therapist gradually increases in ability to differentiate client and practitioner responsibilities and to relate in functional ways.

To function optimally, counselors and therapists need the ability to experience, understand, regulate, and express emotions at a level that facilitates the counseling/therapy process. When encountering challenges and emotional or cognitive overload, the practitioner naturally attempts to process the intense data. There seems to be three styles

of reacting to the intense data: premature closure, insufficient closure, and functional closure (Rønnestad, 1996).

Premature closure is a maladaptive, pre- and unconscious, inappropriate defensive maneuver (Rønnestad & Skovholt, 1991) that counselor may use when overwhelmed by the professional challenge. Expressions of premature closure can be an inability to handle the client's intense emotions or an inability to enter or stay in the experiential world of the client.

Insufficient closure refers to the inability to stop processing the intense data from the counseling or therapy session. It can be conceptualized at different levels of analysis. Cognitively, it refers to an inability to stop thinking about the client's problems or one's own reactions to them. Emotionally, it refers to continually feeling the disturbing emotions produced in the session. Relationally, it refers to an inadequate regulation of professional boundaries, and behaviorally it can be expressed in a variety of counter-therapeutic actions.

Functional closure consists of attending to the rich data from work with clients in a way that propels the competence level of the therapist. It involves the appropriate termination of the reflection process so that the practitioner can act therapeutically and not be stuck in continuous and nonprogressive reflection.

It is difficult for the beginning counselor/therapist to regulate and express emotions. To do this strategically means that the counselor/therapist is able to do the Cycle of Caring: empathic attachment, then active involvement, then felt separation over and over again in an optimal way with client after client (Skovholt, 2001). This is an advanced set of skills and very demanding for the beginner.

Although some emotional and cognitive preoccupation can facilitate reflection (Neufeldt, Kavno, & Nelson, 1996; Schön, 1987), the task of regulating emotional involvement is challenging. The novice is flooded with impressions, images, feelings, ideas, worries, and hopes. For example, novice counselors and therapists can be very preoccupied with the emotional pain of the client and experience an "off-duty" penetration of one's own emotional boundaries.

Studies of strain and burnout can assist us in understanding boundary problems and boundary regulation. Although the findings are not consistent, some studies have shown that less experienced practitioners, because of overinvolvement, report significant burnout (Ackerley, Burnell, Holder, & Kurdek, 1988; Farber & Heifetz, 1981; Rodolfa, Kroft, & Reilly, 1988). The problem seems to be finding the thin line between underinvolvement and overinvolvement. Perhaps it is like attaching

to the client by using one side of the turtle, either the hard shell or the soft, unprotected side. When attaching to the client using the hard shell, there is underinvolvement. When attaching with the soft, unprotected side, the emotions of the client are easily transferred to the practitioner, leading to overinvolvement. Learning how to regulate emotional boundaries between the hard shell and the soft side is a major stressor for the novice practitioner.

Developing flexible and adaptive boundaries takes time. This skill involves learning to constantly monitor the self. One looks for a positive interplay between empathic attachment to the other and one's own very important self-care needs. It takes time and experience, something the novice does not have.

The Fragile and Incomplete Practitionerself

The formation of a professional self can be . . . quite frightening. (Adelson, 1995, p. 35)

Descriptions of beginning therapists as having an "unbalanced professional self" (Ohlson, 1996) or having problems with differentiation/separation (Løvlie-Schibbye, 1999) indicate a fragility in perception of self. This fragility can be contrasted with the resilient practitioner (Skovholt, 2001) or the seasoned therapist (Goldberg, 1992); here, the practitioner has the capacity to absorb and process input from clients without defensively protecting the self.

In our research, we found that, at the affect level, the beginning counselor or therapist who is not yet familiar with the new professional role, feels both enthusiasm and insecurity (Skovholt & Rønnes-tad, 1995). Creating a practitionerself, a term similar to that of Ellwein, Grace, and Comfort (1990), involves vigorous internal construction work, as well as the external effort of trying on new clothes and new ways of being in the world. Like an adolescent, the fragile and incomplete practitionerself shifts through a series of moods: enthusiasm, insecurity, elation, fear, relief, frustration, delight, despair, pride, and shame. The novice self is fragile and, therefore, highly reactive to negative feedback. Metaphorically expressed, there is not much muscle, and the immunology system is stressed. The emotional reactivity and countertransference are expressed by a novice in the parallel area of teaching when a student teacher said, "I felt very disgusted and al-

most indignant toward the kids because they could not grasp the things I was trying to explain” (Ellwein et al., p. 21).

It is important to note that age and experience in allied jobs tend to mute the various novice effects. For example, the 40-year-old counseling/therapy student who has worked as a paraprofessional helper tends to have a less intense reaction to this elevated stressor than does the inexperienced 23-year-old counseling/therapy student.

Inadequate Conceptual Maps

Conceptual maps guide counselors and therapists at every level of experience. For the novice, the most accessible map is that of the lay helper. This map is drawn from personal formulations of helping as a family member or friend. The map at the Conventional Phase of our model often involves quick problem formulation, direct advice, and strong doses of emotional support and sympathy. The novice knows that the conventional map needs to be replaced by a professional map. Yet, this task is very difficult. The following metaphor may illustrate the need for a good map. An inexperienced canoeist enters white water with anxiety, some instruction, and a crude map. Approaching strong rapids is like meeting a client. All of a sudden, there is the client in front of the novice helper, telling a very personal, real story often communicated vaguely and ambiguously. The experience is like the sudden rush of water, rocks, and rapids demanding instant understanding and reaction. The novice often has the urge to both call 911 and appear calm, collected, and professional—whatever that is.

In a study of novices in the related field of medicine, the most stressful situation was the white water experience—having to make clinical decisions while very confused (Zeigler, Kanas, Strull, & Bennet, 1984). Looking back at the beginning of their careers, novices frequently report, “I didn’t know what I was doing.” As a student, the novice abruptly encounters client challenges in practicum practice while also attending classes, reading countless books and articles, writing many papers, and taking scores of tests.

All of a sudden, what one has learned seems irrelevant for practice. This happens in part because the conceptual maps of the profession are developed as broad guides to cover a variety of situations, not the particular situation that the novice has now encountered. Also, the map gleaned from one’s personal life is often not adequate for the specific challenge. It is like learning a foreign language and then going

where they speak that language. Suddenly, the book learning hits the practical world; language is used differently in terms of usage, style, and syntax. The novice must continually try to access the expert's cognitive map—the theory of another—and *spontaneously* use it. The combination of the theory of experts as a broad guide, the fact that it is the theory of others, and that it must be applied spontaneously in novel situations means that the novice will have, at most, only limited success.

Many novices experience disillusionment with their training program when they realize that acquired skills are insufficient and that the practice world of unique situations is different from that portrayed by academic models. There is almost universal criticism by individuals at this point, with criticism directed to the courses, the professors, or the entire program. It is as if the novice is saying, "If I was better trained, I wouldn't feel so lost and so incompetent."

The novice often also points the finger of blame in another direction—toward the self. When directed toward the self, the novice is asking—is it me? As one novice wrote: "Does the source of this problem lie in my personal shortcomings or in my training?" (Bandhauer, 1997, p. 7).

The problem is that there is just too much to know and one does not really know what will be needed at what point. An analogy is with a traveler to a foreign country. One packs the suitcases before traveling, hoping to bring the right clothes and articles. Inevitably, necessary things are omitted. The traveler gets anxious and has to compensate in some way. The novice often feels the same. Rodolfa et al. (1988) found that in comparison with professionals, practicum students and interns in psychology experienced significant stress related to a variety of very specific client behaviors that confused them, such as the client's lack of motivation or crying in session. How does one learn how to handle these very specific situations?

Extensive experience is necessary and a certain quality of experience too, as described by Benner and Wrubel (1982),

Experience is necessary for moving from one level of expertise to another, but experience is not the equivalent of longevity, seniority, or the simple passage of time. Experience means living through actual situations in such a way that it informs the practitioner's perception and understanding of all subsequent situations. (p. 28)

Until experience gives one the internal cognitive map, the novice experiences the elevated stress of inexperience.

Glamorized Expectations

To the extent that you feel inflated as a beginning therapist, you float a bit above ground. I think the origin of “humility” is humans, which is “ground.” You are pulled back to the ground . . . becoming less of a god over time. (A veteran practitioner, as cited in Dlugos & Friedlander, 2001, p. 301)

People are drawn to the field of counseling and therapy for a variety of reasons. Being drawn to working with people often involves the daydream of making a difference in the lives of others. One of the authors (TS) remembers reading as a child about the work of doctors in developing countries—Albert Schweitzer in Africa and Tom Dooley in Southeast Asia—and also hearing stories of his Uncle Erling, a doctor in rural India. All of these stories, for him, were about heroic efforts to dramatically reduce the suffering of impoverished people. They were inspiring! He wanted to someday have work of equal worth.

From discussion with colleagues, it appears that many seek a counseling or therapy career because of an inspiring older person like a caring therapist, a stimulating teacher, a nurse who seems so exceptional, or a professor who is gifted. These idealized models feed into the idea that glamorized expectations are realistic. The wish to produce wondrous results propels many individuals to study counseling and therapy and go through the endurance contest of school: tests, papers, reports, and reading hundreds of pages while filling many notebooks with lecture content.

Without full awareness, the novice often is more hopeful about the impact of his or her efforts than is warranted. This over optimism coexists with apprehension about one’s skill level, and they connect in the goal of magnificent change. If the work is impactful, the novice will likely feel like a successful practitioner. The novice may reason: If I am able enough, skilled enough, warm enough, intelligent enough, powerful enough, knowledgeable enough, caring enough, present enough—then the other will improve.

As described earlier, the beginning counselor/therapist is highly vulnerable. Professional self-worth closely coexists with client improvement. The novice is often not fully aware of this self-focus strand in the unrealistic expectation of “If the client really gets better, expresses appreciation, or likes me, I’m really good at helping.” The following first-person account illustrates the tie between practitioner self-evaluation and client reaction within the vulnerable world of the novice,

Pam was my first client as a professional counselor. I looked forward to meeting her with such unbridled anticipation that I didn't even notice that the air conditioner was broken and the temperature had climbed into the 90s. I fantasized about sitting quietly and listening to Pam with great understanding and much compassion. I just couldn't wait to hear her story. Pam was already in my office when I arrived. As I stepped through the door she frowned at me, shaking her head. "Excuse me," she said, "nothing against you, but I'm not talking to anyone but Florence." Florence was her previous counselor who had left our clinic for another job. I was stunned by Pam's rejection of me . . . I continued to see Pam for a while, though somewhat sporadically . . . [After many sessions] "You know," she said, "I like you better than Florence." "Why is that?" I asked. "Because you seem to understand me better than she did." I wanted to hug her. (Pincus, 1997, pp. 59–60)

In time, the novice develops much clearer, more realistic, more precise, and less glamorous expectations. No longer is one able to cure the other quickly and easily. Rather, human change is seen as a complex, often slow process in which the practitioner plays only a part. This realism helps to reduce practitioner stress. But it takes time to get to a place where "realistic" replaces "idealistic." Only later will the novice really comprehend how many factors, such as readiness by the other, as extensively studied by Prochaska (1999), play such an important role in client success and that the client often accounts for much of the variance in counseling/therapy outcome (Lambert, 1989).

For the veteran practitioner, the paradoxical reality is that significant change is possible when one is not so grandiose and unrealistic. For the novice, the problem with glamorized expectations, of course, is that they add to the mountain of elevated stressors. It is just not possible to have a positive impact at each of the thousands of counseling sessions that one has during a career. When the novice thinks, "I want to have an impact in every session," there is pressure and stress.

The Acute Need for Positive Mentors

Mentors and apprentices are partners in an ancient human dance . . . It is the dance of the spiraling generations in which the old empower the young with their experience and the young empower the old with new life. (Palmer, 1998, p. 25)

The struggles and stressors of professional work often combine to form a sense of bewilderment and confusion for the novice. Ward and House (1998) have described some of this as the "increased levels of

emotional and cognitive dissonance” (p. 23) of the novice. Many novices actively seek the support and guidance of professional adults—a supervisor, teacher, or mentor—one who “knows the ropes” through experience and attained expertise.

The novice wants and needs mentors to be available, supportive, positive, and helpful in specific ways. The absence of a mentor leaves the needy novice with “orphan distress,” searching for one’s way on the high seas without experience. Equally distressing is the novice’s disillusionment with a mentor who has failed to provide the intensely needed support and instruction. Examples include the absent, critical, and confusing professional adult. The terms “orphan distress” and “novice neglect” summarize the fear.

Clinical reports indicate that the most effective mentors seem to operate by a structure similar to what we have called The Uncertainty/Certainty Principle of Supervision and Professional Development (Rønnestad & Skovholt, 1997). This is similar to “uncertainty in ways of helping,” a previously mentioned characteristic of wisdom (Baltes & Smith, 1990), and how creativity researcher Torrence (1996) described how the “mentor protects the mentee from the reactions of their peers long enough for the mentee to try out some of their ideas and modify them. The mentor can keep the structure open enough so that originality can occur” (p. ii). Here, the mentor, perhaps as teacher or supervisor, introduces the novice to the process of searching through the uncertainty. Searching through uncertainty via reflection has been described as the best method of novice professional growth (Neufeldt, 1999). The novice is taught to proceed on the voyage within a framework of there being more than one right way to help another. Yet, within uncertainty, the mentor also introduces certainty via specific techniques, methods, and procedures that can be very helpful to the confused novice. Positive mentoring can be a rich experience as stated by Brinson (1997) who said: “Having a mentor made a world of difference in my growth” (p. 165).

Summary

The aim of this article is to capture the “universality of experience effect” (Yalom, 1985) as applied to the novice journey. Pica (1998) describes this when he says, “Articles connected to students’ experiences serve an important function. If only for a moment, they provide validation, clarity, hope in the midst of great anxiety, discomfort and uncer-

tainty” (p. 326). We say, *praemonitus, praemunita*—forewarned, forearmed.

Although the struggles of the novice practitioner make the early years difficult, professional work as a counselor or therapist can be very positive. One rewarding quality of the work was documented by Radeke and Mahoney (2000) who found that therapists were enriched emotionally by their work. In addition, compared to the rapid obsolescence of technical knowledge, counselors and therapists have skills that can increase in value with age, a reality described by senior practitioners of average age 74 (Rønnestad & Skovholt, 2001). It is our hope that the description of novice struggles here will help ease the difficult novice voyage. After all, a productive and meaningful career in counseling and therapy can be just ahead.

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