Detachment: Balancing Empathy

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In order to sustain the focus on clients and their needs during risk assessment and test disclosure sessions, HIV test counselors need to ensure a balance in their emotional connections to clients. To maintain or restore this balance and to apply appropriate boundaries in the client-counselor relationship, counselors often need to engage in “detachment.”

Detachment refers to the psychological process by which a person pulls back or separates from another person or from feelings about a place or a thing. In the context of HIV counseling and testing, detachment is a tool used by counselors either in the session or afterward when the counselor becomes aware of the need to stop thinking about a client or to stop taking actions on behalf of a client. Because counselor relationships with clients are often brief and short-term, counselors may sense that there is not time to make changes in the session in order to detach. Conversely, they may believe that these constraints of time and duration make the risk of becoming overly attached impossible. Regardless of the length of the session or the number of sessions, however, both over-involvement and detachment can occur.

This article explores detachment and its role in the counselor-client relationship. It outlines techniques counselors can use to recognize when detachment is appropriate and offers suggestions on how to increase comfort with the process of detachment.

Balancing Empathy and Detachment

To begin this discussion, it is useful to review the role of the counselor-client relationship itself. The function of any counselor-client relationship is to assist the client in identifying concerns and, as appropriate, to take actions to meet various health, social, or psychological needs. The counselor approaches this process of assessment, intervention, and referral from a place of objectivity and empathy—serving as a compassionate listener, a mirror reflecting material the client offers back, and as a guide who helps clients acknowledge strengths, needs, feelings, thought processes, and behavior patterns. When a counselor’s own intrapsychic or interpersonal challenges take the focus off the client, there is a risk that enmeshment—or over-involvement—will occur and interfere with objectivity and empathy.

It is useful to view detachment in this broader context of empathy. Empathy is paramount to the counselor-client relationship, a necessary part of establishing rapport as well as building and maintaining trust. If empathy is the central point of balance in a continuum of counselor-client connection, either end of the spectrum may represent a dangerous imbalance.

One extreme may be characterized by rigid, impermeable boundaries and an inability or unwillingness on the part of the counselor to put him or herself “in the client’s shoes.” This may result from a variety of factors, including counselor burnout. At the other end of the continuum is a counselor who lacks any boundaries, a situation that may reflect over-identification with clients, a blurred sense of limits, a loss of understanding of where each individual begins and ends, and, in its most destructive form, enmeshment, emotional symbiosis, and exploitation of the client.

More commonly, an imbalance of empathy can undermine trust by diminishing the client’s sense that he or she has been heard by the counselor. Both the client and counselor can be injured if the counselor takes actions, ostensibly on the client’s behalf, that are actually taken to meet the counselor’s own emotional needs or that are otherwise beyond the role of the HIV counselor. In such cases, detachment is an important tool to reestablish an appropriate level of empathy.

Detachment is a process by which the counselor separates from an emotional response or pattern of thinking after experiencing an excessive level of attachment to a client. It is a process employed with respect for one’s self and the client and with consideration for what is in the best interest of the client. The term itself may suggest a cold or aloof quality that is distasteful to the counselor who experiences him or herself as a compassionate, caring person. Yet, it is neither an act of aggression nor abandonment. The goal is to withdraw from an inappropriate dynamic or response cycle, not to withdraw from the client.

Assessing the Need for Detachment

To assess the need for detachment, the counselor must become aware of his or her level of attachment to clients. Attachment, both appropriate and inappropriate, may become apparent through self-observation, through reviewing interactions with a client, through an intuitive feeling, or in the mirror provided in collegial consultation. Signals that something may be out of balance include: disturbances in routine, changes in the rhythm of a session, and treating one client inconsistently from others in ways that are not related to client needs.

Changes as subtle as speech patterns, for instance, in terms of the tone of the counselor’s voice or the length of silences in the dialogue, may signal imbalances. Doing for a client what that person can do for him or herself, making excuses for a client’s failures to follow through, taking a defensive posture on behalf of a client, colluding with client rationalizations, or conversely, blaming a client for his or her circumstances, suggest a need to evaluate the counseling process.

A counselor’s physical posture in the counseling session can also indicate that he or she has experienced changes in attitude or feeling. Examples include changes in sitting position, uncrossed or tightly crossed legs, or open or clenched hands. Be aware of physical stress points and be prepared to evaluate causes of body changes and discomfort. From this sensory or body awareness, the counselor can begin to identify the source of sensations.

While signals of imbalance are often apparent during a session, they may also manifest outside the counseling session in both other work and personal areas. Most notably, a counselor may change the manner in which he or she talks—or does not talk—about the client during consultation or supervision meetings, indicating that the counselor is inappropriately invested in client outcomes. A counselor in con-
The body can know before the mind does about these issues may see a problem, but want to avoid it; on some level, he or she may not want to be confronted with the need to evaluate or adjust his or her counseling approach.

Disturbances in personal routines outside the work setting may signal an imbalance that has carried over from counseling sessions. Talking about a client at home, losing sleep thinking about a client's situation, or sleeping more as a way to avoid thinking about a client are often overlooked as signs of imbalance. Other signs include: loss or increase of appetite; obsessive thinking; over-identification, feeling on an unconscious level that some aspect of the client's life relates to the counselor's life and generalizing from this that the client's situation is the same as the counselor's; projection, unconsciously externalizing personal feelings or thoughts and attributing them to another; and other "intrapsychic" and interpersonal responses to the stress. Counselors should pay attention to colleagues, clients, family members, or their own internal messages. All of these resources suggest that it is necessary to take a step back from an emotional investment, particularly because counselors who have the greatest need to work on detachment may be the most resistant to developing detachment skills.

As part of the assessment process, counselors should notice occasions when interactions with others, both professionally and personally, seem to take on more or less significance than a situation warrants. Many counselors report getting into personal arguments that feel bigger than appropriate. By examining the events of the day, they are able to identify where they did not detach from a particular counseling experience. Emotional numbing, in which a counselor becomes "neutral" in situations that under other circumstances would arouse a response, may also signal excessive stress caused by over-involvement with a client or emotional overload resulting from an inappropriate level of attachment.

Exacerbating muscle tightness, for example, can facilitate relief and move energy that may have been blocked through the body. Easing this distress may, in turn, diminish a counselor's emotional burden or mental stress.

The counselor can then assess the stress that occurred and identify his or her beliefs: Was there a specific interaction, a verbal interchange, or an attitude or emotion expressed or repressed that led to the distress? Is there an underlying belief or value the counselor has about what he or she should have done in the counseling session? Was there an inappropriate expectation, perhaps a turn of phrase, that reflects the point at which an appropriate level of empathy gave way to over-involvement?

Through talking, writing, drawing, or other creative techniques, the counselor can better understand internal messages that reinforce inappropriate attachment and then develop new, empathy-affirming messages. Visualizing oneself literally stepping back from a client is a simple technique that can initiate detachment, and may reveal to the counselor his or her emotional investment in maintaining interactions with clients that are not beneficial to the client and to the client-counselor relationship. In working to improve skills of detachment, it is important to acknowledge the personal payoff or secondary gain the counselor obtains as a result of excessive attachment to a client—sometimes at the same time that he or she feels excruciating pain.

As the counselor comes to recognize physical sensations, emotions, changes in posture or speech pattern, the sense that there has been a shift in the dynamics of the relationship, or other signs that indicate that empathy is out of balance, it may be possible in the counseling session to use self-messages to engage in detachment. For instance, a counselor might tell him or herself to "stop," visualize stepping back, shift physical position, or, when appropriate, make a "process comment," that is, one that focuses on the counselor-client interaction as opposed to the content of the session.

**Additional Support**

There are many resources a counselor may draw upon to assist with detachment. Most prominently, counselor training often includes techniques that assist in increasing self-awareness, rebuilding relationships, and addressing disruptions with clients. In addition, even the most skilled counselor may benefit from consultation about feelings that may disrupt the empathic balance, either with peers, a supervisor, or a clinical consultant.

Finally, detachment is not an endpoint. It is a tool the counselor may need to employ repeatedly with the same client or in similar situations. In the end, detachment can serve to remind counselors of their personal and professional limitations and reinforce the idea that clients and counselors alike must ultimately take responsibility for their own emotions, actions, healing, and growth.
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