

Mandatory Personal Therapy as a Requirement in Counselors' Training and its Ethical Challenges in Selected Universities in Nairobi Kenya

Joyzy Pius Egunjobi^{1,2}, Stephen Asatsa², Jacinta M. Adhiambo³

¹*Psycho-Spiritual Institute, Marist International University College Nairobi, Karen, Nairobi-Kenya*
^{1,2,3}*The Catholic University of Eastern Africa Nairobi, P.O. Box 15055-00509 Langata, Nairobi-Kenya*

Abstract: Personal Therapy is practiced in the training programs for psychologists, psychotherapists, and counselors in Kenya. Being made mandatory and the burden of time and money are of ethical concern. This study thus investigates mandatory personal therapy and its ethical challenges in the training programs of postgraduate clinical and counseling psychologist in some universities in Nairobi, Kenya. The study adopted a concurrent design to investigate the target population of 635 counseling students at the Nairobi University, Catholic University of Eastern Africa, Daystar University, and Tangaza University College. The sample size was 255 comprising of 245 counseling students, five professional counselors, and five counselor educators. The response rate to the online questionnaire was 66.6% while the response rate of the interviews was 100%. The Quantitative data was descriptively analyzed in percentages using pie charts and histogram while narrative, content, and thematic analysis were used to analyze the interviews. The results showed that majority of the counseling students have positive perception of personal therapy as a mandatory requirement in their training with some ethical issues of violation of right and freedom of students, dual relationship, and disingenuousness which require attention of the faculty members and professional therapists attending to these students.

I. INTRODUCTION

Personal Therapy has become a mandatory requirement in many training programs for psychologists, psychotherapists, and counselors where the trainee must complete certain hours of therapy themselves before graduation. In Kenya, not only that personal therapy for clinical and counseling psychologists is a mandatory requirement in training, it can also be required in some mental health professional membership. Although there are justifications for making this mandatory such as learning about psychotherapeutic theories, skills, and techniques, attainment of a significant level of psychological maturation and personal awareness in order to be able to help another person who is doing the same, personal development, professional development (Jarrett, 2018; Ieva et al., 2009; Norcross, 2005; Kalantzi-Azizi et al., 2003), and practicing being a therapist by observing how it is done while in the client's seat.

However, the practice of personal therapy has raised some ethical issues in the area being made mandatory, the required

number of sessions, and in the outcomes of personal therapy in the counselors' training program. Yet, little investigation has been published on the ethical issues involved in mandatory personal therapy required of counseling students (Ivey, 2014). This study, therefore, sought to investigate the outcomes of mandatory personal therapy including the ethical concerns from this requirement in counselors' training.

Background

It is not a gain saying that the practice of personal therapy for therapist trainee have become a practice that is highly recommended or made mandatory. This started since the time of Sigmund Freud (1937) who opined that personal therapy is the deepest and most rigorous part of clinical training. Hence, an analyst should engage in an analysis of himself as a preparation for the future activity. This analysis of the analyst is materialized in personal therapy where the therapist trainee is a client of another therapist.

Today, in many training programs for psychologists, psychotherapists and counsellors across the world, a mandatory personal therapy has become one of the components of the training where the trainee must also spend time in therapy in the clients' role (Jarrett, 2018). In the United Kingdom, the Division of Counselling Psychology of the British Psychological Society requires that counselling psychology trainees must undertake 40 hours of personal therapy as part of obtaining their qualification (Rizq & Target, 2008; Jarrett, 2018). This was the same number of hours of personal therapy required by the British Association for Counselling and Psychotherapy (BACP, 2002) until 2005 when personal therapy is no longer a requirement for accreditation. The European Federation of Psychologists' Associations (EFPA), on the other hand, requires at least 100 hours of personal therapy or personal development (Rizq & Target, 2008).

In Greece, postgraduate students are required to undergo about 40 hours of personal development or personal therapy as part of their training and self-awareness process in order to accord them the opportunity to know themselves better, and sensitize them to the feelings, thoughts and expectations a client might experience while in therapy (Malikiosi-Loizos, 2013).

In the United States of America, personal therapy is neither required in the training of psychologists or counselors nor required to obtain licensure in mental health disciplines such as psychiatry, clinical psychology, etc. However, some specific training programs may require it, and a large number of programs recommend personal therapy for their trainees (Reidbord, 2019). The Council for Accreditation of Counseling and Related Educational Programs (CACREP) had no formal policy regarding personal counseling for students. CACREP accredited programs only required counseling students to experience 10 hours of group counseling instead (CACREP, 2016a, Section 2, 6h). The American Psychological Association (APA, 2017) and the American Counseling Association (ACA, 2014) do not require personal therapy as an important and necessary element for licensure or certification for psychologists and counselors.

While there are many universities and colleges of higher learning in different countries within African continent offering mental health related courses, it is not clear how many require personal therapy for trainees. According to Laidlaw (2018), in South Africa, the Health Professions Council of South Africa (HPCSA) does not currently require mandatory personal therapy for trainees, however universities with Psychoanalytic orientation require personal psychotherapy as a mandatory or obligatory part of their master's program. The trainees have to agree to this and make personal financial provision for. Other universities with no psychoanalytic orientation prioritise group experiences for trainee instead but recommended or strongly encourage trainees to enter personal psychotherapy. Also, in Nigeria, not all the universities offering psychological and counseling programs require personal therapy (Egunjobi, 2020).

In Kenya, many psychological or counseling training programs at different levels: certificate, diploma, bachelor, master, or doctorate seem to require personal therapy for trainees. For example, Egunjobi (2020) reported that 100% of Kenyans who participated in a research on the prevalence of personal therapy around the world indicated that personal therapy is required for counselors training. Counselor's personal therapy is also listed as part of the professional development on the webpage of the Kenyan Counseling and Psychological Association (KCPA, n.d.). No. 3 requirement for a psychologist or counselor seeking individual membership with KCPA states that, the applicant should submit "Personal therapy letter: minimum 10 sessions, not older than two years from a registered counselor". By implication, counseling students are required to continue with personal therapy after graduation. Although, the reason for this is not stated.

Personal therapy for either counseling students or for professional counselors seems to gear towards certain outcomes which can be grouped into two categories namely: personal development and professional development. These two categories can be in form of attainment of psychological

wellbeing, acquisition of counseling knowledge, techniques, and skills, and selfcare. Norcross (2010) opined that requiring therapy as part of counselor education, would teach counselors early in their careers to recognize and cope with difficult personal mental or emotional circumstances and by doing so, decrease the chances that such problems would go unintended for long periods.

Faculty plays a vital role in getting the counseling students involved in personal therapy. This is because, faculty engaged in counseling training programs as the gatekeepers of the profession as they regulate the sending of new professionals into practice (Roberts &Franzo, 2013). The faculty plays a gatekeeping role which requires that counselor educators monitor students' academic and personal progress and to intervene when any individual student does not meet the necessary standards required for counselor's education. Counselors' training programs are ethically bound to assess counseling students so as to identify any trainees who are not up to par professionally, personally, and/or academically for clinical practice. This is because counselor educators have the responsibilities to uphold the rights of their students and the integrity and safety of their program, the profession, and the public (Bryant, et al., 2013; Crawford & Gilroy, 2013; Roberts & Franzo, 2013).It is imperative therefore that the faculty in the counselors' training pay attention to these elements, including personal therapy of counseling students, in the training.

There have been a lot of concerns and debates if mandatory personal therapy for psychologists, psychotherapists, and counselor students is indeed ethical. Will it be right to compulsorily require students to undergo personal therapy even when they do not show any sign of maladaptive or psychological distress? Will this not constitute extra financial burden to students who already is having problem with paying tuition for the counselor's training? What about the issue of dual relationship especially when the faculty member doubles as the therapist for the counseling student?

Ethical issues, according to Cooper (2007), have their roots in the belief systems of individuals and society. And the rationale for the Codes of ethics, is to ensure that behavior accords with these belief systems. The American Counseling Association's(2014; C.2.g and F.5 b) Code of Ethics require counselors to observe signs of inadequacy resulting from their own physical, mental and emotional problems and to avoid providing psychological help in case of inadequacy of serving professional help. And one of the ways for counselors to ensure that they are adequately serving professionally is by undertaking personal therapy. And, according to the Irish Association of Humanistic & Integrative Psychotherapy'([IAHIP], 2018;no. 2.5 & 2.6) Code of Ethics, "The role of psychotherapy is to facilitate the client's work in ways which respect the client's values, personal resources and capacity for self-determination. The aim is to empower clients and encourage them to take control of their lives. Only when both therapist and client explicitly agree to enter into a

therapy relationship does it become ‘psychotherapy’”. Hence, counseling students, undertaking personal therapy is ethical because “it maximizes therapeutic functioning while minimizing the possibility of harming clients or acting in ways that are not in their best interests.” (Ivey, 2014, p. 92),

McMahon (2018) in a study found that between counselling and clinical psychologists in Ireland, counselling psychologists reported higher rates of lifetime and current attendance at personal therapy compared to clinical psychologists, and nearly all had experienced mandated personal therapy compared to a minority of the clinical group. However, Ethical concerns concerning personal therapy were polarized between the two as more counselling psychologists emphasized the dangers and questionable efficacy of psychologists practicing psychotherapy without personal therapy experience, and more clinical psychologists questioned the efficacy and ethics of imposing personal therapy on trainees.

David Murphy and his colleagues at the University of Nottingham (as cited by Jarrett, 2018) conducted a systematic review of the literature and found 16 relevant qualitative studies up to 2016, which involve 139 psychologists, counsellors and psychotherapists in training who had undertaken mandatory personal therapy while training as psychotherapists. Part of the themes derived from the study are ethical in nature. These include,

- i. *Do no harm* – as many trainees spoke about stress and anguish they experienced due to personal therapy which affected their personal relationships, and in some cases, left them feeling unable to cope with their client work.
- ii. *Justice* – as the burden that trainees felt due to the imposition of personal therapy, in terms of time and expense, and the pressure of being assessed of their lost autonomy.
- iii. *Integrity*– in terms of personal therapy’s therapist unprofessionalism, yet unable to change therapist. This also involves feeling coerced into therapy and the fact that the mandatory nature of it prevented them from truly opening up.

Murphy and his colleagues therefore, called on regulatory and training institutions to pay attention to the ethical issues raised by their findings so as to provide the best learning opportunities which assess, and evaluate mandatory personal therapy within the training program.

III. METHODOLOGY

This study was carried out on the stratified randomly sampled universities engaging in the training of counseling and clinical psychologist. The focus was on the postgraduate students that is, masters and Ph.D. counseling and clinical psychology

students. The study adopted mixed methods concurrent design.

The target population was all 635 postgraduate clinical and counseling psychology students at University of Nairobi, Daystar University, Catholic Universities of Eastern Africa, and Tangaza University College. The sample size was 255 consisting of 245 clinical and counseling psychology students, five counselor educators and five professional counselors.

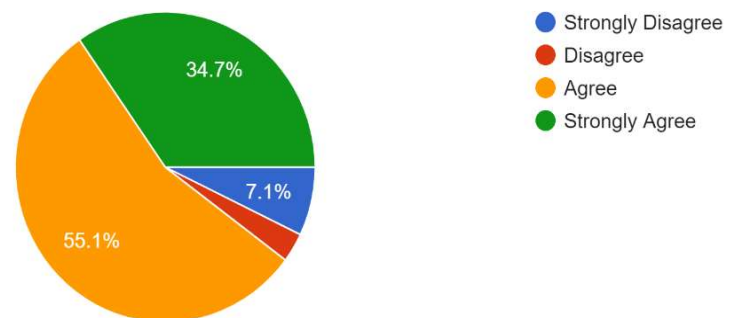
The quantitative data was collected from the students using questionnaire which was descriptively analyzed in percentages using pie charts and histogram. The qualitative data was collected using interview guides from the purposively selected students, counselor educators, and professional counselors. The qualitative data was analyzed using narrative, content and thematic analysis.

IV. RESULTS

Perception of Mandatory Personal Therapy as a Requirement in Counselors’ Training

Figure 1 presents the response of counseling students on their perception about mandatory personal therapy as a requirement in their training.

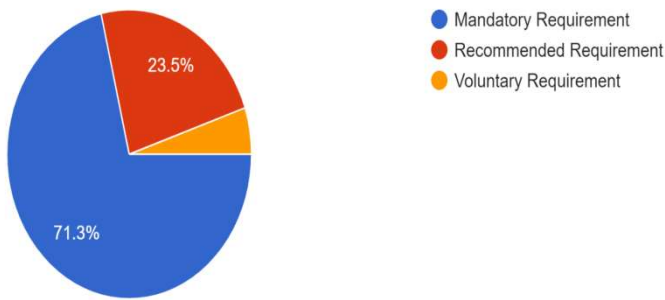
Figure 1: *Positive Perception of Personal Therapy as a Mandatory Requirement*



Majority (89.8%) of the counseling students “strongly agree” and “agree” that they have positive perception of mandatory personal therapy as a requirement in their counselors’ training. A total of 10.2 “disagree” and “strongly disagree” to having positive perception of personal therapy as a mandatory requirement.

When they were asked about what they think personal therapy should be in their program; if it should be mandatory, recommended, or voluntary, their responses are indicated in Figure 2.

Figure 21: What Personal Therapy should be in Counselors' Training



The majority (71%) of the counseling students opined that personal therapy should be made mandatory for all counseling students, followed by 23.5% who thought it should be a recommended requirement, and only 5.2% are of the opinion that personal therapy should be voluntarily engaged in.

The quantitative findings about the perception of counseling students about mandatory personal therapy and what it should be in counselors' training was supported by the qualitative data from the interviews of students, counselors and counselor educators. A Ph.D. student expressed that mandatory personal therapy

is an important thing because different students will be experiencing different issues during their learning. This will be an opportunity to deal with those issues.... And again, ... they are also learning, so that it will be very important to them to learn from the same process. (Interview, November 30, 2020).

This means that personal therapy as a mandatory requirement is an avenue of support and learning process for the students. One counselor educator also emphasized that personal therapy as a mandatory requirement is a "learning experience like any other theoretical courses taught in class for learning awards" (Interview, November 27, 2020). This is important to limit the abuse of the counseling profession as observed by a professional counselor, who "...have seen many psychologists who are complicated, unmanageable, emotionally immature and plain unaware of their emotions and attitudes" (Interview, November 26, 2020).

Another professional counselor opined that personal therapy should be made mandatory but the word "mandatory" should not sound like a 'must'

....Because when you use this word 'mandatory', 'it is a must, you must go' then you are killing it. Yeah, there should be a way the instructor counselors can make students feel like it is not mandatory even though it is.... Having a workshop about the importance, benefit, and necessity of personal therapy is imperative.... I still vote for mandatory. Because if I have not dealt with my own issue and counseling clients, I may hurt them. (Interview, November 25, 2020).

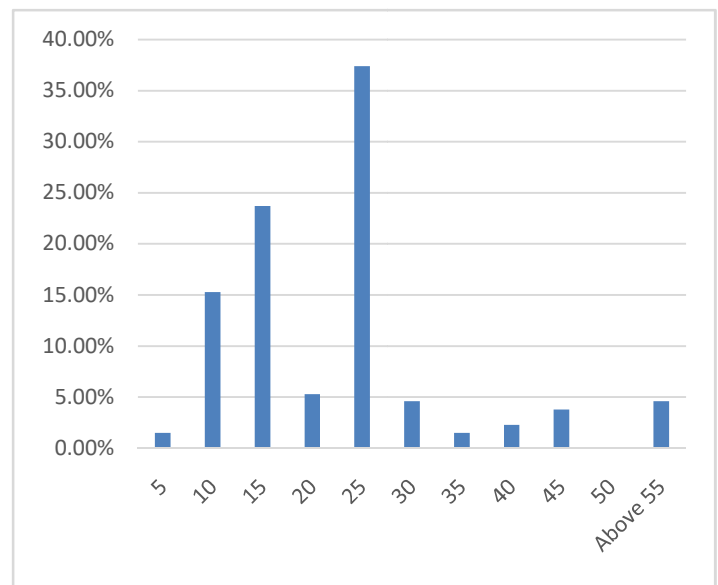
To buttress the need for the personal therapy to be made mandatory for counseling students in order to help them deal with their issues and prevent hurting clients, a counselor educator said,

I would prefer personal therapy to be mandatory for counseling students because I have seen many psychologists who are complicated, unmanageable, emotionally immature and plain unaware of their emotions and attitudes. (Interview, November 27, 2020).

The questionnaire also investigated the number of therapy sessions required of the students by the training program. The responses were presented in Figure 3.

Figure 3

Required Number of Mandatory Personal Therapy



From Figure 3, it is clear that the postgraduate counseling students were required to undertake a little as five and as many as more than 55 sessions of mandatory personal therapy while in training. It was found that 37% of the counseling students indicated that 25 sessions of personal therapy were required of them. Another 24% of counseling students stated that the number of sessions of personal therapy required were 15. From the responses however, it was not clear which school had 25 hours and which school had 55 hours and above.

It was however surprising to find that in one university, the master students reported 15, 20, and 25 hours of required personal therapy. Also, among the PhD students from another university, they reported 10, 15, 25.

Personal Therapy as a Mandatory Requirement and Ethical Challenges

From the quantitative and qualitative data collected, it was found that personal therapy being made mandatory and the relationship between the therapist and counseling students

posed some ethical issues. The ethical issues that were identified in this study are violation of right and freedom, dual relationship, and disingenuousness.

Violation of Right and Freedom

In the course of the interview with the participants of the qualitative part of this study, some participants expressed that their rights and freedom were violated by making personal therapy mandatory instead of being made voluntary. A counselor educator expressed how he felt during his training,

I think, I feel like they are making counseling to be mandatory when it is supposed to be voluntary. Like the aspect of informed consent, I am not consenting because I want to, but because I have to. In the professional organization that I am... when I want to move to a higher rank in that body, I must also present a letter from a therapist. So, I always fight, like, why are you forcing me to do therapy? And if I don't provide that letter even when I have met other conditions, I will not be promoted (Interview. November 30, 2020).

In line with this, another counselor educator pointed out that,

I must accept you as my therapist that is why I came to you voluntarily and so it will be easier for me to pour out my mind and disclose without any coaxing (me) to talk. But if it is a requirement, because the institution has put it as part of the course work, I will react (against) it. (Interview, November 30, 2020).

Surprisingly, this was raised by counselor educators. However, they only expressed how they felt when they were counseling students themselves. This is an indication that not everyone was comfortable with observing personal therapy as a mandatory requirement. It was conceived as a violation of right and freedom to voluntarily make use of this avenue when necessary. This is fundamental to counseling practice in terms of giving consent to undergo counseling. When an adult who is capable of giving consent feels coerced or forced to undergo personal therapy and this is not for remediation or correctional, his or her right and freedom have been violated, and this is unethical as found in KCPA Code of Ethics Section 2.2 and ACA's (2014) Code of Ethics, Section F.7.g.

Dual Relationship

Dual relationship is another ethical challenge in the practice of personal therapy as a mandatory requirement in some universities in Nairobi County. Dual relationship involves undergoing personal therapy with a therapist with whom one has a significant relationship. Figure 4 and Figure 5 present the response of counseling students to having a therapist who was either a friend or a faculty member.

Figure 4: My Therapist was my Friend

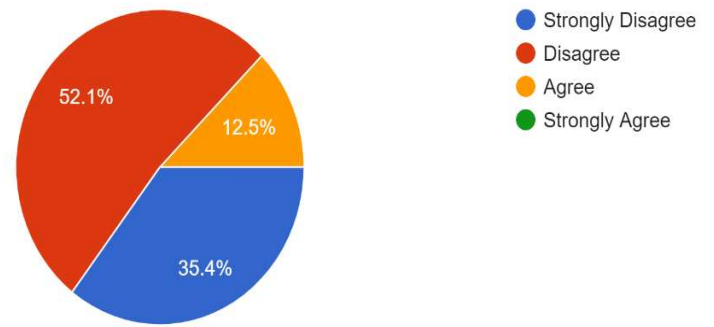


Figure 4 shows that 12% of counseling students indicated that their therapists were their friends.

Figure 5: My Therapist is a Member of the Faculty

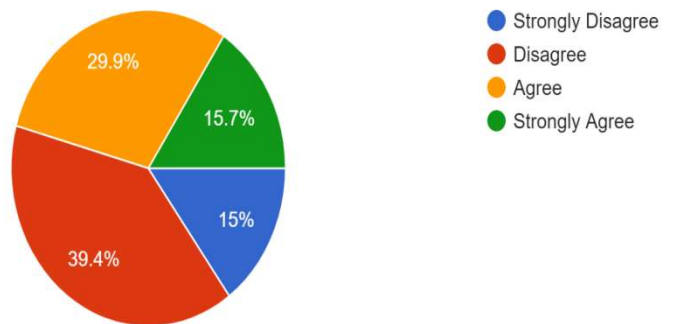


Figure 5 showed that 42% of counseling students indicated that their therapists are members of the university faculty.

Although, the majority of students do not have their therapist as either a friend or a faculty member, the percentages of those who indicated that their therapists are either their friend or faculty member were large enough to raise alarm especially in a practice where dual relationship is strongly discouraged because of the inherent ethical challenges.

Disingenuousness

Another ethical issue with serious implication in counseling practice is the issue of disingenuousness. That is, the issue of dishonesty in the manner of reporting and showing the proof of personal therapy. One of the Student participants in the interview alluded to this when she said,

I underwent personal therapy, and it was mandatory. Basically, many people didn't like it because it was mandatory....I remember ... some people would fake that they had personal therapy; I don't know whether it was because it was costly, and people didn't have money to pay for it so they would fake it. They would bring the letter. [Who gave them the letter?] They would consult some counselors... a practicing counselor and collect the letter that they have done these numbers of sessions.

You can imagine being asked to pay KSH 1500 per session and you have to do about 30 sessions. You may not even have money to pay for transportation. That is why some people fake it. Also, the number of sessions is too much. Sometimes, you are stuck because you don't have something to say. Sometimes, you just create or fake a story for the counselor so as to have something to discuss. (Interview, November 24, 2020).

One counselor educator also shared his experience as a therapist in this regard:

I think I have some Ph.D. students now, having their personal therapy with me. And the same negotiation. Ok. They asked for 50 hours of personal therapy, that would go for almost a year. Ok. They requested that instead of having one hour a week, they asked, what if we are having two or three hours in a week, or two to three hours per session, so that within two or three months they would complete the required sessions. If I asked about what they think about issues to discuss, some of them will say, well, they ask us to come for personal therapy, maybe when we are discussing we will discover – so it is not really coming from them.

It was just in the requirement.... like I said, students will always be students, hardly will you find anyone who would sincerely go through the fifty hours; normally you have one hour a week, that means almost a whole year of going for therapy. At the end of the day, it becomes so boring, it becomes so..., you know, you do a lot of repetitions. You know, counseling somebody who is not even presenting any complaints and will only come (and say) I need therapy – on what? For the therapist and the client, two of them, it will get to a point where it becomes too boring and then they don't know what else to do again or say. That is where fake result comes from and the client says just write something for me. How much is your money; take your money and write something for me. (Interview, November 24, 2020).

Disingenuousness here stems from different factors:

- i. Personal therapy being made mandatory.
- ii. The length of time to complete the required hours of personal therapy.
- iii. No issues to present during personal therapy.
- iv. Boring sessions of many sessions of personal therapy.
- v. Personal therapy was costly.
- vi. *Therapist was a friend.*

Although, Educator 1 did not indicate that these PhD counseling students were his friends or students from the same university where he is a faculty member, this can relate, in part, to the effect of choosing one's friend as a personal therapist. This may warrant unethical negotiation based on previous findings on dual relationship. The fake result here refers to a letter that is written by a therapy as a proof of completion of the students' personal therapy for the required hours or sessions. This poses a serious ethical issue.

V. DISCUSSIONS

Mandatory personal therapy is surely practiced in Kenyan universities where clinical psychologists, counseling psychologists and counselors are trained. It is an important and mandatory requirement either in the program as a whole or part of the practicum experience. This conforms with the Gerald's (2010) view that personal therapy has become widespread and a common practice within educational system, and with Egunjobi's (2020) study which found that 100% of Kenya counseling students who participated in his study indicated that personal therapy is required for counselors in training.

Many students have positive outlook of personal therapy as they consider it a mean of personal and professional development which include the avenue for self-awareness, self-care, learning of counseling theories, skills, and techniques, as well as resolving personal issues. This was consistent with the Kumari's (2011) qualitative research with graduate students in counselling psychology, Rake & Paley's, (2009), Koskina's, (2012), and Oteiza's (2010), findings that there is positive perception of personal therapy as a requirement in counselors' training.

Although, it can be said in this study that counseling students in Kenya are required to undergo between as little as five hours and as much as 55 hours of personal therapy during their training either as part of practicum requirement or training program, having counseling students in the same program and from the same university report different number of sessions required is worrisome. This points to a fundamental problem in the training program.

This researcher tried to understand the inconsistencies in the number of hours of personal therapy required in the selected universities and could only link the inconsistencies to lack of proper education of the students or information about what the personal therapy entails on the part of the faculty. Of course, for those who already engage in it, they know how many hours of personal therapy are required. Those who have not, however, are likely to be students who had their undergraduate studies in another area of studies (e.g education; sociology) and are just beginning their counseling training at either the master's or Ph.D. level. They may have had their undergraduate or master's degree in psychological related studies that do not require personal therapy like those who studied applied psychology or educational psychology.

Also, searching through some course requirement of some counseling programs in some universities which were not sampled in this study, it was found that there were inclusion of personal therapy and the required sessions clearly stated. For example, to qualify for the award of the Master of Arts degree in counseling psychology, at Kenyatta University, a candidate must have passed all required units, complete and pass the practicum and the research project, and must have completed 25 hours of personal therapy (half of which should be done before practicum experience (Kenyatta University,

n.d.). Also, at the United States International university Kenya (USIU, n.d), each master's student in counseling psychology must complete 25 hours of personal therapy prior to registering for practicum. Notwithstanding, the majority of the respondents and participants in this study indicated practicum hours between 15 and 25 hours of personal therapy.

The situation of admitting students to postgraduate studies in counseling psychology or clinical psychology from a counseling related program was consistent with the admission requirement for master's program in counseling psychology in some Kenya universities. For example, a holder of bachelor's degree or equivalent in psychology, counselling, sociology, education or related field from any university recognized by the Senate can be admitted into the program (University of Nairobi, n.d; Kenyatta University, n.d).

Noteworthy, is also the fact that, there are those minority who do not see mandatory personal therapy positively mainly because it is mandatory. This is because, it is thought that it should be made either recommended or voluntary bearing in mind the fact that psychotherapy or counseling is expected to be entered with the consent of the client. There are those who also considered the number of sessions as too many. In a normal counseling or psychotherapy situation, counseling sessions are approximately 12-16 sessions, typically delivered in once weekly sessions for 45 minutes each (Caraballo, 2019). And there has been scientific evaluation of the number of sessions needed for a successful counseling outcome.

Headspace (as cited by Foundation Psychology, n.d), recently published a study which examined the outcomes for over 20,000 of their clients over a fifteen-month period. It was found that psychological distress reduced for everyone who had between three and 15 sessions and clients who had 3-5 sessions had the fastest response, 6-9 sessions had the biggest initial response, and those that had 10-15 sessions had slower improvement. The study also proposed that clients who stayed longer in therapy were those with the most distress.

This challenges the issue of requiring counseling students who may not be having any psychological distress at the moment, to mandatorily complete 25 sessions or even 55 sessions of personal therapy. Although, for those who have issues to deal with, these sessions will be beneficial, it may be a real struggle for those who have high level of resilience and those who may be having financial challenges paying their training tuition let alone the personal therapy. This will, in part, follow the proposition of Atkinson (2006) that the requirement for mandated personal therapy during counselors' training for counseling students who are well is neither intellectually nor ethically coherent. Training programs may have to re-evaluate this and possibly come up with blended requirement where not more than five sessions are made mandatory for all students but recommend further personal therapy for those who may need it.

There are other ethical issues which strongly came up in the practice of mandatory personal therapy which touches on the

training program, the counseling students, and the therapist. The ethical issues include the violation of right and freedom by the training program, the issue of dual relationship on the part of some therapists and counselor educators, and disingenuousness or dishonesty on the part of some students.

Surprisingly, the issue of violation of rights and freedom of the students was raised by counselor educators. The violation of right and freedom to voluntarily make use of this very important personal therapy when necessary is against the fundamental to counseling practice where contracting begins with individual consent to undergo counseling. When an adult who is capable of giving consent feels coaxed or forced to undergo personal therapy and this is not for remediation or correctional, his or her right and freedom have been violated, and this is unethical as found in KCPA Code of Ethics Section 2.2 and ACA's (2014) Code of Ethics, Section F.7.g.

Looking at the whole ethical issues of violation of rights and freedom, dual relationship, and disingenuousness, the inadequate monitoring of required mandatory personal therapy by the faculty member may be responsible. Faculty members according to Roberts and Franzo (2013), are to engage in counseling training program as they are the gatekeepers of the profession who regulate the sending of new professionals into practice. This study revealed that the university faculty members of the studied universities also play this role of gatekeeping which requires that counselor educators monitor students' academic and personal progress as well as ensuring that counselors' training program is ethically compliance. This is expected to be done through assessment of counseling students professional, personal, and/or academical activities for clinical practice.

It is indicative from this study therefore that there is more to be done by the faculty members especially in the area of ensuring ethical practice and offering adequate information on the needs and benefits of personal therapy. Counselor educators have the responsibilities to uphold the rights of their students and the integrity and safety of their program, the profession, and the public (Bryant, Druyos, & Strabavy, 2013; Crawford & Gilroy, 2013; Roberts & Franzo, 2013). Making personal therapy a mandatory requirement violates the right of the students, even though there may be right intention.

This study as regard ethical practice contradict those who argued, as Ivey (2014) noted, that undertaking personal therapy while training to be a psychotherapist is ethically responsible because it maximizes therapeutic functioning while minimizing the possibility of harming clients by acting in ways that are not in client's best interests. Counseling students themselves become clients when they engage in personal therapy either as made mandatory or voluntarily. The interest of these student-clients is also important so that the practice of personal therapy does not become rooted in tradition rather than evidence (Chaturvedi, 2013), which is only strongly held but weakly conceptualized (Edwards, 2017).

VI. CONCLUSION

Conclusively, mandatory personal therapy is practiced in counselors' training program in Kenya and it is highly appreciated with some ethical challenges of violation of students' rights, dual relationship, and disingenuousness. Proper attention of the faculty who are the gatekeepers of the training program is needed to challenge these ethical issues. The faculty may have to reconsider the number of sessions mandatory personal therapy required for training purposes and blend it with recommendation of personal therapy for those who may need it.

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