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# **A Call For Social Justice In The American Counseling Association (ACA)**

## **Counselors for Social Justice**

A Division of American Counseling Association

### **Abstract**

Leaders and members of seven social justice-oriented divisions of the American Counseling Association (ACA) met at a Social Justice Summit called by the Counselors for Social Justice in March 2019 at the ACA National Convention in New Orleans. The goal of the summit was to create conversations among members of these seven divisions around ways to improve social justice within the ACA. These discussions at the summit were transcribed and summarized for the purpose of creating a document to outline how ACA could improve its social justice practice. The resulting call for social justice in ACA includes three topics derived from discussions of social justice in the counseling profession: social justice in the organization of ACA, social justice for the people in ACA, and social justice at the ACA conference. Implications for improved social justice practice in the organization are provided.

*Keywords: Social Justice; American Counseling Association; Counselors for Social Justice; Conference; Professional Development*

Social justice is one of the five core values of the counseling profession (*ACA Code of Ethics*; American Counseling Association, 2014), and is defined as actions taken by counselors to remedy social oppression and ensure that all persons have equitable access to resources and opportunities that have historically been reserved for those of privileged life status (Ratts, 2009; Sue & Sue, 2013; Thrift & Sugarman, 2019). Social justice counselors act within certain roles with clients holding oppressed identities, including client empowerment (Crethar & Winterowd, 2012; Martín-Baró, 1994), change agent (Lewis, 2011), consultant, and facilitator of indigenous healing systems that are congruent with the client's cultural beliefs / worldviews (Atkinson, Thompson, & Grant, 1993; Chávez, 2016 ). Social justice counselors also take on certain roles external to the counseling office to support clients from historically oppressed populations, including various forms of client advocacy (Toporek & Daniels, 2018) and social activism (Chávez, Fernandez, Hipolito-Delgado, & Rivera, 2016; Kiselica & Robinson, 2001; Ratts, Singh, Nassar-McMillan, Butler, & McCullough, 2016; Washington, 2018).

While there are multiple resources to support systemic work with clients such as the Multicultural and Social Justice Counseling competencies (Ratts et al., 2018), there are concurrently many ways that individualistic paradigms may dominate counselors' everyday interactions with clients from historically oppressed identities. Social justice competencies still need to be promoted at programmatic and organizational levels to counter unexamined privilege held by many counselors. Because most graduate students, counselors, and counselor educators are White American, they may hold White American cultural values (i.e., meritocracy, individualism, mastery, self-determination, achievement [Monk, Winslade & Sinclair, 2008]) and, therefore, might counsel from this cultural worldview (Crethar & Winterowd, 2012). Further, unless directly countered by challenging the "universalistic application of psychological methods and theories based on a European American paradigm" (Ginter, Roysircar, & Gerstein, 2018, p. 490) found in some counseling textbooks (see Ginter et al, 2018, for an example of this challenge), counseling graduate programs may perpetuate these values by teaching Western counseling theories and techniques (Seligman & Reichenberg, 2014), emphasizing an individualistic view of clients. If this individual-centric paradigm prevails, then the counselor may be perpetuating oppression through reliance on privileged values and worldviews (Crethar & Winterowd, 2012; Monk et al., 2008). This dynamic operates at organizational levels also (Dollarhide et al., 2014; Monk et al., 2008), suggesting that social justice must also be practiced at organizational levels to facilitate social justice at the individual level (Dollarhide et al., 2020). In response to concerns about the privilege-based lens of the counseling profession, the leaders of Counselors for Social Justice (CSJ) organized a Social Justice Summit (an ACA Presidential sponsored session) at the national conference for the American Counseling Association in New Orleans in March 2019.

The focus of this Summit was to address questions of social justice in the profession in general and in the American Counseling Association in particular, with the goal of improving social justice for individuals and the association. In the past, these conference sessions have been used to increase awareness of the needs of specific populations; specifically, Brubaker, Harper, and Singh (2010) highlighted a collaborative content session that was presented at the 2010 ACA conference with action strategies to support persons with LGBTQI identities.

The Social Justice Summit was the first time that multiple divisions collaborated to answer questions related to social justice within the profession and ACA as a whole, looking at social justice needs from a broad perspective. The purpose of this article is to present a summary of this discussion at the 2019 Summit with implications for improved social justice activity for ACA and professional counselors.

## Method

### Summit Description

**Discussants.** Leaders and members of seven divisions who are all focused on social justice in counseling attended the Summit: Counselors for Social Justice (CSJ), the Society for Sexual, Affectional, Intersex, and

Gender Expansive Identities (SAIGE), the Association for Multicultural Counseling and Development (AMCD), the American Rehabilitation Counseling Association (ARCA), the Association for Spiritual, Ethical, and Religious Values in Counseling (ASERVIC), the International Association of Addictions and Offender Counselors (IOACC), and the Military and Government Counseling Association (MGCA).

Since this was not a study but rather an attempt to capture suggestions for improved social justice, no demographic information was collected. Based on the original notes from the event, there were approximately 60 persons who participated in the discussion, and all seven organizations who were invited were represented by their president and/or president-elect. Overall, the group was mixed in terms of gender, race, ethnicity, and age, and included masters and doctoral students, professional counselors, and counselor educators.

**Discussion topics.** In advance of the Summit, the lead author contacted ACA leadership and received permission to take notes of the meeting (D. Caplan, personal communication). To determine the discussion topics, CSJ leaders consulted with the other division leaders, including personal correspondence with multiple ACA leaders, members, and students; and electronic posts on CESNET. From this process, the following seven questions were developed for discussion at the Summit:

1. How can ACA practice socially just organizational actions that benefit all members and divisions?
2. How can ACA address the class inequities of pursuing a counseling graduate degree?
3. How can ACA act in more socially responsible ways, for example, having the conference in Puerto Rico or other communities to support economic growth?
4. How can ACA more clearly communicate its commitment to social justice?
5. What are some examples of actions that ACA has taken that communicate commitment to social justice?
6. How can your division support social justice awareness in ACA?
7. What can counselors do to enact social justice in their everyday counseling practice?

At the Summit, all division leaders introduced themselves and their associations, and the president of CSJ informed those present of the purpose of the Summit and the process of the discussion. The discussants were informed that there would be notetakers who would try to capture their ideas accurately while protecting anonymity, and the discussants then distributed themselves equally to one of eight groups. The notetakers, who were officers of CSJ and several doctoral graduate students, had volunteered prior to the Summit and had participated in a 90-minute in-person and online training that detailed the content of the questions, the facilitation process, and the importance of accuracy and anonymity. This training involved planning how the questions would be discussed in the groups, how the notes would be taken (handwritten or on computer), what they would do with the notes after the Summit, and the importance of not recording names during the discussion, but instead, trying to capture the essence and emotion of each comment. There was one notetaker in each group discussion; all were women, four were counselor educators and the other four were doctoral students. They facilitated the discussion in each group for all seven questions.

**Discussion Summary Process.** After the Summit, the notetaker for each group sent typed or handwritten notes to the primary author. If the notes were handwritten, they were transcribed verbatim by two graduate student volunteers and verified by the lead author. Once all the notes were in typed format, the lead author sent all the notes to each person on the writing group. The writing group consisted of 5 members, all of whom were women. One woman identifies as Latina, one identifies as a U.S. citizen from Peru, one identifies as biracial (Caucasian and Japanese), one identifies as African American, and one identifies as Caucasian. The professional roles of the writing team included 2 members who represented CSJ leadership, 2 were counseling practitioners, 3 were counselor educators, and 1 was a counseling MA student (the five members held multiple identities

relative to this project). All members of the writing team have a passion for social justice and all are members of ACA.

The writing team independently clustered the content of the typed notes into topics directly stated in the transcripts. In a process of pattern coding (Soldaña, 2016), each writing team member condensed large amounts of data into a small number of analytic units based on how concepts were expressed; for example, stories of how ACA needed to practice social justice in conferences were kept intact and coded under “improving social justice in ACA conferences,” “cost of ACA conferences,” or “selection of conference cities with social justice issues.” There were three rounds of coding: first independent coding of all data, then a theme-building meeting of all five members; second independent analysis of the themes that were built in round one, then a consensus-building meeting of all five members; finally, third independent analysis of the consensus forged in meeting two, then a third and final meeting in which the consensus was confirmed by all five members of the writing team. This team then organized the themes of the notes into the structure presented below designed to present ideas expressed at the Summit that can improve social justice in the counseling association and in individual counseling work. All general and specific recommendations presented below are taken directly from the discussions at the CSJ Social Justice Summit at the ACA conference in 2019.

### **Results: Improving Social Justice in ACA**

Three main topics emerged from the Summit discussions. The first topic is social justice in the organization of ACA, and within this topic, leadership and communication were highlighted in the discussion. The second important topic to arise from the discussion involved perceptions that ACA should practice social justice focused on three population groups: members, students, and clients. The final topic, social justice at the ACA conference, included five subtopics: (a) process and rules, (b) affordability, (c) accommodations, (d) location, and (e) programs and giving back to the community. Each topic below is a direct presentation of ideas and suggestions offered by those in attendance at the Summit.

#### **Topic 1: Social Justice in the Organization of ACA**

Per the ACA website, the mission of the ACA is to “promote the professional development of counselors, advocate for the profession, and ensure ethical, culturally-inclusive practices that protect those using counseling services” ([www.counseling.org](http://www.counseling.org)). Summit participants stated that in order to meet this mission, ACA could first improve its *leadership* in terms of organizational logistics and relationship with divisions. Summit participants discussed various ways that ACA leadership could do more to create conditions of social justice in the organization itself by leading in culturally inclusive, socially just ways and serving as an exemplar of social justice following the tenets of the Multicultural and Social Justice Counseling Competencies (MSJCC; Ratts, 2016). As stated by the discussants in the Summit, an increase in the number of counselors serving as staff and leaders within ACA would demonstrate leadership by counselors for counselors. Furthermore, the process through which individuals secure ACA leadership positions could be more transparent, as could statements about the required and desired qualifications for elected, appointed, and volunteer positions. The discussants mentioned this would be helpful in identifying good matches between positions and those who aspire to lead, and allowing more counselors from historically underserved populations to understand and follow the path to leadership.

Another leadership issue discussed by participants focused on the silos that exist in the form of the ACA divisions. Discussants talked about how their divisions (CSJ, SAIGE, AMCD, ARCA, ASERVIC, IOACC, and MGCA) are doing robust, social justice-related work; however, that information is not regularly or systematically shared with the greater membership. Discussants further described how recognition of the hard work of divisions would demonstrate ACA’s commitment to and support for the missions of the divisions and

the populations and issues that they represent. A commitment to improved recognition of the work of the divisions could help to unite the various divisions within ACA.

A second subtopic was *communication*. The discussants shared how expanding communication about all ACA divisions, including information about what each division does, how individuals can become involved with various divisions, and how division fees are utilized could be shared through a web-based directory, a clear organizational chart, or a “new members packet” distributed to members and counselor educators. Discussants stated a strong desire for improved information sharing, with fewer silos and restrictions about how divisions communicate with each other, their members, and ACA. In addition, discussants reported that improved communication about the strategies for social justice published by ACA could result in improved outreach to organizations, schools, hospitals, and other community groups, which would increase awareness of opportunities for members to work within communities. Finally, discussants stated that ACA publications should focus more on social justice topics in journals and newsletters. Discussants did give credit to ACA for providing free CEU opportunities for members as well as liability insurance for master’s students. They acknowledged that these are important benefits; however, communication about the existence of these services could be improved.

## **Topic 2: Social Justice for People in ACA**

A second topic in the discussions at the Summit involved perceptions that ACA should practice social justice focused on three population groups: *members*, *students*, and *clients*. Discussants reported they wanted to see social justice practiced in terms of *members*, which included three topics: (a) voice in ACA, (b) access to ACA, and (c) resources for professional development. Discussants wanted a greater voice, suggesting that ACA should regularly collect data that would provide information about member needs and goals, including more Summits at which opinions could be shared with ACA. They stated it would be important for ACA to also collect input from clients, providing them with voice that informs the direction of the counseling profession. This would provide ACA with the living pulse and impact of membership. In terms of the second topic, access, discussants stated ACA could be more affordable in terms of dues and life “costs.” For example, discussants cited leadership opportunities arise that are not inclusive of those who want to serve but who have other life commitments, such as a family. In such a case, discussants suggested creating various levels of leadership would enable counselors to become as involved as their lives allow. Discussants also mentioned that access would be enhanced if members were more aware of various vulnerable populations, such as those with fewer economic resources, those who have been in prison, those with addiction and recovery issues, those with military issues, and those with ability differences. This effort would concurrently improve social justice for clients whose needs would be met through a better educated counseling workforce.

Furthermore, discussants suggested social justice for members would also include resources (the third topic) in the form of literature, data banks, social justice training, mentoring, webinars, and other professional development opportunities that are live streamed or are offered without cost. These resources were cited as helpful for all counselors to learn about innovations in mental health, ethics, specific populations, and social justice. For example, publications such as *Counseling Today* and web-based data banks could offer more information on local/state events and vulnerable populations. Discussants recommended that training in social justice issues could be improved in counselor education programs, including training in gatekeeping around social justice issues, and suggested that training programs that excel in social justice training could be recognized in a new award at the national level. Furthermore, in order to help members become more skilled in social justice, discussants recommended that the new competencies that address the needs of vulnerable populations should be highlighted at events and on the ACA website. Additionally, discussants cited mentoring in social justice as a helpful strategy so that members become more skilled at social justice work, and a national mentoring database could connect new social justice counselors with those with more experience. Another idea



presented by discussants included the suggestion that ACA members could be required to attend social justice training at national, state, or local conferences just as ethics is a required professional development topic, and also ACA could encourage state licensure boards to mandate social justice professional development for license renewal. Additionally, discussants suggested that a social justice topic could be selected by ACA as its focus for social justice action throughout the year, providing professional development, articles in ACA publications, and webinars on that topic. In sum, ACA could allow members more input, provide more access, and provide more training in social justice in order to increase social justice for members.

Focusing on a second population group, discussants articulated how social justice for *students* could be addressed by ACA. They stated that ACA should advocate for changes that would make graduate-level counselor education more accessible. Participants noted that current barriers that prospective students face highlight the high personal costs of higher education--in tuition and textbook costs, the full-time nature of most counselor education programs, and unpaid required field experiences of internships and practica. The discussants highlighted that these barriers pose a significant financial burden to many students, and, as a result, students of certain socioeconomic classes are not able to access a career as a counselor. For example, a single parent who desires a career as a school counselor would have to quit their full-time employment or drop to part time. They would also have to find childcare for the time in classes, practicum, and internship, for which they are not paid. All the while, they are also paying the costs of tuition and books. As described by discussants, the inevitable outcome of systems like this is homogeneity in SES in the profession. Compound this with statistics that suggest poverty is more likely to impact Black and Brown families (U.S. Census Bureau, 2013), and the homogeneity of the counseling profession becomes not just about class, but also about race. According to discussants, this is harmful not only to persons excluded from pursuing a counseling degree, but also harmful to the populations of clients who feel alienated from mental health services by the lack of professionals who share their identities and experiences (Terrell & Terrell, 1984).

To address some of these issues, the discussants urged ACA to advocate for a cap for program costs and highlight alternative textbook formats that may be more cost-saving to students. Discussants also suggested that ACA could advocate for more part-time programs as options for students who are not able to commit to full-time education, adding that there is opportunity to consider requiring counseling interns to receive payment or to increase awareness around those few internship opportunities that are paid. Additionally, discussants recommended that ACA could provide information to students who are seeking to find programs that may be more able to meet their financial and lifestyle needs.

Presenting suggestions for social justice for the third population group, discussants suggested that ACA should communicate more support for social justice work that impacts *clients and their communities*. Members should be reminded to provide pro bono work and work on a sliding scale to improve access to mental health services by those with limited means. Discussants posited that ACA could remind members to improve the overall community discourse by providing social justice training to local employers and agencies and providing mentoring to children and youth in vulnerable communities. In fact, discussants highlighted that ACA should strongly support counselors' community service, sending the message that counselors care about the community and that counselors are there to serve. While the Day of Service at the ACA conference is a good start, it needs to be expanded to more frequent, year-round, locally established events to emphasize the impact that counselors, supported by ACA, can have on a community.

### **Topic 3: Social Justice at the ACA Conference**

The third topic that emerged from the Summit discussion was social justice at the ACA conference, with five subtopics of *process and rules*, *affordability*, *accommodations*, *location*, and *programming to give back to the community* that emerged. According to discussants, the counseling profession needs to embody

and practice social justice at the ACA conference to remain a profession committed to social justice. The discussants reported that ACA can respond to its members by making the conference accessible to those with ability differences and affordable to those with financial constraints. Discussants suggested that ACA can create innovative conference processes, develop social justice programming, and choose conference locations representative of those communities the profession purports to support, as detailed below.

New conference *processes* are recommended. According to discussants, during the opening ceremony, each ACA division could discuss what they have been working on, highlighting progress on social justice issues. *Rules* about wearing conference badges should be consistently enforced; one participant related witnessing a situation where a Black graduate student was not allowed into an event without a badge but a White student without one was allowed in. Additionally, discussants suggested that ACA should encourage graduate students to present at the conference to further their career opportunities, increase competency and skills, and create networking prospects. It is important to commend the positive work that ACA is already doing at the conference, including town hall meetings, social justice summits, land recognition at the conference, gender-neutral bathrooms, and accessible shuttle services.

Considering *affordability*, discussants suggested that ACA choose conference locations in affordable communities and adjust early bird rates to a more realistic timetable that will allow for travel decisions to be more accurate. Likewise, discussants proposed that ACA offer a reduced registration fee to recognize the expertise of those who will be presenting, to lower penalty costs to those who need to cancel at the last minute, and to explore an ethical sliding payment option for those in need. Discussants suggested that ACA also could explore creating a financial aid package for registration with the support of vendors and local sponsors to increase students' attendance at the conference. Further, discussants recommended that ACA could remove financial barriers for conference attendees by considering offering online live-feed sessions, with closed captioning, to assist those who cannot travel because of a disability and/or high prohibitive costs. In terms of inclusion, discussants suggested that ACA could model advocacy work by facilitating appropriate *accommodations* for conference attendees. For instance, ACA could use Braille to make conference materials accessible and employ sign language interpreters throughout the conference sessions to accurately convey professional development content.

When it comes to *location*, discussants urged transparency about conference city selection and conference planning as relevant to a profession that wants to improve the quality of life of people in the United States. Discussants recommended that ACA could use minoritized vendors to support underprivileged and marginalized communities that have been impacted by natural disasters and/or have a history of political, economic, and/or social oppression. Moreover, discussants urged ACA to think regionally and host the conference in locations needing social justice support, for example, in Native Nations communities. An Indigenous Nation could teach ACA members about their lifestyle and diverse needs, while ACA members can immerse themselves in the culture to learn directly from the community.

Concerning conference *programming to give back to the community*, discussants suggested it could be of advantage to create a distinctive social justice conference, where the current ACA day of service might be institutionalized and expanded to serve the host community that transcends the conference. Moreover, to raise awareness about social justice concerns, discussants urged ACA to advocate for specific conference breakout sessions to address clients' intersectionality of multiple identities and the study of social justice competency interventions (see Dollarhide et al, 2020).

## Discussion

Multiple prior works call for social justice in counseling, but presenting a Summit discussion about social justice in ACA has not been published in counseling. The Summit on Social Justice in 2019 and resulting

recommendations to ACA are offered in order to move the profession forward, to bring greater awareness to ACA of the perspectives of leaders and members of the divisions that address social justice. It can be contextualized as an effort to bring one of the ACA core values into sharper focus for the profession.

This article is a summary of the discussion at the Social Justice Summit at the ACA Conference in March 2019. As such, it presents the opinions and perspectives of those in attendance from seven divisions who are committed to social justice in counseling and who are advocates for the issues of various clientele populations: clients who identify as LGBTQI, clients who identify as multicultural, clients who identify as differently abled, clients who identify as holding religious and spiritual identities, clients who identify as living with addiction and legal issues, and clients who identify as having served in the military. This article is intended as a call to action for the profession of counseling and for the association that serves the profession, and it is offered in the hopes that ACA may find some of these ideas to be congruent with its purpose and mission.

### **Implications**

ACA is a national organization designed to support the work of counselors and those who seek counseling. The Divisions present at this Social Justice Summit (2019) represented efforts to address the needs of individuals who may be marginalized, underrepresented, and unheard. Discussants called for improved communication of opportunities for leadership, research, education, and publication that could help to further the mission of each division as well as the ACA overall. Discussants highlighted that strong, representative leadership from ACA would support their social justice work, and in so doing, could improve the lives of countless individuals. Discussants suggested that ACA is strategically positioned to lead the field of counseling into the next development of professional identity that has social justice at its core.

When ACA is focused on social justice, the needs of the members, students in counselor education programs, and clients becomes paramount. Discussants highlighted that members would enjoy improved voice and input, access to the organization, and resources to ensure their professional development in social justice practice. Discussants further opined that students would appreciate support in terms of lower/contained costs and support for paid internships and practica. Finally, discussants suggested that social justice advocacy for clients and their communities would allow ACA to expand its awareness of, and accountability to, the vulnerable populations served by counseling professionals. Ultimately, clients will benefit most from all these actions by ACA because counselors and counseling trainees will be better equipped to meet the needs of historically underserved clients.

Importantly, discussants stated that the ACA conference allows for the counseling profession to build community and professional identity through fostering new relationships and strengthening existing ones. Moreover, to engage in competent social justice and advocacy work, the conference also creates opportunities for further education and the acquisition of new skills to better serve clients. Discussants posited that there is power in being connected to other professionals who believe in social justice and thrive on changing systems of oppression to achieve social equity. Based on these discussions at the Summit, ACA needs to start at home by supporting and bringing dignity to its own members attending the conference, celebrating their uniqueness while promoting social justice as one of its core professional values.

### **Next Steps**

Plans are already in place for another Social Justice Summit to be held virtually in 2021. There are additional plans to present this summary to the leadership of ACA, along with an offer to consult with ACA on as many of these suggestions as possible. Further, a recommendation for a future study could include action research (Stringer, 2014) in which systemic/institutional analyses could be undertaken. In such a study, researchers could examine how ACA is infusing social justice throughout the organization, which would then inform an understanding of areas of organizational challenge. Once these are identified, it would be possible

to identify and examine root causes and strategies for improvement (Stringer, 2014). This effort could result in additional systemic changes for ACA to support social justice values, principles, and practices throughout the organization. The effort also could improve capacity-building for systemic activism targeted at accreditation, licensure, laws, and public policies. Additionally, other action research studies could be performed involving counselor education programs to examine and address systemic and structural barriers to social justice curriculum and content, with the goal of improving social justice practice and training in such programs.

### **Limitations**

The ideas presented in this article were taken directly from a small subset of individuals who are invested and involved with social justice efforts, and who participated in a meeting at a conference. Thus, this is a potential limitation of this project. Further, this was not an empirical study; it was a compilation of ideas offered by those in attendance at one professional meeting. Therefore, the project does not fulfill the rigor of a qualitative research study. There was no attempt to represent the ideas discussed as those of the membership of any participating organization so the content reported cannot be generalized to any counseling organization. Embedded within the Summit discussion was the assumption that ACA needed to improve its expression of and support of social justice; there was no attempt, however, at the Summit or in this article to fact-check the statements or claims of the discussants relative to ACA's actions or inactions.

It is important to note as well that the call to action in this article does not capture the full depth and breadth of action that counselors, individually and collectively, need to undertake to improve equity and social justice in our society. The ideas presented in the Social Justice Summit were a starting point for important conversations about ways that counselors can engage formal and informal communities and organizations to advocate for changes in legislation, policies, and practices that will result in greater social justice for members of oppressed populations. With a focus on the professional association, participants in this discussion examined social justice with a meta-view from a systemic level in counseling.

### **Conclusion**

In closing, hosting this first annual social justice summit at the 2019 ACA convention proved fruitful and productive. About 60 ACA convention attendees participated in this summit and offered thoughtful, honest, and inspiring answers to the questions provided. Additionally, the participants shared their appreciation and gratitude for the safe space that was created at which they were able to speak their truths about social justice within ACA. It is our hope that this compilation of the participants' statements will inspire, guide, and motivate counselors and leaders of ACA and its divisions to enact the necessary changes to catapult our profession into a future where social justice is centralized.

### **Author Note:**

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# Reflections and Results from the Intersections: Teaching and Learning the Praxis of Intersectionality in the Psychology Classroom

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## Abstract

This article bridges multiple ways of knowing to explore the experience of an undergraduate psychology class focused on intersectionality. Drawing on feminist pedagogy, intersectionality, and critical consciousness literatures, we, the instructor and students together work to understand the experiences of the course and to offer our lessons learned. We present a detailed structure of the course, *Experiences of Intersectionality*, results of a qualitative analysis of students' written course reflections, and instructor reflections. Three themes were extracted from the data: Vulnerability and Privilege, "Small Slaps in the Face," and Empathy and Action. The discussion of the findings includes reflections from the course instructor and applications to praxis, particularly for educators.

*Keywords: Intersectionality; Feminist Pedagogy; Critical Consciousness; Course Based Research; Social Justice*

Hill Collins and Bilge (2016) wrote “the real work of advancing intersectionality as a form of critical inquiry lies in building a base of undergraduate and graduate students” (p. 47). They highlighted the synergy between intersectionality as both inquiry and practice. Here intersectionality is defined as a theory of understanding experiences of how intersecting identity categories impact individuals as they move through a matrix of domination (Hill Collins, 1990) of social institutions.

Within the realm of higher education, intersectionality often thrives in fields that are rooted within praxis (Hill Collins & Bilge, 2016) including public health, education, social work, and criminal justice. Psychology, on the other hand, has been slower to integrate intersectionality into inquiry and practice in the field. This may stem from the field’s focus on singular categories of diversity (Shin, Ezeofor, Welchh, Smith, & Goodrich, 2016), lack of praxis, the focus on the individual, and the methodological preference for quantification and experimentation over and above the qualitative methods often used to study intersectionality (Greenwood, 2017). Nevertheless, psychologists committed to social justice need to find ways to integrate intersectionality into theory, research, and teaching.

This article explores connections between critical consciousness and intersectionality literatures. Then, discusses the development of an undergraduate psychology class: *Experiences of Intersectionality*. Next, the paper turns to the participatory qualitative research project completed following the course. All 12 students in the course chose to have their final written course reflections included as a part of the data analysis process. Three students also elected to participate in data analysis and writing this manuscript. Together, we try to understand students’ experiences in the course, including areas of growth, tension, and dissonance. The discussion includes the instructor’s reflection and discussion. The paper concludes with applying our findings to teaching intersectionality in psychology and identifying challenges for moving forward in diverse classrooms.

As Lichty and Palamaro-Munsell (2017) argued, we often do not know how students are taking in information or responding to classes. In courses that teach social justice content and utilize aspects of critical and feminist pedagogies, the possibility for psychological harm is ever present (Lichty & Palamaro-Munsell, 2017). While engaging in critical reflective practice to understand one’s role and impacts as an instructor is important, coupling this with student reflections offers the possibility of enhanced understanding. In short, even informal analysis of students’ experiences can help extend the examination of intersectional pedagogy and critical consciousness development from intent to understanding of impact.

### **Intersectionality and Critical Consciousness**

Although intersectionality has its roots within Critical Race Theory (Crenshaw, 1991) and has evolved particularly within Women’s and Gender studies, there are tools within the field of psychology that can offer unique lenses to intersectionality and potential novel teaching strategies. Critical consciousness involves the ability to recognize systems of oppression and domination and acting to counter these systems (Freire, 1970/2000; Jemal, 2017). Critical consciousness may prove helpful in conceptualizing psychology’s contributions to intersectional theory and in framing a praxis for training students to use intersectionality as a lens, action lever, and practice tool in a range of settings.

While critical consciousness and intersectionality are core guiding principles to those engaged in social justice, they have been poorly integrated in academic literature. Critical consciousness suffers from a lack of integration of intersectional thinking. Freire’s (1970/2000) conceptualization of critical consciousness dichotomized the world into oppressed and oppressor groupings. This is at odds with intersectional theory which acknowledges the complex matrix of identities individuals hold, some of which grant privilege and others marginalization (Crenshaw, 1991). While there have been calls to more fully integrate intersectionality in critical consciousness research (e.g., Jemal, 2017; Shin et al., 2016), theorizing and work in this area is limited. Many models of critical consciousness development and research on critical consciousness continue to focus



on singular, primarily oppressed, identities (e.g., Diemer, Rapa, Park, & Perry, 2014; Jemal, 2017). Critical consciousness and intersectionality share a focus of shifting the blame of inequities from the individual onto social structures. However, critical consciousness has been understudied in privileged populations and has not fully accounted for the impact of intersectionality on development (Jemal, 2017; Wallin-Ruschman, 2018). Understanding how these concepts can be mutually informing may provide new avenues for advances in social justice research, action, and teaching.

Aspects of critical consciousness theory also may be helpful in developing strategies to teach and practice intersectionality in the classroom. While some intersectional scholars have argued for the centrality of social action as a component of intersectional pedagogy (Case, 2017), the mechanisms through which structural awareness of injustice leads to engagement in critical action are more developed in the critical consciousness literature (Jemal, 2017). Critical consciousness scholars have suggested that critical efficacy/motivation (Diemer et al., 2014), opportunities for action (Summers-Effler, 2002), exposure to role models (Summers-Effler, 2002), emotions (Wallin-Ruschman, 2018), and relationality (Wallin-Ruschman, 2018) may all play a role in moving individuals towards critical action.

The course discussed in this paper, *Experiences of Intersectionality*, utilized aspects of critical consciousness theory, and intersectional and feminist pedagogies as guiding principles in its development. Throughout the course and research process, the role of relationships and community were central themes. Relationships can serve as a form of critical action, such as in coalition building. They also can enhance conceptual aspects of intersectionality and critical consciousness by discouraging binary thinking and encouraging the examination of interconnections (Hill Collins & Bilge, 2016).

### **The Course: Experiences of Intersectionality**

With the above guiding principles in mind, I (Jen) developed and taught *Experiences of Intersectionality* as an undergraduate psychology seminar that met for two and a half hours every day for three weeks at a small Liberal Arts college in the Western United States. The college is in a mid-size town in a politically conservative state. The county is 70% White (not Hispanic or Latinx) and 26% Hispanic or Latinx (U.S. Census, 2018). The college is somewhat more diverse with a student body that was 13% international students and 30% students of color at the time the course was taught. The class was distinct from the broader undergraduate psychology curriculum that primarily focuses on quantitative methods and social, cognitive, developmental, and biological psychologies.

I (Jen) the instructor am a cisgender, heterosexual White woman. The majority of the 12 students in this class were White, cisgender women ( $n = 7$ ) who identify with a range of social class backgrounds. We collected information on the class from open-ended demographic forms in which all identifiers, including racial and national, were indicated by the students themselves. The class also included two White men, a Jewish woman, a Black man, a Latino man, and an African man. Students had a range of disability and mental health identities (e.g., anxiety, able-bodied, depression, ADHD). All students were undergraduates between 19 and 22 years old and identified as cisgender and heterosexual.

#### **Classroom Community**

Throughout the term, I (Jen) paid special attention to developing the classroom community. We sat in a circle and often engaged in daily check-ins to get to know each other. We also began the term by co-creating expectations for our classroom community. As a class, we committed to practices that would allow us to engage in dialogue around difficult issues. While we discussed challenging stories and experiences, we also ate and laughed together during the course. Early in the semester, I (Jen) discussed the difficulty in learning about privilege and oppression and we talked about how areas of resistance would likely arise (Rivera, 2017). I asked

students to attend to their bodily reactions (e.g., raising heart rates, stomach tightness) and note how these might help guide them through areas of defensiveness so they could stay open to learning and growth, even when their previous socialization and experiences were challenged.

We spent most classroom time in free-flowing discussions. While some members of the classroom community participated more, most students participated at least once daily. White women tended to participate most in discussions. As the instructor, I was an active participant and often shared my experiences and stories connected to class content while also offering questions for discussion.

I (Jen) constructed the class to address intersectionality through research and experiential knowledge across multiple media sources. Case and Lewis (2017) suggested that valuing multiple ways of knowing within dialogue can enhance critical consciousness development in the classroom. We practiced this in our classroom by including both personal narratives and statistical evidence in understanding experiences of intersectionality and intersectional theory. Assigned course materials included empirical research articles, podcasts, poetry, and videos.

### **Class Structure, Readings, and Activities**

I (Jen) assigned two primary texts, *Intersectionality: A Foundations and Frontiers Reader* (Grzanka, 2014) and *Race, Gender, Sexuality, & Social Class: Dimensions of Inequality and Identity, 2nd Edition* (Ferguson, 2016). Our course was heavy on race and gender content, but I made a deliberate effort to incorporate less discussed areas of intersection, particularly disability and class. I developed a website for the course which included descriptions of all assignments, a list of assigned readings, media clips, and additional resources.

When learning about intersectionality students can get “stuck” at the individual level (Rios, Bowling, & Harris, 2017), which is antithetical to intersectional theory which stresses the importance of understanding the structural and systemic nature of oppression and privilege (Crenshaw, 1991). Cole (2009) noted this individualizing tendency was particularly prevalent among psychologists and I feared this would be compounded by the fact that students would enter the course with a background in a traditional psychology curriculum that was highly focused on the individual. To counter this, I focused the course on teaching intersection through future “helping” professions. I designed the course around various social institutions to avoid becoming overly focused on the individual level. I also utilized this focus to frame the final action component of the course. I asked students to apply their understanding of intersectional theory by developing a website aimed at educating a specific career field (e.g., nurses, coaches, counselors) about implementing intersectional theory into professional practice. Finally, I hoped focusing on students’ future professions would make the content seem more applicable to each student and frame the process of continual growth necessary for critical consciousness development.

Following Grzanka’s (2017) advice that intersectionality courses move from the complexities of intersectionality to covering specific areas or issues, our course began with foundational readings on intersectionality [e.g., portions of Hill Collins (1990) *Black Feminist Thought* and *The Combahee River Collective Statement* (1979)]. We had one class session discussing the role of identity in intersectionality and then transitioned to talking about specific sites and settings to understand intersectionality in different contexts.

Throughout the course, I (Jen) incorporated additional types of media (e.g., podcasts and videos). This included the early viewing of the TED talk – *The Urgency of Intersectionality* (Crenshaw, 2016), which students continued to reference throughout the term. We then moved to reading about and discussing specific institutions. Around this time, we spent an entire class playing *C’est La Vie: The Game of Social Life*, an experiential classroom activity focused on building empathy and awareness, which assigns specific identities to students that become the base for them to move through various life decisions (e.g., where to live, attend school; Bramesfeld & Good, 2016). We also utilized the *identity signs* activity (Bolger, 2014) in which large signs representing various identities (e.g., gender, race, religious affiliation) are hung around the room and students are asked

a series of questions (e.g., The part of my identity that garners me the most privilege is \_\_\_\_.) and offered the opportunity to move to one of the signs. Students were welcomed to skip any questions, and no one was ever asked specifically to share. Some students chose not to participate when some questions were posed. Overall, students seemed to appreciate the opportunity to discuss aspects of their identity, particularly those that were not necessarily seen (e.g., religion, class, disability). Students that outwardly appeared dissimilar discovered areas of previously unknown connection. However, because of the high level of vulnerability and sharing, it is recommended that this activity should be handled with extreme caution and may not be appropriate in some settings.

### Assignments

Many assignments in the class were drawn from those outlined in *Intersectional Pedagogy* (Case, 2017). Early in the term, students completed the *Intersectionality PhotoVoice Project* (see Case & Lewis, 2017) which had students take intersectionality focused pictures, write accompanying descriptions, and present their work to the class. The assignment helped students apply their early understanding of intersectional theory to their lived experience and begin to build from their individual experience to structural and systematic understandings of marginalization and privilege.

We then transitioned into the portion of the course that focused on applying intersectional theory to specific institutions (e.g., family, education, science & health, law & politics, work, culture & sport, activism & resistance). A weakness of many courses focused on intersectionality is that they do not move beyond the individual level (Rios et al., 2017). To attempt to avoid this, I (Jen) designed the course to focus more on the application of intersectional theory to institutions instead of individuals. For the last half of the term, a portion of each class session had students pair up, chose an institution, and complete a section facilitation assignment that asked them to lead part of a class period by preparing activities (e.g., a game, a scavenger hunt) and discussion questions related to how intersectionality could be understood in that specific institution. Rios et al. (2017) suggested that student-led discussions help students bridge and apply complex intersectional concepts across domains and levels of analysis. These student-led sessions were instrumental in moving discussions away from the dynamic of students asking the teacher questions and the teacher responding and instead moving to a more communal discussion with less hierarchy. Student led class sessions also helped facilitate the process of dialogue that Freire (1970/2000) believed was essential for critical consciousness development.

The culminating assignment had students work alone or in pairs to create a website, using WIX, focused on applying intersectional theory to a professional group of their choice (e.g., counselor, nurse, teacher). Given the short time frame of this class, a website seemed the ideal way for students to apply their knowledge<sup>1</sup>. This assignment was designed with four goals in mind: 1) offer an opportunity to synthesize and think creatively about intersectionality, 2) challenge students to apply intersectional theory using ecological analysis, 3) create a shareable and actionable final project, and 4) learn a marketable skill. We spent time in class talking about education as a form of critical action, including its limitations. This is not the first project designed to apply action teaching principles to teaching intersectionality; for other similar intersectionality and public education projects, see Case and Lewis (2017) and Case and Rios (2017).

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<sup>1</sup> Example websites created by two student co-authors:

<https://alyssacase9.wixsite.com/website-intersect/the-oppression-domination-matrix>  
<https://cassidyrichey.wixsite.com/mysite-1/post/the-importance-of-language>

## Method

*Reflexivity.* My (Jen) education as a community psychologist included training in participatory, community-based, and action research methodologies. However, I consider myself a teacher first and foremost. My work in the undergraduate classroom constitutes my primary site of both social action and research. Practicing both social action and participatory research in an undergraduate educational setting provides unique challenges and benefits.

Participatory Action Research (PAR) involves a collaboration between the community and researcher that contains elements of popular education, social action, and community-based research (Brydon-Miller, 2001). PAR inquiry sees “all knowledge generation as a political endeavor” (Brydon-Miller & Maguire, 2009, p. 83) and acknowledges that no research is neutral or context-free. The values and orientation of PAR align with those of the class discussed in this article and the subsequent research project provided opportunities to extend the learning that occurred in the classroom. The very act of engaging in PAR has the capacity to enhance critical consciousness and help faculty and students “contend with the implications of their identities and positionality” (Brydon-Miller & Maguire, 2009, p. 86). Further, PAR is rooted in a relational approach to research (Brydon-Miller & Maguire, 2009) that reflects the focus of the content and practices of the course as outlined above.

In reality, the level of collaboration, control, and commitment of community members varies between projects labeled as PAR (Balcazar et al., 2004). While most literature on PAR focuses on researchers collaborating with community organizations, there is a growing movement among teacher-scholar-activists to turn PAR inward to explore classroom practice (Brydon-Miller & Maguire, 2009). Like many PAR projects, the current study falls short of meeting all the ideal conditions and practices of PAR. The processes and methods of PAR do not completely transfer to the undergraduate classroom. Ideally, PAR involves collaboration between the researcher and community at each stage of a study - development, implementation, and dissemination. In reality, the community is often left out of this first stage. Our study has the same weakness because of the short time frame of the course, three weeks. Further, adding the student-teacher dynamic complicates the power sharing that should exist in PAR. In the context of the classroom, there is no way to completely remove the hierarchy. These practical and ethical constraints motivated the design of this project. Finally, the “action” resulting from this project did not reach the level of transformative change advocated in PAR. Rather, the action in the project was limited to education and individual critical consciousness development. While the project was designed from the start as a PAR project, the action ideals of this methodology were not achieved.

### Research Process and Ethical Considerations

I (Jen) obtained IRB approval before the beginning of the term. On the first day of class, I told students that I was interested in conducting a participatory research project in which they had the opportunity to join. I stressed the voluntary nature of the project and we discussed the project multiple times throughout the term. At each stage, I told students they could withdraw at any time without penalty and I offered to discontinue or change the project if students desired. Ultimately all 12 students in the class chose to have their written final course reflections included as data for the project and none expressed a desire to discontinue or alter the project. Although I invited all students to be involved in data analysis and preparing this manuscript, only three students (all White women) expressed interest. I de-identified all the students’ reflections before analysis and I talked with the student researchers about the importance of research ethics and their responsibility to the participants, their classmates. We acknowledged that although I had de-identified the reflections, they might realize the identity of a participant. I stressed the importance of maintaining confidentiality and not sharing outside of the group the content of the reflections. The method in which we report demographics throughout this manuscript is purposefully vague to further try to protect the identity of all participants.

## Analysis

A couple of months after completion of the course the authors met and discussed the process we would use to code the data. All coders read Braun and Clarke's (2006) article on thematic content analysis as we utilized collaborative thematic content analysis to develop our findings. Thematic content analysis was used because it applies to a range of research questions and is a relatively accessible method of data analysis (Braun & Clarke, 2006). This was an important consideration when working with undergraduate students with limited time and resources available to learn more complicated qualitative data analysis techniques. All students had taken multiple classes with the instructor that included coverage of implicit biases. Coders were also encouraged to develop reflexivity by considering how their identities impacted both their experiences in the course and how they understood the data. We acknowledge a severe limitation of our data is that we were all cisgender, heterosexual, White women. We strove to keep this limitation at the forefront of our minds and discussed it every time we met to talk about our analysis process and corresponding findings.

We followed a slightly modified version of the process laid out by Braun and Clarke (2006), specifically making alternations to allow for collaboration. All coders read all reflections at least two times to familiarize themselves with the data. Coders were encouraged to read over the data in Dedoose (2018) - an online software used to organize and code qualitative data - and to use the memoing function to record personal reactions, possible biases, and early analytic thoughts. Then everyone coded all the data for the first time. Following this initial pass, coders were instructed to then look over their codebook and combine codes or create sub-codes, if applicable, and re-code the data a second time. We then met and followed the engaged codebook development process outlined by Flicker and Nixon (2015). First, each coder wrote all the individual codes on post-it notes, this was done so students would not be prematurely impacted by the findings of others. We then worked to collate, create hierarchy, and define codes to build a combined codebook, talking through any areas of disagreement or division as they arose. For example, if one of the coders believed a topic was broad enough to become a theme, but another coder believed it should be considered a sub-theme, they would present why they believed the topic should be placed in a respective category. Discussion continued until there was consensus. Overall, the codes that students wrote on the post-it notes were quite similar and there were no substantial areas of disagreement. As for the process of being participant researchers, the students expressed that while many of the responses were similar, there were some surprising differences in interpretations of mood or discussions expressed by their classmates in the final course reflections. This was often rooted in the respondent's own intersecting identities so the process of analyzing the data furthered the intersectional awareness of the student researchers. I (Jen) offered insight on the process of qualitative data analysis throughout these discussions but the student researchers drove the data analysis process.

Using the collectively created codebook we went back through another round of coding in Dedoose. We then met again and discussed if the codes were capturing the data. The codebook seemed to be capturing the data well and the students lead a discussion of the inductively developed themes. Continuing to follow Braun and Clarke's (2006) framework we did this by collating the codes into visual clusters which we began to develop into potential themes. Students then went and re-read all data excerpts with these themes in mind. The themes we identified seemed to capture important patterns of responses within the data. We stayed at the level of semantic themes (Braun & Clarke, 2006) meaning we did not try to read beyond the students' written words. We also spent substantial time discussing the limitations of our analysis given our similar social locations. Our positionality meant that we may have had a shared experience in the class that may not have been representative of other students. The lens through which we experienced the course and analyzed the data was through that of cisgender White women. We have tried to account for this by developing reflexivity and undergoing member

checks. We sent out the early analytic themes to the entire class, and also multiple drafts of the manuscript as it developed, but we never received any feedback.

## Results

In this section, we present an overview of the qualitative findings from our analysis of student course reflections, including illustrative quotes. We discuss three themes from our qualitative data analysis: Vulnerability and Privilege, “Small Slaps in the Face,” and Empathy and Action.

### Vulnerability and Privilege

In classroom discussion on the last day of class and in their written reflections some students wrote about other students’ lack of participation, including an unwillingness to partake in discussions about aspects of their identities. Students interpreted this as a struggle to be vulnerable with the outcome being controlled or guarded discussions, limited dialogue, and leaving fellow students in the dark about important components of intersectionality. Elizabeth, a White woman, wrote, “Although the class is filled with individuals with a multitude of identities, they are not always comfortable sharing their deepest insights; they aren’t always willing to become vulnerable.”

In their reflections, students noted that the representation across some intersections was limited in the course. Troy, a man of color, expressed “The only thing I could have hoped for more in this class was a better spread of intersections represented in the class body.” Overrepresentation of White, cisgender, heterosexual, able-bodied students, not only created frustration for students but, more importantly, shifted extra responsibility to those with underrepresented and marginalized identities. Some class members expressed the pressure of being the only representative of their identities or intersections, Troy continued:

I also found some of the discussions to be very difficult being the sole representative of [specific racial group] in a class full of Caucasian people. I felt as if some of the things I was saying weren’t really computing because they weren’t relatable.

For this student, class discussions may have been less helpful to his development.

Other students also wrote about how the class community and discussion facilitated growth. They connected the process of self-reflection with vulnerability, empathy, and developing plans for engaging in social action. One of the most pronounced patterns in the data, across intersections, was becoming more aware of privilege, which was mentioned in various forms in nine of the 12 reflections. Megan wrote “...that I have been one of those blind individuals. One who has been blind to my own privileges, one being the fact that I was born white, one who had been feeding the problem.” Further, Michael, a man of color wrote, “I was able to unravel my own intersections which helped me understand my own privilege and oppression.” In some cases students associated an increase in awareness of privilege to plans to engage in social action. For example, Miriam, a Jewish woman, wrote: “I can now also recognize my own privileges and see how I can use those privileges to help bring change,” and Sarah, a White woman, wrote “I wondered where the line stood. I asked myself, how do I use my privileged voice as a tool towards those with disadvantages in our society, but not speak so loudly that I drown out their own voices?... This class helped me so much on how to navigate thoughts of equality towards equity.”

Conversely, other students experienced a more negative impact on their identity awareness. Greg, a man of color wrote:

In this course, I became more aware of my disadvantages and my privileges. But more so my disadvantages. I feel that in a way, it is good that I am aware of it because now I know where it is actually my right to let myself resist or speak up. But I also feel that I could do just fine without knowing or thinking about

them. Unfortunately, me knowing all the ways society is being unfair to me by expecting me to not be different will not lift the burden on me from trying to change myself to fit more and assimilate.

Developing students' awareness of systems of injustice may add a psychological burden and potential vulnerability that students may not want. The added stress of such awareness may also be harmful to some students. Coupling raising awareness with education about action and opportunities to work towards change is essential, but potentially insufficient.

### **“Small Slaps in the Face”**

Seven students labeled the content or discussions of the course “controversial” or hard to talk about. In their final course reflections, students wrote about experiencing challenges to their previous socialization and belief systems. For example, Amanda, a White woman who reflected on the course's effect on her belief system shared, “I had to go through a learning curve in this class in order to understand that I am not immune to intersectionality.” She continues:

Learning about intersectionality was an amazing opportunity. I will not lie though; the class was difficult. The class was constantly challenging the belief system I had grown up with and using a combination of facts and personal stories to do it.

While this was a goal of the course, it is worth noting the psychological and emotional toll that learning about such concepts can have on students. The disruption of a belief system can be disorienting. Therefore, the creation of a safe space in the classroom as well as in the assignments allowed for students to acknowledge and begin to work through these reactions.

This class fostered thinking and discussion that brought to light situations and circumstances to which many students previously felt blinded. Megan, a White woman, wrote “When I think back on this... course I think about the many realizations that I had, most like small slaps in the face.” This quote, like others, coupled growing awareness with discomfort and even pain. Some students used identity to understand others. Elizabeth, a White woman commented, “I have learned through this course that I do not have to disregard my identities in order to be empathetic to others' experiences.” Learning to negotiate previous experiences and ways of knowing with the content of the course was an area of dissonance, but also an opportunity for growth for students.

### **Empathy and Action**

In the data analyzed for this project, multiple students wrote about developing empathy and understanding of others. Interestingly, unlike awareness of privilege, the development of empathy was not an overtly stated goal or outcome of the class, yet students attributed this area of growth to multiple different aspects of the course. Some wrote about the importance of dialogue as discussed in the first theme. Aaron, a White man, wrote on the topic:

I was able to view my identities specifically in relation to others, one strong example of this was the divide I saw in males and females. Certain discussions, such as walking home alone, brought to light subjects that I, as a man, hadn't really considered or never noticed while the woman in the group all had varying degrees of experience on.

Others discussed activities they perceived as building empathy with other students in the class. Sarah, a White woman wrote:

Although intersectionality is more than just identity, this [the identity signs activity] was a good exercise to bring the class together and show that everyone has had different experiences. Otherwise, society has trained all of our minds to make assumptions about each person, and to even create negative stereotypes.

Still other students noted the role of the PhotoVoice project in enhancing empathy. Megan, a White woman, noted:

My thinking has changed dramatically in the sense that from now on I will try to understand someone's background and intersections before just assuming that they are a horrible individual who made wrong choices in life. For example, the PhotoVoice project allowed us students the opportunity to open up and get to know one another better on a deeper level. It was interesting to learn more about the people you have class with, because it allows the opportunity to understand who they are and what thought process they come from.

While two students critiqued the course for not focusing enough on action and solutions, multiple students did note planned action as an outcome of the course. Many students synthesized multiple components of the course in coming to an understanding of the necessity of action. When reflecting on the course, Miriam, a Jewish woman, connected empathy, privilege, action, and the content of the course:

...I am able to look at people as individuals and understand that we are all going through different changes in our lives. I feel that I am going to be a more caring and compassionate individual since taking this class. I can now also recognize my own privileges and see how I can use those privileges to help bring change...

Sarah, a White woman, wrote about the necessity for action following education:

By the end of the class, I thought it was valuable to go over what actions to take once being educated on intersectional matters. The point of the class isn't to make you question your privilege and the ways that you support oppressive institutions. It's supposed to make you aware so you can be an active ally in your interpersonal interactions, your community and within the psychology field itself.

Some students reported understanding that equality is not enough, equity and action are required to counter oppressive structures. They were able to apply this to their future professions, not just short-term interpersonal action. Michael, a man of color, wrote:

This course has helped me with my life because it has taught me to fight for equity. We all want equality but that's not what people deserve, they deserve more. I plan on being in the medical field and it showed me to treat everyone fairly and to provide equal opportunity to all of those who I can do so to. I've learned to be empathetic for those with intersections because of the oppression they face from others. I know that I can't do much about the people who oppress them, but what I can do is advocate change and do my best to treat them right?

## Discussion

The results of our qualitative analysis suggest some areas in which the course succeeded in developing intersectional awareness and critical consciousness. We also identified limitations of the course and some unintended consequences. The development of an understanding of the role of privilege and empathy seemed to be positive outcomes of the course, although the course seemed to fail in fully avoiding the individualizing tendency common in some intersectionality work (Rios et al., 2017). In this discussion section, I (Jen) combine the results of the participatory qualitative data analysis conducted by students with my own reflections on teaching the course.

In the course reflections, students wrote about in-class activities and discussions as being the most impactful aspects of the course. Allowing ample room for dialogue and community building early and throughout the term seems an important outcome of our findings. While check-ins and other relational



techniques are often seen as too time-consuming, allowing space to develop relationships in the class, particularly across difference, is also part of the content. Case and Lewis (2017) similarly found that utilization of aspects of critical feminist pedagogy, particularly dialogue, was foundational to students developing critical consciousness. However, feelings of community and solidarity may be lessened or absent for members of the group that have more oppressed identities, particularly if they are part of the minority group in the classroom (Wallin-Ruschman, 2018). Like Lichty and Palamaro-Munsell (2017) have found, it is a constant “struggle to achieve my goals of disrupting dominant narratives while attending to the diverse body of students before me” (p. 6). Understanding how to create the optimal learning environment for students with diverse identities and socialization experiences continues to be a challenge in teaching intersectionality.

In the course, many of Naples’s (2013) dimensions of feminist praxis were foundational “placing in dialogue situated knowledge’s generated in multiple social locations” (p. 661) and allowing space for emotions. Using situated knowledge, collaboration, and dialogue were all important in allowing students to develop empathy and an understanding of intersectionality. As a teacher, I believe encouraging students to acknowledge emotions may help them avoid defensive reactions that are common when learning about social injustices. Such defensive reactions may stifle the development of critical reflection and engagement in critical action necessary for critical consciousness. That said, the emotion of privileged students in learning about marginalization for the first time may be harmful to students who have been living through this reality.

Importantly, understanding and empathy alone are not sufficient end goals of critical consciousness and intersectional awareness. Intersectional pedagogy must lead to critical social action (Case, 2017). Education about action options does not necessarily help students deal with the psychological burden of increasing their awareness of injustice, as it does not often provide specific, accessible, and ongoing avenues for critical action. Further, some individuals may be in a position where they are limited in their ability to engage in action. As an instructor, I worry that without these outlets, students may suffer from the negative burdens of developing critical consciousness or intersectional awareness. Alternatively, lacking avenues for action, students may not sustain their gains in critical consciousness and intersectional awareness following completion of the course, particularly if these thought patterns are counter to those they grew up with or at odds with their primary community or support system (Wallin-Ruschman, 2018).

Through classes designed to enhance critical consciousness and intersectional awareness, students can gain an ecological frame for understanding nuanced intersections of privilege and marginalization, which better positions them to engage in acts of resistance and critical action at multiple levels. Using the relative safety of the classroom to learn and exercise these skills may help future clinical or other service providers to gain confidence and expertise to utilize these practices in their future professions. Many social justice education classes conclude with an action assignment or project. However, it is not known if these experiences lead to long-term or sustained engagement with social change efforts. Although we cannot claim with certainty, it seems unlikely that students that took *Experiences of Intersectionality* will continue such involvement when they are not firmly rooted in a community of practice for critical action. In future iterations of the course, I (Jen) will focus on teaching the importance of community and sustaining action, likely using Adrienne Maree Brown’s *Emergent Strategy* (2017).

The complexity of intersectionality and breadth of application in the class discussed in this article, not surprisingly, created difficulties in teaching and learning. Ideally, students would come into a course with thorough knowledge and vocabulary for a range of oppressions and privileges. For students in psychology, this is often not the case. Rooting intersectionality within psychological theories that counter the field’s dominant focus on the individual (e.g., Bronfenbrenner’s Ecological Model) may decrease the possibility that intersectionality becomes primarily about identity. As an instructor, I (Jen) often face privileged students who initially claim that intersectionality ‘does not apply to me.’ This misconception is problematic and represents a harmful

misunderstanding of intersectional theory that continues the tendency to acknowledge marginalization, but not privilege.

The make-up of our class created further challenges, including expectations of vulnerability in the space. White women were the majority in the class and participated most in class discussion. The two White men and three men of color in the class participated less than the women. However, there was a desire for the men of color to share their experiences, while this was not a shared expectation by the White men. This problematic expectation of emotional labor on the part of already oppressed individuals is all too common in classrooms and activist spaces. Negotiating guidelines for meaningful dialogue is particularly difficult, but also immensely important in diverse learning communities. Ideally, an individual's privilege is challenged in a way that minimizes or allows spaces for defensiveness but, more essentially, space is opened for marginalized individuals to share and learn without their experiences being attacked or being put in the position to educate others. Navigating this borderland constitutes my (Jen) biggest challenge in teaching this course. However, diverse learning communities provide immense opportunities for learning and increasing both critical consciousness and intersectional awareness for students, faculty, and future service providers. Therefore, as instructors we must continue to develop our understanding of our success and our failures if we wish to use education as a site of social change work.

This study was imbued with several other limitations. Educators understand the process of development of critical consciousness and intersectional awareness differs based on an individual's social location. While we have tried with the presentation of our results to account for how positionality impacted experiences in the course, we did not have enough diversity of intersections to fully analyze this aspect of the data. We were also limited in reporting primarily on race and gender as intersections due to limited representation from other groups in the class and the content that students choose to write about in their final reflections. Further, by using written reflections from the course, we lost the ability to probe for additional information, such as we might have gained in an interview. We also are limited to students' interpretations of the class at its completion and do not know what longer-term impacts (if any) students experienced.

Teaching intersectionality in a space occupied by a high number of privileged students risked creating more harm for those with already marginalized identities. I (Jen) am aware that students may have not shared all the negative reactions or damages the class created. The power imbalance of the classroom and my privileged identity makes it hard to know what I do not know about the impact of my classroom. Future research specifically on the negative implications or reactions to such classes, particularly for marginalized students is needed.

For those of us that teach at the intersection of psychology and social justice, the content of our courses is often deeply personal. The primary strength of the current study is the integration of both faculty and student voices into understanding the experiences of the course and outcomes. As an instructor, I often do not know how students are reacting to or taking in the content of my courses. Students cannot take in knowledge about intersectional theory, privilege, or oppression if they are too defensive or traumatized from their own lived experiences. The current study started with the aim to investigate, with students, the impact of a course focused on experiences of intersectionality and application of this theory to various social institutions. This is a small and imperfect step in moving towards a deeper and shared understanding of the role of the psychology classroom in developing critical consciousness and intersectional awareness.

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# Exploring Youth Participatory Action Research in Urban Schools: Advancing Social Justice and Equity-Based Counseling Practices

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## Abstract

Youth Participatory Action Research (YPAR) is emerging as a group counseling practice that focuses on topics that are of personal interest to youth and aims to promote social change. Although YPAR has been found to facilitate critical consciousness, assist with youth self-identity development, and promote social change, few researchers have examined its application in counseling. The present study explored six school counselor trainees' perceptions of YPAR as a therapeutic intervention and its impact on counseling skill development and how it relates to multicultural and social justice counseling competencies. The themes that resulted from the Interpretative Phenomenological Analysis for YPAR as a counseling practice were: (1) fun, interactive, youth-centered approach, not like counseling or therapy, (2) implementation of challenges requiring planning, time, and commitment, (3) collaborative supports to step out of comfort zone, overcome initial hesitancy, and welcome new learning experience, (4) development of counseling skills and confidence as a counselor, and (5) understanding differences and increasing self-awareness and advocacy skills. Discussion and implications for school counseling practice are provided.

*Keywords: Youth Participatory Action Research; School Counseling; Positive Youth Development; Social Justice; Urban Schools*

## Introduction

Researchers have urged the need for culturally competent counselors to enter the field with knowledge of multiculturalism to work with diverse clients (Hook et al., 2016; Richardson & Molinaro, 1996; Sue et al., 1992; Vera & Speight, 2003). This call for multicultural competence is reflected in the American Counseling Association (ACA) Code of Ethics (ACA, 2014) and the Multicultural and Social Justice Counseling Competencies (Ratts et al., 2016). While these policy recommendations deserve praise, studies have shown that Black and Brown clients experience fear, mistrust, and discrimination from counseling professionals (Ahmed et al., 2011; Day-Vines et al., 2007; Lindsey & Marcell, 2012). Furthermore, Black and Brown clients are skeptical of seeking help from counselors (Earl et al., 2011, Lindsey et al., 2013). Existing counseling approaches to clinical models have been critiqued as acultural, often isolating clients of color (Tao et al., 2015). In response to these issues, scholars have argued for the use of action-oriented counseling practices to counter problematic power-dynamics (Smith & Chambers, 2015) and allow people of color, including youth of color, to feel engaged in, and lead the group counseling process (Cook & Krueger-Henney, 2017). The purpose of this present study is to evaluate and gather insights from counselor trainees who co-facilitated a series of culturally responsive participatory action research groups with youth as part of pre-service training coursework.

### Youth Participatory Action Research Defined

Participatory Action Research (PAR) uses community engagement strategies to actively involve community members in the research process (Baum et al., 2006; Cammarota & Fine, 2008; Langhout et al., 2014). Distinct characteristics of PAR include an emphasis on advocating for equitable sharing of power between researchers and research participants (Baum et al., 2006). Youth participatory action research (YPAR) is a PAR paradigm that empowers youth to engage as partners and co-researchers (Smith et al., 2010). Rather than remain as recipients of counseling services, YPAR encourages youth to guide the research and counseling process through dialogic processes in ways that empower them to address issues of personal interest and importance (Hipolito-Delgado & Lee, 2007; Smith et al., 2014).

The YPAR paradigm shares common goals with other counseling practices of promoting youth empowerment (Hipolito-Delgado & Lee, 2007). YPAR roles within the research collective are blurred so that youth lead the research process, thereby strengthening youth self-efficacy and participation for social change (Hipolito-Delgado & Lee, 2007). Although YPAR has facilitated critical consciousness, assisted with self-identity development, and affected social change, few researchers have examined its application in counseling (Cook & Krueger-Henney, 2017; Smith et al., 2014; Smith et al., 2010). This article seeks to explore how YPAR as a youth empowerment model, can be used in counseling, including as a model for Hip Hop Therapy.

**Youth empowerment.** The YPAR paradigm is closely associated with and incorporates key features of youth empowerment theory. Youth empowerment involves creating a developmental process that allows youth to participate in taking control over their lives and social environment, attain resources and fundamental rights, and achieve life goals (Maton, 2008). The focus on individual development is a crucial component of positive youth development (PYD) (Lerner et al., 2000). PYD is rooted in Bronfenbrenner's (1979) ecological theory of development and contends that external and internal factors simultaneously impact development. One's immediate environment and their surrounding community and cultural contexts work together to shape development. PYD programs emphasize developing five "C's" in youth: Competence, Confidence, Connection, Character, and Compassion (Bowers et al., 2010; Lerner et al., 2000). In addition, Christens (2012) contended that a relational component adds to the understanding of youth empowerment. Elements include collaborative competence, bridging social division, and facilitating others' empowerment allow for a better understanding of the connection between individual and community empowerment.

YPAR is a model of youth empowerment that shifts the traditional roles of research to position youth as leaders and active participants in the research process (Cammarota & Fine, 2008). In collaboration with a counselor, youth actively identify research topics, choose a focus, develop research methods, collect data, and decide upon action plans to disseminate research findings (Smith et al., 2010). Through the YPAR process, Langhout et al. (2014) found that participants developed relational empowerment, including collaborative competence, bridging social divisions, facilitating others' empowerment, and mobilizing community networks. YPAR, therefore, relates to youth empowerment paradigms through building relational empowerment skills and addressing community issues with adult facilitation.

Researchers have argued that YPAR goes beyond traditional models of youth empowerment by adding critical elements to these interventions (Cammarota & Fine, 2008; Ozer & Wright, 2012). Although youth empowerment programs provide opportunities for youth to recognize how social constructs influence their environment, YPAR allows youth to study these issues and, most importantly, how to find solutions to them, particularly issues that affect their well-being (Cammarota & Fine, 2008). YPAR engages youth in understanding the nature of social obstacles and deriving solutions to increase self-efficacy and agency in social change.

**YPAR dissemination.** YPAR also provides an outlet for community engagement through the dissemination of research findings and implications (Smith et al., 2010). Various methods of dissemination have been used with YPAR, including outlets to school administration (Kohfeldt et al., 2011; Smith et al., 2010), the community (Berg et al., 2009; Jennings et al., 2006; Wilson et al., 2008), and online platforms (Ozer, 2017). One common method involves the participants creating a presentation with or without technological aids to introduce the research project, describe its purpose, explain how data were collected, and share findings (Cammarota & Fine, 2008; Smith et al., 2010). Another creative outlet for research dissemination uses photovoice, where participants use photography to document and express their perspectives of the research project (Royce et al., 2006; Wang & Burris, 1997). Other forms of dissemination include planning a community event, communicating findings and implications online, displaying participant artwork depicting relevant finding, and performing music lyrics disseminated through online medias (Berg et al., 2009; Jennings et al., 2006; Levy et al., 2019; Ozer, 2017; Wilson et al., 2008).

### **YPAR and Counseling**

Engaging in YPAR provides experiences that integrate a number of counseling practices to facilitate personal and community empowerment (Hipolito-Delgado & Lee, 2007). Smith et al. (2010) explained how YPAR programs work in concert with school counseling projects due to their similarities with empowerment models for counseling practice. The group processes allow for participants to actively study relevant issues and respond to them (Cook & Krueger-Henny, 2017; Singh et al., 2012). In Smith et al. (2010), student members of the YPAR group reported profound impacts from their work that involved creating a PowerPoint presentation for their school's administration. Through their research efforts, youth participants expressed a sense of inspiration to pursue higher education and professional careers. Such YPAR experiences may facilitate youth development and are thus aligned with counseling goals.

### **YPAR and Hip-Hop Therapy**

The YPAR paradigm allows for the incorporation of a number of counseling practices in choosing the research topic, its research methods, and dissemination of the results. For example, Hip-Hop Therapy (HHT) may be used to guide methodological practices and disseminate research findings through lyrical products. An obstacle impeding best counseling practices with youth is associated with establishing rapport with the youth clients; however, HHT is a model of youth counseling practice that can be used to encourage youth participation. As Allen (2005) described, "HHT uses Hip-Hop music and culture to engage youth and address their issues in therapy by encouraging them to reflect on Hip-Hop lyrics as they relate to the youths' own life

experiences” (p. 30). HHT integrates music therapy, behavioral therapy, and narrative therapy through lyric analysis, self-reflection, facilitating behavior change, and allowing clients to share their story (Allen, 2005). Furthermore, allowing youth to express themselves through Hip-Hop when they closely identify this culture as a part of their identity brings an invaluable tool for the counselor to build rapport with clients (Gonzalez & Hayes, 2009). Both YPAR and HHT give youth a voice for expressing their perspectives of issues affecting their daily lives and thus engages participation with youth participants (Allen, 2005; Smith et al., 2010).

With these similarities in mind, Levy et al. (2019) suggested that pairing HHT with YPAR principles may help counselors to facilitate dialogue about systemic issues that students face through emotional lyric production and group collaboration. The process of lyrical creation, production, and dissemination provides counselors and students the opportunity to engage in discussion about and address salient community issues and thus lends itself well to the YPAR paradigm (Levy et al., 2019). Levy et al. concluded that the combining of practices from the fields of HHT, YPAR, and school counseling offer students the opportunity to engage in relevant action research through group collaboration.

### **Purpose of Study**

The present study focused on the implementation and outcomes of student counseling groups using YPAR with HHT and other dissemination practices in order to explore two research questions. RQ 1: How do school counselor trainees perceive the use of YPAR as a therapeutic intervention? RQ 2: How do school counselor trainees perceive engaging in YPAR and its impact on developing counseling skills, including multicultural and social justice counseling competencies? Given YPAR’s potential for prioritizing youth advocacy in educational settings, exploring its connections to counseling practice allows for group research that is anchored within and elevates young people’s voices and perspectives. Facilitating socially underserved youth access to and participation in research can transform the purposes of research to be more in sync with young people’s lives and their communities.

### **Method**

#### **Participants**

Participants included six school counselor trainees (five female and one male) who completed the practicum seminar and field placement experience at one of two urban high schools. Age ranged from 21 to 30 years old ( $M = 25.8$ ,  $SD = 4.6$ ,  $N = 6$ ). All participants reported race/ethnicity as White. Half of the participants reported having less than two years of experience in the education field, and half reported having between two to four years of experience. Reported family income ranged from \$20,000 to \$40,000. Three participants reported growing up in a suburb, and three reported growing up in a rural location. Participants had completed an average of nine counseling courses ( $SD = 3.8$ ,  $N = 6$ ) prior to practicum; all had completed one course in cultural diversity.

#### **Research Team**

The research team included two counselor educators and one school psychology doctoral student, and all identified as White and cognizant of their privileged positions as researchers and researcher-in-training. Each held previous research and professional experiences related to urban youth, with one counselor educator having extensive experience with Hip-Hop therapy. Researchers acknowledged power differentials and unique perspectives. In keeping with IPA, the researchers reflexively explored participant narratives, while attending to their experiences as experts. To practice reflexivity whilst deploying IPA, the researchers acknowledged the importance of cultivating self-awareness, through self-reflection, necessary to engage with the study data in a capacity that circumvented bias. This meant recognizing our privileged positions as White researchers as we



simultaneously sought to elevate the voices of our trainees' perspectives and experiences. This also meant that all members of the research team practiced bracketing, or the putting aside of their prior beliefs about the study phenomena (Carpenter, 2007) prior to engaging with the data. Specifically, the researchers used a reflexive diary, where research team members could record thoughts, feelings, and perceptions, to both analyze their positions and bring about potential bias (Chan et al., 2013).

### Procedure

Practicum trainees engaged in one 30-minute semi-structured interview during the last week of fieldwork. Interview questions (see Table 1) focused on participants' perceptions of using YPAR as a counseling approach and thoughts related to multicultural and social justice counseling competencies. Participants included six school counselor trainees enrolled in one of two practicum seminar sections who engaged in YPAR facilitation as a portion of fieldwork. In total, 14 counselor trainees completed a 100-hour practicum at one of two urban high schools, each with similar student demographics (over 90% students of color and 75% eligibility for free lunch), and eight practicum students facilitated YPAR group work at each school. At the start of the semester, counselor trainees who facilitated YPAR groups were invited to participate in the study, which included engaging in a semi-structured interview at the completion of the practicum. Participation was voluntary and approved by the university's Institutional Review Board. Of the eight students involved in YPAR, six agreed to participate in the study.

**Table 1. Semi-Structured Interview Protocol**

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1. What were your thoughts about engaging with students at this school prior to starting?
2. How did your expectations differ (or were they the same)?
3. Please describe what it was like to engage in YPAR with your students.
4. What went particularly well?
5. What were you surprised about?
6. What do you think you could have done to improve?
7. Do you think your students developed as a result of participating in YPAR? If so, in what ways? If not, why not?
8. What do you think your high school students found particularly helpful?
9. Do you think YPAR allows you to connect with your students? If so, in what ways? If not, why not?
10. Do you think YPAR is an area of focus that should be incorporated into school counseling practice? If so, why? If not, why not?
11. What particular counseling skills are helpful in facilitating YPAR? In what ways?
12. Did engaging youth in YPAR help you to develop multicultural counseling skills? If so, how? If not, what would have been helpful?
13. Did engaging youth in YPAR help you to develop social justice counseling competencies? If so, how? If not, what would have been helpful?

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The practicum seminar course was conducted at the high school by one faculty member, where counselor trainees engaged in school counseling-related activities one day per week alongside the faculty member. The faculty-supervised classroom guidance and counseling activities, including 1:1 counseling and group counseling, and provided regular individual feedback and supervision that focused on multicultural counseling skill development. Trainees completed readings related to social justice, multicultural counseling

skill development and YPAR. They also submitted weekly journal reflections that encouraged increased self-awareness of White privilege and biases, as well as knowledge of race, racism, and power structures present in schools and within the counseling relationship (Cook et al., 2019). During seminar meetings, the faculty engaged trainees in discussions that supported counseling skill development, YPAR training and implementation, and facilitating self-awareness and knowledge of systemic racism.

**Implementation framework.** Trainees encouraged youth participants to engage in dialogue where they shared personal insights and experiences as they engaged in research processes. Emphasis was placed on elevating youths' lived experiences and attending to critical issues that were relevant to them in ways that overtly draw attention to race, class, and gender-specific realities of youths' lives (Cook & Krueger-Henney, 2017). Through this shared process of dialogue, youth researchers co-identified topics that were of personal interest and relevance to investigate as the focus of their action research (Fox & Fine, 2015; Smith et al., 2010).

Two different areas of focus were selected among the YPAR co-researchers: at one school, youth selected the topic of increasing student involvement in course selections; at the other school, youth selected outside of school stressors. The chosen topic was then critically examined to uncover invisible power structures that may preclude positive educational outcomes, allowing youth, with the support of their counselor trainee, to take action toward achieving personal goals. Trainees followed the YPAR cycle of investigation, involving dialogue to decide on a topic of focus, collect and analyze data, develop an action plan, and disseminate findings, all the while processing youths' reactions and feelings (Cammaraota & Fine, 2008).

More specifically, at the school where the topic of increasing student involvement in course selections was selected, youth co-researchers surveyed their fellow high school students to learn more about the issue. Next, they conducted research to identify other course options and pathways within the school district in comparison to academic options at nearby suburban schools. While conducting the research, youth co-researchers engaged in knowledge sharing and contributed to one another's understandings of the issue as each of the group members experienced it (Foster-Fishman et al., 2010). In concluding their data collection and analyses, youth co-researchers decided to disseminate their findings through a creating a poster and writing a letter to the school principal.

At the school where the topic involved outside of school stressors, youth co-researchers explored a range of difficult emotional experiences that impacted their ability to reach personal and graduation goals. Youth co-researchers engaged in dialogue regarding a variety of emotional stressors and then began to research information related to overcoming the identified stressors. Similar to the other school site, students engaged in knowledge sharing and contributed to one another's understanding of the issue to support the construction of hip hop songs that communicated their experiences (Foster-Fishman et al., 2010). Examples of songs created by youth included frustrations with school discipline policies, truancy, as well as neighborhood and familial concerns. The youth agreed to disseminate the findings through recordings that they shared with friends and family.

### **Data Analysis**

The research team chose Interpretative Phenomenological Analysis (IPA) as an implementation framework to guide the investigation given its focus on appreciating participants' experiences and how they make sense of social contexts (Smith et al., 2009). IPA employs a phenomenological approach, whereby analyses produce a thorough and subjective account of perceptions and experiences instead of producing an objective statement of experiences (Pietkiewicz & Smith, 2014). When conducting IPA, capturing meaning is the central focus rather than identifying the frequency of themes. Additionally, IPA requires an in-depth analysis of each participant's experience to appreciate the unique context of individual narratives as a first step toward making general statements (Pietkiewicz & Smith, 2014). Therefore, we read each transcript numerous times to appreciate the trainees' perspectives and engaged in a step-by-step process of understanding trainees'

experiences. In accordance with IPA, we aimed to produce meaning from the data, rather than apply an extant theory to guide the analyses.

Through engaging in multiple readings of the transcribed material, we identified meaningful units of text (codes). We then grouped these codes based on commonalities into lower-order themes. A thorough account of lower-order themes was identified (through attending to description), and meaning was assigned to themes (interpretative analysis) to appreciate trainees' perceptions and experiences. We documented connections between emergent lower-order themes to inform the development of higher-order themes. Each higher-order theme reflected groupings of subthemes, which, in turn, reflected groupings of codes.

This step-by-step process of thematic analysis was completed in stages. The first stage of analysis included carefully reading the transcripts numerous times, writing comments and notes, and highlighting words, sentences, or phrases that seemed to be meaningful for trainees. A sample note included: "Counselor learns to give youth initiative to change injustices." In this detailed way, the team examined each transcript individually and documented notes accordingly. This idiographic approach to analysis began with specific examples (initial codes) and progressively worked toward producing emergent lower-order themes that were grouped into higher order themes to represent generalized understandings (Smith et al., 2009). In producing the initial codes, we focused on material in each transcript that illuminated trainees' perceptions and experiences of engaging in YPAR with youth. We then returned to the initial codes and transcripts with the goal of identifying the main higher-order themes from the emergent lower-order themes using structural coding (Saldaña, 2013).

Two members of the research team engaged in triangulation of the analyses to verify interpretation of data. Triangulation refers to the cross-validation of findings to work toward achieving comprehensive understanding of the data (Patton, 2015). In the present study, the researchers conducted consistency verification by independently reviewing and documenting notes aside transcript content. Team members then discussed the similar and diverse ways data were understood, following an iterative consensus process to ensure rigor and reach an agreement regarding the content (Kvale & Brinkmann, 2009). Triangulation of data consisted of the two investigators independently reviewing the data and identifying emergent codes and themes. We then discussed the diverse and similar ways the data were understood with the goal of reaching 100% agreement. In addition, an external auditor and doctoral student with expertise in IPA reviewed transcripts and themes to ensure rigor and reach a final agreement. The external auditor also engaged in the analysis of the coding and themes, and then we subsequently discussed any differences and similarities in coding identification. This process of triangulation and consistency verification was important to ensure that final revision to our thematic analyses best represented trainees' experiences. After completing cross-validation, a table of lower and higher-order themes was created that captured trainees' perceptions of YPAR group work in counseling (see Table 2).

**Table 2. Higher & Lower-Order Themes**

<b>Fun, interactive, youth-centered approach, not like counseling or therapy</b>	<b><i>n</i></b>
<i>Therapeutic group environment that fosters rapport and connection</i>	4
<i>Focuses on issues of importance to youth</i>	3
<i>YPAR as a culturally relevant group space</i>	5
<b>Implementation challenges requiring planning, time, and commitment</b>	
<i>Requires planning to overcome time constraints</i>	4
<i>Experiencing pushback and reluctance from school stakeholders</i>	2
<b>Environment of collaborative support to step out of comfort zone, overcome initial hesitancy, and welcome new learning experience</b>	
<i>Coming out of comfort zone/initial hesitancy</i>	5
<b>Development of counseling skills and confidence as a counselor</b>	
<i>Growth in active learning skills</i>	2
<i>Learning the process of running a group</i>	3
<i>Navigating the balance of boundaries and blurring of counselor/youth roles</i>	2
<b>Counselor development in understanding differences and increasing self-awareness and advocacy skills</b>	
<i>Fosters understanding of differences and increased self-awareness</i>	4
<i>Appreciation of different perspectives</i>	4
<i>Growth in advocacy skills with focus on youth initiative and leadership</i>	2

Note. *n* refers to the number of participants for whom each higher and lower order theme was salient.

## Results

Through data analysis, twelve themes emerged, which were grouped into five higher-order themes and corresponding subthemes. The first two higher-order themes that were identified related to how counselor trainees perceive the use of YPAR as a therapeutic intervention (RQ 1). The third, fourth, and fifth higher-order themes related to counselor trainee perceptions of engaging in YPAR and its impact on developing counseling skills, including multicultural and social justice counseling competencies (RQ 2). Table 2 depicts the number of participant quotes that support each subtheme.

### RQ 1: Counselor Trainee's Perceptions of YPAR as a Therapeutic Intervention

**Theme 1: Fun, interactive, youth-centered approach, not like counseling or therapy.** The first higher-order theme indicated that the YPAR groups deployed a fun, interactive, youth-centered approach, not like counseling or therapy, and included three subthemes: a) therapeutic group environment that fosters rapport and connection, b) focuses on issues of importance to youth, and c) YPAR as a culturally relevant group space.

**Therapeutic group environment that fosters rapport and connection.** Counselor trainees' felt the YPAR group provided a therapeutic environment that fostered rapport and connection. For example, some counselor trainees felt hip hop lyric writing created a safe and supportive medium for students to disclose emotions. One trainee stated, "I feel good kind of just helps them open up and it's a safer setting where they feel safer, like they feel 'okay, this isn't a therapy session, we're just talking hip hop here. We're just talking about my lyrics.'" An additional trainee's comment further highlighted this subtheme, "We came up with themes, but they were

able to spearhead the group. We have them writing lyrics based on their emotions and their experiences, and being like what does this relate back to?” In this particular quote, the counselor trainee spoke of group work as a creative process that facilitated sharing and the expression of thoughts and feelings, in turn supporting rapport building and connection.

***Focuses on issues of importance to youth.*** A second lower-order theme that emerged included appreciating the focus on issues of importance to youth. One counselor trainee stated, “direction was critical and we’re not just in here making music for an hour and shooting conversation, we are actually exploring certain themes that aren’t necessarily academic but relevant to everything else that is going on in their lives.” Further, counselor trainees appreciated how paying attention to issues of importance to youth resulted in a shift in power dynamics: “I like that it was focused on having the kids come up with what they want to change. Putting the initiative on them, instead of assuming that we as counselors know what’s best for kids.”

***YPAR as a culturally relevant group space.*** The fun and integrative nature of YPAR fostered a culturally relevant group process. To highlight this subtheme, one trainee stated,

We have one collaboration, that hasn’t been recorded, but there’s a portion of the group where we open it with a song, discuss it as a group and...then we kind of come back and talk amongst themselves, whereas we’re around but we’re letting them discuss amongst themselves and it’s a very positive way of seeing how they work together.

This statement illuminates the counselor trainee’s observation that students took the initiative and engaged a culturally salient medium (hip hop lyric writing) in the YPAR process, which then strengthened group cohesion. The counselors were also struck by how using hip hop as a YPAR tool supported youth in producing a tangible product stating,

They were able to actually put their songs down on paper so to speak and he [professor] could play back to them and then he sent it off and then he emailed them. I feel like that’s tangible results of something they’ve completed throughout the past couple months...It was a whole other level of passion incited so much confidence and encouragement.

**Theme 2: Implementation of challenges requiring planning, time, and commitment.** The second higher-order theme signified that implementation challenges required planning, time, and commitment and included subthemes: Requires planning to overcome time constraints and experiencing pushback and reluctance from school stakeholders.

***Requires planning to overcome time constraints.*** When beginning to facilitate groups, trainees reported that the decision-making and action-oriented process required planning to overcome time constraints. One trainee shared, “the deciding part went on a little too long and they spent two weeks picking a topic. So, that probably should have been condensed so they had more time to actually do something.” Other implementation barriers consisted of inconsistent school attendance among youth. A trainee reflected on this issue: “I just think it’s a really cool approach. The only thing was the kind of inconsistency, which had nothing to do with the group itself. Just the group itself is only certain weeks and certain students can’t make certain days.”

***Experiencing pushback and reluctance from school stakeholders.*** Counselor trainees reported experiencing pushback and reluctance from school stakeholders. For some, it was a challenge to initially engage students in YPAR: “I think just trying to get them motivated was a little difficult, but for the most part it’s been really fun. The students are having a good time, I hope, that’s what they told me. So, it’s been really great to see what they can learn to do.”

## RQ 2: Perceptions of Counseling Skill Development and Multicultural Competency

**Theme 3: Collaborative supports to step out of comfort zone, overcome initial hesitancy, and welcome new learning experience.** The third theme supports the assertion that, for counselor trainees, the YPAR group provided an environment of collaborative support to step out of one's comfort zone, overcome initial hesitancy, and welcome new learning experiences. The subtheme describes how trainees were coming out of their comfort zone and overcoming initial hesitancy.

***Coming out of comfort zone/initial hesitancy.*** Several trainees spoke about feelings of anticipation entering a new "tough" setting. For example, one participant shared,

I was excited, super excited, but also I had to do self-reflecting like, "I am a White, female counselor coming in to an urban based classroom." How are the students going to connect with me? Are they going to connect with me? Lots of that, so I kind of had those kind of nerves, but overall I was so excited.

Another trainee posited that YPAR opened her up to learning new systems and cultures:

It was a first experience of sorts...because I grew up in a suburban White neighborhood and I felt like I needed to learn a lot first, or at least gain an understanding of how the culture works, how the system works, how the individual comes from. So, I came from a place of just wanting to listen a bit first and ask questions, kind of tread gently.

**Theme 4: Development of counseling skills and confidence as a counselor.** Counselor trainees described a sense of increased confidence and counseling skill development, including three subthemes: growth in active listening skills, learning the process of running a group, and navigating the balance of boundaries and blurring of counselor/youth roles.

***Growth in active listening skills.*** Trainees experienced growth in active listening skills, including how to challenge youth to share through emphasizing the therapeutic relationship:

My personal relationships with the students, being able to listen to them, work with them today, summarize what's going on, being able to find those hidden pieces, like in their lyrics and tap into those inner feelings, and then push them a little bit further to expand.

Another participant spoke of the importance of being open and allowing youth to take the lead: "When we were talking about developing allies and encouraging talking to the counselors, they were like, 'What about social media? What about doing a survey?' I was like I didn't even think about that, this is awesome."

***Learning the process of running a group.*** Another lower-order theme concerned trainees' growth in learning the process of running a group. A particular quote that exemplifies this growth details a trainee's development of skills to foster groups with adolescents in schools:

I wanted to make these PowerPoints type thing and for me that's an organizational thing. But, you also need like open-mindedness of course, like I said you have no idea what your group is going to say, do, or not do. So, being prepared to go with the flow and be flexible. But, also help direct them as well.

The trainee learned to trust the group process and relinquish control in supporting the youth.

***Navigating the balance of boundaries and blurring of counselor/youth roles.*** Trainees spoke about how to balance the boundaries of counselor and youth roles. Leading the YPAR groups appeared to assist with the use of self-disclosure. A trainee reflected on this development:

We would have a dialogue, and there is a certain amount of disclosure that I felt comfortable giving on my end as sort of a way of relating to the student, and then I think in doing so gaining...and strengthening their relationship and their comfort in facilitating gave momentum to their creative abilities.

**Theme 5: Understanding differences and increasing self-awareness and advocacy skills.** Counselor trainees developed an understanding of differences as well as increased self-awareness and advocacy skills, including three lower-order themes: fosters an understanding of differences and increased self-awareness, appreciation of different perspectives, and growth in advocacy skills with a focus on youth initiative and leadership.

***Fosters understanding of differences and increased self-awareness.*** Trainees described the ways that running YPAR groups fostered an understanding of differences and increased self-awareness. Trainees' use of self-reflection increased a sense of awareness.

So, for me just learning about these lives that I don't live and really hard-hitting things that really just open your eyes and make you see things in other ways. I would say definitely; it kind of helps you do a lot of self-reflection.

Another trainee suggested that the self-reflection during the group process allowed her to cultivate empathic understanding of students' experiences and stated,

You really have to understand where kids are coming from. The first piece we did was identity and understanding what students think of themselves...so, taking their thoughts and feelings and then having us self-reflect and then put ourselves in their shoes, helping us to understand their personal identity has helped me see myself in a counselor role.

***Appreciation of different perspectives.*** Counselor trainees also perceived skill development concerning appreciating different views, life experiences, and values. In the following quote, this trainee described the ability to understand the whole student and their environment:

I think it helped develop multicultural skills because you're always going to recognize based on the student you are going to get different answers and different responses...and a lot of the time that does have to do with where they are from, if there is a language barrier, what they are dealing with outside of school.

Another trainee spoke about appreciating the variety of life experiences youth bring to the group:

You have to think of aspects of their lives, what experiences are they having, whether that's in the school, outside the school, in the home. So, I think they are all going to bring in different things, but based off their culture they're going to see the world differently and having different opinions on different topics within the school.

***Growth in advocacy skills with focus on youth initiative and leadership.*** A third and final lower-order theme pertains to trainees' growth in advocacy skills. While reflecting on their growth as a counselor, one participant said, "I think exactly like giving the kids initiative and seeing what they feel has been an injustice in the school." This statement illuminates how trainees learned to foster youth initiative to change injustices during their facilitation of YPAR groups. An additional statement further supports this theme. One individual stated,

It's valuable to be a soundboard for them, so they can feel comfortable in the space and just validate all of their feelings that they are bringing. Especially when it's a topic that is rooted in the school like the ones my students are dealing with.

In this quote, the trainee suggested that they learned how to validate youths' feelings and frustrations rooted in challenging experiences in school.

## Discussion

This study explored how counselor trainees perceived the use of YPAR as a therapeutic intervention and vehicle for developing counseling skills, including multicultural and social justice counseling competencies. Counselor trainees conducted YPAR groups during practicum fieldwork with urban youth. Several themes emerged suggesting support for the use of YPAR in school counseling. Counselor trainees perceived YPAR to be helpful in facilitating therapeutic connections and rapport with youth. Given that YPAR explicitly promotes intentional power sharing, while acknowledging systemic inequities, it is anticipated that youth would feel comfortable talking openly and honestly (Ozer et al., 2013).

Counselor trainees also emphasized their appreciation of YPAR's focus on issues of key relevance to youth, which they perceived as substantially different from traditional counseling practices. These findings may suggest the importance of supporting youth in leading the counseling process and transcending traditional approaches to therapy. Of note, the process of facilitating YPAR groups enabled counselor trainees to grapple with issues of power dynamics on their paths toward deploying culturally responsive and social justice-oriented interventions. While graduate programs prioritize supporting counselors-in-training in the practicing of basic active listening skills (Weger et al., 2010), this study shows how YPAR strategies can transcend traditional models of counseling to offer experiential opportunities that hone necessary multicultural and social justice skills among trainees, such as defusing problematic counselor-client power dynamics. Researchers who have conducted YPAR groups in schools envision its application as an opportunity for the youth of color to reclaim their voices and decision making in spaces where they are often "expected to be controlled by the system rather than in control of the system" (Kohfeldt et al., 2011, p. 34). Overall, counselor trainees appreciated the ways that YPAR empowers youth to guide the knowledge and awareness of issues that are impacting them as they see it for themselves (Cook & Krueger-Henney, 2017).

Evidence in the current study suggests that allowing counselor trainees to engage in YPAR group facilitation during practicum can lead to a variety of positive outcomes relative to counseling skill development. Scholars posit that it is the role of the counselor educator to promote the professional advocacy of counselors-in-training, which requires that graduate students learn to be comfortable stepping outside of their comfort zones (Havlik et al., 2019). Findings in this study support the use of YPAR to meet this professional development need. En route to developing multicultural competence, Ratts et al. (2016) argued counselors needed to understand cultural differences and engage in practices that foster deep self-awareness. Multicultural development is particularly important given the data that suggest clients of diverse backgrounds often find counseling professionals untreatable, or unable to understand them and their experiences (Ahmed et al., 2011; Day-Vines et al., 2007; Lindsey & Marcell, 2012). Therefore, the results of this study are promising in that the counselor trainees reported a more profound sense of self-awareness and an increased understanding of cultural differences. In support of allowing clients to feel understood and validated, Studer (2015) highlighted the significance of counselor trainees developing practical communication skills during practicum and internship experiences. In the current study, participants indicated they had further developed their active listening skills through YPAR group facilitation. Overall, trainee reports of being able to step out of their comfort zone, understand differences and increase in self-awareness, and active listening skill development all reinforce graduate coursework and outcomes relative to the totality of their pre-service training experience.

## Limitations

Findings are limited due to the small number of counselor trainees and lack of racial diversity of participants. Although the study provides qualitative insight with respect to the application of YPAR in counseling training, it is not possible to extend the findings beyond the participants' experiences. Relatedly, the present study does not include the perspectives of the youth who engaged in the YPAR groups. Interviewing the high school students individually or as part of a focus group could provide greater understanding of the



application of YPAR in counseling. Furthermore, there were additional limitations with respect to the qualitative analyses. Member checking with trainees was not conducted due to the logistics of the trainees having exited the counseling training program at the time of analyses completion. To account for this limitation, the external auditor was a doctoral student whose positionality and experiences were somewhat more related to trainees' experiences compared to the faculty researchers. Qualitative methods did not include ethnographic procedures to ascertain the integrity of YPAR implementation to ensure the principles of YPAR were adhered to throughout. Lastly, the use of IPA and its focus on capturing meaning rather than identifying the frequency of themes or applying itself to the calculation of intercoder reliability scores may be limiting insofar as it allows for a rich understanding of participant perceptions but is less able to reduce experiences into quantifiable meaning units. Thus, additional research is needed to further explore the application of YPAR in counseling.

### **Implications and Conclusion**

The implications for this study are vast. Whereas prior research in school-based YPAR interventions seldom focuses on practices for counselors, the current study provides school counselors with preliminary support needed to advocate for the use of YPAR-based group work. The present study also lends support to the application of YPAR as a youth-centered impactful counseling approach. School counselors looking to innovate their ASCA (2012) national model comprehensive school counseling programs might consider integrating YPAR as a meaningful and engaging way to bring youth on their advisory councils. There are additional implications for use of YPAR in pre-service work with counselors to support counseling skill development by allowing them to facilitate groups as part of either their practicum or internship experiences.

YPAR training and implementation in fieldwork is just a start toward building cultural and race-related reflection. In particular, it is important to keep in mind the wide body of research that has identified the tendency for White Americans to avoid confronting issues of racism and White privilege due to the frequent experience of distressing emotions (D'Andrea & Daniels, 1999; Kordesh et al., 2013). It behooves counselor educators to address these emotional responses in ways that facilitate self-awareness and promote authentic advocacy and anti-racism work in schools. The results of this study are just a beginning step toward exploring the application of YPAR in counselor education. Additional research is needed to explore how YPAR in counseling can promote equity-based practices in schools.

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# Knowledge is Power: An Analysis of Counseling Professionals' Medicare Policy Proficiency

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## Abstract

This study examines counseling professionals' knowledge concerning the Medicare program and related advocacy efforts. American Counseling Association members (N = 5,097) answered a series of true-false questions that were intended to measure proficiency in two areas: Medicare policy and the counseling profession's advocacy for provider eligibility. Statistical analyses indicated that members have a wide range of Medicare knowledge. A significant difference in advocacy history knowledge was found when comparing counselor educators, practicing counselors, doctoral students, and master's students. However, no differences in policy knowledge were present among these groups. Implications for the counseling profession and counselor training are discussed.

*Keywords: Medicare; Advocacy; Professional Issues; Gerontological Counseling; Professional Counseling*

## Introduction

Advocacy has been an integral part of the field of counseling nearly since its inception (Kiselica & Robinson, 2001), with some considering social justice and advocacy to be the fifth wave of counseling practice (Ratts, 2009). Despite a growing body of literature on advocacy efforts within counseling, there is a shortage of empirical studies examining the frequency with which counselors engage in advocacy and the efficacy of those efforts. A timely issue through which to view this concern is that of Medicare coverage for counselors. Nearly half of counselors in a recent study had participated in advocacy efforts related to this issue (Fullen et al., 2020b). However, because of the limited information available regarding the quality of this engagement, counseling professionals are limited in their ability to improve advocacy efforts to make social change. The present study explores counseling professionals' knowledge of advocacy efforts and specific policy information regarding Medicare coverage for counselors. This information may help the profession better understand how to provide knowledge to counseling professionals on particular advocacy issues, improve the quality of advocacy efforts, and increase self-efficacy of counseling advocates.

## Literature Review

Advocacy is often defined by the actions in which it is encompassed: representation of underprivileged groups, lobbying activities, and challenging institutional powers through actions like protest, among others (Carlile, 2000). Counselors have a longstanding history of serving as advocates for social change, beginning in the early 1900s and continuing into the twenty-first century (Kiselica & Robinson, 2001). In fact, the American Counseling Association [ACA] (2014) Code of Ethics dictates that counselors should engage in advocacy efforts to “address potential barriers and obstacles that inhibit access and/or the growth and development of clients” (p. 5), and the ACA lists advocacy as one of three key drivers in its strategic framework for 2018 – 2021 (ACA, 2018).

### Advocacy in Counseling

The Multicultural and Social Justice Counseling Competencies (MSJCC; Ratts et al., 2015) suggests that counselors should operate from a social justice advocacy perspective in order to truly empower clients at the individual and systemic levels (Ratts & Hutchins, 2009). This coincides with Lee's (1998) statement that “counselors are called upon to channel energy and skill into helping clients challenge institutional and social barriers that impede academic, career, or personal-social development” (p. 8-9). Advocacy in counseling necessarily includes both advocating on behalf of client well-being and advocating on behalf of the profession (Myers, Sweeney, & White, 2002). In both forms of advocacy, counselors may advocate at the individual, community, and systemic or societal levels, as described in the ACA Advocacy Competencies (Lewis, Arnold, House, & Toporek, 2002). These competencies emphasize specific skills necessary to advocate at the individual, community, and systems levels. At the individual level, counselors should advocate on behalf of their clients to assist them in accessing resources, removing barriers, and navigating various systems in their lives (Lewis et al., 2002; Ratts & Hutchins, 2009). At the community level, counselors should engage in systems-level advocacy within community structures, such as agencies and organizations. Finally, at the sociopolitical level, counselors act on the public's behalf by disseminating information about key issues, and when necessary, participating in grassroots lobbying and other political advocacy initiatives.

### Participation in Political Advocacy

Although the importance of advocacy has been well-articulated in the extant literature, empirical studies demonstrating counselors' attitudes, behavior, and knowledge about advocacy have been uncommon. In one recent study, 68% of students (including master's students enrolled in a Council for Accreditation of Counseling

and Related Educational Programs (CACREP) accredited clinical mental health program and counseling psychology doctoral students) identified advocacy as “very important” (Ramírez Stege, Brockbery, & Hoyt, 2017, p. 195) to the profession. Ramírez Stege and colleagues (2017) also found that, of the students who participated in the study, 50% reported that they engaged in one or two forms of advocacy, and 28% reported that they engaged in three or four forms. Only 10% of participants engaged in five or more types of advocacy and 13% did not participate in any forms of advocacy. Overall, doctoral students reported statistically significant higher levels of engagement in advocacy than master’s students, and 80% of student respondents reported that faculty at their institutions were engaged in advocacy (Ramírez Stege et al., 2017). This study demonstrates that students are participating in advocacy efforts and deem advocacy important to the counseling profession.

Fullen et al. (2020b) surveyed more than 6,550 members of the American Counseling Association (including students, practicing counselors, and counselor educators) and found that advocacy participation among respondents varied somewhat by specific issue. Approximately half (i.e., 49.3%) of counseling professionals had participated in Medicare-related advocacy, for example, which was comparable to rates of advocacy for issues such as licensure portability (49.4%), and was a bit higher than rates for advocacy related to banning conversion therapy (45.0%), increasing opioid treatment funding (44.1%), addressing Veterans Affairs hiring practices (43.5%), and school counseling funding (36.2%). Participation was operationalized as contacting a lawmaker via automated technology (e.g., VoterVoice), phone, email, in-person meeting, or attending a town hall, and the authors noted that participation varied substantially by professional type, with 63.3% of counselor educators participating in Medicare-related advocacy, as compared to 57.0% of doctoral students, 54.0% of practicing counselors, and 32.5% of master’s students.

Although these studies provide a rough estimate of the number of counselors and counselor trainees who are engaged in sociopolitical advocacy, it is more difficult to discern the quality of that engagement. Lee and Rodgers (2009) describe advocacy at the sociopolitical level as a “process for creating change” (p. 285), and in this process advocates are encouraged to articulate their concerns about a particular policy directly to elected officials or related stakeholders. In order to effectively lobby on behalf of a particular issue, counselors must have a foundational knowledge of specific public policy initiatives (Kiselica & Robinson, 2001; Lee & Rodgers, 2009; Lewis et al., 2002; Steele, 2008). In fact, national advocacy organizations highlight the importance of providing accurate, well-cited information when discussing issues of concern with lawmakers (ACA, n.d.; American Psychological Association [APA], 2014), and a lack of well-informed policy knowledge has been cited by scholars as a deterrent to psychology students actively engaging in advocacy (Heinowitz et al., 2012).

### **Medicare: Policy and Professional Advocacy**

Of particular salience to the counseling profession currently is the issue of Medicare coverage for counseling services. The Medicare program is a federally-funded insurance program that covers approximately 60 million Americans (Kaiser Family Foundation, 2017), and enrollment is projected to grow to 80 million people by 2030 (Medicare Payment Advisory Commission, 2015). People over the age of 65, younger people with disabilities, and people with end-stage renal disease are eligible for Medicare coverage (U.S. Department of Health and Human Services, 2014).

Almost one in four Medicare beneficiaries have a documented mental health and/or substance use diagnosis (Institute of Medicine, 2012; Loftis & Salinsky, 2006; Ostrow & Manderscheid, 2009), and Medicare is the largest single-payer for opioid overdose hospitalizations (Song, 2017). Currently, very few mental health providers are prepared to work with older adults (Institute of Medicine, 2012), who comprise approximately 85% of the Medicare population (Kaiser Family Foundation, 2019). This is in spite of the fact that older adults, specifically white males over age 85, consistently have one of the highest rates of suicide (Drapeau & McIntosh, 2019). The dearth of providers available to treat Medicare beneficiaries creates a significant barrier to human growth and development for this population. Notably, although Medicare accounted for 15 percent of total



federal spending in 2017 (Kaiser Family Foundation, 2019), only about one percent of the Medicare budget is spent on mental health services (Bartels & Naslund, 2013).

The most recent substantive additions to the Medicare mental health workforce were made in 1989, when clinical psychologists and clinical social workers were made eligible for Medicare reimbursement as part of the *Omnibus Budget Reconciliation Act of 1989* (U.S. Congress, 1989). Since that time, the makeup of professionals in the mental health field has significantly changed. Approximately 200,000 master's-level clinicians (i.e., LPCs and LMFTs) are currently ineligible to serve the Medicare-insured (Medicare Mental Health Workforce Coalition, 2019), a figure which comprises nearly half of all master's-level mental health providers nationwide (Fullen, 2016).

Legislative efforts to address the shortage of Medicare-eligible clinicians began over fifteen years ago, when professional organizations representing counselors (such as the ACA, National Board for Certified Counselors [NBCC], and American Mental Health Counselors Association [AMHCA]) began to support Medicare reimbursement for counselors (Field 2017). LPCs have national accreditation standards that guide many counselor training programs (CACREP, 2015), and licensure in 50 states (ACA, 2016). Additionally, LPCs have formal recognition from every third party insurer aside from Medicare (Medicare Mental Health Workforce Coalition, 2019). During the past fifteen years of professional advocacy, legislation to add LPCs as Medicare-eligible providers has previously passed in both the House of Representatives and U.S. Senate, though never simultaneously.

## The Present Study

Leading counseling professional organizations have called for their members to notify Congressional lawmakers about the need for Medicare reimbursement of LPCs (Medicare Mental Health Workforce Coalition, 2019), thus creating an opportunity for counselor advocates to participate in what Lee and Rodgers (2009) described as sociopolitical advocacy. However, it is not currently known whether counseling professionals have sufficient knowledge about Medicare advocacy, both in terms of how the Medicare program operates and the history of the counseling profession's advocacy efforts. In light of previous literature suggesting that advocacy interventions should be evidence-based and data-driven (MSJCC; Ratts et al., 2015), it is important to understand better whether counseling professionals are knowledgeable about basic facts associated with Medicare advocacy.

The current study was guided by two research questions: 1) What do ACA members know about Medicare? and 2) Does knowledge differ by professional type?

## Methods

### Participants

A set of questions related to Medicare knowledge was disseminated by email to 51,221 members of the ACA using the Qualtrics delivery platform. A total of 629 emails were returned as undeliverable, resulting in 50,592 possible respondents. The number of responses to the Medicare knowledge questions used in the current study ranged from 5,097 to 5,146, with a total of 5,097 individuals who responded fully to the Medicare Knowledge Quiz (MKQ) questions described below. Due to the small proportion of respondents with missing data ( $N = 49$ ; 0.95%) and the large sample size, only the 5,097 respondents who completed the quiz in its entirety were used to answer the research questions. This resulted in a response rate of 10.07%.

Most participants identified as female (79.5%), followed by male (18.7%), and the remaining 1.8% identifying as gender fluid, nonbinary, transgender male, transgender female, or other. The majority of participants were White/Non-Hispanic (77.8%), followed by Black/African American (10.0%), Hispanic/Latinx

(4.7%), Multiracial (2.7%), Asian/Pacific Islander (2.1%), American Indian/Native American (0.6%), Other (2.0%), and 0.2% who did not provide information. A total of 76.7% stated that they had or would graduate from CACREP-accredited training programs, with 23.2% stating that they had not or would not, and 0.1% declining to respond to this item. In terms of experience, 18.6% reported a total of 15+ years in the profession, followed by 14.1% with 8 to 14 years experience, 18.2% with 4 to 7 years, 21.2% with 2 to 3 years, and 15.8% with 0 to 1 year. A total of 12.1% of respondents did not provide this information. In terms of professional status, 63.7% of respondents were practicing counselors, followed by 24.0% master's students, 6.0% counselor educators, 4.0% doctoral students, and 2.3% who responded Other or omitted their professional type.

## Procedures

Data related to Medicare knowledge were collected from a larger survey on counseling profession advocacy. Before disseminating the cross-sectional survey, a pilot version was disseminated to a group of graduate students and licensed professional counselors affiliated with the authors' institution. We also provided a copy of the full survey to the American Counseling Association for its review. Upon approval of the comprehensive survey by an appropriate ACA designate, temporary access to a membership list was provided and authorized for use to conduct the survey. The study included items intended to gauge the following: experiences related to Medicare ineligibility, participation in legislative advocacy, opinions about who is responsible for Medicare reimbursement advocacy, attitudes about aging, knowledge about Medicare, and demographic items. A description of the survey has been published elsewhere (Fullen et al., 2020a). Although data related to Medicare knowledge were retained exclusively for the current study, quantitative analyses stemming from the national survey were conducted and reported elsewhere (Fullen et al., 2020a; Fullen et al., 2020b). The survey and research design were approved via exempt status by the Western Institutional Review Board. All ACA ethical guidelines were followed in the execution of this research.

An original, 12-item Medicare Knowledge Quiz (MKQ) was developed for the survey. The items were intended to measure factual knowledge about: (a) the Medicare program (six items) and (b) the history of Medicare advocacy within the counseling profession (six items). Items were developed by the first author, and efforts were made to establish the validity of the quiz items. Regarding construct validity, the quiz items were drawn from existing research on Medicare reimbursement for counselors (e.g., Fullen, 2016), key sources of information about the Medicare program (e.g., Kaiser Family Foundation, 2017), and professional literature related to Medicare advocacy (c.f., Medicare Mental Health Workforce Coalition, 2019). Regarding content validity, the items were intended to reflect basic knowledge about: 1) the Medicare program as it pertains to counselor reimbursement advocacy, and 2) key components of the counseling profession's history of professional advocacy on this issue. Therefore, the items were exploratory in nature and not intended to capture the full extent of participant knowledge on Medicare policy. In regard to the complete survey disseminated to ACA members, a pilot version was provided to several graduate students and licensed professional counselors affiliated with the authors' institution. Additionally, a full version of the survey was provided to ACA prior to its dissemination. Specific items pertaining to the Medicare program and professional advocacy are reported in Table 1 and Table 2, respectively.

The internal consistency of the MKQ was calculated using SPSS (Version 26). Cronbach's  $\alpha$  was used to measure the reliability of the full quiz, as well as within each subset of items. Overall, internal consistency of the full quiz was low ( $\alpha = .29$ ), albeit slightly higher than when breaking down the quiz by MKQ: Program ( $\alpha = .23$ ) and MKQ: Profession ( $\alpha = .15$ ). The low reliability values suggest that individual item responses have low correlation with one another, which may be evidence that the 12-item MKQ was too brief, as Cronbach's  $\alpha$  is sensitive to the number of test items. Alternatively, low reliability may indicate that participant knowledge about the Medicare program and/or Medicare advocacy varies widely and unsystematically among ACA members. Due to the exploratory nature of the MKQ, we proceeded with our analysis. However, performance

on individual quiz items should be viewed as more reliable than performance on the full quiz or sub-sections (i.e., MKQ: Program/MKQ: Profession).

### Analytical Strategy

Respondents were asked to respond True or False, which provided a total score out of 12 for each participant. Descriptive statistics were calculated to identify total group means by professional type, as well as scores on both the MKQ: Program and MKQ: Profession sub-tests. Percentages of correct scores were calculated for each quiz item by professional type, and a one-way ANOVA was used to measure group differences based on professional type. Item-level analyses were also used to identify variation in how knowledgeable counseling professionals were, and chi-square analyses were used to identify statistically significant differences in performance on specific MKQ items based on professional type. Statistical assumptions for each of these tests were satisfied, including for the ANOVA (i.e., independence, homogeneity of variance) and chi-square goodness-of-fit test (i.e., independence of observations and adequate expected frequency) (Lomax & Hahs-Vaughn, 2012).

### Results

The average score across all groups on the MKQ was 7.32 ( $SD = 1.54$ ) out of a possible total of 12. Total means were similar between the MKQ: Program ( $M = 3.69$ ,  $SD = 1.099$ ) and MKQ: Profession ( $M = 3.62$ ,  $SD = 1.038$ ). Performance on specific items ( $N$  ranging from 5082 to 5096) reveals the current level of knowledge among counseling professionals regarding the Medicare program and the profession's history of Medicare advocacy. For example, 82.3% of respondents knew that Medicare is paid for and implemented at the federal level, 79.2% knew that greater than 15% of Medicare beneficiaries are under age 65 and living with permanent disabilities, and 66.1% knew that less than 10% of the Medicare budget is spent on mental health. In contrast, roughly half of respondents (i.e., 52.6%) knew that fewer than 15% of Medicare recipients live in long-term care facilities (in fact, it is only 3%; Kaiser Family Foundation, 2019), only 45.1% knew that Medicare does not cover long-term services and supports, dental services, eyeglasses, and hearing aids, and only 44.2% knew that Medicare is the largest single-payer for opioid overdose hospitalization.

Existing knowledge about the profession's Medicare advocacy ranged as well. On one hand, 88.1% of respondents knew that there is currently legislation under consideration to add LPCs as Medicare-eligible providers, 85.4% knew that Medicare currently recognizes psychiatrists, psychologists, clinical social workers, and psychiatric nurses to provide outpatient mental health services, and 82.5% were correct in stating that Medicare is not the only payment mechanism for counselors to work with people over 65. Alternatively, only 56.2% of respondents knew that bills authorizing Medicare reimbursement for counselors have previously passed both the Senate and House, albeit on separate occasions, and merely 34.4% correctly answered that State-level politics (e.g., Governor, state legislature) are not directly related to Medicare reimbursement. Particularly revealing was the fact that only 15.9% of respondents knew that professional organizations (e.g. ACA, NBCC, AMHCA) have been supporting Medicare reimbursement for counselors for more than five years, when in fact, professional advocacy on this issue dates back over fifteen years (Field, 2017).

On the *MKQ: Program*, a one-way ANOVA was performed on the 4,977 respondents who provided information about their professional type. This analysis indicated that there was no significant difference in average scores depending on professional type ( $F(3,4974) = .113$ ,  $p = .953$ ). Group averages for practicing counselors ( $M = 3.70$ ,  $SD = 1.092$ ), counselor educators ( $M = 3.70$ ,  $SD = 1.111$ ), doctoral students ( $M = 3.68$ ,  $SD = 1.067$ ), and master's students ( $M = 3.68$ ,  $SD = 1.114$ ) were very similar. This indicates that knowledge about the Medicare program did not differ depending on professional type.

However, in terms of the *MKQ: Profession* sub-test, group differences were found. Using data from the 4,964 respondents who responded to both a question about the professional type and the quiz questions for this sub-test, a one-way ANOVA revealed significant group differences ( $F(3,4961) = 28.865, p < .001$ ). Group averages for counselor educators ( $M = 3.87, SD = 1.040$ ), practicing counselors ( $M = 3.68, SD = 1.022$ ), doctoral students ( $M = 3.55, SD = 1.007$ ), and master's students ( $M = 3.41, SD = 1.045$ ) revealed more variation. Post-hoc Tukey's analysis indicated that counselor educators were significantly more knowledgeable than master's students ( $p < .001$ ) and doctoral students ( $p = .004$ ) in regard to knowledge about the counseling profession's Medicare advocacy. Practicing counselors were more knowledgeable than master's students ( $p < .001$ ), and somewhat less knowledgeable than counselor educators ( $p = .017$ ).

Item-level analyses were also illustrative of critical differences depending on the professional type. For example, on the *MKQ: Program* sub-test, chi-square analysis revealed group differences in performance based on professional type. For example, whereas 84.2% of counselor educators knew that over 15% of the Medicare-insured are under 65 and living with long-term disabilities, only 75.2% of master's students were aware of this ( $X^2(3) = 20.402, p < .001$ ). Similarly, whereas roughly half of counselor educators, doctoral students, and master's students correctly answered that Medicare is the largest single-payer for opioid overdose hospitalizations, only 41.3% of practicing counselors answered this correctly, which amounted to a significant difference ( $X^2(3) = 33.178, p < .001$ ). Results by professional type are listed in Table 1.

**Table 1. Medicare Knowledge Quiz: Program, % Correct by Professional Type**

Professional type	Item 1	Item 2	Item 3	Item 4	Item 5	Item 6
Practicing counselor ( $N = 3,247$ )	83.7%	80.6%	53.4%	45.6%	65.8%	41.3%
Counselor educator ( $N = 304$ )	79.9%	84.2%	51.3%	41.8%	63.7%	49.5%
Doctoral student ( $N = 205$ )	83.4%	78.5%	50.9%	41.5%	64.4%	49.3%
Master's student ( $N = 1,221$ )	79.0%	75.2%	51.2%	45.0%	68.3%	50.0%
Total across groups ( $N = 4,977$ )	82.3%	79.4%	52.6%	45.0%	66.3%	44.2%
$X^2$ (df=3)	14.952	20.402	2.750	2.794	3.756	33.178
$p$	.002	< .001	.432	.424	.289	< .001

Quiz items (CORRECT RESPONSE)

Item 1: Medicare is paid for and implemented at the federal level. (TRUE)

Item 2: Greater than 15% of Medicare beneficiaries are under age 65 and living with permanent disabilities. (TRUE)

Item 3: Greater than 15% of Medicare recipients live in long-term care facilities. (FALSE)

Item 4: Medicare does not cover long-term services and supports, dental services, eyeglasses, and hearing aids. (TRUE)

Item 5: Greater than 10% of the Medicare budget is spent on mental health services. (FALSE)

Item 6: Medicare is the largest single-payer for opioid overdose hospitalizations. (TRUE)

NOTE:  $X^2$  calculation based on only respondents identifying as practicing counselor, counselor educator, master's student, doctoral student.

Similarly, on the *MKQ: Profession*, there were several differences in group performance. In general, counselor educators were more knowledgeable about past and present professional initiatives related to Medicare. Most notably, 91.1% of counselor educators knew that Medicare currently recognizes psychiatrists, psychologists, clinical social workers, and psychiatric nurses to provide outpatient mental health services,

whereas only 75.7% of master's students were aware of this, which contributed to a significant difference on this item ( $X^2(3) = 133.230, p < .001$ ). A total of 94.4% of counselor educators knew about current Medicare legislation, compared to 85.3% of master's students ( $X^2(3) = 22.130, p < .001$ ). Approximately two-thirds of counselor educators (68.2%) correctly identified that Congressional bills adding counselors to the Medicare program have previously passed, albeit never in both the House and Senate in the same year, whereas scores on this question among master's students (53.1%) and practicing counselors (56.0%) were somewhat lower ( $X^2(3) = 22.590, p < .001$ ). The only question on the MKQ: Profession in which counselor educators did not score higher than the other groups was related to the role of state-level politics indirectly applying to Medicare legislation. On this question, 36.8% of practicing counselors answered correctly, followed by 29.1% among master's students and counselor educators, and 27.0% among doctoral students ( $X^2(3) = 27.928, p < .001$ ). Results by professional type are listed in Table 2.

**Table 2. Medicare Knowledge Quiz: Profession, % Correct by Professional Type**

Professional type	Item 1	Item 2	Item 3	Item 4	Item 5	Item 6
Practicing counselor (N = 3,238)	36.8%	88.7%	15.8%	56.0%	82.5%	88.8%
Counselor educator (N = 302)	29.1%	94.4%	20.7%	68.2%	83.6%	91.1%
Doctoral student (N = 204)	27.0%	88.3%	14.6%	57.6%	80.0%	87.8%
Master's student (N = 1,220)	29.1%	85.3%	14.8%	53.1%	82.1%	75.7%
Total across groups (N = 4,964)	34.2%	88.2%	15.8%	56.1%	82.4%	85.7%
X2 (df=3)	27.928	22.130	6.616	22.590	1.186	133.230
p	< .001	< .001	.085	< .001	.756	< .001

Quiz items (CORRECT RESPONSE)

Item 1: State-level politics (e.g., Governor, state legislature) are directly related to Medicare reimbursement. (FALSE)

Item 2: There is currently legislation under consideration to add mental health counselors as Medicare providers. (TRUE)

Item 3: Professional organizations (e.g. ACA, NBCC, AMHCA) began supporting Medicare reimbursement for counselors in the past five years. (FALSE)

Item 4: Historically, bills authorizing Medicare reimbursement for counselors have passed both the Senate and House, albeit on separate occasions. (TRUE)

Item 5: Medicare is the only payment mechanism for counselors to work with people over 65. (FALSE)

Item 6: Medicare currently recognizes psychiatrists, psychologists, clinical social workers, and psychiatric nurses to provide outpatient mental health services. (TRUE)

NOTE:  $X^2$  calculation based on only respondents identifying as practicing counselor, counselor educator, master's student, doctoral student

It should be noted that in regard to answering Research Question Two, due to a small subset of respondents ( $N = 119$ ) who selected Other or omitted a professional type, only data from respondents who clearly indicated a professional type of counselor educator, practicing counselor, doctoral student, or master's student was utilized. We compared this sub-group to the larger group of those with relevant professional type data to ensure that no group differences were apparent. No group differences were significant at  $p < .05$ , except for one item: *MKQ: Profession*, item six ( $X^2 = 9.424, p = .002$ ). This accounts for the slight discrepancy between the full sample and the professional type sample in regard to correctly answering this item (85.7% vs. 85.4%).

Other negligible discrepancies may appear between the results calculated to answer each of the research questions due to the slight in how the sample composition was determined.

## Discussion

The present study was guided by two research questions: 1) What do ACA members know about Medicare? and 2) Does knowledge differ by professional type? Our results illuminate current levels of Medicare knowledge among ACA members, both in terms of knowledge about the fundamentals of the Medicare program, as well as insight into the counseling profession's history of Medicare advocacy. Across all groups, participants correctly answered half of the questions related to policy knowledge. This finding calls into question whether counseling professionals currently possess the necessary knowledge to effectively lobby on behalf of Medicare coverage for LPCs and LMFTs.

Our finding that close to half (i.e., 47.4%) of respondents incorrectly assumed that more than 15% of Medicare beneficiaries live in long-term care facilities reflects a misunderstanding of who is served by the Medicare program. This finding may suggest that respondents rightly associate Medicare with older adulthood, but wrongly assume that older adulthood is equivalent to living in a nursing home. In fact, only 3% of Medicare recipients reside in a long-term care facility (Kaiser Family Foundation, 2019). Prior work suggests that Medicare ineligibility interferes with beneficiaries accessing counseling in outpatient community settings, including private practice, integrative behavioral healthcare settings, and community mental health agencies (Fullen et al., 2019). Therefore, the current data indicates a potential incongruence between how the Medicare population is perceived by counseling professionals and the realities of existing barriers to accessing mental health care.

Additionally, our data indicates that a minority of respondents (i.e., 44.2%) knew that Medicare is the largest single payer for opioid overdose hospitalizations. Without this knowledge, counseling professionals, including those with specialized training in addictions, may not fully understand that the majority of people who have been hospitalized for opioid overdoses have medical insurance that does not reimburse services of LPCs. It was notable that practicing counselors were more likely to answer this question incorrectly than the other groups, suggesting that this sub-group was particularly unaware of the close link between Medicare and addiction hospitalization. Likewise, a lack of knowledge about the link between Medicare, age, disability, and the opioid epidemic may result in a missed opportunity to articulate to lawmakers that adding LPCs as Medicare-eligible providers may be a sound strategy for addressing the increasing need for opioid treatment.

Another notable trend in our data is that there was no difference in scores between the four groups of respondents on questions relating to the Medicare policy itself. Therefore, practicing counselors, counseling students at the master's and doctoral level, and counselor educators all possessed roughly the same degree of factual knowledge about the program. This finding raises questions about why greater policy expertise did not correspond with advanced education (e.g., counselor educators) or direct clinical experience (e.g., practicing counselors). This finding suggests that the counseling profession as a whole, rather than only its newest members, possess limited policy literacy regarding Medicare. Without policy literacy, counseling professionals may be missing vital information necessary to communicate to lawmakers the importance of expanding coverage of Medicare to include LPCs and LMFTs and therefore impede lobbying efforts.

In total, counseling professionals also failed to correctly answer about half of the questions related to professional advocacy for Medicare-eligibility. It was particularly concerning that only one-third (i.e., 34.2%) of respondents knew that state legislatures are not involved in Medicare reimbursement, with only 29.1% of counselor educators and master's students, and 27.2% of doctoral students answering this question correctly. Although it is possible that respondents misinterpreted the question, perhaps confusing the Medicare program with Medicaid (which is mostly operated at the state level), the data casts doubt on how well state-federal political dynamics are understood by respondents. This finding may suggest a misunderstanding of how to

effectively advocate on behalf of Medicare reimbursement for LPCs and LMFTs. It may lead to inefficient efforts, such as contacting state-level legislators about a national concern.

Even more alarming was the vast minority (i.e., 15.8%) of respondents who were aware that professional organizations have been working to address the Medicare coverage gap for more than five years. The historical efforts of organizations such as ACA, NBCC, and AMHCA were not well known by participants in the study. Without a historical understanding of previous efforts to advocate on behalf of Medicare reimbursement, counseling professionals risk continuing ineffective efforts, repeating prior mistakes, and missing opportunities to collaborate with stakeholders and existing advocates on this important issue.

Finally, counselor educators and practicing counselors knew more than master's students and doctoral students regarding professional advocacy efforts on Medicare coverage. This finding suggests that, despite the low scores across all four groups related to professional advocacy knowledge, more seasoned members of the profession know more about professional advocacy efforts than newer members. A greater length of time in the field may expose professionals to more information regarding professional advocacy efforts. This result is especially encouraging because it suggests that master's students and doctoral students may learn this information over time in the field, thus preparing them to be more effective advocates.

### **Implications for the Counseling Profession**

Our findings suggest that counseling professionals may require more basic knowledge about specific policies and a more nuanced understanding of the counseling profession's advocacy history to improve advocacy efforts on Medicare coverage for LPCs and LMFTs. In spite of the ACA advocacy competencies (ACA, 2003), and many innovative developmental models of advocacy, there remains a challenge in disseminating basic information about specific policies to counselors, counselor educators, and counselor trainees. Lacking basic knowledge about the subject of advocacy (i.e., Medicare in this case) may influence how willing counseling professionals are to participate in sociopolitical advocacy.

Additionally, there may be a lack of uniformity in the way that counselor education programs teach, promote, and model advocacy. It may be necessary to create an advocacy model of universal criterion for CACREP-accredited programs. It may additionally be helpful for counselor training programs to incorporate policy and professional advocacy effort knowledge in multiple courses to provide a well-rounded framework of advocacy early in one's professional training. Existing advocacy models may also benefit from emphasizing specific policy and professional advocacy effort knowledge within their current frameworks to help counseling professionals, regardless of their level of professional development, become more efficacious in advocacy efforts. As evidenced by the current study, these changes should emphasize the importance of public policy and professional advocacy knowledge.

### **Implications for Counselor Training**

These findings also call into question whether the proliferation of advocacy training models (Goodman et al., 2009; Hof et al., 2009) has adequately prepared members of the counseling profession for more in-depth engagement on specific advocacy issues. A possible way to rectify this concern is to address Medicare advocacy through the lens of these models. For example, in Goodman and colleagues' (2009) Relationship-Centered Advocacy Model, counselors would internally grapple with their awareness of themselves and others concerning the advocacy and social justice issues presented by lack of LPC and LMFT coverage by Medicare. Counselors would then develop empathy for Medicare beneficiaries, learn to respect the goals of their advocacy partners (such as existing Medicare advocacy groups and professional counseling organizations), and offer and receive emotional support. Through this work, counselors would enter a third stage in which they integrate Medicare advocacy as a part of their professional identities through developing insight into the social justice barriers

presented by a lack of mental health providers for Medicare beneficiaries. They would learn specific advocacy interventions from their advocacy partners at this stage.

Another model is the T.R.A.I.N.E.R. model (Hof et al., 2009). This seven-step process is intended to guide social and, by extension, professional advocacy for professional counselors. In the first step, counselors would conduct a needs assessment of Medicare beneficiaries to determine the best ways in which to address barriers presented by the limited coverage of mental health professionals by Medicare. The second step of the model, responding, would require counselor advocates to identify the specific advocacy competencies to implement in the barrier identified in the first step through a training. In the third step, counselors would develop a plan of action to address the development and implementation of the needed advocacy competencies to address Medicare coverage at the institutional level and to create a logistical plan to provide training on these competencies. Counselors would then evaluate the needs of the group during the training and to adapt the content of the sessions as needed to meet the goals of its attendees. Counselor advocates would facilitate group interactions at the training in the fifth step, networking. The sixth step of the model, evaluating, follows the training. This step provides valuable information about the impact of the instruction on the identified Medicare advocacy goals immediately and over time. Finally, counselors would retarget by reviewing the impact of their training. Counselor advocates would utilize data from the evaluation stage to determine how well advocacy competencies were implemented and the degree of change to the barriers identified by lack of Medicare coverage.

### **Limitations & Future Directions**

There are several limitations associated with our analysis. First, the MKQ is an exploratory instrument and has not yet been validated. It is possible that respondents had difficulty in interpreting specific items. In light of the low Cronbach's  $\alpha$  statistics, performance on the full quiz or sub-samples (i.e., MKQ: Program/MKQ: Profession) should be interpreted cautiously. Additional work is needed to improve the MKQ's utility as a measure of broad Medicare knowledge. Similarly, no formal analysis into the factor structure of the MKQ has been performed. Another limitation is related to the nature of True/False quiz questions. The True/False format provides respondents with a 50% chance of answering correctly regardless of knowledge. The development of more sophisticated measures may be useful as the counseling profession continues to examine policy knowledge among its members.

Additionally, the response rate (10.08%) was modest and may not be a representative sample of practicing counselors, counseling students, and counselor educators. Our respondents may represent a more engaged sample compared to the whole of counseling professionals. If the sample in the study is representative of a more engaged segment of the counseling professional populace, counseling professionals as a whole may be even less knowledgeable about the Medicare program and professional advocacy efforts than is suggested by our findings. Additional research is needed in which a randomized sample of counseling professionals is used.

Finally, there is no empirical evidence that program or professional knowledge directly affects advocacy outcomes. Although a link between knowledge and the quality of advocacy appears logical on the surface, additional research is needed to substantiate the relationship between program and professional knowledge and increased advocacy effectiveness.

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