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Professional Identity of Counseling: A Template for Action

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Dialogue regarding the professional identity of professional counseling continues to increase and momentum continues to build around efforts to promote broader recognition of the counseling profession. This article outlines a template for action by which the profession may continue to move forward in its quest to be fully recognized as a viable force in mental health treatment. The authors recommend five methods to comprehensively promote professional counseling. These methods include: Capitalizing on faculty hiring practices to transmit professional identity, harnessing legislative strength, reconciling our humanistic roots, promoting title ownership, and conducting research that articulates the profession's strengths.

Key Words: Counselor identity, distinct profession, concrete steps, comprehensive conceptualization

The professional identity of counseling is an issue that has long been discussed in the counseling literature (Auxier, Hughes, & Klein, 2003; Gale & Austin, 2003; Goodyear, 1984; Hanna & Bemak, 1997; Hill, 2004; Leinbaugh, Hazler, Bradley, & Hill, 2003; Ramsey, Cavallaro, Kiselica, & Zila, 2002; Swickert, 1997). Discussions have ranged from the developmental process of individual identity experienced by Master's level students (Auxier et al., 2003) to challenges related to the development of professional counselors' collective identity (Gale & Austin, 2003). Singular aspects related to professional identity, such as scholarship have been explored (Ramsey, et al., 2002) as have specific qualitative characteristics related to counselor educators, such as wellness (Hill, 2004; Leinbaugh, Hazler, Bradley, and Hill, 2003). Specific sub-groups of the profession, such as the professional identity of doctoral graduates of counselor education programs in private practice (Swickert, 1997) and counseling psychologists (Mrdjenovich & Moore, 2004; Nastasi, 2002) have also been examined. Goodyear (1984) has emphasized an appreciation of the history of the counseling profession and the unique skills of the counselor as paramount. Likewise, Mrdjenovich & Moore (2004) have described a sense of connection to the values and emphases of the profession (i.e., historical factors influencing the profession) as critical to professional identity development in counseling.

In addition to the scholarship dedicated to issues of professional identity in counseling, the topic has also been prominent at professional meetings and conferences, in newsletter articles (Counseling Today, 2007), and on listserves (CESNET-L, 2007), as well as through other informal communication means. Several recent activities have further illuminated the significance of professional identity in the field of counseling. The Council on Accreditation of Counseling and Related Educational Programs (CACREP) has promulgated specific standards related to professional identity to ensure that the development of professional identity is a key focus of counselor education (CACREP, 2009). The American Counseling Association's (ACA) Governing Council has also identified increasing public awareness of counseling and counselors as one of its top six priorities (Counseling Today, 2006).

Finally, ACA's project "20/20: A Vision for the Future of Counseling" (Counseling Today, 2007) has il-

lustrated the continued commitment of the profession towards increased visibility. This project, led by a diverse group of leaders in the field, provides the blueprint for promoting the field of counseling and identifies the continued need for increased unification, and synergy within the counseling profession. Four of the seven major areas for which all efforts of the plan will be directed include: strengthening identity, creating licensure portability, expanding and promoting the research base of professional counseling, and improving public perception and recognition of counseling (Counseling Today, 2007). Each of these issues is viewed as essential to the counseling profession's continued success.

Currently there are various efforts related to the development of establishing professional identity of counseling (Auxier, Hughes, & Klein, 2003; Gale & Austin, 2003; Goodyear, 1984; Hanna & Bemak, 1997; Hill, 2004; Leinbaugh, Hazler, Bradley, & Hill, 2003; Ramsey, Cavallaro, Kiselica, & Zila, 2002; Swickert, 1997). Despite the vast scholarship, specific accreditation standards (CACREP, 2009), and broad-based efforts by the American Counseling Association (2007) to promote increased visibility of the counseling profession as a significant force in mental health treatment, the literature overall lacks concrete steps to move from conceptualizing professional development to operationalizing professional identity in the everyday lives of counselors. Secondly, as a profession, we must integrate the eclectic nature of our philosophical roots into practical, visible markers for society to easily identify and better understand the profession of counseling.

For the professional counselor, the substantiation and application of professional identity increases visibility and provides comprehensive recognition within the larger context of the mental health professions. However, gaining broad public recognition is dependent first and foremost upon members of the counseling profession's ability to fully articulate their distinct professional identity. This means educating members of the counseling profession, consumers of mental health services, other mental health professions, the government, and the public at large about the unique differences and the benefits of counseling as well as continuing to increase the visibility of the profession on the local, state, and national stages. This type of effort requires that members of the counseling profession take action to comprehensively and systematically inform the public about the professional identity of counseling.

To guide this process, the authors recommend the use of a focused agenda, or a template towards the future (see Figure 1). The template defines the tasks needed to establish a professional identity of counseling, which involves the following five steps:

- 1) Capitalize on faculty hiring practices to transmit professional identity
- 2) Harness legislative strength
- 3) Reconcile our humanistic roots
- 4) Promote title ownership
- 5) Conduct research that articulates the profession's strengths.

These steps comprise a multi-pronged strategy to promote recognition of the counseling profession as a distinct field. This article explores how each of these issues relates to the professional identity of counselors and provides concrete recommendations for moving forward.

Capitalize on Faculty Hiring Practices to Transmit Professional Identity

The recent change in accreditation standards requiring counselor educators to possess a doctorate in counselor education (CACREP, 2009) presents a significant opportunity for counselors to progress further in professional identity development. This change creates a unique opportunity for significant progress towards making the professional identity of counselors even more concrete. By institutionalizing or embedding professional identity in hiring policies, counselor educators are in a position to increase their collective professional identity and to gain further traction both covertly and overtly in transmitting professional identity to counseling students: the next generation of counselors.

The success that other mental health professions (e.g., clinical psychology, social work) have achieved in public recognition may be directly related to the degree to which educators have been able to transmit a strong professional identity to those entering the field during their graduate work. As such, it may be helpful to view the work of these other mental health professions as lessons which counselors seek to capitalize on faculty hiring practices. To explore this issue and its impact on a profession's identity, the fields of psychiatry, clinical psychology, and social work will be examined.

Hiring Process in other Mental Health Disciplines

Although, the field of psychiatry is the only one of the three disciplines that requires a medical degree for practice, each of these disciplines share a focus on hiring those with the same credentials (i.e., degree and licensure). In fact, in each of these disciplines, faculty staffing patterns are institutionalized through accreditation standards (American Council on Graduate Medical Education, 2004; American Psychological Association, 2001; Council on Social Work Education, 2001). By hiring clinical psychologists to teach clinical psychology students and social workers to teach social work students, professional identity is not only directly transmitted through explicit means (i.e., instructor qualifications) but also is conveyed implicitly (e.g., the professional values and characteristics of the instructor as related to professional identity). As such, professional identity development is influenced through academic, modeling, and mentoring experiences.

Through the promulgation of accreditation standards related to hiring faculty members, each of these other mental health professions has engaged in widespread strategic hiring practices that have likely resulted in the preservation and continuous transmission of their respective professional identity. Unfortunately, the counseling profession has until now failed to adopt this same method of exclusive hiring practices. In fact, in an examination of the professional identity of counselor educators, Calley and Hawley (2008) found that one quarter of survey participants employed as counselor educators held degrees other than counselor education. Further complicating the professional identity of counselor educators, more than a quarter of the counselor educators possessed multiple professional licenses, including licensure in clinical psychology, marriage and family therapy, and clinical social work. Whereas these multiple identities of counselor educators may reflect the historic inclusive-based hiring practices in counselor education and moreover, may be tied to the field's humanistic tendencies, these practices may also have stymied the counseling profession's collective identity development.

With the recent change in CACREP standards (2009), counselors are indeed following the practice of other mental health professions and as a result, may be able to fully use the opportunity for increased growth in professional identity development. This change may afford new graduates of counselor education increased ability to find positions, as well as, place trained counselor ed-

ucators at the forefront of teaching and mentoring new counseling professionals. Providing placements for the increasing number of doctoral programs training qualified counselor educators also carries ethical implications. As such, it is incumbent upon counselor educators to not only ensure that there is adequate space for new counselor educators but also to ensure that counselor education is utilized as a means by which to fully transmit professional identity. Therefore, counselor educators must not only engage in strategic hiring practices to promote professional identity, but also must continue to examine and discuss methods by which professional identity is transmitted through counselor education.

Introducing strategic hiring practices that are directed towards such outcomes may prove imperative not only to the covert and overt transmission of professional identity, but also to the future sustainability of the field's professional identity. Since not all counselor education programs are accredited, it will be essential that non-accredited academic programs also adopt these new hiring practices. Through working on this issue collectively, regardless of accreditation status, counselors will increase their opportunity to capitalize on professional identity development through the adoption of strategic hiring practices.

Harnessing Legislative Strength

In addition to capitalizing on faculty composition and counselor education to transmit the professional identity of counselors, other methods are needed to continue to promote recognition of the profession to the broader public. One such method involves taking full advantage of recent legal progress or harnessing legislative strength to increase recognition of the professional identity of counseling. Tremendous strides have been realized during the past several decades since legislation for professional counselor licensure was first introduced resulting currently in 49 of the 50 states having enacted such legislation.

Most recently, Nevada passed a licensure law for professional counselors, leaving California as the only state lacking such legislation (American Counseling Association, 2007). Successful efforts to gain licensure for professional counselors has increased visibility of the profession by the legislature and the broader public, and should continue to do so as efforts continue to secure licensure in California.

Therefore, advocacy for licensure should be viewed as an opportunity for leaders in the counseling profes-

sion to simultaneously advocate for recognition of third party payers of mental health services. More specifically, leaders in the counseling profession should capitalize on current legislative successes regarding licensure to further promote the need for broad third party acceptance of Licensed Professional Counselors.

In essence, recognition by third party payers, such as insurance companies and/or governmental entities reflects the stature of a mental health discipline as it attaches fiscal value to the profession through such endorsement. Conversely, non-recognition by third party payers can be perceived as reflecting a profession's diminished value or lesser credibility than its recognized counterparts. For the counseling profession, this issue continues to be one in which some progress has been made in particular areas (i.e., specific states, specific payers), however, widespread recognition of counseling as a mental health discipline worthy of equitable fiscal support has yet to be realized. In fact, Smith (1999) estimated that of only 21% of licensed professional counselors working in a community mental health center or private practice, a little more than half of their income was provided through 3rd party payments. As a result, this issue continues to be a core advocacy issue on the agendas of many state counseling associations throughout the United States.

To illustrate one state's challenges with this issue, the authors' home state is examined. In Michigan, professional counselors have been engaged in advocacy efforts for more than fifteen years to acquire recognition by major insurance companies. Numerous strategies ranging from grassroots efforts and the use of professional lobbyists, to taking formalized legal action have been attempted, and whereas some progress has been made, the largest insurance companies have yet to recognize professional counselors for third party reimbursement. In fact, Blue Cross Blue Shield of Michigan (the largest health care provider in state) does not currently reimburse licensed professional counselors for mental health treatment. Likewise, whereas the state's governmental systems have endorsed specific mental health disciplines as payable for treatment under specific entitlement programs (i.e., Medicaid), professional counselors have yet to be recognized as equal to other Master's level mental health disciplines (i.e., clinical psychologists).

Finally, vast governmental systems in which professional counselors often are employed, such as the child

welfare system, have required less experience from individuals possessing a degree in social work versus counselors and psychologists. This type of endorsement of the social work profession over other mental health professions constitutes overt preferential treatment of one profession (i.e., social work) over other mental health disciplines (i.e., counseling, psychology). In fact, according to the administrative rules for child caring institutions, Rule 400.4118 (State of Michigan, 1996) reads as follows: "A social service supervisor, at the time of appointment to the position, shall possess one of the following:

(a) A master's degree in social work and 1 year of experience as a social service worker.

(b) A master's degree in sociology, psychology, criminal justice, or guidance and counseling and 2 years of experience as a social service worker..."(p. 4).

The promulgation of such administrative rules illustrates the inequities in recognition of mental health professions that have been institutionalized in governmental agencies. As a result, a graduate degree in one mental health discipline (i.e., social work) is promoted as of greater value than others (i.e., counseling, psychology) in specific public domains.

Similarly, certain county-administered mental health systems in Michigan limit payment recognition for therapeutic services to licensed psychologists, thereby, overtly not recognizing professional counselors as equitable providers of mental health treatment. Whereas these examples illustrate the challenges incurred by the state of Michigan, similar and other types of challenges continue to exist throughout the country. These challenges further reinforce the fact that the field of counseling has much continued work to do towards its goal of achieving recognition by third party payers.

Although it is clear that counselors are currently faced with significant challenges that require legislative advocacy and subsequent legislative changes, the recent passing of the Mental Health Parity and Addiction Equity Act of 2008 provides an opportunity for counselors to gain further legislative ground. Because this legislation is so new, it has yet to be determined precisely how it will impact counselors and other mental health professionals. As such, counselors are in a key position to play a part in shaping how the legislation is implemented and to what degree it will impact the profession both at the state and federal level.

The existing challenges and opportunities that counselors currently face require specific action in order for counselors to fully harness legislative strength to gain increased recognition. To achieve success, counselors must: 1) Utilize the past records of success and sheer number of state licensure laws (i.e., 49) to move forward towards universal acceptance of licensure, 2) Capitalize on licensure legislation to promote recognition of counselors by major insurance companies, 3) Identify all incidences in which counselors are not equitably treated as mental health professionals and engage in broad-based

advocacy and legal action to address such issues, and 4) Ensure active participation in ground-floor discussions regarding the implementation of the mental health parity law. Moreover, rather than viewing legislature work as solely outcome-driven, counselors must continue to view legislative advocacy as a core process function. It is in this manner that legislative work may serve as a core factor among all counselors towards the development of a sustainable professional identity.

Reconciling our Humanistic Roots

In light of the challenges that the counseling profession continues to face with regard to recognition by insurance companies, much has been written about the varying tensions that such recognition may create (Braun & Cox, 2005; Daniels, 2001; Eriksen & Kress, 2005; Hansen, 2003; Hansen, 2006; Hansen, 2007). Negotiating counseling ethics in a managed care environment has been the focus of some of the recent research (Braun & Cox, 2005; Daniels, 2001; Eriksen & Kress, 2005) while other literature has focused on the counseling profession's relationship to humanism and subsequent proposed challenges that might be created as a result of the relationship between humanistic thought and the current culture of managed care (Hansen, 2003; Hansen, 2006; Hansen, 2007).

Both of these areas of discourse directly speak to the need for the counseling profession to continuously evolve and adapt to its surrounding environment, and as a result, the development of the managed care movement late in the last century can be viewed as a necessary impetus to prompt such adaptation. Because codes of ethics are dynamic doctrines that, more often than not, reflect the time in which they are enacted, the coun-

seling profession continues work to resolve the various ethical quandaries initiated by the onset of managed care. However, the profession has not successfully addressed or resolved the tension arising from reconciling humanistic philosophy and attaining a broad-based recognition of counseling as a mental health profession.

The counseling profession's foundations in humanistic philosophy provide a rich historical context from which to promote the professional identity of counseling. As such, humanistic principles have provided the basis of counseling skill development, emphasizing the significance of the client-counselor relationship and the necessity of the creation of a therapeutic environment (Corey, 2005). Both interesting and troubling, though, is that the very notion of the profession's humanistic roots has been used to argue against counseling being viewed as a health profession (Hansen, 2007). Examining the counseling profession's humanistic foundations with current health care ideology, Hansen (2007) concludes "the switch to a health care ideology automatically entails a sacrifice of the humanistic ideals that have guided the counseling profession for decades" (p. 290). In addition, the author discusses the differences that could arise in conceptualizations of client problems based on applying a humanistic versus a health care conceptualization, characterizing health care ideology as focused on objective criteria (i.e., symptoms) and humanistic ideology as focused on the subjective inner experiences of the individual.

These types of assertions narrowly characterize humanistic foundations to a specific counseling theoretical orientation. Further, such arguments reduce the counseling profession to one in which Humanistic theory is the counseling theory to which all counselors subscribe. This is inconsistent with accreditation standards that promote exposure to a wide array of counseling theories (CACREP, 2009) and comprehensively developed counseling textbooks comprised of multiple diverse counseling theories (Capuzzi & Gross, 2003; Corey, 2005; Murdoch, 2004). The counseling profession has long acknowledged and embraced its foundations in humanistic philosophy while simultaneously promoting adoption of various counseling theories based upon the evidence-basis of such theories and related issues such as client population, and specific presenting issues. Therefore, scholarship focused on narrowly defining the relationship between humanistic thought and counseling practice may serve to do more harm than good, particularly when it is used as an argu-

ment against the counseling profession, that it should not be recognized as a provider of health care services.

The professional counselor, though strongly connected to humanistic foundations, must also promote accurate historical information about the development of counseling theories, philosophies and practice that have influenced its growth. As such, humanistic foundations and the use of clinical practice theories such as cognitive-behavioral theory are not mutually exclusive. For instance, the professional counselor may be guided by humanistic values such as the primacy of the counseling relationship, the significance of empathy while also conceptualizing client issues and formulating a treatment plan using cognitive-behavioral theory.

An increase in scholarship dedicated to continued discussion about the relationship between humanistic foundations and counseling practice is needed so that we can continue to reconcile any perceived differences. For example, Eriksen and Kress (2005) suggest bridging the divide between the DSM and professional identity of counselors. Such a model of bridging the gaps between humanism and current realities may indeed provide a healthier model for the long-term future of the profession.

In order to reconcile our humanistic roots, we must: 1) reject limiting characterizations of the counseling profession's humanistic foundations, 2) acknowledge that the counseling profession's history in humanistic philosophy provides a necessary foundation for practice and does not preclude the use of specific efficacy-based counseling theories and clinical techniques, and 3) articulate the scope of practice similarities between professional counseling and peer disciplines (i.e., clinical psychology, clinical social work) to more clearly promote the profession as one within the mental health domain.

To briefly summarize, movement towards the development of a unifying professional identity in counseling requires rejecting limiting conceptualizations of practice in place of comprehensive conceptualizations of practice that reflect the profession's theoretical diversity. Such diversity with regard to theoretical orientation is not only inherent in the profession, but also illustrative of the profession's commitment to evidence-based practice. The use of efficacy-based counseling theory does not indicate an abandonment of our humanistic foundations, but rather an appreciation of humanistic foundations as providing the base level of skill upon which most counseling theories are practiced.

Adapting to mental health practice in the 21st century also requires that the profession effectively respond to evolving theoretically-based research. Finally, reconciling our humanistic roots to be a competitive provider of mental health services in the 21st century requires identifying practice similarities between counselors and peer disciplines such as clinical psychology. To this end, counselors must place greater emphasis on articulating practice similarities such as the use of a wide and diverse array of counseling theories, the use of assessment tools, and the ability to diagnose and treat serious mental health disorders. Discourse allows the profession to continue to appreciate and recognize the role of humanistic philosophy in counseling while promoting the counseling profession as a viable mental health provider.

Promote Title Ownership

The term counselor is used in a variety of contexts that are both informally and formally connected to a wide range of disciplines other than professional counseling. Diverse usage of the counseling title diminishes the professional identity of the counseling field. Informal uses are defined here as uses of the term counselor that are independently designated by businesses, not having any externally defined standards. Some of these include: loan counselor, financial aid counselor, and family counselor. The terms loan counselors and financial aid counselors are most often designations allocated by the banking industry and within higher education respectively. Such affiliation with the term counselor in vastly different industries may be a contributing factor to continued barriers that the field of professional counseling faces in establishing public recognition as a unique field.

Furthermore, informal use of the terms family counselor or youth counselor, both of which are popular titles used within a broad range of human service programs, may further skew understanding of the definition of counselor. In fact, such use of the term counselor within the human service industry may contribute to an even greater degree of confusion among laypersons as professional counselors often work within this industry as well. This may cause greater challenges to laypersons in determining the difference between a non-professional family counselor and a professional counselor, both of who might be working with a family. None of the examples provided (i.e., loan counselor, financial aid counselor, family counselor, youth counselor) systematically require that an individual possess a

four-year college degree (although dependent upon the business, various academic requirements may exist) let alone a Master's degree in Counseling. Furthermore, none of the examples cited systematically require a set of specific skills for such positions.

To address these issues, the institution of standardized academic and skill requirements would promote a more coherent identity with the term counselor as it is used across industries. However, as illustrated in the above examples, the informal use of the term counselor is highly arbitrary and widespread, and as a result, may do considerable harm to the counseling profession's ability to promote a consistent professional identity.

Such freedom with the use of the term counselor may also contribute to consumer confusion related to fully identifying and understanding the profession of counseling. In fact, when engaging in dialogue with individuals with mental health experiences, a consumer may be able to identify if their mental health worker is a psychologist or psychiatrist but less able to identify their mental health worker as a professional counselor. This lack of recognition among consumers illustrates the need of the counseling profession to engage in more vigorous marketing campaigns, thus making professional counselors much more familiar to the general public.

In addition to the informal uses of the term counselor discussed above, specific professions have also taken steps to formalize the term counselor, thereby institutionalizing the term within their respective profession. An example of this type of institutionalization includes the use of the designation in the legal field: counselor at law. Within the addictions field, the term has been formally institutionalized through state certification processes that use such titles as: certified addictions counselor (Michigan Certification Board for Addiction Professionals, 2006). Again, in neither of these uses of the term counselor is there an established relationship between counselor education or a requirement of specific skill set, so in fact, whereas the "counselor at law" is required to possess a law degree, the certified addictions counselor is required to minimally possess a high school diploma (varies state to state). Examples such as this of institutionalized affiliation of the term counselor within such vastly different professions could also contribute greatly to the confusion related to the public's understanding of precisely what constitutes a counselor.

ods by which to promote the professional identity of counseling, promoting title ownership is the one area in which the profession may only be able to make incremental progress as sweeping reform could prove to be unrealistic. As a result, rather than attempting to abolish the use of the term counselor as an affiliation with all other professions currently using such designation, it is recommended that the profession of counseling initially target efforts to counteract such use in the areas in which professional counselors are likely employed (i.e., human services). Such efforts could require changes in state licensure legislation articulating legal use of the term professional counselor. Through engagement in this type of legal action, human services and schools (particularly, as industries that employ professional counselors), would be prohibited from using the title "counselor" in job titles except in the case in which professional counselors are employed.

Taking this type of legislative action somewhat mirrors action taken in the development of administrative rules regarding licensure for social workers that recently passed in the state of Michigan (July, 2005). Prior to social work licensure in the state, individuals that did not have an academic background in the study of social work were eligible for two types of social work certification: social worker registration and certified social worker. With the promulgation of administrative rules for licensure in social work, only individuals that have completed a course of work specifically in social work are eligible for licensure as a social worker at the Bachelor, Master, and doctoral level (State of Michigan, 2005). Furthermore, the term, registered social worker, was eliminated, and individuals without an academic background in social work are now eligible only for the title of social service technician registration, a title that explicitly excludes the use of the term social worker. By making such revisions in language, the profession of social work took a bold stand to protect the title of social worker by ensuring that such title could only be bestowed on those meeting a precise set of qualifications while others that do not meet the same qualifications, are no longer affiliated by title with the profession of social work.

Whereas legislative action may provide one level of protection for the title of counselor, another step that is recommended towards promoting title ownership involves marketing. As the forces identified above continue to compete to add to the public's confusion related to understanding precisely what constitutes a

Of the five issues identified in this article as meth-

counselor, it is necessary that the counseling profession engage in broad-based and effective marketing campaigns to promote public awareness about the role of professional counselors. Continuous use of the term professional counselor might provide the first step to differentiating a counselor from that of a professional counselor, thereby promoting a new dialogue with the public. The use of multiple media including electronic, hard print, radio, and television in advertising efforts may make significant strides in familiarizing the public with the role of the professional counselor. At the same time, such public awareness efforts could counteract the negative effects of such disparate uses of the term counselor (i.e., loan counselor) and may begin to make strides in reducing such use of the term.

Conducting Research that Articulates Our Strengths

Research is vital to further develop the professional identity of counselors and to increase the collective knowledge within the profession. The richness of our research history is embedded in the scientist-practitioner model. The connection our research agenda has to how we practice as counselors is the embodiment of our strength as a profession. Addressing the importance of a collective identity, Gale and Austin (2003) interviewed senior leaders in the field who described the historical importance of counseling research during the early inception of counseling and the value of maximizing our research principles as we grow as a profession.

In general, counseling research describes counseling processes and promotes one's ability to understand points of effectiveness and non-effectiveness, as well as the complexity of our own profession. The scientist-practitioner model maintains the rigor of the profession and integrates the communities in which counselors work to develop effective practices, and the knowledge obtained from research assists counselors to be more responsive to the individual (Nejedlo, 1984).

With the emphasis of process and practice research in mind, part of the promotion of professional identity is conducting research that articulates the profession's strengths. To accomplish this goal, a research agenda emphasizing the effectiveness of counseling and the unique factors that contribute to counseling is key to furthering professional identity. An indication of the strength of the field's professional identity is the accessing of counselors for services because of their effectiveness and distinguishable services. A research focus on the facets of counseling and methods by which

counseling is operationalized is key to studying the values that are unique to the counseling field. This thread of research is accomplished through the collaboration of counselor researchers and counselor practitioners. Delucia (1997) suggests a similar relationship between researchers and practitioners as collaborators in the counseling profession.

Kottler (2004) articulated counseling as both art and science. The art in counseling research is the substantive development of theory and process research that articulates the nuances of the counseling field that is complex. Studying and researching the artistic aspects of counseling requires innovative research practices and broad understanding of research concepts. For example, studies focused on diversity require researchers to evaluate worldviews, oppression and self-understanding, which can both be abstract and fluid concepts. The science of counseling research is focused on quantifying counseling to obtain measures of effectiveness. Both the valuing of outcome and process research is inherent to continue developing counseling research. Therefore, theory in tandem with controlled experimental design is ideal to further promote the study of both the art and science of counseling.

In particular, Michigan is experiencing a crossroad for counselor identity. We know as a profession that counseling is effective through client reports, outcome research and the successful growth of the profession. However, we must continue to engage in comprehensive outcome research to ensure that we articulate the objectives of our profession through data driven discussions. Research and consumers of counseling services provide the voice to which insurance boards and legislators listen, therefore we must continue to develop outcome research and communicate findings to all stakeholders. To aid in accomplishing this task, relationships between counselor education programs and counselors in the field need to be forged to collaborate on the collection, analysis and dissemination of counseling effectiveness research.

Too often, professional counselors attempt to model research following the medical model or view counseling research as second tier compared to psychology and psychiatry. The counseling profession deals with an inferiority complex in regards to research, viewing itself as less valued compared to longer more established fields. This is evidenced by the fact that colleagues must educate their administrations of the rigor of counseling, and this continues to be of critical concern for

the field (Rivera, 2004). While the counseling profession is able to emulate the best of other mental health professions related to ensuring the highest ethical standards in research and the use of innovative methods, it is imperative that the field also form its own etiology of counseling research.

Part of the collective conversation as a profession needs to be proactive in educating who we are as counselor researchers. Conducting research that articulates the field's strengths requires a commitment to the science-practice model. The highlight of this commitment is our ability to evaluate the complexities of our profession and describe them to the working counseling communities. Therefore, this implies a continued effort to

advocate for practice research as an imperative research agenda and strive for continued scholarly rigor in our field. Steps to implement a science-practice model in the counseling field include: 1) Continued development of action research; specifically, integrating pedagogy with clinical practice; 2) Counselor education programs serving as research training centers to practicing counselors, and 3) A renewed commitment to evaluation and research of counselor effectiveness that emphasizes increased knowledge of client outcomes and distinguishing characteristics of counseling. These steps provide counselors with data driven tools to develop the profession and educate stakeholders of counseling values and professional identity.

Summary

The template for action described here provides concrete methods by which to solidify the professional identity of counselors and to promote ongoing broad-based recognition of the field. The objectives are intended to strengthen the profession's ability to be an indispensable asset in mental health. At its foundation is the need for the discipline of counseling to identify the unique factors that differentiate it from other mental health fields. The fundamental values of multiculturalism and advocacy and the humanistic and developmental philosophies together comprise unique characteristics of the field of counseling, and as such, should be utilized in the promotion of the field's professional identity. Using this schema of professional identity as a base, five inter-related areas are recommended for use in comprehensive efforts towards the transmission of professional identity that include: 1) Capitalizing on faculty hiring practices to transmit professional identity, 2) Harnessing legislative strength, 3) Reconciling our Humanistic roots, 4) Promoting title ownership, and 5) Conducting research that articulates the profession's strengths. Together, these methods are designed to support the counseling field's current plans to achieve broad-based recognition.

This type of action planning is particularly timely as the field of counseling has committed much recent energy and effort towards professional identity and continued growth of the profession as evidenced by the recent changes in national accreditation standards (CACREP, 2009) as well as the work of the American Counseling Association. These efforts provide effective mechanisms by which counselors may maximize their efforts to further develop professional identity. However, these efforts must be undertaken collectively by members of the profession in order to achieve the desired outcomes and achieve long-term sustainability. In short, counselors must continue to act now and utilize the momentum that has been recently generated. Enacting the Template for Action may provide the means by which to finalize a concrete definition of the term professional counselor.

References

- American Counseling Association (2005). ACA Code of Ethics. Alexandria, VA.
- American Counseling Association (March, 2006). Counseling Today. Alexandria, VA.
- American Counseling Association (June, 2007). Counseling Today. Alexandria, VA.
- American Council on Graduate Medical Education. (2004). Program requirements for residency training in psychiatry. Alexandria, VA.
- American Psychological Association (2006). Retrieved May 15, 2006, from www.apa.org.
- Auxier, C.R., Hughes, F.R., & Kline, W.B. (2003). Identity development in counselors-in-training. *Counselor Education and Supervision*, 43, 25-38.
- Braun, S.A. & Cox, J.A. (2005). Managed mental health care: Intentional misdiagnosis of mental disorders. *Journal of Counseling and Development*, 83, 425-433.
- Calley, N.G. & Hawley, L.D. (2008). The professional identity of counselor educators. *Clinical Supervisor*, 27, 3-16.
- Capuzzi, D. & Gross, D.R. (2003). *Counseling and psychotherapy: Theories and interventions* (3rd ed.). Upper Saddle River, NJ: Pearson Education, Inc.
- Cesnet-L. (February, 2007). Counselors vs. psychologists {Msg 012810}. Message posted to [listserve://cesnet-l](mailto:cesnet-l).
- Corey, G. (2005). *Theory and practice of counseling & psychotherapy* (7th ed.). Belmont, CA: Brooks/Cole.
- Council for Accreditation of Counseling and Related Educational Programs. (2008). The 2009 standards. Alexandria, VA.
- Council on Social Work Education. (2001). Educational policy and accreditation standards. Alexandria, VA.
- Daniels, J.A. (2001). Managed care, ethics, and counseling. *Journal of Counseling and Development*, 79, 119-122.
- Eriksen, K. & Kress, V.E. (2005). *Beyond the DSM story: Ethical quandaries, challenges, and best practices*. Thousand Oaks, CA: Sage Publications.
- Gale, A. & Austin, D. (2003) Professionalism's challenges to professional counselors' collective identity. *Journal of Counseling & Development* 80, 3-10.
- Goodyear, R. K. (1984). On our journal's evolution: Historical developments, transitions, and future directions. *Journal of Counseling and Development*, 63, 3-8.
- Goud, N. (1990). Spiritual and ethical beliefs of humanists in the counseling profession. *Journal of Counseling and Development*, 68, 571-574.
- Hansen, J.T. (2003). Including diagnostic training in counseling curricula: Implications for professional identity development. *Counselor Education and Supervision*, 43, 96-107.
- Hansen, J.T. (2006). Humanism as ideological rebellion: Deconstructing the dualisms of contemporary mental health culture. *Journal of Humanistic Counseling, Education and Development*, 45, 3-17.

References

- Hansen, J.T. (2007). Should counseling be considered a health care profession? Critical thoughts on the transition to a health care ideology. *Journal of Counseling and Development*, 85, 286-293.
- Hill, N.R. (2004). The challenges experienced by pre-tenured faculty members in counselor education. *Counselor Education and Supervision*, 44, 135-146.
- Kaplan, D. (2002). Celebrating 50 years of excellence! *Journal of Counseling and Development*, 80, 261-263.
- Kottler (2004) *Introduction to therapeutic counseling: Voices from the field* (5th ed.). New York: Wadsworth.
- Leinbaugh, T., Hazler, R., Bradley, C., & Hill, N.R. (2003). Factors influencing counselor educators' subjective sense of well-being. *Counselor Education and Supervision*, 43(1), 52-64.
- McFadden, J. & Lipscomb, W. (1985). History of non-white concerns in personnel and Guidance. *Journal of Counseling & Development*, 63, 444-447.
- Michigan Certification Board for Addiction Professionals, (2006). *Competency standards for the substance abuse professional*. Okemos, MI.
- Mrdjenovich & Moore, (2004). The professional identity of counseling psychologists in health care: A review and call for research. *Counselling Psychology Quarterly*, 17(1), 69-79.
- Murdock, N.L. (2004). *Theories of counseling and psychotherapy: A case approach*. Upper Saddle River, NJ: Pearson Education, Inc.
- Nastasi, B.K. (2002). School psychologists as health-care providers in the 21st century: Conceptual framework, professional identity, and professional practice. *School Psychology Review*, 29(4), 540-554.
- Nejedlo, R. (1984). The counselors of tomorrow and research. *Measurement & Evaluation in Counseling & Development*, 17(3), 149-152.
- Ramsey, M., Cavallaro, M., Kiselica, M., & Zila, L. (2002). Scholarly productivity redefined in counselor education. *Counselor Education and Supervision* 42(1), 40-57.
- Rivera, E. (2004, July 5). ACA journals vs. others {Msg 006995}. Message posted to listserve://cesnet-1
- Rogers, C.R. (1961) *On becoming a person*. New York: Houghton Mifflin.
- Rollins, Jonathan (May, 2006). Counseling summit shape profession's future, *Counseling Today*, American Counseling Association: Alexandria, VA.
- State of Michigan Department of Consumer and Industry Services (1996). *Licensing rules for child caring institutions*. Lansing, MI.
- Sue D. W. & Sue D. (2003) *Counseling the Culturally Diverse: Theory and practice*. (4th ed.). New York: John Wiley and Sons.
- Swickert, M. L. (1997). Perceptions regarding the professional identity of counselor education doctoral graduates in private practice: A qualitative study. *Counselor Education and Supervision*, 35, 218-229.
- Witmer, J. M. & Granello, P.F. (2005). Wellness in counselor education and supervision. In Myers, J.E. & Sweeney, T. (2005) *Counseling for Wellness: Theory, Research, and Practice*. (pp. 261-271). American Counseling Association: Alexandria, VA.

Appendix

Figure 1
Template for Action to Improve the Professional Identity of Counselors

