



Who should we train? Being cruel to be kind

Selection for training programs in counselling and therapy is not an easy thing to discuss without giving offence. As a society, we readily tolerate stringent selection criteria when it comes to the practice of medicine or the granting of a pilot's licence. Even the armed forces try not to put guns in the hands of the obviously unstable or paranoid, but we balk at appearing selective when it comes to who should be a counsellor or therapist. We equate our profession with caring and empathy, with treating everyone equally, regardless of their background, abilities and beliefs. If this is the attitude we display in our clinical practice, then surely (trainers reason) we should take the same attitude to the way we select applicants who seek to join our profession?

Trainers are swayed by compassion for those who have endured massive trauma, and now seem keen to help others through struggles similar to their own. Trainers charged with selection often commend those who are 'passionate' about helping people, even though, in my experience, passion and urgency usually indicate, on an unconscious level, the presence of a correspondingly urgent need for self-healing that may have little to do with the ability to help others.

Even more frequently trainers say: "OK, well, he'll have a steep learning curve for a while, but I think our program is exactly what he needs to help him get in touch with his feelings." Since any training program worth its salt will aim to foster the self-awareness and interpersonal sensitivity of trainees, many educators argue that a training program is essentially 'personal growth', and therefore should not be withheld from anyone who seems likely to benefit from it. This is an argument that might seem especially appealing to private training institutes that depend entirely on the admission of a necessary minimum number of fee-paying students. If challenged, such institutions will concede that some of the people they admit may not be well-suited to the profession, but then add that this doesn't really matter, as most of them will drop out prior to graduation, or fail to get a job even if they do complete the program. (Such arguments would be more convincing if the same institutes did not routinely encourage their students to believe that they will be able to set up successful private practices on graduation.) Even university educators have been heard to argue, "Let the market decide... weak graduates just won't get jobs, they'll drift off into some other line of work".

But perhaps the importance of personal growth and awareness in our profession has led us astray. Is counsellor education the same thing as counselling? Should students expect to be 'fully received', in the same way as Rogers advocated for clients? Is the training of a psychotherapist identical with experiencing psychotherapy as a patient? Is rejecting applicants the equivalent of being a critical, punitive parent? To each of these questions, my answer is 'No'. Rather, personal growth is the vehicle by which trainees expand their capacities to act therapeutically with their future clients. Personal development supplies the necessary experiential underpinning for a full understanding of the theories trainees will be expected to master. But at the end of the day, a training program needs to be far more than simply a personal growth experience—therapy without the stigma, as it were. Acquiring and practising skills, developing an appreciation of choice points and timing, and receiving accurate and honest feedback on these things—these are equally important components of any training program. If, in intake interviews, applicants can't listen, talk out of turn, show little self-awareness, or seem rigidly attached to simplistic understandings of human nature and helping, we should question their suitability. To admit such individuals, despite our misgivings, is in my view 'being kind to be cruel'. We gratify their wish

and, as a result, get to feel benign and non-judgemental—but at what cost? Responsible applicants, who have simply been out of touch with their real motives for being a counsellor, will be deeply disappointed, even humiliated, when, after being accepted into training, they then fail. Massively entitled applicants, whose life position is to blame others rather than scrutinise their own abilities and motives, will respond to failure (even to constructive feedback) by lodging formal complaints and/or threatening to litigate.

In earlier columns in this series, I've already made clear where I stand on some of the criteria that should guide our selection procedures. I favour older applicants over younger ones, and personally consider the late twenties-to early thirties as the 'lower age limit' for would-be counsellors (while conceding there will always be a few exceptions). Very young counsellors will struggle to feel 'right' about sitting with clients who are twenty years older than they are, and (in the immortal words of the 1980s sitcom) 'married—with children'. Even more important than mere life experience is the capacity to reflect meaningfully upon that

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experience. Recent research suggests that the cerebral cortex is not fully myelinated until the fourth and fifth decades of life—it now appears that this process may extend into the middle fifties. This physiological maturation underpins the kind of psychological maturity counsellors and therapists need. It enables people to stand back from their own experience and engage in 'reflective thought'. Counsellors need to be able to think about what they are doing, not just do it, and they need to be able to assist their clients to do so too. If this self-reflective capacity is relatively undeveloped in most of us until our thirties (along with the capacity to accept our own vulnerability and eventual death) then that would surely be another potent reason for preferring applicants who are entering, or have entered, their fourth decade of life.

Most training programs, quite rightly, seek to admit individuals who are capable of warmth, empathy and 'transparency', capacities that need to be present, at least in some degree, before training starts, since they can only dubiously be developed in individuals who do not already possess them (Mearns, 1997). But while we have focussed on these affective capacities, we've paid less attention to—even felt uncomfortable about—the need for balancing cognitive capacities. However warm, accepting and 'congruent' a counsellor may be, these qualities are insufficient to make her, or him, an effective counsellor. So, what cognitive capacities should our applicants possess?

First, a good counsellor must be capable of 'seeing the wood for the trees'. In an earlier article on selection (Crago, 2003), I called this 'a pattern-making intelligence'. It is necessary for counsellors to be able to grasp and remember key details in their clients' accounts—but even more useful if they are able to allow a 'big picture' of the client and her issues to emerge from that mass of detail (as distinct from the rapid imposition of a pre-set 'template', something of which many inadequately equipped counsellors are guilty). Hence the next cognitive capacity that a

good counsellor should possess: the ability to hold theoretical templates lightly, to be guided by the empirical evidence of how a client behaves in the room, rather than by pre-acquired convictions (whether traditional psychiatric diagnoses, or popular 'diagnoses' like 'Co-dependency').

Educational scholars speak of the capacity to 'generalise and abstract', to tease out an underlying theme from a lengthy account, to stand back from it and think about what it means. Counsellors who can only describe, without standing back and looking at the organising principles and assumptions, are unlikely to be able to accurately detect themes in the material a client presents. But if the counsellor moves too rapidly to impose a set of rigid assumptions on what the client says, that is no better.

As Donald Schon (1991) showed, accurate and useful 'big pictures' develop as the result of complex (and partly unconscious) interactions between the counsellor's personal history, her clinical experience (memories of past clients who have behaved in somewhat similar ways to this one), and theoretical templates that help her make sense of the dynamics in the room. Self-evidently, such 'practice wisdom' only develops over years. But at the point of entry to a training program, we can at least look for evidence of flexibility, tolerance for ambiguity, for the awareness that there may be more than one explanation for something—in contrast to a preference for a single 'correct' explanation, or rigid clinging to a single framework for understanding things. In their landmark text, McAuliffe and Erikson (2011) return again and again to the ability to embrace complexity and ambiguity as vital to the development of counselling competence.

How might we test this? Viewing of a carefully selected segment of a movie or TV show—a segment that poses both emotional and cognitive challenges and resists reduction to simplistic formulas—can provide evidence of such capacities. Requiring a written response to the segment will give us some insight into applicants' ability to tolerate ambiguity and complexity without being 'swamped' by it.

Given the inevitable subjectivity of many of the judgements that have to be made in counselling, it is important that we intake students who are prepared to balance their compelling experience of this individual client against the generalisations in the professional literature. In contrast to psychology, with its emphasis on 'evidence-based practice', counselling and psychotherapy have elevated the importance of trained clinical subjectivity. But it isn't ever going to be simply one or the other; it is the ability to move backwards and forwards between both poles, to hold both perspectives simultaneously, that is required for competent practice. Once again, we return to the capacity for flexibility and tolerance of ambiguity as one key to successful counselling.

Paradoxically, however, counselling and psychotherapy also call for judgement, and for decisive intervention, especially at times of crisis. The capacity to rule something 'in' or 'out', to take a firm stand, and to rein in self-indulgent, unproductive talk, can sometimes be as important as the capacity to tolerate ambiguity. So, in terms of the Myers-Briggs Type Inventory, we need to seek applicants whose 'J' and 'P' scores are closely balanced. Someone who leaps to judgement automatically, rapidly decides what type of person she is dealing with, and what type of approach is required, is (as we argued above) unlikely to do well as a counsellor, although she may please managers whose agencies are in thrall to demands to 'push the clients through' and 'achieve measurable outcomes'. But by the same token, will someone with a very dominant 'perceiving' function be capable of confronting a client (albeit in an appropriate way, and at an appropriate moment)?

The possession of an internal locus of control is important. It is easier to help strongly self-critical trainees to develop a more objective sense of what may be beyond their control than it is to help those who

automatically assume that whatever goes amiss in counselling must be the client's fault. Similarly, an applicant who cannot wait a year until the next round of admissions, but immediately seeks out a course he can start in a few weeks, is unlikely to make the kind of counsellor who will patiently wait for a client to be ready for change; and an applicant who cannot observe reasonable boundaries around an admissions process, but wants to 'jump the queue', get the ear of the admitting staff, or break into what another applicant is saying to tell her own story, is not likely to be able to subordinate her own needs to those of a client, and to read her client's cues appropriately. In these, as in many other ways, applicants' behaviour during the selection process will provide in-the-room clues as to their suitability for the profession—something I have expanded on in Crago (2003). As with clients, what applicants do is a far better guide to who they are than what they say, since conscious control is far more easily exercised over the latter.

In that same paper, I have outlined some principles for running a selection process that stands a decent chance of admitting students likely to benefit from a training program, and of selecting out those applicants who are not. With the help of colleagues, I have come to realise that small group selection processes are more useful than one-to-one selection interviews, because the group environment supplies a far richer field of information on how the applicant copes with others—whose attitudes, values and behaviours may be very different from her own. I've also found it vital to have two interviewing staff, not just one. A selection process is only as ethical, rigorous and insightful as those who conduct it, and a single selector is extremely vulnerable to countertransference-inspired bias, both for, and against, certain applicants.

No selection process, however carefully planned, is ever going to do a perfect job. Inevitably, a few unsuitable applicants will slip through, only to be identified later. But our job at the point of application is to offer places to those who, we are confident, can take and use what our program offers, and become students we will be proud to graduate. Instead of 'being kind to be cruel'—by admitting applicants who are unlikely to withstand the rigours of training—I suggest we be 'cruel to be kind'—kind not only to those we admit, but even more importantly, kind to their future clients, to whom every selection process and every set of training standards must ultimately be responsible.

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Hugh Crago has taught counselling at Griffith University, the University of New England, Jansen-Newman Institute (St Leonards), The Institute of Counselling (Strathfield), the University of Western Sydney and Australian Catholic University. He is co-author with Penny Gardner of *A Safe Place for Change: Skills and Capacities for Counselling and Therapy* (forthcoming, IP Communications, 2011), and of several other books and many articles.