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DISTINGUISHING SOCIAL JUSTICE ADVOCACY IN COUNSELING FROM
SOCIAL WORK FUNCTIONS: A DELPHI STUDY

by

ALEXANDRIA K. KERWIN

A dissertation
submitted in partial fulfillment
of the requirements for the degree of
Doctor of Philosophy in the Department of Counseling
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DISTINGUISHING SOCIAL JUSTICE ADVOCACY

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December 17, 2013

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RE: Your application dated 12/11/2013 regarding study number 4025: Distinguishing Social Justice and Advocacy in Counseling from Social Work Functions: A Delphi Study

Dear Ms. Kerwin:

I have reviewed your request for expedited approval of the new study listed above. This is to confirm that I have approved your application.


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Submit progress reports on your project in six months. You should report how many subjects have participated in the project and verify that you are following the methods and procedures outlined in your approved protocol. Then, report to the Human Subjects Committee when your project has been completed. Reporting forms are available on-line.

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Sincerely,


Ralph Baergen, PhD, MPH, CIP
Human Subjects Chair

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DEDICATION

This dissertation is dedicated to my beloved Nan and Mama Katie.

DISTINGUISHING SOCIAL JUSTICE ADVOCACY

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ABSTRACT

DISTINGUISHING SOCIAL JUSTICE ADVOCACY FROM SOCIAL WORK

FUNCTIONS: A DELPHI STUDY

Alexandria K. Kerwin
Idaho State University, 2014

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The purpose of this study was to investigate a panel of experts' opinions and explanations distinguishing social justice advocacy in counseling from social work functions. The current inquiry delivered a preliminary exploration and analysis of the unique facets of social justice advocacy in counseling as distinguished from social work functions. The Delphi method was chosen to attain an assortment of expert observations and beliefs concerning social justice advocacy in counseling and how it may be distinguished from social work functions. While the open-ended queries invited a rich opportunity for understanding the participants' viewpoints, this approach also facilitated quantitative analysis of data. The compilation of the Delphi expert panel encompassed counselor educators who are also scholars of social justice advocacy in counseling. With the intent to have the panelists reach consensus on their responses, three rounds of data collection were implemented. An interquartile range of less than or equal to 1.0 demarcated having reached consensus.

Twenty-seven items reached consensus. Based on the panelists' responses to the questionnaires utilized in this study, it is apparent they believe social justice advocacy to be an essential component of counselors' professional identity. However, the ways in which social justice advocacy in counseling is distinguished from social work functions remains ambiguous. Overall, the panel agreed distinct boundaries between the helping

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professions are both unnecessary and inappropriate. Although the panelists did not provide clarification regarding the two professions' differences, they did address how social justice advocacy is incorporated into counselors' professional identity. The most noteworthy themes addressing counselors' integration of social justice advocacy were the use of professional guidelines, inter-professional collaboration, impetus and avenues for social justice advocacy, and practical educational strategies. Conversely, other themes, such as criticism of defining boundaries between the helping professions and being unfamiliar with social work functions, provide insight into why the panel did not offer an explanation regarding differences between counseling's and social work's implementation of social justice advocacy

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CHAPTER 1

INTRODUCTION

Although in existence for over a century, the counseling profession is one of the youngest in the mental health field. Consequently, professional counseling identity continues to evolve as members strive to solidify and articulate their place among helping professionals. The American Counseling Association's (ACA) current vision for strengthening and unifying professional identity in counseling has been dubbed 20/20 as the organization hopes to realize their vision by the year 2020. The most current definition of counseling was only recently agreed upon in March of 2010 and reads, "counseling is a professional relationship that empowers diverse individuals, families, and groups to accomplish mental health, wellness, education, and career goals" (ACA, 2013, "20/20: Consensus Definition of Counseling" para. 2). However, many professionals believe counseling is lacking a crucial element of social justice (Chung & Bemak, 2012; Crethar, Rivera, & Nash, 2008; Ratts, 2009). In the context of counseling, social justice has been defined as "both a goal and a process for counselors who believe in developing an increasingly socially just world, one in which all people receive equitable opportunities to access resources and participate in policy and law development that affect them, ultimately resulting in a society that embodies harmony between the needs of individuals and the needs of the whole" (Crethar & Winterowd, 2012, p. 3). Several proponents of social justice in counseling have advocated for a modified definition of counseling that explicitly includes social justice advocacy in counseling (M. D'Andrea, personal communication, March 20, 2013).

The counseling profession has a history of adapting its mission to the evolving needs of the public (Briddick, 2009; Gladding, 2012; Nassar-McMillan & Niles, 2011; O'Brien, 2001). Counseling initially emerged in response to the Industrial Revolution's impact on increased vocational opportunities. Counselors were able to meet the public's need for practical career guidance, largely in the context of school guidance counseling (Gladding, 2012; O'Brien, 2001). According to Gladding (2012), counseling later incorporated a mental health paradigm to meet the needs of returning war veterans who were struggling to cope with their traumatic experiences. Federal funding for educational programs influenced counseling's growth into an organized profession, and the original ACA was formed. Later, the seed of multicultural counseling was planted during the civil rights movement of the 1960's and was widely embraced by the 1990's. In the meantime, counseling licensure and accreditation standards were both developed lending credibility to professional counseling. Many current issues that have emerged in counseling include professional identity and social justice advocacy (Gladding, 2012).

As evidenced by history, counseling began as practical guidance and has grown increasingly more complex. Part of counseling's growing complexity has been manifested through the evolution of theoretical forces driving the profession. Therefore, theory plays an integral part in counseling practice (Ratts, 2009). The profession has evolved from practical guidance (Gladding, 2012; O'Brien, 2001), into a theoretically grounded practice of art and science. Four explicit theoretical paradigms have evolved as the guiding forces in counseling: psychodynamic, cognitive behavioral, existential-humanistic, and multiculturalism (Ratts, 2009; Daniels, 2007; Pedersen, 1991). Counseling theory functions as a means to understanding people, counseling

relationships, and effective interventions (Ratts, 2009). Many counseling professionals have been advocating for a social justice paradigm, one that uses advocacy as a counseling intervention, as the fifth force in counseling (Chung & Bemak, 2012; Crethar, Rivera, & Nash, 2008; Mellin, Hunt, & Nichols, 2011; Ratts, 2009). However, many counseling practitioners have little understanding of how to incorporate social justice into their work, and many point to social workers as being the social justice advocates of helping professionals (Hunsaker, 2011; Smith, Reynolds, Rovnak, 2009).

Although an ecological perspective is the contemporary hallmark of social work (Mellin, Hunt, & Nichols, 2011; Silverman, 2012; Smith, Reynolds, & Rovnak, 2009), the profession originated as individualized philanthropy (Murdach, 2010). Murdach (2010) examined political influence on professional social work. He noted one-on-one social work continued for about 20 years until the profession became politically affiliated with the Progressive Party. Social activism then became the primary force of social work practice until American politics became significantly more conservative in the latter half of the 20th century. Many practicing social workers have gravitated toward a more individualistic focus (Miller, 2013); however, the profession's organizational bodies, in addition to many helping professionals and the general public, identify social justice and advocacy as unique to social work (National Association of Social Workers, 2008; Mellin, Hunt, & Nichols, 2011).

Social work has been distinguished from other helping professions by operating at the macrolevel (Council on Social Work Education, 2008; Mellin, Hunt, & Nichols, 2011; Miller, 2013; National Association of Social Workers, 2008; Silverman, 2012; Smith Reynolds & Rovnak, 2009). However, Miller (2013) highlighted a movement

towards private practice and individual client work, a notion supported by a national study conducted by the National Association of Social Workers (2006). Adding further confusion, a comparison of educational requirements illustrated more similarities than differences between the two helping professions of social work and counseling (Council for Accreditation of Counseling and Related Educational Programs, 2009; Council on Social Work Education, 2008). Furthermore, Herlihy and Remley (1995) called attention to the multiple, oftentimes conflicting, specialties and ethical standards for professional counselors. They underscored the potential for confusion among professionals and consumers of counseling. Counselors for Social Justice (CSJ), another ACA division with a respective code of ethics, have been created since Herlihy and Remley's (1995) critique. A comparison of ACA's, CSJ's and NSWA's ethical codes revealed many similarities and differences with the potential to exacerbate ACA's current confusion surrounding professional identity.

Statement of Problem and Significance of Study

Within the last decade, the social justice advocacy movement has rapidly emerged in the counseling profession (Hunsaker, 2011; Smith, Reynolds, & Rovnak, 2009). However, many argue social justice advocacy has always existed in counseling and was a catalyst to its creation (Ratts, 2009; Kiselica & Robinson, 2001; Parry, 2010). The counseling profession has already recognized the impact of social contexts on psychological health by embracing multiculturalism, and many contributors have suggested a social justice paradigm is the next step for counseling in a multicultural world (Chung & Bemak, 2012; Pack-Brown, Thomas, & Seymour, 2008; Ratts, 2009). In an effort to operationalize social justice in counseling, Advocacy Competencies have

been created and endorsed by ACA (Lewis, Arnold, House, & Toporek, 2003; Counselors for Social Justice, 2011). Despite the enthusiastic momentum behind integrating social justice as the fifth force in counseling, some counseling professionals have voiced reservation (Hunsaker, 2011; Smith, Reynolds, & Rovnak, 2009). Critics of the social justice advocacy movement in counseling have concerns surrounding a lack of theoretical support and research, potential for ulterior motives, and further confusion about professional identity.

Because various professions practice in the mental health field, it is important for counselors to be able to clearly articulate how their profession can be distinguished from others. Unfortunately, over the past several years, it appears there has been increasing overlap in the roles of counselors and social workers. Social workers are able to obtain licensure as Professional Counselors and deliver counseling services due to inconsistent educational requirements among state licensure laws (Cashwell, Kleist, & Scofield, 2009). Mellin, Hunt, and Nichols (2011) implored several practicing counselors to define their professional identity and distinguish it from social work and psychology. When articulating the differences between counseling and social work, a major theme emerged illustrating an understanding that counselors focus on the individual and microlevel issues, while social workers address systemic and macrolevel issues. The participants went on to explain how social workers approach client problems from a global standpoint, and counselors do not. "Social work is more heavily focused on the 'social' aspect of clients and mental health, and there tends to be a strong push to work in the public sector and to deal with issues of advocacy" (Mellin et al., 2011, p. 144). Mellin et al. (2011) acknowledged the discrepancy between these responses and the growing

attention given to social justice and advocacy in the counseling profession. Because many counselors in this study deemed social action as a distinguishing function of social workers, the researchers concluded further investigation is needed to clarify professional counselors' roles and functions in social justice and advocacy.

Statement of Purpose

The purpose of this study is to explore a panel of experts' opinions and postulations concerning the features distinguishing social justice advocacy in counseling from social work functions. It is intended to continue an ongoing discourse with academics who have established proficiency the area of social justice advocacy in counseling. Understanding and articulating one's professional identity has come to the forefront of counseling. This preliminary investigation into the distinction between counselors for social justice and social workers will add momentum to the ongoing, and oftentimes contradictory, movement toward strengthening and unifying professional identity and social justice advocacy as a fifth force.

Research Question

The objective of this study is to uncover consensus among counselor educators with specialized knowledge in the realm of social justice advocacy in counseling regarding how it is distinguished from social work. The research questions guiding this study are as follows:

1. What are the beliefs of a panel of experts regarding how social justice advocacy is incorporated into counseling's professional identity in a way that is distinct from Social Work?

2. In which capacities, if any, can consensus of opinion be reached about distinguishing social justice advocacy in counseling from social work functions?

Method

The Delphi method has often been employed as a preliminary approach to understanding trends in a given field (Linstone & Turoff, 2002). Appropriately, this technique was chosen to acquire various opinions and ideas about what distinguishes a professional identity inclusive of social justice advocacy in counseling from social work functions. This approach is of a mixed method design and will allow for quantitative analysis of data and qualitative, open-ended opinions to foster a richer understanding of participants' stances.

The philosophical underpinning of the Delphi method is one of reality construction with a goal of reaching consensus (Linstone & Turoff, 2002). When using the Delphi method, the researcher facilitates a structured and anonymous group conversation among experts to gather opinions. One of the biggest advantages of the Delphi method is anonymity. "The traditional discussion approach was often beset by psychological factors such as the presence of a dominant, persuasive personality, the tendency to want to meet the approval of the group, and the unwillingness to change an opinion which had been publicly expressed" (Linstone & Turoff, 2002, p. 2). The Delphi approach helps eliminate these psychological and social roadblocks by allowing anonymous response to questions, usually asked by questionnaire, and providing opportunities to review others' responses. The experts can then give and receive feedback as well as revise and give reason for their own responses. Each round of questioning and feedback informs the next round, and the facilitator may ask respondents

to elaborate or give reasons for their answers. Also, the facilitator, based on previous responses, may generate new questions. The Delphi approach does not abandon objectivity, as it emphasizes informed judgment (Brown, 1968).

The intention of all four items on the preliminary questionnaire is to elicit a comparison between professional identities of the counseling and social work professions regarding social justice advocacy. Guided by the Delphi method, the subsequent data collection cycles will emerge from the participants' original responses to the four items on the initial questionnaire. To address the research questions, participants will be asked to reply, in 100 words or less, to the following items on the initial questionnaire:

1. What are the differences between social justice in counseling and social work functions?
2. How would you describe to counselors-in-training (CITs) the professional boundary between social justice advocacy in counseling and social work?
3. As counselor educators, how can we train our students to promote social justice advocacy while maintaining a distinctive counselor identity?
4. In what ways can CITs demonstrate social justice advocacy within their programs while maintaining a unique counselor identity?

Assumptions

Various intrinsic assumptions have been made about this research process. First it is assumed the questionnaire items will prompt meaningful responses. It is imperative for the panelists to respect this process by devoting intentional contemplation to their responses. Moreover, an assumption is being made that the same amount of value placed on personal viewpoints is also extended to other panelists' viewpoints. It is also being

assumed the participants selected for the panel will be genuine experts in the area of social justice advocacy in counseling.

The participants' veracity and honesty in their answers is also assumed. The panelists' transparent expression of their opinions is crucial to realizing an actual consensus among the experts. Spector (1994) highlighted the controversies over the inconsistent nature of self-report measures, and several standardized tests include a lie scale in an effort to counteract the limitations of self-report. However, because a lie scale will not be included in this instrument, truthfulness of self-report is assumed. The maintenance of scientific impartiality and reduction of researcher bias by acting in accordance with the Delphi method is also assumed. Due diligence will be given to the methodical and neutral execution of the research design.

Delimitations

The extrapolation of this investigation's results beyond the scope of the population in this study is not intended. Instead, transferability, or the relative meaning and applicability the consumer takes away from the research (Lincoln & Guba, 1985), is the researcher's desired effect. However, to make the case for generalizability, Kennedy (2004) suggested utilizing Delphi findings as a basis to investigate the subject matter from different methodological angles, noting the limitations of time and expense. Secondly, this analysis is not expected to empirically define social justice advocacy in the counseling profession. Instead, it is envisioned to be an initial stride in exploring expert views regarding a counseling professional identity that is inclusive of social justice advocacy yet unique from social work functions. Lastly, this study is not designed to advocate for or against a mandated inclusion of social justice advocacy in the

professional identity of counseling. Instead, it is focused on encouraging dialogue among experts pertaining to the distinguishing features of social justice advocacy in counseling and social work.

Definitions

- 1) *Counseling*- “a professional relationship that empowers diverse individuals, families, and groups to accomplish mental health, wellness, education, and career goals” (ACA, 2013, “20/20: Consensus Definition of Counseling” para. 2).
- 2) *Social Work*- “the professional application of social work values, principles, and techniques to one or more of the following ends: helping people obtain tangible services; counseling and psychotherapy with individuals, families, and groups; helping communities or groups provide or improve social and health services; and participating in legislative processes” (NASW, n.d., Practice section, para. 1).
- 3) *Social Justice*- “both a goal and a process for counselors who believe in developing an increasingly socially just world, one in which all people receive equitable opportunities to access resources and participate in policy and law development that affect them, ultimately resulting in a society that embodies harmony between the needs of individuals and the needs of the whole” (Crethar & Winterowd, 2012, p. 3).
- 4) *Advocacy*- “the act of taking action to produce environmental change on behalf of clients and is considered a framework to help clarify how counselors can practice social justice” (Steele, 2008, p. 75).
- 5) *Social Justice Advocacy*- “professional practice, research or scholarship intended to identify and intervene in social policies and practices that have a negative impact on the mental health of clients who are marginalized on the basis of their social status” (Steele, 2008, pp. 75-76).

- 6) *Privilege*- any unearned special advantage, right, or influence related to a desired status that is exploited to the advantage of the recipient and at the expense or marginalization of others, often unrecognized by the person having it (Black & Stone, 2005).
- 7) *Oppression*- imposing unnecessary and undesired circumstances on others as well as depriving others of favorable and needed affirming conditions, either intentionally or unintentionally, resulting in a diminished sense of physical, mental, emotional, and/or spiritual well-being (Black & Stone, 2005).

CHAPTER 2

REVIEW OF THE LITERATURE

This chapter provides a review of the literature regarding the mission, history, and professional identity of both counseling and social work and the role of social justice advocacy in the helping professions. Currently, the counseling profession's identity has increasingly embraced social justice advocacy issues (Herlihey & Dufrene, 2011; Lopez-Baez & Paylo, 2009). Because social justice advocacy has been recognized as an identifying feature of the social work profession, its place as a major force in counseling continues to be uncertain (Mellin, Hunt, & Nichols, 2011). Therefore, it is the aim of this study to conduct a preliminary investigation of the distinguishing factors between a counselor identity that includes social justice advocacy and the role of a social worker. In order to envision where the profession is going, it is helpful to acknowledge where it has been.

Professional Identity of Counselors

Ancient Greek philosophy, spiritual shamanism, and early psychiatry are a few examples of how individuals have been compelled to understand themselves on both an intra- and interpersonal level. Counseling began as a career-focused guidance practice and has emerged to what is now a nationally recognized occupation with a variety of specialties (ACA, 2013). While individuals have attempted to understand and help each other for centuries, the practice of counseling has evolved into an organized profession within the last 100 years. Given this context the field of counseling is appropriately contextualized as being in its adolescence and striving to establish a solid identity.

Today the most current definition of counseling is stated as, “a professional relationship that empowers diverse individuals, families, and groups to accomplish mental health, wellness, education and career goals” (ACA, 2013; Shallcross, 2013). Furthermore, “counselors work with clients on strategies to overcome obstacles and personal challenges that they are facing” (ACA, 2013). The American Counseling Association (ACA) (2005) stated its mission is “to enhance the quality of life in society by promoting the development of professional counselors, advancing the counseling profession, and using the profession and practice of counseling to promote respect for human dignity and diversity” (p. 2). The current definition of counseling has been years in the making and was developed by a committee called the 20/20 initiative (ACA, 2013).

As described by Kaplan and Gladding (2011), the 20/20 initiative is an ACA committee tasked with strengthening and unifying the counseling profession. This committee is comprised of delegates from each division of ACA to discuss issues of professional identity for counselors. The initiative was dubbed “20/20” in the hope that the vision for counseling in the future will become a reality by the year 2020. Inconsistent licensure regulations incited the American Association of State Counseling Boards (AASCB) to initiate the 20/20 endeavor. These inconsistencies have been a major roadblock in AASCB’s mission to “establish licensing, develop common standards, and nationwide portability of licenses” (American Association of State Counseling Boards, 2013).

The delegates of the 20/20 initiative agreed upon specific areas of concern regarding the advancement of the counseling profession, including “strengthening identity, presenting ourselves as one profession, improving public perception/recognition

and advocating for professional issues, creating licensure portability, expanding and promoting the research base of professional counseling, focusing on students and prospective students, [and] promoting client welfare and advocacy” (Kaplan & Gladding, 2011, p. 369). This initiative was considered a necessary catalyst for passing legislation, such as licensure portability, to benefit counselors and their clients. By having a national counseling license recognized as part of a unified profession, as is social work and psychology, legislation supporting insurance parity could be made possible. This type of legislation is important to ensure clients have access to mental health treatment and counselors have access to fair reimbursement for their services (World Health Organization, 2005).

Further addressing the contemporary professional counseling identity, Shallcross (2013) interviewed a group of leaders in the field of counselor education. Through slightly different lenses, they each emphasized the importance of being able to articulate one’s identity as a counselor. A common theme was the discussion of ACA’s 20/20 initiative. Orientations to wellness, multiculturalism, career, and client-as-expert were noted as defining features of the counseling profession. However, most acknowledged other helping professions as claiming these orientations as well. Most notably, the interviews highlighted the growing concern for lack of clear training requirements and licensure. The delegates of 20/20 hoped to resolve this issue at the 2013 ACA conference in Cincinnati (Shallcross, 2013), but they were unable to reach resolution on streamlined educational requirements (Rollins, 2013). They were, however, successful in reaching consensus on the scope of practice for counseling as well as an official cohesive licensure title, “Licensed Professional Counselor.”

Mission and History

Many authors have considered Frank Parsons' development of career guidance counseling to be the moment of conception for the counseling profession (Briddick, 2009; Gladding, 2012; Nassar-McMillan & Niles, 2011; O'Brien, 2001). During the Industrial Revolution, many young men, who might have followed in their father's footsteps, suddenly had a wide variety of other options. As the growing population was faced with an unprecedented and overwhelming number of opportunities, Parsons saw a need for a helping profession focused on career decisions rather than pathology. In response to this growing concern, Parsons created a model for career counseling which began in settlement houses for immigrants and later made its way into the school system (Gladding, 2012; O'Brien, 2001). Since then, the process of counseling has been adapted to a broad array of specialties, such as mental health, marriage and families, gerontology, and addictions (ACA, 2013).

World War II was another pivotal moment for counseling (Gladding, 2012). While vocational counseling remained a concern, the focus shifted away from men to women joining the workforce to replace a large portion of working men who had gone to war. However, the most notable transition was a shift of emphasis in counseling from vocational guidance to mental health and well-being when the government began implementing programs to provide shell-shocked soldiers with counseling upon returning home from combat (Gladding, 2012). The resulting government funds motivated counselor education and training programs to shift away from the profession's roots in career development and begin offering curriculum aligned with the needs of the country at that time, which was to treat returning war veterans.

Subsequently, professional associations and divisions were formed, the National Defense Education Act (NDEA) was passed, and various counseling approaches and theories continued emerging (Gladding, 2012; Nassar-McMillan & Niles, 2011). The original American Counseling Association was founded in 1952, at the time known as a small interest group named the American Personnel and Guidance Association (APGA). During this time the NDEA, the cold war, and the school-aged baby boomers all converged to advance the school counseling movement. The number of school counselors significantly increased, and the American School Counselor Association (ASCA) was formed and integrated into APGA. Consequently, APGA was fortified by the increase in members and diversity from ASCA (Gladding, 2012). Parallel to APGA's emergence and growth, some psychologists became interested in moving away from the pathology paradigm of clinical psychology to work with clients from a developmental and humanistic approach. Eventually, counseling psychology emerged as a distinct division in the American Psychological Association (APA) (Whitely, 1984). Although the counseling profession distinguishes itself from psychology, the creation of the APA Counseling Psychology Division played an integral role in moving the counseling profession forward (Gladding, 2012).

According to Gladding (2012), the developmental focus in counseling faded into the background during the 1960's as society was captivated by the social consequences of the Vietnam War, civil rights movement, and women's movement. The resulting legislation, such as the Civil Rights Act, Title IX, and affirmative action, required counselors in the 1970's to attend to diversity and thus ignited the professions eventual commitment to multiculturalism. A co-occurring altering event for the counseling

profession was the psychology licensing boards excluding counselors from obtaining licensure. However, the counseling profession was not to be deterred as APGA responded by forming a licensure committee specifically for counselors. Beginning with Virginia in 1976 and ending with California in 2010, each of the 50 states now recognize licensure for professional counselors (Gladding, 2012). However, licensure portability remains elusive (Kaplan & Gladding, 2011).

The 1980's were a pivotal decade as the counseling profession moved towards establishing itself as a distinct profession. According to Gladding (2012), regulating the training and certification standards for counselors was the next logical move after professional licensure was established. In 1981, the Council for Accreditation of Counseling and Related Educational Programs (CACREP) was formed as an affiliate of APGA, and by 1987 was part of the Council of Postsecondary Accreditation, lending more power to not only CACREP, but also the entire counseling profession. Moreover, the National Board for Certified Counselors was created during this time and continues to a national certification for counselors. In addition to standardizing counselor education and certification, APGA's name was changed to the American Association for Counseling and Development (AACD) in an effort to better communicate the organization's mission for the profession at the time (Herr, 1985).

Critical incidents in the progression of the counseling profession continued occurring throughout the 1990's. Gladding (2012) noted AACD underwent another name change to the American Counseling Association (ACA), with the recurring intent of accurately representing the professional organization's mission. The profession-wide conversation about multicultural counseling in a pluralistic society began to gain traction

(Weinrach & Thomas, 1998), and the Multicultural Counseling Competencies (Arredondo, Toporek, Brown, Jones, Locke, et al., 1996) were eventually embraced by ACA and infused into the ACA (2005) Code of Ethics. Thomas (1996) also indicated a resurgence of ecological considerations in counseling about mental health during that time.

The counseling profession continues to adapt to an ever-changing society. Issues of violence, trauma, and crisis have come to the forefront of counseling research and practice in response to increased gun violence, terrorist attacks, wars, and natural disasters (Gladding, 2012). Managed Care has also surfaced as an area of concern for the counseling profession. He also noted while service providers are being held more accountable, managed care models tend to oversimplify counseling and disregard the complexity of client/treatment compatibility. Daniels (2001) pointed out a number of ethical issues created by managed care surrounding conflicts of interest. Gladding (2012) highlighted other areas of emerging interest in the counseling profession, including wellness, social justice and advocacy, technology, leadership, and identity.

Evolution of the Forces

According to Ratts (2009), theory plays an integral part in counseling practice. While counseling began as practical guidance (Gladding, 2012; O'Brien, 2001), the profession has morphed into a practice of art and science grounded in theory. Four distinct theoretical paradigms have evolved as the guiding forces in counseling practice: psychodynamic, cognitive-behavioral, existential-humanistic, and multiculturalism (Ratts, 2009; Daniels, 2007; Pedersen, 1991). Counseling theory functions as a means to

understanding the nature of people and maladjustment, the counseling relationship, and effective interventions (Ratts, 2009).

Psychodynamic.

The first of the four forces is psychodynamic. Freud is often cited as the father of psychology due to his development of psychoanalysis (Corey, 2012; Sharf, 2011; Seligman & Reichenberg, 2013; Sommers-Flanagan & Sommers-Flanagan, 2012).

Through the lens of psychoanalysis, the nature of a person is best understood as pleasure seeking and pain avoidant. Personality is the expression of three elements. These three elements of personality are known as the id, a hedonistic force, the super ego, a suppressive force, and the ego, a balancing force. Furthermore, the human psyche is compared to an iceberg in that the aware consciousness is the tip of the iceberg, and beneath the surface is the larger unconscious. The unconscious includes memories, repressed desires, as well as primal urges and instincts. The layer of water around the iceberg represents the preconscious. Elements of the unconscious move in and out of awareness through the preconscious. In addition to personality and psyche, the psychoanalytic theory of psychosexual development is the basis for understanding the nature of maladjustment and includes 5 linear stages: oral, anal, phallic, latent, and genital. These stages begin at birth and are accomplished by adolescence. If significant stress or trauma occurs during any of these stages, then maladjustments will manifest in adulthood.

Moreover, the counseling relationship is characterized as distant and sterile, with a distinct power differential. The counselor, more aptly described as an analyst, becomes a blank screen for the client to project, or transfer, his or her unconscious. Traditionally,

the client faces away from the analyst so as not to pollute the transference process with interpersonal contact. The analyst is mostly silent while the client is the active agent in a psychoanalytic session. Some interventions deemed effective in this approach include, free association, dream interpretation, analysis of transference, and exploration of childhood events and parental relationships. The goal of psychoanalysis is to enable the client to make healthier choices by bringing the unconscious into awareness and strengthening the ego.

Cognitive-behavioral.

The second of these counseling forces is the Cognitive-Behavioral paradigm. According to a number of counseling scholars (Corey, 2012; Sharf, 2011; Seligman & Reichenberg, 2013; Sommers-Flanagan & Sommers-Flanagan, 2012), Albert Ellis and Aaron Beck are credited with the commencement of the cognitive-behavioral paradigm. Ellis's approach called Rational Emotive Behavioral Therapy (REBT) was a highly directive approach with little emphasis on the counseling relationship. Beck's more collaborative and personable approach became known as Cognitive Therapy (CT). Through a CBT lens, the nature of a person is understood through internal thought processes, and individuals' feelings and behaviors are a result of their thoughts and perceptions. Maladjustment occurs when these thoughts and perceptions become distorted and unhelpful. The counselor's role in the therapeutic relationship vacillates between teacher and collaborator. The goal of counseling is to shift one's thought processes towards more helpful and realistic patterns. Cognitive-behavioral oriented counselors facilitate this shift through techniques such as questionnaires, Socratic dialogue, role-play, thought records, and manual-based treatments. As an Evidenced

Based Practice (EBP), Cognitive Behavioral Therapy (CBT) is one of the most widely used approaches in counseling due to its extensive empirical support. Because of the movement toward Managed Mental Health Care, counselors are encouraged to use EBP's in order to be reimbursed by insurance providers, and as a result, many counseling service providers have implemented CBT (Wilcoxon, Magnuson, & Norem, 2008).

Existential-humanistic.

The existential-humanistic paradigm is the third counseling force. As many authors have noted (Cain, 2001; Corey, 2012; Sharf, 2011; Seligman & Reichenberg, 2013; Sommers-Flanagan, 2012), Victor Frankl's experience in Nazi Germany's concentration camps was the catalyst for existential philosophy, an underpinning of humanism. Carl Rogers is recognized as the pioneer in humanistic counseling. Within the existential-humanistic paradigm, people are conceptualized as naturally inclined to strive to their full potential while actively making meaning in life (Cain, 2001). Individuals are not a product of life circumstance and are instead active agents in making choices and creating their own reality. In contrast to the psychodynamic and cognitive-behavioral lenses, humans are viewed as whole beings, and maladjustment results from a refusal or inability to become one's authentic self. The therapeutic relationship is characterized as empathically nurturing, and usually involves unconditional positive regard for the client. The goal of existential-humanistic counseling is left to the client to decide, but generally involves moving toward a sense of congruence and self-actualization. No prescribed interventions are used in this paradigm. Instead, change is facilitated through the therapeutic relationship.

Multiculturalism.

Although individual counselors vary, the counseling profession has traditionally endorsed individualistic theoretical models. Beginning in the early 1990's, the profession has embraced multiculturalism as a major tenet in counseling (Arredondo, Toporek, Brown, Jones, Locke, et al., 1996; D'Andrea & Heckman 2008; Hil, 2003; Pedersen, 1991; Sue, Arredondo, & McDavis, 1992). Pedersen (1991) was among the first to posit multiculturalism as a necessary force in counseling as a response to a multicultural society. Pedersen argued for multiculturalism as a common method of counseling, rather than a tool for navigating our work with unusual clients.

Sue, Arredondo, and McDavis (1992) also helped blaze the trail for multiculturalism in counseling by publishing a noteworthy article calling to the profession with specific multicultural counseling competencies and standards. Those standards have since been endorsed and implemented by the American Counseling Association. An especially striking part of Sue's et al. (1992) work sums up the meaning of multicultural counseling:

A culturally skilled counselor is one who actively attempts to understand the world-view of his or her culturally different client without judgments. It is crucial that counselors understand and share the worldviews of their culturally different clients with respect and appreciation. This statement does not imply that counselors have to hold the worldviews as their own, but can accept them as another legitimate perspective. (p. 481)

The contribution of Sue, Arredondo, and McDavis (1992) to the field was regarded as so pivotal it was published in two separate journals so it could be widely accessed by

as many professionals as possible. According to Sue et al. (1992), this article was an urgent push to eradicate major deficiencies in the American Association for Counseling and Development (AACD), currently the American Counseling Association (ACA), Code of Ethics. Sue et al. presented evidence and reasoned about contemporary trends of increased cultural diversity and a need for the profession to remain relevant by implementing multicultural competency.

Furthermore, Sue et al. (1992) indicated while current practice was a major area of concern, research, education, and training were also culturally biased areas in need of improvement. Upon outlining 31 areas of competency, Sue et al. proposed that the helping profession promptly and enthusiastically apply these competencies as ethical and academic standards. Sue et al. end on a powerful statement, “Continuing to deny [multiculturalism’s] broad influence and importance is to deny social reality” (p. 483).

Currently endorsed by the ACA (2005), Arredondo, Toporek, Brown, Jones, Locke, Sanchez, and Stadler (1996) operationalized Sue et al.’s call to the profession for multicultural competencies and standards. Arredondo et al.’s (1996) multicultural counseling competencies are infused throughout the ACA (2005) Code of Ethics and continue to be at the forefront of professional counseling practice however have recently been criticized as not being empirically based (Hunsacker, 2011).

It should be noted the evolution of the forces has not been a linear shift from one philosophy to the next. Presently, each of the aforementioned theories continues to be utilized by practicing counselors. Some counselors align with a single counseling theory, while many practitioners claim to be eclectic by using a variety of elements from each theoretical perspective.

Professional Identity of Social Workers

According to Miller (2013), professional identity is an evolving area of interest for the field of social work. In addition, professional socialization was overtly addressed in the recently revised *Educational Policy and Accreditation Standards (EPAS)* (Council on Social Work Education (CSWE)). The standards put forth by CSWE (2008), the accrediting body for social work programs, indicated, “the purpose of the social work profession is to promote human and community well-being. Social work’s purpose is actualized through its quest for social and economic justice, the prevention of conditions that limit human rights, the elimination of poverty, and the enhancement of the quality of life for all persons” (p. 1). However, Miller (2013) noted many practicing social workers do not perceive social justice as central to their professional identities, especially those interested in private practice (and most are) according to the National Association of Social Workers (2006).

Social work and counseling’s core educational requirements significantly overlap. Social work’s core competencies diverge by requiring action at the social policy level, while counseling is set apart with a career development competency (CACREP, 2009, CSWE, 2008). Despite the aforementioned differences, the two disciplines call for nearly identical core competencies for program accreditation. Both CACREP (2009) and CSWE (2008) expect from students the ability to develop and sustain therapeutic relationships in various settings, commitment to research, knowledge of current assessment practices, and celebration of diversity and social justice, all demonstrated with ethical comportment. CSWE (2008) expounded on the differing core area of policy action with the following statement, “social work practitioners understand that policy

affects service delivery, and they actively engage in policy practice. Social workers know the history and current structures of social policies and services: the role of policy in service delivery, and the role of practice in policy development. Social workers analyze, formulate, and advocate for policies that advance social well-being and collaborate with colleagues and clients for effective policy action” (p. 6).

Furthermore, CSWE’s (2008) core of shaping practice in response to contexts is similar to the program evaluation piece of CACREP’s (2009) research and program evaluation standard. However, social work’s standard differs by responding not only at the program and community levels, but also to “societal contexts at all levels” (p.6). Social workers also “provide leadership in promoting sustainable changes in service delivery and practice to improve the quality of social services” (p. 6), whereas counselors do not. Suffice it to say, the differences between counseling (CACREP) and social work (CSWE) core curriculum requirements have little to do with social justice advocacy. Figure 1 illustrates the differences in educational standards between counselors and social workers.

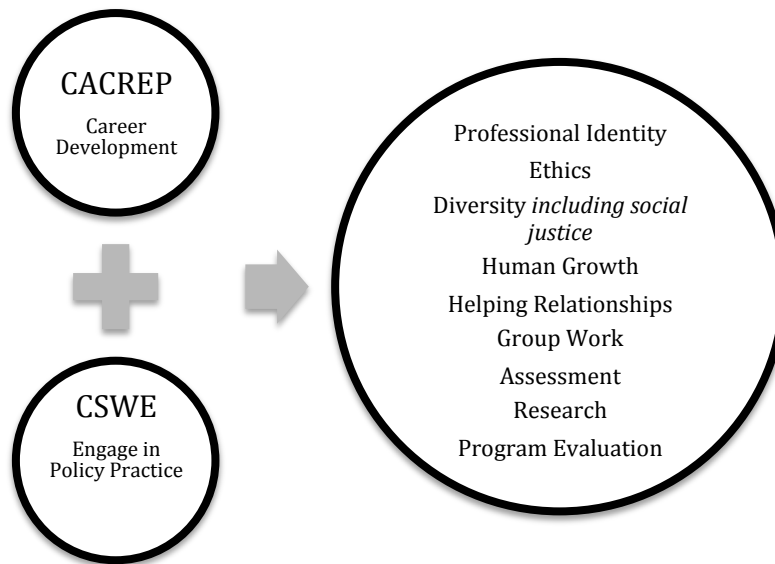


Figure 1. Comparison of educational standards. This figure compares and contrasts the educational standards of the Council for Accreditation of Counseling and Related Educational Programs and the Council on Social Work Education. The standards listed in the large circle on the right are shared by both organizations.

Mission and History

Social work has been commonly identified as the go-to profession for social justice activism (Smith, Reynolds, & Rovnak, 2009; Mellin, Hunt, & Nichols, 2011; Silverman, 2012), but that was not always the case. According to Murdach (2010), the profession was originally practiced as an individual and personalized form of altruism. Mary Richmond founded social casework in the 1890's as a way to help individuals one-on-one. However, in the early 1900's, the social work profession took a turn toward mass improvement by means of radical social activism at the national level. The social work profession began to be associated with the American political movement known as progressivism, and much of the Progressive Party platform of 1912 was created by social workers. This platform was a response to the ramifications of the American

industrialization and expansionism, such as growing poverty and corporate greed paired with an apathetic government (Murdach, 2010). The Progressive Party platform of 1912 embodied many contemporary values of the social work profession. For example, the platform indicated goals such as equal suffrage, workers' rights to organize, governmental protection and conservation of natural resources, a national health plan, healthier agriculture, arbitration instead of war, and an equitable immigration policy (Shannon, 1966). The Progressive Party platform goals aligned with social work values of social justice and human rights (Murdach, 2010).

However, Murdach (2010) noted not all social workers agreed upon the progressive paradigm shift in the profession. "Social reform-oriented social workers even began to belittle what they saw as the individualistic focus of their casework colleagues" (Murdach, 2010, p. 84). The social work profession was divided into two camps until the late 1920's when the profession came together to face the economic and social crisis of the Great Depression. Social workers began to infiltrate government positions (e.g. Federal Emergency Relief Administrator, Secretary of Labor) and thus were able to influence the New Deal legislation. Consequently, the progressive agenda gained traction in the social work profession, and despite the political party eventually fizzling out, progressive social work continued on into the Civil Rights Movement of the 1960's (Murdach, 2010).

Murdach (2010) pointed out social work moved away from more progressive policies in the early 1970's and has continued to maintain status quo. Miller (2013) found being more immersed in the social work profession (i.e. education, practice), was associated with less dedication to social justice. Conversely, a social justice emphasis in

the classroom and relationships with clients were two factors correlated with integrating social justice values into professional identity. Those who lacked a social justice orientation were more likely to do policy and research related work (Miller, 2013). This evidence may suggest social work is cycling back to where it started a century earlier.

Murdach (2010) concluded social work does not have a definitive tradition or culture of progressivism, but she noted the essence of progressivism permeates professional social work's mission and values. Osteen (2011) highlighted an academic emphasis on multiculturalism, ecology, humanism, and social justice as the defining features separating social work from other helping professions. Meanwhile, Osteen's research results indicated practicality of the program to be a prominent reason for clinical social workers to choose an MSW over other helping profession degrees. "Some are becoming social workers as an 'easy to get' private counseling degree and are not thinking so much about helping clients or changing the world" (Osteen, 2011; p. 438).

Codes of Ethics

Currently ACA's mission is "to enhance the quality of life in society by promoting the development of professional counselors, advancing the counseling profession, and using the profession and practice of counseling to promote respect for human dignity and diversity" (ACA, 2005, p. 2). The National Association of Social Workers (NASW) Code of Ethics (2008) has attempted to distinguish the social work profession by stating "A historic and defining feature of social work is the profession's focus on individual wellbeing in a social context and the wellbeing of society" (p. 2). Furthermore, "Social workers promote social justice and social change with and on behalf of clients" (p. 2). In comparison, The Counselors for Social Justice (CSJ) Code of

Ethics (2011) stated, “CSJ professionals assume the ethical responsibility to address these factors by providing counseling and advocacy services either with or on behalf of the clients/students with whom they work” (Code A: Counseling Practice/Advocacy). Lewis, Arnold, House, & Toporek (2003) outlined specific competencies for counselors advocating on behalf of clients. Moreover, many similarities exist between the codes of ethics of ACA, CSJ, and social workers. More specifically, CSJ’s and Social Work’s codes of ethics share nearly identical values, principals, and guidelines for practice (see Table 1). Herlihy & Remley (1995) examined the multiple ethical standards for professional counselors and inferred the standards, “are redundant, lack completeness, and sometimes conflict with one another” (p. 132).

Table 1

Comparison of Ethical Codes

American Counseling Association (2005) <i>Code of Ethics</i>	Counselors for Social Justice (2011) <i>Code of Ethics</i>	National Association of Social Workers (2008) <i>Code of Ethics</i>
Values		
Not explicitly addressed	1. social justice	1. service
	2. social action	2. social justice
	3. eradication of all forms of abuse and oppression	3. dignity and worth of the person
	4. dignity and worth of all persons	4. importance of human relationships
	5. embracing diversity	5. integrity
	integrity and competence	competence
Social Justice		

Not explicitly addressed	“[CSJ] professionals work to create an equitable and fair social system.”	“Social workers pursue social change, particularly with and on behalf of vulnerable and oppressed individuals and groups of people.”
Primary Goal or Responsibility		
“The primary responsibility of counselors is to respect the dignity and to promote the welfare of clients.”	“Activism is a part of the social justice-oriented counselor’s personal and professional identity development.”	“Social workers’ primary goal is to help people in need and to address social problems.”
Advocacy		
“Counselors advocate to promote change at the individual, group, institutional, and societal levels that improve the quality of life for individuals and groups and remove potential barriers to the provision or access of appropriate services being offered.”	“It involves increasing awareness and knowledge of social justice issues through advocacy and social actions that address mental and physical health issues and crises that people experience as a result of oppression”	“Social workers seek to strengthen relationships among people in a purposeful effort to promote, restore, maintain, and enhance the wellbeing of individuals, families social groups, organizations, and communities.”
Dignity and Worth		
Association members recognize diversity and embrace a cross-cultural approach in support of the worth, dignity, potential, and uniqueness of people within their social and cultural contexts.”	“Convey respect for the dignity and worth of one’s clients/students” through culturally appropriate assessment, diagnosis, and therapeutic approaches.”	“[Social workers] seek to resolve conflicts between clients’ interests and the broader society’s interests in a socially responsible manner.”
Diversity		

“A capacity whereby counselors possess cultural and diversity awareness and knowledge about self and others, and how this awareness and knowledge is applied effectively in practice with clients and client groups.”	“Accurately identifying the strengths and challenges of culturally-diverse clients/students as well as the communities in which they are situated.”	“Social workers should obtain education about and seek to understand the nature of social diversity and oppression with respect to race, ethnicity, national origin, color, sex, sexual orientation, gender identity or expression, age, marital status, political belief, religion, immigration status, and mental or physical disability.”
Competency		
“Counselors gain knowledge, personal awareness, sensitivity, and skills pertinent to working with a diverse client population.”	“This implies not going beyond their training/education and commits them to continue education and professional development activities to learn ways to more effectively confront issues of oppression and social injustice at the micro and macro level.”	“Social workers practice within their areas of competence and develop and enhance their professional expertise.”

Social Justice

Bell (1997) explained the meaning of social justice extends beyond the idea of justice as it is defined in the context of upholding the law and the right to due process. Social justice encompasses issues that impact all human beings at many levels, from individual discrimination to international inequality. Social justice issues are best described as inequity between power and oppression as a result of longstanding institutional prejudices. Racism, classism, sexism, ageism, ableism, heterosexism, and any other types of bigotry imposing on a human being's quality of life are issues that

proponents of social justice seek to ameliorate (Bell, 1997). Chung and Bemak (2012) pointed out social injustices can manifest both overtly and covertly. A hate crime is an example of an overt manifestation of social injustice, while the income gap between women and men is an example of covert social injustice. By emphasizing multiculturalism for the past two decades, the counseling profession has acknowledged the influence of social issues on mental health and has moved into a new era of activism (Ratts, 2009). Several authors have suggested the profession embrace social justice and advocacy as the fifth force, a stance supported by the ACA (Chung & Bemak, 2012; Pack-Brown, Thomas, & Seymour, 2008; Ratts, 2009). Accordingly, Advocacy Competencies endorsed by the ACA and the ACA division of Counselors for Social Justice (CSJ) have emerged (Lewis, Arnold, House, & Toporek, 2003; Counselors for Social Justice, 2011).

Defining Social Justice

Crethar, Torres Rivera, and Nash (2008) propose four essential facets of social justice counseling: equity, access, participation, and harmony. First, equity is defined by Crethar et al. (2008) as “fair distribution of resources, rights, and responsibilities to all members of society” (p. 270) and need not be confused with equality. Equality would assume the same standards be applied to all persons at all times, whereas equity considers the individual within context. For example, children are not treated equally with adults. Equity for children is best illustrated by consideration of age and developmental level, such as 6 year olds are not asked to join the workforce, drivers licenses are not issued to 8 year olds, 15 year olds are not permitted to vote in political elections, and age restrictions on the purchase of cigarettes and alcohol are enforced. While children are not granted

adult rights, they are also not burdened with adult responsibilities. The principle of equity can be extrapolated to other groups, such as individuals of low socioeconomic status (SES), non-English speaking immigrants, and differently abled individuals. Providing a sliding scale, arranging to have an interpreter, and installing handicap accessible doors to the counseling office are many ways counselors already provide equity in their practice of social justice counseling. Lewis, Lewis, Daniels, and D'Andrea (2003) ask counselors to take social justice counseling further by advocating to ameliorate inequity within the client's larger social milieu. Lee and Rodgers (2009) illustrated this in their vignette of Deamonte, a young African American boy from a single-parent household of low socioeconomic status who died from a toothache. His Medicaid coverage had temporarily lapsed, and by the time he was able to see the doctor, the bacteria from the infected tooth had spread to his brain and eventually killed him. Lee and Rodgers acknowledged the counselor would initially intervene with the family on an individual level through grief counseling. The authors also described in detail how the counselor would also begin advocating for equitable dental policies for children by forming alliances with stakeholders and lobbying legislators for policy change.

The second principle of social justice counseling is access. Access refers to the ability to obtain the necessary tools needed to reach one's full potential (Crethar et al., 2008). Lewis et al. (2003) imparted how deprivation of access has been shown to adversely impact the wellbeing of vulnerable clients. Counselors who focus on clients through individualistic theoretical lenses will likely help clients cope with the stressful consequences of lacking access; thereby unintentionally acting to perpetuate and sustain an oppressive system where some are allowed to self-actualize and others must learn to

deal without (Sue, Ivey, & Pedersen, 1996). Instead, counselors may affect more change by empowering their clients to gain access to the necessary tools needed to self-actualize, such as housing, healthcare, and education. Counselors decide what interventions will provide the most benefit to our clients. Treating the symptoms will likely be on the treatment plan, but counselors can also add social and political advocacy as effective interventions (Lewis, Arnold, House, & Toporek, 2003). Although many practitioners may argue the roles and functions of professional counseling do not encompass problem solving, Chung and Bemack (2012) countered it may be helpful. The authors argued a maladaptive environment could undo much of the therapeutic work achieved in the counseling session. Chung and Bemack “strongly assert that it is our moral, social, and ethical responsibility to more directly address these issues in a proactive manner, rather than ignore larger contextual issues that affect our clients’ psychological well-being” (pp. 30-31). This may pose a dilemma of choosing between the possible risks of developing a dual relationship and/or fostering an unhealthy dependence by becoming too involved in the client’s life or inadvertently causing harm to the client by neglecting to intervene at the root cause of the client’s despair.

Participation is the next aspect of social justice counseling highlighted by Crethar et al. (2008). Participation refers to a person’s right to be involved in matters concerning his or her life, family, and social context. Voting rights are a clear example of participation. Crethar et al. provided an example of a time when women and people of color were not allowed to vote in the United States, when land-owning white men were the only people deemed worthy of having voice and influence on society. Although only white men were voting, the decisions affected everyone. Even after equal voting rights

have been put in place, unfair laws have been passed to inhibit certain classes of people from full participation in voting, such as literacy tests, poll taxes, and currently some have argued voter identification laws (Crethar et al., 2008). The authors underscore the relevance of counseling by denoting a lack of participation could foster a sense of alienation and learned helplessness within affected communities.

The last element of social justice counseling Crethar et al. (2008) discussed is harmony. Harmony is each person's rights and privileges aligning with the greater good of humanity. If the aspirations of a single person or group infringe upon the welfare of others, those aspirations must be redirected to avoid harm to and promote "a more harmonious environment that reflects respect for the common good." For example, some policy makers may favor significant spending cuts on social welfare programs impacting health care, community service and development programs, education, and transportation. However, this kind of legislation might cause significant harm to some living in the United States, many of whom may be clients of professional counselors.

Freire (1993), a pioneer of the social justice movement, surmised privilege cannot exist without oppression, and oppression hurts everyone because it dehumanizes not only the oppressed, but also the privileged. He speculated people live so deeply submerged in a world of privilege and oppression it becomes difficult to see. These toxic dynamics are seen as simply the way the world is. He suggested if one wants to change the injustices caused by privilege and oppression, then one must help change the system by joining with and fighting along side the oppressed. He contended when joining the fight against social injustice, empowerment must be offered to the oppressed, rather than pity and charity. Freire also postulated false generosity serves to deepen dependence on the

system, thereby perpetuating inequity. Oppression is fought, not by oppressing the oppressor, but by restoring everyone's humanity. Oppression is tangible and real, still many will deny this reality by "seeing it differently" (Freire, 1993, p. 52). Raising critical consciousness is most effectively done by dialoguing rather than lecturing. "The pedagogy of the oppressed, animated by authentic, humanist (not humanitarian) generosity presents itself as a pedagogy of humankind" (Freire, 1993, p. 54).

Social Justice in Counseling

Multiple authors have highlighted the ways in which social justice advocacy has been the humanistic heartbeat of counseling, pulsing since the profession's inception in the early 1900's (Ratts, 2009; Kiselica & Robinson, 2001; Parry, 2010; Smith, Reynolds, & Rovnak, 2009). Kiselica and Robinson (2001) noted Clifford Beers as an influential advocate within his time. In his autobiography, *A Mind That Found Itself: An Autobiography*, Beers exposed the inhuman conditions endured by mentally ill persons who sought treatment in psychiatric facilities during the early 1900's. This exposure was the catalyst for the Mental Hygiene Movement, a national mental health reform aimed at removing stigma, promoting prevention, and ensuring high standards of care in mental health (Kiselica & Robinson, 2001; Parry, 2010). Another pioneer was Frank Parsons. He initiated counseling as a profession through his advocacy efforts to help immigrant families integrate into the industrialized workforce (Kiselica & Robinson, 2001). In the 1930's, Horney confronted the psychoanalytic institution to examine how patriarchal society impacts the psychological wellness of females. Meanwhile, the utilization of culturally biased intelligence tests with minorities had also been challenged. Beginning in the 1940's, Carl Rogers, encouraged the use of counseling philosophies as an avenue

to tackle larger social concerns (Kiselica & Ramsey, 2000). During the 1970's, counselors were prompted to participate in social justice advocacy in various forms with the publication of a special issue in *The Personnel and Guidance Journal* that showcased articles urging counselors to act against social injustices (Smith, Reynolds, & Rovnak, 2009). Also during that time, a trend developed in counseling practice to move out of the office and into the community and political system (Lee, 1998). In the late 1980's, the American Association for Counseling and Development, now ACA, began promoting social justice advocacy in counseling at all levels (Lee, 1998). ACA eventually developed and endorsed counseling advocacy competencies (Lewis, Arnold, House, & Toporek, 2003). In addition, ACA has disseminated special issues dedicated to social justice in its flagship publication, *Journal of Counseling and Development*. This illustrative list reveals social justice advocacy as a foundational and fundamental value within the counseling profession.

Rationale for Social Justice Counseling

After ACA endorsed the multicultural counseling competencies (Arredondo & Toporek, 2004) and subsequently infused multiculturalism throughout the counseling Code of Ethics (ACA, 2005), ethical counselors have presumably been conceptualizing, intervening, and conveying empathy with multicultural awareness. However, many clients bring issues largely attributed to environmental stressors, such as institutional racism and sexism, yet counseling professionals continue to intervene with intra-psychic theory and techniques (Bradley & Lewis, 2000; Crethar, Torres Rivera, & Nash, 2008; Chung & Bemak, 2012). Consequently, when counselors ask clients to internally cope with externally imposed systemic oppression; the meta-message is likely one of blaming

the victim. Furthermore, counselors may unintentionally imply approval of an oppressive environment as normal (Crethar et al., 2008; Ratts, 2009). Ratts (2009) explained research shows oppression significantly impairs human growth and development. For example, a client may internalize the unfounded burden to cope with, rather than challenge, the oppressive environment propagating the unnecessary stress upon him, resulting in self-blame (Ratts, 2009). According to Roysicar (2008) Martin Luther King, Jr. addressed the American Psychological Association (APA) in 1967, and refuted the common practice of focusing on the individual's internal world with the intended outcome of adjusting to one's social context, which, at the time was blatantly oppressive to many individuals. King stated, "I am sure that we all recognize that there are some things in our society, some things in our world, to which we should never be adjusted" (Roysicar, 2009, p. 288).

Bradley and Lewis (2000) suggested social justice advocacy is an important element in all counselors repertoire of practice. Intra-psycho theories and approaches are certainly appropriate in many cases. However, the professional counselor holds the responsibility to determine when and how to intervene at the systemic rather than individual level (Ratts, 2009).

Criticism of Social Justice Counseling

While many professionals have embraced the social justice movement in counseling within the last decade, not everyone is enthusiastic (Hunsaker, 2011; Smith, Reynolds, & Rovnak, 2009). Not only are some counseling professionals less than enthusiastic about social justice in counseling, Hunsaker (2011) pointed out many practitioners are unaware of the movement due to exclusively academic leadership in

CSJ. In their critical analysis of the social advocacy movement in counseling, Smith, Reynolds, and Rovnak (2009) contested the social justice advocacy paradigm lacks solid theoretical support and empirical evidence, promotes a victim-based conceptualization of clients, discourages critical thinking on complex social issues, and infringes on some counselors' personal values and beliefs. Hunsaker (2011) illustrated an example of infringement of personal values when he highlighted a gatekeeping case in social work; a social work student refused to advocate for a gay individual stating it contradicted with her religious values. The student received remediation and was eventually dismissed, but not without a lawsuit. Hunsaker (2001) claimed the school oppressed the student with institutional power. This example also illustrated Smith et al.'s (2009) notion of how the social justice movement contradicts itself by perpetuating hidden agendas, self-promotion, elitism, and disenfranchisement of non-social justice counselors.

Furthermore, Hunsaker acknowledged that although Clifford Beers advocated humane treatment for the mentally ill and Frank Parsons advocated vocational guidance for immigrants, these two issues are directly relevant to the counseling profession while many other issues are not. He also explored the liberal political bias inherent in the social justice movement and indicated this bias may alienate politically conservative professional counselors who do not wish to advocate for certain issues, such as social welfare programs. Furthermore, Smith et al. voiced concerns about social justice in counseling challenging the defining features of professional counselor identity by shifting "away from historic roots of individual psychology and developmental counseling toward a sociological perspective more often reflected in the social work profession and literature" (p.485). Both Smith et al. and Hunsaker contended that the social justice

movement is acting as a divisive force in the counseling profession.

The ACA has recently surged to strengthen and unify the professional identity of counseling by clearly defining who counselors are, what they do, and how they do it (Kaplan & Gladding, 2011). The social justice advocacy movement in counseling has been rapidly growing in tandem with the ACA's push to solidify and clearly communicate a cohesive professional identity. A richer understanding about professional counselors' roles and functions will be achieved through exploring the synergy between the social justice and professional identity movements in counseling. This study is being conducted in an effort to help clarify and articulate counseling's unique professional identity in the midst of these two intersecting movements. One way to do this is through distinguishing the differences between social justice advocacy in counseling and social worker functions.

CHAPTER 3

METHOD OF PROCEDURE

Much of the literature from the last decade calls for social justice advocacy in counseling. However, some worry that such a strong push for social justice may undermine the American Counseling Association's (ACA) quest for strengthening and unifying the professional identity of counseling (Hunsaker, 2011; Smith, Reynolds, and Rovnak, 2009). Many practicing counselors understand social justice advocacy as more related to social work functions and do not see it as part of their professional identity (Mellin, Hunt, & Nichols, 2011; Hunsaker, 2011). As social justice advocacy and professional identity have emerged as increasingly hot topics in counseling, it becomes necessary to conduct empirical research investigating their connections and divergence. The purpose of this study is to consider a panel of experts' opinions and observations in distinguishing social justice advocacy in counseling from social work functions.

Research Questions

In order to uncover consensus among counselor educators with specialized knowledge in the realm of social justice advocacy in counseling regarding how it is distinguished from social work, the research questions guiding this study are as follows:

1. What are the beliefs of a panel of experts regarding how social justice advocacy is incorporated into counseling's professional identity in a way that is distinct from Social Work?
2. In which capacities, if any, can consensus of opinion be reached about distinguishing social justice advocacy in counseling from social work functions?

The Delphi Method

Advantages and Disadvantages of the Delphi Method

As with any research methodology, the Delphi method has advantages and disadvantages. Since the approach is grounded completely on expert opinion, its validity may be critically examined. The risk of researcher bias is especially salient for questionnaire development, panel selection, and response amalgamation (Linstone & Turoff, 2002; Yousuf, 2007). Stitt-Gohdes and Crews (2004) noted panelists' rigor towards and investment in the study could be negatively impacted by time constraints and other responsibilities. He also cautioned to considering the panel member's context, experience, and bias when making meaning of the results.

Notwithstanding these drawbacks, the Delphi method is a valuable and solid approach to scientific inquiry (Skulmoski, Hartman, & Krahn, 2007; Yousuf, 2007). It serves as a medium for expert panelists to directly collaborate on exploring a particular topic despite diverse perspectives and geographical constraints. The anonymity afforded by this approach helps eliminate psychological and social roadblocks, such as pressure to agree or disagree with other participants, often navigated in traditional committee discussions (Landeta, 2006). In the current study it is believed the Delphi method is appropriate for initial investigation into the differences between social justice advocacy in counseling and social work functions.

History and Overview of the Delphi Method

The Delphi method is a dynamic approach to group collaboration often used to answer intricate questions by a panel of experts (Brown, 1968; Linstone & Turoff, 2002; Stitt-Gohdes and Crews, 2004; Taylor-Powell, 2002). This research method is often

utilized when there is a dearth of research in a specific area or to pilot the construction of policy or theoretical frameworks (Linstone & Turoff, 2002; Stitt-Gohdes and Crews, 2004). The term “Delphi” originated in Greek mythology and refers to the Delphi Oracle, a chosen one on the island of Delphi who could predict the future. The research method itself was initially intended to systematically forecast future events (Yousuf, 2007).

According to Brown (1968), Norman Dalkey of the RAND Corporation developed the Delphi method for the U.S. Air Force as a means to inform military decisions concerning possible nuclear targets based on forecasts projected by experts. Eventually, other researchers began using the method to make predictions about science and technology (Linstone & Turoff, 2002). The Delphi method grew in popularity and has come to be utilized across a range of contexts, such as commercial industry, technology, health care, education, and counseling.

Dalkey’s original Delphi method involved the four crucial features: anonymity, iteration, controlled feedback, and statistical aggregation of group response; however, many investigators have successfully tailored the approach to accommodate individual study needs (Skulmoski, Hartman, & Krahn, 2007). While the Delphi method allows for flexibility in application, the basic mechanics of the approach provide structured, yet anonymous, communication between numerous experts in an effort to reach consensus on a specific issue. Each panelist answers an open-ended questionnaire, which is followed by an opportunity to respond to all individual answers using a Likert scale format. The iterative nature of this method affords participants a chance to elaborate on their ratings and possibly revise their opinion based on new viewpoints. The rounds of response and

feedback continue until consensus is achieved or it is determined that it cannot be achieved (Linstone & Turoff, 2002; Skulmoski et al., 2007).

Selection of the Delphi Panel

Yousuf (2007) noted creation of an appropriate panel of experts is the crux of any Delphi study's strength and validity. The researcher decides how to define who will qualify as an "expert" for the panel. Yousuf (2007) suggested panelists should be selected using clear criteria established according to the intention and context of the study. Because the Delphi process requires extensive involvement, participants' level of interest in the topic and ongoing study should be considered. Scheele (2002) suggested a split panel, containing both scholars and practitioners, could potentially fortify a successful study. However, a split panel would not be appropriate for this study given the literature indicated disconnection between academics and practicing counselors regarding the understanding and application of social justice in counseling.

In the current study, a panel of experts composed of counselor educators with expertise in the area of social justice advocacy will serve as research participants. For the purposes of this study, an expert will be defined in 3 areas: teaching, scholarship, and service. To be considered for this panel, prospective participants must meet the following three criteria: 1) currently holds employment and has at least 5 years experience as a faculty member in a CACREP accredited, or on track to become CACREP accredited, counseling program, 2) must be an author on five peer reviewed publications and/or first author on three peer reviewed publications relating to social justice advocacy in counseling, and 3) must have held at least one leadership position of a social justice capacity in a professional counseling organization. A minimum of five

years experience was chosen to demonstrate an additional level of experience contributing to expertness. Scholarship and service to the counseling profession are also considered in the selection of participants as they indicate a high level of knowledge and leadership in social justice advocacy. It is important to note these criteria will inherently target advocates for inclusion of social justice in counseling. Because this is an initial investigation into the distinguishing characteristics of social justice advocacy in counseling, those associated with the social justice movement in counseling will be allowed to define these characteristics. In order to have a productive critical dialogue about what distinguishes social justice advocacy in counseling from social work functions, it is important to put forth a clearly defined idea of these differentiating features.

Criterion based purposive sampling will be used to select contributors. When participants are chosen according to predetermined criteria, this nonprobabilistic approach is applied (Heppner, Wampold, & Kivlighan, 2012). For this study, prospective participants will be selected through a review of the literature after which individuals' credentials will be cross checked by comparing names to lists of board members from organizations with a focus on social justice advocacy as well as individual vitas when available. A list of potential participants will be created, and in collaboration with my committee chair, the individuals with the highest number of criteria will be selected.

The size of the panel is allocated to the discretion of the researcher. Taylor-Powell (2002) explained when the research question is broad and the experts are from various disciplines and perspectives, the heterogeneous panel should be as large as possible. In contrast, fewer participants are needed to consider a focused question with a

concentrated group of experts. Taylor-Powell (2002) suggested 10 to 15 participants are sufficient for a homogeneous panel. Because this study will focus on the specific population of counselor educators knowledgeable about social justice advocacy, a smaller panel of 10 will suffice. Prospective contributors will be contacted via email inviting their participation. The initial communication will encompass a description of the study, summary of procedures, and informed consent. Those who decide to participate will later be sent another email including directions for accessing the web based survey and a schedule for response times.

Development of the Delphi Instrument

The preliminary open-ended questionnaire developed for this study is designed to reflect elements of professional identity, social justice advocacy in counseling, and a comparison to social work functions. A small pilot study will be employed to ensure the questionnaire is easily understood and elicits the type of information desired. For the pilot study, two counselor educators will be asked to complete the instrument as if they are members of the expert panel so as to comment on the clarity of instructions, questions, and purpose. Feedback from the pilot study will be used to revise this instrument as necessary.

Data Collection

With the objective of gaining consensus among experts in a specific area of interest, the Delphi approach employs a methodical procedure consisting of multiple investigation rounds. Skulmoski, Hartman, and Krahn (2007) illustrated three rounds of data collection has typically been sufficient for data collection within the Delphi method (see Figure 2). However, they highlighted reaching consensus or statistical saturation

will ultimately determine when data collection is no longer needed. In this study, an expert panel of approximately 10 participants will be used. Panelists' expertise will be established by employment as a counselor educator in a CACREP accredited, or on track to become accredited, counseling program with at least 5 years experience, peer reviewed publications, and professional service of a social justice nature in a professional counseling organization.

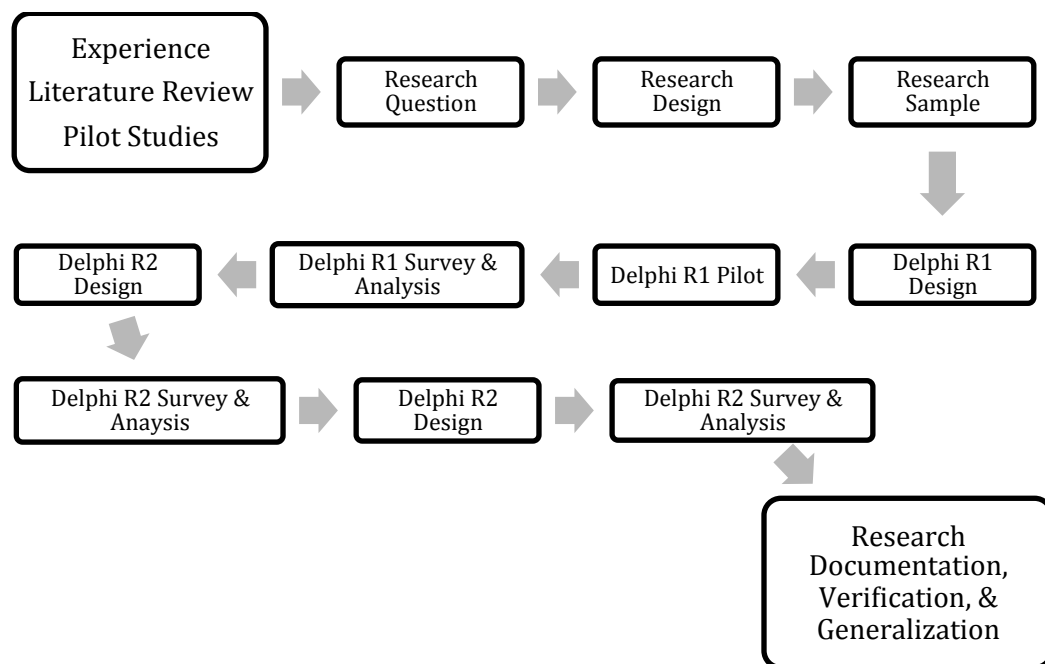


Figure 2. Three round Delphi process. This figure illustrates Skulmoski, Hartman, and Krahn's (2007) general guideline for implementing a Delphi study with three sequences of data collection.

In round one of data collection panelists will be sent an email summarizing the procedures of the study and directions regarding how to access the initial open-ended questionnaire. Data collection will be conducted entirely online through the use of Qualtrics, an online research company specializing in the construction of web based surveys for the social sciences (www.qualtrics.com).

In addition to the typical investigatory questions of who, what, when, where, how, and with what consequences, Corbin and Strauss (2008) pinpointed four types of questions to use in inquiry: sensitizing, theoretical, practical, and guiding. These types of questions address a general sense of what might be happening, how concepts relate to one another, if the concepts make sense, and where the concepts are headed, respectively. They also encouraged environmental and time-based questions to provide a broader understanding. In the current study, prudence will be exercised in the diction of the initial questionnaire and all correspondence with the panel. This will be done in an effort to decrease bias in the respondents' answers since it has been implied the researcher heavily influences how the panel interprets the process and the intent of the group (Scheele, 2002). The intent of this questionnaire will be to identify the experts' preliminary views on the issues of study. A reminder email reiterating how to access Qualtrics will be sent approximately one week after the first email and during each sequence of collection.

During the first round of analysis, the panelists' opinions will be ascertained. A comprehensive documentation of all responses to each item on the questionnaire will be generated. In an effort to promote trustworthiness, each response will be recorded verbatim to ensure the general spirit as well as nuance of each participant's answer will be accurately captured and conveyed (Wilhelm, 2001). The panel responses will then be presented to the participants as the second survey.

In the second round of the data collection, the participants will receive another email with instructions and a timeline for responding. This phase will provide panelists the opportunity to appraise all respondents' answers and to reconsider their own in light

of the other viewpoints represented. Evaluation will be made using a Likert scale rating system. Panelists will be asked to assess each response on a scale of one to five (1 – agree completely, 5 – disagree completely).

Analysis of participants' ratings will consist of organizing the data and compiling descriptive statistics for each item. The median and interquartile range for each item's Likert rating will be calculated as suggested in the Delphi literature (Garson, 2013; Keeney, Hasson, & McKenna, 2006). The median is a measure of central tendency and denotes the middle point on a frequency distribution with half the scores falling above and half the scores falling below the median (see Figure 2). The interquartile range (IR) identifies the level of consensus within a distribution of scores. It represents the middle half of responses on a frequency distribution (Tabachnick & Fidell, 2007). According to Kennan (2013), the interquartile range is found by locating the first quartile (Q1) and third quartile (Q3) using the following formulas: $Q1 = (N+1)/4$ and $Q3 = 3*(N+1)/4$ where N is the number of responses. Q1 is then subtracted from Q3 to determine the interquartile range: $Q3 - Q1 = IR$ (Kennan, 2013). A small interquartile range indicates a higher consensus and a large interquartile range indicates a lower consensus.

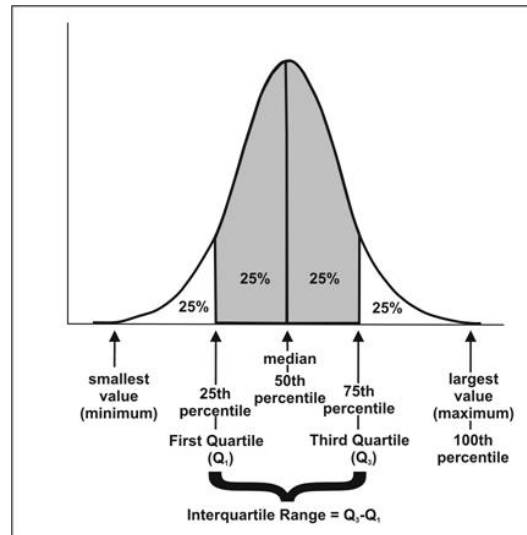


Figure 3. Median and interquartile range. This figure illustrates how level of consensus will be found using the interquartile range.

During the third round of data collection, panelists will be sent another email with a timeline for responding and instructions on how to access the questionnaire. Each item and its' statistical information will be included on this questionnaire. Panelists will again be asked to evaluate responses and reassess their own in light of the statistical information presented. According to Delphi method procedures, panelists whose responses received an extremely low level of consensus will be given the opportunity to explain their stance.

Consensus in a Delphi study can be identified by various techniques, such as a predetermined percentage of inclusion items or the use of the interquartile range.

Tabachnick and Fidell (2007) recommended the median and interquartile range as most appropriate to use when the data include extreme scores, skewed distributions and/or are measured on an ordinal scale. Furthermore, the median and interquartile range is a suitable measure with small groups (Tabachnick & Fidell, 2007). In accordance with the

Delphi literature (Garson, 2013; Rayens & Hahn, 2000) this study will use the median and interquartile range to discover the level of consensus.

No standard exists for defining consensus in Delphi studies (Keeney, Hasson, & McKenna, 2006; Powell, 2002; Rayens & Hahn, 2000). In congruence with other Delphi inquiries and the existent writings surrounding the Delphi approach (Anderson, 2004; Hendrix, 2005; Raskin, 1994; Rayens & Hahn, 2000; Spinelli, 1983; Wilhelm, 2001), an interquartile range of equal to or less than one will define consensus in the current study.

Trustworthiness

Because the Delphi literature does not specify measures for quantitative validity, guidelines for trustworthiness will be utilized to ensure the soundness of this mixed-method study. Trustworthiness is the quintessence of a qualitative study deemed scientific and valid. Lincoln and Guba (1985) coined this term to describe a set of conditions used to discern quality research. Discoveries of the study should be credible, transferable, dependable, and confirmable for trustworthiness to be realized. Credibility denotes the relevance and sufficiency of information gathered regarding the issue being studied. Transferability refers to the extent of usefulness and applicability the audience gains from the study. Dependability refers to the researcher's accountability for the process used in the research. Finally, confirmability refers to the researcher's objectivity throughout the study and if the findings are the logical outcome of the data collected (Lincoln & Guba, 1985). A study is not considered to be rigorous scientific research without these components of trustworthiness. A number of procedures have been recommended to help ensure trustworthiness: prolonged engagement, persistent

engagement, triangulation, member checking, peer debriefing, and audit trailing (Lincoln & Guba, 1985).

Prolonged and Persistent Engagement

Lincoln and Guba (1985) described prolonged engagement as the researcher's time commitment to the context of the phenomenon in question. In order to adequately understand the subtleties of the participants' experience, the researcher must invest ample time in their contextual world. In this study, prolonged engagement will be sustained by extensively reviewing the professional identities of counselors and social workers in addition to the topic of social justice advocacy through the literature, professional organizations, and CESNET, a list serve for counselor educators. Yet, while immersed in the pursuit of prolonged engagement, the researcher must take care not to lose objectivity (Lincoln & Guba, 1985). Persistent engagement attempts to safeguard the maintenance of scientific objectivity by exploring all possible explanations of the findings (Lincoln & Guba, 1985). Persistent engagement will be applied by providing multiple possible explanations for consensus levels of each item.

Triangulation

Triangulation encompasses verifying and gathering information from an array of sources (Creswell, 2007; Schwandt, 2007). Triangulation will be accomplished by executing multiple rounds of data collection from participants and a thorough literature review relating to social justice advocacy and professional identity. In addition, if necessary, participants whose statements receive a very low level of consensus will be given the opportunity to explain their position.

Peer Debriefing

Peer debriefing (a.k.a. investigator triangulation) involves consulting with impartial outsiders to corroborate the investigator's interpretations and analysis (Lincoln & Guba, 1985). This upholds an unbiased compilation and synthesizing of responses from the opening questionnaire. Throughout this study, peer debriefing will occur in weekly meetings with my committee chair.

Member Checking

Member checks are vital to ensure the researcher has correctly and sufficiently interpreted the information presented (Lincoln & Guba, 1985). This strategy is comprised of ratifying data with participants. In this study, written responses will be received directly from the participants and used verbatim, making additional checks unnecessary.

Audit Trail

An audit trail is an all-encompassing chronicle of the research process. A record of the development and use of materials such as interview questions as well as all information gathered is kept in an audit trail (Lincoln & Guba, 1985). Documentation will be maintained of all procedures and information gathered in this study. Survey Monkey maintains confidential archives of all responses to questionnaires. Any additional data will be kept in a secure and confidential location throughout this process.

Conclusion

The current study will implement the Delphi method to reach a consensus of opinion from a panel of experts in the area of social justice advocacy in counseling as it diverges from social work. A panel of counselor educators with expertise in social justice advocacy in counseling will respond to four open-ended questions related to

distinguishing social justice advocacy in counseling from social work functions. Multiple sequences of data collection will follow the experts' preliminary responses to assess for agreement on each item. This process will continue the discourse surrounding the place for social justice advocacy in the evolving professional identity of counselors. This dialogue among those who have extensive familiarity in the area of social justice advocacy in counseling will be an initial stride in identifying the distinguishing factors of social justice advocacy in counseling from social work functions.

CHAPTER 4

RESULTS

Pilot Study

Before initiating the primary investigation, a preliminary study was piloted using a panel of two participants. Drs. Elizabeth Horn and Judith Crews, counselor educators serving on the committee for this investigation, completed the initial open-ended questionnaire through the use of Qualtrics. The pilot study enabled the investigator to become acquainted with the navigation of the Qualtrics system and allowed participants the opportunity to provide feedback concerning the procedure and survey items. The initial survey for this inquiry was comprised of the informed consent (Appendix B) and four open-ended questions intended to reflect elements of social justice advocacy in counseling (Appendix C). The survey was posted online through the use of Qualtrics. Feedback from the pilot study did not warrant revisions to the initial questionnaire.

Expert Panel

Emails and phone calls inviting participation in the study were used to contact social justice scholars in the counselor education profession. The initial email (Appendix A) included a concise summary of the study process and requested potential participants to reply indicating whether they were willing to be a part of the study. Eleven potential participants stated they would be willing to participate as an expert panelist.

Round One Data Collection-Initial Questionnaire

The online survey consisted of four open-ended questions intended to reflect characteristics of social justice advocacy in counselor education. The survey (Appendix

C) was posted online through the use of Qualtrics. Each question allowed for a response of up to 700 characters.

An email was sent to 11 counselor education scholars in the area of social justice who indicated they were willing to participate in the study. This email (Appendix D) explained the procedures for round one, included parameters for responding to the initial survey, set a deadline for completion of answers, and gave an outline of round two. The Uniform Resource Located (URL) for Qualtrics led panelists to the initial survey.

Approximately one week later, a reminder message was emailed to the 11 panelists (Appendix E). Of the 11 participants, 10 finished the initial survey in its entirety online, and 1 completed half of the survey online. The responses to the initial survey can be found in Tables 2-5.

Table 2

Panelists' Round One Responses to Question One: What do you believe the differences are between social justice advocacy in counseling and social work functions?

P1. Social Justice Advocacy entails developing the consumer's capacity to develop their subjectivity. As I am not as familiar with social work functions I can not speak to their expectations, however, with counselors, one must consider the consumer's world, including school, family, community, and work to help them identify the specific obstacles to their freedom of movement and self actualization. As counselors our role is not to foster dependency but rather to heighten the conditions by which our consumers whether they are children, youth, adults or families are able to respond to their world in a constructive and conscious manner.

P2. I believe there are many similarities. The main differences as I see it are in the areas

that counseling and counseling psychology tend to emphasize: career and vocational counseling as well as prevention efforts. I believe that traditionally, social work trains students and practitioners well in terms of systemic interventions whereas traditionally counseling and counseling psychology has not. It is important, I believe, that counselors and counseling psychologists, to fulfill our strength based roots, must be better trained in understanding and intervening at systems levels.

P3. Because I am not a social worker, I cannot say what social work functions are. I have learned that many social workers are trained to specifically engage in advocacy through policy work at higher levels (e.g., governmental), while others are trained for more one-on-one clinical work that could entail anything at all (from social justice work to psychotherapy), hence, I believe it depends on the program. I would define social justice advocacy according to use of advocacy to remove any barriers impeding clients in achieving optimal wellness and career, social-emotional, and educational success (Ratts, 2011).

P4. Social justice advocacy is based on principles of equity, inclusion, caring, respect for differences, values of humanitarianism, and protection for those with little means to give voice to themselves. these principles are grounded in the ACA ethical standards and also in the multicultural counseling and social justice competencies. Social Work functions are informed on the principles and ethics of the social work profession.

P5. From my perspective, that of a social justice-oriented counselor, the difference is that counselors consider the contextual circumstances or factors that influence a person's or group's functioning. With appropriate permission, they may act with or on behalf of clients or client groups, to change external barriers to clients' well-being and/or to reach

other goals. I have never studied social work as a discipline however having worked with social workers, it seems to me that most social workers also consider people in context. Some connect people with existing system supports, e.g., social services, while others go beyond to advocate for individual clients or groups.

P6. In counseling, the goal of social justice is to ensure that everyone has an opportunity to resources such as healthcare, employment, and to achieve optimal mental health. This perspective is grounded in the belief that client problems are largely rooted in oppressive environmental factors. Social advocacy is the act of arguing on behalf of an individual, group, idea or issue to achieve social justice. Social advocacy in counseling refers to acting with and on behalf of one's client or others in the client's system in order to assure fair and equitable treatment. Social work is more remedial with the aim of alleviating the conditions of those in need of help or welfare.

P7. The field of counseling tends to be more oriented towards prevention, education, life span human development and social work tends to be more oriented towards the medical model of helping. The counseling profession has tended towards more of an individual focus and the social work field has tended to focus more on systems and communities

P8. Good social workers likely do more than counselors, as their training has that orientation.

P9. Though similar, I see SW as doing systems of care work. Counselor work in systems but may have more direct contact with clients.

P10. I stay away from discussions about "This is what social work does" and "This is what counselors do". These discussions lead to turf wars and imply that a profession owns a way of practicing. How we arrive at advocacy work differs based on our

professional identities. For instance, the advocacy work counselors do usually stems from their work in the clinical setting. In other words, it is through individual counseling that counselors realize that they need to do advocacy in the community, which is controversial. Whereas, for social workers, their advocacy in the community will often lead them to realize the need to do individual counseling, which isn't controversial of an idea.

P11. In theory, social justice advocacy is similar in the intervention strategies that counselors and social workers are encouraged to utilize in their professional practices. In actual practice, social workers operate from a tradition that supports more advanced advocacy interventions intentionally designed to foster environmental changes intentionally designed promote justice by creating ecological changes to stimulate health human development in families, schools, universities, workplaces, and communities as well as the broader society where people live and work. Counselors, on the other hand, continue to operate from a tradition that focuses on individual, intrapsychic changes.

Table 3

Panelists' Round One Responses to Question Two: How would you describe to counselors-in-training the professional boundary between social justice advocacy in counseling and social work?

P1. At the stage in which a counselor has enjoined with their client there is an element of trust that has been created within the relationship. At this point, the counselor provides opportunities to not only acknowledge client strengths but then allows the consumer/client to examine their own subjective reality; this is where the client, themselves, must cross over to understand their own subjective world and the impact it

has on them.

P2. It depends on the setting in which counselors and social workers are working. I believe there is too much emphasis on defining boundaries because clients don't really care what the title is, as long as their needs are being met. However, practice should be aligned with training. I have worked in settings where both counselors and social workers were seeing the same client population. I have specialized emphasis in career/vocational counseling, this is an area that social workers traditionally do not have training. Because many of the clients I have seen have had issues related to work, this has seemed appropriate for counseling. In terms of social justice advocacy, all disciplines are needed

P3. I try not to proscribe this but hope we can come to the answer in dialogue--I lay the question out there for them: "What is the counselor's role, in ensuring clinical success/meeting the clients' goals? What seems beyond the counselors' scope/role, and according to whom?" (I don't label anything as a social work task). We then discuss the constrictions of our workplaces (e.g., our roles are defined by the systems in which we work, as well as by our supervisors' perceptions and our own fears of taking risks as advocates). I give them the extreme opinions (from systems' change agents, to a solely intrapsychic, client focus), and we explore what these boundaries are/should be.

P4. Social justice advocacy engages counselors in empowering others to self-advocate. I would also inform counselors-in-training that they must also consider the context for advocating for change on behalf of individuals as well as groups. A distinction between social justice advocacy in counseling and social work is found in intervention levels. Counselors advance social justice advocacy at the individual, group, and community levels while social workers, from my perspective, intervene at the individual level,

primarily.

P5. This is a good question. I generally focus on what we - as counselors - do rather than attempting to compare our work or philosophy with others. I prefer to leave descriptions of social work to experts in that field. At the same time, I encourage students to deeply immerse themselves in their field (counseling) while recognizing and respecting allied professionals with whom they will likely work. I see respect and collaboration with members of allied professionals (and other people!) as a core multicultural/social justice competency.

P6. Ultimately there is no need for a "boundary" among the sister fields. We should ultimately work in concert toward the end of creating a more harmonious society that provides equitable access and equitable participation that is in the best interests of all people. It is a falsehood to assume that there should be clear "boundaries" in the helping fields. This is in fact, not how we work effectively as counseling professionals.

P7. Well I am not clear what you are asking but before advocating for a client one should always ask the client and make sure that this is something that the client wants you to do on their behalf.

P8. I am not really into boundaries, sorry!

P9. Not being a Social Worker, I do not know what SW are taught. My counselors in training learn about the advocacy model that encompasses micro, meso and meta levels of advocacy.

P10. I don't think there is a distinction in terms of boundaries because no one profession should own a particular intervention such as advocacy work. Clients don't care whether they are working with a sw or a counselor. All clients care about is whether or not the

professional helper can help them get at the root of their problem. Counselors arrive at advocacy from their individual counseling work and social workers arrive at individual counseling through their community-based work. In other words, counselors begin with psychology and it leads them to sociology. Social workers begin with sociology and it leads them to psychology.

P11. I would first describe the unnecessary and artificial boundary that counselor educators and social work faculty members often perpetuate by trying to legitimize such a boundary in an effort to distinguish what in actuality are similar advocacy services provided by counselors and social workers. I would then proceed to describe the various advocacy competencies endorsed by the American Counseling Association and discuss how such competencies complement the advocacy services implemented by social workers.

Table 4

Panelists' Round One Responses to Question Three: As counselor educators, how can we train our students to promote social justice advocacy while maintaining a distinctive counselor identity?

P1. Strength based perspective which includes the work of Bonnie Benard (Resiliency) in which we move away from deficit language that continues to label people of color, LGBTQI, Low SES, etc... and teach our students how to empower our clients to act upon their reality rather than adopting labels that are problematic and subsequently internalized.

P2. ACA Advocacy Competencies should be the foundation. Assignments can be developed using the Advocacy Competencies in which students are required to do

background research to prepare to identify the appropriate advocacy action and potentially act. Readings that help students understand systemic and ecological frameworks are important. In terms of "maintaining distinctive counselor identity" I believe there is too much emphasis on that. I think the problem with that is that counseling training has been too narrow, thus limiting counselors' understanding of broader forces. It is important for counselors to be trained to better partner with colleagues who have other training and expertise.

P3. To me, the focus of counseling begins with client work, and aiding clients in accessing every resource necessary to achieving optimal wellness and success (e.g., social, personal, educational, economical). A counseling focus begins and ends with the client's stated goal, rather than with a diagnosis/perspective of pathology or with a focus on external systems. Hence, I recognize that some needed services may be external to the scope of counseling and the counseling setting (and again this is determined by one's job description), and in that case, our job is to put clients in touch with others who can provide those services.

P4. Without a doubt, counselors need to learn that our work with and on behalf of others is based on social justice principles. We must teach our students that a counselor's identity is distinguished by our understanding of how systems and institutions affect individuals and that we can best empower and create change by working from a systems approach.

P5. This question seems to imply that social justice advocacy and counselor identity are at odds - and that is not the case! Social justice advocacy is foundational to professional counseling. Recognized founders of professional counseling, including Frank Parsons,

Clifford Beers, and Carl Rogers, were social-justice advocates. Students need to know this. Students also need to know that professional counselors, both individually and collectively, were at the forefront of both the multicultural and social justice movements in our field - and allied professions. Therefore, it is my considered perspective that social justice advocacy is integral to a full counselor identity.

P6. Ultimately our "distinctive counselor identity" has quite a bit of overlap with a number of our sister fields. For example, the wellness model in mental health is actually claimed by counseling, counselor education, counseling psychology and social work as a root identity value. Ultimately, the focus should actually be on developing counselors who provide services focused on developing a society where wellness, harmony and cooperation are key. This can be done in concert with our sister fields. Our "counselor identity" should be co-constructed with our sister fields instead of used as a way to clarify turflike "identity" as if we are in competition.

P7. No answer.

P8. First, have them learn neuroscience, neurobiology, and genetics for it is these fields that most clearly show that a social justice/preventive approach is needed. Their research is far better and more convincing than ours. Most geneticists I read are more into social justice than social workers or counselors. Next, teach them that poverty and oppression are root causes. Teach them that lifestyle interventions are what is needed--more than therapy. Diet, exercise, meditation, etc. are more important than our theories. Get them out in the community and ask them to show results. Even if only a soup kitchen.

P9. By infusing it into as many core and specialty counseling courses as possible with practical applications in the forms of cases.

P10. We need to use new models to better prepare students to integrate counselor and advocate into their professional identity. Counseling and advocacy need to be seen as 'two sides of the same coin'. You can't do one without the other effectively. To do this we need to train counselor educators on how to prepare students. Currently, counselor educators are not trained to do social justice advocacy work, yet many write about the need to do it. This is an ethical issue in that we have leaders who are not adequately equipped to train students to be able to be good counselors and social justice advocates. Many believe in sj but have not received any training in social justice education.

P11. First, as a counselor educator, I assist graduate students in understanding the historical evolution by noting how the genesis of the counseling profession is grounded in the advocacy effort of persons like Frank Parsons and Jesse Davis. I then proceed to explore the historical factors that resulted in counselors acquiring a unique identity that is largely based on ways of providing individual counseling services to stimulate the healthy development of individuals by largely fostering intrapsychic changes while moving advocacy services to the periphery of their work. I then emphasize that the combination of advocacy and direct counseling services reflects our distinct identity.

Table 5

Panelists' Round One Responses to Question Four: In what ways can counselors-in-training demonstrate social justice advocacy within their programs while maintaining a unique counselor identity?

P1. Clearly, in our research endeavors, our publications, the way in that we teach, the books that we teach and, lastly but not least; our pedagogy. Too many professors still teach from a Banking Method and do not teach in a way that develops critical thinking.

By employing problem posing in our classes we begin to draw out our students who have been conditioned to only provide "right" answers.

P2. Again, using the ACA Advocacy Competencies should be central, this is from the profession and uses the type of expertise that is central to counseling training as well as to expand the areas needed for advocacy action. Trainees can demonstrate social justice advocacy through applying each of the 6 domains of the Advocacy Competencies to cases and their internship sites.

P3. Through maintaining a primary focus on client wellness/preventative work and, in training, a focus on development of clinical skills related to one-on-one counseling, rather than on diagnosis/pathology (e.g., APA focus) or on policy/lobbying/systems' change and/or case-management work (more social work). Hence, counselors would learn social justice advocacy in a wellness/preventative and strengths-based framework.

P4. There can be opportunities, introduced by faculty, that provide encounters for counselors-in-training. The latter, through service learning opportunities can engage in community-based projects that empower and support communities and special projects. For example, counselors might do volunteerism at a gerontological center or one working with military families and children.

P5. I am also concerned about this question as it seems to imply these areas are at odds with each other, which they are not. However, to your question, some ways counselors-in-training can demonstrate social justice advocacy with their emerging professional counselor identity by 1) demonstrating their understanding the varied developmental, contextual, and situational factors that contribute to human wellness, functioning, and disease, 2) demonstrating their knowledge of historical and present-day stressors that

many clients encounter on a daily basis, and 3) demonstrating their knowledge of multicultural and social justice competencies, ideally through supervised experiences.

P6. Counselors-in-training should work on paying attention to cultural and contextual issues underlying the challenges our clients face. The process of achieving social justice should be one that is participatory in nature and one that considers the community in which clients live as opposed to considering our clients as islands. This holistic wellness approach is at its very roots counseling identity and simultaneously social justice advocacy.

P7. No answer.

P8. Again, not into boundaries, but it should be easy to move ahead of slow-moving tightly-wound psychologists.

P9. By requiring them to participate in one of the many advocacy opportunities available through ACA, it's divisions, state and regional organizations.

P10. Unfortunately, counselors in training need to go beyond their training to incorporate a social justice perspective into their counseling work because counselor preparation programs continue to focus on how to do individual based work and not how to do community based work. Those in counseling who promote the need to do social justice advocacy work hold the perception of social justice advocacy as office based. This doesn't prepare students for the realities of what clients need. What they need to do instead is take courses and/or gain certification in community activism or public policy.

P11. Counselor education programs need to take leadership in this area by reforming their curriculum to include a balanced approach to more effectively address issues relevant to the above question. This can be done by ensuring teaching and learning

activities in the classroom, practicum, and internship settings that require specific learning activities, which reflect a balance in counseling theories and skills, consultation/collaboration skills, and prevention/ social justice advocacy interventions. This would provide the knowledge and support students need to effectively demonstrate social justice advocacy within their training programs while maintaining a unique counselor identity.

Round Two Data Collection-First Likert Scale

The round 2 questionnaire was comprised of responses from the initial open-ended questionnaire (Appendix J-M). Utilizing a five point Likert scale (1=strongly disagree, 2=disagree, 3=neutral, 4=agree, 5=strongly agree), the participants were each given the opportunity to rank their level of agreement with other panelists' responses. For the purposes of ensuring the study's trustworthiness and maintaining the general spirit and nuance of each panelist's message, the researcher decided to leave each participant's original response as written (Wilhelm, 2001). The only modifications made were the correction of typos. The Likert scale survey was broken down into four sections, representing each question from the initial questionnaire.

Initially, 11 individuals agreed to participate in this inquiry, but only 10 fully completed the questionnaire. The participants were unable to identify one another due to the way Qualtrics protects participants' anonymity. However, the researcher was able to identify most participants as they finished the initial questionnaire. Another email was sent initiating round 2 data collection. This email (Appendix F) gave instructions on how to access the questionnaire, provided a link to the questionnaire and a brief overview of the process, and gave a tentative deadline for the final round of data collection.

Approximately one week later, a reminder email was sent (Appendix G) to the original 11 participants. However, while most participants were able to access the link, some emailed back and indicated they were having difficulty accessing the link. An anonymous link was generated by Qualtrics and sent from the researcher's private email account. All of the remaining participants were then able to access the questionnaire. Some individuals failed to respond to the questionnaire or email correspondence and the researcher made additional phone calls of encouragement to the participants. All but one participant was promptly responsive at this time, and that participant was withdrawn from the study at this juncture. Only 10 of the 11 original participants responded to the second round questionnaire. Again, the participants were anonymous to each other while the researcher was able to view most participants as he or she responded to the second round questionnaire.

Round 2 Data Analysis

Data analysis entailed determining the level of agreement and level of consensus for each item using the median and interquartile range, respectively. The decision was made to calculate the median using the following formula:

$$\text{Median} = X(lrl) + \left[\frac{.5N - f(\text{below } lrl)}{f(\text{tied})} \right]$$

$X(lrl)$ = lower real limit of tied values

$f(\text{below } lrl)$ = the frequency of scores with values below $X(lrl)$

$f(\text{tied})$ = the frequency for the tied values

This interpolation is used to calculate the median when there are "several scores with the same value in the middle of the distribution" (Gravetter & Wallnau, 1996, p. 84). The databases SPSS and EXCEL were considered to calculate the median, but the researcher

decided against their utilization as these databases assume a normal distribution and round to the nearest whole number. As an unwanted result, assumption of a normal distribution would have allowed for items with the interquartile range up to 1.49 to be considered 1.00, thus appearing to reach consensus. Therefore it seemed more appropriate to use the interpolation formula to achieve the most accurate results.

The interquartile range was used to determine the level of consensus among panelists. The interquartile range is calculated by subtracting the value at the 25th percentile (P1) from the value at the 75th percentile (Q3). In this study, an interquartile range of 1.0 or less defined consensus. The responses to the round two survey appear in tables 6-9. The median was indicated by M and the interquartile range was indicated by IR for each response. The responses that reached consensus in round two are highlighted in table 10 and the responses that were farthest from consensus are highlighted in table 11:

Table 6

Panelists' Round Two Responses to Question One: What do you believe the differences are between social justice advocacy in counseling and social work functions?

Participant Responses	M	IR
P1. Social Justice Advocacy entails developing the consumer's capacity to develop their subjectivity. As I am not as familiar with social work functions I can not speak to their expectations, however, with counselors, one must consider the consumer's world, including school, family, community, and work to help them identify the specific obstacles to their freedom of movement and self actualization. As	4.1	.82

counselors our role is not to foster dependency but rather to heighten the conditions by which our consumers whether they are children, youth, adults or families are able to respond to their world in a constructive and conscious manner.

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| <p>P2. I believe there are many similarities. The main differences as I see it are in the areas that counseling and counseling psychology tend to emphasize: career and vocational counseling as well as prevention efforts. I believe that traditionally, social work trains students and practitioners well in terms of systemic interventions whereas traditionally counseling and counseling psychology has not. It is important, I believe, that counselors and counseling psychologists, to fulfill our strength based roots, must be better trained in understanding and intervening at systems levels.</p> | <p>4.79</p> | <p>1.04</p> |
| <p>P3. Because I am not a social worker, I cannot say what social work functions are. I have learned that many social workers are trained to specifically engage in advocacy through policy work at higher levels (e.g., governmental), while others are trained for more one-on-one clinical work that could entail anything at all (from social justice work to psychotherapy), hence, I believe it depends on the program. I would define social justice advocacy according to use of advocacy to remove any barriers impeding clients in achieving optimal wellness and career, social-emotional, and educational success (Ratts, 2011).</p> | <p>4.5</p> | <p>.88</p> |
| <p>P4. Social justice advocacy is based on principles of equity, inclusion,</p> | <p>4.17</p> | <p>1.29</p> |

caring, respect for differences, values of humanitarianism, and protection for those with little means to give voice to themselves. these principles are grounded in the ACA ethical standards and also in the multicultural counseling and social justice competencies. Social Work functions are informed on the principles and ethics of the social work profession.

P5. From my perspective, that of a social justice-oriented counselor, **4.25** **1.25**
the difference is that counselors consider the contextual circumstances or factors that influence a person's or group's functioning. With appropriate permission, they may act with or on behalf of clients or client groups, to change external barriers to clients' well-being and/or to reach other goals. I have never studied social work as a discipline however having worked with social workers, it seems to me that most social workers also consider people in context. Some connect people with existing system supports, e.g., social services, while others go beyond to advocate for individual clients or groups.

P6. In counseling, the goal of social justice is to ensure that everyone **3.9** **.82**
has an opportunity to resources such as healthcare, employment, and to achieve optimal mental health. This perspective is grounded in the belief that client problems are largely rooted in oppressive environmental factors. Social advocacy is the act of arguing on behalf of an individual, group, idea or issue to achieve social justice. Social advocacy in counseling refers to acting with and on behalf of one's

client or others in the client's system in order to assure fair and equitable treatment. Social work is more remedial with the aim of alleviating the conditions of those in need of help or welfare.

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|--|-------------|-------------|
| P7. The field of counseling tends to be more oriented towards prevention, education, life span human development and social work tends to be more oriented towards the medical model of helping. The counseling profession has tended towards more of an individual focus and the social work field has tended to focus more on systems and communities | 3.17 | 2.42 |
| P8. Good social workers likely do more than counselors, as their training has that orientation. | 2.5 | 1.67 |
| P9. Though similar, I see SW as doing systems of care work. Counselor work in systems but may have more direct contact with clients. | 3.25 | 1.25 |
| P10. I stay away from discussions about "This is what social work does" and "This is what counselors do". These discussions lead to turf wars and imply that a profession owns a way of practicing. How we arrive at advocacy work differs based on our professional identities. For instance, the advocacy work counselors do usually stems from their work in the clinical setting. In other words, it is through individual counseling that counselors realize that they need to do advocacy in the community, which is controversial. Whereas, for social workers, their advocacy in the community will often lead them to realize the need to | 3.75 | 1.63 |

do individual counseling, which isn't controversial of an idea.

P11. In theory, social justice advocacy is similar in the intervention strategies that counselors and social workers are encouraged to utilize in their professional practices. In actual practice, social workers operate from a tradition that supports more advanced advocacy interventions intentionally designed to foster environmental changes intentionally designed promote justice by creating ecological changes to stimulate health human development in families, schools, universities, workplaces, and communities as well as the broader society where people live and work. Counselors, on the other hand, continue to operate from a tradition that focuses on individual, intrapsychic changes.	3.25	2.21
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Table 7

Panelists' Round Two Responses to Question Two: How would you describe to counselors-in-training the professional boundary between social justice advocacy in counseling and social work?

Participant Responses	<u>M</u>	<u>IR</u>
P1. At the stage in which a counselor has enjoined with their client there is an element of trust that has been created within the relationship. At this point, the counselor provides opportunities to not only acknowledge client strengths but then allows the consumer/client to examine their own subjective reality; this is where the client, themselves, must cross over to understand their own subjective world and the impact it has on them.	3.2	1

- P2. It depends on the setting in which counselors and social workers are working. I believe there is too much emphasis on defining boundaries because clients don't really care what the title is, as long as their needs are being met. However, practice should be aligned with training. I have worked in settings where both counselors and social workers were seeing the same client population. I have specialized emphasis in career/vocational counseling, this is an area that social workers traditionally do not have training. Because many of the clients I have seen have had issues related to work, this has seemed appropriate for counseling. In terms of social justice advocacy, all disciplines are needed **4.75 .88**
- P3. I try not to proscribe this but hope we can come to the answer in dialogue--I lay the question out there for them: "What is the counselor's role, in ensuring clinical success/meeting the clients' goals? What seems beyond the counselors' scope/role, and according to whom?" (I don't label anything as a social work task). We then discuss the constrictions of our workplaces (e.g., our roles are defined by the systems in which we work, as well as by our supervisors' perceptions and our own fears of taking risks as advocates). I give them the extreme opinions (from systems' change agents, to a solely intrapsychic, client focus), and we explore what these boundaries are/should be. **4 1.63**
- P4. Social justice advocacy engages counselors in empowering others to self-advocate. I would also inform counselors-in-training that they must also consider the context for advocating for change on behalf of **2.38 1.56**

individuals as well as groups. A distinction between social justice advocacy in counseling and social work is found in intervention levels. Counselors advance social justice advocacy at the individual, group, and community levels while social workers, from my perspective, intervene at the individual level, primarily.

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| <p>P5. This is a good question. I generally focus on what we - as counselors - do rather than attempting to compare our work or philosophy with others. I prefer to leave descriptions of social work to experts in that field. At the same time, I encourage students to deeply immerse themselves in their field (counseling) while recognizing and respecting allied professionals with whom they will likely work. I see respect and collaboration with members of allied professionals (and other people!) as a core multicultural/social justice competency.</p> | <p>4.6 .99</p> |
| <p>P6. Ultimately there is no need for a "boundary" among the sister fields. We should ultimately work in concert toward the end of creating a more harmonious society that provides equitable access and equitable participation that is in the best interests of all people. It is a falsehood to assume that there should be clear "boundaries" in the helping fields. This is in fact, not how we work effectively as counseling professionals.</p> | <p>4.6 .99</p> |
| <p>P7. Well I am not clear what you are asking but before advocating for a client one should always ask the client and make sure that this is something that the client wants you to do on their behalf.</p> | <p>4.6 1.43</p> |
| <p>P8. I am not really into boundaries, sorry!</p> | <p>3.75 1.31</p> |

- P9. Not being a Social Worker, I do not know what SW are taught. My
counselors in training learn about the advocacy model that encompasses
micro, meso and meta levels of advocacy. **3.94 .75**
- P10. I don't think there is a distinction in terms of boundaries because no
one profession should own a particular intervention such as advocacy
work. Clients don't care whether they are working with a sw or a
counselor. All clients care about is whether or not the professional helper
can help them get at the root of their problem. Counselors arrive at
advocacy from their individual counseling work and social workers
arrive at individual counseling through their community based work. In
other words, counselors begin with psychology and it leads them to
sociology. Social workers begin with sociology and it leads them to
psychology. **3.86 .75**
- P11. I would first describe the unnecessary and artificial boundary that
counselor educators and social work faculty members often perpetuate by
trying to legitimize such a boundary in an effort to distinguish what in
actuality are similar advocacy services provided by counselors and social
workers. I would then proceed to describe the various advocacy
competencies endorsed by the American Counseling Association and
discuss how such competencies complement the advocacy services
implemented by social workers. **4 .88**

Table 8

Panelists' Round Two Responses to Question Three: As counselor educators, how can we train our students to promote social justice advocacy while maintaining a distinctive counselor identity?

Participant Responses	M	IR
<p>P1. Strength based perspective which includes the work of Bonnie Benard (Resiliency) in which we move away from deficit language that continues to label people of color, LGBTQI, Low SES, etc... and teach our students how to empower our clients to act upon their reality rather than adopting labels that are problematic and subsequently internalized.</p>	3.94	1
<p>P2. ACA Advocacy Competencies should be the foundation. Assignments can be developed using the Advocacy Competencies in which students are required to do background research to prepare to identify the appropriate advocacy action and potentially act. Readings that help students understand systemic and ecological frameworks are important. In terms of "maintaining distinctive counselor identity" I believe there is too much emphasis on that. I think the problem with that is that counseling training has been too narrow, thus limiting counselors' understanding of broader forces. It is important for counselors to be trained to better partner with colleagues who have other training and expertise.</p>	4.75	1
<p>P3. To me, the focus of counseling begins with client work, and aiding clients in accessing every resource necessary to achieving optimal wellness and success (e.g., social, personal, educational, economical). A</p>	4.2	1

counseling focus begins and ends with the client's stated goal, rather than with a diagnosis/perspective of pathology or with a focus on external systems. Hence, I recognize that some needed services may be external to the scope of counseling and the counseling setting (and again this is determined by one's job description), and in that case, our job is to put clients in touch with others who can provide those services.

P4. Without a doubt, counselors need to learn that our work with and on **4.38** **1.13**

behalf of others is based on social justice principles. We must teach our students that a counselor's identity is distinguished by our understanding of how systems and institutions affect individuals and that we can best empower and create change by working from a systems approach.

P5. This question seems to imply that social justice advocacy and **4.94** **.56**

counselor identity are at odds - and that is not the case! Social justice advocacy is foundational to professional counseling. Recognized founders of professional counseling, including Frank Parsons, Clifford Beers, and Carl Rogers, were social-justice advocates. Students need to know this. Students also need to know that professional counselors, both individually and collectively, were at the forefront of both the multicultural and social justice movements in our field - and allied professions. Therefore, it is my considered perspective that social justice advocacy is integral to a full counselor identity.

P6. Ultimately our "distinctive counselor identity" has quite a bit of **4.75** **1**

overlap with a number of our sister fields. For example, the wellness

model in mental health is actually claimed by counseling, counselor education, counseling psychology and social work as a root identity value. Ultimately, the focus should actually be on developing counselors who provide services focused on developing a society where wellness, harmony and cooperation are key. This can be done in concert with our sister fields. Our "counselor identity" should be co-constructed with our sister fields instead of used as a way to clarify turflike "identity" as if we are in competition.

P7. No answer.

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P8. First, have them learn neuroscience, neurobiology, and genetics for it is these fields that most clearly show that a social justice/preventive approach is needed. Their research is far better and more convincing than ours. Most geneticists I read are more into social justice than social workers or counselors. Next, teach them that poverty and oppression are root causes. Teach them that lifestyle interventions are what is needed--more than therapy. Diet, exercise, meditation, etc. are more important than our theories. Get them out in the community and ask them to show results. Even if only a soup kitchen.	4.38	1.13

P9. By infusing it into as many core and specialty counseling courses as possible with practical applications in the forms of cases.	4.33	1.35
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P10. We need to use new models to better prepare students to integrate counselor and advocate into their professional identity. Counseling and advocacy need to be seen as 'two sides of the same coin'. You can't do	3.25	1.13
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one without the other effectively. To do this we need to train counselor educators on how to prepare students. Currently, counselor educators are not trained to do social justice advocacy work, yet many write about the need to do it. This is an ethical issue in that we have leaders who are not adequately equipped to train students to be able to be good counselors and social justice advocates. Many believe in sj but have not received any training in social justice education.

P11. First, as a counselor educator, I assist graduate students in understanding the historical evolution by noting how the genesis of the counseling profession is grounded in the advocacy effort of persons like Frank Parsons and Jesse Davis. I then proceed to explore the historical factors that resulted in counselors acquiring a unique identity that is largely based on ways of providing individual counseling services to stimulate the healthy development of individuals by largely fostering intrapsychic changes while moving advocacy services to the periphery of their work. I then emphasize that the combination of advocacy and direct counseling services reflects our distinct identity.	4.08	.75
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Table 9

Panelists' Round Two Responses to Question Four: In what ways can counselors-in-training demonstrate social justice advocacy within their programs while maintaining a unique counselor identity?

Participant Responses	M	IR
P1. Clearly, in our research endeavors, our publications, the way in that	4.25	1.81

we teach, the books that we teach and, lastly but not least; our pedagogy.

Too many professors still teach from a Banking Method and do not teach in a way that develops critical thinking. By employing problem posing in our classes we begin to draw out our students who have been conditioned to only provide "right" answers.

P2. Again, using the ACA Advocacy Competencies should be central, **4.4 .99**
 this is from the profession and uses the type of expertise that is central to counseling training as well as to expand the areas needed for advocacy action. Trainees can demonstrate social justice advocacy through applying each of the 6 domains of the Advocacy Competencies to cases and their internship sites.

P3. Through maintaining a primary focus on client **4 2**
 wellness/preventative work and, in training, a focus on development of clinical skills related to one-on-one counseling, rather than on diagnosis/pathology (e.g., APA focus) or on policy/lobbying/systems' change and/or case-management work (more social work). Hence, counselors would learn social justice advocacy in a wellness/preventative and strengths-based framework.

P4. There can be opportunities, introduced by faculty, that provide **4.08 .75**
 encounters for counselors-in-training. The latter, through service learning opportunities can engage in community-based projects that empower and support communities and special projects. For example, counselors might do volunteerism at a gerontological center or one

working with military families and children.

P5. I am also concerned about this question as it seems to imply these areas are at odds with each other, which they are not. However, to your question, some ways counselors-in-training can demonstrate social justice advocacy with their emerging professional counselor identity by 1) demonstrating their understanding the varied developmental, contextual, and situational factors that contribute to human wellness, functioning, and disease, 2) demonstrating their knowledge of historical and present-day stressors that many clients encounter on a daily basis, and 3) demonstrating their knowledge of multicultural and social justice competencies, ideally through supervised experiences.	4.38	1.13
P6. Counselors-in-training should work on paying attention to cultural and contextual issues underlying the challenges our clients face. The process of achieving social justice should be one that is participatory in nature and one that considers the community in which clients live as opposed to considering our clients as islands. This holistic wellness approach is at its very roots counseling identity and simultaneously social justice advocacy.	4.86	.64
P7. No answer.	----	----
P8. Again, not into boundaries, but it should be easy to move ahead of slow-moving tightly-wound psychologists.	2.38	1.27
P9. By requiring them to participate in one of the many advocacy opportunities available through ACA, it's divisions, state and regional	3.75	1.38

organizations.

- P10. Unfortunately, counselors in training need to go beyond their **2.4 1.93**
training to incorporate a social justice perspective into their counseling
work because counselor preparation programs continue to focus on how
to do individual based work and not how to do community based work.
Those in counseling who promote the need to do social justice advocacy
work hold the perception of social justice advocacy as office based. This
doesn't prepare students for the realities of what clients need. What they
need to do instead is take courses and/or gain certification in community
activism or public policy.
- P11. Counselor education programs need to take leadership in this area **4.13 1.19**
by reforming their curriculum to include a balanced approach to more
effectively address issues relevant to the above question. This can be
done by ensuring teaching and learning activities in the classroom,
practicum, and internship settings that require specific learning activities
which reflect a balance in counseling theories and skills,
consultation/collaboration skills, and prevention/ social justice advocacy
interventions. This would provide the knowledge and support students
need to effectively demonstrate social justice advocacy within their
training programs while maintaining a unique counselor identity.

Table 10

Consensus After Round 2

Participant Responses for Question One:	M	IR
<p>P1. Social Justice Advocacy entails developing the consumer's capacity to develop their subjectivity. As I am not as familiar with social work functions I can not speak to their expectations, however, with counselors, one must consider the consumer's world, including school, family, community, and work to help them identify the specific obstacles to their freedom of movement and self actualization. As counselors our role is not to foster dependency but rather to heighten the conditions by which our consumers whether they are children, youth, adults or families are able to respond to their world in a constructive and conscious manner.</p>	4.1	.82
<p>P3. Because I am not a social worker, I cannot say what social work functions are. I have learned that many social workers are trained to specifically engage in advocacy through policy work at higher levels (e.g., governmental), while others are trained for more one-on-one clinical work that could entail anything at all (from social justice work to psychotherapy), hence, I believe it depends on the program. I would define social justice advocacy according to use of advocacy to remove any barriers impeding clients in achieving optimal wellness and career, social-emotional, and educational success (Ratts, 2011).</p>	4.5	.88
<p>P6. In counseling, the goal of social justice is to ensure that everyone</p>	3.9	.82

has an opportunity to resources such as healthcare, employment, and to achieve optimal mental health. This perspective is grounded in the belief that client problems are largely rooted in oppressive environmental factors. Social advocacy is the act of arguing on behalf of an individual, group, idea or issue to achieve social justice. Social advocacy in counseling refers to acting with and on behalf of one's client or others in the client's system in order to assure fair and equitable treatment. Social work is more remedial with the aim of alleviating the conditions of those in need of help or welfare.

Participant Responses for Question Two:

M IR

P1. At the stage in which a counselor has enjoined with their client there is an element of trust that has been created within the relationship. At this point, the counselor provides opportunities to not only acknowledge client strengths but then allows the consumer/client to examine their own subjective reality; this is where the client, themselves, must cross over to understand their own subjective world and the impact it has on them.

3.2 1

P2. It depends on the setting in which counselors and social workers are working. I believe there is too much emphasis on defining boundaries because clients don't really care what the title is, as long as their needs are being met. However, practice should be aligned with training. I have worked in settings where both counselors and social workers were seeing the same client population. I have specialized emphasis in

4.75 .88

career/vocational counseling, this is an area that social workers traditionally do not have training. Because many of the clients I have seen have had issues related to work, this has seemed appropriate for counseling. In terms of social justice advocacy, all disciplines are needed

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| <p>P5. This is a good question. I generally focus on what we - as counselors - do rather than attempting to compare our work or philosophy with others. I prefer to leave descriptions of social work to experts in that field. At the same time, I encourage students to deeply immerse themselves in their field (counseling) while recognizing and respecting allied professionals with whom they will likely work. I see respect and collaboration with members of allied professionals (and other people!) as a core multicultural/social justice competency.</p> | <p>4.6</p> | <p>.99</p> |
| <p>P6. Ultimately there is no need for a "boundary" among the sister fields. We should ultimately work in concert toward the end of creating a more harmonious society that provides equitable access and equitable participation that is in the best interests of all people. It is a falsehood to assume that there should be clear "boundaries" in the helping fields. This is in fact, not how we work effectively as counseling professionals.</p> | <p>4.6</p> | <p>.99</p> |
| <p>P9. Not being a Social Worker, I do not know what SW are taught. My counselors in training learn about the advocacy model that encompasses micro, meso and meta levels of advocacy.</p> | <p>3.94</p> | <p>.75</p> |
| <p>P10. I don't think there is a distinction in terms of boundaries because</p> | <p>3.86</p> | <p>.75</p> |

no one profession should own a particular intervention such as advocacy work. Clients don't care whether they are working with a sw or a counselor. All clients care about is whether or not the professional helper can help them get at the root of their problem. Counselors arrive at advocacy from their individual counseling work and social workers arrive at individual counseling through their community based work. In other words, counselors begin with psychology and it leads them to sociology. Social workers begin with sociology and it leads them to psychology.

P11. I would first describe the unnecessary and artificial boundary that counselor educators and social work faculty members often perpetuate by trying to legitimize such a boundary in an effort to distinguish what in actuality are similar advocacy services provided by counselors and social workers. I would then proceed to describe the various advocacy competencies endorsed by the American Counseling Association and discuss how such competencies complement the advocacy services implemented by social workers.	4	.88
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Participant Responses for Question Three:

	M	IR
P1. Strength based perspective which includes the work of Bonnie Benard (Resiliency) in which we move away from deficit language that continues to label people of color, LGBTQI, Low SES, etc... and teach our students how to empower our clients to act upon their reality rather than adopting labels that are problematic and subsequently internalized.	3.94	1

P2. ACA Advocacy Competencies should be the foundation. **4.75** **1**

Assignments can be developed using the Advocacy Competencies in which students are required to do background research to prepare to identify the appropriate advocacy action and potentially act. Readings that help students understand systemic and ecological frameworks are important. In terms of "maintaining distinctive counselor identity" I believe there is too much emphasis on that. I think the problem with that is that counseling training has been too narrow, thus limiting counselors' understanding of broader forces. It is important for counselors to be trained to better partner with colleagues who have other training and expertise.

P3. To me, the focus of counseling begins with client work, and aiding **4.2** **1**

clients in accessing every resource necessary to achieving optimal wellness and success (e.g., social, personal, educational, economical). A counseling focus begins and ends with the client's stated goal, rather than with a diagnosis/perspective of pathology or with a focus on external systems. Hence, I recognize that some needed services may be external to the scope of counseling and the counseling setting (and again this is determined by one's job description), and in that case, our job is to put clients in touch with others who can provide those services.

P5. This question seems to imply that social justice advocacy and **4.94** **.56**
counselor identity are at odds - and that is not the case! Social justice advocacy is foundational to professional counseling. Recognized

founders of professional counseling, including Frank Parsons, Clifford Beers, and Carl Rogers, were social-justice advocates. Students need to know this. Students also need to know that professional counselors, both individually and collectively, were at the forefront of both the multicultural and social justice movements in our field - and allied professions. Therefore, it is my considered perspective that social justice advocacy is integral to a full counselor identity.

P6. Ultimately our "distinctive counselor identity" has quite a bit of overlap with a number of our sister fields. For example, the wellness model in mental health is actually claimed by counseling, counselor education, counseling psychology and social work as a root identity value. Ultimately, the focus should actually be on developing counselors who provide services focused on developing a society where wellness, harmony and cooperation are key. This can be done in concert with our sister fields. Our "counselor identity" should be co-constructed with our sister fields instead of used as a way to clarify turflike "identity" as if we are in competition.

4.75 1

P11. First, as a counselor educator, I assist graduate students in understanding the historical evolution by noting how the genesis of the counseling profession is grounded in the advocacy effort of persons like Frank Parsons and Jesse Davis. I then proceed to explore the historical factors that resulted in counselors acquiring a unique identity that is largely based on ways of providing individual counseling services to

4.08 .75

stimulate the healthy development of individuals by largely fostering intrapsychic changes while moving advocacy services to the periphery of their work. I then emphasize that the combination of advocacy and direct counseling services reflects our distinct identity.

Participant Responses for Question Four:

M IR

P2. Again, using the ACA Advocacy Competencies should be central, this is from the profession and uses the type of expertise that is central to counseling training as well as to expand the areas needed for advocacy action. Trainees can demonstrate social justice advocacy through applying each of the 6 domains of the Advocacy Competencies to cases and their internship sites.

4.4 .99

P4. There can be opportunities, introduced by faculty, that provide encounters for counselors-in-training. The latter, through service learning opportunities can engage in community-based projects that empower and support communities and special projects. For example, counselors might do volunteerism at a gerontological center or one working with military families and children.

4.08 .75

P6. Counselors-in-training should work on paying attention to cultural and contextual issues underlying the challenges our clients face. The process of achieving social justice should be one that is participatory in nature and one that considers the community in which clients live as opposed to considering our clients as islands. This holistic wellness approach is at its very roots counseling identity and simultaneously

4.86 .64

social justice advocacy.

Table 11

Farthest From Consensus After Round 2

Participant Responses for Question One:	M	IR
P4. Social justice advocacy is based on principles of equity, inclusion, caring, respect for differences, values of humanitarianism, and protection for those with little means to give voice to themselves. these principles are grounded in the ACA ethical standards and also in the multicultural counseling and social justice competencies. Social Work functions are informed on the principles and ethics of the social work profession.	4.17	1.29
P5. From my perspective, that of a social justice-oriented counselor, the difference is that counselors consider the contextual circumstances or factors that influence a person's or group's functioning. With appropriate permission, they may act with or on behalf of clients or client groups, to change external barriers to clients' well-being and/or to reach other goals. I have never studied social work as a discipline however having worked with social workers, it seems to me that most social workers also consider people in context. Some connect people with existing system supports, e.g., social services, while others go beyond to advocate for individual clients or groups.	4.25	1.25
P7. The field of counseling tends to be more oriented towards prevention, education, life span human development and social work	3.17	2.42

tends to be more oriented towards the medical model of helping. The counseling profession has tended towards more of an individual focus and the social work field has tended to focus more on systems and communities

P8. Good social workers likely do more than counselors, as their training has that orientation. **2.5 1.67**

P9. Though similar, I see SW as doing systems of care work. Counselor work in systems but may have more direct contact with clients. **3.25 1.25**

P10. I stay away from discussions about “This is what social work does” and “This is what counselors do”. These discussions lead to turf wars and imply that a profession owns a way of practicing. How we arrive at advocacy work differs based on our professional identities. For instance, the advocacy work counselors do usually stems from their work in the clinical setting. In other words, it is through individual counseling that counselors realize that they need to do advocacy in the community, which is controversial. Whereas, for social workers, their advocacy in the community will often lead them to realize the need to do individual counseling, which isn't controversial of an idea. **3.75 1.63**

P11. In theory, social justice advocacy is similar in the intervention strategies that counselors and social workers are encouraged to utilize in their professional practices. In actual practice, social workers operate from a tradition that supports more advanced advocacy interventions intentionally designed to foster environmental changes intentionally **3.25 2.21**

designed promote justice by creating ecological changes to stimulate health human development in families, schools, universities, workplaces, and communities as well as the broader society where people live and work. Counselors, on the other hand, continue to operate from a tradition that focuses on individual, intrapsychic changes.

Participant Responses for Question Two:

M IR

P3. I try not to proscribe this but hope we can come to the answer in dialogue--I lay the question out there for them: "What is the counselor's role, in ensuring clinical success/meeting the clients' goals? What seems beyond the counselors' scope/role, and according to whom?" (I don't label anything as a social work task). We then discuss the constrictions of our workplaces (e.g., our roles are defined by the systems in which we work, as well as by our supervisors' perceptions and our own fears of taking risks as advocates). I give them the extreme opinions (from systems' change agents, to a solely intrapsychic, client focus), and we explore what these boundaries are/should be.

4 1.63

P4. Social justice advocacy engages counselors in empowering others to self-advocate. I would also inform counselors-in-training that they must also consider the context for advocating for change on behalf of individuals as well as groups. A distinction between social justice advocacy in counseling and social work is found in intervention levels. Counselors advance social justice advocacy at the individual, group, and community levels while social workers, from my perspective, intervene

2.38 1.56

at the individual level, primarily.

P7. Well I am not clear what you are asking but before advocating for a client one should always ask the client and make sure that this is something that the client wants you to do on their behalf. **4.6 1.43**

P8. I am not really into boundaries, sorry! **3.75 1.31**

Participant Responses for Question Three: M IR

P4. Without a doubt, counselors need to learn that our work with and on behalf of others is based on social justice principles. We must teach our students that a counselor's identity is distinguished by our understanding of how systems and institutions affect individuals and that we can best empower and create change by working from a systems approach. **4.38 1.13**

P8. First, have them learn neuroscience, neurobiology, and genetics for it is these fields that most clearly show that a social justice/preventive approach is needed. Their research is far better and more convincing than ours. Most geneticists I read are more into social justice than social workers or counselors. Next, teach them that poverty and oppression are root causes. Teach them that lifestyle interventions are what is needed--more than therapy. Diet, exercise, meditation, etc. are more important than our theories. Get them out in the community and ask them to show results. Even if only a soup kitchen. **4.38 1.13**

P9. By infusing it into as many core and specialty counseling courses as possible with practical applications in the forms of cases. **4.33 1.35**

P10. We need to use new models to better prepare students to integrate **3.25 1.13**

counselor and advocate into their professional identity. Counseling and advocacy need to be seen as 'two sides of the same coin'. You can't do one without the other effectively. To do this we need to train counselor educators on how to prepare students. Currently, counselor educators are not trained to do social justice advocacy work, yet many write about the need to do it. This is an ethical issue in that we have leaders who are not adequately equipped to train students to be able to be good counselors and social justice advocates. Many believe in sj but have not received any training in social justice education.

Participant Responses for Question Four:

M IR

P1. Clearly, in our research endeavors, our publications, the way in that **4.25 1.81**

we teach, the books that we teach and, lastly but not least; our pedagogy. Too many professors still teach from a Banking Method and do not teach in a way that develops critical thinking. By employing problem posing in our classes we begin to draw out our students who have been conditioned to only provide "right" answers.

P3. Through maintaining a primary focus on client **4 2**

wellness/preventative work and, in training, a focus on development of clinical skills related to one-on-one counseling, rather than on diagnosis/pathology (e.g., APA focus) or on policy/lobbying/systems' change and/or case-management work (more social work). Hence, counselors would learn social justice advocacy in a wellness/preventative and strengths-based framework.

P5. I am also concerned about this question as it seems to imply these areas are at odds with each other, which they are not. However, to your question, some ways counselors-in-training can demonstrate social justice advocacy with their emerging professional counselor identity by 1) demonstrating their understanding the varied developmental, contextual, and situational factors that contribute to human wellness, functioning, and disease, 2) demonstrating their knowledge of historical and present-day stressors that many clients encounter on a daily basis, and 3) demonstrating their knowledge of multicultural and social justice competencies, ideally through supervised experiences.	4.38	1.13
P8. Again, not into boundaries, but it should be easy to move ahead of slow-moving tightly-wound psychologists.	2.38	1.27
P9. By requiring them to participate in one of the many advocacy opportunities available through ACA, it's divisions, state and regional organizations.	3.75	1.38
P10. Unfortunately, counselors in training need to go beyond their training to incorporate a social justice perspective into their counseling work because counselor preparation programs continue to focus on how to do individual based work and not how to do community based work. Those in counseling who promote the need to do social justice advocacy work hold the perception of social justice advocacy as office based. This doesn't prepare students for the realities of what clients need. What they need to do instead is take courses and/or gain certification in community	2.4	1.93

activism or public policy.

P11. Counselor education programs need to take leadership in this area **4.13** **1.19**

by reforming their curriculum to include a balanced approach to more effectively address issues relevant to the above question. This can be done by ensuring teaching and learning activities in the classroom, practicum, and internship settings that require specific learning activities which reflect a balance in counseling theories and skills, consultation/collaboration skills, and prevention/ social justice advocacy interventions. This would provide the knowledge and support students need to effectively demonstrate social justice advocacy within their training programs while maintaining a unique counselor identity.

Round Three Data Collection-Second Likert Scale

The survey for round three (Appendix N-Q) was identical to round two and also indicated the median and interquartile range for each item. Panelists were instructed to consider the statistics provided and again rate responses using a five point Likert scale (1=strongly disagree; 5=disagree completely). An email was sent to the 10 remaining participants (1 potential participant dropped out of the study in round 2). This email gave direction on how to access the questionnaire, provided a link to the questionnaire, and a brief overview of the procedure. In addition, this email explained that the resulting statistics from round two would be included with each item and an interquartile range of 1.00 or less indicated consensus for that item. An identical email with the anonymous link generated by Qualtrics was again sent from the researcher's private email account for those participants having difficulty accessing the initial link (Appendix H). A reminder

email was sent approximately one week later (Appendix I). During this round of data collection, the participants responded more slowly than the first round. Only 9 of the 10 remaining participants responded over the course of 5 weeks. During this time, the researcher sent a number of follow up emails and made reminder phone calls to the participants. Although the literature suggests using ten to 15 participants (Stitt-Gohdes, & Crews, 2004; Taylor-Powell, 2002), Taylor-Powell (2002) also noted, “There is very little actual empirical evidence on the effect of the number of participants on the reliability or validity of consensus process” (p. 378). After several days of no response from the last remaining participant, it was decided to move forward with data analysis.

Round Three Data Analysis

As with round 2, data analysis for round 3 consisted of determining the level of agreement and level of consensus for each item using the median and interquartile range. The difference only difference between the round two questionnaire and round three questionnaire was the items on the round 3 questionnaire also included the statistical results (median=M and interquartile range=IR) from round two. These results informed the panelists of the level of consensus for each item (IR) and to what level of agreement (1=strongly disagree, 5=strongly agree) each item reached consensus (M). The interpolation formula for determining the median was again used in this procedure. Like round two, an interquartile range of 1.00 or less demarcated consensus among the panel. Panelists’ responses to the round three survey can be seen in tables 12-15. The median is noted by M and the interquartile range is noted by IR for each response. The items that reached consensus in round three are illustrated in table 16 and the responses for each item that were farthest from consensus are illustrated in table 1.

Table 12

Panelists' Round Three Responses to Question One: What do you believe the differences are between social justice advocacy in counseling and social work functions?

Participant Responses	M	IR
<p>P1. Social Justice Advocacy entails developing the consumer's capacity to develop their subjectivity. As I am not as familiar with social work functions I can not speak to their expectations, however, with counselors, one must consider the consumer's world, including school, family, community, and work to help them identify the specific obstacles to their freedom of movement and self actualization. As counselors our role is not to foster dependency but rather to heighten the conditions by which our consumers whether they are children, youth, adults or families are able to respond to their world in a constructive and conscious manner.</p>	4	.64
<p>P2. I believe there are many similarities. The main differences as I see it are in the areas that counseling and counseling psychology tend to emphasize: career and vocational counseling as well as prevention efforts. I believe that traditionally, social work trains students and practitioners well in terms of systemic interventions whereas traditionally counseling and counseling psychology has not. It is important, I believe, that counselors and counseling psychologists, to fulfill our strength based roots, must be better trained in understanding and intervening at systems levels.</p>	4.14	.64

- P3. Because I am not a social worker, I cannot say what social work functions are. I have learned that many social workers are trained to specifically engage in advocacy through policy work at higher levels (e.g., governmental), while others are trained for more one-on-one clinical work that could entail anything at all (from social justice work to psychotherapy), hence, I believe it depends on the program. I would define social justice advocacy according to use of advocacy to remove any barriers impeding clients in achieving optimal wellness and career, social-emotional, and educational success (Ratts, 2011). **4.14 .64**
- P4. Social justice advocacy is based on principles of equity, inclusion, caring, respect for differences, values of humanitarianism, and protection for those with little means to give voice to themselves. these principles are grounded in the ACA ethical standards and also in the multicultural counseling and social justice competencies. Social Work functions are informed on the principles and ethics of the social work profession. **4.4 .9**
- P5. From my perspective, that of a social justice-oriented counselor, the difference is that counselors consider the contextual circumstances or factors that influence a person's or group's functioning. With appropriate permission, they may act with or on behalf of clients or client groups, to change external barriers to clients' well-being and/or to reach other goals. I have never studied social work as a discipline however having worked with social workers, it seems to me that most **4.4 .9**

social workers also consider people in context. Some connect people with existing system supports, e.g., social services, while others go beyond to advocate for individual clients or groups.

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| <p>P6. In counseling, the goal of social justice is to ensure that everyone has an opportunity to resources such as healthcare, employment, and to achieve optimal mental health. This perspective is grounded in the belief that client problems are largely rooted in oppressive environmental factors. Social advocacy is the act of arguing on behalf of an individual, group, idea or issue to achieve social justice. Social advocacy in counseling refers to acting with and on behalf of one's client or others in the client's system in order to assure fair and equitable treatment. Social work is more remedial with the aim of alleviating the conditions of those in need of help or welfare.</p> | <p>3.94</p> | <p>.56</p> |
| <p>P7. The field of counseling tends to be more oriented towards prevention, education, life span human development and social work tends to be more oriented towards the medical model of helping. The counseling profession has tended towards more of an individual focus and the social work field has tended to focus more on systems and communities.</p> | <p>4.08</p> | <p>.75</p> |
| <p>P8. Good social workers likely do more than counselors, as their training has that orientation.</p> | <p>2.33</p> | <p>1.5</p> |
| <p>P9. Though similar, I see SW as doing systems of care work. Counselor work in systems but may have more direct contact with</p> | <p>3.13</p> | <p>1.38</p> |

clients.

- P10. I stay away from discussions about “This is what social work does” and “This is what counselors do”. These discussions lead to turf wars and implies that a profession owns a way of practicing. How we arrive at advocacy work differs based on our professional identities. For instance, the advocacy work counselors do usually stems from their work in the clinical setting. In other words, it is through individual counseling that counselors realize that they need to do advocacy in the community, which is controversial. Whereas, for social workers, their advocacy in the community will often lead them to realize the need to do individual counseling, which isn't controversial of an idea. **4.08 .75**
- P11. In theory, social justice advocacy is similar in the intervention strategies that counselors and social workers are encouraged to utilize in their professional practices. In actual practice, social workers operate from a tradition that supports more advanced advocacy interventions intentionally designed to foster environmental changes intentionally designed promote justice by creating ecological changes to stimulate health human development in families, schools, universities, workplaces, and communities as well as the broader society where people live and work. Counselors, on the other hand, continue to operate from a tradition that focuses on individual, intrapsychic changes. **3.8 1.5**

Table 13

Panelists' Round Three Responses to Question Two: How would you describe to counselors-in-training the professional boundary between social justice advocacy in counseling and social work?

Participant Responses	M	IR
P1. At the stage in which a counselor has enjoined with their client there is an element of trust that has been created within the relationship. At this point, the counselor provides opportunities to not only acknowledge client strengths but then allows the consumer/client to examine their own subjective reality; this is where the client, themselves, must cross over to understand their own subjective world and the impact it has on them.	3.13	1.13
P2. It depends on the setting in which counselors and social workers are working. I believe there is too much emphasis on defining boundaries because clients don't really care what the title is, as long as their needs are being met. However, practice should be aligned with training. I have worked in settings where both counselors and social workers were seeing the same client population. I have specialized emphasis in career/vocational counseling, this is an area that social workers traditionally do not have training. Because many of the clients I have seen have had issues related to work, this has seemed appropriate for counseling. In terms of social justice advocacy, all disciplines are needed	4.4	.9
P3. I try not to proscribe this but hope we can come to the answer in dialogue--I lay the question out there for them: "What is the counselor's role, in ensuring clinical success/meeting the clients' goals? What seems	3.6	1.1

beyond the counselors' scope/role, and according to whom?" (I don't label anything as a social work task). We then discuss the constrictions of our workplaces (e.g., our roles are defined by the systems in which we work, as well as by our supervisors' perceptions and our own fears of taking risks as advocates). I give them the extreme opinions (from systems' change agents, to a solely intrapsychic, client focus), and we explore what these boundaries are/should be.

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| <p>P4. Social justice advocacy engages counselors in empowering others to self-advocate. I would also inform counselors-in-training that they must also consider the context for advocating for change on behalf of individuals as well as groups. A distinction between social justice advocacy in counseling and social work is found in intervention levels. Counselors advance social justice advocacy at the individual, group, and community levels while social workers, from my perspective, intervene at the individual level, primarily.</p> | <p>3.75 2.42</p> |
| <p>P5. This is a good question. I generally focus on what we - as counselors - do rather than attempting to compare our work or philosophy with others. I prefer to leave descriptions of social work to experts in that field. At the same time, I encourage students to deeply immerse themselves in their field (counseling) while recognizing and respecting allied professionals with whom they will likely work. I see respect and collaboration with members of allied professionals (and other people!) as a core multicultural/social justice competency.</p> | <p>4.4 .9</p> |

P6. Ultimately there is no need for a "boundary" among the sister fields.	4.4	.9
We should ultimately work in concert toward the end of creating a more harmonious society that provides equitable access and equitable participation that is in the best interests of all people. It is a falsehood to assume that there should be clear "boundaries" in the helping fields. This is in fact, not how we work effectively as counseling professionals.		
P7. Well I am not clear what you are asking but before advocating for a client one should always ask the client and make sure that this is something that the client wants you to do on their behalf.	3.8	1.9
P8. I am not really into boundaries, sorry!	4	.75
P9. Not being a Social Worker, I do not know what SW are taught. My counselor a in training learn about the advocacy model that encompasses micro, meso and meta levels of advocacy.	4	.64
P10. I don't think there is a distinction in terms of boundaries because no one profession should own a particular intervention such as advocacy work. Clients don't care whether they are working with a sw or a counselor. All clients care about is whether or not the professional helper can help them get at the root of their problem. Counselors arrive at advocacy from their individual counseling work and social workers arrive at individual counseling through their community based work. In other words, counselors begin with psychology and it leads them to sociology. Social workers begin with sociology and it leads them to psychology.	4.08	.75

P11. I would first describe the unnecessary and artificial boundary that counselor educators and social work faculty members often perpetuate by trying to legitimize such a boundary in an effort to distinguish what in actuality are similar advocacy services provided by counselors and social workers. I would then proceed to describe the various advocacy competencies endorsed by the American Counseling Association and discuss how such competencies complement the advocacy services implemented by social workers.	3.94	.56
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Table 14

Panelists' Round Three Responses to Question Three: As counselor educators, how can we train our students to promote social justice advocacy while maintaining a distinctive counselor identity?

Participant Responses	M	IR
P1. Strength based perspective which includes the work of Bonnie Benard (Resiliency) in which we move away from deficit language that continues to label people of color, LGBTQI, Low SES, etc... and teach our students how to empower our clients to act upon their reality rather than adopting labels that are problematic and subsequently internalized.	4.13	1.13
P2. ACA Advocacy Competencies should be the foundation. Assignments can be developed using the Advocacy Competencies in which students are required to do background research to prepare to identify the appropriate advocacy action and potentially act. Readings that help students understand systemic and ecological frameworks are	4.86	.64

important. In terms of "maintaining distinctive counselor identity" I believe there is too much emphasis on that. I think the problem with that is that counseling training has been too narrow, thus limiting counselors' understanding of broader forces. It is important for counselors to be trained to better partner with colleagues who have other training and expertise.

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| <p>P3. To me, the focus of counseling begins with client work, and aiding clients in accessing every resource necessary to achieving optimal wellness and success (e.g., social, personal, educational, economical). A counseling focus begins and ends with the client's stated goal, rather than with a diagnosis/perspective of pathology or with a focus on external systems. Hence, I recognize that some needed services may be external to the scope of counseling and the counseling setting (and again this is determined by one's job description), and in that case, our job is to put clients in touch with others who can provide those services.</p> | <p>4.08</p> | <p>.75</p> |
| <p>P4. Without a doubt, counselors need to learn that our work with and on behalf of others is based on social justice principles. We must teach our students that a counselor's identity is distinguished by our understanding of how systems and institutions affect individuals and that we can best empower and create change by working from a systems approach.</p> | <p>4</p> | <p>.64</p> |
| <p>P5. This question seems to imply that social justice advocacy and counselor identity are at odds - and that is not the case! Social justice advocacy is foundational to professional counseling. Recognized</p> | <p>4.4</p> | <p>1.1</p> |

founders of professional counseling, including Frank Parsons, Clifford Beers, and Carl Rogers, were social-justice advocates. Students need to know this. Students also need to know that professional counselors, both individually and collectively, were at the forefront of both the multicultural and social justice movements in our field - and allied professions. Therefore, it is my considered perspective that social justice advocacy is integral to a full counselor identity.

P6. Ultimately our "distinctive counselor identity" has quite a bit of overlap with a number of our sister fields. For example, the wellness model in mental health is actually claimed by counseling, counselor education, counseling psychology and social work as a root identity value. Ultimately, the focus should actually be on developing counselors who provide services focused on developing a society where wellness, harmony and cooperation are key. This can be done in concert with our sister fields. Our "counselor identity" should be co-constructed with our sister fields instead of used as a way to clarify turflike "identity" as if we are in competition.	4.6	1.1
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P7. No answer.

P8. First, have them learn neuroscience, neurobiology, and genetics for it is these fields that most clearly show that a social justice/preventive approach is needed. Their research is far better and more convincing than ours. Most geneticists I read are more into social justice than social workers or counselors. Next, teach them that poverty and oppression are	4	.64
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root causes. Teach them that lifestyle interventions are what is needed-- more than therapy. Diet, exercise, meditation, etc. are more important than our theories. Get them out in the community and ask them to show results. Even if only a soup kitchen.

P9. By infusing it into as many core and specialty counseling courses as possible with practical applications in the forms of cases. **4.08 .75**

P10. We need to use new models to better prepare students to integrate counselor and advocate into their professional identity. Counseling and advocacy need to be seen as 'two sides of the same coin'. You can't do one without the other effectively. To do this we need to train counselor educators on how to prepare students. Currently, counselor educators are not trained to do social justice advocacy work, yet many write about the need to do it. This is an ethical issue in that we have leaders who are not adequately equipped to train students to be able to be good counselors and social justice advocates. Many believe in sj but have not received any training in social justice education. **4 .64**

P11. First, as a counselor educator, I assist graduate students in understanding the historical evolution by noting how the genesis of the counseling profession is grounded in the advocacy effort of persons like Frank Parsons and Jesse Davis. I then proceed to explore the historical factors that resulted in counselors acquiring a unique identity that is largely based on ways of providing individual counseling services to stimulate the healthy development of individuals by largely fostering **3.8 1.5**

intrapsychic changes while moving advocacy services to the periphery of their work. I then emphasize that the combination of advocacy and direct counseling services reflects our distinct identity.

Table 15

Panelists' Round Three Responses to Question Four: In what ways can counselors-in-training demonstrate social justice advocacy within their programs while maintaining a unique counselor identity?

Participant Responses	M	IR
<p>P1. Clearly, in our research endeavors, our publications, the way in that we teach, the books that we teach and, lastly but not least; our pedagogy. Too many professors still teach from a Banking Method and do not teach in a way that develops critical thinking. By employing problem posing in our classes we begin to draw out our students who have been conditioned to only provide "right" answers.</p>	3.92	.75
<p>P2. Again, using the ACA Advocacy Competencies should be central, this is from the profession and uses the type of expertise that is central to counseling training as well as to expand the areas needed for advocacy action. Trainees can demonstrate social justice advocacy through applying each of the 6 domains of the Advocacy Competencies to cases and their internship sites.</p>	4.25	.75
<p>P3. Through maintaining a primary focus on client wellness/preventative work and, in training, a focus on development of clinical skills related to one-on-one counseling, rather than on diagnosis/pathology (e.g., APA</p>	3.88	1.88

focus) or on policy/lobbying/systems' change and/or case-management work (more social work). Hence, counselors would learn social justice advocacy in a wellness/preventative and strengths-based framework.

P4. There can be opportunities, introduced by faculty, that provide encounters for counselors-in-training. The latter, through service learning opportunities can engage in community-based projects that empower and support communities and special projects. For example, counselors might do volunteerism at a gerontological center or one working with military families and children. **3.94 .56**

P5. I am also concerned about this question as it seems to imply these areas are at odds with each other, which they are not. However, to your question, some ways counselors-in-training can demonstrate social justice advocacy with their emerging professional counselor identity by 1) demonstrating their understanding the varied developmental, contextual, and situational factors that contribute to human wellness, functioning, and disease, 2) demonstrating their knowledge of historical and present-day stressors that many clients encounter on a daily basis, and 3) demonstrating their knowledge of multicultural and social justice competencies, ideally through supervised experiences. **4.4 .9**

P6. Counselors-in-training should work on paying attention to cultural and contextual issues underlying the challenges our clients face. The process of achieving social justice should be one that is participatory in nature and one that considers the community in which clients live as **4.4 .9**

opposed to considering our clients as islands. This holistic wellness approach is at its very roots counseling identity and simultaneously social justice advocacy.

P7. No answer.	----	----
P8. Again, not into boundaries, but it should be easy to move ahead of slow-moving tightly-wound psychologists.	3	1.83
P9. By requiring them to participate in one of the many advocacy opportunities available through ACA, it's divisions, state and regional organizations.	3.38	1.13
P10. Unfortunately, counselors in training need to go beyond their training to incorporate a social justice perspective into their counseling work because counselor preparation programs continue to focus on how to do individual based work and not how to do community based work. Those in counseling who promote the need to do social justice advocacy work hold the perception of social justice advocacy as office based. This don't prepare students for the realities of what clients need. What they need to do instead is take courses and/or gain certification in community activism or public policy.	3.75	1.25
P11. Counselor education programs need to take leadership in this area by reforming their curriculum to include a balanced approach to more effectively address issues relevant to the above question. This can be done by ensuring teaching and learning activities in the classroom, practicum, and internship settings that require specific learning activities	4.14	.64

which reflect a balance in counseling theories and skills, consultation/collaboration skills, and prevention/ social justice advocacy interventions. This would provide the knowledge and support students need to effectively demonstrate social justice advocacy within their training programs while maintaining a unique counselor identity.

Table 16

Consensus After Round 3

Participant Responses for Question One:	M	IR
<p>P1. Social Justice Advocacy entails developing the consumer's capacity to develop their subjectivity. As I am not as familiar with social work functions I can not speak to their expectations, however, with counselors, one must consider the consumer's world, including school, family, community, and work to help them identify the specific obstacles to their freedom of movement and self actualization. As counselors our role is not to foster dependency but rather to heighten the conditions by which our consumers whether they are children, youth, adults or families are able to respond to their world in a constructive and conscious manner.</p>	4	.64
<p>P2. I believe there are many similarities. The main differences as I see it are in the areas that counseling and counseling psychology tend to emphasize: career and vocational counseling as well as prevention efforts. I believe that traditionally, social work trains students and practitioners well in terms of systemic interventions whereas traditionally counseling</p>	4.14	.64

and counseling psychology has not. It is important, I believe, that counselors and counseling psychologists, to fulfill our strength based roots, must be better trained in understanding and intervening at systems levels.

- P3. Because I am not a social worker, I cannot say what social work functions are. I have learned that many social workers are trained to specifically engage in advocacy through policy work at higher levels (e.g., governmental), while others are trained for more one-on-one clinical work that could entail anything at all (from social justice work to psychotherapy), hence, I believe it depends on the program. I would define social justice advocacy according to use of advocacy to remove any barriers impeding clients in achieving optimal wellness and career, social-emotional, and educational success (Ratts, 2011). **4.14 .64**
- P4. Social justice advocacy is based on principles of equity, inclusion, caring, respect for differences, values of humanitarianism, and protection for those with little means to give voice to themselves. these principles are grounded in the ACA ethical standards and also in the multicultural counseling and social justice competencies. Social Work functions are informed on the principles and ethics of the social work profession. **4.4 .9**
- P5. From my perspective, that of a social justice-oriented counselor, the difference is that counselors consider the contextual circumstances or factors that influence a person's or group's functioning. With appropriate permission, they may act with or on behalf of clients or client groups, to **4.4 .9**

change external barriers to clients' well-being and/or to reach other goals.

I have never studied social work as a discipline however having worked with social workers, it seems to me that most social workers also consider people in context. Some connect people with existing system supports, e.g., social services, while others go beyond to advocate for individual clients or groups.

P6. In counseling, the goal of social justice is to ensure that everyone has **3.94** **.56**
 an opportunity to resources such as healthcare, employment, and to achieve optimal mental health. This perspective is grounded in the belief that client problems are largely rooted in oppressive environmental factors. Social advocacy is the act of arguing on behalf of an individual, group, idea or issue to achieve social justice. Social advocacy in counseling refers to acting with and on behalf of one's client or others in the client's system in order to assure fair and equitable treatment. Social work is more remedial with the aim of alleviating the conditions of those in need of help or welfare.

P1. Social Justice Advocacy entails developing the consumer's capacity to **4** **.64**
 develop their subjectivity. As I am not as familiar with social work functions I can not speak to their expectations, however, with counselors, one must consider the consumer's world, including school, family, community, and work to help them identify the specific obstacles to their freedom of movement and self actualization. As counselors our role is not to foster dependency but rather to heighten the conditions by which our

consumers whether they are children, youth, adults or families are able to respond to their world in a constructive and conscious manner.

P10. I stay away from discussions about “This is what social work does” **4.08** **.75**
and “This is what counselors do”. These discussions lead to turf wars and implies that a profession owns a way of practicing. How we arrive at advocacy work differs based on our professional identities. For instance, the advocacy work counselors do usually stems from their work in the clinical setting. In other words, it is through individual counseling that counselors realize that they need to do advocacy in the community, which is controversial. Whereas, for social workers, their advocacy in the community will often lead them to realize the need to do individual counseling, which isn't controversial of an idea.

Participant Responses for Question Two:

M IR

P2. It depends on the setting in which counselors and social workers are **4.4** **.9**
working. I believe there is too much emphasis on defining boundaries because clients don't really care what the title is, as long as their needs are being met. However, practice should be aligned with training. I have worked in settings where both counselors and social workers were seeing the same client population. I have specialized emphasis in career/vocational counseling, this is an area that social workers traditionally do not have training. Because many of the clients I have seen have had issues related to work, this has seemed appropriate for

counseling. In terms of social justice advocacy, all disciplines are needed

P6. Ultimately there is no need for a "boundary" among the sister fields. **4.4 .9**

We should ultimately work in concert toward the end of creating a more harmonious society that provides equitable access and equitable participation that is in the best interests of all people. It is a falsehood to assume that there should be clear "boundaries" in the helping fields. This is in fact, not how we work effectively as counseling professionals.

P8. I am not really into boundaries, sorry! **4 .75**

P9. Not being a Social Worker, I do not know what SW are taught. My counselor a in training learn about the advocacy model that encompasses micro, meso and meta levels of advocacy. **4 .64**

P10. I don't think there is a distinction in terms of boundaries because no one profession should own a particular intervention such as advocacy work. Clients don't care whether they are working with a sw or a counselor. All clients care about is whether or not the professional helper can help them get at the root of their problem. Counselors arrive at advocacy from their individual counseling work and social workers arrive at individual counseling through their community based work. In other words, counselors begin with psychology and it leads them to sociology. Social workers begin with sociology and it leads them to psychology. **4.08 .75**

P11. I would first describe the unnecessary and artificial boundary that counselor educators and social work faculty members often perpetuate by trying to legitimize such a boundary in an effort to distinguish what in **3.94 .56**

actuality are similar advocacy services provided by counselors and social workers. I would then proceed to describe the various advocacy competencies endorsed by the American Counseling Association and discuss how such competencies complement the advocacy services implemented by social workers.

P5. This is a good question. I generally focus on what we - as counselors - do rather than attempting to compare our work or philosophy with others. I prefer to leave descriptions of social work to experts in that field. At the same time, I encourage students to deeply immerse themselves in their field (counseling) while recognizing and respecting allied professionals with whom they will likely work. I see respect and collaboration with members of allied professionals (and other people!) as a core multicultural/social justice competency.

Participant Responses for Question Three:

M IR

P2. ACA Advocacy Competencies should be the foundation. **4.86 .64**

Assignments can be developed using the Advocacy Competencies in which students are required to do background research to prepare to identify the appropriate advocacy action and potentially act. Readings that help students understand systemic and ecological frameworks are important. In terms of "maintaining distinctive counselor identity" I believe there is too much emphasis on that. I think the problem with that is that counseling training has been too narrow, thus limiting counselors'

understanding of broader forces. It is important for counselors to be trained to better partner with colleagues who have other training and expertise.

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|--|---------------------------|
| <p>P3. To me, the focus of counseling begins with client work, and aiding clients in accessing every resource necessary to achieving optimal wellness and success (e.g., social, personal, educational, economical). A counseling focus begins and ends with the client's stated goal, rather than with a diagnosis/perspective of pathology or with a focus on external systems. Hence, I recognize that some needed services may be external to the scope of counseling and the counseling setting (and again this is determined by one's job description), and in that case, our job is to put clients in touch with others who can provide those services.</p> | <p>4.08 .75</p> |
| <p>P4. Without a doubt, counselors need to learn that our work with and on behalf of others is based on social justice principles. We must teach our students that a counselor's identity is distinguished by our understanding of how systems and institutions affect individuals and that we can best empower and create change by working from a systems approach.</p> | <p>4 .64</p> |
| <p>P8. First, have them learn neuroscience, neurobiology, and genetics for it is these fields that most clearly show that a social justice/preventive approach is needed. Their research is far better and more convincing than ours. Most geneticists I read are more into social justice than social workers or counselors. Next, teach them that poverty and oppression are root causes. Teach them that lifestyle interventions are what is needed--</p> | <p>4 .64</p> |

more than therapy. Diet, exercise, meditation, etc. are more important than our theories. Get them out in the community and ask them to show results. Even if only a soup kitchen.

P9. By infusing it into as many core and specialty counseling courses as possible with practical applications in the forms of cases. **4.08 .75**

P10. We need to use new models to better prepare students to integrate counselor and advocate into their professional identity. Counseling and advocacy need to be seen as 'two sides of the same coin'. You can't do one without the other effectively. To do this we need to train counselor educators on how to prepare students. Currently, counselor educators are not trained to do social justice advocacy work, yet many write about the need to do it. This is an ethical issue in that we have leaders who are not adequately equipped to train students to be able to be good counselors and social justice advocates. Many believe in sj but have not received any training in social justice education. **4 .64**

Participant Responses for Question Four:

M IR

P1. Clearly, in our research endeavors, our publications, the way in that we teach, the books that we teach and, lastly but not least; our pedagogy. Too many professors still teach from a Banking Method and do not teach in a way that develops critical thinking. By employing problem posing in our classes we begin to draw out our students who have been conditioned to only provide "right" answers. **3.92 .75**

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|---|--------------------|-------------------|
| <p>P2. Again, using the ACA Advocacy Competencies should be central, this is from the profession and uses the type of expertise that is central to counseling training as well as to expand the areas needed for advocacy action. Trainees can demonstrate social justice advocacy through applying each of the 6 domains of the Advocacy Competencies to cases and their internship sites.</p> | <p>4.25</p> | <p>.75</p> |
| <p>P4. There can be opportunities, introduced by faculty, that provide encounters for counselors-in-training. The latter, through service learning opportunities can engage in community-based projects that empower and support communities and special projects. For example, counselors might do volunteerism at a gerontological center or one working with military families and children.</p> | <p>3.94</p> | <p>.56</p> |
| <p>P5. I am also concerned about this question as it seems to imply these areas are at odds with each other, which they are not. However, to your question, some ways counselors-in-training can demonstrate social justice advocacy with their emerging professional counselor identity by 1) demonstrating their understanding the varied developmental, contextual, and situational factors that contribute to human wellness, functioning, and disease, 2) demonstrating their knowledge of historical and present-day stressors that many clients encounter on a daily basis, and 3) demonstrating their knowledge of multicultural and social justice competencies, ideally through supervised experiences.</p> | <p>4.4</p> | <p>.9</p> |
| <p>P6. Counselors-in-training should work on paying attention to cultural</p> | <p>4.4</p> | <p>.9</p> |

and contextual issues underlying the challenges our clients face. The process of achieving social justice should be one that is participatory in nature and one that considers the community in which clients live as opposed to considering our clients as islands. This holistic wellness approach is at its very roots counseling identity and simultaneously social justice advocacy.

P11. Counselor education programs need to take leadership in this area by **4.14** **.64** reforming their curriculum to include a balanced approach to more effectively address issues relevant to the above question. This can be done by ensuring teaching and learning activities in the classroom, practicum, and internship settings that require specific learning activities which reflect a balance in counseling theories and skills, consultation/collaboration skills, and prevention/ social justice advocacy interventions. This would provide the knowledge and support students need to effectively demonstrate social justice advocacy within their training programs while maintaining a unique counselor identity.

Table 17

Farthest From Consensus After Round 3

Participant Responses for Question One:	M	IR
P8. Good social workers likely do more than counselors, as their training has that orientation.	2.33	1.5
P9. Though similar, I see SW as doing systems of care work. Counselor	3.13	1.38

work in systems but may have more direct contact with clients.

P11. In theory, social justice advocacy is similar in the intervention strategies that counselors and social workers are encouraged to utilize in their professional practices. In actual practice, social workers operate from a tradition that supports more advanced advocacy interventions intentionally designed to foster environmental changes intentionally designed promote justice by creating ecological changes to stimulate health human development in families, schools, universities, workplaces, and communities as well as the broader society where people live and work. Counselors, on the other hand, continue to operate from a tradition that focuses on individual, intrapsychic changes.

3.8 1.5

Participant Responses for Question Two:

	M	IR
P1. At the stage in which a counselor has enjoined with their client there is an element of trust that has been created within the relationship. At this point, the counselor provides opportunities to not only acknowledge client strengths but then allows the consumer/client to examine their own subjective reality; this is where the client, themselves, must cross over to understand their own subjective world and the impact it has on them.	3.13	1.13
P3. I try not to proscribe this but hope we can come to the answer in dialogue--I lay the question out there for them: "What is the counselor's role, in ensuring clinical success/meeting the clients' goals? What seems beyond the counselors' scope/role, and according to whom?" (I don't label anything as a social work task). We then discuss the constrictions of our	3.6	1.1

workplaces (e.g., our roles are defined by the systems in which we work, as well as by our supervisors' perceptions and our own fears of taking risks as advocates). I give them the extreme opinions (from systems' change agents, to a solely intrapsychic, client focus), and we explore what these boundaries are/should be.

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|---|-------------|-------------|
| P4. Social justice advocacy engages counselors in empowering others to self-advocate. I would also inform counselors-in-training that they must also consider the context for advocating for change on behalf of individuals as well as groups. A distinction between social justice advocacy in counseling and social work is found in intervention levels. Counselors advance social justice advocacy at the individual, group, and community levels while social workers, from my perspective, intervene at the individual level, primarily. | 3.75 | 2.42 |
| P7. Well I am not clear what you are asking but before advocating for a client one should always ask the client and make sure that this is something that the client wants you to do on their behalf. | 3.8 | 1.9 |

Participant Responses for Question Three:

- | | M | IR |
|---|-------------|-------------|
| P1. Strength based perspective which includes the work of Bonnie Benard (Resiliency) in which we move away from deficit language that continues to label people of color, LGBTQI, Low SES, etc... and teach our students how to empower our clients to act upon their reality rather than adopting labels that are problematic and subsequently internalized. | 4.13 | 1.13 |
| P5. This question seems to imply that social justice advocacy and | 4.4 | 1.1 |

counselor identity are at odds - and that is not the case! Social justice advocacy is foundational to professional counseling. Recognized founders of professional counseling, including Frank Parsons, Clifford Beers, and Carl Rogers, were social-justice advocates. Students need to know this. Students also need to know that professional counselors, both individually and collectively, were at the forefront of both the multicultural and social justice movements in our field - and allied professions. Therefore, it is my considered perspective that social justice advocacy is integral to a full counselor identity.

P6. Ultimately our "distinctive counselor identity" has quite a bit of overlap with a number of our sister fields. For example, the wellness model in mental health is actually claimed by counseling, counselor education, counseling psychology and social work as a root identity value. Ultimately, the focus should actually be on developing counselors who provide services focused on developing a society where wellness, harmony and cooperation are key. This can be done in concert with our sister fields. Our "counselor identity" should be co-constructed with our sister fields instead of used as a way to clarify turflike "identity" as if we are in competition.

4.6 1.1

P11. First, as a counselor educator, I assist graduate students in understanding the historical evolution by noting how the genesis of the counseling profession is grounded in the advocacy effort of persons like Frank Parsons and Jesse Davis. I then proceed to explore the historical

3.8 1.5

factors that resulted in counselors acquiring a unique identity that is largely based on ways of providing individual counseling services to stimulate the healthy development of individuals by largely fostering intrapsychic changes while moving advocacy services to the periphery of their work. I then emphasize that the combination of advocacy and direct counseling services reflects our distinct identity.

Participant Responses for Question Four:

	M	IR
P3. Through maintaining a primary focus on client wellness/preventative work and, in training, a focus on development of clinical skills related to one-on-one counseling, rather than on diagnosis/pathology (e.g., APA focus) or on policy/lobbying/systems' change and/or case-management work (more social work). Hence, counselors would learn social justice advocacy in a wellness/preventative and strengths-based framework.	3.88	1.88
P8. Again, not into boundaries, but it should be easy to move ahead of slow-moving tightly-wound psychologists.	3	1.83
P9. By requiring them to participate in one of the many advocacy opportunities available through ACA, it's divisions, state and regional organizations.	3.38	1.13
P10. Unfortunately, counselors in training need to go beyond their training to incorporate a social justice perspective into their counseling work because counselor preparation programs continue to focus on how to do individual based work and not how to do community based work. Those in counseling who promote the need to do social justice advocacy	3.75	1.25

work hold the perception of social justice advocacy as office based. This doesn't prepare students for the realities of what clients need. What they need to do instead is take courses and/or gain certification in community activism or public policy.

CHAPTER 5

DISCUSSION

Summary

The purpose of this study was to investigate a panel of experts' opinions and explanations distinguishing social justice advocacy in counseling from social work functions. The current inquiry delivered a preliminary exploration and analysis of the unique facets of social justice advocacy in counseling as distinguished from social work functions. The following research questions guided this investigation:

1. What are the beliefs of a panel of experts regarding how social justice advocacy is incorporated into counseling's professional identity in a way that is distinct from Social Work?
2. In which capacities, if any, can consensus of opinion be reached about distinguishing social justice advocacy in counseling from social work functions?

The Delphi method was chosen to attain an assortment of expert observations and beliefs concerning social justice advocacy in counseling and how it may be distinguished from social work functions. While the open-ended queries invited a rich opportunity for understanding the participants' viewpoints, this approach also facilitated quantitative analysis of data. The compilation of the Delphi expert panel encompassed counselor educators who are also scholars of social justice advocacy in counseling. With the intent to have the panelists reach consensus on their responses, three rounds of data collection were implemented. An interquartile range of less than or equal to 1.0 demarcated having reached consensus. Twenty-seven items reached consensus.

Findings

This chapter offers an evaluation of the findings from this Delphi study that explored how social justice advocacy in counseling may be distinguished from social work functions. In order to make meaning of the discoveries gleaned from this research, attention is given to items that reached consensus (an interquartile range of 1.0 or less), as well as items farthest from consensus. The responses from each of the four open-ended questions with the most wide-ranging scores on the Likert rating scale are indicated as farthest from consensus. The discussion acknowledges pertinent themes, considers explanations for having reached consensus or not, and interprets results in light of the recent social justice movement in the counseling profession. Lastly, recommendations for future research as well as concluding remarks are delivered.

Question One

“What do you believe the differences are between social justice advocacy in counseling and social work functions?” Seven responses reached consensus:

P1. Social Justice Advocacy entails developing the consumer's capacity to **4** **.64**
develop their subjectivity. As I am not as familiar with social work
functions I can not speak to their expectations, however, with counselors,
one must consider the consumer's world, including school, family,
community, and work to help them identify the specific obstacles to their
freedom of movement and self actualization. As counselors our role is not
to foster dependency but rather to heighten the conditions by which our
consumers whether they are children, youth, adults or families are able to
respond to their world in a constructive and conscious manner.

- P2. I believe there are many similarities. The main differences as I see it are in the areas that counseling and counseling psychology tend to emphasize: career and vocational counseling as well as prevention efforts. I believe that traditionally, social work trains students and practitioners well in terms of systemic interventions whereas traditionally counseling and counseling psychology has not. It is important, I believe, that counselors and counseling psychologists, to fulfill our strength based roots, must be better trained in understanding and intervening at systems levels. **4.14 .64**
- P3. Because I am not a social worker, I cannot say what social work functions are. I have learned that many social workers are trained to specifically engage in advocacy through policy work at higher levels (e.g., governmental), while others are trained for more one-on-one clinical work that could entail anything at all (from social justice work to psychotherapy), hence, I believe it depends on the program. I would define social justice advocacy according to use of advocacy to remove any barriers impeding clients in achieving optimal wellness and career, social-emotional, and educational success (Ratts, 2011). **4.14 .64**
- P4. Social justice advocacy is based on principles of equity, inclusion, caring, respect for differences, values of humanitarianism, and protection for those with little means to give voice to themselves. these principles are grounded in the ACA ethical standards and also in the multicultural counseling and social justice competencies. Social Work functions are **4.4 .9**

informed on the principles and ethics of the social work profession.

P5. From my perspective, that of a social justice-oriented counselor, the **4.4 .9**

difference is that counselors consider the contextual circumstances or factors that influence a person's or group's functioning. With appropriate permission, they may act with or on behalf of clients or client groups, to change external barriers to clients' well-being and/or to reach other goals. I have never studied social work as a discipline however having worked with social workers, it seems to me that most social workers also consider people in context. Some connect people with existing system supports, e.g., social services, while others go beyond to advocate for individual clients or groups.

P6. In counseling, the goal of social justice is to ensure that everyone has **3.94 .56**

an opportunity to resources such as healthcare, employment, and to achieve optimal mental health. This perspective is grounded in the belief that client problems are largely rooted in oppressive environmental factors. Social advocacy is the act of arguing on behalf of an individual, group, idea or issue to achieve social justice. Social advocacy in counseling refers to acting with and on behalf of one's client or others in the client's system in order to assure fair and equitable treatment. Social work is more remedial with the aim of alleviating the conditions of those in need of help or welfare.

P10. I stay away from discussions about "This is what social work does" **4.08 .75**

and "This is what counselors do". These discussions lead to turf wars and

implies that a profession owns a way of practicing. How we arrive at advocacy work differs based on our professional identities. For instance, the advocacy work counselors do usually stems from their work in the clinical setting. In other words, it is through individual counseling that counselors realize that they need to do advocacy in the community, which is controversial. Whereas, for social workers, their advocacy in the community will often lead them to realize the need to do individual counseling, which isn't controversial of an idea.

All seven responses reached consensus around agreement on the statements expressed above. The panel agreed while social justice advocacy in counseling and social work functions may have many similarities, a counselor's primary focus centers around helping clients to remove barriers to achieving optimal wellness and self-actualization within their context, oftentimes through the use of social justice advocacy. Overall, this is consistent with the literature in that both professions share nearly identical education requirements, sans social policy (social work) and career development (counseling). It is important to note both professions' academic standards include elements of social justice and advocacy (CACREP, 2009; CSWE, 2008) as well as ethical standards including these elements (American Counseling Association, 2005; Counselors for Social Justice, 2011; National Association of Social Workers, 2008). One statement noted social work is different from counseling because it focuses on remedial issues with the aim of alleviating the conditions of those in need of help or welfare. However, the Council on Social Work Education (2008) claims a more expansive purpose of social work that encompasses the promotion of well-being and the prevention of violations

against human rights. Another item described, more specifically, the differences between the two professions' approaches to advocacy may be found in their avenues of arrival. For instance, counselors' advocacy work usually stems from awareness of issues gained in their clinical work, whereas social workers' individual clinical work stems from their contact gained through advocacy in the community. While this may be accurate in most cases, a study done by the National Association of Social Workers (2006) found many practicing social workers do not perceive social justice as central to their professional identities, especially those interested in private practice, which many are. Nonetheless, many counseling practitioners hold the belief their profession operates on a micro level while social work operates at the macro level (Mellin, Hunt, & Nichols, 2011). If counseling practitioners wish to incorporate social justice advocacy into their professional identity, the panel's responses suggest they begin with looking at the social issues of their caseloads.

Training and professional ethics were also highlighted in these responses as distinguishing differences between counselors and social workers in regards to social justice advocacy. The panel agreed social workers have traditionally been better trained in systemic interventions than counselors, and they agreed this lack of training needs to change. Furthermore, the panel agreed each profession's ethical standards guide how that profession approaches social justice advocacy. This idea makes logical sense as Feit and Lloyd (1990) define training and ethical standards as two defining characteristics of a profession. However, the training standards for both professions (CSWE, 2006; CACREP, 2009) are more similar than different, and the ethical standards put forth by

ACA's division of Counselors for Social Justice (2011) are even more similar to the ethical standards of social workers adding to the confusion (NASW, 2008).

The items farthest from consensus were:

P8. Good social workers likely do more than counselors, as their training has that orientation. **2.33 1.5**

P11. In theory, social justice advocacy is similar in the intervention strategies that counselors and social workers are encouraged to utilize in their professional practices. In actual practice, social workers operate from a tradition that supports more advanced advocacy interventions intentionally designed to foster environmental changes, intentionally designed to promote justice by creating ecological changes to stimulate healthy human development in families, schools, universities, workplaces, and communities as well as the broader society where people live and work. Counselors, on the other hand, continue to operate from a tradition that focuses on individual, intra-psychic changes. **3.8 1.5**

These two items were equally far away from consensus. Both responses insinuated social workers are better at social justice advocacy than counselors are. P8 touched on the training discrepancy, an idea that reached consensus in this section. However, the lack of consensus for this item is likely due to the implication social workers do more social justice advocacy than counselors do. The panel also did not come to consensus about current counseling practitioners continuing to function from a tradition of individual, intra-psychic change instead of social justice advocacy work. In contrast, the practitioners interviewed by Mellin et al. (2011) disclosed they actually do

continue to operate from an intra-psycho philosophy. While the panelists did not all disagree with this statement, their lack of consensus is revealing and lends support to Hunsaker's (2011) claim of social justice advocacy in counseling being a movement among academics, leaving many counseling practitioners with little understanding of how to incorporate social justice into their work and looking to social workers as being the social justice advocates of helping professionals, a notion corroborated by Mellin et al.'s (2011) study. It would seem proponents of the social justice advocacy movement in counseling would benefit from building bridges from academia to the realm of practitioners.

Question Two

"How would you describe to counselors-in-training the professional boundary between social justice advocacy in counseling and social work?" Seven items reached consensus:

P2. It depends on the setting in which counselors and social workers are 4.4 .9
 working. I believe there is too much emphasis on defining boundaries
 because clients don't really care what the title is, as long as their needs are
 being met. However, practice should be aligned with training. I have
 worked in settings where both counselors and social workers were seeing
 the same client population. I have specialized emphasis in
 career/vocational counseling, this is an area that social workers
 traditionally do not have training. Because many of the clients I have seen
 have had issues related to work, this has seemed appropriate for
 counseling. In terms of social justice advocacy, all disciplines are needed

P6. Ultimately there is no need for a "boundary" among the sister fields. We should ultimately work in concert toward the end of creating a more harmonious society that provides equitable access and equitable participation that is in the best interests of all people. It is a falsehood to assume that there should be clear "boundaries" in the helping fields. This is in fact, not how we work effectively as counseling professionals.	4.4	.9
P8. I am not really into boundaries, sorry!	4	.75
P9. Not being a Social Worker, I do not know what SW are taught. My counselors in training learn about the advocacy model that encompasses micro, meso and meta levels of advocacy.	4	.64
P10. I don't think there is a distinction in terms of boundaries because no one profession should own a particular intervention such as advocacy work. Clients don't care whether they are working with a sw or a counselor. All clients care about is whether or not the professional helper can help them get at the root of their problem. Counselors arrive at advocacy from their individual counseling work and social workers arrive at individual counseling through their community based work. In other words, counselors begin with psychology and it leads them to sociology. Social workers begin with sociology and it leads them to psychology.	4.08	.75
P11. I would first describe the unnecessary and artificial boundary that counselor educators and social work faculty members often perpetuate by trying to legitimize such a boundary in an effort to distinguish what in actuality are similar advocacy services provided by counselors and social	3.94	.56

workers. I would then proceed to describe the various advocacy competencies endorsed by the American Counseling Association and discuss how such competencies complement the advocacy services implemented by social workers.

P5. This is a good question. I generally focus on what we - as counselors **4.4 .9**

- do rather than attempting to compare our work or philosophy with others. I prefer to leave descriptions of social work to experts in that field.

At the same time, I encourage students to deeply immerse themselves in their field (counseling) while recognizing and respecting allied professionals with whom they will likely work. I see respect and collaboration with members of allied professionals (and other people!) as a core multicultural/social justice competency.

The idea of counselors arriving at advocacy through their clinical work and social workers arriving at clinical work through their community-based work was once again agreed upon. Although five of the seven responses expressed negative views about the emphasis on defining boundaries between the helping professions, the panel agreed teaching students about inter-professional collaboration and the ACA Advocacy competencies are important components of counselor training. This use of Lewis et al.'s (2003) Advocacy Competencies as a tool to describe to counselors-in-training the professional boundary between social justice advocacy in counseling and social work is an answer to half of the question. While these competencies are specific to the counseling and separate from social work, a recommendation to use the competencies does not address the boundary between social justice advocacy in counseling and social work

functions. This is not surprising as the panel strongly advocated for not defining boundaries between the two fields, as evidenced by the panelists' overt statements found in Table 18.

Table 18

Panelists' Statements from Question Two Advocating for No Boundaries Between Helping Professions

P2 stated, "I believe there is too much emphasis on defining boundaries because clients don't really care what the title is, as long as their needs are being met."

P6 stated, "Ultimately there is no need for a 'boundary' among the sister fields. It is a falsehood to assume that there should be clear "boundaries" in the helping fields."

P8 exclaimed, "I am not really into boundaries, sorry!"

P10 stated, "I don't think there is a distinction in terms of boundaries because no one profession should own a particular intervention such as advocacy work."

P11 stated, "I would first describe the unnecessary and artificial boundary that counselor educators and social work faculty members often perpetuate by trying to legitimize such a boundary in an effort to distinguish what in actuality are similar advocacy services provided by counselors and social workers."

Furthermore, it is significant to highlight the panel also agreed on not being acquainted with social worker functions, a sentiment also expressed in a consensus item from question one. The literature suggested this lack of knowledge is a barrier to the panel's suggestion of teaching inter-professional collaboration. For example, Mellin et al. (2011) postulated the imperative need for counselors to have an accurate knowledge of what other professions can offer to be able to appropriately collaborate with them. An increased knowledge of social work functions is necessary for counselor educators to

move forward with the panel's recommendation of teaching about inter-professional collaboration to future counselors.

The item farthest from consensus was:

P4. Social justice advocacy engages counselors in empowering others to self-advocate. I would also inform counselors-in-training that they must also consider the context for advocating for change on behalf of individuals as well as groups. A distinction between social justice advocacy in counseling and social work is found in intervention levels. Counselors advance social justice advocacy at the individual, group, and community levels while social workers, from my perspective, intervene at the individual level, primarily.

3.75 2.42

This statement posits a counselor's role in social justice advocacy is to empower others to self-advocate. As far as distinguishing the boundary between social justice advocacy in counseling and social work functions for students, this counselor educator noted that he or she would describe social justice advocacy in counseling as having multiple intervention levels as opposed to social workers primarily intervening at the individual level. However, this statement is lacking consensus most likely because it contradicts the various expressions of contempt for defining boundaries between the two sister fields.

Question Three

"As counselor educators, how can we train our students to promote social justice advocacy while maintaining a distinctive counselor identity?" Six items reached consensus:

P2. ACA Advocacy Competencies should be the foundation. **4.86 .64**

Assignments can be developed using the Advocacy Competencies in which students are required to do background research to prepare to identify the appropriate advocacy action and potentially act. Readings that help students understand systemic and ecological frameworks are important. In terms of "maintaining distinctive counselor identity" I believe there is too much emphasis on that. I think the problem with that is that counseling training has been too narrow, thus limiting counselors' understanding of broader forces. It is important for counselors to be trained to better partner with colleagues who have other training and expertise.

P3. To me, the focus of counseling begins with client work, and aiding clients in accessing every resource necessary to achieving optimal wellness and success (e.g., social, personal, educational, economical). A counseling focus begins and ends with the client's stated goal, rather than with a diagnosis/perspective of pathology or with a focus on external systems. Hence, I recognize that some needed services may be external to the scope of counseling and the counseling setting (and again this is determined by one's job description), and in that case, our job is to put clients in touch with others who can provide those services. **4.08 .75**

P4. Without a doubt, counselors need to learn that our work with and on behalf of others is based on social justice principles. We must teach our students that a counselor's identity is distinguished by our understanding **4 .64**

of how systems and institutions affect individuals and that we can best empower and create change by working from a systems approach.

P8. First, have them learn neuroscience, neurobiology, and genetics for it **4 .64**
 is these fields that most clearly show that a social justice/preventive approach is needed. Their research is far better and more convincing than ours. Most geneticists I read are more into social justice than social workers or counselors. Next, teach them that poverty and oppression are root causes. Teach them that lifestyle interventions are what is needed-- more than therapy. Diet, exercise, meditation, etc. are more important than our theories. Get them out in the community and ask them to show results. Even if only a soup kitchen.

P9. By infusing it into as many core and specialty counseling courses as **4.08 .75**
 possible with practical applications in the forms of cases.

P10. We need to use new models to better prepare students to integrate **4 .64**
 counselor and advocate into their professional identity. Counseling and advocacy need to be seen as 'two sides of the same coin'. You can't do one without the other effectively. To do this we need to train counselor educators on how to prepare students. Currently, counselor educators are not trained to do social justice advocacy work, yet many write about the need to do it. This is an ethical issue in that we have leaders who are not adequately equipped to train students to be able to be good counselors and social justice advocates. Many believe in sj but have not received any training in social justice education.

All of the responses to question three were agreed upon. One response expressed there being too much of an emphasis on maintaining a distinctive counselor identity, an attitude in contradiction with ACA's initiative to strengthen professional identity. However, the panel offered various suggestions for ways counselor educators can train students to promote social justice advocacy while maintaining a distinctive counselor identity. From this set of consensus items, the relevant recommendations include the following:

1. Teach students practical application through case vignettes and service learning projects,
2. Teach social justice theories,
3. Teach students the ACA Advocacy Competencies and base assignments on these competencies,
4. Emphasize the importance of inter-professional collaboration, and
5. Infuse social justice into as many courses as possible.

These suggestions for teaching students to promote social justice advocacy are all oriented towards practical knowledge and skills in various aspects of counseling. These recommendations complement CACREP's (2009) emphasis on student learning outcomes whereby counseling programs are asked to show evidence of each student's progress and development as a counselor.

Another response implied the need for training counselor educators in elements of social justice education. This response noted while many counselor educators are currently talking and writing about social justice, few of them know how to impart this information to students. Counselor educators being better informed about social justice

advocacy in counseling may help close the gap, identified by Hunsaker (2011), between the movement in academia and the current practices of counselors.

The following item was farthest from consensus:

P11. First, as a counselor educator, I assist graduate students in understanding the historical evolution by noting how the genesis of the counseling profession is grounded in the advocacy effort of persons like Frank Parsons and Jesse Davis. I then proceed to explore the historical factors that resulted in counselors acquiring a unique identity that is largely based on ways of providing individual counseling services to stimulate the healthy development of individuals by largely fostering intra-psychic changes while moving advocacy services to the periphery of their work. I then emphasize that the combination of advocacy and direct counseling services reflects our distinct identity.	3.8	1.5
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This statement encompassed teaching counselors-in-training about the history of the counseling profession, highlighting social justice roots. This panelist would highlight the profession's movement away from social justice advocacy to intra-psychic work, and how the two combined would reflect counseling's distinct professional identity. Based on a comparison of question three's consensus items to this item, the panel favored a more proactive and application oriented mode of training students to promote social justice advocacy while maintaining a distinctive counselor identity. This hands-on stance lends well for CACREP's (2009) emphasis on student learning outcomes.

Question Four

“In what ways can counselors-in-training demonstrate social justice advocacy within their programs while maintaining a unique counselor identity?” Six items reached consensus.

- | | |
|--|---------------------------|
| <p>P1. Clearly, in our research endeavors, our publications, the way in that we teach, the books that we teach and, lastly but not least; our pedagogy. Too many professors still teach from a Banking Method and do not teach in a way that develops critical thinking. By employing problem posing in our classes we begin to draw out our students who have been conditioned to only provide "right" answers.</p> | <p>3.92 .75</p> |
| <p>P2. Again, using the ACA Advocacy Competencies should be central, this is from the profession and uses the type of expertise that is central to counseling training as well as to expand the areas needed for advocacy action. Trainees can demonstrate social justice advocacy through applying each of the 6 domains of the Advocacy Competencies to cases from their internship sites.</p> | <p>4.25 .75</p> |
| <p>P4. There can be opportunities, introduced by faculty, that provide encounters for counselors-in-training. The latter, through service learning opportunities can engage in community-based projects that empower and support communities and special projects. For example, counselors might do volunteerism at a gerontological center or one working with military families and children.</p> | <p>3.94 .56</p> |
| <p>P5. I am also concerned about this question as it seems to imply these</p> | <p>4.4 .9</p> |

areas are at odds with each other, which they are not. However, to your question, some ways counselors-in-training can demonstrate social justice advocacy with their emerging professional counselor identity by 1) demonstrating their understanding the varied developmental, contextual, and situational factors that contribute to human wellness, functioning, and disease, 2) demonstrating their knowledge of historical and present-day stressors that many clients encounter on a daily basis, and 3) demonstrating their knowledge of multicultural and social justice competencies, ideally through supervised experiences.

P6. Counselors-in-training should work on paying attention to cultural and contextual issues underlying the challenges our clients face. The process of achieving social justice should be one that is participatory in nature and one that considers the community in which clients live as opposed to considering our clients as islands. This holistic wellness approach is at its very roots counseling identity and simultaneously social justice advocacy. **4.4 .9**

P11. Counselor education programs need to take leadership in this area by reforming their curriculum to include a balanced approach to more effectively address issues relevant to the above question. This can be done by ensuring teaching and learning activities in the classroom, practicum, and internship settings that require specific learning activities which reflect a balance in counseling theories and skills, consultation/collaboration skills, and prevention/ social justice advocacy **4.14 .64**

interventions. This would provide the knowledge and support students need to effectively demonstrate social justice advocacy within their training programs while maintaining a unique counselor identity.

Among these six items, application of the ACA Advocacy Competencies through service learning projects and working with clients, and were mentioned the most as ways in which counselors-in-training are able demonstrate social justice advocacy within their programs while maintaining a unique counselor identity. Other suggestions encompassed demonstrating knowledge of social justice concepts, awareness of historical and current stressors clients encounter on a daily basis, and knowledge and mastery of relevant competencies within the context of a supervised experience. Similar to the question three responses, these application-focused recommendations are compatible with the expectation of CACREP accredited programs to show evidence of student learning.

Moreover, one item recommended counselor education programs revamp the curriculum to include an improved balance of collaboration skills and prevention/advocacy interventions in addition to theories and clinical skills. Another item further supports this notion by suggesting counselor educators demonstrate social justice advocacy through scholarship and pedagogy.

The item farthest from consensus on question four was:

P3. Through maintaining a primary focus on client wellness/preventative	3.88	1.88
work and, in training, a focus on development of clinical skills related to		
one-on-one counseling, rather than on diagnosis/pathology (e.g., APA		
focus) or on policy/lobbying/systems' change and/or case-management		
work (more social work). Hence, counselors would learn social justice		

advocacy in a wellness/preventative and strengths-based framework.

This item urged counselor educators to focus on wellness, prevention, and clinical skills related to individual counseling as opposed to training counseling students from a medical model or systems' change perspective. The latter two are implied as belonging to psychology and social work, respectively. Most likely, this item did not reach consensus because many of the previous statements promote an incorporation of a systems perspective in counseling and decreasing boundaries between the helping professions to alleviate the need for a turf war.

Conclusions

The objective of the current research was to explore a panel of experts' observations and beliefs about distinguishing social justice advocacy in counseling from social work functions. Based on the panelists' responses to the questionnaires utilized in this study, it is apparent they believe social justice advocacy to be an essential component of counselors' professional identity. However, the ways in which social justice advocacy in counseling is distinguished from social work functions remains ambiguous. Overall, the panel agreed distinct boundaries between the helping professions are both unwarranted and inappropriate. This section will discuss significant themes and implications for the field in light of the recent social justice movement in the counseling profession.

Noteworthy themes

The first research question of this study asked, "What are the beliefs of a panel of experts regarding how social justice advocacy is incorporated into counseling's professional identity in a way that is distinct from social work?" While the results of this

study lack clarification regarding the distinctions between social justice advocacy in counseling and social work functions, most of the noteworthy themes derived from the results addressed how social justice advocacy is incorporated into counseling's professional identity. The use of professional guidelines, inter-professional collaboration, impetus and avenues for social justice advocacy, and practical educational strategies were the most notable themes addressing counselors' incorporation of social justice advocacy. Conversely, some of the themes, for instance criticism of instituting boundaries between the helping professions and being unfamiliar with social work functions, provide insight into the panel's trepidation about distinguishing differences between counseling's and social work's implementation of social justice advocacy. The latter themes also answer the second underpinning research question of this investigation, "In which capacities, if any, can consensus of opinion be reached about distinguishing social justice advocacy in counseling from social work functions?" The panel overwhelmingly agreed distinguishing social justice in advocacy in counseling from social work is unnecessary and unwanted.

The use of professional guidelines. The panelists agreed each profession's ethical guidelines and training standards should guide how to approach social justice advocacy. Again, this recommendation provides counselors with a professional compass for navigating social justice advocacy work but does not clearly specify how to maintain a unique professional identity while doing so. A comparison of the ethical standards put forth by Counselors for Social Justice (2011) and the ethical standards of social workers (NASW, 2008), as well as a comparison of training requirements (CACREP, 2009; CSWE, 2008), highlighted more similarities than differences. Despite the overlaps

between ethical codes and training guidelines, counselors can still use ACA's (2005) ethical standards as a guide for doing social justice advocacy. For example, the counselor in the example from the section above would refer to ACA's ethical codes to find outlined in A.5.c. "Counselor–client nonprofessional relationships with clients, former clients, their romantic partners, or their family members should be avoided, except when the interaction is potentially beneficial to the client. (*See A.5.d.*)" (ACA, 2005, p.5). A.5.d. goes on to explain the ethical steps required when engaging in nonprofessional relationships with clients, such as documentation, informed consent, and damage control in the event of unintentional harm.

Another set of professional guidelines, the ACA Advocacy Competencies, were agreed to be the basis for teaching and practicing social justice advocacy in counseling. These competencies are intuitively a good model for advocacy, designed to provide counselors with a starting point to systemically conceptualize and intervene beyond individual psychotherapy. However, there is little empirical evidence to support the efficacy of the model. This becomes especially important in light of the push for counselors to use evidence-based practices (EBP). Because of the movement toward Managed Mental Health Care, counselors are encouraged to use EBP's in order to be reimbursed by insurance providers. As a result, many counseling service providers have implemented interventions such as Cognitive-Behavioral Therapy due to its extensive empirical support (Wilcoxon, Magnuson, & Norem, 2008). The panel did not discuss the logistical issue of reimbursement for services provided when using the ACA Advocacy Competencies, and this is apt to be a hindrance for most practitioners.

Inter-professional collaboration. Surprisingly, many of the experts expressed a lack of knowledge about social work functions and the panel as a whole agreed on these statements. However, the literature indicates this may be a barrier to the panel's suggestion of teaching inter-professional collaboration (Mellin et al., 2011). An accurate knowledge of what other professions offer is crucial for appropriate collaboration. The theme emerging from this study indicating an unfamiliarity with social work functions and criticisms of instituting boundaries are relevant to the discussion of inter-professional collaboration because they are potential roadblocks to inter-professional collaboration. Counselors who are encouraged to take on the role as social justice advocate may feel overwhelmed without the proper knowledge and support of other helping professions. Without clear boundaries between their counseling roles and the roles of social work, one may feel as though they are being asked to perform the functions of both counselor and social work. Because counselors are not trained to do social work, they may shy away from advocacy altogether if they feel it is not within their scope of practice. As Mellin et al. (2011) discovered, many counselors believe their role to be individually focused and social workers' to be more systems oriented. Clear distinctions between the two professions would help counselors to know when it is appropriate to advocate and at what point they should collaborate with a social worker.

Furthermore, the panel's strong conviction that too much of an emphasis is put on maintaining a distinctive counselor identity contradicts with ACA's initiative to strengthen and unify professional identity. The delegates from the 20/20 committee asserted, "The counseling profession shall conduct ongoing outreach to ensure that the public understands who professional counselors are, the credentials and skills we possess,

and how our services are uniquely different.” (“Concepts for future exploration,” 2013). The panel’s assertions appear to complicate counselors’ ability to navigate advocacy work, collaborate with other mental health providers, and articulate how their services are uniquely different.

Impetus and Avenues for social justice advocacy. The panel agreed one of the ways social justice advocacy in counseling may be distinguished from social work functions is how professionals from each field arrive at doing the advocacy work. It was suggested counselors’ social justice advocacy work is informed by their clients, while social workers’ individual clinical work is informed by their community. In other words, counselors work from the inside out, whereas social workers work from the outside in. Yet, this explanation falls short of defining the differences between the two fields because the literature indicates many social workers exclusively practice individual counseling and do not consider social justice advocacy as part of their professional identity (NASW, 2006).

Although this theme is lacking delineation between the two professions, it does reveal a starting point for counselors to incorporate social justice advocacy into their own professional identity. For example, a counselor may be seeing a client who is struggling to find employment due to discrimination against his or her sexual orientation. The counselor then learns their state’s anti-discrimination laws do not protect “sexual orientation” or “gender identity” from discrimination in the workplace, housing, public accommodation, etc. With permission from the client, the counselor may then begin advocacy work, with and/or on behalf of the client, to have these laws amended. Acting with the client may include attending a town-hall meeting together. Acting on behalf of a

client may be using one's status as a mental health professional to speak with legislators about how the lack of protection in the laws negatively impacts clients' mental health. Another example of social justice in counseling would be helping a client in poverty who is struggling with health problems related to obesity. As a result, she has little energy to enjoy life and her self-esteem is suffering. The client discloses she would like to eat healthy but is on a tight budget, and the unhealthy food is more affordable than the healthy options. The counselor may then advocate with the client by collaborating with a social worker to connect her to food assistance programs, a budgeting class, and information on healthy food preparation. The counselor could also advocate for a community garden near the client's neighborhood and find grants to help fund this project. The counselor could once again use his or her status as a mental health professional to advocate to legislators to increase spending on food assistance programs and educational nutrition programs. The counselor could explain to legislators the adverse effects poor diet has on mental health and wellbeing and the compromise in food choices many individuals are forced to make with the current limited resources.

Practical educational strategies. The final theme to be discussed in this section is practical educational strategies. It is significant to comment on the practical application aspect of these strategies. Some panelists suggested addressing the counseling profession's history and roots in social justice, but these items failed to reach consensus. Instead, the panel preferred various strategies designed to challenge students to develop knowledge and skill in practical application of social justice advocacy in clinical practice. The panel recommended building a foundation by teaching social justice theories and the ACA Advocacy Competencies and grounding assignments based

on that foundation. Some general examples of assignments they gave were having students do service learning projects, apply social justice advocacy to cases from their internships, and collaborate with other helping professions. The recommendations have the potential to be especially useful in demonstrating student learning outcomes required by the CACREP (2009) standards.

The following is an example of a potential assignment based on the panel's suggestions. The educator could have students examine their caseload from their internship sites and identify various social justice issues. If the students are not currently seeing clients, the teacher could provide case vignettes. Based on these issues, the students would then be required to identify and participate in opportunities to advocate with or on behalf of their client regarding the issue (i.e. service learning project). The students could begin by writing a paper on how they were able to identify the social justice issues to demonstrate knowledge of social justice concepts and awareness of historical and current stressors clients encounter on a daily basis. For instance, the case may be a refugee family from Iraq, and the child is doing poorly in school both academically and socially due to a language barrier. The child usually interprets for the parents, but many times she has difficulty with the translation. The counselor also discovers the school does not provide the student with an interpreter, and the parents are unable to help the child with homework because they do not speak English. For the next part of the assignment, the students could discuss how they would or did approach the subject with their clients, what plan of action they decided to take, and how they executed the plan. For example, the counselor may discuss barriers to the child's success and potential solutions with the family, school personnel, and any other support systems

involved with the family, with appropriate consent and release of information. The counselor could assist the family in setting up a meeting with the school to address these issues and even attend the meeting with the family if they so choose. The counselor could collaborate with a social worker to connect the family to an interpreter and tutor, find or develop a social network of other refugees, and advocate for the school to provide non English speaking students with interpreters. After the service learning project is complete, they would then write a reflection piece about their experience with social justice advocacy. These papers could go into a portfolio to demonstrate learning outcomes. Moreover, the counselor educator could use the students' papers as data, with appropriate consent, for a qualitative study on the ACA advocacy competencies.

Implications for the profession

Overall, the panel agreed the lack of training needs to be remedied in order to foster the incorporation of social justice advocacy in to the professional identity of counselors. First, they recommended counselor educators become more informed about social justice advocacy and how to train future counselors to also embrace this concept. The experts within the social justice movement could benefit the profession by disseminating such information through actions such as presenting training sessions for educators at professional conferences and creating informative scholarship for counselor educators. Next, they recommended revamping curriculum to infuse social justice advocacy more prominently into counseling programs by promoting an equal balance of prevention/advocacy interventions in addition to theories and clinical skills. Advocating to have more descriptive outlines for prevention/advocacy interventions included in the CACREP standards may be one avenue for this. They also suggested counselor

educators begin modeling, through scholarship and pedagogy, a commitment to social justice advocacy. This may be done by working on social justice related research projects and articles with students, assigning readings and showing documentaries about social justice dynamics, discussing current social justice issues in class, creating service projects, etc. However, it seems more evidenced based research is needed to achieve buy-in from stakeholders. This is discussed further in the next section regarding future research recommendations.

In addition, a gap between academia and practitioners became evident in this study. This observation is grounded in the literature's indication of the disparity regarding the lack of practitioner involvement in the social justice movement in counseling (Hunsaker, 2011) and is illustrated in this study by the panelists' claims of unfamiliarity with social work functions and the lack of discussion among the panel about reimbursement issues for advocacy done by counselors. Building bridges from academia to the realm of practice may need to become a priority for proponents of the social justice advocacy movement in the counseling profession. Furthermore, advocacy work may be needed for more inclusivity of service providers. For example, if cost is a barrier to joining and becoming involved in professional organizations, such as CSJ, perhaps a scholarship fund for practitioners could be created. CSJ might also consider creating a traveling workshop for counseling agencies to help counselors operationalize social justice advocacy. This is likewise a reminder for the American Counseling Association as a whole to pay special attention to including practicing counselors in professional initiatives. Advocating for and supporting the professional development and involvement of existing service providers will help counselors be informed and ethical

social justice advocates who navigate within their scope of practice and know when to collaborate with other helping professionals.

Limitations

Generalization of this investigation's results beyond the scope of the population in this study was not intended. Instead, transferability, or the relative meaning and applicability the reader takes away from the research (Lincoln & Guba, 1985), was the desired effect. Secondly, this analysis was not expected to empirically define social justice advocacy in the counseling profession. Instead, it was intended to be a first step in exploring expert views regarding a counseling professional identity inclusive of social justice advocacy yet distinct from social work functions. Lastly, this study was not designed to recommend or advise against a mandated inclusion of social justice advocacy in the professional identity of counseling. Instead, it was focused on encouraging dialogue among experts pertaining to the distinguishing features of social justice advocacy work in counseling and social work functions.

As with any research methodology, the Delphi method has advantages and disadvantages. The approach's validity may be critically examined since it is based entirely on expert opinion. The risk of researcher bias is especially relevant for questionnaire development, panel selection, and response synthesis (Linstone & Turoff, 2002; Yousuf, 2007). Stitt-Gohdes and Crews (2004) cautioned researchers to consider the panel members' context, experience, and bias when making meaning of the results. They also noted the rigor and investment put forth by the panelists in the study could be negatively impacted by time constraints and other responsibilities.

While this investigation was designed for at least 10 participants and the literature suggests using 10 to 15 (Stitt-Gohdes, & Crews, 2004; Taylor-Powell, 2002), a specific limitation of this particular study was having only 9 of the original 10 panelists respond to the Likert survey in the final round of data collection. This was likely due to Stitt-Gohdes and Crews's (2004) observation regarding the impact time constraints and other responsibilities may have on panelists' participation. However, Taylor-Powell (2002) also noted, "There is very little actual empirical evidence on the effect of the number of participants on the reliability or validity of consensus process" (p. 378). It is also worth noting there are very few experts in the area of social justice in counseling since this is a recent movement in the field.

Apart from these drawbacks, the Delphi method is a valuable and solid approach to scholarly research (Skulmoski, Hartman, & Krahn, 2007; Yousuf, 2007). It serves as a channel for expert panelists to directly collaborate on exploring a particular topic despite diverse perspectives and geographical constraints. The anonymity afforded by this approach encourages candidness and helps eliminate psychological and social roadblocks often encountered in conventional committee discussions, such as pressure to agree or disagree with other participants (Landeta, 2006). In the current study, the Delphi method was believed to be most appropriate for initial investigation into the differences between social justice advocacy in counseling and social work functions.

Recommendations for Future Research

Deduced from the outcomes of this study, suggestions for future research are as follows:

This study was an initial exploration into distinguishing social justice advocacy from social work functions. Because the opinions informing the results of this study were derived exclusively from counselor educators, other stakeholders in the social justice advocacy movement in counseling, such as practitioners, clinical supervisors, and administrative supervisors, need to be invited to inform further clarification of what distinguishes social justice advocacy in counseling from social work functions. This is especially appropriate considering the divergence between the academic led movement to incorporate social justice advocacy into counselor identity and what is actually understood and implemented by practitioners (Hunsaker, 2011; Mellin et al., 2011).

Although teaching inter-professional collaboration was an agreed upon strategy to help counselors-in-training understand and integrate social justice advocacy into their professional identity, many of the participants indicated not being familiar with social work functions. Studies specifically addressing the roles and functions of other helping professions and the dynamics of inter-professional collaboration is warranted. In addition, examination of effective ways to incorporate inter-professional collaboration into counselor training would benefit both counselor educators and future counselors.

Overall, the ACA Advocacy Competencies were agreed to be the foundation for education and implementation of social justice advocacy in counseling. However, there is a dearth of research supporting the efficacy of this model. As a result of Managed Mental Health Care, counselors are often obligated to use evidenced based practices (EBPs), and many counseling service providers are inclined to use practices such as Cognitive-Behavioral Therapy due to its robust body of supporting research (Wilcoxon, Magnuson, & Norem, 2008). Outcome based studies validating the interventions

outlined in the ACA Advocacy Competencies applied to client populations would lend credibility to the use of the model.

The premise of this study was largely grounded in ACA's initiative to strengthen and unify counseling's professional identity (Kaplan & Gladding, 2011), but there was much agreement from this panel on the opinions conveying an aversion to maintaining a distinctive counselor identity and defining boundaries between helping professionals. Further exploration into understanding the resistance to this organizational initiative would be helpful in moving forward as counseling's professional identity continues to evolve.

Two questions contained consensus items suggesting counselors and social workers arrive at advocacy work differently. It would be interesting to see what percentage of counselors are, in fact, doing social justice advocacy work, how they decide to do it, and how they navigate the work they do. This would be beneficial to practitioners who are unsure of practical ways to incorporate social justice advocacy into their professional identity. This direction of research would also help bridge the gap between academics and counseling practice by informing counselor educators of counselors' perceptions, attitudes, and application of social justice advocacy.

Replicating this study using a different panel of experts would be advantageous. For instance, another panel meeting equivalent criteria for what establishes one as an expert, a panel consisting exclusively of practitioners, or a panel comprised of experts meeting completely different criteria (e.g. counselor educators who are not scholars of social justice, doctoral students and/or master's students in counselor education, members of the CACREP board, or social workers) could be utilized. A comparison of consensus

items with various panels would offer further information to distinguish social justice advocacy in counseling from social work functions.

Final Observations

This closing segment of the dissertation highlights other considerations and overall conclusions yet to be explicitly discussed in previous sections. First, it is significant to recognize the majority of the panelists' responses illustrated concerns discussed in the literature review. Professional identity of helping professions, definitions of social justice advocacy, social justice advocacy in counseling, and rationales and criticisms of social justice advocacy in counseling are represented in the responses. This is significant because it demonstrates these participants are familiar with the current literature regarding social justice advocacy in counseling and have integrated the philosophy into their scholarship and pedagogy. Not having any items where the panel reached consensus around "disagreed" or "strongly disagreed" in addition to the overarching similarity of responses is interesting. Of the 27 items reaching consensus just one item had a median score nearing 3.0 (signifying the panel neither agreed nor disagreed with those items). This reiterates evidence for the idea that overall, the panel is well informed of the current literature and supportive of the ongoing social justice advocacy movement within counseling.

It is also worth noting the statistical power of the current study. Because no standard exists for defining consensus in a Delphi study, consensus is defined by the researcher and can be established in a number of ways (Keeney, Hasson, & McKenna, 2006; Powell, 2002; Rayens & Hahn, 2000). In accordance with other Delphi research and the existent writings surrounding the Delphi approach (Anderson, 2004; Hendrix;

2005; Raskin, 1994; Rayens & Hahn, 2000; Spinelli, 1983; Wilhelm, 2001), an interquartile range of equal to or less than 1.0 was used to define consensus in this study. Based on the Delphi literature (Garson, 2013; Rayens & Hahn, 2000) this study used the median and interquartile range to discover the level of consensus. The median and interquartile range values were calculated using an interpolation formula as advised by the literature for this type of data set (Tabachnick & Fidell, 2007). Applying this design, if all panelists were to give the same ranking for an item, the interquartile range calculation yields a value of 0.5. Subsequently, consensus established by an interquartile range of 1.0 or less exemplifies a high standard of consensus in this study.

Another noteworthy point of interest is only one consensus item was strongly agreed upon (P2 in response to question three, $M=4.86$, $IR=.64$). This item inferred the idea of a distinctive counselor identity as being harmful to the counseling profession. P2 stated, "I think the problem with that is that counseling training has been too narrow, thus limiting counselors' understanding of broader forces." Two other themes exemplified by P2 were utilization of the ACA Advocacy Competencies as a foundation for training students to promote social justice advocacy and the importance of teaching inter-professional collaboration. This consensus item being the only item on which the experts strongly agreed again highlights their perceived importance of not defining boundaries between the helping professions, utilizing the ACA Advocacy Competencies, and teaching inter-professional collaboration.

Furthermore, while many professionals have embraced social justice as a fifth force in counseling, not everyone is as enthusiastic (Hunsaker, 2011; Smith, Reynolds, & Rovnak, 2009). Due to an ever-changing social climate, younger counseling

professionals do not have the same lived experiences, such as personal discrimination and major cultural shifts (e.g. the Civil Rights and Feminist movements), as proponents of the social justice movement in counseling. Specific experiences such as these may have imbedded values pertaining to social justice not held by all professionals. Consideration of these value differences may inform the delivery of social justice education. Moreover, many counseling professionals already recognize social justice advocacy to be part of best practices in counseling and do not perceive it necessary to embrace social justice as a fifth force. Those supporting social justice as the fifth force in counseling may need to pay special attention and provide extra educational emphasis to those who are hesitant on this issue.

The purpose of the current study was to examine a panel of experts' opinions and explanations distinguishing social justice advocacy in counseling from social work. It was evident from the panelists' reactions to each item that social justice advocacy is acknowledged as a valuable and indispensable component to the professional identity of counselors. However, it remains unclear how this piece of counseling identity is distinguishable from social work functions. Overall, the panel agreed it is neither necessary nor desirable to draw distinct boundaries between social justice advocacy in counseling and social work functions.

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APPENDICES

Appendix A: Invitation to Participate

Dear Dr.,

My name is Alex Kerwin. I am a graduate student at Idaho State University, and I am doing my dissertation on social justice issues in counseling. I have been such an admirer of your work as you have been a key leader in the social justice movement in counseling. I am hoping you will be able to participate as an expert in my Delphi study on defining the counselor's role in social justice. The strength of the Delphi comes from the level of expertise on the panel, and I cannot imagine creating a panel of experts on this issue without your input. The title of my dissertation is "Distinguishing social justice advocacy in counseling from social work functions."

The study will be done entirely online at your convenience. The time commitment would be 15-20 minutes per round for 3 rounds over the course of 3-4 weeks.

Please let me know if you are interested and would be willing to participate. I can be reached by email at kerwalex@isu.edu or by phone at 662-809-4069.

Thanks so much and I look forward to hearing from you.

Sincerely,

Alex Kerwin

Appendix B

Informed Consent

**Idaho State University Human Subjects Committee Informed Consent Form
for Medical Research****CONSENT TO PARTICIPATE IN RESEARCH****Distinguishing Social Justice and Advocacy in Counseling from Social Work
Functions: A Delphi Study**

You are being asked to participate in a research study conducted by Alex Kerwin, MS, LPC, 1311 E. Central Dr., Meridian, ID 83642, (662) 809-4069 and Elizabeth Horn, PhD, LCPC, 1311 E. Central Dr., Meridian, ID 83642, (208) 373-1718 from the Counseling Department at Idaho State University. You have been asked to participate in this research because you have been identified as an expert in the area of social justice advocacy in counseling and counselor education. If you agree to participate in this research project you will be among a panel of approximately 10-15 experts in the area of social justice advocacy in counseling and counselor education. Your participation in this study is entirely voluntary. You should read the information below, and ask questions about anything you do not understand, before deciding whether or not to participate.

1. **PURPOSE OF THE STUDY** The purpose of this study is to conduct a preliminary investigation of the distinguishing factors between a counselor identity that includes social justice advocacy and the functions of social work. For this investigation, the Delphi method will be utilized.

2. **PROCEDURES** If you volunteer to participate in this study, we would ask you to do the following things: The entire study will be completed online for your convenience. You will be asked to complete one open-ended questionnaire with four items followed by two rounds of rating other panelists' responses. Each round will be approximately two weeks apart and should take no more than 20 minutes to complete. Only my doctoral committee and I will know the identity of participants. The confidentiality of all responses will also be maintained through the online data collection service.

3. **POTENTIAL RISKS AND DISCOMFORTS** At this time, there are no foreseeable risks and discomforts associated with participating in this study. However, the procedure may involve risks that are currently unforeseeable.

4. **ANTICIPATED BENEFITS TO SUBJECTS** The potential benefits may include: By participating in this study, you will have the benefit of having your voice heard by sharing your expertise in social justice to help fill a gap in the literature.

5. ANTICIPATED BENEFITS TO SOCIETY This research should add to the literature by clarifying the role of social justice in counselor identity. This clarification is hoped to reduce professional resistance to the social justice movement in counseling.

6. ALTERNATIVES TO PARTICIPATION N/A

7. PAYMENT FOR PARTICIPATION Your participation is voluntary. You will not be financially compensated or receive any type of payment for your participation in this study.

11. FINANCIAL OBLIGATIONS No financial obligations are associated with participating in this study.

13. PRIVACY AND CONFIDENTIALITY The only people who will know that you are a research subject are members of the research team. No information about you, or provided by you during the research, will be disclosed to others without your written permission, except (a) if necessary to protect your rights or welfare, or (b) if required by law. When the results of the research are published or discussed in conferences, no information will be included that would reveal your identity.

All online correspondence and data collection will be saved to a computer locked with a password. Any written correspondence and data will be stored in a locked file cabinet. All identifying information will remain confidential in this manner unless otherwise specified and consented to prior to dissemination. Upon completion of dissertation and subsequent article, all data will be placed upon a USB drive, which will be stored at the researcher's home.

15. PARTICIPATION AND WITHDRAWAL Your participation in this research is VOLUNTARY. If you choose not to participate, that will not affect your relationship with Idaho State University, or your right to health care or other services to which you are otherwise entitled. If you decide to participate, you are free to withdraw your consent and discontinue participation at any time without prejudice.

17. WITHDRAWAL OF PARTICIPATION BY THE INVESTIGATOR The investigator may withdraw you from participating in the research if circumstances arise which warrant doing so. The investigator, Alex Kerwin, will make the decision and let you know if it is not possible for you to continue.

18. NEW FINDINGS During the course of the study, you will be informed of any significant new findings (either good or bad), such as changes in the risks or benefits resulting from participation in the research or new alternatives to participation, which might cause you to change your mind about continuing in the study. If new information is provided you, your consent to continuing participating in the study will be re-obtained.

19. IDENTIFICATION OF INVESTIGATORS In the event of a research related injury or if you experience an adverse reaction, please immediately contact one of the investigators listed below. If you have any questions about the research, please feel free to contact Alex Kerwin at kerwalex@isu.edu, 1311 E. Central Dr., Meridian, ID 83642, or (662) 809-4069 and Elizabeth Horn at dougeliz@isu.edu, 1311 E. Central Dr., Meridian, ID 83642, or (208) 373-1718.

20. RIGHTS OF RESEARCH SUBJECTS You may withdraw your consent at any time and discontinue participation without penalty. You are not waiving any legal claims, rights or remedies because of your participation in this research study. If you have any questions regarding your rights as a research subject, you may contact the Human Subjects Committee office at (208) 282-2179 or by writing to the Human Subjects Committee at Idaho State University, Mail Stop 8046, Pocatello, ID 83209.

SIGNATURE OF RESEARCH SUBJECT OR LEGAL REPRESENTATIVE

I have read (or someone has read to me) the information provided above. I have been given an opportunity to ask questions, and all of my questions have been answered to my satisfaction. I have been given a copy of the informed consent form.

BY CLICKING BELOW, I WILLINGLY AGREE TO PARTICIPATE IN THIS RESEARCH.

I Agree

Appendix C

Initial Questionnaire

Q1.
What do you believe the differences are between social justice advocacy in counseling and social work functions?

<< >>

Survey Completion

0% 100%

Survey Powered By [Qualtrics](#)

Q2.
How would you describe to counselors-in-training the professional boundary between social justice advocacy in counseling and social work?

<< >>

Survey Completion

0% 100%

Survey Powered By [Qualtrics](#)

Q3.

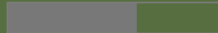
As counselor educators, how can we train our students to promote social justice advocacy while maintaining a distinctive counselor identity?

<<

>>

Survey Completion

0%



100%

Survey Powered By [Qualtrics](#)

Q4.

In what ways can counselors-in-training demonstrate social justice advocacy within their programs while maintaining a unique counselor identity?

<<

>>

Survey Completion

0%



100%

Survey Powered By [Qualtrics](#)

Appendix D

First Round Email to Participants

Hello,

I am thrilled you have agreed to participate as an expert on social justice in counseling for my dissertation study, “Distinguishing social justice advocacy in counseling from social work functions: A Delphi study.” I realize this caliber of participants comes with busy schedules, and my goal is to be out of your hair in 3 weeks. In order to reach that goal, I would like to have round 1 completed by **March 5, 2014**.

Please follow the link and complete the survey consisting of 4 open-ended questions. You will be able to save, quit, and return if necessary. I have included informed consent as part of the survey, so please disregard the previous request for returning a signed informed consent. If you have any questions, I can be reached by phone at 662-809-4069 or by email at kerwalex@isu.edu.

Sincerely,

Alex Kerwin

Doctoral Candidate - Counselor Education and Supervision Idaho State University

Follow this link to the Survey: [Take the Survey](#)

Or copy and paste the URL below into your internet

browser: https://qtrial.qualtrics.com/WRQualtricsSurveyEngine/?Q_SS=73xrlTx1CTKNi1T_cBKk3QrTpKvTDOR&_ =1

Follow the link to opt out of future emails:

[Click here to unsubscribe](#)

Appendix E

First Round Reminder Email

Hello,

This is a gentle reminder to fill out the 4 question survey for the Delphi study regarding social justice in counseling.

If you have any questions, you may contact me at kerwalex@isu.edu or 662-809-4069.

Follow this link to the Survey: \$ {1://SurveyLink?d=Take the Survey}

Or copy and paste the URL below into your internet browser: \$ {1://SurveyURL}

Sincerely,
Alex Kerwin

Appendix F

Second Round Email to Participants

Hello,

Thank you for participating in my dissertation research. I greatly appreciate the time and effort you are giving to complete this study. Please follow the link to the Round 2 survey. The deadline to complete this survey is next **Friday, March 21**.

Please don't hesitate to contact me at kerwalex@isu.edu if you have any problems with the link.

Sincerely,
Alex Kerwin
Doctoral Candidate
Idaho State University

Follow this link to the Survey: [Take the Survey](#)

Or copy and paste the URL below into your internet browser: https://qtrial.qualtrics.com/WRQualtricsSurveyEngine/?Q_SS=cMkc1QQP2t3G5IV_eSgLZo5YVzAeDc1&_=1

Follow the link to opt out of future emails:
[Click here to unsubscribe](#)

Appendix G

Second Round Reminder Email

Hello,

Just a friendly reminder for you to complete round 2 of 3. I will be sending out the third and final round as soon as all panelists have completed round 2. **Please disregard this email if you have already completed round 2.**

Please don't hesitate to contact me at kerwalex@isu.edu if you have any problems with the link.

Sincerely,
Alex Kerwin
Doctoral Candidate Idaho State University

Follow this link to the Survey: [Take the Survey](#)

Or copy and paste the URL below into your internet browser: https://qtrial.qualtrics.com/WRQualtricsSurveyEngine/?Q_SS=9ns6HJrWHAHG4zb_eSgLZo5YVzAeDc1&_=1

Follow the link to opt out of future emails: [Click here to unsubscribe](#)

Appendix H

Third Round Email

Hello,

The third and final round of the study has been posted on Qualtrics. To gain access, please use the link below. In this round you will again be asked to rate all panelists' responses to each of the four questions on the initial questionnaire. In this round however, the median (Strongly disagree=1, Strongly agree=5) and interquartile range from round two are provided so you can see how others rated these items. An interquartile range of 1.0 and below indicates consensus among the panel on that item. **The deadline for completion is Wednesday, May 7.**

Thank you again for your participation! Please let me know if you have any questions or concerns.

Thank you,
Alex Kerwin
Doctoral Candidate
Idaho State University

Follow this link to the Survey: [Take the Survey](#)

Or copy and paste the URL below into your internet browser: https://qtrial2014.az1.qualtrics.com/SE/?Q_SS=eX9U4Wm5qpKB9uR_8qcvmnxE3VBaFF3&_u=1

Follow the link to opt out of future emails: [Click here to unsubscribe](#)

Appendix I

Third Round Reminder Email

Hello,

This is a reminder to complete the final round of data collection. If you have already completed the third round, please disregard this email otherwise you may use the link provided. Please use the link in this email so that I may avoid filling up your inbox as I continue to send out reminder emails.

In this round you will again be asked to rate all panelists' responses to each of the four questions on the initial questionnaire. The median and interquartile range from round two are provided in order for you to see how others rated these items. An interquartile range of 1.0 and below indicates consensus among the panel on that item.

The deadline for completion is May 7th. Thank you again for your participation! Please let me know if you have any questions or concerns. Thank you!

Sincerely,

Alex Kerwin
Doctoral Candidate
Idaho State University

Follow this link to the Survey: `{l://SurveyLink?d=Take the Survey}`

Or copy and paste the URL below into your internet browser: `{l://SurveyURL}`

Follow the link to opt out of future emails: `{l://OptOutLink?d=Click here to unsubscribe}`

Hello,

This is a reminder to complete the final round of data collection. Please use the link provided. If you have received the link through an email from Qualtrics earlier today, please use that link so that I may avoid filling up your inbox as I continue to send out reminder emails. Not everyone has been getting the Qualtrics emails, so I am also sending this anonymous link through my ISU email account.

In this round you will again be asked to rate all panelists' responses to each of the four questions on the initial questionnaire. The median and interquartile range from round two are provided in order for you to see how others rated these items. An interquartile range of 1.0 and below indicates consensus among the panel on that item.

The deadline for completion is May 7th. Thank you again for your participation! Please let me know if you have any questions or concerns. Thank you!

https://qtrial2014.az1.qualtrics.com/SE/?SID=SV_8qcvmnxE3VBaFF3

Sincerely,
Alex Kerwin
Doctoral Candidate
Idaho State University

Appendix J

First Likert Question One

Each item is a response from an expert panel member. Please rate your level of agreement with each item.

**The following items were in response to Question 1:
What do you believe the differences are between social justice advocacy in counseling and social work functions?**

Social Justice Advocacy entails developing the consumer's capacity to develop their subjectivity. As I am not as familiar with social work functions I can not speak to their expectations, however, with counselors, one must consider the consumer's world, including school, family, community, and work to help them identify the specific obstacles to their freedom of movement and self actualization. As counselors our role is not to foster dependency but rather to heighten the conditions by which our consumers whether they are children, youth, adults or families are able to respond to their world in a constructive and conscious manner.

Strongly Disagree Disagree Neutral Agree Strongly Agree

☐ ☐ ☐ ☐ ☐

I believe there are many similarities. The main differences as I see it are in the areas that counseling and counseling psychology tend to emphasize: career and vocational counseling as well as prevention efforts. I believe that traditionally, social work trains students and practitioners well in terms of systemic interventions whereas traditionally counseling and counseling psychology has not. It is important, I believe, that counselors and counseling psychologists, to fulfill our strength based roots, must be better trained in understanding and intervening at systems levels.

Strongly Disagree Disagree Neutral Agree Strongly Agree

☐ ☐ ☐ ☐ ☐

Because I am not a social worker, I cannot say what social work functions are. I have learned that many social workers are trained to specifically engage in advocacy through policy work at higher levels (e.g., governmental), while others are trained for more one-on-one clinical work that could entail anything at all (from social justice work to psychotherapy), hence, I believe it depends on the program. I would define social justice advocacy according to use of advocacy to remove any barriers impeding clients in achieving optimal wellness and career, social-emotional, and educational success (Ratts, 2011).

Strongly Disagree Disagree Neutral Agree Strongly Agree

☐ ☐ ☐ ☐ ☐

Social justice advocacy is based on principles of equity, inclusion, caring, respect for differences, values of humanitarianism, and protection for those with little means to give voice to themselves. these principles are grounded in the ACA ethical standards and also in the multicultural counseling and social justice competencies. Social Work functions are informed on the principles and ethics of the social work profession.

Strongly Disagree Disagree Neutral Agree Strongly Agree

☐ ☐ ☐ ☐ ☐

From my perspective, that of a social justice-oriented counselor, the difference is that counselors consider the contextual circumstances or factors that influence a person's or group's functioning. With appropriate permission, they may act with or on behalf of clients or client groups, to change external barriers to clients' well-being and/or to reach other goals. I have never studied social work as a discipline however having worked with social workers, it seems to me that most social workers also consider people in context. Some connect people with existing system supports, e.g., social services, while others go beyond to advocate for individual clients or groups.

Strongly Disagree Disagree Neutral Agree Strongly Agree

☐ ☐ ☐ ☐ ☐

In counseling, the goal of social justice is to ensure that everyone has an opportunity to resources such as healthcare, employment, and to achieve optimal mental health. This perspective is grounded in the belief that client problems are largely rooted in oppressive environmental factors. Social advocacy is the act of arguing on behalf of an individual, group, idea or issue to achieve social justice. Social advocacy in counseling refers to acting with and on behalf of one's client or others in the client's system in order to assure fair and equitable treatment. Social work is more remedial with the aim of alleviating the conditions of those in need of help or welfare.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

The field of counseling tends to be more oriented towards prevention, education, life span human development and social work tends to be more oriented towards the medical model of helping. The counseling profession has tended towards more of an individual focus, and the social work field has tended to focus more on systems and communities.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

Good social workers likely do more than counselors, as their training has that orientation.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

Though similar, I see SW as doing systems of care work. Counselors work in systems but may have more direct contact with clients.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

I stay away from discussions about "This is what social work does" and "This is what counselors do". These discussions lead to turf wars and implies that a profession owns a way of practicing. How we arrive at advocacy work differs based on our professional identities. For instance, the advocacy work counselors do usually stems from their work in the clinical setting. In other words, it is through individual counseling that counselors realize that they need to do advocacy in the community, which is controversial. Whereas, for social workers, their advocacy in the community will often lead them to realize the need to do individual counseling, which isn't controversial of an idea.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

In theory, social justice advocacy is similar in the intervention strategies that counselors and social workers are encouraged to utilize in their professional practices. In actual practice, social workers operate from a tradition that supports more advanced advocacy interventions intentionally designed to foster environmental changes, intentionally designed to promote justice by creating ecological changes to stimulate healthy human development in families, schools, universities, workplaces, and communities as well as the broader society where people live and work. Counselors, on the other hand, continue to operate from a tradition that focuses on individual, intrapsychic changes.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

>>

Appendix K

First Likert Question Two

Each item is a response from an expert panel member. Please rate your level of agreement with each item.

**The following items were in response to Question 2:
How would you describe to counselors-in-training the professional boundary between social justice advocacy in counseling and social work?**

At the stage in which a counselor has enjoined with their client there is an element of trust that has been created within the relationship. At this point, the counselor provides opportunities to not only acknowledge client strengths but then allows the consumer/client to examine their own subjective reality; this is where the client, themselves, must cross over to understand their own subjective world and the impact it has on them.

Strongly Disagree Disagree Neutral Agree Strongly Agree

☐ ☐ ☐ ☐ ☐

It depends on the setting in which counselors and social workers are working. I believe there is too much emphasis on defining boundaries because clients don't really care what the title is, as long as their needs are being met. However, practice should be aligned with training. I have worked in settings where both counselors and social workers were seeing the same client population. I have specialized emphasis in career/vocational counseling, this is an area that social workers traditionally do not have training. Because many of the clients I have seen have had issues related to work, this has seemed appropriate for counseling. In terms of social justice advocacy, all disciplines are needed

Strongly Disagree Disagree Neutral Agree Strongly Agree

☐ ☐ ☐ ☐ ☐

I try not to proscribe this but hope we can come to the answer in dialog--I lay the question out there for them: "What is the counselor's role, in ensuring clinical success/meeting the clients' goals? What seems beyond the counselors' scope/role, and according to whom?" (I don't label anything as a social work task). We then discuss the constrictions of our workplaces (e.g., our roles are defined by the systems in which we work, as well as by our supervisors' perceptions and our own fears of taking risks as advocates). I give them the extreme opinions (from systems' change agents, to a solely intrapsychic, client focus), and we explore what these boundaries are/should be.

Strongly Disagree Disagree Neutral Agree Strongly Agree

☐ ☐ ☐ ☐ ☐

Social justice advocacy engages counselors in empowering others to self-advocate. I would also inform counselors-in-training that they must also consider the context for advocating for change on behalf of individuals as well as groups. A distinction between social justice advocacy in counseling and social work is found in intervention levels. Counselors advance social justice advocacy at the individual, group, and community levels while social workers, from my perspective, intervene at the individual level, primarily.

Strongly Disagree Disagree Neutral Agree Strongly Agree

☐ ☐ ☐ ☐ ☐

This is a good question. I generally focus on what we - as counselors - do rather than attempting to compare our work or philosophy with others. I prefer to leave descriptions of social work to experts in that field. At the same time, I encourage students to deeply immerse themselves in their field (counseling) while recognizing and respecting allied professionals with whom they will likely work. I see respect and collaboration with members of allied professionals (and other people!) as a core multicultural/social justice competency.

Strongly Disagree Disagree Neutral Agree Strongly Agree

☐ ☐ ☐ ☐ ☐

Ultimately there is no need for a "boundary" among the sister fields. We should ultimately work in concert toward the end of creating a more harmonious society that provides equitable access and equitable participation that is in the best interests of all people. It is a falsehood to assume that there should be clear "boundaries" in the helping fields. This is in fact, not how we work effectively as counseling professionals.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

We are not clear what you are asking but before advocating for a client one should always ask the client and make sure that this is something that the client wants you to do on their behalf.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

I am not really into boundaries, sorry!

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

Not being a Social Worker, I do not know what SW are taught. My counselors in training learn about the advocacy model that encompasses micro, meso and meta levels of advocacy.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

I don't think there is a distinction in terms of boundaries because no one profession should own a particular intervention such as advocacy work. Clients don't care whether they are working with a SW or a counselor. All clients care about is whether or not the professional helper can help them get at the root of their problem. Counselors arrive at advocacy from their individual counseling work and social workers arrive at individual counseling through their community based work. In other words, counselors begin with psychology and it leads them to sociology. Social workers begin with sociology and it leads them to psychology.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

I would first describe the unnecessary and artificial boundary that counselor educators and social work faculty members often perpetuate by trying to legitimize such a boundary in an effort to distinguish what in actuality are similar advocacy services provided by counselors and social workers. I would then proceed to describe the various advocacy competencies endorsed by the American Counseling Association and discuss how such competencies complement the advocacy services implemented by social workers.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

<<

>>

Survey Completion
0%  100%

Appendix L

First Likert Question Three

Each item is a response from an expert panel member. Please rate your level of agreement with each item.

The following items were in response to Question 3:

As counselor educators, how can we train our students to promote social justice advocacy while maintaining a distinctive counselor identity?

Strength based perspective which includes the work of Bonnie Benard (Resiliency) in which we move away from deficit language that continues to label people of color, LGBTQI, Low SES, etc... and teach our students how to empower our clients to act upon their reality rather than adopting labels that are problematic and subsequently internalized.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

ACA Advocacy Competencies should be the foundation. Assignments can be developed using the Advocacy Competencies in which students are required to do background research to prepare to identify the appropriate advocacy action and potentially act. Readings that help students understand systemic and ecological frameworks are important. In terms of "maintaining distinctive counselor identity" I believe there is too much emphasis on that. I think the problem with that is that counseling training has been too narrow, thus limiting counselors' understanding of broader forces. It is important for counselors to be trained to better partner with colleagues who have other training and expertise.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

To me, the focus of counseling begins with client work, and aiding clients in accessing every resource necessary to achieving optimal wellness and success (e.g., social, personal, educational, economical). A counseling focus begins and ends with the client's stated goal, rather than with a diagnosis/perspective of pathology or with a focus on external systems. Hence, I recognize that some needed services may be external to the scope of counseling and the counseling setting (and again this is determined by one's job description), and in that case, our job is to put clients in touch with others who can provide those services.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

Without a doubt, counselors need to learn that our work with and on behalf of others is based on social justice principles. We must teach our students that a counselor's identity is distinguished by our understanding of how systems and institutions affect individuals and that we can best empower and create change by working from a systems approach.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

This question seems to imply that social justice advocacy and counselor identity are at odds - and that is not the case! Social justice advocacy is foundational to professional counseling. Recognized founders of professional counseling, including Frank Parsons, Clifford Beers, and Carl Rogers, were social-justice advocates. Students need to know this. Students also need to know that professional counselors, both individually and collectively, were at the forefront of both the multicultural and social justice movements in our field - and allied professions. Therefore, it is my considered perspective that social justice advocacy is integral to a full counselor identity.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

Ultimately our "distinctive counselor identity" has quite a bit of overlap with a number of our sister fields. For example, the wellness model in mental health is actually claimed by counseling, counseling education, counseling psychology and social work as a root identity value. Ultimately, the focus should actually be on developing counselors who provide services focused on developing a society where wellness, harmony and cooperation are key. This can be done in concert with our sister fields. Our "counselor identity" should be co-constructed with our sister fields instead of used as a way to clarify turf like "identity" as if we are in competition.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

First, have them learn neuroscience, neurobiology, and genetics for it is these fields that most clearly show that a social justice/preventive approach is needed. Their research is far better and more convincing than ours. Most geneticists I read are more into social justice than social workers or counselors. Next, teach them that poverty and oppression are root causes. Teach them that lifestyle interventions are what is needed—more than therapy. Diet, exercise, meditation, etc. are more important than our theories. Get them out in the community and ask them to show results. Even if only a soup kitchen.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

By infusing it into as many core and specialty counseling courses as possible with practical applications in the forms of cases.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

We need to use new models to better prepare students to integrate counselor and advocate into their professional identity. Counseling and advocacy need to be seen as 'two sides of the same coin'. You can't do one without the other effectively. To do this we need to train counselor educators on how to prepare students. Currently, counselor educators are not trained to do social justice advocacy work, yet many write about the need to do it. This is an ethical issue in that we have leaders who are not adequately equipped to train students to be able to be good counselors and social justice advocates. Many believe in sj but have not received any training in social justice education.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

First, as a counselor educator, I assist graduate students in understanding the historical evolution by noting how the genesis of the counseling profession is grounded in the advocacy effort of persons like Frank Parsons and Jesse Davis. I then proceed to explore the historical factors that resulted in counselors acquiring a unique identity that is largely based on ways of providing individual counseling services to stimulate the healthy development of individuals by largely fostering intrapsychic changes while moving advocacy services to the periphery of their work. I then emphasize that the combination of advocacy and direct counseling services reflects our distinct identity.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

<<

>>

Survey Completion
0%  100%

Appendix M

First Likert Question Four

Each item is a response from an expert panel member. Please rate your level of agreement with each item.

**The following items were in response to Question 4:
In what ways can counselors-in-training demonstrate social justice advocacy within their programs while maintaining a unique counselor identity?**

Clearly, in our research endeavors, our publications, the way in that we teach, the books that we teach and, lastly but not least; our pedagogy. Too many professors still teach from a Banking Method and do not teach in a way that develops critical thinking. By employing problem posing in our classes we begin to draw out our students who have been conditioned to only provide "right" answers.

Strongly Disagree
☐

Disagree
☐

Neutral
☐

Agree
☐

Strongly Agree
☐

Again, using the ACA Advocacy Competencies should be central, this is from the profession and uses the type of expertise that is central to counseling training as well as to expand the areas needed for advocacy action. Trainees can demonstrate social justice advocacy through applying each of the 6 domains of the Advocacy Competencies to cases and their internship sites.

Strongly Disagree
☐

Disagree
☐

Neutral
☐

Agree
☐

Strongly Agree
☐

Through maintaining a primary focus on client wellness/preventative work and, in training, a focus on development of clinical skills related to one-on-one counseling, rather than on diagnosis/pathology (e.g., APA focus) or on policy/lobbying/systems' change and/or case-management work (more social work). Hence, counselors would learn social justice advocacy in a wellness/preventative and strengths-based framework.

Strongly Disagree
☐

Disagree
☐

Neutral
☐

Agree
☐

Strongly Agree
☐

There can be opportunities, introduced by faculty, that provide encounters for counselors-in-training. The latter, through service learning opportunities can engage in community-based projects that empower and support communities and special projects. For example, counselors might do volunteerism at a gerontological center or one working with military families and children.

Strongly Disagree
☐

Disagree
☐

Neutral
☐

Agree
☐

Strongly Agree
☐

I am also concerned about this question as it seems to imply these areas are at odds with each other, which they are not. However, to your question, some ways counselors-in-training can demonstrate social justice advocacy with their emerging professional counselor identity by 1) demonstrating their understanding the varied developmental, contextual, and situational factors that contribute to human wellness, functioning, and disease, 2) demonstrating their knowledge of historical and present-day stressors that many clients encounter on a daily basis, and 3) demonstrating their knowledge of multicultural and social justice competencies, ideally through supervised experiences.

Strongly Disagree
☐

Disagree
☐

Neutral
☐

Agree
☐

Strongly Agree
☐

Counselors-in-training should work on paying attention to cultural and contextual issues underlying the challenges our clients face. The process of achieving social justice should be one that is participatory in nature and one that considers the community in which clients live as opposed to considering our clients as islands. This holistic wellness approach is at its very roots counseling identity and simultaneously social justice advocacy.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

Again, not into boundaries, but it should be easy to move ahead of slow-moving tightly-wound psychologists.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

By requiring them to participate in one of the many advocacy opportunities available through ACA, it's divisions, state and regional organizations.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

Unfortunately, counselors in training need to go beyond their training to incorporate a social justice perspective into their counseling work because counselor preparation programs continue to focus on how to do individual based work and not how to do community based work. Those in counseling who promote the need to do social justice advocacy work hold the perception of social justice advocacy as office based. This don't prepare students for the realities of what clients need. What they need to do instead is take courses and/or gain certification in community activism or public policy.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

Counselor education programs need to take leadership in this area by reforming their curriculum to include a balanced approach to more effectively address issues relevant to the above question. This can be done by ensuring teaching and learning activities in the classroom, practicum, and internship settings that require specific learning activities which reflect a balance in counseling theories and skills, consultation/collaboration skills, and prevention/ social justice advocacy interventions. This would provide the knowledge and support students need to effectively demonstrate social justice advocacy within their training programs while maintaining a unique counselor identity.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

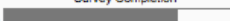
☐

Strongly Agree

☐

<<

>>

Survey Completion
0%  100%

Appendix N

Second Likert Question One

Each item is a response from an expert panel member. Please rate your level of agreement with each item.

M=Median IR=Interquartile Range
An interquartile range of 0 - 1.0 indicates consensus.

The following items were in response to Question 1:

What do you believe the differences are between social justice advocacy in counseling and social work functions?

M=4.1, IR=.82

Social Justice Advocacy entails developing the consumer's capacity to develop their subjectivity. As I am not as familiar with social work functions I can not speak to their expectations, however, with counselors, one must consider the consumer's world, including school, family, community, and work to help them identify the specific obstacles to their freedom of movement and self actualization. As counselors our role is not to foster dependency but rather to heighten the conditions by which our consumers whether they are children, youth, adults or families are able to respond to their world in a constructive and conscious manner.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

M=5.21, IR=.56

I believe there are many similarities. The main differences as I see it are in the areas that counseling and counseling psychology tend to emphasize: career and vocational counseling as well as prevention efforts. I believe that traditionally, social work trains students and practitioners well in terms of systemic interventions whereas traditionally counseling and counseling psychology has not. It is important, I believe, that counselors and counseling psychologists, to fulfill our strength based roots, must be better trained in understanding and intervening at systems levels.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

M=4.5, IR=.88

Because I am not a social worker, I cannot say what social work functions are. I have learned that many social workers are trained to specifically engage in advocacy through policy work at higher levels (e.g., governmental), while others are trained for more one-on-one clinical work that could entail anything at all (from social justice work to psychotherapy), hence, I believe it depends on the program. I would define social justice advocacy according to use of advocacy to remove any barriers impeding clients in achieving optimal wellness and career, social-emotional, and educational success (Ratts, 2011).

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

M=4.17, IR=1.29

Social justice advocacy is based on principles of equity, inclusion, caring, respect for differences, values of humanitarianism, and protection for those with little means to give voice to themselves. these principles are grounded in the ACA ethical standards and also in the multicultural counseling and social justice competencies. Social Work functions are informed on the principles and ethics of the social work profession.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

M=4.25, IR=1.25

From my perspective, that of a social justice-oriented counselor, the difference is that counselors consider the contextual circumstances or factors that influence a person's or group's functioning. With appropriate permission, they may act with or on behalf of clients or client groups, to change external barriers to clients' well-being and/or to reach other goals. I have never studied social work as a discipline however having worked with social workers, it seems to me that most social workers also consider people in context. Some connect people with existing system supports, e.g., social services, while others go beyond to advocate for individual clients or groups.

Strongly Disagree



Disagree



Neutral



Agree



Strongly Agree



M=3.9, IR=.82

In counseling, the goal of social justice is to ensure that everyone has an opportunity to resources such as health care, employment, and to achieve optimal mental health. This perspective is grounded in the belief that client problems are largely rooted in oppressive environmental factors. Social advocacy is the act of arguing on behalf of an individual, group, idea or issue to achieve social justice. Social advocacy in counseling refers to acting with and on behalf of one's client or others in the client's system in order to assure fair and equitable treatment. Social work is more remedial with the aim of alleviating the conditions of those in need of help or welfare.

Strongly Disagree



Disagree



Neutral



Agree



Strongly Agree



M=3.17, IR=2.42

The field of counseling tends to be more oriented towards prevention, education, life span human development and social work tends to be more oriented towards the medical model of helping. The counseling profession has tended towards more of an individual focus, and the social work field has tended to focus more on systems and communities.

Strongly Disagree



Disagree



Neutral



Agree



Strongly Agree



M=2.5, IR=1.67

Good social workers likely do more than counselors, as their training has that orientation.

Strongly Disagree



Disagree



Neutral



Agree



Strongly Agree



M=3.25, IR=1.25

Though similar, I see SW as doing systems of care work. Counselors work in systems but may have more direct contact with clients.

Strongly Disagree



Disagree



Neutral



Agree



Strongly Agree



M=3.75, IR=1.63

I stay away from discussions about "This is what social work does" and "This is what counselors do". These discussions lead to turf wars and implies that a profession owns a way of practicing. How we arrive at advocacy work differs based on our professional identities. For instance, the advocacy work counselors do usually stems from their work in the clinical setting. In other words, it is through individual counseling that counselors realize that they need to do advocacy in the community, which is controversial. Whereas, for social workers, their advocacy in the community will often lead them to realize the need to do individual counseling, which isn't controversial of an idea.

Strongly Disagree



Disagree



Neutral



Agree



Strongly Agree



M=3.25, IR=2.21

In theory, social justice advocacy is similar in the intervention strategies that counselors and social workers are encouraged to utilize in their professional practices. In actual practice, social workers operate from a tradition that supports more advanced advocacy interventions intentionally designed to foster environmental changes, intentionally designed to promote justice by creating ecological changes to stimulate healthy human development in families, schools, universities, workplaces, and communities as well as the broader society where people live and work. Counselors, on the other hand, continue to operate from a tradition that focuses on individual, intrapsychic changes.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

>>

0% Survey Completion 100%

Appendix O

Second Likert Question Two

Each item is a response from an expert panel member. Please rate your level of agreement with each item.

M=Median IR=Interquartile Range
An interquartile range of 0 - 1.0 indicates consensus.

The following items were in response to Question 2:
How would you describe to counselors-in-training the professional boundary between social justice advocacy in counseling and social work?

M=3.2, IR=1

At the stage in which a counselor has enjoined with their client there is an element of trust that has been created within the relationship. At this point, the counselor provides opportunities to not only acknowledge client strengths but then allows the consumer/client to examine their own subjective reality; this is where the client, themselves, must cross over to understand their own subjective world and the impact it has on them.

Strongly Disagree Disagree Neutral Agree Strongly Agree

☐ ☐ ☐ ☐ ☐

M=4.75, IR=.88

It depends on the setting in which counselors and social workers are working. I believe there is too much emphasis on defining boundaries because clients don't really care what the title is, as long as their needs are being met. However, practice should be aligned with training. I have worked in settings where both counselors and social workers were seeing the same client population. I have specialized emphasis in career/vocational counseling, this is an area that social workers traditionally do not have training. Because many of the clients I have seen have had issues related to work, this has seemed appropriate for counseling. In terms of social justice advocacy, all disciplines are needed

Strongly Disagree Disagree Neutral Agree Strongly Agree

☐ ☐ ☐ ☐ ☐

M=4, IR=1.63

I try not to proscribe this but hope we can come to the answer in dialog—I lay the question out there for them: "What is the counselor's role, in ensuring clinical success/meeting the clients' goals? What seems beyond the counselors' scope/role, and according to whom?" (I don't label anything as a social work task). We then discuss the constrictions of our workplaces (e.g., our roles are defined by the systems in which we work, as well as by our supervisors' perceptions and our own fears of taking risks as advocates). I give them the extreme opinions (from systems' change agents, to a solely intrapsychic, client focus), and we explore what these boundaries are/should be.

Strongly Disagree Disagree Neutral Agree Strongly Agree

☐ ☐ ☐ ☐ ☐

M=2.38, IR=1.56

Social justice advocacy engages counselors in empowering others to self-advocate. I would also inform counselors-in-training that they must also consider the context for advocating for change on behalf of individuals as well as groups. A distinction between social justice advocacy in counseling and social work is found in intervention levels. Counselors advance social justice advocacy at the individual, group, and community levels while social workers, from my perspective, intervene at the individual level, primarily.

Strongly Disagree Disagree Neutral Agree Strongly Agree

☐ ☐ ☐ ☐ ☐

M=4.6, IR=.99

This is a good question. I generally focus on what we - as counselors - do rather than attempting to compare our work or philosophy with others. I prefer to leave descriptions of social work to experts in that field. At the same time, I encourage students to deeply immerse themselves in their field (counseling) while recognizing and respecting allied professionals with whom they will likely work. I see respect and collaboration with members of allied professionals (and other people!) as a core multicultural/social justice competency.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

M=4.6, IR=.99

Ultimately there is no need for a "boundary" among the sister fields. We should ultimately work in concert toward the end of creating a more harmonious society that provides equitable access and equitable participation that is in the best interests of all people. It is a falsehood to assume that there should be clear "boundaries" in the helping fields. This is in fact, not how we work effectively as counseling professionals.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

M=4.6, IR=1.43

We are not clear what you are asking but before advocating for a client one should always ask the client and make sure that this is something that the client wants you to do on their behalf.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

M=3.75, IR=1.31

I am not really into boundaries, sorry!

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

M=3.94, IR=.75

Not being a Social Worker, I do not know what SW are taught. My counselors in training learn about the advocacy model that encompasses micro, meso and meta levels of advocacy.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

M=3.86, IR=.75

I don't think there is a distinction in terms of boundaries because no one profession should own a particular intervention such as advocacy work. Clients don't care whether they are working with a sw or a counselor. All clients care about is whether or not the professional helper can help them get at the root of their problem. Counselors arrive at advocacy from their individual counseling work and social workers arrive at individual counseling through their community based work. In other words, counselors begin with psychology and it leads them to sociology. Social workers begin with sociology and it leads them to psychology.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

M=3.86, IR=.75

I don't think there is a distinction in terms of boundaries because no one profession should own a particular intervention such as advocacy work. Client's don't care whether they are working with a sw or a counselor. All clients care about is whether or not the professional helper can help them get at the root of their problem. Counselors arrive at advocacy from their individual counseling work and social workers arrive at individual counseling through their community based work. In other words, counselors begin with psychology and it leads them to sociology. Social workers begin with sociology and it leads them to psychology.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

M=4, IR=.88

I would first describe the unnecessary and artificial boundary that counselor educators and social work faculty members often perpetuate by trying to legitimize such a boundary in an effort to distinguish what in actuality are similar advocacy services provided by counselors and social workers. I would then proceed to describe the various advocacy competencies endorsed by the American Counseling Association and discuss how such competencies complement the advocacy services implemented by social workers.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

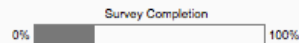
☐

Strongly Agree

☐

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Appendix P

Second Likert Question Three

Each item is a response from an expert panel member. Please rate your level of agreement with each item.

M=Median IR=Interquartile Range

An interquartile range of 0 - 1.0 indicates consensus.

The following items were in response to Question 3:

As counselor educators, how can we train our students to promote social justice advocacy while maintaining a distinctive counselor identity?

M=3.94, IR=1

Strength based perspective which includes the work of Bonnie Benard (Resiliency) in which we move away from deficit language that continues to label people of color, LGBTQI, Low SES, etc... and teach our students how to empower our clients to act upon their reality rather than adopting labels that are problematic and subsequently internalized.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

M=4.75, IR=1

ACA Advocacy Competencies should be the foundation. Assignments can be developed using the Advocacy Competencies in which students are required to do background research to prepare to identify the appropriate advocacy action and potentially act. Readings that help students understand systemic and ecological frameworks are important. In terms of "maintaining distinctive counselor identity" I believe there is too much emphasis on that. I think the problem with that is that counseling training has been too narrow, thus limiting counselors' understanding of broader forces. It is important for counselors to be trained to better partner with colleagues who have other training and expertise.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

M=4.2, IR=1

To me, the focus of counseling begins with client work, and aiding clients in accessing every resource necessary to achieving optimal wellness and success (e.g., social, personal, educational, economical). A counseling focus begins and ends with the client's stated goal, rather than with a diagnosis/perspective of pathology or with a focus on external systems. Hence, I recognize that some needed services may be external to the scope of counseling and the counseling setting (and again this is determined by one's job description), and in that case, our job is to put clients in touch with others who can provide those services.

Strongly Disagree
☐

Disagree
☐

Neutral
☐

Agree
☐

Strongly Agree
☐

M=4.38, IR=1.13

Without a doubt, counselors need to learn that our work with and on behalf of others is based on social justice principles. We must teach our students that a counselor's identity is distinguished by our understanding of how systems and institutions affect individuals and that we can best empower and create change by working from a systems approach.

Strongly Disagree
☐

Disagree
☐

Neutral
☐

Agree
☐

Strongly Agree
☐

M=4.94, IR=.56

This question seems to imply that social justice advocacy and counselor identity are at odds - and that is not the case! Social justice advocacy is foundational to professional counseling. Recognized founders of professional counseling, including Frank Parsons, Clifford Beers, and Carl Rogers, were social-justice advocates. Students need to know this. Students also need to know that professional counselors, both individually and collectively, were at the forefront of both the multicultural and social justice movements in our field - and allied professions. Therefore, it is my considered perspective that social justice advocacy is integral to a full counselor identity.

Strongly Disagree
☐

Disagree
☐

Neutral
☐

Agree
☐

Strongly Agree
☐

M=4.75, IR=1

Ultimately our "distinctive counselor identity" has quite a bit of overlap with a number of our sister fields. For example, the wellness model in mental health is actually claimed by counseling, counselor education, counseling psychology and social work as a root identity value. Ultimately, the focus should actually be on developing counselors who provide services focused on developing a society where wellness, harmony and cooperation are key. This can be done in concert with our sister fields. Our "counselor identity" should be co-constructed with our sister fields instead of used as a way to clarify turf like "identity" as if we are in competition.

Strongly Disagree
☐

Disagree
☐

Neutral
☐

Agree
☐

Strongly Agree
☐

M=4.38, IR=1.13

First, have them learn neuroscience, neurobiology, and genetics for it is these fields that most clearly show that a social justice/preventive approach is needed. Their research is far better and more convincing than ours. Most geneticists I read are more into social justice than social workers or counselors. Next, teach them that poverty and oppression are root causes. Teach them that lifestyle interventions are what is needed--more than therapy. Diet, exercise, meditation, etc. are more important than our theories. Get them out in the community and ask them to show results. Even if only a soup kitchen.

Strongly Disagree
☐

Disagree
☐

Neutral
☐

Agree
☐

Strongly Agree
☐

M=4.33, IR=1.35

By infusing it into as many core and specialty counseling courses as possible with practical applications in the forms of cases.

Strongly Disagree
☐

Disagree
☐

Neutral
☐

Agree
☐

Strongly Agree
☐

M=3.25, IR=1.13

We need to use new models to better prepare students to integrate counselor and advocate into their professional identity. Counseling and advocacy need to be seen as 'two sides of the same coin'. You can't do one without the other effectively. To do this we need to train counselor educators on how to prepare students. Currently, counselor educators are not trained to do social justice advocacy work, yet many write about the need to do it. This is an ethical issue in that we have leaders who are not adequately equipped to train students to be able to be good counselors and social justice advocates. Many believe in sj but have not received any training in social justice education.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

M=4.08, IR=.75

First, as a counselor educator, I assist graduate students in understanding the historical evolution by noting how the genesis of the counseling profession is grounded in the advocacy effort of persons like Frank Parsons and Jesse Davis. I then proceed to explore the historical factors that resulted in counselors acquiring a unique identity that is largely based on ways of providing individual counseling services to stimulate the healthy development of individuals by largely fostering intrapsychic changes while moving advocacy services to the periphery of their work. I then emphasize that the combination of advocacy and direct counseling services reflects our distinct identity.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

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Survey Completion
0%  100%

Appendix Q

Second Likert Question Four

Each item is a response from an expert panel member. Please rate your level of agreement with each item.

M=Median IR=Interquartile Range

An interquartile range of 0 - 1.0 indicates consensus.

The following items were in response to Question 4:

In what ways can counselors-in-training demonstrate social justice advocacy within their programs while maintaining a unique counselor identity?

M=4.25, IR=1.81

Clearly, in our research endeavors, our publications, the way in that we teach, the books that we teach and, lastly but not least; our pedagogy. Too many professors still teach from a Banking Method and do not teach in a way that develops critical thinking. By employing problem posing in our classes we begin to draw out our students who have been conditioned to only provide "right" answers.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

M=4.4, IR=.99

Again, using the ACA Advocacy Competencies should be central, this is from the profession and uses the type of expertise that is central to counseling training as well as to expand the areas needed for advocacy action. Trainees can demonstrate social justice advocacy through applying each of the 6 domains of the Advocacy Competencies to cases and their internship sites.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

M=4, IR=2

Through maintaining a primary focus on client wellness/preventative work and, in training, a focus on development of clinical skills related to one-on-one counseling, rather than on diagnosis/pathology (e.g., APA focus) or on policy/lobbying/systems' change and/or case-management work (more social work). Hence, counselors would learn social justice advocacy in a wellness/preventative and strengths-based framework.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

M=4.08, IR=.75

There can be opportunities, introduced by faculty, that provide encounters for counselors-in-training. The latter, through service learning opportunities can engage in community-based projects that empower and support communities and special projects. For example, counselors might do volunteerism at a gerontological center or one working with military families and children.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

M=4.38, IR=1.13

I am also concerned about this question as it seems to imply these areas are at odds with each other, which they are not. However, to your question, some ways counselors-in-training can demonstrate social justice advocacy with their emerging professional counselor identity by 1) demonstrating their understanding the varied developmental, contextual, and situational factors that contribute to human wellness, functioning, and disease, 2) demonstrating their knowledge of historical and present-day stressors that many clients encounter on a daily basis, and 3) demonstrating their knowledge of multicultural and social justice competencies, ideally through supervised experiences.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

M=4.86, IR=.64

Counselors-in-training should work on paying attention to cultural and contextual issues underlying the challenges our clients face. The process of achieving social justice should be one that is participatory in nature and one that considers the community in which clients live as opposed to considering our clients as islands. This holistic wellness approach is at its very roots counseling identity and simultaneously social justice advocacy.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

M=2.38, IR=1.27

Again, not into boundaries, but it should be easy to move ahead of slow-moving tightly-wound psychologists.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

M=3.75, IR=1.38

By requiring them to participate in one of the many advocacy opportunities available through ACA, it's divisions, state and regional organizations.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

M=2.4, IR=1.93

Unfortunately, counselors in training need to go beyond their training to incorporate a social justice perspective into their counseling work because counselor preparation programs continue to focus on how to do individual based work and not how to do community based work. Those in counseling who promote the need to do social justice advocacy work hold the perception of social justice advocacy as office based. This don't prepare students for the realities of what clients need. What they need to do instead is take courses and/or gain certification in community activism or public policy.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

M=4.13, IR=1.19

Counselor education programs need to take leadership in this area by reforming their curriculum to include a balanced approach to more effectively address issues relevant to the above question. This can be done by ensuring teaching and learning activities in the classroom, practicum, and internship settings that require specific learning activities which reflect a balance in counseling theories and skills, consultation/collaboration skills, and prevention/ social justice advocacy interventions. This would provide the knowledge and support students need to effectively demonstrate social justice advocacy within their training programs while maintaining a unique counselor identity.

Strongly Disagree

☐

Disagree

☐

Neutral

☐

Agree

☐

Strongly Agree

☐

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Survey Completion
0% 100%