

The Job Quality of Psychotherapists in the Polish Socio-Institutional Context: The Subjective Dimension

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Abstract: This article examines the job quality of psychotherapists from the perspective of the sociology of work. Given the increasing demand for mental health services, psychotherapists are classified as 'essential workers'. The study explores the subjective dimension of job quality, the tensions and challenges that psychotherapists experience in their work, and the coping strategies they adopt to improve their job quality. The findings reveal a dual labor market, where subjective job quality in the private sector is significantly higher than in the public sector. Public-sector psychotherapists face excessive bureaucracy and control, relatively low wages, and high work intensity, which leads them to transition to the private sector.

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Introduction

This article examines the nature and job quality of the psychotherapist profession in Poland from the perspective of the sociology of work. Psychotherapy is a profession with particular social significance, as its objective is to provide expert assistance to people experiencing mental crises. Therefore, psychotherapists can be described as ‘essential workers’, as they perform work necessary for societal survival and reproduction (Gardawski et al., 2022: 61). Job quality is important in this context, as it affects the quality of the service provided, the management of challenges encountered in working with patients, and the prevention of negative phenomena, such as professional burnout (Lozinskaia, 2002; Dobransky, 2019; Greenberg McClintock, 2020). It is especially important today, as the demand for mental health prevention and treatment has been increasing among adults, adolescents, and children alike, as shown by data collected in Poland and worldwide (e.g., WHO, 2022; 2023; NIK, 2023). Furthermore, researchers highlight that low job quality can have negative social effects, as it results in the exacerbation of the existing problems rather than their resolution (e.g., Lozinskaia, 2002: 93).

There is a gap in the Polish sociology of work regarding knowledge on job quality among psychotherapists. The coronavirus pandemic has sparked increased interest among social scientists in occupational groups particularly vulnerable to its negative effects, including workers in various service sectors, such as the catering industry, as well as essential workers, such as teachers, doctors, nurses, care workers, social workers, and couriers (Nowak, 2021; Gardawski et al., 2022; Szyszka, Zaborowska, 2022; Pałęcka, 2023). However, sociological research on the work of psychotherapists in Poland remains scarce, which is why I decided to conduct a study on this professional group.

The research questions I will answer in this article are as follows:

1. What is the subjective job quality in the profession of a psychotherapist?
2. What tensions and challenges do psychotherapists experience in their work?
3. What coping strategies do they employ to overcome these tensions and challenges?

In this article, I examine job quality from the perspective of the interviewed psychotherapists, situating their experiences within the Polish socio-institutional context. My aim is to explore how key aspects of job quality – such as income, forms of employment, job security, working time, and work-life balance – manifest in their everyday professional lives. Do psychotherapists experience tensions related to job quality? What are these tensions? Next, I examine the coping strategies employed by the psychotherapists as well as their characteristics: institutional vs. private, formal vs. informal. In other words, to what extent and in what ways do employers and affiliated organizations support psychotherapists, and to what extent do they develop their own coping strategies to deal with the tensions they face?

The analysis is based on qualitative exploratory research conducted in 2024 and 2025 among psychotherapists, complemented by a review of secondary data (official statistical data, results of scientific studies, academic publications).

The theoretical framework

Job quality has become a significant topic in both public and academic discourse on work. The concept of job quality started gaining recognition in the 2000s, as it was mentioned in several conclusions drawn from European Council meetings (Bouquin, 2019: 20). Various social actors, including trade unions, have emphasized the importance of achieving a synergy between job quantity (job creation) and job quality (good and safe jobs). This concept was termed ‘more and better jobs’ and became the motto of the European Employment Strategy over twenty years ago (Muñoz de Bustillo et al., 2011: 1).

Job quality was discussed in relation to the flexibility and precarity of employment, which became evident after the global economic crisis that began in 2007 (i.e., Isidorsson, Kubisa, 2019). In Poland, these problems had already been present since the 1990s, when employment was made more flexible in the name of reducing unemployment levels (e.g., Karolak, 2020: 49–72). Although there is now agreement on the importance of job quality, efforts to improve it have faced consistent challenges, particularly during economic downturns and due to ongoing structural changes on the labor market (Piasna, 2023: 26). Currently, job quality is discussed in relation to the issues of polycrisis, including climate change and environmental degradation, as well as in the context of the COVID pandemic and the crisis of the state and public policies (Eurofound, 2022; 2023; 2024; Gardawski et al., 2022).

Researchers emphasize that job quality is a multidimensional as well as ambiguous and heterogeneous concept (e.g., Howell, Kalleberg, 2019: 4; Gardawski et al., 2022: 43). It is also a concept that is defined in various ways, and no consensus has been reached on what constitutes an appropriate empirical indicator of job quality (Bouquin, 2019: 20–22; Howell, Kalleberg, 2019: 4).

Job quality is linked to the quality of working life and to meeting people’s needs from work. It is determined by aspects of employment and work that have either a beneficial or harmful impact on workers’ health and well-being (Eurofound, 2024: 8). It is also connected to factors such as work commitment, job satisfaction, trust and collaboration in the workplace, the ability to make ends meet, and work-life balance. Good job quality plays a key role in supporting sustainable work over the life course (Eurofound, 2024: 8).

Rafael Muñoz de Bustillo and colleagues note that job quality refers to the characteristics of job that have a direct impact on the well-being of workers (Muñoz de Bustillo et al., 2011: 150). These characteristics have both objective and subjective dimensions. The objective dimension refers to measurable characteristics of work, allowing for comparisons of job quality at various levels, such as between sectors and countries. In turn, the subjective dimension refers to workers’ perceptions and evaluations of job quality, such as their satisfaction with wages. This dimension emphasizes how workers interpret their work environment as well as the impact of work on their professional and personal lives. It highlights their feelings, experiences, and expectations. Muñoz de Bustillo and colleagues argue that subjective factors – such as job satisfaction, emotional well-being, and personal accomplishment – are key to understanding job quality. These factors are influenced by personal preferences and values, making the subjective dimension more fluid and individualized compared to the objective one. In sum, it captures the personal and emotional aspects that shape overall job satisfaction.

Julia Kubisa and Pedro Mendonça describe two aspects that constitute job quality, namely employment and work. Employment quality concerns the employment contract, including wages, contract type, working hours, and benefits. Work quality refers to tasks and environmental conditions, such as physical demands, autonomy, and social context. In turn, participation and skill development link both these aspects (Kubisa, Mendonça, 2019: 10). The authors emphasize that job quality is influenced by national institutional arrangements, within organizations and workplaces, as well as by actions of management, workers, and trade unions (Kubisa, Mendonça, 2019: 10).

Job quality affects not only employees but also family formation, social integration, and the functioning of the labor market. As for the labor market, most professions experiencing persistent labor shortages have lower job quality (European Commission, 2023). As research shows, in countries where job quality is low (e.g., Greece, Poland), workers often take on multiple jobs simultaneously as a compensatory strategy for deficits in job quality in their primary employment (Piasna, Pedaci, Czarzasty, 2020). Another strategy is 'escaping' employment relations by starting one's own business and self-employment. Workers aim to avoid traditional employment and try to create their own workplaces. However, self-employment remains an atypical form of work that often has features of poor job quality (Piasna, 2023: 27). Conversely, in countries where jobs are of better quality (e.g., Denmark, Sweden, the Netherlands), labor market participation, reflected in employment rate, is higher, and workers are less inclined to rely on own-account work to make a living (Piasna, 2023: 27). Therefore, high job quality supports an inclusive labor market and promotes the participation of workers in standard employment (Eurofound, 2024: 9).

Researchers from the European Trade Union Institute have developed the European Job Quality Index to evaluate and compare job quality among EU countries and analyze trends in job quality over time. This index covers a wide range of employment and work-related characteristics, organizing them into six dimensions of job quality: income quality, forms of employment and job security, working time and work-life balance, working conditions, skills and career development, as well as collective representation and voice (ETUI, 2018). I will briefly present each of these dimensions below.

Income quality assesses how predictable earnings are. It includes people's ability to forecast their future earnings and their subjective judgment on whether their income is sufficient to cover essential expenses.

Forms of employment and job security are assessed by the share of workers in involuntary temporary or part-time positions, highlighting involuntary non-standard work as a marker of poor job quality. This dimension also includes the subjective perception of the risk of job loss within the next six months.

Working time and work-life balance encompass three aspects: long hours (over 48 hours per week), unsocial hours (shift work, weekend work, and nighttime or evening shifts), and the compatibility of working hours with non-work activities, such as family and social commitments.

Working conditions reflect the nature of the work and its environment. They consist of three components: work intensity (pace of work), work autonomy, and physical risk factors.

The skills and career development dimension includes two components. The first one refers to whether employees participate in education or training. The second one assesses how strongly workers agree with the statement: ‘my job offers good opportunities for career advancement’.

The final dimension, collective representation and voice, includes the following: the share of workers covered by collective bargaining, national union density, and access to employee representation at the company level. This consists of trade unions, works councils, health and safety representatives, and mechanisms for employee feedback, such as meetings of employees with management to share their opinions.

The Job Quality Index indicates what constitutes a good-quality job and the direction of change that signifies improvement (Piasna, 2023: 5). It was designed for large quantitative cross-country analyses. Also other researchers have developed indices to measure job quality. In 2011, a team of Spanish scholars proposed the European Job Quality Index, based on five dimensions: pay, the intrinsic quality of work (objective: skills, autonomy; subjective: meaningfulness, social support, self-fulfilment), employment quality (contractual stability and development opportunities), health and safety (physical and psychosocial risks), as well as work-life balance (working time: duration, scheduling, flexibility, intensity) (Muñoz de Bustillo et al., 2011: 150–202). This index places greater emphasis on the subjective dimensions of job quality compared to the index developed by the ETUI. On the other hand, it does not include a dimension related to collective employee representation.

In my study, I explore six dimensions of job quality: income, forms of employment and job security, working time and work-life balance, working conditions, skills and career development, as well as collective representation and voice. I focus on the individual level and subjective dimension, that is on psychotherapists’ experiences and perceptions of job quality in their everyday work, as well as on the extent to which their job meets their needs and values, and contributes to job satisfaction.

The socio-institutional context of the research

In times of polycrisis, the state of mental health worldwide is becoming a significant challenge. About one in eight people in the world live with a mental disorder, with the most common ones being anxiety and depression (WHO, 2022: 37–40). At the macrostructural level, mental health risk factors are associated with economic downturns, social polarization, public health emergencies (including COVID-19), poor access to services, humanitarian crises and forced displacement, as well as the growing climate crisis (WHO, 2022: 21).

According to *A comprehensive study on the mental health of society and its determinants – EZOP II*, conducted among children, adolescents, and adults in Poland, 8% of adults reported a deterioration in their health (both physical and mental), while more than one-quarter experienced a mental disorder at some point in their lifetime (Wciórka et al., 2021: 719). The most common health problems among

adults include alcohol use disorders, panic attacks, phobias, depressive episodes, and behavioral disorders (Wciórka et al., 2021: 737). Interestingly, more men than women reported experiencing mental disorders, and the risk of their occurrence increases with age, among individuals with low educational level, the unemployed, and those receiving disability pensions (Wciórka et al., 2021: 741–744).

According to research conducted by the IPSOS on a representative sample of adult Poles, the percentage of people concerned with their mental health has more than doubled over the past six years (from 19% in 2018 to 40% in 2024) (IPSOS, 2024). Stress is particularly prevalent in the Polish society, and one in three respondents (34%) reported experiencing sadness or despair almost daily for several weeks. At the same time, only one in five respondents believes that the healthcare system treats mental health on par with physical health (IPSOS, 2024).

The state of mental health among minors is particularly concerning. The number of children and adolescents experiencing depressive disorders, self-harm, eating disorders, and addictions has increased (e.g., NIK, 2023; Kaźmierczyk et al., 2024). “Today, Polish children have one of the lowest rates of mental well-being and one of the highest rates of attempted suicides in Europe. In 2022, police investigated 2031 suicide attempts by those under the age of 18, an increase of 148% since 2020” (WHO, 2023). The spread of mental health crisis among both adults and children has been influenced by the COVID-19 pandemic and the associated restrictions, particularly lockdowns and remote learning at home.

Although healthcare expenditure in Poland has been gradually increasing (GUS, 2024: 187–188), it remains among the lowest in the European Union. In 2022, it accounted for 6,4% of GDP, while the EU average was 10,4% (Eurostat, 2024). Poland’s public healthcare system has been struggling with underfunding for years, leading to staff shortages, limited access to services, and affecting its overall functioning (e.g., Pawłowska-Krać, 2023). Another barrier to accessing support is the presence of stereotypes and stigma surrounding mental health and mental disorders (Wciórka, 2021: 483). As a result, 60% of people who report needing mental health support do not seek help (WHO, 2023).

In Poland, there are approximately 15,000 psychotherapists, but the demand for psychotherapy services significantly exceeds the number of active specialists, particularly those working with children and adolescents (Grupa robocza do spraw projektu ustawy o zawodzie psychoterapeuty, 2024: 2). For many years, there had been no legal regulations concerning the profession of psychotherapist, allowing individuals to practice without formal requirements or qualifications. It has had negative consequences, including the absence of uniform standards for professional training, the lack of the legal protection of the professional title, and the operation of psychotherapists within a ‘legal vacuum’, i.e., without clearly defined ethical guidelines or regulatory frameworks. Although there is still no separate law regulating the psychotherapist profession, in 2024, the 1994 *Mental Health Protection Act* was amended to introduce the definition of psychotherapy and the requirements for psychotherapists working within healthcare services. According to it, “psychotherapy is a purposeful and planned psychological intervention aimed at alleviating or eliminating the symptoms of a disorder and improving psychological and social functioning, supporting the efforts of an individual or family toward health

and development, directed at people with mental disorders” (Dziennik Ustaw Rzeczypospolitej Polskiej, 2024: 4). Currently, the profession of a psychotherapist within healthcare can be practiced by individuals who hold a medical degree or a master’s degree (not necessarily in psychology, as it may be in various fields), have completed postgraduate training in psychotherapeutic interventions that have scientifically proven effectiveness, and possess a psychotherapist certification (Dziennik Ustaw Rzeczypospolitej Polskiej, 2024: 5). It is also worth noting the significant barriers faced by prospective psychotherapists, such as the long period of preparation for the profession (completion of higher education at least at the master’s level plus four years of intensive psychotherapeutic training) as well as the high cost of such training and additional expenses (e.g., paid personal therapy, supervision, and internships).

Methodological background and the characteristic of the interviewees

The article is based on qualitative research conducted between April 2024 and January 2025. The research is exploratory and will be developed in subsequent studies. The selection of participants was purposive, with a total of 12 individual in-depth interviews conducted with certified psychotherapists who have been practicing their profession for a minimum of five years. This ensures that the participants have experience in psychotherapeutic work with patients. Moreover, I aimed to include practitioners from both the public sector and the private sector in order to enable a comparison of their experiences related to job quality. The interviewees were recruited through the websites of the organizations and institutions where they work, as well as using the snowball sampling method.

The interviews were conducted in accordance with the ethics of conducting social research (e.g., PTS, 2012). Almost all interviews lasted over an hour, generally 70–105 minutes. They were mainly conducted face-to-face and sometimes online using the MS Teams platform. The interviews were transcribed and then coded and cross-analyzed using the qualitative data analysis software Maxqda.

The researched psychotherapists include 7 women and 5 men, aged between 35 and 65 years old. The interviewees are predominantly trained as psychologists (8 persons), but the group also includes sociologists, psychiatrists, and an anthropologist. All interlocutors have a university degree, have graduated from therapeutic schools, and are licensed as psychotherapists. They work in different psychotherapeutic streams and their work experience ranges from 5 to 40 years. The interviewees work with adults, children, and adolescents alike. They work in cities of different sizes (from 42,000 inhabitants to 1 million and 860,000 inhabitants) and located in various parts of Poland (central, western, south-western, and eastern). The interlocutors are employed in both the public sector (in public clinics and hospitals) and the private sector (primarily through their own psychotherapy practices, as well as in commercial clinics). Some of them work in both sectors, in several places at once. The table below shows the most important data about the interviewees.

Table 1. Basic information on the interviewees

Coded name	Gender	Age	Education and psychotherapy field/stream	Work experience	Patients	Sector
Lidia	F	49	Psychologist, addiction psychotherapy	25 years	Adults	Public
Anna	F	43	Psychologist, systemic-psychodynamic stream	5 years	Adults, adolescents, children	Private and NGO
Marta	F	53	Psychologist, psychodynamic stream	22 years	Adults, adolescents	Private
Paweł	M	45	Sociologist, addiction psychotherapy, integrative stream	14 years	Adults	Public and private
Iga	F	45	Psychologist, psychodynamic stream	20 years	Adults	Private
Julia	F	38	Anthropologist and psychologist, solution-focused brief therapy	5 years	Adults	Private
Małgorzata	F	54	Psychiatrist, psychodynamic stream	25 years	Children, adults	Public and private
Maria	F	About 65	Psychiatrist, psychodynamic stream	40 years	Adults	Private
Igor	M	39	Psychologist, psychodynamic stream	8 years	Adults	Public and private
Karol	M	about 45	Psychologist, group analytic psychotherapy	17 years	Adults	Private
Piotr	M	42	Sociologist and psychologist, systemic and psychodynamic stream	8 years	Children, adolescents, adults	Public and private
Robert	M	35	Psychiatrist, integrative stream	7 years	Adults	Private

Source: own study.

Results

This section begins with an examination of job's quality dimensions from the perspective of the interviewees' everyday professional experiences. Following this, I focus on the dimensions that create tensions and pose challenges for the psychotherapists, particularly working time, work intensity, and work-life balance. Finally, I briefly discuss the coping strategies adopted by the interlocutors to overcome tensions and difficulties as well as to improve their job quality.

An overview of the studied dimensions of job quality

The first studied dimension of job quality is income, referring to the earnings derived from employment. Those interlocutors working in the private sector express satisfaction with their salaries, whereas those employed in the public sector do not, as they consider their pay too low and inadequate in relation to their level of education and qualifications. Consequently, those interviewees working in the public sector often supplement their income by combining their jobs with employment in the private sector. This issue is illustrated by Igor's statement:

Interviewer: Are you satisfied with your salary?

Interviewee: Well, yes and no, because I work in the hospital with NFZ [National Health Fund – J.Z.] contract and I work privately, and I'm dissatisfied with the salary from the hospital. (Igor, 38 years old, employed in the public and private sector)

According to the interlocutors, the most financially advantageous option is running one's own psychotherapy practice as part of self-employment, which also provides significant organizational independence.

Another dimension includes forms of employment and job security. The interviewees work under various types of contracts: employment contracts, contracts of mandate, and self-employment when running sole proprietorships. Regardless of the type of contract, they feel secure due to their high qualifications and the strong demand for psychotherapists in Poland, particularly after the COVID-19 pandemic. Psychotherapists acknowledge that employment contract provides social benefits, such as the right to paid sick leave and paid vacation. However, they prefer self-employment, as it offers higher earnings.

The work of psychotherapists is characterized by a high degree of autonomy, which results both from the individualized nature of their work (as they work independently with patients) and from the recognition of their professionalism, meaning they are regarded as professionals possessing extensive knowledge and specialized skills. However, greater independence can be observed in the private sector, particularly when running a private practice, where there is no need to adapt to teamwork or a manager. Psychotherapists working in the public sector experience less autonomy. They find the excessive amount of medical documentation that must be completed particularly burdensome, as well as the guidelines issued by the National Health Fund (NFZ), which strictly define the duration of their sessions with patients and subject their work to control. I will address work intensity in the following subsection.

Another dimension of job quality is skills and career development. Acquiring new knowledge and skills as well as improving professional practice is an important aspect of work for the studied psychotherapists. The interlocutors participate in training sessions, seminars, courses, conferences, and postgraduate studies. Some of them combine their work as psychotherapists with academic work. Self-development is also important to them, as they emphasize that their personality and emotions are tools for therapeutic work. They take part in sessions with a supervisor – i.e., an experienced therapist who conducts therapeutic supervisions – and some of them undergo their own therapy. Skills development directly translates into improved job quality in patient care, which is important to psychotherapists and influences their career development. Additionally, it is evident that the interviewees are passionate about their work, which may also motivate them to pursue their professional development.

I think that, first of all, I've been constantly developing my practice. I am the tool. I'm really very satisfied with my supervisor. I truly feel that I learn a lot and conduct therapy much better than I used to. In addition, I'm finishing postgraduate studies in sexology. This has

really helped me develop and expand my knowledge on topics related to sex. I'm also considering taking the exam to become a certified sexologist. (Iga, 45 years old, self-emp. in the private sect.)

However, access to skill development varies, and often psychotherapists themselves have to pay for trainings, workshops, postgraduate studies, seminars, and supervisions. This applies not only to those working in self-employment but also to those working in the public sphere. As Paweł said: "in my profession you have to pay for everything yourself" (45 years old, emp. in the public and private sect.).

The interviewees do not belong to trade unions but are members of professional organizations such as the Polish Psychological Society, the Polish Psychiatric Society, the Polish Society for Psychodynamic Psychotherapy, the Institute of Group Analysis, etc. These organizations deliver trainings, seminars and conferences, and recommend books to read. They also set standards for therapeutic work and psychotherapy trainings, issue certificates, train supervisors, and advocate for the regulation of the psychotherapy profession in Poland. The attitude toward these organizations varies among the interviewees, though it is generally positive. Psychotherapists appreciate their activities. For example, as one interviewee said, the conferences organized by them provide an opportunity to meet other psychotherapists and feel part of a community: "when you're sitting with 1000 psychodynamic psychotherapists, you can really feel the support behind you, knowing you're not alone with all these difficulties, and that's very reassuring" (Marta, 53 years old, self-emp. in the private sect.).

Working time and work intensity, and their impact on work-life balance

In the dimensions of working time and work intensity, various tensions and challenges can be observed that impact psychotherapists' well-being and work-life balance. Firstly, these tensions and challenges relate to working hours, which can be flexible and long (up to 65–72 hours per week), especially for those working in managerial positions, such as Lidia:

I work 13 hours a day. It is a combined time: therapeutic time and the care of the clinic, of the team, because the demands are very high now, including the control of the medical files, the supervision of the people who are in training, the care of the volunteers and the preparation for work. (Lidia, 49 years old, emp. in public sect.)

Among those who run their own psychotherapy practices, there is a clear effort to arrange working hours and ensure they are not too long. Those interviewees who strive to maintain a work-life balance try to limit their caseload to no more than 20 patients per week. In addition to therapeutic work, psychotherapists also carry out other duties, such as consulting individuals who seek their help, diagnosing them, filling out medical documentation, etc. A challenge for the interviewees is that patients are unevenly distributed across different days, so on some days they may have seven patients, while on other days – only two. Another issue is that patients, especially in the private sector, choose afternoon hours for therapy, i.e., hours after their work. These unsocial hours (late afternoons

and evenings) make it difficult for psychotherapists to work when most people around them are off work. Scheduling can be facilitated through online sessions, which were introduced during the COVID-19 pandemic, as they enable therapists to admit patients regardless of their location. Some interviewees express objections to this form of therapy, arguing that it is less effective than face-to-face therapy. In summary, the interviewees' working hours are often long as well as flexible and irregular. Additionally, therapy requires consistency and continuity, meaning that therapists cannot cancel or reschedule appointments, as this could negatively impact their patients' well-being. Holidays must be planned well in advance and patients must be informed about them with significant notice, as illustrated by Karol's statement:

I plan my holidays much, much in advance. Usually once a year or twice. And as I've been running a group therapy for eight years, I haven't cancelled it once. You always have to be very fixed, no matter what happens. (45 years old, self-emp. in the private sect.)

Long, flexible, and irregular working hours negatively affect work-life balance. For example Małgorzata says that she does not have time for her child, which is very painful for her. Sometimes, flexible working hours are helpful when balancing professional duties with caring for young children, but generally, the interviewees state that they would prefer to work less and have a more evenly distributed schedule.

Therapeutic work with patients is highly intense, because it requires a high level of concentration and ongoing analysis of what the patient says and how they behave. Moreover, the work is mentally and emotionally intense, as therapists deal with patients facing diverse difficulties and crises. The interlocutors find it hard to disconnect from work after hours, feeling emotionally connected and responsible for their patients' well-being. They also face challenges with difficult patients (e.g., impulsive), which adds to the emotional and physical strain. Overall, psychotherapists experience emotional and physical fatigue due to the intense nature of their work.

The tensions and challenges that psychotherapists are exposed to include insufficient salary and relatively lower autonomy in the public sector, overwork, disruption of work-life balance, excessive emotional burden, and stress, all of which may negatively affect family and social relationships.

Coping strategies

I understand coping strategies as the structuring of actions by workers, both in the long- and short-term perspective, aimed at achieving goals (Hyman, Scholarios, Baldry, 2005: 707). As Margaret Archer writes, people have a vision of the desired way of life and strive to achieve it, taking into account the structural and cultural conditions they confront (Archer, 2007: 88).

The career paths of the studied psychotherapists typically began in the public sector. However, low salaries, excessive administrative burdens related to medical documentation, and a sense of chaos as well as poor work organization often lead them to transition partially or entirely to the private sector. In the private sector, they can work in commercial clinics or establish their own practices.

To minimize the tensions and challenges associated with mental and emotional intensity of their work – such as experiencing difficult emotions, uncertainty, and stress – the interviewees systematically participate in individual and group supervisions. Psychotherapists have positive opinions about supervisions, stating that they allow them to discuss their challenges with patients and receive support from their supervisor and other psychotherapists.

I just sometimes feel like my head is going to explode if I don't tell it to someone, because I can't deal with it myself. And supervision is one of these places where you can let it out in an ethical setting. The supervision group is a great source of support. (Marta, 53 years old, self-emp. in the private sect.)

Some interviewees attend their own therapy; supervision and personal therapy are recommended practices by professional organizations that associate psychotherapists. Furthermore, in the public sector, in hospitals and counseling centers, it is also common to work in teams and discuss problems collectively.

Private and informal strategies include so-called interventions, which involve discussing a problem or a difficult situation with another psychotherapist. The interviewees also try to use relaxation techniques, visualizations, and rituals to mentally detach from their professional sphere and stop thinking about their patients when transitioning into their private lives. Other private and informal strategies involve practicing hobbies, such as horse riding, ceramics, sports, dance, photography, meeting friends, and contact with nature and art. These activities calm and relax the interviewees.

In summary, there are institutionalized ways of coping with the tensions arising from the mental and emotional intensity of this profession. One particularly valued tool is supervision. However, it is important to remember that it is usually a paid service. During their professional training, and later through various courses offered by organizations that associate psychotherapists, they learn techniques for managing emotional difficulties and develop their professional skills. In addition, the interviewees apply private and informal strategies that help them overcome challenges.

Table 2. Job quality dimensions, tensions, challenges, and coping strategies

Dimenions of job quality	Tensions and challenges	Adopted coping strategies to enhance job quality
Income	Discontent with low wages in the public sector	<ul style="list-style-type: none"> – Taking on additional work (in the public sector, private sector or NGOs) – Transition to work in the private sector, especially opening one's own practice
Forms of employment and job security	The lack of social benefits for self-employment	<ul style="list-style-type: none"> – Negotiations with the employer to secure social benefits – Switching to an employment contract
Working time, working conditions (autonomy and intensity), work-life balance	<ul style="list-style-type: none"> – In the public sector: too many bureaucratic duties that cannot be completed during working hours, chaotic and sometimes poorly organized work, relatively high level of control – In the private sector: work often in the afternoons, evenings, sometimes on weekends – High work intensity, mental and emotional strain 	<ul style="list-style-type: none"> – Transition to the private sector – Opening one's own psychotherapy practice – Reducing the number of patients – Conducting online psychotherapy – Engaging in supervision, personal therapy, team meetings, participation in conferences, seminars, trainings, intervision, practicing relaxation techniques, pursuing hobbies
Skills and career development	Trainings, courses, seminars, postgraduate studies, etc. are usually paid;	Transition to work in the private sector, where salaries are higher;
Collective interest representation and voice	– They do not belong to trade unions, but to professional organisations, which partially represent their interests;	

Source: own study.

Summary and conclusions

The profession of a psychotherapist is highly qualified and based on prestige, and psychotherapists belong to the category of 'essential workers'. It can be stated that the overall job quality in this profession is relatively high, as it belongs to the core labor market (e.g., Kozek, 2013: 115–119). Additionally, in the era of polycrisis and as a result of the increasing popularity of therapy, the demand for psychotherapists' services has increased, which means that the bargaining power of this professional group should be high. However, in the case of psychotherapists, a dual labor market can be observed between the public sector and private sector, and the subjective job quality in the public sector is significantly lower than in the private sector. The interviewees perceive work in the public sector as poorly and irrationally organized, making it difficult for them to work with patients.

As a result, psychotherapists adopt a strategy of transitioning (partially or entirely) to the private sector, which offers them higher pay, better working conditions, and greater autonomy. Consequently, the most vulnerable groups of people – such as those from lower social classes, with lower levels

of education and lower income, and living in smaller towns – face greater difficulties in accessing psychotherapy support. This is particularly concerning in the context of the increasing risk of mental health crises.

This article focused on subjective job quality. The work performed by the psychotherapists gives them a sense of meaningfulness and self-fulfilment. It is interesting and important to them; they feel that through their work they gain knowledge and develop as individuals, who also experience various crises. The psychotherapists value the opportunities for acquiring new skills and (self-)development, as well as the autonomy of their work. However, high autonomy often comes with high work intensity (cf. Piasna, 2023: 35).

The work of psychotherapists is highly individualized, though it is based on contact and deep interaction with people, including patients, colleagues, and supervisors. Psychotherapists belong to professional organizations that support them and act on their behalf, e.g., by advocating to regulate the psychotherapist profession. However, there is a lack of collective representation to unite this professional group and ensure higher job quality in the public sector, which could help improve the availability of psychotherapy support.

References

- Archer Margaret (2007), *Making our Way Through the World: Human Reflexivity and Social Mobility*, Cambridge: Cambridge University Press.
- Bouquin Stephen (2019), *Job quality in Europe*, [in:] Tommy Isidorsson, Julia Kubisa (eds.), *Job Quality in an Era of Flexibility. Experiences of Job Quality in an European Context*, Oxon: Routledge, pp. 20–33.
- Dobrąnsky K. Michael (2019), *Breaking Down Walls, Building Bridges, "Society and Mental Health"*, vol. 9(2), pp. 228–242.
- Dziennik Ustaw Rzeczypospolitej Polskiej (2024), Obwieszczenie Marszałka Sejmu Rzeczypospolitej Polskiej z dnia 14 czerwca 2024 r. w sprawie ogłoszenia jednolitego tekstu ustawy o ochronie zdrowia psychicznego (Dz.U. 2024, poz. 917), <https://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20240000917> (accessed: 23.02.2025).
- ETUI (2018), *Job quality index (JQI)*, <https://www.etui.org/topics/labour-market-employment-social-policy/job-quality-index-jqi> (accessed: 6.02.2025).
- Eurofound (2022), *Working conditions in the time of COVID-19: Implications for the future, European Working Conditions Telephone Survey 2021 series*, Luxembourg: Publications Office of the European Union.
- Eurofound (2023), *Job quality of COVID-19 pandemic essential workers, European Working Conditions Telephone Survey series*, Luxembourg: Publications Office of the European Union.
- Eurofound (2024), *Job Quality Side of Climate Change. Working Conditions and Sustainable Work Series*, Luxembourg: Publications Office of the European Union.
- European Commission, Directorate-General for Employment, Social Affairs and Inclusion (2023), *Employment and social developments in Europe 2023*, Luxembourg: Publications Office of the European Union.

Eurostat (2024), *Healthcare expenditure – overview*, https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Healthcare_expenditure_statistics_-_overview (accessed: 1.03.2025).

Gardawski Juliusz, Mrozowski Adam, Burski Jacek, Czarzasty Jan, Karolak Mateusz (2022), *Polacy pracujący w czasie COVID-19*, Warszawa: Wydawnictwo Naukowe Scholar.

Greenberg McClintock Tamara (2020), *Treating Complex Trauma: Combined Theories and Methods*, Cham: Springer.

Grupa robocza do spraw projektu ustawy o zawodzie psychoterapeuty (2024), *Psychoterapeuta – zawód zaufania publicznego. Projekt ustawy o zawodzie psychoterapeuty. Główne założenia*, [https://orka.sejm.gov.pl/opinie10.nsf/nazwa/1000_20240125/\\$-file/1000_20240125.pdf](https://orka.sejm.gov.pl/opinie10.nsf/nazwa/1000_20240125/$-file/1000_20240125.pdf) (accessed: 1.03.2025).

GUS (2024), *Zdrowie i ochrona zdrowia w 2023 roku*, <https://stat.gov.pl/obszary-tematyczne/zdrowie/zdrowie/zdrowie-i-ochrona-zdrowia-w-2023-roku,1,14.html> (accessed: 1.03.2025).

Howell David R., Kalleberg Arne L. (2019), *Declining Job Quality in the United States: Explanations and Evidence*, “The Russell Sage Foundation Journal of the Social Sciences”, vol. 5(4), pp. 1–53.

Hyman Jeff, Scholarios Dora, Baldry Chris (2005), *Getting on or Getting by? Employee Flexibility and Coping Strategies for Home and Work*, “Work, Employment & Society”, vol. 19(4), pp. 705–725.

IPSOS (2024), *World Mental Health Day 2024. A 31-country Ipsos Global Advisor Survey*, <https://www.ipsos.com/sites/default/files/ct/news/documents/2024-10/Ipsos%20World%20Mental%20Health%20Day%202024%20Global%20Charts.pdf> (accessed: 24.02.2025).

Isidorsson Tommy, Kubisa Julia (eds.) (2019), *Job Quality in an Era of Flexibility. Experiences of Job Quality in an European Context*, Oxon: Routledge.

Karolak Mateusz (2020), *Společno-ekonomiczne konteksty prekaryzacji pracy młodych w Polsce*, [in:] A. Mrozowski, J. Czarzasty (eds.), *Oswajanie niepewności. Studia społeczno-ekonomiczne nad młodymi pracownikami sprekaryzowanymi*, Warszawa: Wydawnictwo Naukowe Scholar, pp. 49–72.

Kaźmierczyk Paweł, Papis Maria, Nowosielska-Łaskawiec Julia, Bednarski Jan (2024), *Raport regulacyjny. Poprawa ochrony zdrowia psychicznego dzieci i młodzieży w Polsce*, https://rzmlaw.com/wp-content/uploads/2024/06/Raport-Poprawa_ochrony_zdrowia_psychicznego_dzieci_i_mlodziezy_w_Polsce.pdf (accessed: 23.02.2025).

Kozek Wiesława (2013), *Rynek pracy. Perspektywa instytucjonalna*, Warszawa: Wydawnictwa Uniwersytetu Warszawskiego.

Kubisa Julia, Mendonça Pedro (2019), *Job quality in an era of flexibility. Introduction*, [in:] Tommy Isidorsson, Julia Kubisa (eds.), *Job Quality in an Era of Flexibility. Experiences of Job Quality in an European Context*, Oxon: Routledge, pp. 1–19.

Lozinskaia Elena (2002), *Study of Stress Parameters in the Work of the Clinical Psychiatrist*, “International Journal of Mental Health”, vol. 31(1), pp. 93–98.

Muñoz de Bustillo Rafael, Fernández-Macías Enrique, Antón José-Ignacio, Esteve Fernando (2011), *Measuring More than Money: The Social Economics of Job Quality*, Cheltenham: Edward Elgar Publishing.

NIK (2023), *Informacja o wynikach kontroli. Pomoc psychologiczna i psychoterapeutyczna dla dzieci i młodzieży*, <https://www.nik.gov.pl/kontrola/P/23/076/LPO/> (accessed: 23.02.2025).

Nowak Katarzyna (2021), *Nasilenie stresu i style radzenia sobie z nim u nauczycieli w pandemii COVID-19*, „Annales Universitatis Mariae Curie-Skłodowska. Sectio J. Paedagogia–Psychologia”, vol. 34(3), pp. 7–24.

Pałęcka Alicja (2023), *Who cares for carers? Responsibilization and the discourse of self-care in health and social care literature during the COVID-19 pandemic. A critical review*, "Qualitative Social Work", vol. 23(6), pp. 1–16.

Pawłowska-Krać Aneta (2023), *Głosnik w głowie. O leczeniu psychiatrycznym w Polsce*, Wołowiec: Wydawnictwo Czarne.

Piasna Agnieszka (2023), *Job Quality in Turbulent Times. An Update of the Job Quality Index*, Brussels: European Trade Union Institute.

Piasna Agnieszka, Pedaci Marcello, Czarzasty Jan (2020), *Multiple jobholding in Europe: features and effects of primary job quality*, "Transfer: European Review of Labour and Research", vol. 27(2), pp. 181–199.

PTS (2012), *Kodeks etyki socjologa*, <https://pts.org.pl/wp-content/uploads/2016/04/kodeks.pdf> (accessed: 12.11.2023).

Szyska Małgorzata, Zaborowska Agnieszka (2022), *Specyfika pracy socjalnej w dobie pandemii. Badania jakościowe wśród pracowników pomocy społecznej*, „Zeszyty Naukowe Katolickiego Uniwersytetu Lubelskiego Jana Pawła II”, vol. 65(4), pp. 125–142.

Wciórka Jacek (2021), *Postawy wobec osób chorujących psychicznie, chorób psychicznych i instytucji psychiatrycznych*, [in:] J. Moskaiewicz, J. Wciórka (eds.), *Kondycja psychiczna mieszkańców Polski. Raport z badań „Kompleksowe badanie stanu zdrowia psychicznego społeczeństwa i jego uwarunkowań – EZOP II”*, Warszawa: Instytut Psychiatrii i Neurologii, pp. 483–504.

Wciórka Jacek, Biechowska Daria, Langiewicz Wanda, Ostaszewski Krzysztof, Moskaiewicz Jacek (2021), *Podsumowanie wyników badania EZOP II*, [in:] J. Moskaiewicz, J. Wciórka (eds.), *Kondycja psychiczna mieszkańców Polski. Raport z badań „Kompleksowe badanie stanu zdrowia psychicznego społeczeństwa i jego uwarunkowań – EZOP II”*, Warszawa: Instytut Psychiatrii i Neurologii, pp. 719–753.

WHO (2022), *World mental health report: Transforming mental health for all*, <https://www.who.int/publications/i/item/9789240049338> (accessed: 18.10.2024).

WHO (2023), *Latest news. “Giving mental health the attention it deserves” – Poland adopts WHO tool to boost efforts to address mental health needs*, <https://www.who.int/europe/news-room/10-10-2023-giving-mental-health-the-attention-it-deserves---poland-adopts-who-tool-to-boost-efforts-to-address-mental-health-needs> (accessed: 10.01.2025).

Cytowanie

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Jakość pracy psychoterapeutów w polskim kontekście społeczno-instytucjonalnym. Wymiar subiektywny

Streszczenie: Artykuł analizuje jakość pracy psychoterapeutów z perspektywy socjologii pracy. W obliczu rosnącego zapotrzebowania na usługi zdrowia psychicznego psychoterapeuci są klasyfikowani jako „pracownicy niezbędni” (ang. *essential workers*). Badanie koncentruje się na subiektywnym wymiarze jakości pracy, napięciach i wyzwaniach, z jakimi psychoterapeuci mierzą się w swojej codziennej pracy oraz strategiach radzenia sobie, które stosują w celu poprawy jakości swojej pracy. Wyniki obrazują istnienie podwójnego rynku pracy, w którym subiektywna jakość pracy w sektorze prywatnym jest znacząco wyższa niż w sektorze publicznym. Psychoterapeuci zatrudnieni w sektorze publicznym zmagają się z nadmierną biurokracją i kontrolą ich pracy, stosunkowo niskimi wynagrodzeniami i dużą intensywnością pracy, co skłania ich do przechodzenia do sektora prywatnego.

Słowa kluczowe: psychoterapeuci, praca, jakość pracy, strategie radzenia sobie, zdrowie psychiczne