Community and Public Arena Advocacy Training Challenges, Supports, and Recommendations in Counseling Psychology: A Participatory Qualitative Inquiry

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Abstract

Despite a continuing need for clinicians to engage in socially-just practice that addresses systemic factors impacting the mental health of clients through advocacy, there are often limited formalized opportunities for doctoral counseling psychology students to be exposed to and to engage in community or public arena advocacy. Two counseling psychology faculty members initiated and supervised a Participatory Action Research (PAR) team comprised of six advanced counseling psychology doctoral students and three early career counseling psychologists with experience conducting community and public arena advocacy. The nine PAR team members explored the doctoral students' experiences conducting advocacy during their doctoral training and the resulting qualitative data was analyzed using a content analysis methodology. The study results highlight the challenges inherent in facilitating and conducting these types of advocacy training activities, discuss essential supports provided by their doctoral programs, and offer recommendations to counseling psychology faculty interested in preparing their students to engage in this work.

Keywords: Advocacy, social justice, counseling psychology, social justice education, training

The field of counseling psychology has long aspired to develop practice that advances social justice; that is "scholarship and professional action designed to change societal values, structures, policies, and practices such that disadvantaged or marginalized groups gain increased access to these tools of self-determination" (Goodman et al., 2004, p. 795). However, re-imagining counseling work to address issues of systemic oppression has proven to be challenging, as the traditional 45-50 minute individual counseling session is ill-suited to facilitate societal transformation. Furthermore, as Toporek, Lewis, and Crethar (2009) commented, "it is only in recent years that [advocacy] has been widely accepted as core" to counselors' professional identities (p. 260). This article focuses on advocacy training within doctoral counseling psychology programs, a specialization with historical roots in the counseling profession that emphasizes social justice as a central pillar of research, training, and practice.

Despite the centrality of the idea of social justice in counseling and counseling psychology programs, opportunities for students to practice community or public arena advocacy are rare (Toporek, 2006). Pieterse, Evans, Risner-Butner, Collins, and Mason (2009) conducted a descriptive content analysis of fifty-four multiculturally related course syllabi from nationally accredited counseling and counseling psychology programs. They found the inclusion of advocacy can be uneven and although syllabi may have adhered to a multiculturally competent paradigm, actual content of the courses varied considerably. The authors highlighted "a need to more clearly outline the fundamental points of distinction and overlap between multicultural competence and social justice advocacy in counselor and counseling psychology training" (Pieterse et al., 2009, p. 93). Similarly, Constantine, Hage, Kindaichi, and Bryant (2007) asserted that counselors and counseling psychologists can serve as effective advocates and change agents when they interface with structures, organizations, or institutions that marginalized or disenfranchised persons and groups experience as inherently oppressive. They encouraged programs to include educational, legal, and public policy institutions as practicum placements to aid trainees in developing social justice competencies.

Notably, Singh and colleagues (2010) highlighted the paucity of research on counseling psychology doctoral students' social justice training experiences. The authors assert that as a result, "the voices of counseling psychology students are missing with regard to their experiences, perceptions, and training needs in the area of social justice" (Singh et al., 2010, p. 767). Furthermore, they commented that the silencing of these students' voices is especially troublesome, as they "typically hold minimal power within their programs and the larger systems that compose the field" (Singh et al., 2010, p. 767).

This paper explores ongoing efforts to implement advocacy training in doctoral counseling psychology programs, particularly from the perspectives of trainees. To this end, the faculty advisors, both of whom have spent decades working to bring advocacy to counseling psychology training, gathered a group of advanced doctoral students and recent graduates to document their experiences of receiving training in and conducting community and public arena advocacy. This article identifies the advocacy interventions the participant-authors employed at these levels, challenges inherent in conducting community and public arena advocacy as doctoral students, useful supports provided by represented programs, and recommendations to training programs whose members want to prepare their students to engage in this work. We hope that the information included in this document will support students and graduate psychology faculty who are interested in increasing their exposure to the myriad of advocacy endeavors available to their trainees and who would like to support the development of these projects in their programs.

Overview of the ACA Advocacy Competencies and Advocacy Training Strategies

Over 20 years ago, Atkinson, Thompson, and Grant (1993) recommended mental health practitioners address issues of social justice through expanding their professional identities to include additional roles such as adviser, consultant, advocate, change agent, facilitator of indigenous support systems, and facilitator of indigenous healing systems. Since then, counseling professionals have been encouraged to employ advocacy skills to respond to the array of inequalities that lead to deleterious psychological outcomes (Ratts, 2009). In 2002, the American Counseling Association (ACA), an independent mental health professional organization analogous to the American Psychological Association (APA), with an emphasis on counselors rather than psychologists, developed a set of advocacy competencies to provide guidance to the field. The Advocacy Competencies extend across three domains that move from *micro*-to *macro*-level interventions, and each domain is divided into interventions conducted *with* the individual/community or acting *on behalf* of the individual/community (Lewis, Arnold, House, & Toporek, 2002). The first (*micro or individual*) level includes student or client-centered advocacy; and the second (*meso or community*) level contains advocacy conducted within a school or community setting. The third and final (*macro or public arena*) level of the Advocacy Competencies focuses on public arena advocacy work.

The following section details each of these levels in greater detail, and reviews scholarship on the challenges associated with preparing students to engage in advocacy, training strategies that have emerged in the literature, and efforts of other fields to include advocacy competencies as a part of their training programs.

Advocacy Competency Level One
The first level of the ACA Advocacy Competencies (Lewis et al., 2002) focuses on client/student advocacy (see Table 1). Within this level, intervention strategies aim to empower individuals and address external obstacles to the client's development in the context of mental health interventions. Counseling professionals operating at this level typically *act with* or *act on behalf of* their clients. "Acting with" usually means the clinician and client work together to identify structural barriers, access necessary resources, and develop client self-advocacy skills to effectively respond to the relevant systemic issues. Conversely, there are situations that demand that clinicians *act on behalf* of their clients. For example, counseling professionals may step forward to assist their school or community and advocate for the allocation of necessary services on behalf of their individual clients.

Table 1
ACA Advocacy Competency Levels and Domains (Lewis, Arnold, House, Toporek, 2002)

	Client/Student Level	School/Community Level	Public Arena Level
Acting With	Client/Student Empowerment	Community Collaboration	Public Information
Acting on Behalf	Client/Student Advocacy	Systems Advocacy	Social/Political Advocacy

Advocacy Competency Level Two

The second level of the Advocacy Competencies (Lewis et al., 2002) describes interventions that are implemented in the school/community setting, including community collaboration and systems advocacy efforts (see Table 1).

Community collaboration. Practitioners engaging in community collaboration work with the community to identify and respond to systemic oppression and obstacles experienced by groups, organizations, and schools (Toporek, Lewis, & Ratts, 2010). Counseling professionals providing advocacy at this level are adept at identifying the needs of the communities and schools they serve while working to co-create problem-solving interventions to ameliorate these issues (Toporek et al., 2010).

Systems advocacy. The application of interventions on behalf of the community or school is known as systems advocacy (Lewis et al., 2002). Systems advocacy is typically conducted when the group is unable to enact the necessary change and where the practitioner might be better positioned to occupy a leadership position (Lewis et al., 2002; Toporek et al., 2010). While engaging in systems level work, clinicians might advocate on behalf of groups who do not have access to the same resources and power to create change (Toporek et al., 2010).

Advocacy Competency Level Three

Participating in public arena advocacy, the third level of the ACA Advocacy Competencies (Lewis et al., 2002), means engaging in interventions aimed at increasing public knowledge of issues leading to deleterious mental health outcomes for communities. Public arena advocacy includes both public information and social/political advocacy domains (Ratts, Lewis, & Toporek, 2010) (see Table 1).

Public information advocacy. Public information advocacy projects involve collaborations with communities to conduct research and create psychoeducational interventions that increase public awareness of systemic obstacles (Murray, Pope, & Rowell, 2010). Counseling professionals engaged in public information advocacy projects can also act with or on behalf of clients. Regarding the former, together with their communities, practitioners utilize their knowledge of human development and expertise in communication to disseminate information about macro-systemic issues to the general public through technology and other means. Regarding the latter, practitioners may engage in policy making and alliance building with other publicly-oriented advocates and collectives on behalf of their communities. Taken together, these dimensions of public arena advocacy provide two avenues by which practitioners can influence social change.

Social/political advocacy. During social/political advocacy work, counseling professionals take on the role of change agent in the systems that directly impact their clients, communities, and the broader population (Lewis et al., 2002). When practitioners work on behalf of groups that have been absent, excluded, or oppressed, they might engage in lobbying, policy reform, and the creation of alliances for change at the public arena level. Counseling professionals may also facilitate forums where the public can learn about socio-political forces such as poverty and develop research that may influence policymakers' decisions regarding the allocation of resources (Liu & Estrada-Hernández, 2010). Social/public advocacy often involves becoming active members of existing national advocacy groups and organizations, as well as lobbying to influence legislation and policy to impact the mental health of students and communities at the state and national levels (Crethar, 2010; Evans, 2010; Goodman, 2010).

Training Challenges

Current literature elucidates the multi-faceted challenges inherent in the training of advocates in counseling psychology programs (Toporek & Worthington, 2014). Kuo and Arcuri (2014) chronicled the challenges training programs encounter while conducting and maintaining community-based practicums. Barriers include identifying the stakeholders required to coordinate a community-based practicum such as the university psychology program, the practicum supervisor, graduate students, clients/patients, interpreters, social workers, and program directors at the site and the need for a strong working relationship between the university and the community organization. Ali and Sichel (2014) highlighted several challenges faced by students when incorporating and integrating training in structural competency (i.e., social justice paradigm focused on advocacy informed by the historical oppression of marginalized individuals and groups). According to their report, a primary obstacle these students experienced was significant time constraints due to coursework and clinical training requirements. Additionally, they found some faculty and trainees were opposed to the rejection of core components of the biomedical model. This is an important point that calls for further examination of the strengths and weaknesses of the biomedical model and the emancipatory stance. Given that the literature has identified several areas of weakness in the training of doctoral counseling psychologist advocates, it is essential to determine what strategies programs have utilized to ameliorate these challenges.

Training Strategies

Koch and Juntunen (2014) highlighted the importance of pedagogy that promotes social justice through non-traditional teaching methods, service learning, and consultation skills. Mallinckrodt, Miles, and Levy (2014) suggested the importance of developing a counseling psychology curriculum based on the science-practitioner-advocate model originally proposed by Fassinger and O'Brien (2000). Mallinckrodt et al. (2014) describe a graduate training curriculum that merges three roles: practitioner, researcher, and advocate, placing a practicum in social justice advocacy at the center of this tripartite model. Consistently, Lyons and colleagues (2015) suggested that students' time spent in advocacy work increases with more time spent in public policy advocacy training. They emphasized the importance of public policy advocacy training at the graduate level to foster future psychologists engaged in advocacy and public policy change.

Kuo and Arcuri (2014) discussed the benefits associated with successful practicum-based multicultural training serving refugee clients/patients across the three levels: (a) macro: trainees were sensitized to international and global events/populations (e.g., war and conflict, human rights issues concerning refugees and undocumented individuals, domestic and international refugee laws, policies, and regulations) prior to and during community-based practicum and/or practicum-based multicultural training; (b) meso: trainees left the classroom and entered the community to develop their experiential competencies through outreach, direct service, university-community collaboration, and evidence-based multicultural interventions; and (c) micro: trainees experienced increased and enduring growth, personal development, self-awareness, and clinical sophistication through the practicum-based multicultural training.

In addition, the strength of the working relationship between the university department and collaborating community partner, as well as the sustainability of that relationship, has a significant impact on the outcome of a program (Kuo & Arcuri, 2014). Therefore, communication, evaluation, and negotiation of programmatic values and goals should be continuously assessed. Lastly, challenges related to client/patient attrition and logistics/coordination of services may emerge and require

attention (e.g., client/patient transportation, medical health programs, financial strain, legal issues, and language barriers).

Despite the seemingly insurmountable challenges experienced by doctoral programs, a two-part special issue of *The Counseling Psychologist* recently offered specific ideas for training and supporting counseling psychology students in their development as social justice advocates (Koch & Juntunen, 2014). Areas of focus included coursework addressing social justice, advocacy, and multicultural awareness (Bhattacharyya, Ashby, & Goodman, 2014; Motulsky, Gere, Saleem, & Trantham, 2014); participation in systems-level advocacy (Ali & Sichel, 2014; Motulsky et al., 2014); opportunities for self-reflection in the context of community-based learning, service provision, and collaboration with allies (Lewis et al., 2002; Murray et al., 2010; Toporek & Worthington, 2014; Zucchero, Iwaksaki, Lewis, Lee, & Robbins, 2014); and the application of a framework underscoring the impact of oppression and inequality on marginalized communities (Ali & Sichel, 2014). Finally, as few programs incorporate public policy into training experiences, students require specific skill-sets necessary to engage in community and public arena level advocacy (Motulsky et al., 2014; Speight & Vera, 2008). These skills include the ability to create and sustain relationships with allies, develop compelling arguments for the necessity of change, and lobby legislative bodies to promote socially-just policies and initiatives (Lewis et al., 2002).

Advocacy Standards in Other Specialty Training Programs

Evidence for the growing importance of advocacy competence can be seen in the adoption of training standards across related fields. The 2016 Council for the Accreditation of Counseling and Related Education Programs (CACREP) training standards requires all CACREP accredited programs to introduce students to "theories and models of multicultural counseling, identity development, and social justice and advocacy issues" (Section 2.2b). Additionally, the 2016 CACREP standards require that all students be trained in "strategies of leadership in relation to current multicultural and social justice issues" (Section 2.5k). Similarly, Chu and colleagues (2012) responded to the need for clinical psychologists to transform the community mental health system through the creation of 14 public psychology competencies. The resulting foundational competencies also included an emphasis on public policy and advocacy. The authors highlighted the utility of public policy and advocacy skills in securing the continued sustainability of programs for individuals experiencing mental illness, as well as ensuring that professional psychologists engage in system-wide change through influencing policy initiatives. The authors commented, however, that despite the importance of public policy and advocacy competencies, they "are not included in core elements of professional psychology training in its current state" (Chu et al., 2012, p. 44). They urged clinical psychology doctoral training programs to include these competencies in "didactic, experiential, and applied research modalities" (Chu et al., 2012, p. 47).

The field of community psychology has also developed a set of competencies aimed at assisting graduate programs in the review of their existing training practices, in addition to supporting programs in the creation of new educational opportunities. These competencies were developed to acknowledge the wide variety of skills required of community psychologists including, "action and advocacy for social and community change, building organizational and community capacity, developing and implementing prevention and intervention programs, participatory community research, and program evaluation" (Dalton & Wolfe, 2012, p. 8). Some of the competencies include community organizing and community advocacy; public policy analysis, development and advocacy; and community education, information dissemination, and development of public awareness.

This article contributes to the current literature by focusing exclusively on advanced doctoral students' and recent graduates' diverse community and public arena advocacy work, as well as providing a detailed discussion of the challenges encountered and the supports received while conducting advocacy in counseling psychology programs. Furthermore, this article includes student and alumni voices in the development of specific training recommendations for graduate programs interested in increasing their trainee's exposure and competence in community and public arena advocacy.

Method

This section provides a description of our Participatory Action Research (PAR) team and the resulting research study. We also describe the procedure we used to gather our members' experiences in conducting community and public arena advocacy and our method of analyzing the data.

Participatory Action Research Framework

Participatory Action Research (PAR) reverses the power-over position of conventional research methods and privileges local perspectives, community wisdom, and voices (Fals-Borda & Rahman, 1991). It challenges the traditional research dynamic by dissolving the boundaries between researcher and subject. To our team, PAR seemed an ideal framework for generating new knowledge about the experiences of our research-participants, counseling psychology doctoral students and recent graduates, as it is "designed to support those with less power" in their institutions and organizations (Hall, 2001, p. 171). During the PAR process, participants co-create a new study by determining what questions should be asked, how data should be gathered and analyzed, and how results should be utilized. Therefore, each PAR project is a "dynamic process that develops from the unique needs, challenges, and learning experiences specific to a given group" (Kidd & Kral, 2005, p. 187). Furthermore, PAR is non-hierarchical by design, allowing our team's student and faculty members to collaborate in a way that encouraged equity and shared power.

Sample

Our PAR team was comprised of six counseling psychology doctoral students and three recently graduated counseling psychologists. Two of our team members identified as Latina with Colombian and Guatemalan-American ethnicities; one identified as Black; one identified as Indian-American; four identified as White with Middle Eastern and/or Western European ethnicities; and one identified as Asian with Korean-American ethnicity. Eight out of our nine team members had received Masters degrees before beginning their doctoral programs, six in psychology, one in child and family studies, and one in Latin American studies. In sum, our PAR team members were comprised of seven women and two men and ranged in age from 28 to 40, with a mean age of 31.

Procedure

The project was initiated by the two senior counseling psychology faculty. They identified one current student and one recent graduate from their respective doctoral programs who had a demonstrated commitment to advocacy work to lead the study. The two faculty then sent an announcement to their academic colleagues inviting the collaboration of current students or recent graduates who self-identified as having experience in community and public arena advocacy. Potential team members were informed that the project would consist of "a co-authored reflection about how their training programs support learning and opportunities to engage in individual, community, and public arena advocacy." As described earlier, seven additional team members from diverse demographic backgrounds and different training programs in counseling psychology joined the team, for a total of nine participants. Given the

geographic diversity of their universities, the team members developed several ways to collaborate with one another as a team. During the course of the PAR project, team members met at several national conferences to discuss their progress. The PAR team members also utilized a variety of technologies in order to communicate across distances, including email, conference calls, and Google hang-out.

Given that the purpose of this study was to address the gap in the literature regarding counseling psychology doctoral student experiences with advocacy training in their graduate programs, the PAR process utilized by the team was designed to privilege the voices of the students. Once the students identified their research questions and developed effective strategies to gather their data, the faculty members took on an advisory position. This model is consistent with the flexible nature of PAR and is supported by the writings of Fals-Borda and Rahman (1991). Fals-Borda and Rahman noted that in order to promote the empowerment of the marginalized voices in the PAR team, the process might shift to the "people's own independent inquiry, in which the outsiders may be consulted at the initiative of the people" (p. 17). Similarly, the students in this project took on the primary role of researcher-participants and guided the study, while the faculty advisors provided technical assistance and support as needed throughout the process. The advisors did not contribute content to the study data and instead, focused their contribution on methodological support.

Content Analysis

Throughout the project, the team's PAR process informed the development of the resulting research data, which was analyzed using a content analysis procedure. Conventional content analysis is a qualitative method for developing valid inferences from data in order to understand patterns across texts; it is typically employed with the goal of describing a phenomenon (Krippendorff, 1989; Hsieh & Shannon, 2005). The aim of our study was to describe our participant-authors' experiences conducting community and public arena advocacy while students. The study incorporated Krippendorff's (1989) recommended six steps of content analysis, which include design, unitizing, sampling, coding, drawing inferences, and validation.

First, the team decided on the design of the study, essentially what they wanted to learn during the process. They decided to develop a series of mission statements for the project to help determine a direction for their work together. After sharing their vision and mission statements with one another and exploring central themes that emerged across the statements, the team determined that the purpose of the study should be to gather their experiences conducting community and public arena advocacy and to develop recommendations to counseling psychology doctoral programs based on their perceptions of the barriers and supports they encountered. They generated four open-ended questions to gather further qualitative information. These questions became writing prompts and included: (a) What community level and public arena advocacy have you engaged in at these levels? (b) How did your training program contribute to your development of competencies in community and public arena advocacy? (c) What barriers did you encounter as you tried to do community level and public arena advocacy work vis-a-vis your training program? (d) What recommendations do you have for programs to help students engage in community and public arena advocacy? Next, they identified the units of data they would analyze. Given the participatory nature of the project and the design of the study, the team determined that the student members would constitute the sample and they defined each member's written response to the four prompts as one unit of data.

The team began the third stage of the content analysis by reading three of the written responses and developed an initial coding scheme. The main themes that began to emerge across the members'

writings were organized into five thematic categories. Next, the remainder of the texts was analyzed and the existing categories were amended to accommodate the new data. They re-examined the categories in order to organize the participant-authors' experiences into 26 smaller sub-categories. The members graphically organized these categories and subcategories in order to better understand the relationship of supports and barriers to their ability to successfully conduct community and public arena advocacy endeavors. At this stage, the team was able to draw inferences to guide recommendations for counseling psychology doctoral programs wishing to increase their students' involvement in this work based on the above analysis of the aggregate units of data.

Finally, the PAR team worked to validate their findings. In qualitative research, this process involves an examination of the *trustworthiness* of their findings. Trustworthiness refers to the level to which the researcher can attest to the "integrity of the data," "balance between participant meaning and researcher interpretation," and "clear communication and application of the findings" (Nutt Williams & Morrow, 2009, p. 576). In order to increase the level of trustworthiness of the study, the team analyzed their responses using a content analysis procedure. The team also worked to develop a balance between the meaning behind each individual member's written response with the interpretations made by the analysis, by asking each member to review and approve the inferences and resulting recommendations. In addition, the faculty advisors did not participate in the coding and instead served as auditors, ensuring that the recommendations were based on the collected data. The team also utilized direct participant quotes to illustrate the themes that had emerged. Finally, the team hosted a session at a national conference, where they shared their initial findings and spoke with other students and faculty members across several institutions about their advocacy training experiences, ensuring that the findings were easily understandable to a larger group of students and educators. Next, the communication and application of the study's findings will be highlighted in the discussion section and through the use of connections to the current literature.

Results

The qualitative analytic methods described above resulted in five overarching categories, including experiences participants had conducting community advocacy; experiences participants had conducting public arena advocacy; supports students reported receiving from their doctoral programs while they conducted this work; challenges students experienced in their programs while engaging in their advocacy endeavors; and recommendations for programs to more effectively integrate community and public arena advocacy competencies into doctoral training. Themes within each category are discussed in the next section.

Student Experiences Conducting Community Level Advocacy
The first category included our team members' experiences conducting advocacy at the community level. Within the context of their doctoral programs, the student members of our PAR team have engaged in a wide range of advocacy projects with schools and communities through community collaboration efforts. See Table 2 for a summary. During this advocacy work, team members collaborated with members of schools, groups, or organizations to identify systemic issues and to develop strategies for ameliorating oppressive obstacles. These projects included PAR and advocacy with communities, the development of graduate-level training programs and opportunities, advocacy on behalf of communities in order to decrease marginalization, and organizational development and consultation.

Table 2

Students Advocacy Experiences. Adapted from ACA Advocacy Competency Levels and Domains (Lewis, Arnold, House, Toporek, 2002)

	School/Community Level	*Public Arena Level*
Acting With	*Community Collaboration* * Participatory Action Research with Communities * Development of Graduate-Level Training Programs and Opportunities	*Public Information* * Educating the Public Through the Utilization of Technology and Social Media
Acting on Behalf	*Systems Advocacy* * Advocacy on Behalf of Communities in Order to Decrease Marginalization * Organizational Development and Consultation	*Social/Political Advocacy* * Involvement in Policy Reform Efforts

PAR and advocacy with communities. Several of our team members stressed the value of utilizing PAR in their community advocacy work. Our participant-researchers described the PAR process as being closely aligned with their commitment to social justice and change within communities close to their university:

> *I had the benefit of facilitating a Participatory Action Research project with adolescents aimed at making systemic change. Together, the students identified the lack of gender-informed education about intimate relationships as an important issue in their community.... the students created a research protocol, developed a survey, led focus groups, and then presented their findings... [they] organized an assembly at their school to share their results with their peers, met with their principal to encourage the implementation of programming that reflected their recommendations.*

In comparison, another participant used the PAR process to successfully engage in community-based advocacy internationally and reported,

> *We started an international [PAR] project with women experiencing commercial sexual exploitation. I continue to collaborate in the project, which has presented the group of women with opportunities to study, form their own clothing and accessory line... and establish their company.*

Development of graduate-level training programs and opportunities. Researcher participants also reported that they engaged in community arena advocacy projects that addressed university-based systemic barriers and obstacles. Several of these projects created specific training opportunities for students to work towards ameliorating systemic issues that negatively impact the mental health of their clients:

> *A final and important step in our collaboration… was the formalization of a fieldwork placement in conjunction with [our university]. Graduate counseling students continue to increase access to services while engaging in a mutual learning experience via this training opportunity…. I experienced a great deal of personal and professional growth through our collaboration with [the fieldwork site] participants and staff.*

A second participant also developed training opportunities for her peers in her doctoral program and stated,

> *I… participated in the creation of a formalized Spanish language training program to train students to provide ethical, culturally, and linguistically psychological services to the predominant Spanish speaking communities surrounding [my university].*

The PAR team members also discussed advocacy endeavors aimed at increasing the odds that students across the U.S. would successfully complete their graduate programs:

> *I have advocated for high quality graduate training in a number of different ways... from the development of strategic goals to end the internship crisis, to the development of greater mentoring and funding opportunities for graduate students... to the management and growth of a 250 plus person network of student advocates, to work at the federal level to make education more affordable and the federal loan borrowing process more equitable for graduate students.*

Advocacy on behalf of communities in order to decrease marginalization. The majority of the PAR team discussed their engagement in advocacy to increase the inclusion of marginalized groups within their communities. In some cases, participant researchers discussed their advocacy work that focused on increasing access to mental health care:

> *I sought to increase access to Spanish-language counseling, social support services, and resource information in a semi-rural, Borderlands community. This multi-stage process included conducting a small-scale needs assessment... offering psychoeducational and support groups relevant to participants' needs, and providing individual counseling services. We later collaborated with [community members] interested in taking on leadership roles within their families and community... We created a [training program] through which seven local women learned about mental health promotion while sharing their knowledge and experiences.*

Other team members shared their belief in the importance of advocating for greater inclusion of community members in local institutions, one researcher-participant stated,

> *For five years, I have partnered with... a nonprofit day habilitation program for adult artists with developmental disabilities and psychiatric diagnoses. I also advocate for the integration of our participants into the larger… art world as professional artists. I collaborate with gallerists, mental health professionals, and curators to advocate for the inclusion of these artists into mainstream galleries and publications.*

Organizational development and consultation. The PAR team members also developed systems advocacy projects that included serving as consultants and increasing the organizational capacity of large service providers on behalf of the needs of communities. They discussed their development of interventions aimed at strengthening the infrastructure of organizations, developing relationships and fostering engagement with partners, and their advocacy for the greater allocation of funds and resources to address a wide variety of systemic problems. A team member reported:

> *I sought out opportunities during my internship year to learn more about how I might lend my experience in providing direct service to clients with trauma histories to fight systems issues that contribute to sexual violence and the marginalization of survivors. I eventually [was elected] as the Co-Chair of… [an] organization [working to] prevent sexual violence and reduce the harm it causes through education, research, and advocacy. [We] work to represent the needs of survivors and educate the public about available resources for services, education, and training.*

> *We also analyze city system policy… and partner with other local, state, and national agencies to disseminate information and advance our agenda.*

Many of our authors also consulted on behalf of marginalized communities in order to increase organizations' capacities to develop programs that effectively respond to needs at the state-level:

> *I served as a consultant on a project aimed at eliminating child abuse… on an inpatient rehabilitation unit, where we saw increasing numbers of non-accidental trauma cases. Through systems consultation, I worked with a burgeoning group… to strengthen their infrastructure, engage partners, and advocate for the allocation of funds and resources to address this… concern.*

Finally, other PAR researcher-participants discussed their advocacy work assisting international organizations in their work towards ameliorating economic inequality:

> *Given the sheer poverty within the community [I worked with in Rwanda], a local, sustainable solution was created in partnership with the Rwandan Red Cross [to create] a wraparound microcredit loan program providing start-up financial capital, business support groups, health care access, preventative health care, and children's education. I have been a co-founder and organizational developer for this program for four years now.*

Student Experiences of Conducting Public Arena Advocacy

At the public arena level, many members of our PAR team developed interventions alongside communities to increase the public's exposure to information regarding systemic barriers through public information campaigns. Our researcher participants also developed public arena interventions that advocated on behalf of communities as part of social/political advocacy endeavors. The student members of our PAR team developed advocacy efforts alongside communities that focused on dismantling macro-level systemic barriers through increasing public awareness of these oppressive forces. Finally, when our team members found that they had developed knowledge of important social justice issues, they advocated on behalf of communities through social/political advocacy interventions.

Educating the public through the utilization of technology and social media. Several members of our PAR team noted that the use of technology has increased their abilities to engage in public information advocacy. They reported that they utilized technology and social media forums to provide nurture, develop, and engage a diverse, amorphous, frequently changing public around specific macro-systemic issues. One participant commented:

> *I have participated in community-level advocacy work with Islamic communities [after a terrorist attack]. Many Muslim community members on my campus, in my client base... felt fearful and faced discrimination and violence after the bombing. As a non-Muslim ally, I created a project… which included consciousness-raising about discrimination towards Muslims and foreigners after the bombing, a myths and facts panel for allies and potential allies to learn more about Islam, documentary screenings… [I used a] social-media component to scale the initiative.*

Another member agreed that media could be a valuable tool in advocacy work:

> *[While advocating for undocumented unaccompanied minors, we were able to] disseminate information about the needs, status, and strengths of this group to the detention facilities in which they are housed, other community organizations, the American Psychological Association Graduate Students, the APA Task Force on immigration, national conferences… and information [regarding] lobbying efforts through [the use of] public media.*

Involvement in policy reform efforts. Our participant-researcher's advocacy experiences highlighted the diversity of social/political advocacy on behalf of communities. Many members of our PAR team shared their experiences working towards reforming public policy:

> *I have had the opportunity to do advocacy… focused on Asian American mental health, prison reform, immigration reform, structural causes to war in the Democratic Republic of Congo, mineral mining, and LGBTQ rights issues. Some of my advocacy at this level has been more involved, like attending an Asian American behavioral health forum at the White House co-sponsored by SAMSHA to support the Affordable Care Act and bills on prison reform, substance use, and mental health. Other involvement has been more local – such as attending prison reform rallies in front of the state house, contacting senators about immigration reform as a part of my research team, and being a part of national advocacy organizations like the Human Rights Campaign.*

She added the importance of connecting research to policy:

> *I often try to have a policy-aimed implications section in most of my presentations for courses or research. For example, in [a] seminar for a certificate program through my university, I urged my class to contact their senators about current legislation, which would require big electronics mineral mining companies to report if the minerals in their products were from conflict zones.*

A second participant commented on the role public policy advocacy can have on the allocation of funds for socially-just initiatives:

> *During my tenure as a doc student, I became the executive director of… a non-profit organization that outreached to homeless teens and young adults. In that role, I organized stakeholders around the goal of ending youth homelessness in the city, laying the groundwork [for a task force]. When I moved [for internship], I continued to stay engaged in policy issues related to homeless youth – participating in advocacy campaigns at the local and federal levels to increase funding and opportunities for these disconnected populations.*

Doctoral Program Supports

In support of their advocacy efforts, our PAR team reported that they received valuable assistance from their doctoral programs across the following training domains: program emphasis on social justice/advocacy, coursework, research opportunities, practicum sites, teaching opportunities, student organizations, networking opportunities, community collaborations/opportunities, mentorship/role models, and postdoctoral opportunities.

Program commitment to social justice and advocacy*.* Our participant-researchers agreed that their respective counseling psychology programs, especially those with a scientist-practitioner-advocate model (Fassinger & Gallor, 2006), supported the development and consolidation of their professional identities as advocates. They commented that their programs' emphases on social justice and advocacy were reinforcing, supportive, and facilitative of their growth. As one participant stated:

> *My training program made a significant contribution to my development of competencies in community collaboration and advocacy. [It is] founded in the notion of reflective action. The program's mission to promote social justice and advocacy encourages students to engage with the community and address systemic inequality in a collaborative, self-reflective, and action-oriented fashion.*

Furthermore, many of our team members stated that they sought doctoral training in counseling psychology for the explicit purpose of gaining the skills necessary to become effective advocates:

> *One of the reasons that motivated me to study counseling psychology was to become an advocate and have an impact in my community. Arriving to the United States as an international student... my hopes were to access resources that were scarce in my country.*

Another participant agreed:

> *As I researched programs, I was looking for opportunities to translate my experience in community-based work into clinical practice. I sought out the counseling psychology department at [my university], because of its emphasis on culturally-responsive and socially-just practice… I am fortunate to have studied in a program that encouraged our professional identities to include advocacy.*

Influential courses in advocacy engagement*.* Even though there are few formalized training protocols that provide curriculum recommendations for community and public arena advocacy (Myers & Sweeney, 2004; Speight & Vera, 2008), some of our participant-authors encountered doctoral coursework that served as important vehicles for their engagement with advocacy issues. For example, action-oriented courses, which included collaborating with community organizations, developing culturally-responsive intervention plans, being exposed to community/public arena advocacy, and participating in the implementation of social justice projects, taught our researcher-participants strategies to address multi-systemic needs.

Opportunities to incorporate advocacy into research. Several of our researcher-participants asserted that their program-based research endeavors served as essential supports in the development of their advocacy skills. For example, they reported that many of their faculty members encouraged them to participate in the community partnerships and research programs they had established.

Community advocacy encouraged at practicum sites. As our PAR team reflected on their advocacy experiences, they discovered how much they had benefitted from community-based practicum opportunities. For example, they reported that they were encouraged by faculty members to create relationships with marginalized groups such as immigrant and refugee populations, non-English speaking communities, and incarcerated youth:

> *My program encourages students to find practicum sites, which allow for outreach opportunities, it may even be a site requirement. Depending on the context, this can facilitate an opportunity for trainees to engage in community-level advocacy through their sites. Additionally, [my] program is supportive of students wanting to find alternative practicum opportunities that build in more community level advocacy… as long as the sites meet all of the APA requirements.*

These partnerships often led to their development of sustainable practicum placement opportunities focused on social justice and human rights advocacy:

> *I was allowed to develop a practicum site at the juvenile detention facility, which helped ground me in literature around the injustices of incarceration, particularly for poor youth of color.*

Opportunities to incorporate advocacy into teaching. Our PAR team also recounted the usefulness of imparting advocacy-related themes and promoted critical consciousness development in undergraduate and masters-level students while they served as teaching associates. For example, team members shared their passion for mentoring other students and supporting them in increasing their

advocacy skill set. One important way that our researcher-participants introduced advocacy in their teaching was through working to increase their students' awareness of societal power structures and dynamics. A member from our team stated:

> *We also collaborated with a community psychology program, which opened formal opportunities to TA in courses focused on organizational systems, attend speakers' series and lectures, and consult about avenues to advocacy.*

Opportunities to network with advocacy allies. Our PAR team members reported that they increased their advocacy skill sets while collaborating with other students and professional activists. One of our researcher-participants stated:

> *We have a... committee in our department, which has put on programming and events to raise awareness about social issues and bring like-minded people together. Student groups act as an umbrella for students who want to get funds or university support for their own advocacy projects. For example, the advocacy project I helped create… applied for funds through this student organization.*

Opportunities to collaborate with communities on advocacy initiatives. Team members underscored the importance of community collaborations and partnerships in their advocacy work. Several of our researcher-participants described interdisciplinary collaboration as essential to their growth as advocates and one team member summarized these experiences by stating:

> *I shared [with the faculty] that I was interested in working with the Latino Spanish-speaking community and they all encouraged me to begin the process of connecting with community organizations. Once I established a relationship with these community organizations, my training program worked toward creating more formalized relationships with these community organizations.*

Role models who provided mentorship in advocacy. Our team members highlighted the valuable support of several mentors and role models in their preparation for advocacy work, specifically those who provided guidance and encouraged them to take initiative. Most of our researcher-participants discussed the essential role of faculty mentors in encouraging students to learn from observing existing community-based advocacy interventions:

> *The primary and most essential element of my preparation for advocacy work centered around mentorship and role modeling. Many of the faculty were actively engaged in their own advocacy efforts and invited me to meetings and events to observe/participate, providing me with an understanding of the nuanced elements of the process of advocacy.*

A second researcher supported this statement:

> *From my mentors and peers I learned about multicultural psychology, and Participatory Action Research, as a way to challenge social norms that often exclude the worldviews of marginalized populations. One of the most helpful tools for me was to witness other advocacy projects in action. A team of interested students met weekly to discuss strategies, current opportunities to help the community, and potential challenges.*

Challenges

During the process of delineating the various types of advocacy projects our PAR team members had engaged in while doctoral students, various challenges emerged. Our researcher-participants commented that they experienced time and financial constraints, limited coursework, and perceived

program resistance to advocacy as significant barriers to their work. In addition, they stated that they encountered difficulties associated with ethical dilemmas and struggles defining appropriate professional boundaries in the context of advocacy. Lastly, despite the supports that many members had received, other researcher-participants cited limited training opportunities in community and public arena advocacy in their doctoral programs (see Table 3).

Limited time. Over half of our PAR team reported a lack of time as a significant obstacle to conducting community and public arena advocacy. They stated that they constantly juggle coursework, clinical training, research/scholarly activity, social justice advocacy work, and part-time employment/graduate assistantship responsibilities, all while working towards a balanced personal life. Despite their commitments to engaging in advocacy at multiple levels, our participant-authors reported experiencing scheduling strain as they worked towards completing necessary academic requirements. As one member commented,

> *faculty and graduate students are constantly performing a balancing act between coursework, clinical externship training, research/scholarly activity, social justice advocacy work, part-time employment, and maintaining a balanced personal life.*

Financial constraints. Limited funding for community and public arena advocacy projects was also cited by our researcher-participants as creating logistical barriers for doctoral students. Many of our PAR team members stated that they must seek employment to finance their studies, regardless of whether these positions meet their professional interests. These necessary paid positions limited their abilities to focus as intensely on advocacy goals,

> *[with] additional funding (internally or externally through grants), students would have more time to fully commit and focus on community and public arena advocacy work.*

Limited coursework. With the exception of the courses mentioned earlier, most of our PAR team members reported that their institutions did not offer courses specifically focused on advocacy. Instead, they typically learned about advocacy through informal mentorship with professors or through their faculty's research teams. In addition, none of our researcher-participants encountered coursework that specifically addressed advocacy competence in their programs.

Perceived program resistance to advocacy. Our team acknowledged that with increased doctoral and masters level mentorship responsibilities, heightened accreditation demands, and institutional pressure to publish and obtain external grant funding, many faculty may struggle to dedicate their limited remaining time towards community and public arena advocacy. Additionally, our participant-researchers stated that faculty and students may be discouraged from engaging in advocacy if it conflicts with the interests of the larger institution. Advocacy for graduate student unions, dismantling of institutional oppression, and social change efforts that challenge university practices may not be supported or encouraged. Some of our researcher-participants described experiences of feeling silenced by their institutions and faculty when trying to engage in advocacy efforts within their campus communities. At times, our team members also encountered obstacles in obtaining permission to count advocacy work towards clinical training hours:

> *[Receiving] permission to count my advocacy work towards my clinical hours was a struggle. I experienced resistance from my program, specifically around issues of supervision and concerns about whether some of my community-based advocacy work was actually "counseling."*

Another member stated that she was discouraged from engaging in advocacy by her program:

> *Faculty members are often concerned about the amount of work students are taking on and they discourage students from taking on any more than the program requirements. To me, this stifles unique learning opportunities, innovation, alternative professional development paths, and prevents students from applying the contextualized perspective we're taught in the real world. This may be in part due to stringent program requirements and faculty members want to ensure we graduate.*

Ethical dilemmas and professional boundaries. Our PAR team also struggled at times with navigating ethical issues unique to advocacy work (Goodman et al., 2004) and received limited training in understanding and resolving these dilemmas as doctoral students. For example, one researcher participant reported navigating potential boundary crossings:

> *While doing this work, I discovered that the strict boundaries upheld in traditional psychotherapy settings were impossible to maintain. I also often needed to give advice and direct guidance, providing mentorship and coaching instead of maintaining a neutral stance when working with communities. Overall, a large obstacle in my advocacy work was having to navigate the range of ethical dilemmas unique to these activities without a blueprint.*

Limited training opportunities in community and public arena advocacy. As mentioned earlier, although advocacy takes various forms in the community and public arena level, our participant-researchers' doctoral programs rarely provide opportunities to engage in public information and social/political advocacy. Our team reported that they had few training opportunities associated with their doctoral programs that provided guidance in generating community and public arena advocacy interventions and have had to seek opportunities outside of their programs to fill these gaps in their knowledge and experience. They stated that they looked for opportunities off-campus in local, state, regional, national, and international settings to develop and practice their skills:

> *Many [of my university's] faculty members are not involved in public arena advocacy, at*
> *least not openly… We do not hear frequently about legislation affecting our clients nor hear about many civic engagement opportunities related to our research or clinical work.*

Recommendations

As our PAR team members discussed their experiences of community and public arena advocacy, several themes developed regarding promising practices in the training and support of this work within their doctoral counseling psychology programs. Based on these conversations, the following recommendations emerged for programs interested in supporting student advocacy endeavors: (1) include their commitment to advocacy in their mission statements, (2) recruit trainees who have demonstrated a passion for advocacy work, (3) create and model a culture of advocacy, (4) incorporate advocacy competencies in all coursework, (5) develop opportunities for community and public arena advocacy, and (6) provide supervision in advocacy-related ethics and challenges (see Table 3). These suggestions represent pragmatic actions that several of our researcher-participants' counseling psychology doctoral programs already have taken to enhance their students' ability to support the development of competence in community and public sphere advocacy. Given that training programs must carefully craft their curricula to meet university and accreditation requirements, the guidelines described below are structured to be minimally disruptive to existing program structures and curricula, while maximizing students' exposure to advocacy training.

Reflect commitment to advocacy in program mission statement. First, our PAR team members suggested that counseling psychology programs that are interested in pursuing advocacy training

include advocacy as a prominent component of their mission statement. Mission statements serve as the guiding principle that underlies the program's philosophy and goals:

> *I would also suggest that programs present students with a coherent conceptual framework with regard to community advocacy, highlighting the link between their program mission, competencies, and coursework and core counseling psychology values and literature, social justice, multiculturalism, culturally-responsive prevention. This connection would help students view community collaboration and advocacy as part of their professional identity and roles versus merely activities in which they engage.*

Recruit trainees with a commitment to advocacy. Next, our researcher-participants recommended that counseling psychology doctoral programs interested in increasing their capacity to train doctoral students in community and public arena advocacy work to recruit trainees with a commitment to advocacy:

> *When interviewing prospective doctoral students [programs can] screen for their willingness and passion to engage in community and public arena advocacy. Given the history of counseling psychology, I believe it is important that we continue our legacy by inviting and admitting students that are committed to this work.*

Create and model a culture of advocacy. Our PAR team members commented that counseling psychology programs increase their ability to develop trainees with community and public arena advocacy competencies when they create and model a culture of advocacy throughout their programs. Given that faculty have limited time and extensive responsibilities, our participant-authors suggested that programs committed to advocacy consider incentivizing faculty participation in advocacy work. They also suggested that programs might also support advanced students in becoming connected to a larger group of change-makers through encouraging and modeling continual professional development. Our participant-authors envisioned that this could include taking an active role in local, state-based, subject-specific, and/or national psychological associations (Evans, 2010; Goodman, 2010).

Incorporate advocacy competencies in all coursework. Since the inclusion of multicultural considerations in counseling psychology programs, there is a greater emphasis on the development of awareness, knowledge, and skills necessary in the training of competent and culturally responsive clinicians and researchers (Arredondo et al., 1996). Similarly, our participant researchers recommended that doctoral level classes explicitly incorporate advocacy competencies such as those developed by ACA as an important component of culturally competent practice. They suggested that instructors provide sequential, graded, and cumulative assignments and opportunities for trainees to learn about essential advocacy elements (e.g., theories, organizational systems principles) in formal and informal training arenas:

> *Viewing social justice in the context of the counseling psychology field further strengthened my competence development and commitment to community advocacy issues. I would encourage other programs to use a similar approach.*

Develop opportunities for students to engage in community and public arena advocacy. Our team realized that as they increased their understanding of socially just practice, they required experience with hands-on advocacy projects; therefore they recommended that programs that are looking to increase their advocacy endeavors develop opportunities for students to engage in community and public arena advocacy while doctoral students. Members of our PAR team agreed that whenever possible, programs could work with students to find financial support for these endeavors, as

monetary stressors may prohibit some trainees from dedicating time to advocacy. They also suggested that programs disseminate information about research that is shaping policy and encourage students to contact legislators to lobby for initiatives that would improve the sociopolitical factors that are negatively impacting the mental health of their clients' communities. Our team also acknowledged that other academic programs within their university systems might have existing structures to support these levels of advocacy and encouraged collaboration with peers across disciplines to develop interventions in both classroom contexts and community settings. A team member commented:

> *One possible method to expose students to this work could be ongoing community or public arena engagement projects where students develop projects that both meet program requirements and contribute to systemic change.*

Provide advocacy supervision to all students related to ethics and challenges. Finally, our participant researchers suggested that counseling psychology doctoral programs with a focus on advocacy provide supervision to those students interested in conducting advocacy projects. In addition to navigating ethical dilemmas, Kiselica and Robinson (2001) note that advocacy work may also take an emotional toll. They discussed the "high price" paid while engaging in this work including being labeled a "troublemaker," experiencing backlash and harassment, and having one's job threatened. Furthermore, students will encounter unfamiliar systems, communities, and stakeholders when engaging in community and public arena advocacy. Supervisors can offer the necessary support students may require when encountering significant structural obstacles while working with communities, including minimizing the impact of vicarious trauma and burnout associated with these experiences (Catherall, 1995). One researcher-participant spoke of supervision as a key component of advocacy training:

> *Supervisory teams would be especially useful; networks of clinicians, community organizers, and other leaders who could help guide clinician-advocates-in-training through these experiences.*

Table 3 organizes supports, participants' experiences, and recommendations in response to challenges described.

Table 3
Challenges, Supports, Experiences, and Recommendations for Conducting Community and Public Arena Advocacy

Students' Challenges Conducting Community and Public Arena Advocacy	Students' Program Supports and Experiences Conducting Community/Public Arena Advocacy	Recommendations
Limited Time	(S) Community Advocacy Encouraged at Practicum Sites: Advocacy can take place within program requirements at sites that encourage community engagement and outreach.	(R) Develop opportunities for students to engage in community and public arena advocacy
	(S) Opportunities to Incorporate Advocacy into Teaching	
	(E) Development of Graduate-Level Training and Opportunities	
	(E) Educating the Public Through the Utilization of Technology and Social Media	

Table 3 (continued)

Students' Challenges Conducting Community and Public Arena Advocacy	Students' Program Supports and Experiences Conducting Community/Public Arena Advocacy	Recommendations
Financial Constraints	(S) Opportunities to Incorporate Advocacy into Research: Dissertation projects and research assistantships incorporating advocacy. Support from faculty to engage in advocacy-focused research. Long standing partnerships with communities facilitating paid research opportunities. (S) Opportunities to Engage in Advocacy through Postdoctoral Fellowships (S) Opportunities to Engage in Advocacy Through Teaching (E) Facilitation of Participatory Action Research with Communities (E) Organizational Development and Consultation	(R) Develop opportunities for students to engage in community and public arena advocacy
Limited Coursework	(S) Influential Courses in Advocacy Engagement Counseling in Context: Community Consultation Course. Social Identities Course.	(R) Include advocacy competencies in all coursework
Perceived Program Resistance to Advocacy	(S) Program Commitment to Social Justice and Advocacy: Advocacy in mission statement of program, Scientist-Practitioner-Advocate Model. Advocacy as part of counseling psychologist professional identity. (S) Role Models Who Provided Mentorship in Advocacy	(R) Reflect Commitment to Advocacy in Program Mission Statement (R) Create and Model a Culture of Advocacy
Ethical Dilemmas and Professional Boundaries	(S) Role Models Who Provided Mentorship in Advocacy	(R) Provide Advocacy Supervision to all Students Related to Ethics and Challenges: Develop supervisory teams including clinician networks, community organizers, and other leaders to provide a wide-range of instruction to guide clinician-advocates-in-training

Table 3 (continued)

Students' Challenges Conducting Community and Public Arena Advocacy	Students' Program Supports and Experiences Conducting Community/Public Arena Advocacy	Recommendations
Limited Training Opportunities In Community and Public Arena Advocacy	(S) Opportunities to Network with Advocacy Allies	(R) Develop opportunities for students to engage in community and public arena advocacy: Disseminate information about research that is shaping policy. Opportunities can meet program requirements and serve community or public arena needs. Collaborate across programs to lean on existing support structures for advocacy.
	(S) Opportunities to Collaborate with Communities on Advocacy Initiatives	
	(S) Opportunities to Engage in Advocacy during Postdoctoral Fellowships	
	(E) Advocacy on Behalf of Communities in Order to Decrease Marginalization	
	(E) Educating the Public Through the Utilization of Technology and Social Media	(R) Recruit trainees with a commitment to advocacy
	(E) Involvement in Policy Reform Efforts	

(S) = Support, (E) = Experience, (R) = Recommendation

Discussion and Implications for Practice and Research

We incorporated a PAR framework to explore student experiences of advocacy training activities in counseling psychology doctoral programs. Our findings highlighted the challenges inherent in facilitating and conducting advocacy training activities, including limited time, financial constraints, limited coursework, perceived program resistance to advocacy, ethical dilemmas and professional boundaries, and limited training opportunities in community and public arena advocacy. We also identified essential supports provided by participants' doctoral programs, such as program commitment to social justice and advocacy, influential courses in advocacy engagement, opportunities to incorporate advocacy into research, community advocacy encouraged at practicum sites, opportunities to incorporate advocacy into teaching, opportunities to network with advocacy allies, opportunities to collaborate with communities on advocacy, and role models who provided mentorship in advocacy. Finally, we offered recommendations to training programs whose faculty are interested in preparing their students to engage in this work, including reflecting commitment to advocacy in program mission statement, recruiting trainees with a commitment to advocacy, creating and modeling a culture of advocacy, incorporating advocacy competencies in all coursework, developing opportunities for students to engage in community and public arena advocacy, and providing advocacy supervision to all students related to ethics and challenges. Despite our study's focus on counseling psychology doctoral students, the findings and recommendations might also be relevant to any training program that seeks to strengthen community and public arena advocacy skills in their students.

Counseling psychologists are well positioned to conduct advocacy due to their consideration of the role of systemic oppression on psychological functioning (Ratts et al., 2010). However, in reviewing the

existing literature, we found that few advocacy projects undertaken by counseling psychologists had been documented in detail and published in peer-reviewed journals. Thus, we urge experienced community and public arena advocates to share their knowledge of best practices in conducting this work. Through the admission, revision, and publication of meso- and macro-level outcome studies in peer-reviewed journals, counseling psychology students and professionals can broaden their exposure to the various manifestations this work can embody and learn from experts in our field.

Given the emphasis on empirically-supported interventions in the field of counseling psychology, future research could focus on gathering and studying existing advocacy training initiatives and discover the extent of how this training impacts practitioners' identity and effectiveness as clinicians, researchers, educators, consultants, advisors, and advocates. In addition, studies might be developed to measure the influence of community members' participation in advocacy efforts on mental health functioning, experiences of empowerment and self-efficacy, and further development of their social justice skillset.

Ratts and Ford (2010) have already developed the Advocacy Competencies Self-Assessment (ACSA) Survey that assesses an individual's effectiveness and level of competency as an agent of social change. Additionally, researchers could work to operationalize the existing competencies (Lewis et al., 2002) in order to create assessment tools to measure programmatic strengths and weakness, as well as the development of an advocacy competency continuum where programs could chart their progress towards becoming more adept at the inclusion of advocacy training in their graduate counseling psychology departments. Finally, given that counseling psychology programs are typically associated with APA, efforts can be made to develop advocacy competency guidelines as these apply to health service psychologists.

We chose to focus here on the impressions and experiences of advanced counseling psychology doctoral students in conducting community and public arena advocacy. Given the limited number of students who participated in this project, we recommend that future studies continue to gather the experiences of trainees across the United States. In addition, future research should analyze faculty members' unique experiences in conducting, supervising, and supporting this work. These future studies could identify the challenges experienced by faculty and programs in the training of students in community and public arena advocacy, professors' impressions of essential programmatic supports, and educators' recommendations on how to best prepare counseling psychologist trainees to engage in this work.

Regarding everyday practices, we encourage programs to challenge existing power structures by seeking student feedback on their advocacy training strategies and eliciting recommendations from these students on ways to better meet the needs of trainees seeking to increase their community and public arena advocacy skills. Training programs could include students' perceptions and suggestions in several ways including, but not limited to, offering opportunities to gather student feedback through anonymous surveys, town hall meetings, informal conversations with advisors; and partnering with graduate psychology student organizations. As Singh and colleagues (2010) offered, "it is critical to explore and understand trainees' perceptions of the degree of preparation they have in their programs to directly explore and confront issues of power, privilege, and oppression in training" (p. 767)

Limitations

There are several limitations associated with this study. As discussed by Knox, Schlosser, and Hill (2012), consideration of the particular sample and its composition is necessary in qualitative research. The

members of our PAR team that constituted our sample were drawn from only eight counseling psychology doctoral programs. Given the diversity of counseling psychology programs across the United States it is likely that this PAR team's experiences do not represent the full range of experiences of counseling psychology doctoral students. Furthermore, our sample is comprised solely of counseling psychology doctoral students and sampling from related institutions and fields including CACREP programs, social psychology, health psychology, and others might have yielded additional and potentially contradictory reports of student experiences. In addition, due to the small samples associated with qualitative research, it is not advisable to generalize the results of this study to a larger population (Knox et al., 2012). Instead, this study was designed to capture the experiences of these particular students in order to better understand issues associated with conducting community and public arena advocacy in their specific doctoral programs. Finally, this study utilized a PAR framework, where team members served as both the study participants and researchers. This perhaps introduced unintended bias into the analyses (though our process of member checking and supervision by senior faculty following data analysis mitigated this).

Conclusion

Community and public arena advocacy offer counseling psychology students with opportunities to work towards the amelioration of systemic barriers facing their clients and communities. Given that doctoral programs are already providing their trainees with valuable expertise in many areas of social justice and culturally-responsive practice, we hope that some of these recommendations may be useful in increasing student exposure to advocacy work. Every program already has a set of unique assets and expertise that can be harnessed to support this work and we encourage programs and students to seek opportunities, as Tatum (2003) suggested, in our "sphere of influence, some domain in which we exercise some level of power and control" (p. 105). Through engaging with this sphere of influence, programs may cultivate a new generation of counseling psychologists prepared to meet the complex socio-cultural-political challenges of our day.

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