

# Exploring self-care within the context of cognitive behavioural therapy and supervision.

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## Abstract

This article emphasizes the critical role of self-care in the professional lives of cognitive behavioural therapy (CBT) therapists and supervisors. It delves into the importance of self-care, elucidating its significance in maintaining therapists' mental health and effectiveness. The article presents a range of practical strategies that promote self-care, providing therapists and supervisors with specific steps to incorporate self-care into their daily routines.

Moreover, the article explores common challenges and barriers to self-care, such as a lack of time, feelings of guilt associated with prioritizing one's needs, and a lack of available resources for self-care. The article aims to deepen our understanding of the complexities of practising self-care by shedding light on possible obstacles. In addition, the article includes case vignettes that demonstrate tangible examples of the positive impact of self-care on therapists' mental health and effectiveness.

The overarching goal of this article is to encourage ongoing discussion and research on self-care. It advocates a greater emphasis on self-care in CBT and CBT supervision (CBTS), intending to promote the health and well-being of those who dedicate their lives to caring for others. The insights and strategies presented in this article serve as a resource for therapists and supervisors striving to achieve a balanced lifestyle while effectively catering to the needs of their clients.

## INTRODUCTION

Cognitive-behavioural therapy (CBT) is a prominent approach in psychotherapy, focusing on altering negative thought patterns and behaviours that can lead to mental distress (Beck 2021). Supervision, meanwhile, is a crucial element in the educational process of therapists, ensuring the quality of care provided and promoting the professional growth of therapists (Callahan *et al.* 2019; Prasko *et al.* 2011). However, working in CBT and CBTS can be demanding for therapists and their supervisors (Milne 2007). Thus, self-care – maintaining and improving one's health and well-being – is essential for those in therapeutic roles (Barnett *et al.* 2007; Brugnera *et al.* 2023; Simionato & Simpson 2018).

The primary goal of self-care is to find a balance between work, family life, personal relationships, and self-realization. Not maintaining this equilibrium can result in burnout and a decline in the quality of one's life, work, and interpersonal relationships (Vyskocilova *et al.* 2015). Therapists are also responsible for managing the "oversaturation" of therapeutic work, which can result in disgust, boredom, or burnout (Dattilio 2015). The basic premise for highly dedicated professionals is not to overload (Montero-Marin *et al.* 2016a). Integrating psychotherapy with other essential activities and maintaining clear boundaries between personal and professional life is crucial. Engaging excessively in the psychological analysis and therapy of one's own life and relationships may result in exerting control within the family context and feeling disconnected from others (Posluns & Gall 2020).

The article aims to provide a comprehensive view of self-care in the context of CBT and CBTS, introduce practical strategies for self-care support, and discuss potential obstacles and challenges.

## METHOD

This text presents a narrative review supplemented by our own experience from the point of view of experienced therapists and supervisors with short illustrative case vignettes. We gathered information from the literature and our own experiences to understand the reasons and methods for self-care in the roles of a CBT therapist and supervisor and how supervisors can support therapists in this regard. We entered the following keywords into PubMed: "cognitive behavioural therapy", supervision, self-care, burnout, self-management, "personal experience", and various combinations.

## RESULTS

This section will explore specific examples of successful implementation of self-care strategies. These studies can provide practical guidance and inspiration for therapists and supervisors.

Andersson *et al.* (2020) focus on the use and perceived usefulness of cognitive behavioural therapy (CBT) strategies for self-care among therapists. The study points out that mental health issues are common among therapists and can negatively impact these therapist's effectiveness. The therapist's self-care is, therefore, important to solving these problems.

### Burnout Syndrome and its manifestation in therapists

According to the International Classification of Diseases (ICD-11), burnout syndrome is not a separate diagnostic unit; however, this category is listed among the factors influencing health status. This category QD85 - "burnout" is defined as "a syndrome conceptualized as resulting from chronic workplace stress that has not been successfully managed". Many psychiatrists and psychologists do not diagnose burnout syndrome and rather talk about depression, a reaction to severe stress, an adjustment disorder, chronic fatigue or an anxiety or anxiety-depressive disorder. However, people with burnout often do not meet the diagnostic criteria for these disorders. Conversely, these disorders can be complications following burnout syndrome (Steel *et al.* 2015).

Burnout syndrome is characterized by three dimensions: exhaustion, cynicism, and sense of ineffectiveness (WHO 2019), and can manifest in several mental and somatic problems (Yang & Hayes 2020), including:

- Emotional fatigue: loss of meaning or pleasure from helping others, cynicism.
- Somatic symptoms: exhaustion, fatigue, headache, irritability, indigestion, insomnia, and anxiety manifested by a typical sympathetic and parasympathetic reaction (Table 1).

Professionals at the highest risk include doctors (e.g., oncologists, psychiatrists), nurses, psychologists and psychotherapists, clergy, social workers, teachers, post office workers, emergency dispatchers, police officers on duty, criminal investigators, lawyers, prison workers, and officials in banks and offices. It's estimated that 20 to 30% of professionals working with people experience burnout at least once (Kallwass 2007; Stock 2010). Up to 45% of doctors and 50% of high-intensity CBT therapists reportedly suffer from this syndrome (Ptacek *et al.* 2013; Westwood *et al.* 2017). Research indicates that burnout is more prevalent among young workers and decreases with age (Maroon 2012; Prins *et al.* 2007).

In contemporary academic literature, burnout is considered a different aetiology - distinguishing three subtypes depending on dedication to work. Burnout syndrome can affect those who are over-involved in work, those who are bored by routine, and those who feel powerless in the face of working conditions (Montero-Marin & Garcia-Campayo 2010). The first subtype (frenetic) is characterized by ambitions realized at the expense of health. The second subtype (under-challenged) does not use their talents and sinks into

**Tab. 1.** Typical signs of burnout syndrome

- Loss of ability to rejoice and enjoy life, loss of will to engage, loss of empathy and feelings of responsibility.
- Negative attitudes towards oneself, work, institution, society, and life.
- Emotional problems, including resentment, explosiveness, impatience, and nervousness.
- Fatigue, exhaustion, alcohol and drug and alcohol abuse, loss of interest up to the development of depression, chronic fatigue syndrome, sleep disorders or other mental disorders.
- Irritability.
- Increased susceptibility to psychosomatic diseases.
- Work becomes bothersome, desperately boring and annoying.
- The prevailing mood fluctuates between irritability and resignation.
- Loss of professional enthusiasm.
- Cynicism, irony, and lack of interest in patients.
- Penetrating pessimism for the future.
- Passive aggression towards loved ones, superiors and colleagues ("yes, but" game, sabotage of cooperation).
- Rude slander of patients and colleagues.
- Conflicts in the family, complaints, quarrels.
- Somatic problems often fall into stressful experiences: insomnia, digestive disorders, circulatory problems, and incipient hypertension are common.

a monotonous routine, while the third subtype (worn-out) feels drained, helpless and unrecognized. These subtypes can be understood as stages as the employee gradually loses involvement in work and moves from preoccupation with work to indifference to it. However, this process concludes with neglect and apathy towards the duties performed (Edú-Valsania *et al.* 2022). Such an approach to burnout allows for more differentiated and timely recognition with further, more precise help for those affected by burnout (Abelina *et al.* 2021).

Psychotherapists are often the ones who are inherently enthusiastic, diligent, and accountable in their work. These individuals often prioritize others over themselves and strive to accomplish as much as possible in their lifetime (Van Hoy & Rzeszutek 2023; Yang & Hayes, 2020). A crucial fact that these dedicated individuals frequently overlook is that life is a marathon, not a sprint (Prasko *et al.* 2012). In such cases, professionals come to depletion of all energy sources, representing the final stage of burnout, where emotionally engaged individuals lose their initial enthusiasm and motivation (Prasko *et al.* 2023a; Montero-Marin *et al.* 2016b). Maintaining a sustainable pace and ensuring adequate rest is essential as a solution in this situation (Montero-Marin *et al.* 2016a).

Academic literature describes burnout among therapists as a psychological syndrome that manifests when a therapist feels emotionally exhausted by their work and alienates themselves from patients (Maslach *et al.* 2001). Burnout arises due to an imbalance between the emotional investment of the therapist and the "returns" they receive in the form of appreciation, recognition, and a sense of accomplishment (Dattilio 2015). Paradoxically, the most engaged helping workers who sacrifice themselves for their clients/patients are at the highest risk of burnout. CBT focuses on altering negative thought patterns and behaviours, which requires therapists to deeply understand and empathize with

their clients' mental struggles (Beck *et al.* 1979; Prasko *et al.* 2010). This work can be emotionally draining and lead to burnout if therapists do not care for their health and well-being (Rupert & Morgan 2005; Leahy 2008).

In our relatively secure and prosperous society, we often face high expectations or impose unreasonable demands on ourselves. We aspire to produce high-quality work quickly, flexibly, creatively, and communicatively while remaining most efficient to our clients (Dattilio 2015). Besides striving for professional excellence, we aim to be good partners, parents, and friends (Norcross 2000). Furthermore, we seek to live as authentically and fully as possible. Meeting this "performance and perfection" standard can be challenging and often unattainable.

According to different authors, burnout syndrome results from the interaction of different risk factors. It is generally accepted to assume that occupational context factors drive professional burnout (Maslach & Leiter 2010). Classically, six main work environment-related factors are distinguished: excessive workload, lack of control, lack of reward, unsupportive community, lack of fairness, and conflicting values (Maslach & Leiter 2016).

It is not new to study intra-personal factors. However, recent research on the role of individual-level and non-work factors in developing burnout marks an important new milestone in burnout research. Pointing to the essential role of these two factors in activating burnout pathology (Bianchi *et al.* 2021). This study showed that neuroticism was the best predictor of burnout, but several other aspects of non-work life and individual factors also played important roles as burnout risk factors. These factors are shown in Table 2, along with some other authors' findings.

There are a few factors we would like to look at in more detail because we see them as particularly relevant when thinking about burnout in CBT therapists:

**Tab. 2.** Risk factors for the occurrence of burnout syndrome

Individual-level factors	Characteristics related to work environment	Factors associated with non-work life
Bianchi et al. 2021		
High neuroticism* Sex Age	Job strain* Skill development* Unreasonable work tasks Weekly working hours Job autonomy Support in work-life	Security in daily life* Work–non-work conflict* Sentimental accomplishment Leisure activities Support in personal life
Alarcon et al. 2009		
High neuroticism High introversion Low conscientiousness Low agreeableness Lower levels of self-esteem Lower levels of general self-efficacy Lower levels of dispositional optimism Lower levels of hardiness External locus of control		
Maroon 2012; Stock 2010		
Type A personality Perfectionism Anankastic features Significantly disturbed emotional needs in childhood Stressful mindsets Low self-esteem High level of empathy Excessive expectations and enthusiasm when starting work Excessive need for competitiveness Conflict of values Tendency to suppress emotions Inability to relax Low level of assertiveness Extreme need to please others Compulsively succumbing to the “terror of opportunity.” Inability to rationally plan time Low level of self-reflection	The insufficient social prestige of the profession High-performance requirements An excessive amount of work Low level of independence Lack of support and appreciation from colleagues and superiors Lack of experience in success Insufficient financial reward Bad organization of work Unfair conditions Monotony or meaninglessness of the job content Difficult clients Absence of quality supervision Not a professional perspective Absence of further education The qualification is not used No effect on making the change in the organization Bad physical parameters of the workplace	Absence of a partner An uncomprehending partner Conflict partnership An overly ambitious partner Partner Competition Lack of deeper friendships Lack of hobbies and interests Lack of physical movement Poor nutrition Difficult life events Poor living conditions (housing, finance)
Different authors		
Extrinsic motivation (Kim 2018) Perfectionism (Spagnoli 2021) Workaholism (Schaufeli et al. 2008)		

\* Across all three studies samples (France, Spain, and Switzerland), other factors were sample-specific predictors of burnout

#### Internal (personal) conditions:

- **Dependence on external rewards (praise, recognition).** Individuals who excessively rely on external validation, such as praise or recognition from others, to measure their self-worth and job satisfaction may be more susceptible to burnout. When these rewards are lacking or inconsistent, it can lead to feelings of inadequacy and frustration, contributing to burnout.
- **Perfectionism.** Perfectionists set extremely high standards for themselves and often strive for flawlessness. While striving for excellence can be a positive trait,

perfectionism can become a double-edged sword. It can lead to relentless self-criticism, excessive self-imposed pressure, and an inability to accept anything less than perfection. This can result in chronic stress and burnout.

- **Work addiction.** Also known as workaholism, it is a compulsive need to work excessively and often neglect other areas of life, including personal well-being and relationships. Workaholics may derive their self-esteem primarily from work and may have difficulty setting boundaries between work and personal life. This unyielding pursuit of work-related goals can

lead to burnout due to the strict demands it places on an individual.

#### *External circumstances:*

- **Working with difficult patients who are not improving.** Healthcare professionals, therapists, and caregivers may experience burnout when encountering challenging cases or patients who do not show improvement despite their best efforts. This can lead to frustration, feelings of helplessness, and emotional exhaustion.
- **Excessive time pressure and poor work organization.** High workloads, tight deadlines, and inadequate task time can create constant time pressure. When work is disorganized or lacks clear procedures, it can increase stress levels and make it difficult to manage responsibilities effectively.
- **Insufficient support within the team and problematic labour relations.** A lack of support from colleagues or supervisors and issues within the team dynamics or complicated labour relations can contribute to burnout. Feeling isolated or unsupported at work can lead to emotional exhaustion and disconnection from the workplace.
- **Problematic close relationships.** Personal problems and conflicts in close relationships, such as family or significant others, can spill over into the workplace and impact an individual's emotional well-being. These external stressors can exacerbate burnout.
- **Limited lifestyle (lack of movement, pleasant activities, friendly meetings).** A sedentary lifestyle, limited engagement in enjoyable and relaxing activities, and a lack of social interactions with friends or loved ones can contribute to burnout. These factors can prevent individuals from effectively recharging and coping with work-related stressors.

Other several factors influence burnout. Vicarious trauma involves cognitive changes - different thinking - as a response to disturbing and distressing reports of clients' traumatic experiences (McCann & Pearlman 1990). "Compassion fatigue refers to a state of emotional fatigue that can occur as a result of intense empathetic engagement with people in need" (Figley 1995).

Together, vicarious trauma, compassion fatigue, increased workload, safety issues, role ambiguity, time pressure, reduced resources, and limited supervision contribute to burnout (Maslach et al. 2001).

#### Burnout Syndrome in Cognitive Behavioural Supervisors

CBT supervision refers to the supervisee's systematic cooperation with the supervisor to increase the therapist's therapeutic competencies when working with specific clients (Milne et al. 2008; Prasko et al. 2023b). The goal is to increase the value of the therapeutic process in the client's best interest (Falender & Shafranske 2004). Supervision uses guided discovery and Socratic dialogue to understand and resolve

problematic situations (Milne et al. 2008; Prasko et al. 2023c). The supervisor helps the supervisee understand the broader context of case conceptualization, clarify appropriate treatment procedures, and become aware of transference and countertransference phenomena (Milne et al. 2008; Prasko et al. 2010). The schema of therapeutic supervision is based on the principle of integrative supervision, which is a safe, kind, and enriching experience (Falender & Shafranske 2004; Prasko et al. 2022). Supervision includes a supportive, controlling and educational component (Bernard & Goodyear 2018). Supervision is of great importance in the psycho-hygiene of the worker in the helping professions and in the prevention of burnout syndrome (Skovholt & Trotter-Mathison 2011).

Like any worker in a helping profession, a supervisor can burn out. The basic factor that can prevent burnout is supervisor or any form of supervision - such as peer supervision (Prasko et al. 2012; Prasko et al. 2023c). Supervision has the same effects on the supervisor as it does on the therapist.

In the burnout risk group, especially, supervisors could lead training because of increased work demands alongside supervisor work, providing a learning atmosphere and managing group dynamics. Determining what kind of supervisors prevail in their supervision is also important. It is similar to having a therapist with only complex and difficult patients. Suppose the supervisor has therapists who are in supervision mainly for reasons other than professional growth. In that case, it can be difficult for the supervisor. It is similarly risky if the supervisor crosses roles and takes their colleagues into supervision, for example, from the therapeutic centre in which they work or friends who have asked them for "crisis" supervision, all of which, if excessive, can cause the supervisor to burn out (Pešek & Praško 2016). It is not uncommon for a supervisor to try to change something in the area. However, the system or the psychotherapeutic community does not help them much. On the contrary, it puts obstacles in their way. Gradually, the supervisor begins to lose the desire to change something and closes down, first to the company of those who put obstacles in their way and later to all colleagues and supervisors.

#### Self-care in the Context of CBT

Protecting against burnout is not easy, but it is possible and can be successful. The importance of employing various self-care strategies lies in human well-being's intricate and diverse nature. Individual needs physical, emotional, and psychological dimensions, making a single approach insufficient. Utilizing diverse strategies acknowledges these complexities and promotes adaptability and resilience in addressing changing needs and circumstances. Various types of beneficial self-care strategies are listed below (Table 3).

It is important to note that each individual is unique, and what works for one person may not necessarily

**Tab. 3.** Types of beneficial self-care strategies

- (1) Physical self-care: Engaging in activities such as walking, maintaining a healthy diet, and cycling can contribute to physical well-being (Abramson 2021). Prioritizing adequate sleep and relaxation is crucial for mental and physical recovery, enhancing resilience against burnout.
- (2) Mental self-care: Praising oneself, finding an emotional outlet (e.g., drawing, playing music, writing, etc.), and cultivating gratitude can enhance mental health.
- (3) Social self-care: building and maintaining positive relationships at work and home can provide emotional support and a sense of belonging, reducing the risk of burnout. Non-work-related conversations with colleagues and dinners with friends can foster social connections. Maintaining social connections and spending time with friends can offer emotional support, provide a sense of belonging, and reduce feelings of isolation, all contributing to burnout prevention.
- (4) Spiritual self-care: Meditation and volunteering can nourish the spirit (Abramson, 2021). Also, working with one's values could be beneficial.
- (5) Personal self-care: Trying out a new activity or hobby or establishing a skincare routine can contribute to personal growth. Engaging in continuous learning and skill development can provide mental stimulation, a sense of achievement, and a break from routine, which can help prevent burnout.
- (6) Positive activities: Slow breathing, listening to music, exercising, practising mindfulness or meditation, reading for pleasure, connecting with others, and engaging in hobbies can promote positivity.
- (7) Time planning for relaxation and regeneration is crucial for maintaining balance (Narasimhan *et al.* 2019).
- (8) Professional self-care: Regular supervision and feedback in the workplace can offer guidance, clarify expectations, and provide a sense of direction, helping to manage work-related stress. Seeking support from colleagues or supervisors can provide professional guidance (Abramson 2021).
- (9) Self-care in personal therapy: understanding behavioural patterns, own personality traits that contribute to constant burnout, and possible reasons for the lack of motivation to engage in self-care may be beneficial in reaching long-term changes, which may prevent burnout (Ziede & Norcross 2020)

work for another. The key is to find the self-care strategies that are most effective for you.

Specific CBT self-care strategies may include regular self-reflection and self-assessment, learning new skills and techniques for stress management, maintaining a work-life balance, and seeking support from colleagues and supervisors (Abramson 2021; Prasko *et al.* 2021; Norcross & Guy 2007).

For example, a therapist may start by scheduling activities that bring them joy and a sense of satisfaction (Norcross & Guy 2007). That can help the therapist better understand how their actions influence their thoughts and emotions (Beck *et al.* 1979).

Another strategy may be to break down demanding tasks into smaller, more manageable parts (Norcross & Guy 2007). This can help the therapist better manage stress and improve their ability to focus on their work (Beck *et al.* 1979).

It is important to note that each individual is unique, and what works for one person may not necessarily work for another. The key is to find the self-care strategies that are most effective for you.

Peter, a therapist specializing in CBT, worked intensively with clients for several years. Over time, he began to feel the weight of fatigue and exhaustion creeping in. His motivation started to decrease, and he grappled with feelings of burnout. Peter incorporated self-care strategies into his daily routine, recognizing the need for change. He started meditating regularly to alleviate stress and began scheduling time for relaxation and rejuvenation after each client session.

Understanding the importance of work-life balance, Peter also decided to make time for leisure activities. He and his wife shared a love for swimming but had always struggled to find

time for it. Determined to change this, Peter decided that they would visit the swimming pool twice a week.

For Peter, meditation, relaxation, and swimming became priorities. He realized that if he did not take care of his well-being, he risked growing resentful towards his work.

Peter noticed a significant improvement in his mental state thanks to these changes. He felt less exhausted and found that he was better equipped to handle the demands of his job. This transformation reaffirmed the importance of self-care in maintaining professional effectiveness and personal happiness.

Tomáš, a student undergoing CBT training, grappled with fatigue and stress amidst his intensive studies and practice. The rigorous demands of his academic and practical commitments were taking a toll on his well-being.

Recognizing the need for self-care, Tomáš took proactive steps towards managing his stress levels. He began running regularly, finding that the physical exertion helped alleviate his exhaustion and provided a much-needed break from his demanding schedule.

Understanding the importance of leisure in maintaining mental health, Tomáš also started scheduling time for enjoyable activities. He made it a point to regularly visit the theatre and cinema, indulging in the arts to relax and escape from his professional responsibilities.

After each therapeutic session and study period, he allowed himself time to unwind and relax. This downtime became essential to his routine, allowing him to recharge before diving back into his work.

Within a month of implementing these changes, Tomáš noticed a significant improvement in his overall well-being. He felt more content and less fatigued, reaffirming the importance of self-care in upholding a healthy life.

## Strategies of Self-care

### *Supervision*

Self-supervision is another valuable tool for therapists. It involves the therapist reflecting on their practice independently, drawing upon their feelings, experiences, and personality to enhance the therapeutic process (Prasko *et al.* 2023b). This reflective practice promotes self-awareness and helps therapists understand their reactions and responses in therapy sessions.

Daily self-reflection is also beneficial for therapists. It allows them to analyze their thoughts, feelings, actions, and motivations, improving their understanding of themselves and their practice (Raut & Gupta 2019). Regular self-reflection can lead to personal growth and enhanced performance in essential competencies (Sutton 2023).

Openness to feedback from "uninitiated observers" or supervisors can further enhance a therapist's practice. Feedback provides an objective insight into the therapist's performance and skills. It offers a chance to learn and practice new skills (Burgess *et al.* 2020).

Supervisors themselves can benefit from going to their supervision. It allows them to reflect on their supervisory practice, receive feedback, and continuously improve their supervisory skills (Prasko *et al.* 2023a).

### *Self-care in supervision*

Supervision plays a pivotal role in fostering self-care among therapists. A supervisor can act as a crucial support system, helping the therapist identify areas of stress or burnout and suggesting effective coping strategies (Abramson 2021).

In addition to providing practical advice, the supervisor can also create a safe space for the therapist to engage in self-reflective thinking (Prasko *et al.* 2012). This allows the therapist to process their emotions and experiences in a supportive, non-judgmental environment.

Supervision can contribute significantly to the therapist's personal and professional growth by facilitating open dialogue and promoting self-awareness. It is a valuable tool in the ongoing journey of self-care, helping therapists maintain their well-being while providing the best possible care to their clients.

Marie is a CBT supervisor. After several years of working with patients and supervising therapists, she began to feel emotionally drained by her work. The constant interaction with clients and the emotional toll it took on her started to affect her well-being, leading to irritability towards her clients and supervisees. Marie took proactive steps to improve her situation, recognizing the need for change. She consciously decided to reduce her client load and stop taking on new supervisees. This decision was not easy, but necessary for her mental health.

Marie incorporated regular yoga sessions into her routine to aid her physical regeneration. Yoga, known for its stress-relieving benefits, provided a much-needed respite from the emotional

demands of her work. It became an oasis of calm in her otherwise hectic schedule.

In addition to yoga, Marie also started scheduling regular free time after each therapeutic or supervisory session. This time was dedicated solely to relaxation and self-care, allowing her to decompress and process the emotional content of the sessions.

These changes had a profound impact on Marie's work-life balance. She noticed a significant decrease in feelings of exhaustion and an increase in job satisfaction. By prioritizing her well-being, Marie could find more joy in her work and provide better care for her clients and supervisees.

In conclusion, Marie's story serves as a reminder of the importance of self-care in emotionally demanding professions. It underscores the need for balance and the courage to make necessary changes for well-being.

### *Cognitive Restructuring*

Cognitive restructuring is a powerful tool used during supervision to help therapists combat burnout symptoms. This process involves identifying and challenging maladaptive thoughts, attitudes, and beliefs and replacing them with more adaptive and accurate ones (Prasko *et al.* 2023b). In supervision, cognitive restructuring can help therapists gain a new perspective on their experiences, reduce negative self-perceptions, and enhance their coping skills (Gordon 2012). By reframing their thoughts about their work, therapists can manage stress more effectively, improve their emotional well-being, and prevent burnout. Moreover, metacognitive reflection in supervision can also be beneficial. This approach encourages therapists to re-evaluate their beliefs and biases, fostering a deeper understanding of themselves and their reactions in therapy sessions (Zalzala & Gagen 2023). In addition to cognitive restructuring and metacognitive reflection, a healthy work-life balance is vital for preventing therapist burnout. Therapists should ensure they have sufficient personal time outside their professional responsibilities and strive to manage their workload effectively. An example of a supervisory dialogue is when the supervisor helps the supervisee with self-care.

**Supervisor:** Hello, welcome to supervision. How are you today?

**Supervisee:** Hello, thank you for your time. I'm doing pretty well but feel overwhelmed and stressed from work.

**Supervisor:** I see. What burdens and stresses you the most?

**Supervisee:** Well, I have many clients and little time. I must fulfil various administrative duties, writing reports, plans, and requests. I don't have enough space for creativity and personal development. I feel like I'm in a carousel where I keep doing the same thing.

**Supervisor:** That sounds like a challenging situation. How does it affect your emotions and thoughts?

**Supervisee:** Well, I feel tired, exhausted, bored. I think I'm stuck in a routine, have no perspective or purpose, and have lost enthusiasm and passion for my work.

**Supervisor:** That's sad. These are very negative and demotivating thoughts about yourself and your work. Let's look at them like we look at them with clients - using cognitive restructuring. Choose the one that you think has the most impact on how you feel. Which one would it be?

**Supervisee:** Probably the one that comes to mind often. I'm stuck in a routine where I have no perspective, and work has no meaning.

**Supervisor:** How do you think these ideas are true and useful?

**Supervisee:** Well, they're probably not entirely true. I know I have some skills and experience and have done some good things for clients. But they are not completely false either. After all, I see that it is still the same and that I have no change or challenge. When I think about it, I believe it 100%, but when I say it out loud, I believe it 70%.

**Supervisor:** That's enough. How could you phrase them differently to make them more objective and realistic?

**Supervisee:** Well, maybe I could say I work with many clients and have much work. I perform various tasks that are part of my profession. I am doing my best, but I want more time and space. I have some strengths and weaknesses as a therapist and can learn and improve.

**Supervisor:** That sounds like much more reasonable and balanced thoughts. How do you feel when you say them out loud?

**Supervisee:** I feel better. Calmer and more relaxed. More satisfied and optimistic.

**Supervisor:** That's great. You can also see in yourself how your thoughts affect your emotions and behaviour. As I understand it, when you say negative and demotivating things about yourself and your work, you feel bad and lose motivation and desire to work. And when you say positive and motivating things about yourself and your work, you feel better and have more energy and interest in work.

**Supervisee:** Yes, you are right. Can you think of anything else I could do to help?

**Supervisor:** Can you think of anything? What else do you use in similar situations with patients?

**Supervisee:** I could use an achievement journal to write down situations when I did something well or when I was satisfied with my work. Then I can read it after myself and give myself a nice reward. For example, go to a cafe for coffee and cheesecake with raspberries. In this way, I can strengthen my ability to recognize and acknowledge my strengths and achievements.

**Supervisor:** That sounds like a good idea. Do you think it might help you?

**Supervised:** It is a form of self-care that I recommend to patients to learn to be more positive and appreciative of themselves. Why can't I try it on myself? I want to try it. I did this with patients and didn't even think of it for myself.

**Supervisor:** Great. So, you could start writing a success journal and bring it to your next supervision. We will discuss it together, look at your notes, and how you handled automatic thoughts. Do you agree? Isn't it too much to do tasks?

**Supervised:** I agree. I'll give it a try. Thank you for your help and support.

**Supervisor:** You're welcome. I am glad you are willing to try new possibilities and want to work on yourself.

### *Self-compassion*

A recent systematic review of empirical research about self-compassion benefits for mental health professionals stands for this practice as an important part of the curricula of mental health professionals (Crego *et al.* 2022). Self-compassion benefits the therapists' well-being and prevents burnout, compassion fatigue, and secondary traumatization. Thus promoting the effectiveness of mental health professionals in working with clients. Self-compassion could be an important strategy when considering different burnout subtypes, especially in the frenetic subtype (Montero-Marín *et al.* 2016a; Abeltina & Rascevska 2021).

**Supervisor:** Hi, Lena, how are you today?

**Supervisee:** Hello, thank you, I am tired (smiles).

**Supervisor:** Oh, I'm so sorry about your tiredness. Do I understand right that you are exhausted?

**Supervisee:** Yes.

**Supervisor:** Could I ask about your smile when you tell me you are tired?

**Supervisee:** I think it's so stupid how I'm organizing my day that I smile at my misery!

**Supervisor:** You sound so hard on yourself!

**Supervisee:** I'm. Because I need to do so much! I need to be good at my work and prepare at night time. But I also know that I should take care of myself. I feel that I made a mistake after mistake. So exhausting!

**Supervisor:** It sounds like observing this tiredness today during our supervision could be important. What do you think?

**Supervisee:** It's an interesting turn. I want to do it. Otherwise, I'm struggling with it!

**Supervisor:** Fine, it sounds like you often scold and curse yourself. I hear a very critical attitude towards yourself. Is it just now?

**Supervisee:** No, I'm all the time criticizing myself. And it's again my mistake.

**Supervisor:** I have one idea of what we could do, but before I ask you, do you think that maybe you are burning out?

**Supervisee:** I'm afraid to admit it, but yes. How good that you said it!

**Supervisor:** Thank you for your bravery in disclosing it. I understand that you are currently going through a difficult phase in your professional career and suspect burnout. Still, you are very critical of yourself for every little mistake you make. What do you think we could do with this? Maybe you have an idea. What would you do with a client with a similar issue?

**Supervisee:** Of course (smiles), I would offer self-compassion to the client!

**Supervisor:** How about you? (smiles).

**Supervisee:** Maybe it's not a bad idea.

**Supervisor:** Let's do an exercise Kristin Neff calls the compassion break.

**Supervisee:** Great idea. I forgot about its existence!

### *Working with Different Methods*

Working with different approaches during supervision can be a powerful strategy to help therapists combat burnout symptoms. Supervision modes refer to the



various ways supervision can be delivered, including individual, dyadic, group, and live supervision (AIPC 2011).

Individual supervision involves one-on-one sessions between the supervisor and supervisee, providing a personalized and focused approach. Dyadic supervision involves two supervisees simultaneously, promoting peer learning and collaboration. Group supervision involves a supervisor working with a group of therapists, fostering a supportive community where members can learn from each other's experiences. Live supervision occurs in real-time as the supervisee acts as a counsellor, allowing immediate feedback and intervention (AIPC 2011).

These different supervision formats can help therapists gain new perspectives, enhance their skills, manage stress levels, and prevent burnout. For instance, group supervision can provide a supportive environment where therapists can share their experiences and challenges, helping them manage stress and prevent burnout (Prasko *et al.* 2022). Similarly, live supervision allows immediate feedback and intervention, helping therapists refine their skills and handle challenging situations more effectively (AIPC 2011).

Moreover, working with different modes during supervision can also promote self-reflection and self-awareness among therapists. By reflecting on their practice and receiving feedback from supervisors and peers, therapists can gain insights into their reactions and responses in therapy sessions. This reflective practice can lead to personal growth and improved performance in essential competencies (Sutton 2023), ultimately contributing to burnout prevention.

**Supervisor:** Hello, welcome to supervision. How are you today?

**Supervisee:** Hello, thank you. I'm doing pretty well but feel vulnerable about work.

**Supervisor:** I see. What happened?

**Supervisee:** I'm working with a client with a strong schema of emotional deprivation and mistrust. He is very closed, dismissive and inaccessible. I feel he is hostile towards me and doesn't want me in his life. I feel rejected and incompetent as a therapist.

**Supervisor:** This is a difficult situation. How does it affect your experience?

**Supervisee:** Well, I feel sad, angry, hurt. I'm getting out of Vulnerable Child. I also tell myself that I am a bad therapist, cannot relate to the client, and have failed. That's my Critic.

**Supervisor:** I see. These are your Critic's unpleasant thoughts about yourself. How do you think it helps you, and is it true and useful?

**Supervisee:** Well, that is probably an exaggeration, but I tend to believe it at the moment. Now that I realize it, I know I can do it well and already have some therapy skills and experience. I have already helped several patients, and I am trying to help that patient as well. But the self-criticism is not entirely false. After all, I see that it does not work as I would imagine and that the client rejects me or says it does not help him.

**Supervisor:** So, some criticism strikes you as true and some as exaggerated. How could you phrase them differently, from Healthy Adult mode, to make it more objective and realistic?

**Supervisee:** Well, maybe I could say that I'm working with a difficult client and that his schemas are deeply ingrained and difficult to change. I'm doing my best, but I cannot control everything. I have some strengths and weaknesses as a therapist and can learn and improve. Also, this patient, coming to me, does not miss a session. Something keeps him in therapy with me. Some small steps have already been taken.

**Supervisor:** That sounds like much more reasonable and balanced thoughts. How do you feel when you say them out loud?

**Supervised:** I feel more balanced. I realize that the work with him is not as bad as my Critic sometimes tells me. I feel like I trust myself more.

**Supervisor:** That's great. Perhaps we could attend to that client in supervision now if you don't have a more important agenda. What do you say to that?

**Supervisee:** Yes, I agree, that's what I came for.

### *Self-experience*

Self-experience is crucial to CBT and CBTS. It involves a deep understanding of oneself, which can significantly enhance the therapeutic process (Prasko *et al.* 2012). Therapists who deeply understand their emotions, values, and behaviours can connect more authentically with their patients. This connection can lead to more meaningful therapeutic interactions and outcomes (Brugnera *et al.* 2023).

In the context of self-care in CBT, self-experience is pivotal in preventing or combating burnout (Pešek & Praško 2016).

Understanding one's emotional experiences and reactions can help therapists identify early signs of burnout, such as feelings of exhaustion, irritability, or reduced job satisfaction. By recognizing these signs, therapists can proactively manage their stress levels and prevent burnout (Prasko *et al.* 2012).

Furthermore, self-experience can help therapists maintain a healthy work-life balance. By understanding their needs and limitations, therapists can set boundaries that prevent overwork and allow for necessary relaxation.

In conclusion, self-experience is a vital component of self-care in CBT and supervision. It enables therapists to tune their lives in meaningful ways that align with their values and goals (Brugnera *et al.* 2023). This connection enhances therapeutic practice and promotes therapist well-being by preventing or combating burnout.

### *Endurance*

One of the ways to better manage stress and maintain "passion" at work and in your personal life is to work on yourself and increase your resistance to stress (Degnan *et al.* 2016). The prevailing opinion is that people acquire resistance, indomitability, and resilience

**Tab. 4.** The main characteristics of people resistant to burnout

<p><b>Self-relation and personality traits</b></p> <p>They are aware of their value and importance.</p> <p>They know their worth is not determined solely by what others think.</p> <p>They accept themselves and can act following themselves and their values.</p> <p>They are curious and open to new things and changes.</p> <p>They are creative and can, for example, express frustration through artistic means.</p> <p>They approach problems constructively, which they perceive as a "challenge to learn and experience something new" and not as a "threat".</p> <p>They perceive unpleasant events as "demanding," not "unbearable".</p> <p>They know how to find advantages even in bad experiences.</p> <p>They master basic assertiveness skills.</p> <p>They know how to admit their mistakes and failures, from which they try to learn.</p> <p>They have their fears and doubts but do not give in to them much.</p> <p>They have a certain perspective; they can look at problems from a wider perspective.</p> <p>They have a sense of humour and can laugh even at themselves.</p> <p>They can relax and have enough physical activity, interests and hobbies.</p> <p>They accept their positive and negative emotions as a source of full experience and learning.</p>
<p><b>Relationships with other people</b></p> <p>They have a positive (friendly) attitude towards others and are empathetic and tolerant.</p> <p>They look for and can maintain close and valuable relationships,</p> <p>They have sufficient social support (family, friends, co-workers).</p> <p>They try to get along well with others, but at the same time, they are independent.</p> <p>They can create and maintain firm boundaries between themselves and other people.</p> <p>They look for strengths and positives in other people and support them.</p> <p>They are interested in other people and naturally help others.</p>
<p><b>Relationship to life and value system</b></p> <p>They consider life meaningful and generally have a positive attitude towards it.</p> <p>They perceive the white one more from the "chessboard" of life, which consists of a similar number of black and white squares.</p> <p>They have a balanced value system (self, family, transcendence).</p> <p>They are convinced that they have a certain influence on their life and can direct it well, but at the same time, they do not always have everything under control.</p> <p>They know how to plan their time and distribute it evenly between work, family, friends and interests.</p>

in the first ten years of life; however, even adults can strengthen their resistance, e.g., through psychotherapy. Resilient people's characteristics can be divided into three areas, i.e., how they relate to themselves, how they relate to other people, and how they relate to life (Table 4).

#### *Value system*

We can divide values into egoistic (e.g. one's health, appearance, self-enjoyment, professional success), partially self-transcending (e.g. family security, helping friends), and fully transcending or transcendent (e.g. altruistic help for other people, animal protection, nature protection) (Hayes *et al.* 1999; Vyskocilova *et al.* 2015). Balanced values characterize stress-resistant people by focusing on themselves, others, and self-transcendence (Frankl 1963; Hardiman & Simmonds 2013).

When the therapist is unsure which values are important to them, they risk working superficially, and their lack of value orientation can be transmitted to the patient. Uncertainty about the therapist's values can lead to stress and anxiety. Even worse, the therapists may be

unsure of their values, leading to actions that contradict some of them, causing anxiety or stress and feelings of guilt (Twohig & Crosby 2008). For these reasons, the therapist needs to know their values and how to act according to them. During supervision, the supervisor can help the supervisee orient themselves in their values while reflecting on the work with the patient.

#### *Awareness and Management of Emotions*

In CBT, therapists and supervisors often struggle to manage their emotions while helping others navigate theirs. Recognizing and accepting one's emotions is a crucial first step towards better emotional control (Brugnera *et al.* 2023). However, cultural norms often discourage the expression of emotions, labelling them as childish, irrational, or unnecessary. That can lead to a fear of expressing emotions appropriately and a tendency to suppress true feelings. Societal attitudes such as "I have to be strong. Only the weak give in to emotions", "a decent man is never afraid and never cries", and "When I let my feelings get too much into my body, I lose control and embarrass myself in

front of others", further inhibit emotional expression. As a result, individuals rarely discuss their current emotional state, what they are experiencing, its intensity, its implications, and the information it provides.

To counteract this, therapists and supervisors are encouraged to periodically "check in" with themselves throughout the day, especially during tension or restlessness. Paying attention to one's feelings and acknowledging what's happening internally can be incredibly beneficial. This involves being aware of diverse emotions, inviting them for a symbolic tea or coffee, learning to name them mentally, assigning them a colour, and allowing oneself to experience them fully.

It's also important to observe not just the emotions but also the physical reactions associated with them (e.g., the tension in the hands, pressure in the stomach), thoughts (e.g., "I have to do something now to get rid of this fear"), catastrophic images (e.g., an image of being criticized by a boss at work), and observable behaviour (e.g., trying to please someone, apologies, blaming someone for something).

Emotions are not harmful; on the contrary, they often serve as good companions that bring useful messages. Negative emotions are not inherently bad either - they can ennoble, cultivate, humanize, and strengthen us, and they will eventually pass. It is perfectly okay to cry in a safe environment; doing so can often bring much relief.

Often, rejected emotions will sooner or later reappear and catch up with you in situations when it will be least convenient for you. Discussing your emotions with people you trust and asking them about their feelings simultaneously can have a mutually soothing and bonding effect.

#### *Work Team and Workplace Atmosphere*

The atmosphere in a work setting, particularly within a team, plays an essential role in the overall functioning and productivity of the group. That is especially true in the context of CBT teams. The work atmosphere in a CBT team is multifaceted and hinges on several key elements. First, effective task management is crucial. This involves efficiently organizing and delegating tasks among team members, ensuring that each member understands their roles and responsibilities. This clarity helps prevent confusion and conflict, fostering a more harmonious work environment (Hakanen & Schaufeli 2012). Second, the concept of meaningfulness is integral to a positive work atmosphere. This refers to the sense of purpose and fulfilment that team members derive from their work. When therapists find their work meaningful, they are likely to be more engaged and motivated, enhancing their performance and contributing to a more positive work atmosphere (Van Hoy & Rzeszutek 2023).

However, the cornerstone of a positive work atmosphere is arguably the quality of the relationships within the team. Cooperation is essential for effective

teamwork. Team members must work together towards common goals, sharing knowledge and resources and supporting each other in their tasks.

A sense of belonging is another important aspect of these relationships. Team members should feel valued and included, fostering a sense of unity and camaraderie. This sense of belonging can enhance team members' commitment to their work and each other.

Mutual support is also vital in a CBT team setting. Team members should be able to rely on each other for help when needed, creating a supportive environment where everyone feels backed up.

Finally, respect and appreciation among team members are fundamental for maintaining positive relationships within the team. Recognizing each other's contributions and treating each other with dignity can foster mutual respect and appreciation, contributing to a more positive and productive work atmosphere (Hakanen & Schaufeli 2012; Van Hoy & Rzeszutek 2023).

In work settings, a CBT therapist can operate in various environments. They may work independently or as part of a group of other CBT therapists. They could also be part of a larger outpatient or inpatient psychotherapy department where they coexist with psychotherapists from different orientations. In such settings, managing potential rivalry or conflict that could arise due to differing therapeutic approaches is important.

In conclusion, cultivating a positive work atmosphere within a CBT team involves careful task management, promoting meaningful work, and nurturing good relationships centred on cooperation, belongingness, mutual support, respect, and appreciation.

#### *A balanced lifestyle*

Maintaining a balanced lifestyle is indeed an art, one that requires careful attention and constant adjustment. It involves finding harmony between various aspects of life, including work, family, friends, and leisure activities (Linley & Joseph 2007).

Work is a significant part of our lives. It provides us with a sense of purpose and contributes to our identity. However, it is essential not to let work dominate our lives to the detriment of other areas. Striking a balance between professional responsibilities and personal life is crucial for overall well-being (Hakanen & Schaufeli 2012).

Family and friends form our support system. They provide emotional support, enrich our lives, and contribute to our sense of belonging. Spending quality time with family and friends, nurturing these relationships, and ensuring open communication are vital for a balanced lifestyle (Wood *et al.* 2008).

Leisure activities offer a break from the routine and provide opportunities for relaxation and enjoyment. Whether pursuing a hobby, engaging in physical activity, or simply taking time out for self-care, leisure activities play a significant role in maintaining a balanced lifestyle (Pešek & Praško 2016).

However, achieving this balance is easier said than done. It requires self-awareness, planning, and the ability to set boundaries. It is about conscious choices where we spend time and energy (Linley & Joseph 2007).

In conclusion, a balanced lifestyle is not a destination but a journey of continuous adjustment and aligning our priorities. It is about creating a life that aligns with our values and contributes to our well-being.

#### *Planning activities*

Planning activities is a crucial aspect of creating a balanced lifestyle. It involves organizing professional and personal activities to promote well-being and prevent burnout (Hakanen & Schaufeli 2012).

In the CBT framework, planning involves organizing therapy and supervision sessions to ensure effectiveness without leading to excessive fatigue. That enhances the quality of therapy and contributes to the therapist's sense of accomplishment and fulfilment (Linley & Joseph 2007).

Moreover, planning enjoyable activities is equally important. Without enough enjoyable activities, life is reduced. To work well with clients, it is important to experience enough variety outside work, meeting others, chatting, joy, interests, and fulfilling curiosity (Pešek & Praško 2016; Steel *et al.* 2015). These activities serve as a respite from work and provide opportunities for relaxation and rejuvenation. Such activities can significantly contribute to a balanced lifestyle, whether it is spending time in nature, enjoying cultural activities, playing sports, or having friendly gatherings with family and friends (Prasko *et al.* 2023a).

However, achieving this balance requires careful planning. It is about finding the right mix of work, rest, and play. It involves setting boundaries, prioritizing tasks, and making time for self-care (Prasko *et al.* 2011).

#### *Work, Family, Friends and Interests*

People sometimes exhaust themselves by focusing most of their energy in one direction, for example, focusing only on work (Dattilio 2015; Van Hoy & Rzeszutek 2023). At the same time, they neglect other important areas of their lives, such as friends and hobbies, which are often the main sources of real joy in life and "recharging batteries" (Steel *et al.* 2015).

People who are satisfied with their lives often exhibit greater resilience to stress (Brugnera *et al.* 2023). The model of life satisfaction proposed by Pešek & Praško (2016) suggests that a fulfilling life is supported by three fundamental pillars: work, family, and leisure time.

First, having a job that provides sufficient satisfaction and being part of a work team where one feels comfortable is crucial. Second, having a supportive and understanding partner can significantly improve life satisfaction. Additionally, children, parents, and even grandparents can serve as sources of support and positive emotions.

Lastly, leisure time plays a significant role in life satisfaction and the sense of purpose. It should be dedicated to personal development, hobbies, interests, and nurturing deep, intimate relationships with close friends.

It is beneficial if these three areas are evenly balanced for optimal life satisfaction. The metaphorical "table of life satisfaction" is most stable when three strong legs support it. If it relies on only two or even just one leg for an extended period, or if the supports are weak, then life satisfaction - and consequently psychological resilience and emotional stability - may become difficult to maintain.

#### *Communication*

Effective communication is a fundamental aspect of maintaining a balanced lifestyle. It is particularly crucial in CBT, where therapists and supervisors must appropriately express their feelings and need to their clients, students, partners, children, colleagues, and superiors (Steel *et al.* 2015).

Understanding one's own needs, as well as the needs of others, is a key component of effective communication. This involves recognizing and acknowledging our emotional states and the emotional states of those around us. It also includes expressing these emotions and needs clearly and specifically (Rimondini 2011).

In addition to understanding and expressing emotions and needs, effective communication involves listening actively and empathetically to others. This can help build stronger relationships and foster mutual respect and understanding (Prasko *et al.* 2023b).

Moreover, effective communication can also contribute to better problem-solving skills. By expressing our thoughts and feelings clearly, we can work collaboratively with others to find solutions to problems. That can lead to better outcomes in both personal and professional settings (Rimondini 2011).

#### *Mindfulness*

Mindfulness is a critical aspect of a therapist's life, allowing them to perceive what is happening around them and within themselves. They learn to work with what they experience, including thoughts, emotions, and physical sensations, both in therapy and supervision, as well as with their family, friends, and during their leisure time (Davis & Hayes 2011).

The practice of mindfulness is based on several principles. The first is the object of observation, which refers to what one pays attention to. The second principle involves noticing the object of observation moment by moment, that is, over and over again. The third principle applies to returning whenever something takes one away, such as a thought, sound, or significant physical sensation.

In a therapy session, mindfulness means focusing on the client's experience, oneself, and the interaction that is going on. When meeting with a loved one,

**Tab. 5.** Coping with burnout feelings

1. Be gentle and kind to yourself and others.
2. Your job is to help change, not change other people. You can change your relationship with them, not them.
3. Find your "refuge" - a place to rest and find solitude when necessary.
4. Support colleagues, subordinates, and management; encourage and praise them when you feel that way. Learn the same from them.
5. In the face of the suffering you witness, it is only natural that you sometimes feel helpless and hopeless. However, sometimes, it is enough to be close.
6. Change and improve.
7. Distinguish between two types of lamentation - what makes the situation worse and what calms and heals the problem.
8. When you leave work, think of something you did.
9. Encourage and strengthen yourself. Create instead of being a stereotype, and you draw energy as an artist.
10. Please make the most of the friendship in the team and support it. Enjoy the joy of others.
11. Do not talk about work during breaks, "switch off", and leave problems aside.
12. Plan "moments of peace" or "well-being" and enjoy them.
13. You would rather say, "I want, I do not want to, I have decided", than "I should, I have to, I cannot."
14. Learn to say clearly "yes" but also "no" - be yourself.
15. Indifference and irony in relationships are far more dangerous than admitting that no more can be done.
16. Rejoice and laugh - often and gladly - and play!
17. Follow a good lifestyle and pay attention to how you eat and sleep!
18. Move the body every day - practice, dance or walk.

mindfulness means full commitment to an essential conversation. When experiencing leisure activities, mindfulness means mindfully experiencing the given activity here and now (Table 5).

### Challenges and obstacles

Self-care is essential for therapists and supervisors but can also be challenging. Common barriers may include a lack of time, guilt associated with prioritizing one's needs, and a lack of available resources for self-care (Kallwass 2007). A lack of time is often reported as a major barrier to self-care (Narasimhan *et al.* 2019; Norcross 2000; Pešek & Praško 2016). Therapists and supervisors may feel too busy caring for their clients and students to find time to care for themselves. This problem can be particularly pronounced in high workloads or understaffed environments (Abramson 2021). It was found that around 47.9% of clinical and counselling psychologists reported moderate to high levels of emotional exhaustion. Work-life balance, managing clients with chronic/complex issues, and dealing with highly distressed clients were identified as the most distressing stressors. Emotional exhaustion among psychologists was significantly predicted by early maladaptive schemas and maladaptive coping modes, in addition to job demands. Both intra-personal and organizational factors contribute to increased vulnerability to burnout (Simpson *et al.* 2019). The recent study explores the role of self-compassion in the connection between dysfunctional critic modes of emotional distress and subjective well-being. The findings reveal that dysfunctional critic modes are significantly associated with emotional distress and subjective well-being. According to the schema-focused framework, these modes give rise to negative inner messages that make

individuals feel unworthy and unloved. Emotional distress is often characterized by high levels of these modes, which are influenced by past experiences (Arslan 2023).

Guilt is another common obstacle. Some therapists and supervisors may feel they should devote all their energy and attention to their clients or students and that self-care is selfish or unprofessional (Abramson 2021). This guilt may be reinforced by cultural norms or expectations emphasizing self-sacrifice and caring for others at the expense of oneself (Prasko *et al.* 2023a; Stock 2010), and again, it could be a result of activating dysfunctional critic modes.

Cultivating a healthy attitude towards oneself, which includes the dimension of self-compassion, could be an umbrella skill for CBT therapists and supervisors to implement self-care. Future research could be devoted to this.

A lack of available resources for self-care is also a common barrier. Therapists and supervisors may not have access to sufficient resources for self-care, such as stress management programs, opportunities for physical activity, or support groups (Abramson 2021).

Overcoming these obstacles requires an awareness of the importance of self-care and an active effort to incorporate it into daily practice. This may include scheduling time for relaxation and recovery, seeking support from colleagues or supervisors, or using available resources for self-care (Prasko *et al.* 2012, 2023a).

## CONCLUSION

Self-care is a vital component of the work undertaken by therapists and supervisors in cognitive-behavioural therapy. The significance of self-care becomes

particularly evident within CBT, where therapists engage with clients grappling with challenging mental health issues. The emotionally demanding nature of this work can lead to burnout if therapists do not prioritize their health and well-being. Similarly, self-care is crucial for supervisors, who are pivotal in supporting therapists' self-care efforts. Supervisors can assist therapists in identifying areas of stress or burnout and provide coping strategies.

We have explored how supervision in CBT and CBTS practice can contribute to a therapist's self-care. Supervision is not only an effective tool for developing therapeutic competencies and enhancing the quality and effectiveness of the therapeutic process, but it also provides an opportunity for reflecting on one's work and relationships. It allows for modifying maladaptive thoughts and schemas, managing stress and emotional tension, and strengthening self-esteem, self-confidence, self-competence, and self-reflection. Thus, supervision can be a safe, nurturing, and rewarding experience for the therapist, contributing to mental health preservation and burnout prevention.

However, as discussed in the "Challenges and obstacles" section, self-care can be challenging. Therapists and supervisors may encounter several barriers, including a lack of time, guilt associated with prioritizing one's needs, or a lack of available resources for self-care.

Despite these challenges, continuing research and discussion on this topic is imperative to promote the health and well-being of those who provide care to others. As case studies demonstrate, successful implementation of self-care strategies can improve mental health and therapist effectiveness.

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