



THE COUNSELLING JOURNEY: CHALLENGES AND STRESS FACED BY WOMEN COUNSELLORS IN GUWAHATI CITY

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ABSTRACT

The counsellors have journeyed with their clients to a considerable extent of helping them at different points in their life. With a curiosity to understand the experiences of what it feels to be in a helping profession of handling different issues faced by people, this research sought out to study the counselling journey mainly to understand the challenges and stress faced by counsellors while dealing with different clients in their profession. The paper opts for a qualitative study to understand the challenges and stress among the women counsellors in Guwahati city. The study also explored the different areas of self-care and coping strategies adopted by counsellors in stress. The finding from the data collected showed the different experiences of stress that takes place at a personal and professional level among the women counsellors. Findings described sources of personal stress as financial difficulty and gender roles at home. And at the professional level, workload, lack of knowledge on counselling work culture and ethical dilemmas such boundary setting and confidentiality issues are found as a major source of challenge. The findings include the implication of stress affecting self and relationships. And hence, the study explored the different areas of counsellor's self-care and ways of coping with stress. The study suggests the need of having an organized support system among counsellors along with recommendation to further carried out the research in order to understand the intricacies of stress not only in terms of occupational demands and personal needs but also values based aspirations of that causes stress in people.

Keywords: *Challenges in Counselling Profession, Job-Stress, Personal-Professional demands, Women Counselors*

1. INTRODUCTION

Counselling is a complex and convoluted process which attempts to engage with human emotions and feelings in a purely professional setting with clear principles and boundaries. It involves listening, introspecting, telling, knowing and being known, reflecting and acting [1]. The relationship of the client who is seeking counsel from the counsellor takes place simultaneously at a physical space, through language, in thoughts, feelings, memories, and experiences of each client making counselling not just a talk or listening that happens between two people but a multifaceted process [1]. As counsellors deal and engage with emotions and feelings, it is unlikely to make



a strict demarcation between work and home, and much of the time the counselling process is unrestricted to office time or space.

The counsellors have helped people in ways of coping from depression, trauma, bereavement, and many other issues faced in life. Today increasingly, counsellors and therapists are being called to engage with clients and assist survivors of violent crime, natural disasters, childhood abuse, torture and as well as war-trauma victims [2]. They have in a way embraced different aspects of all helping processes to help their clients [1]. Yet as Figley [3] noted, "there is a cost of caring." A counsellor has to listen to client's experiences of re-telling traumatic stories or everyday's life problems and every working day is spend in an atmosphere of people's lived experiences which can have detrimental effect on the counsellor's perceptions of themselves and of the world.

Professions which constantly engaged themselves to listen to trauma stories, horror, human cruelty, loss of life and melancholic depressed behaviors as part of their job can be overwhelming as well as interfering in their personal lives. They may begin to experience similar trauma symptoms of their clients such as fear, pain, and flashbacks of thoughts, nightmares and avoidance with relationship with family, friends and community [3][4][5]. Empathetic listening is the core of counseling, yet constant empathic listening also makes therapists and counsellors experience compassion fatigue [6]. Repeated exposure to problems not only increases the sense of emotional vulnerability and stress among counsellors and therapists but also creates negative effects on individual effectiveness and organizational dynamics in the workplace [2].

Another study on the palliative care counseling shows that the process of building relationship with clients who are terminally ill can be difficult and challenging especially when it is the counsellor who is conveying the bad news [7]. Sexton [2] also cites the immediate challenge to being empathetic when working in organizations with clients who are facing death as well as the traumatization it can pose on the counsellor. Stress is caused highly among helping professionals as a result of knowing about a traumatizing event experienced felt by the others and also from the aspirations regarding the degree of wanting to help the traumatized person to cope [3]. Bustos [8] argued that client conflict interacts with staff and organizational tensions, resulting in a distortion of interpersonal relations at workplace and home.

II.EXPERIENCE OF STRESS AMONG COUNSELORS

The occupational models which include the demand-control theory and the effort-reward model help to understand the experience of stress by counselors in the work place. Occupation stressors in jobs can be *role ambiguity, deadline works, expectations from authorities, low pay salary, work shifts, emotional needs, role ambiguity, long working hours, conflict at work, poor work environment, family-work demands* etc. All this occupation stressors leads to what is often called as "burnout". Counselling practice is highly stressful not only because of the occupational demands strictly but because counselling itself is a profession that handles emotions and the vulnerabilities at large extents. They are constantly exposed to different stories of clients which may be sexual abuse, torture, hopeless despair, war, loss of life, choices and confusions and clearly not easy to listen for many people [1].



Hellman and Morrison [9] administered a 350-item stress questionnaire to psychologists to find therapists working with more disturbed clients are prone to experience professional inadequacy and personal depletion. Therapists associated with institutions reported higher stress from organizational factors while private practitioners found it more stressful to deal with difficult clients. Similarly, Jupp and Shaul [10] found that experienced counselors experienced high rate of burnout symptoms then less experienced counsellors.

Farber [11] the potential for burnout in counselling profession is considerable as studies showed the rate of suicide with psychiatrists as those who are involved with highly disturbed clients. Another type of occupational stress and burnout experienced by counsellors is the vicarious traumatization which becomes a secondary post-traumatic stress [2]. Also, a high number of trained counsellors leave the profession and gravitate towards administration and teaching rather than frontline counselling [12].

Wilkerson [13] prepared a questionnaire to study burnout with 198 professional school counsellors which includes emotional exhaustion, depersonalization and personal accomplishments found 49% on emotional exhaustion scale, 27% on depersonalization and 36% on the personal accomplishment scale. Kirk-Brown and Wallace [14] conducted a study 110 people on the antecedents of burnout and job satisfaction among workplace counsellors using five scales. 56 women counsellors and 26 men counsellors reported role ambiguity as a significant source of emotional exhaustion.

It might be hard for counsellors to separate themselves completely from work and personal life though that might seem ideal to avoid stress. There is high chance of practitioners isolating themselves from ordinary and superficial relationships and activities as a result of being exposed to intense and real relationship which might make him or her become socially isolated [1]. When ones become socially isolated and when faced with stress, it affects the person in coping [15].

Looking into the context of counselling, the demand and control of work is unlike the other cooperate profession of reaching targets of producing and accumulating, it is a need-based profession from clients. In a human service profession like social work, police, nurse, doctors, counsellors etc., it might not be feasible to challenge to idea of work demand completely as the requirements and needs are purely people's needs. The self-evident truth is that problem and confusions will continue within individual and hence clients will continue seeking for counsellors, the demand might get higher. So the question comes down to, how does one address stress as the nature of work demand from clients is likely to rise high? Should there be more counsellors at workplace? Should one object the idea of having more work demands at work place and relaxes the counselling profession? Should one condemn the idea of stress and workload as a result of capitalist work nature? All these important questions yet do not answer the question of reducing the challenges and stress faced by a profession that is need based. Since counselling is purely need-based, there needs to be a greater support system for counsellors.

The above discussion shows the understanding of counseling as a profession and the various grounds of counsellors experiencing stress through the exposure of attending to the demands and needs both from the clients and from their work. The literature shows high experience of stress among counsellors leading to burnout; however there is a vacuum in terms of understanding the stress faced by women counselors and its effects on them particularly in the Indian context. Keeping in view the above mentioned challenges, the present study attempts to understand stress and challenges faced by women counselors of Guwahati city and develop



new insights about the counseling profession from a women perspective. It does not look at any particular type of counselor or their work setting but rather looks at women in general as counselors and their experiences in dealing with clients. The study also looks into the ways of self-care and the strategies adopted by counselors in mitigating the challenges and stress in their profession. The discussion on the next topic will show how theorists and researchers conceptualize stress leading to the explanation on the kinds of stress people can experience.

III.METHODOLOGY

The present study is a qualitative inquiry into the stress and challenges faced by women counselors in their profession and different self-care and coping strategies used by them. An *Exploratory Research Design* was used to get an in-depth understanding of the stress faced by women counselors during the counseling process. A *qualitative method* was adopted to get the primary data from the participants. For the purpose of this study, we selected the sample population of women counselors from Guwahati, Assam. The sample was drawn from a sampling frame by using two sampling techniques –Purposive sampling and snow ball sampling.

The study adopted interview technique to gain in-depth understanding of the stress faced by women counselors. Semi- Structured interview guide was employed for data collection. The data collected was transcribed and then analyzed manually. A thematic analysis was carried out based on the recurring themes. The Ethical clearance for the study was given by the Ethical Committee of Tata Institute of Social Sciences, Guwahati, Assam. Informed consent was obtained before the administration of the interview guide.

IV.DATA ANALYSIS

After thoroughly analysing the data, a thematic analysis was carried out based on the following recurring themes.

4.1. STRESS AT PERSONAL AND PROFESSIONAL LEVEL

The counselors explained how the expected role of woman and responsibility at home and low income salary caused them personal stress. Financial stress included low salary and an inadequate means to look after their family needs and health issues. The professional stress includes documentation requirements and case studies, lack of peer counsellors, counselling requirements beyond office space.

1.1.1. FINANCIAL DIFFICULTY

The counselors mentioned the lack of adequate money as the main cause of stress in their personal and professional lives. The counselors who faced money stressors are working in non- governmental organization. Counselor 7, working at Child Helpline, mentioned how financial constraints create stress for her. She identified inadequate salary as a challenge to her wellbeing. Counselor 7 considers financial security as one essential component to be an effective counselor as much of the tension around her is created from the lack of money and resources which makes her difficult to be in full contact with clients.

I have a dad who is going through cancer treatment and a mother who is having arthritis. I'm the only child to them. My salary is not much and it's difficult to cover home expenses and the medical check-up of my parents. Sometimes, I feel like I should visit a counsellor myself. I don't feel like sharing my home's problem with office staffs but they do notice my face sometimes when I stay very quiet and lost. I'm the counsellor and the staffs



would joke to me, 'Cheer up'. Life is very difficult for a women counsellor especially if you come from a background like me. (Counsellor 7, 4-years, Child Helpline)

Counsellor 2, a HIV/ AIDS counsellor working in an NGO described the difficulties in meeting her needs of staying in a rent in a city like Guwahati. She points out her difficulty in meeting the needs at home and her inability to look after her family financially.

This Christmas I didn't go home as money goes away when I go home. As a working person, I have to give at least small gifts to family and relatives during Christmas but my salary is not enough for such. People from rural areas have a different picture of you when you go home if you're working in a city or they think the daughter regularly sends money to the family... Sometimes, I feel sad that I have not sent money to my siblings for some time for their education and expenditure. (Counsellor 2, 4-years, HIV/AIDS Counsellor)

Counsellor 7 and Counsellor 2 identified inadequate salary as a major source of stress as both are not able to meet the needs of their family requirements in terms of parent's health and education expenditure of siblings which is dependent on them.

1.1.2. GENDER ROLES

Out of the seven counsellors, four counsellors responded that the role of a woman at home and family responsibility causes stress. One of the counselors described the difficulties of a woman's role both at home as a mother and daughter in law and its effect on her profession.

I have to be up early. I have to prepare breakfast for the family and attend the needs of my mother in law. Brushing the kid's teeth, dressing up and feeding the children takes time. Dropping her to school, making time for myself to get ready for office, to think of the day's work and to rush to be on time is stressful for me. (Counsellor 1, 4-years, Children in Need of Care and Protection)

Another counselor mentions about the guilt of not being able to give enough time to her children. As a mother, she wishes to be more involved in the lives of her children activities. However, giving enough time becomes difficult with her busy work which creates guilt at a personal level as a mother.

When you tell your clients especially parents that you need to give time to your children, but at the same time I cannot do that with my own children makes me feel guilty and sad. (Counsellor 3, 16-years, Psychiatric Hospital Counsellor)

The counselors felt that their roles as a mother, a wife, a woman, a daughter in law, a home maker, a working woman and the expected roles from both family and society creates stress from them.

4.2. ETHICAL DILEMMAS IN COUNSELLING AND STRESS

4.2.1. BOUNDARIES BEYOND OFFICE SPACE



There are counsellors who compartmentalized separate phone timings for office hours and home hours in order to be less burdened by works and stress. However among the seven counsellors, two counsellors feel that in a profession like counselling, it is not easy to compartmentalize phone calls strictly especially while dealing with suicidal tendency clients. They are of the view that since this profession deals with people's problem directly; attending phone calls makes a difference in client's life.

Counsellor 6 mentioned how she often keeps herself available on telephone. She feels that counselling cannot be restricted to taking of appointment, set up a sitting for an hour and calling it for a day. She put forth that a client's call should be received even outside professional hours as client's problem are largely about emotional crises. However being available to such calls also creates tension for her.

...a lot of adolescents come with attention seeking behaviour of self-harm and have unfortunately ended up in bad state and anytime the phone rings, there is some tension, and there could be suicide or something. The heart always races a little faster receiving such calls and it can be very distressing for us. (Counsellor 6, 7-years, Child Specialist)

Counsellor 2, an HIV/AIDS counsellor described phone call as a necessity but at the same time a source of stress to her. She goes on to explain how people are often very scared when they are diagnosed with HIV, and counselling to be a demanding task at the initial stages as many of them are depressed. Much of her client's calls are from rural areas with no access to counselling apart from hospital counselling during check-up .

They would often call up late at night that they are having fever or they fear death, a lot of insecurities they go through. Sometimes I would be irritated and tired or would even think why do I have to be there for my clients during off office hours but I also understand the need of it. (Counsellor 2, 4-years, HIV/AIDS Counsellor)

4.2.2. ISSUES OF CONFIDENTIALITY

Confidentiality is one of the important ethics of counselling. To abide with the ethics of confidentiality can sometimes contribute to the causes of stress as counsellors are bound to keep all matters of issues strictly within themselves.

Counsellor 7 expressed how confidentiality is challenged not only within oneself but also from the outer ring of questions coming from the staffs in her office about the children she handles.

Sometimes, after dealing with a difficult case and because I have spent a lot of time with the children, the office staffs would just asked me, tell, what was his problem? . (Counselor 7, 4-years, Child Helpline)

Counselor 3 mentions the dilemma of practicing confidentiality and the challenging ethical task of informing to the concerned parents in case of harm or potential harm.



Some parents/ partners get really saddened and frustrated when they hear about self-harm. And some of them react inappropriately to such information when they get back home and this can break the trust between the clients. (Counsellor 3, 16-years, Psychiatric Hospital Counsellor)

A Child specialist counsellor identified the issues faced in confidentiality when parents try to infringe the privacy of their children through concerned and anxious phone calls. She mentioned how often parents or concerned client's members do not understand what it means to practice confidentiality. For them, to care and to take responsibility is to know the details of the client's story even when he/she is not in a position to share with them. She stated,

...the parents would insist me through personal calls asking if their children's problem is because of a boyfriend / girlfriend and very funnily they would delve into details of throwing guessed names to me. They don't have the sense of confidentiality and they would demand something like I'm the mother and I have to know... (Counsellor 6, 7-years, Child Specialist)

Counsellor 5 recalls an incident that made her stressed and guilty on the grounds of making ethical decisions to break confidentiality. She felt stressed about the decision she took as her decision affected not only the client but also his parents. She spoke of how her best interest to help the withdrawn child to participate in sports developed a negative hateful feeling towards her and later had consequences on her, the child and his parents. She says

...but I never knew that my behaviour of suggestion was pushing him (client) to the edge.... I found a letter which he had addressed to me and the letter ended in a very disturbing and threatening note to my life saying "Am going to kill you sooner". I had to report to the school as it involved security issues and the school immediately rusticated him. I felt guilty and questioned whether I have done the right thing. This really put me in distress. (Counsellor 5, 11-years, University Counsellor)

4.2.3. WORKLOAD

Considerable amount of time and effort is required for the documentation of case studies. A lot of time is consumed in trying to document the details of the client's history and background for record keeping and history tracking. Three counsellors described how the number of cases in a day and month contributes to the source of occupational stress. One counselor mentioned the difficulty in documenting case studies of Children in Conflict with Law and Children in Need of Care and Protection as the children would often refuse to reveal their identities and backgrounds. It is time consuming as most of the rescued children would be either in trauma or would refuse to speak up or lie and thus requires more sitting to maintain the accurate record. She says

The children tend to lie about their real identity and their address. There was this time, I had to conduct 4 times the same case study as the child lied and would come with different stories, made-up identities of himself, his parents and family members..... (Counsellor 1, 7-years, Children in Conflict with Law/ Children in Need of Care and Protection)



Counsellor 7 mentions similar cases of dealing with children to be hectic and tiring. She describes the difficult task of case documentation by a single counsellor in the office especially with the increasing rate of Children's cases.

In November 2015, 102 cases came to child helpline. They would often lie about their identity and background and that makes me do a lot of repetitive work. (Counsellor 7, 4-years, Child Helpline)

4.3. IMPLICATIONS OF STRESS ON SELF AND RELATIONSHIP

4.3.1. ANGER

Three counsellors described outburst of anger as a result of stress. They felt irrational, guilty, frustrated and inadequate as a counsellor who fails to do what they often ask their clients to practice A counsellor working with Children stated,

I throw my frustration on my kid while teaching her. And once, I raised my hands on her when she irritated me. (Counsellor 1, 7-years, Children in Conflict with Law)

Similarly, Counsellor 6, a child specialist expressed that she loses her patience and get angry easily with petite things at home. She saw these signs as being overloaded with work at office

.... Sometimes, silly thing makes you get angry, you can't get angry with clients, and my anger sometimes comes out with my family members when I come back. (Counsellor 6, 7-years, Child Specialist)

Counsellor 2 expressed how she lost herself to anger with clients who repeatedly do the same thing over again when asked and counselled not to do. She stated

...we reached that point where we're so tired; we feel we're just humans and we get angry. (Counsellor 2, 4-years, HIV/AIDS Counsellor)

4.3.2. NEGATIVE EMOTIONS

Negative emotions often trigger when one is not able to meet their expectations and when there is a relapse or failure in their client's behavior in spite of putting their sincere effort. Counsellor 4, mentioned how she got deeply affected when one of her clients suicide whom she dealt for a long period. She felt a sense of weakness, failure and incompetent as a counsellor when she received the news.

...I said to myself, I did my best... but you see, I cried even then because I did not know what to do except to feel 'why' and then heaviness. Sometimes, it's very sad when your presence, empathetic ears and counselling don't make any difference to people. I felt so small and frustrated, down and fearful



and the thought to just live with what all they said to you was disturbing enough. (Counsellor 4, 12-years, Child Rights Centre)

Counsellor 1, who works with Children explains how she feels overburdened with her office works as she is not very efficient in handling computer works. She takes her work due to home for husband's help which takes her family time. *"... He helps me out but sometimes he is not very happy and I feel dull that I can't learn fast and trouble him with my office works."* Another counsellor expressed how listening constantly and being there for people gives her introspection of who will hear or be there when she required such attention.

It drains you emotionally sometimes I feel at the end of the day, who is going to listen to my problems when am down and low. Why should I listen to people's problem when I have so many of my own? Then again, oh my God I sound so selfish ... I need help where I'm I going to go. (Counsellor 6, 7 years, Child Specialist)

The three counsellors above describes implication of stress affecting self through low self-esteem emotions of feeling small, frustration, fearful, selfish, dull and inadequate as part of experiencing stress.

4.3.3. SLEEP DISTURBANCES

Two out of seven counsellors talked about sleep disturbances they often experienced. The sleep disturbances comes both from the office works which includes the number of cases they need to deal the next following day and the other comes from getting affected by client's traumatic experiences.

... Sometimes, I would get dreams of the children's stories and I feel difficult to fall asleep after that... I feel very heavy after hearing the abuse, harassment, sexual violence and the family background stories etc. They have to go through so much at such young age. (Counsellor 7, 4-years, Child Helpline Counsellor)

Counsellor 2, an HIV/AIDS counsellor talks how giving one's best to the client affects her as she often receives calls from clients even late at night that they have lost hope to live. *"...my heart was not at peace as her condition was serious, even late night at night I would expect calls from hospital.... worrying and not able to sleep as there is no one to take care of her."*

4.3.4. POSITIVE SKILLS MANAGEMENT

Counsellor 3, describes stress as not only having negative implications but also positive results, describing stress an important experience of life as it brings out the strength in her. It allows her to finish work on time, for her stress taught her better things about life skills management. Stress could kill relationships at home and to a large degree of such awareness, she mentioned,

When I feel stress and worried, I intentionally exercise myself to be more careful of what I'm saying, what I'm doing and that made me a better controlled person, so stress to that much is helpful because I



get more careful of my own thoughts and actions. (Counsellor 3, 16-years, Psychiatric Hospital Counsellor)

A lot of people might just work as a work, profession, a salary etc. But if you take your job seriously and work whole heartedly and more than just a salary, stress is bound to happen, you're dealing lives and with that realisation, I get positive vibes again to be committed to this profession. But too much stress needs to be given attention. I get migraine when stress goes up. (Counsellor 5, 12-years, Child Rights Centre)

Both Counsellor 3 and Counsellor 5 admit that not all stress is harmful as it can produce a lot of positive results. However they both admit a level of certain degree of stress as only helpful, crossing the level might only have negative implication on physical health and mental wellbeing.

4.3.5. AFFECTING RELATIONSHIP

Counsellor 1, described the experience of stress with anger which affects her relationship at home with her child and husband. She mentions, “...*I raised my hand on her, she felt bad and cried... not for long though, but then, my husband got angry with me for doing that. My work affects me.*” Similarly counsellor 6, mentions “...*dealing with clients who repeat the same thing and shows no effort in trying irritates me. It tires me sometimes. They come because their parents want them to see me; it gets difficult to give my best also and that's bad for them too.*”

Stress has its implications resulting in affecting self and relationship. The counsellors described emotions of anger, frustration, fear, sleeplessness, dull, incompetent and inadequacy along with the experience of stress on self and affecting relationship with family and client. Furthermore, the counsellors identified stress as affecting their work and family boundaries which in turn affects their thinking capacity to be rational.

4.4. DISCUSSION AND CONCLUSION

Much of the experience of stress faced by counsellors comes from personal and professional level as seen from the findings current study of women counsellors as well as existing literature. From the analysis and interpretation, it is shown that gender roles and work demands both at home and workplace causes stress to women counsellors. In the context of working women, it become difficult to handle wifhood, motherhood, daughter-in-law's role and responsibilities at home along with the demands from workplace. These challenges might be applicable to most of the working women in general. However, what needs to be considered here is that the women counsellors faced job stress specifically as the nature of counselling requires emotional, physical and mental engagement in the work which adds to their stress.

A very interesting analogy is observed in understanding the stress and coping among counsellors from different backgrounds. There are counsellors who experience financial difficulties and mentioned the pay of low salary contributing to their stress at personal level showed different patterns of coping styles adopted by them. Their coping strategies do not include taking vacations or meditations which requires money and time. Much of their



coping comes largely from the social support they have with colleagues in office and family. The other counsellors who did not experience financial stress also experienced other stress largely from home and occupational demands and in order to mitigate their stress; they adopt different ways of coping through travelling, vacations and meditations.

These all shows different patterns of stress which everyone experiences it and also the resilience in coping to keep up with their profession. However, with this observation, there is an inferential need for an '*organised support system*' as not many counsellors might be able to partake in the position of independent self-coping or even through good support system from family. Though the women counsellors have taken good self-care in coping with stress and having colleagues to share their problem, there is no such guidance or supervision done as most of the counsellors are single employed counsellor in a hospital, organisation, clinic, schools etc. They do not have a body or groups where they can ventilate and express or even be given guidance or supervision by experienced counsellors.

Looking into specific challenges of women counsellors, the lack of knowledge on what counselling entails by clients creates challenges for them. This challenge might be considered as specific challenge faced in the profession by counsellors as the practice of counselling is recent in India and it has been well established like the west. Women counsellors in Guwahati faced this as a hurdle in practicing the profession of counselling as it is not known to many what counselling do and does not. The lack of counselling knowledge as a profession and its implication on individual and society might also be one reason of affecting the support system both to clients who is seeking a counsellor and also to the counsellor's need of support system.

To include people in the profession from all backgrounds and also to encourage low paid counsellors, a need of organised support system should come into the picture where counsellors can find accountability of their emotional needs, supervision of their work and an atmosphere for continuous development of themselves both as a person and professional worker. With an organised support system, much of the problem faced by counsellors might get resolved with the support of peer groups who are counsellors themselves. Guwahati being the entry to many of the North-Eastern states might need to start a model of an '*organised support system for counsellors*' which the other states can follow suit in carrying the profession of counselling more systematically and supportively.

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