A REVIEW OF SELF-COMPASSION AND PSYCHOLOGICAL WELL-BEING AMONG COUNSELORS IN MALAYSIA

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Accepted date: 25 September 2017 Published date: 19 December 2017


Abstract: Counseling has been recognized as both challenging and rewarding. Malaysia, as a developing country has placed more emphasis on the mental health of the population. Thus, one could foresee the growing demand for counselors in Malaysia and their professionalism in the future seeing that counselors appear to be one of the professionals needed in helping people with many different mental health conditions. Counselor psychological well-being is important to the therapeutic relationship, process and treatment effectiveness. Thus, having a sense of psychological well-being is crucial for professional competency. Self-compassion has emerged as a healthy and positive attitude in enhancing counselors’ psychological well-being. However, these essential concepts have not been given much attention in Malaysia. Therefore, this paper reviews the concepts of psychological well-being and self-compassion, especially their relevance to counselors. Also, this paper highlights the significance of future research on self-compassion and psychological well-being among counselors in Malaysia.

Keywords: Self-Compassion; Psychological Well-Being; Counselors

Introduction

Counseling evolved as the 20th century advanced and it has transformed to serve diverse clients from all walks of life (Rio & Mieling, 2012). No other therapeutic profession has been as malleable as counseling to respond to the diverse and complex needs of clients. Counseling, relatively, has become robust by welcoming challenges and all these made counseling a multifaceted profession with multiple specialties emerging to this day (Rio & Mieling, 2012). Counselors are good in promoting change and growth in their clients. However, are they constantly enhancing their state of psychological well-being while enhancing psychological well-being of others? It is believed that the time has come to take a sincere look at the role of well-being in professional psychology (Wise, Hersh, & Gibson, 2012).
Helping professions such as counseling are characteristically attuned to caring for others (Baker, 2003), and on the other hand are at risk for occupationally related psychological problems (Shapiro, Brown, & Biegel, 2007). Sometimes the clients’ pain and suffering can become the counselors’ pain and suffering; thus, it is important for counselors to be able to enter the other person’s world without losing themselves by being present in the client’s life but also present in their own life (Skovholt, 2016). Counselors need to keep themselves emotionally healthy, because only then can they truly be present and effective for their clients. In other words, counselors need to be assertive about their wellness (Skovholt, Grier, & Hanson, 2001). Counselors who neglect their own well-being sooner or later run out of energy and cannot help their clients effectively because all of their energy is going out and nothing is coming back to replenish their energy. Those who disregard their own needs will also find their outlook on the profession deteriorating (Counseling Today, 2011).

Horsfall (2010, p. 52) asserts that “It is so easy for those who are carers of others to neglect their own welfare. We give ourselves to other people – listening to their hurts, mending their wounds – yet fail to care for ourselves.” In a therapeutic relationship, the helping professions themselves are the main instrument of healing. In order to provide clients with the best possible treatment, counselors need to be the best they can be. “Helping yourself first” is then a principle that applies directly to counseling (Counseling Today, 2011). This can also be reflected in every Code of Ethics which mentions about monitoring one’s own physical, psychological, social and spiritual well-being when engaging with clients (NADTA, 2015). For that reason, to adhere to their ethical principles, it is important that counselors enhance their well-being.

Research, however, suggested that counselors are often the last to ask for help and acknowledge the urgent need of self-care (Meyer & Ponton, 2006; Roach & Young, 2007). It has been documented that mentally unhealthy counselors experience more difficulties professionally and personally than their healthy counterparts (Meyer & Ponton, 2006). Professionally, a lack of counselor well-being is associated with handling the negative emotions of clients, boundary issues and early termination. Lack of counselor well-being is linked to self-doubt, sadness, avoidance behavior and social isolation (Meyer & Ponton, 2006). Hence, for counselors, assessing their own psychological well-being can benefit them in enhancing their personal growth (Harris, 2010), in turn strengthening the ability to use the self professionally in the therapeutic process. Moreover, increasing the awareness of psychological well-being among counselors plays a significant role in mental health service effectiveness (Merryman, 2012). As such, in the context of a rapidly changing and challenging mental health service, an unflinching discussion of well-being for counselors seems warranted and timely.

**Psychological Well-Being among Counselors**

Psychological well-being is about lives going well; it is the combination of feeling good and functioning effectively (Huppert, 2009). The experience of painful emotions such as failure and grief is a normal part of life; sustainable well-being does not require a person to feel good all the time but being able to manage negative and painful feelings. Nonetheless, psychological well-being is compromised when negative emotions overwhelm and interfere with individuals’ daily functioning (Huppert, 2009). Normally, people are viewed as psychologically sound if they do not suffer from mental health problems such as depression and other forms of psychological problems and this idea fails to get to the heart of wellness. As a consequence, mental health needs to be defined with the presence of the positive (Ryff, 2010).
Ryff’s psychological well-being (1989) is a framework developed in order to investigate individuals’ eudaimonic well-being and it is one of the most widely used models of well-being. Ryff (1995) described well-being as not only the attaining of pleasure but as the striving for accomplishment that signify the realization of one’s true potential. Ryff and Keyes (1995) claimed that psychological well-being is different from subjective well-being and confirmed the proposed theoretical structure of the multidimensional construct of psychological well-being. Ryff’s model (1989) is a multifaceted approach in measuring psychological well-being with six distinct dimensions: autonomy, personal growth, self-acceptance, purpose in life, environmental mastery and positive relations with others, representing what it means to be psychologically flourishing at one’s maximum potential. From the specific components, Ryff’s framework appears to be different from other hedonic well-being indicators by integrating personal development and self-actualization as the fundamental elements in defining well-being (Sun, Chan, & Chan, 2016). Ryff and Singer (2008) verified that these six dimensions define psychological well-being theoretically and operationally. Ryff’s framework is thus suitable for examining counselors’ positive functioning, seeing that one of the important themes for counselors is to experience becoming their optimum functioning personal and therapeutic self.

As mentioned earlier, counselors frequently bear witness to others’ emotional distress with research suggesting that relating to suffering in an empathic way on a regular basis can lead to increased negative affect such as burnout and compassion fatigue (Beaumont, Durkin, Hollins, Martin, & Carson, 2016; Clifford, 2014; Craig & Sprang, 2010; Diaconescu, 2015; Killian, 2008; Thomas, 2013; Volpe et al., 2014). These experiences may be harmful to counselors’ well-being especially those who neglect their self-care. In addition, counselors’ work involves maintaining effective therapeutic relationships in order to facilitate optimal client functioning. Therapeutic work, at times, may evoke strong feelings of inadequacy, hopelessness, self-doubt and cause mental health professionals to question themselves (Norcross, 2007). Research on work-related stress, burnout, secondary traumatic stress and compassion fatigue in the counseling profession has resulted in a plethora of literature on the importance of therapist self-care (Patsiopoulos & Buchanan, 2011) and one of the emerging aspect of therapist self-care is the construct of self-compassion (Patsiopoulos & Buchanan, 2011). Nonetheless, little is known about how therapists utilize self-compassion in their practice (Patsiopoulos & Buchanan, 2011).

Some studies on counselor well-being have involved individual strengths such as self-efficacy (Curry, 2007) and resilience (Machuca, 2010; Sadler-Gerhardt & Stevenson, 2012). Likewise, a qualitative study was conducted by Lewin (2015) to explore the holistic factors influencing counselor well-being. The phenomenological study yielded several themes including initial attraction to the work (childhood experiences and early exposure to psychology), balance (physical, intellectual, emotional, spiritual, social and environmental), productivity requirements (attitudes and behaviors) and colleagueship (mutual trust and respect between co-workers, emotional connection with colleagues and supervision) in contributing to counselors’ well-being (Lewin, 2015). Besides, Hardiman and Simmonds (2012) conducted a study on 89 Australian counselors and psychotherapists in term of spiritual well-being, burnout and trauma. They found a strong link between existential well-being and burnout and it buffered the effect of trauma on emotional exhaustion. In the Harris et al. study (2013) of 99 graduate counseling students in Pennsylvania, overall psychological well-being was found to be strongly related to perceived wellness. Harris and colleagues (2013) also found that three specific subscales of psychological well-being (positive relations with others, environmental mastery and purpose in life) significantly predicted counseling students’ perceived wellness. In a recent review of the
literature on counselors with regard to personal and professional well-being, McCann et al. (2013) pointed out that self-compassion may play a role in enhancing counselors’ well-being.

Previously published studies emphasized that maintaining well-being is essential for the counseling profession and this is in line with other research which have demonstrated the importance of integrating wellness into counselor education programs in order to promote counselors’ well-being, just as they learn to implement their knowledge of counseling theories and techniques (Roach & Young, 2007; Wolf, Thompson, & Smith-Adcock, 2012). However, most of these studies on the counseling profession are limited to counseling students (i.e., Curry, 2007; Harris et al., 2013; Machuca, 2010); there is still very little focus on the professional counselors in term of their psychological well-being in particular. This subsequently highlights the need for future study to investigate psychological well-being among professional counselors from an alternate perspective by exploring the influence of a healthy attitude toward oneself.

**Self-Compassion among Counselors**

Self-compassion refers to a positive self-attitude involving being open to one’s own suffering, generating the feeling to ease one’s suffering and to heal oneself with kindness, taking an understanding, nonjudgmental attitude toward one’s failures and inadequacies and seeing one’s own experience as part of the larger human experience (Neff, 2003a, 2003b). Accordingly, Neff (2003a) conceptualized self-compassion as the healthy attitude toward oneself with three core interrelated components: self-kindness versus self-judgment, common humanity versus isolation and mindfulness versus over-identification when relating to painful experience. These components combine and mutually interact to create a self-compassionate frame of mind (Neff & Costigan, 2014).

Self-compassion is an important source of eudaimonic happiness (Ryan & Deci, 2001). While the hedonic approach to happiness involves seeking enjoyment and avoiding suffering, eudaimonic happiness involves finding purpose and meaning in life. Self-compassion does not avoid pain but embraces it with kindness and goodwill, thus creating a sense of well-being that is embedded in the experience of being fully human (Neff & Costigan, 2014). The concept of self-compassion is evocative of Maslow (1971) and Rogers’s (1980) perceptions of healthy personality which emphasize unconditional self-acceptance and striving to reach one’s full potential (Neff & Costigan, 2014). Also, the concept of self-compassion resonates with the paradigm of positive psychology. It is associated with the positive psychological strength that assists people in attaining well-being in order to live a fulfilling life (Neff & Costigan, 2014; Seligman & Csikszentmihalyi, 2000).

Self-compassion has received increased research attention since its first emergence in 2003 (Germer & Neff, 2013). A recent meta-analysis conducted by MacBeth and Gumley (2012) clearly showed that greater self-compassion is related to decreased psychopathology. In reviewing empirical work on the correlates of self-compassion, Barnard and Curry (2011) identified that self-compassion has consistently been found to be robustly related to well-being. Hence, self-compassion appears to be a meaningful variable with respect to well-being (Zessin et al., 2015). Given that the research shows evidence to support the practice of self-compassion in addressing psychological issues, it would be of interest to understand the potential influence of self-compassion in promoting psychological well-being among counselors. It is believed that self-compassion, as an adaptive form of self-relation may represent an important source
beneficial to counselors in responding to the challenges of the profession, thereby enhancing their own psychological well-being.

Recently, McCann and colleagues (2013) reviewed research in the health care profession (doctors, nurses, psychologists, counselors and social workers) geared toward a positive psychology state; most of the studies they reviewed were on the ways in handling stress such as coping and there was a lack of research in examining predictors of positive psychology state. McCann et al. (2013) further suggest that self-compassion may play a role in enhancing well-being in counselors. Self-compassion, although individual, might also influence other contextual factors such as engagement in teams, capability to work successfully and ability to maintain boundaries with clients (McCann et al., 2013). Hence, it would be interesting to investigate how self-compassion may influence psychological well-being among counselors. This perspective is assumed to be a sign of moving toward a more positive psychology aimed at identifying the factors that emphasize human flourishing and fulfillment rather than the existence of stressors and hurts (Seligman, 2003).

In a study of 164 counselors in America, Ringenbach (2009) found that self-compassion was negatively related to burnout and compassion fatigue but positively associated with compassion satisfaction. Moreover, by using qualitative method, Patsiopoulos and Buchanan (2011) explored how 15 Canadian counselors practice self-compassion. The three main themes identified were 1) counselors’ stance in a session namely acceptance, mindfulness of present experience, genuineness, attending compassionately 2) workplace relational ways of being like participating on a caring and compassionate work team and 3) maintain a balance through self-care strategies. Counselors also mentioned the benefits of practicing self-compassion such as improved overall sense of well-being, ability to work effectively with clients, balance between client needs and counselor needs, and ability to engage in more proactive and preventive self-care (Patsiopoulos & Buchanan, 2011). Recently, a study on self-compassion, compassion fatigue, burnout and well-being in student counselors showed that higher level of self-compassion and psychological well-being lessen compassion fatigue and burnout (Beaumont et al., 2016). Self-compassion can help student counselors to manage burnout and compassion fatigue, and subsequently improve their professional quality of life.

Although research on self-compassion has grown at an increasing rate, studies on the population of therapists are still lacking (Grant & Kinman, 2012; MacBeth & Gumley, 2012). The existing literature on self-compassion demonstrated the potential benefits of using self-compassion, namely, a buffer against self-critical attitudes, and a preventive method in tackling mental health issues (Patsiopoulos & Buchanan, 2011; MacBeth & Gumley, 2012). Self-compassion cultivates the idea that caring for oneself is important (Neff, 2003; Patsiopoulos & Buchanan, 2011). As such, it may have implication for therapists seeing that it may influence the likelihood of engaging in self-care (Glaittli, 2015). In addition, Boellinghause, Jones, and Hutton (2013) described that therapy might become less technical but more humanistic when therapists practice self-compassion besides encouraging their clients to practice the same.

Self-compassion, therefore, not only improves the well-being of therapists but also brings a positive impact on counseling. It is believed that self-compassion is not an all or nothing concept but exist on a broad spectrum, whereby it can be enhanced or diminished by counselors throughout their professional life (Patsiopoulos & Buchanan, 2011). Thus, understanding self-compassion application in practice is of importance to the body of knowledge on therapist well-being and beneficial to the profession.
The Importance of Research on Self-Compassion and Psychological Well-Being among Counselors in Malaysia

Counseling as a profession within the mental health nomenclature emerged from the guidance counseling movement of late 19th and early 20th centuries. In 1982, the development of counseling in Malaysia reached its first professional milestone with the establishment of the Malaysian Counseling Association, also known as PERKAMA (Persatuan Kaunseling Malaysia). Counseling in Malaysia gained legitimacy when Parliament enacted the Counselors Act 1998 (Act 580; Commissioner of Law Revision and PercetakanNasional Malaysia Bhd., 2006) in order to regulate the practice of professional counseling (See & Ng, 2010). According to the Malaysian Counselors Act 1998, the counseling profession has been accredited as a professional service and the quality of counselors or accreditation of counseling profession in Malaysia is monitored by the Malaysia Board of Counselors (Education and Technical Training Committee and Board of Counselor, 2003). In 2001, the counseling profession in Malaysia was still in its infancy stage; however, the profession has developed in recent years and it is believed that professional counseling in Malaysia is currently poised to transition into its pubescence with many challenges remaining (See & Ng, 2010).

Although research on self-compassion and psychological well-being among the helping profession has been receiving remarkable attention globally, no single study exists in Malaysia which focuses on the self-compassion or well-being of the helping profession, particularly the counselors. To date, the research studies among counselors in Malaysia include barriers and challenges in the practice of multicultural counseling, multicultural counseling self-efficacy and competency, counselor self-efficacy, counselor resilience, counselor self-care strategies, counseling practicum, counseling performance and counseling professional ethics (Rafidah, 2013; Aman & Ahmad, 2010; Harun, Kadir, & Noah, 2014; Haslee Sharil, 2003; Haslee Sharil, Poh Li, & Kooi Foon, 2012; Wan Marzuki, 2011; Noriah, Amat, & Abu Yazid, 2012). However, most of the research studies involved school counselors or counselors-in-training. Also, Ismail and Othman (2001) pointed out another shortcoming whereby most research studies in Malaysia are conducted by student-researchers in local universities in fulfilling their degree or diploma requirements in counseling; thus they have a limited focus, mainly on areas such as career and guidance or general psychology.

To the best of the researcher’s knowledge, no previous study has given sufficient consideration to exploring the self-compassion or psychological well-being among the counselors in Malaysia. Therefore, based on the existing literature, it is obvious that little is known about the association between self-compassion and psychological well-being among counselors. What is unclear is the impact of self-compassion on psychological well-being in a non-western country. With the steady development of counseling program in Malaysia, especially the increased number of doctoral programs, greater emphasis on research focusing on Malaysian mental health issues and counseling practice is needed (See & Ng, 2010). For that reason, future research on self-compassion and psychological well-being among counselors is believed to be very timely to better understand the counseling profession.

According to Huppert (2009), the science of well-being focused on human assets rather than deficit is a promising new area of research. Future study contributes to the knowledge and practice of psychological well-being by adding to the stream of research focusing on psychological well-being and extending the positive effect of self-compassion to counselors’

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psychological well-being. Moreover, the findings of the study on counselors’ self-compassion and psychological well-being provide practical information on professional training and development in order to enhance counselor psychological well-being. It helps to alleviate the issue of inadequate emphasis in the Malaysian education system in training counselors about psychological well-being by incorporating the concept of psychological well-being into its syllabus and programs.

In identifying the universal constructs and cultural specific aspects, Cheung (2012) suggested that cultural analysis could provide divergent cultural perspectives to enhance the knowledge base and inform when culture-sensitive approaches should be adopted in the practice. The culture-specific study does not only expand study of self-compassion and psychological well-being in Malaysia but also expands existing knowledge of self-compassion and psychological well-being from a non-Western perspective. Additionally, the findings of the study could have implication on other issues such as failure of self-care among counselors. Counselor educators can create a culture of self-care in graduate school by promoting the importance of psychological well-being, and this may assist in establishing healthy behaviors in counselors at the beginning of their career which may enhance wellness and decrease the risk of impairment in the future.

Conclusion

In conclusion, a well-designed study on self-compassion and psychological well-being among counselors is of central importance in order to gain in-depth understanding on the positive functioning of Malaysian counselors besides contributing to the counseling field on this particular topic for counselor training and development. While counseling allows counselors to take part in their clients’ remarkable process of human growth and healing, it also may threaten their well-being through exposure to their clients’ trauma and its painful consequences (Meyer & Ponton, 2006). Thus, it is crucial for those who provide therapy to others be aware of their well-being and be well-adjusted in their professional and personal lives (Harris, 2010).

References


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