Student Mental Health in Counsellor Education Programs: Barriers to Help-Seeking for Counsellors-in-Training¹

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In a culture where stigma against mental illness is slowly waning, there continues to be an expectation for mental health providers to be psychologically well and free from mental health problems. Psychological and emotional difficulties are more prevalent among counsellors-in-training than in the general population (de Vries & Valadez, 2006; Deutsch, 1985; Maeder, 1989; White & Franzoni, 1990). Counsellors-in-training are defined as students who are enrolled in post-graduate Counselling and Counselling Psychology programs. Failure to work through mental health difficulties creates potentially serious personal, professional and legal consequences, yet counsellor education programs have taken limited action to address this issue. This situation is unfortunate because finding healthy ways to cope with emotional distress during training can set the stage for effective coping and self-care during the course of counsellors’ careers (Dearing, Stuewig, & Tangney, 2005).

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Students who experience emotional distress may avoid receiving psychotherapy because of several significant barriers, such as affordability, availability, acceptability, and accessibility (Stefl & Prosperi, 1985). There are additional challenges in obtaining psychotherapy that are unique to the counsellor-in-training population. For example, the psychotherapy services available to counsellors-in-training are likely to be provided by people who already have another role in the students’ lives (e.g., sessional instructor, practicum/internship supervisor, future colleague or employer). In such circumstances, the fear of a confidentiality breach may hinder help-seeking (Deutsch, 1985; Fay & Lazarus, 1984).

Counsellors-in-training are typically offered the same therapy services as other students, through their university counselling centre. Typically, campus-based counselling centres offer psychotherapy services, included in the cost of tuition, to students who are facing mental health difficulties. However, these centres are often also practicum locations for counsellors-in-training, which increases the risk that they will encounter their classmates and peers when seeking therapy. Counsellors-in-training may fear that receiving treatment from the university counselling centre will raise questions among faculty and peers about their emotional stability or suitability for the profession (Holzman, Searight, & Hughes, 1996). Many counsellors perceive that to be a good counsellor entails serving as a model of health for others. This persistent belief that therapists should be invulnerable to mental health issues encourages secrecy and denial of personal issues, and acts as a barrier to seeking help (Deutsch, 1985; Skorina, 1982). Additionally, counsellors-in-training who anticipate interning there in the future may fear that their chances of being accepted as an intern will be harmed by the fact that they have been a client. Similarly, students who have
previously interned at the university counselling centre may be concerned about entering into a multiple role relationship (client and intern/supervisee) with the staff in the centre.

**Suggestions for Counsellor Education**

There are several steps that counsellor education programs could take towards changing the climate of student resistance to seeking help for psychological and emotional difficulties. Acknowledging the barriers to help-seeking faced by counsellors-in-training would be an important first step. It should be acknowledged that a similar percentage of students who enter counsellor education programs face psychological problems as in the general population. Acknowledging and normalizing the prevalence of these issues in the context of training, while at the same time emphasizing that improving one’s own mental health, is an essential aspect of professional competence may help to create an environment in which these issues can be discussed (Festinger, Gerard, Hymovitch, Kelley, & Raven, 1953). Open discussions about the necessity and acceptability of engaging in personal therapy and self-care may encourage help-seeking and reduce resistance (Dearing et al., 2005).

Counsellors-in-training often seek guidance from mentors regarding the importance of personal therapy, and are more likely to engage in personal therapy if it is perceived as valuable by their professors (Farber, 1999). However, in many programs, help-seeking may only be informally and inconsistently encouraged. Faculty members should be more consistent in recommending therapy to students. Such consistency can be achieved by offering referral sources that are available, providing explanations about why receiving therapy is beneficial, creating discussion around ethical issues related to counsellor impairment, and informing
students on policies regarding confidentiality (Dearing et al., 2005). Modeling help-seeking behaviours and sharing personal experiences of receiving therapy might be another way to encourage students to seek help (Kitchener, 1992). Programs could also provide accessible, confidential and affordable alternatives, such as recruiting alumni and other members of the local practice community to provide low-cost or pro bono services, instead of relying on the university counselling centre as a primary source of support (Dearing et al., 2005). Additionally, information about these options for personal therapy should be provided to counsellors-in-training as part of their orientation to the program, with ongoing reminders throughout the course of their degree.

Conclusion

The challenges of accessibility, affordability, acceptability, and availability of therapy are all issues that may be best addressed by first acknowledging the high rates of psychological difficulties experienced by counselling students. Faculty should consider taking a mentorship approach towards self-care and therapy engagement as a way to normalize these coping practices as a part of professional development. Additionally, providing counsellors-in-training with consistent information regarding accessibility and availability of resources upon entry to the program would ease navigation through the barriers to therapy that are unique to this population. By considering the practical and psychological barriers to help-seeking, counsellor training programs have the potential to shape the personal and professional development of future counsellors who are struggling with mental health issues of their own.
References


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