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# The Influence of Psychotherapists' Personal Life on General Therapeutic Practice: In the Case of Korean Therapists

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**Abstract:** Psychotherapy is a demanding profession, striving to provide high-quality services to others while maintaining personal wellness. Many psychotherapists experience difficulty in balancing their professional and personal life. Though researchers slowly recognize the importance of the therapist variable in psychotherapy research, little is known about influence of therapists' personal life on therapeutic practices. As part of the "International Study of Development of Psychotherapists" (Orlinsky & Rennestad, 2005), this study explores the influences of personal life on the therapeutic practice of Korean psychotherapists. 166 Korean psychotherapists who work in various settings are examined. In this study, personal life is explored in three different areas: personal therapy, life satisfaction and everyday life practices. The main research questions are: 1) Do therapists who are in personal therapy differ from therapists who are not in personal therapy in their therapeutic practice? 2) Do therapists who report to be highly satisfied in life differ from therapists who are low in life satisfaction in their therapeutic practice? 3) What are the variables related to everyday life that influence therapists' role confidence as therapists? Based on the results, implications for the education and training of the psychotherapists are discussed.

**Key words:** Psychotherapists' development, personal life, Korean psychotherapists

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## I . Introduction

The research on psychotherapy has traditionally focused on the theory and practice of psychotherapy due to the fact that the scientific community values rationality, objectivity and mechanisms conceived as an impersonal process (Orlinsky, 1989; Berger, Berger & Kellner, 1973). There has been relatively less attention paid to psychotherapist themselves, but there is now a significant amount of evidence supporting the view of psychotherapy as a professional relationship in which a crucial variable is the quality of personal relatedness between the patient and therapist as individuals. This relationship is viewed as an important component in strengthening or limiting the influence of the therapeutic process itself. According to current research, the characteristics of psychotherapists and their development as practitioners are found to be one of key factors of psychotherapeutic outcome (Beutler, Crago, & Arizmendi, 1986; Franck & Frank, 1993; Havens, 1974; Luborsky et al., 1986; Orlinsky & Howard, 1975). Although research evidence indicates that a patient's clinical outcome depends most directly on what the patient brings to, and experience in therapy, it is also clear that what a patient experiences in therapy depends largely on the characteristics and quality of the therapist's participation (Orlinsky, Grawe, & Parks, 1994; Orlinsky, Ronnestad, & Willutzki, 2004). Comparative process-outcome research on psychotherapy have shown that the personal connection experienced by patients with their therapists consistently has a vital influence on the benefit that patients receive. As such, research on the characteristics and experiences of psychotherapists is an essential component of psychotherapy, a subject in which more research attention needs to be paid.

Recognizing the importance of the therapist variable in psychotherapy research, several members of Society for Psychotherapy

Research (SPR) gathered to form the Collaborative Research Network of International Study of Development of Psychotherapists (CRN: ISDP) in 1989 (Orlinsky et al., 1999). This group designed a study of the development of psychotherapists over the entire course of their professional career, and included therapists of all professional backgrounds, theoretical orientations, and nations. One of the many advantages of the CRN: ISDP is that it allows a comparison of therapist across several nations.

In particular, regarding the experiences of Korean therapists vis-a-vis their Western counterparts, several noteworthy papers and books have been published based on the CRN: ISDP. In Orlinsky, et al. (1999), Korean psychotherapists, compared to Western therapists, report to experience significantly low levels in “perceived career development”, “claimed therapeutic mastery”, “skill change”, “motivation to development”, “currently experienced growth”, and “currently experienced flow”. However, Korean therapists see themselves as significantly high in levels of “currently experienced loss”. Also according to Orlinsky and Ronnestad (2005), Korean therapists, compared to Western therapists, report to experience being significantly low in “healing involvement”, an essential component for the development of psychotherapists. These results may suggest that many Korean therapists are experiencing stagnation or impairment instead of development in their professions. When therapists’ experience lack of motivation for further professional development and, a lack of work setting support, stagnation or impairment occurs.

According to Jennings et al. (2003), the factors contributing to developing expertise in psychotherapy are experience, personal characteristics of therapists, cultural competence, and comfort with ambiguity. Therefore, the personal experiences and self-perceptions therapists have about themselves in relation to their therapeutic work is a natural starting point for our exploration of the therapist’s development. Generally, most therapists report

that their personal lives influence their professional lives (Dryden & Spurling, 1989; Guy, 1987). However, as O'Halloran and Linton (2000) suggest, therapists who are trained to take care of others have a tendency to overlook the importance of their own health. It is important to not dismiss the most important tool in therapy, which is the therapists themselves.

Linley and Joseph (2007) suggest that therapists who had either received personal therapy previously, or were receiving personal therapy currently, reported more personal growth and positive change and less burn out. Typically, those practitioners who receive personal therapy usually do so from more senior therapists such as "master therapists" for personal betterment or supervision purposes. Generally, those who have had therapy, regardless of its duration, value it as a critical component of their practices. However, few studies have been conducted that focus on the meaning of personal therapy for one's professional self. In the case of Korea only a small number of therapists report to have received or to be currently in personal psychotherapy (Joo, Bae, & Orlinsky, 2003).

Experiencing burnout by therapists can also have a major impact on the therapeutic relationship. The factors affecting burnout needs to be understood better, as they can be quite different depending on the cultural environment. In a study looking at counseling experience and counselors' burnout between Korean and American counselors, Lee et al. (2008) found that there were noticeable difference between the two groups, implying that the area of focus on improving the therapists' burnout causes and symptoms need also to be culturally sensitive.

Another important aspect of the personal life of therapists is their life satisfaction. The sense of satisfaction may be related to finding positive meaning in life. Miller and Thoresen (1999) conclude that meaning in life influences health and wellness. Meaning in life is part of a person's perspective on life, which is

an aspect of health, and is regarded as one's "inner peace" or "coherence in life". Meaning and purpose is connected not only to health but also to hope. Frankl (1984) believes that all people are capable of finding hope. Through striving for an awareness of meaning and purpose in each life, one can experience health and the ability to inspire hope. According to Frankl (1984), the importance of finding meaning is a primary motivator in life. Therefore, we also try to examine whether the Korean therapists' sense of general life satisfaction influence therapeutic practices.

In addition to general sense of everyday life satisfaction, what therapists actually do in life, in terms of activities and so on, may influence therapists' practice. Several researches suggest increasing mindfulness, meditation and other contemplative practices for therapists may have a positive emotional impact as well. Therapists who live a heartfelt life, in addition to living a more authentic existence, are themselves likely able to experience more completely the full range of emotions experienced by clients. Heartfulness is vital to a counselor's wellness. In the Development of Psychotherapists Common Core Questionnaire (DPCCQ) which is the main instrument used in CRN: ISDP, therapists are asked to respond to questions such as, "In your own life at present, how frequently do you freely express your private thoughts and feelings, experience moments of unreserved enjoyment, feel a satisfying sense of intimacy and emotional rapport?" In this study, the authors hope to explore what kinds of activities that therapists partake in everyday life influence therapeutic practice, specifically focusing on the therapists' role confidence. A social psychologist, Bandura (1997) suggests that individual mental processes, such as beliefs, play an important role in motivation, through the expectation and reinforcements for certain behaviors. He further defines role performance confidence as a belief about one's own capacity to develop necessary motivation and cognitive resources to perform in a given situation. In other words, the role-performance

confidence includes an integration of resources and skills. So therapists who have high role confidence are able to conduct more effective therapy.

This study examines three aspects of Korean therapists' personal life on their therapeutic practices. Research concerning the development of psychotherapists in Korea are scarce, and the authors hope to provide some valuable information on Korean psychotherapists. In our explorations, we compare two groups of therapists, those who are in personal therapy and those who are not. The groups are compared with each other along the areas of general therapeutic practice. Also, we compare another two groups of therapists, those who are in high life satisfaction and low in this respect. The two groups are compared with each other in the areas of general therapeutic practices. Finally, we seek to identify variables that influence the Korean therapists' role confidence. Towards this end, the main research questions asked in this study are: 1) Do therapists who are in therapy differ from therapists who do not receive personal therapy in their therapeutic practice? 2) Do therapists who report to be highly satisfied in life experience differently from therapists who are low in life satisfaction in their general therapeutic practice? 3) What are the variables related to everyday life practice influence therapists' role confidence as therapists?

The results of this study will hopefully provide some insights on the key factors influencing the development of Korean psychotherapists and serve as an opportunity for self-reflection and guidepost for their growth. Additionally, the results can provide valuable information in the training and supervision of Korean psychotherapists.

## II. Method

The data used for the study is based on the third wave of the Korean sample of the CRN:ISDP. The CRN:ISDP is an on-going database that has been accumulated starting in 1989 by the Society for Psychotherapy Research (SPR), and has been continued for more than a decade (Bae, Joo, & Orlinsky, 2003; Joo, Bae, & Orlinsky, 2003; Orlinsky et al., 1999; Orlinsky & Ronnestad, 2005). The group known as SPR Collaborative Research Network (CRN) originally consisted of colleagues from Belgium, France, Germany, the Netherlands, Switzerland, the United Kingdom, and the United States, but subsequently expanded to include colleagues elsewhere in Europe, the Middle East, and Asia.

In terms of Korea, the first wave of data collection was conducted in 1993 with the sample a of 123 therapists and the second wave of data collection was done in 1996. The total sample size of the first and second wave consisted of 538 Korean psychotherapists in a broad set of practice fields (Bae, Joo, & Orlinsky, 2003). A third wave of data collection of the Korean sample was done from June through December 2004 based on the revised version of Common Core Questionnaire (CCQKorea/04). The CCQKorea/04 was revised to better accurately reflect the therapeutic situation in Korea, such as newly adding the counseling teacher (*Sang-dam Kyo-sa*) group, those counselors practicing in school settings. A total of 500 questionnaires were distributed, in person and by mail, to the directory members of the Korean Counseling and Psychotherapy Association (KCPA) and Korean Counseling Association (KCA). Of the 500 questionnaires sent out, 174 were returned, most of whom are used in this study. A study concerning the characteristics of development of Korean psychotherapists was conducted based on this third wave of data (Joo & Yoo, 2006).

### III. Research Instrument

The research instrument designed for use by the SPR Collaborative Research Network is the Development of Psychotherapists Common Core Questionnaire (DPCCQ) (Orlinsky et al., 1999; Orlinsky & Ronnestad, 2005). The DPCCQ is a lengthy, self-administered survey consisting of 404 items covering various aspects of the therapist's professional and personal characteristics. The data from the structured responses are described in Bae, Joo, and Orlinsky (2003), Joo, Bae, and Orlinsky (2003), and Orlinsky and Ronnestad (2005). The items analyzed in this study are drawn from section seven of the DPCCQ, which focuses on the therapists' sense of their current professional development, the experience of receiving personal therapy, general life satisfaction and currently experience in their personal life (Orlinsky & Ronnestad, 2005, p.18).

The psychotherapists' experience in their "general therapeutic practice" were surveyed in the DPCCQ starting with the question, "in your recent psychotherapeutic work, how much ...", followed by nine items on a 6-point Likert-type scale ( $0 = \textit{not at all}$ ,  $5 = \textit{very much}$ ). The questions covered both positive and negative experiences in practice by posing such questions as, "Do you feel you are becoming more skillful in practicing psychotherapy?", "Do you feel you are losing your capability to respond empathically?" Therapists' role confidence was measured by asking, "How confident do you feel in your role as a therapist?" based on a 6-point Likert-type scale ( $0 = \textit{not at all}$ ,  $5 = \textit{very greatly}$ ).

Other variables used in this study were experience in receiving personal therapy, satisfaction in present life and everyday life practices. Psychotherapists' experience in personal therapy was surveyed in the DPCCQ with two "yes" or "no" questions: "Are you currently in personal therapy, analysis, or counseling?",

“Have you previously been in personal therapy, analysis, or counseling?” In terms of measuring general life satisfaction Likert-type scale answers to, “How satisfying is your own life at present?” was used. Therapists' current everyday life practices were surveyed by asking, “In your own life at present, how frequently do you...”, followed by six items: 1) Freely express your private thoughts and feelings?, 2) Experience moments of unreserved enjoyment?, 3) Experience a sense of being genuinely cared for and supported?, 4) Feel a satisfying sense of intimacy and emotional rapport, 5) Take opportunities to relax and refresh yourself as an individual?, and 6) Have a sense of belonging to a personally meaningful community? based on a 6-point Likert-type scale (0 = *not at all*, 5 = *very greatly*).

#### **IV. Participants**

From the third wave of the Korean sample of the CRN: ISDP, only 166 subjects were used in the study, due to some missing responses among the 174 returned questionnaires. Professionally, all of the 166 subjects in the analyses were psychotherapists practicing in the field of counseling.

**Table 1.** Sample Characteristics by Groups

Category	Characteristics	Frequency (%)	
		Personal Therapy	Life Satisfaction
Gender missing 0(0%)	Female	Yes 48(27.6%) No 100 (57.5)	High 93 (53.4%) Low 55 (31.6)
	Male	Yes 10(5.7) No 13 (7.5)	High 15 (8.6) Low 8 (4.6)
Age missing 8 (4.8%)	21~30 yrs.	Yes 18(10.8%) No 41(24.5)	High 35 (21.0) Low 24 (14.4)
	31~40	Yes 18 (10.8) No 39 (23.3)	High 39 (23.4) Low 18 (10.8)
	41~50	Yes 11 (6.6%) No 22 (13.2)	High 25 (15.0) Low 8 (4.8)
	51~60	Yes 8 (4.8) No 10 (6.0)	High 9 (5.4) Low 9 (5.4)
Profession missing 7(4.2%)	Counselor	Yes 16(9.6) No 29 (17.4)	High 26 (15.6) Low 19 (11.4)
	Counseling teacher	Yes 19 (11.4) No 55 (32.9)	High 50 (29.9) Low 24 (14.4)
	Social Worker	Yes 3 (1.8) No 6 (3.6)	High 5 (3.0) Low 4 (2.4)
	Psychologist	Yes 2 (1.2) No 7 (4.2)	High 8 (4.8) Low 1 (0.6)
	Others	Yes 16 (9.6) No 14 (8.4)	High 19 (11.4) Low 11 (6.6)
Years of Practice missing 6 (3.6%)	< 1 yr.	Yes 5(2.9) No 15 (8.6)	High 6 (3.4) Low 14 (8.0)
	1~5	Yes 22 (12.6) No 35 (20.1)	High 30 (17.2) Low 27 (15.5)
	6~10	Yes 12 (6.9) No 35 (20.1)	High 34 (19.5) Low 13 (7.5)
	11~15	Yes 5 (2.9) No 6 (3.4)	High 9 (5.2) Low 2 (1.1)
	16~20	Yes 6 (3.4) No 4 (2.3)	High 9 (5.2) Low 1 (0.6)
	20<	Yes 3 (1.7) No 3 (1.7)	High 5 (2.9) Low 1 (0.6)
Education in Counseling Theory and Skills missing 1 (0.6%)	< 1 yr.	Yes 7 (4.0) No 22 (12.6)	High 18 (10.3) Low 11 (6.3)
	1~5	Yes 44 (25.3) No 76 (43.7)	High 78 (44.8) Low 42 (24.1)
	6 <	Yes 7 (4.0) No 16 (9.2)	High 14 (8.0) Low 8 (5.2)
Experience in Supervision missing 21(12.7%)	< 1 yr.	Yes 20(11.5) No 56 (32.2)	High 49 (28.2) Low 27 (15.5)
	1~5	Yes 22 (12.6) No 27 (15.5)	High 30 (17.2) Low 19 (10.9)
	6~10	Yes 4 (2.3) No 6 (3.4)	High 5 (2.9) Low 5 (2.9)
	10<	Yes 4 (2.3) No 11 (6.3)	High 12 (6.9) Low 3 (1.7)

Table 1 shows the distribution of professional and personal characteristics of the sample therapists. As can be seen from the table, though the research was designed to collect a random and representative sample of therapists within Korea, due to the different response rates to the questionnaires, the sample in the study is over represented by those that are on average less experienced, are young females and are in the counselor or counseling teacher professions. Therefore, results of the study should be understood within these sample characteristics.

## **V. Data Analysis**

For the statistical analysis, SPSS 11.0 was used. The nine 6-point item-scales surveyed "general therapeutic practice" were factor analyzed. The principal axis factoring extraction method with Varimax rotation was used to determine empirically and conceptually coherent dimensions. Cronbach's alpha was computed to assess the internal consistency of these scales. Then t-test was used to compare therapists in two groups, those that are therapists who are currently in therapy and the other group who are not. Another t-test was used to compare therapists in two groups, those therapists who report to be high in life-satisfaction and the other group who report to be low in this aspect. Finally, multiple-stepwise regression analyses was used to determine the variables related to everyday practice which influence therapists' role confidence as therapists. The six variables which entered into the regression were: 1) 'express thoughts & feelings' (Freely express your private thoughts and feelings?), 2) 'experience unreserved enjoyment' (Experience moments of unreserved enjoyment?), 3) 'experience genuinely cared for' (Experience a sense of being genuinely cared for and supported?), 4) 'sense of intimacy' (Feel a satisfying sense of intimacy and emotional rapport), 5) 'relax & refresh' (Take opportunities to re-

lax and refresh yourself as an individual?), and 6) 'sense of belonging' (Have a sense of belonging to a personally meaningful community?).

## VI. Results

The results of this study are describe in the order of the research questions posed, as previously explained, and we examine how the personal therapy, general life satisfaction and everyday personal practices influence on their general therapeutic practices.

In terms of general therapeutic practice, the contents and factor loadings of the therapists' experience in the area of "general therapeutic practice" are used. As Table 2 shows, items of factor loading over .55 were selected and two factors emerged. The first factor consisted of six items with the Cronbach's alpha of 0.87. The leading items were, "Do you feel you are becoming more skillful in practicing psychotherapy?" and "Do you feel you are deepening your understanding of psychotherapy?" The factor for these items was termed, "positive experience in general therapeutic practice". The results seem to indicate that being skillful and having a deep understanding of psychotherapy, among a myriad of reasons, are two of the key factors that influence whether therapists have a positive experience in their practice. The second factor consisted of three items with the Cronbach's alpha of 0.77. The leading items for this factor were, "Do you feel you are becoming disillusioned about psychotherapy?", "Do you feel you are losing your capability to respond empathically?", and "Do you feel your performance is becoming mainly routine?" The second factor grouping these items was termed, "negative experience in general therapeutic practice". The items of this factor are typically related to experiences of burn-out and severe stagnation or impairment in development.

**Table 2.** Factor Analysis of Experiences in General Therapeutic Work

Name of the Factor	Items	Factor Loading
I. Positive Experience [Cronbach's Alpha=.87]	* Do you feel you are becoming more skillful in practicing psychotherapy?	.86
	* Do you feel you are deepening your understanding of psychotherapy?	.79
	* Do you feel you are overcoming past limitation as a psychotherapist?	.76
	* Do you feel a growing sense of enthusiasm about doing psychotherapy?	.76
	* How capable do you feel to guide the development of other therapists?	.65
	* How important to you is your future development as a psychotherapist?	.62
II. Negative Experience [Cronbach's Alpha=.77]	* Do you feel you are becoming disillusioned about psychotherapy?	.84
	* Do you feel you are losing your capability to respond empathically?	.78
	* Do you feel your performance is becoming mainly routine?	.55

**Research Question 1. “How does receiving personal psychotherapy influence therapists’ general therapeutic practice?”**

Table 3 compares the two groups, those therapists who are currently in therapy ( $n=54$ ) and the other group who are not currently in therapy ( $n=106$ ), in the area of “general therapeutic practice”. The results show that the therapists who are currently in personal therapy report to experience significantly high in positive experience ( $M=3.60$ ,  $SD=.67$ ), compared to therapists who are not currently in therapy ( $t=4.025$ ,  $p=.0000$ ). There was no group difference in terms of negative experience in general therapeutic practice ( $t=1.196$ ,  $p=.234$ ). It is interesting to note that regardless of experience in personal therapy, therapists’ response

in the areas of negative experience did not change. It is possible that therapists in this sample are less likely to report their negative experience or experience of personal therapy does not influence therapists' negative experience in therapeutic practices.

**Table 3.** Group Comparison of Personal therapy (Currently in therapy) on General Therapeutic Practice

Factor	Groups ( <i>N</i> )	<i>M</i>	<i>SD</i>	<i>t</i>
I. Positive Experience	Yes (54)	3.60	.67	4.025****
	No (106)	3.05	.75	
II. Negative Experience	Yes (57)	1.50	.72	1.196
	No (108)	1.31	.68	

\*  $p < .05$  \*\*  $p < .01$  \*\*\*  $p < .001$  \*\*\*\*  $p < .0001$

Therapists who are currently in personal therapy reported to experience high on the 6 items: 1) "Do you feel you are becoming more skillful in practicing psychotherapy?", 2) "Do you feel you are deepening your understanding of psychotherapy?", 3) "Do you feel you are overcoming past limitation as a psychotherapist?", 4) "Do you feel a growing sense of enthusiasm about practicing psychotherapy?", 5) "How capable do you feel to guide the development of other therapists?", and 6) "How important to you is your future development as a psychotherapist?"

It seems that therapists who are currently in therapy are also the ones that report to have built up their therapeutic skills and understanding over their careers. They are characterized as having been better at overcoming past limitations, deem the developmental process to be important, enjoy practicing therapy, compared to those therapists who are currently not in personal therapy.

**Research Question 2. “How does life satisfaction influence therapists’ general therapeutic practice?”**

In terms of the therapists’ experiences in the area of general life satisfaction, two groups were drawn based on the mean-split strategy based on an item, “Overall, how satisfying is your own life at present?” Therapists who score above average on this item are assigned as highly satisfied group whereas therapists who score below the average are named as low life satisfaction group.

The results show that the therapists who report to be satisfied in their present life experience report to be significantly high in positive experience ( $M=3.46$ ,  $SD=.68$ ) compared to therapists who are low in life satisfaction ( $t=3.389$ ,  $p=.001$ ). There was no group difference in terms of negative experience in general therapeutic practice ( $t=.062$ ,  $p=.951$ ). Again, it is possible that therapists in this sample are less likely to report their negative experiences or the sense of satisfaction in personal life may not influence therapists’ negative experience in therapeutic practices.

Therapists who are satisfied in their present life report to have made progress in their therapeutic skills and understanding, have been better at overcoming past limitations, deem the developmental process to be important, and enjoy practicing therapy (see Table 4).

**Table 4.** Group Difference of Life Satisfaction on General Therapeutic Practice

Factor	Groups ( <i>N</i> )	<i>M</i>	<i>SD</i>	<i>t</i>
I. Positive Experience	High (104)	3.46	.68	3.389***
	Low (56)	3.03	.75	
II. Negative Experience	High (103)	1.38	.79	.062
	Low (62)	1.47	.83	

\*  $p<.05$  \*\*  $p<.01$  \*\*\*  $p<.001$  \*\*\*\*  $p<.0001$

**Research Question 3. “What are the variables relating to everyday personal life influencing the therapists’ role confidence as therapists?”**

Table 5 shows that the variable ‘express thoughts and feelings’ predicted 4.5% of the variance in therapists who report that they have confidence in a role as a therapist ( $R$  square=.045). This variable likely reflects the fact that frequent free expressions of private thoughts and feelings influence therapists’ role confidence as therapists in a positive manner. Surprisingly, other variables such as ‘experience unreserved enjoyment’, ‘experience genuinely cared for’, ‘sense of intimacy’, ‘relax & refresh’ and ‘sense of belonging’ did not seem to have a significant impact on the prediction of therapists’ role confidence as therapists. It seems that instead of using passive approach, active approach of expressing thoughts and feelings may facilitate therapists’ confidence as professionals.

**Table 5.** A Variable Influencing the Role Confidence as a Therapist (Multiple-stepwise Regression Analyses)

Step	R Square	Adjusted R Square	Beta	Sig.
(Constant)				
Freely express thoughts & feelings	.045	.039	2.120 .249	.000 .000

Other variables entered but not significant in equation: ‘experience unreserved enjoyment’ (Experience moments of unreserved enjoyment?), ‘experience genuinely cared for’ (Experience a sense of being genuinely cared for and supported?), ‘sense of intimacy’ (Feel a satisfying sense of intimacy and emotional rapport), ‘relax & refresh’ (Take opportunities to relax and refresh yourself as an individual?), and ‘sense of belonging’ (Have a sense

of belonging to a personally meaningful community?).

In summary, the results show that compared to therapists who were not in personal therapy, the therapists who were currently or previously in personal therapy report higher positive experiences, such as skill and understanding enhancement, sense of development in general practice. Also, compared to therapists who report low in general life satisfaction, the therapists who report high in life satisfaction tend to express positive experience in general therapeutic practices. However, there were no group difference in terms of therapists' negative experience in therapeutic practice. Also, there were no group difference in terms of therapists' negative experience in therapeutic practice. Finally, Among positive variables related to everyday life practices, 'able to freely express private thoughts and feelings' influenced therapists' role confidence.

## **VII. Discussion**

The aim of this study was to explore the three research questions: 1) "Do therapists who are in therapy differ from therapists who do not receive personal therapy in their therapeutic practice?", 2) "Do therapists who report to be highly satisfied in life differ from therapists who are low in life satisfaction in their therapeutic practice?", and 3) "What are the variables related to everyday life practices influence therapists' role confidence as therapists?"

Due to the exploratory characteristic of this research, several limitations must be mentioned. An over sampling of those in the counseling profession seems to have resulted in the data collecting procedure. Therefore, the findings of this study may not be representative beyond the context of this group. The authors plan to address this issue by conducting further research with a more diverse and representative sample population. Furthermore, vari-

ables which may influence psychotherapists' life satisfaction such as the type of profession, experience level, etc. should be considered when conducting research in the future. Also, there is a limitation of using exploratory factor analysis and mean-split strategy for differentiating groups. Solid scales and refined strategy may be used for further studies based on this study.

Though there are some limitations of this research, several insightful points for the development of Korean psychotherapists can be discussed. Firstly, it seems that the therapists' personal life, such as receiving personal therapy and experiencing high satisfaction in life, influences the therapists' general therapeutic practices. This is consistent with other research that shows receiving personal therapy enhances therapeutic practices (Mackey & Mackey, 1994). In general, the practice of receiving therapy by the therapists themselves appears to nurture the development of personal qualities essential to effective clinical practice: caring, respectfulness, and accepting use of self with clients. Receiving therapy also would seem to facilitate the development of empathy as a professional skill, including integration of the cognitive and affective dimensions in relationships characterized by balancing connectedness with separateness. As Hong (2004) argues, in order to effectively conduct psychotherapy, receiving personal therapy is strongly recommended with along with developing other qualities such as bearing ambiguity and difficulty and controlling emotions with stability.

Secondly, in relation to receiving personal therapy, high satisfaction experience in life influences therapeutic practices. As Skovholt and Ronnestead (1992) show, the task of balancing the professional and personal life is a challenging one for many therapists. Their research results indicate that one of characteristics of expert therapists is being able to integrate the two worlds. One way to better manage the balancing act may be to improve one's emotional well-being by therapists receiving ther-

apy themselves. Frequently, professionals attribute benefits of receiving personal therapy as increased insights and awareness of counter-transferences that enhance their skills as a psychotherapist (MacDevitt, 1987). Mackey and Mackey (1994), conducting a study exploring a research question, "What significance may personal therapy have on the development of professional sense of self?" found that the main benefits as being therapist as a model, enhancement of empathy, understanding the therapeutic process, self-awareness and personal/professional development. As in their case, the results of the Korean therapists in this study likely to reflect a similar beneficial effect of receiving personal therapy.

Thirdly, as results in this study show, it is possible that personal therapy or life satisfaction may not help therapists who are already experiencing severe stagnation or impairment. This may imply that receiving therapy is important as a preventive measure. Therapists, therefore, need to recognize early on when they are entering a stage of stagnation or impairment and to take care of themselves proactively, including seeking personal therapy. To this end, therapists need also to enhance their self-awareness and self-reflective qualities.

Finally, the ability to express thoughts and feelings more freely may be closely linked to the therapists' sense of self-awareness. Researchers have shown that expert therapists, more so than novices, seem to be aware of their own internal biases (Etringer & Hillerbrand, 1995). As therapists develop greater present-moment awareness, they can use their own experiences in the here and now of the session more effectively as a therapeutic tool. Such here-and-now processing requires that counselors be able to tune into their own experiences, through internal dialogue, and share genuinely these experiences with the client (Egan, 1998; Yalom, 2002).

Based on the results of this study, several implications for the education and training of psychotherapists may also be found.

Orlinsky and Ronneastad (2005) recommend that therapists' use of professional development resources such as formal supervision, advanced training, or personal therapy in order to prevent currently experienced depletion. Therefore, it would be helpful to have personal therapy included as a part of the therapists' training program. Especially, professionals who typically work with more severe clients toward the reconstruction of dysfunctional personality may be at a greater risk for burn-out. Supervision should include an aspect of personal therapy of the trainee. Both personal therapy and supervision should be a prerequisite of any good education and training program, as it helps to enhance self-awareness, which is not only important as a tool of effective therapy, but also, to the development and growth of the therapists themselves.

Educational programs should include aspects on taking care of one's personal life, and not be just designed to emphasize the professional aspects. It is also important that these measures be implemented in a preventive and proactive way. According to the results of this study, these measures may be much less effective when the therapist is already in a state of impairment. In such states, personal therapy or having a positive perspective in life may not be sufficient. Therefore, therapists would be wise to continually evaluate the quality of their therapeutic work experience and their personal life experience to prevent developmental stagnation, burn out or impairment.

In addition, it is important to have a good sense of self-awareness and to freely express one's feelings without hesitation. These skills should be developed and practiced in the therapists' everyday lives and at an early stage of one's career. Towards this end educational programs should include and encourage activities such as journaling and lively participation in discussions. Psychotherapy can be characterized as a process in which one talks at length about one's private thoughts and feelings to a person who

is a virtual stranger. This both presumes and promotes a highly individualized self, a typical description of Western culture (Base, Joo & Orlinsky, 2003). However, this may be a challenging task for therapists who grew up in Asian culture where keeping emotions inside for the group harmony was recommended (Sue, 1973). It will be interesting to explore in the future how Asian therapists balance or juggle with the polarity between therapists' Asian culture and their individualistic occupation.

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