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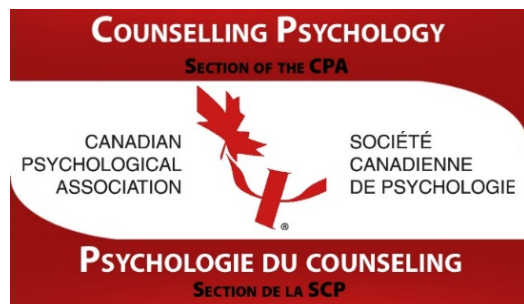
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SELECTED PROCEEDINGS FROM THE CANADIAN COUNSELLING PSYCHOLOGY CONFERENCE 2018:

**ADVOCATING FOR OURSELVES, ADVOCATING
FOR OUR COMMUNITIES**

**CANADIAN COUNSELLING PSYCHOLOGY INTO
THE NEXT DECADE AND BEYOND**



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Integrating Traditional Healing Methods into Counselling and Psychotherapy with Punjabi and Sikh Individuals

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Abstract

Evidence-based practice goes well beyond merely matching client disorder to theoretical approach and instead entails the integration of research evidence with clinical expertise in the context of patient characteristics, culture, and preferences. For clients who are less acculturated to Canadian society or for those who still strongly identify with their cultural roots, incorporation of traditional healing methods into counselling and psychotherapy appears highly beneficial. Based on a review of the literature, this paper offers a discussion of frameworks which can guide the incorporation of traditional healing practices into counselling and psychotherapy and outlines model/theory-embedded strategies and interventions that have been reported to be effective with some Punjabi Sikh clients in peer-reviewed published outlets. This information will be useful for professionals who have limited experience with Punjabi Sikh individuals, clinical supervisors overseeing trainees providing mental health services to Punjabi Sikhs, instructors teaching cross/multicultural counselling or psychotherapy classes, and those wishing to further develop or refine existing competence. These proposed strategies and interventions should be subject to research investigations and clinically tested by practitioners to further increase confidence in their application.

Keywords

traditional healing practices, Punjabi Sikhs, counselling Punjabi Sikhs, psychotherapy with Punjabi Sikhs

Counselling and psychotherapy are specific healing practices that are indigenous to Western countries (Frank & Frank, 1993). Ample previous research and scholarship has concluded that the effectiveness of Western psychotherapeutic practices does not extend to all cultures (e.g., Bemme & D'Sousa, 2014). Studies have also found that some mental health professionals consistently produce better outcomes with racialized and ethno-cultural clients, regardless of the client's disorder or symptom severity (Hayes, Owen, & Bieschke, 2015; Imel et al., 2011). These differences in client outcome, as tied to racial and ethnic heritage, highlight the importance of multicultural training and cross-cultural competence, including that related to culturally adapting

counselling and psychotherapy (Hall, Ibaraki, Huang, Marti, & Stice, 2016).

Culturally Adapting Counselling and Psychotherapy

Past research supports culturally adapted counselling and psychotherapy as a potential solution for differences in therapeutic outcomes between racialized/ethno-cultural clients and those belonging to the dominant cultural groups of European descent (Bernal, Jimenez-Chafey, & Domenech Rodríguez, 2009). Culturally adapted counselling and psychotherapy has been defined as systematically modifying practices by accounting for cultural values, worldviews, and other diversity variables to provide culturally sensitive and specific interventions (Bedi, 2018b). Bernal and colleagues (1995) proposed eight elements by which these services can be culturally adapted (i.e., language, person-variables, metaphors, cultural content, concepts, therapeutic goals, therapeutic methods, and context). Language-related modifications could include providing counselling in the client's first language or utilizing common ethno-cultural phrasings. To adapt person-variables, a client could consult a traditional healer or the healer could become part of the multi-disciplinary treatment team. Adapting metaphors could include incorporating culturally-specific folklore stories used by indigenous healers or religio-cultural symbols. Cultural content can be incorporated by, for example, a specific traditional healing practice within counselling or psychotherapy. Using concepts in a culturally-congruent manner could include cognitive reframes in terms of common cultural constructs and understandings (e.g., karma and kismet for Canadians of Indian descent). Setting culturally adapted therapeutic goals that align with traditional healing practices could also be developed, such as building a closer relationship to God or another spiritual being. There are also certain mainstream psychotherapeutic methods that are highly similar to those of various non-Western traditional healing practices, such as narrative storytelling, that are likely to be acceptable to non-Western clients and could be incorporated into counselling or psychotherapy. Adapting context could include providing counselling outside of the conventional office setting in a culturally-aligned setting such as in the home, a temple, or out in the community. As illustrated in these examples, there are many ways these eight elements can be culturally adapted to consider indigenous healers and traditional healing practices to better align with a client's culture and worldviews within counselling and psychotherapy.

A recent meta-analysis that examined 78 studies with about 14,000 clients found that culturally adapted interventions produced significantly better outcomes than non-adapted versions of the same intervention or no intervention (Hall et al., 2016). Additionally, a meta-analysis by Griner and Smith (2006) found that culturally adapted mental health interventions lead to client improvements in a variety of domains beyond just clinical ones (e.g., mental health symptoms, substance use/abuse, client retention, pro-social behaviour, and client satisfaction). These and other studies provide support for culturally adapted therapeutic practices as well as guidance on how to adapt therapeutic approaches (Benish, Quintana, & Wampold, 2011; van Loom, van Schaik, Dekker, & Beekman, 2013). However, it is important to tailor these approaches and adaptations appropriately to each client's culture and worldviews, and this can include integrating elements of traditional healing.

Integrating Indigenous Healers and Traditional Healing Practices into Culturally Adapted Counselling and Psychotherapy

Traditional healing involves systematic approaches to addressing mental health and psychospiritual concerns that draw upon theories, beliefs, and experiences which are native to non-Western cultures (Gureje, et al., 2015). Traditional healing is typically more holistic and spiritual in nature as it focuses more so on the psychological, social, and emotional aspects of disorders, even when the illness is predominantly somatic (Gureje et al., 2015). Although practices of indigenous healers are often referred to as “complementary” or “alternative” and widely thought to be provided autonomously or alongside mainstream Western treatments, there is support for integrative and collaborative care (Gureje et al., 2015). Nevertheless, traditional healing practices and indigenous healers have repeatedly been found to be effective forms of treatment in their own right (e.g., Nortje, Oladeji, Gureje, & Seedat, 2016 reported on 32 studies from 20 different countries that found traditional healing practices as effective for individuals with psychological distress and disorder; also see Waldram, 2000, 2013).

A proposed solution to the differences in therapeutic outcomes between ethno-cultural and dominant cultural groups in North America is utilizing culturally adapted counselling and psychotherapy. Unfortunately, integrating formal traditional healing practices within culturally adapted counselling and psychotherapy has been largely neglected within this literature base (Bedi, 2018b), although it is beginning to be seen much more frequently in counselling with Canadian First Nations clients (e.g., Gray & Rose, 2011).

There are many barriers for counselling psychologists looking to integrate traditional healing practices within counselling and psychotherapy (for a more detailed accounting and discussion, please see Hwang, 2016). Some of these barriers are quite practical, such as lack of knowledge or supervised training, fear of offending or being culturally-insensitive, and inaccessibility of suitable consultation. This section of the paper, however, will focus specifically on barriers to even *accepting* this practice (integrating traditional healing) as valid and useful and a priority for clinical competence. We believe that discomfort and limited interest indicated by counselling psychologists is often related to ideological biases of the person and the discipline (in favour of the Western scientific method and the medical model of psychological distress and treatment). Once this primary barrier (to acceptance) is overcome, and more counselling psychologists truly see the value and necessity of integrating traditional healing practices into their work, we believe motivated counselling psychologists could more easily overcome subsequent barriers to application (see Hwang, 2016).

The medicalization of mental health is the dominant global discourse (Clark, 2014; Summerfield, 2012). The term “global mental health” seemingly implies that a universal set of concepts, causes, symptoms, and experiences can be applied around the world and with different cultural groups (Clark, 2014). This view has been fostered by Western sciences’ quest for universal knowledge, which typically does not recognize epistemological positions as assumptions but rather as concrete facts (Bemme & D’souza, 2014). It has been suggested that Western mental health professionals best adopt an alternate social constructionist view of reality and mental health when working with clients from different cultural backgrounds that allows for situated and local truths about mental health that can differ from dominant claims to universal truth (Gergen, 1985). Through developing greater cultural humility (Yeager & Bauer-Wu, 2013), practitioners can learn

to be more accepting of clients' alternate views of causality and be less focused on verifiability and the universal applicability of Western treatment methodologies (Aggarwal et al., 2014). In sum, by becoming more culturally aware and humble, and less rigid in assigning and judging causality and universal treatment claims, key barriers to integrating traditional healing practices (related to acceptance and valuing) can be reduced, and cultural competency is likely to improve with sustained effort.

Culturally Adapted Counselling and Psychotherapy with Punjabi Sikhs

Individuals of Punjabi ethnic descent who follow the Sikh religion are an increasingly prominent cultural group in Canada who could benefit from culturally adapted counselling and psychotherapy (Ahluwalia & Pellettiere, 2010), particularly that related to integrating traditional healing (Bedi, 2018a). Because Punjabi Sikhs are a small minority group in North America, Canadian counselling psychologists searching to expand their knowledge, training, or competency in working with Punjabi Sikhs often have difficulty doing so (Bedi & Shergill, 2017).

Broadly, the purpose of this article is to provide a narrative review of traditional Punjabi Sikh healing practices that have been incorporated into the counselling or psychotherapy process within a systematized framework and published in peer-reviewed literature. The reason for only including strategies and interventions that fall within a specified theory or model is because we believe, without a framework, the provision of specific techniques would be more difficult to understand and implement. Working without a framework is more akin to a cookbook, technically eclectic approach devoid of rationales for why certain interventions and strategies are supposed to work – a non-ideal way to expand one's competence efficiently. Without such a structural understanding, counselling psychologists will necessarily remain somewhat inflexible in their application of such knowledge and be hindered in introducing and thoughtfully incorporating traditional healing practices with their Punjabi Sikh clients.

First and foremost, this information will be useful to practitioners seeking to learn how best to incorporate traditional healing practices within culturally adapted counselling or psychotherapy for individuals of Punjabi Sikh descent – both those who have limited experience working with Punjabi Sikh individuals as well as those seeking to further develop or refine existing competence. Second, we expect that this information will also be useful for clinical supervisors overseeing trainees providing mental health services to Punjabi Sikh individuals and instructors teaching cross/multicultural counselling or psychotherapy classes. Concrete examples of specific interventions and strategies will be provided to further assist these stakeholders.

Because of (a) the inaccessibility of most peer-reviewed scholarly literature for practitioners disconnected from universities and (b) the time-consuming and prohibitive nature of conducting comprehensive reviews of literature by practitioners, we believe this review will be most welcome by counselling psychologists primarily involved in the provision of counselling services who are seeking to guide their evidence-based practice with Punjabi Sikh individuals. In addition, the open-access nature of these conference proceedings magnifies the potential impact of this article to practitioners Canada-wide and beyond.

Method

This narrative review, which followed procedures recommended by Ferrari (2015), sought out articles that referred specifically to models, theories, or frameworks for incorporating traditional healing practices into counselling or psychotherapy with individuals of Punjabi Sikh descent and distilled specific interventions and strategies outlined. The EBSCO PsycINFO® database was consulted using the following search terms: “counselling AND Sikh,” “counseling AND Sikh,” “psychotherapy AND Sikh,” and “therapy AND Sikh” and designated to be anywhere within the bibliographic record. A Google Scholar Search using the same terms followed.

Results

Upon review of abstracts and full-texts if needed, five articles were located that provided a formal framework for how to integrate elements of traditional healing into counselling and psychotherapy with Punjabi or Sikh individuals. These five were: “The Sikh Model of the Person, Suffering, and Healing: Implications for Counsellors” (Sandhu, 2004), “A Sikh Perspective on Life-Stress: Implications for Counselling” (Sandhu, 2005), “Intergenerational Communication in Immigrant Punjabi Families: Implications for Helping Professionals” (Nayar & Sandhu, 2006), “The Sikh Spiritual Model of Counselling” (Singh, 2008), and “A Sikh Perspective on Alcohol and Drugs: Implications for the Treatment of Punjabi-Sikh Patients” (Sandhu, 2009). Each framework will be summarized and suggested interventions and strategies will be outlined below in chronological order.

Sandhu (2004)

Sandhu (2004) described a Sikh model related to the person, suffering, and healing. According to this model, the multi-layered person is comprised of the spiritual core, consciousness, hidden record (i.e., unconscious), the mind, and the physical body. The ultimate form of suffering, according to Sikh spiritual tradition, is due to the human condition of transmigration. Transmigration results from an accumulation of behavioural consequences and external forces that are inscribed onto one’s hidden record. Becoming aware of one’s mortality is seen as the means to end suffering. Sandhu (2004) went on to note that both the Sikh scripture and Western existentialism are philosophical approaches to understanding human reality, rather than intervention-driven approaches. Due to this compatibility, he believed that existential theory provided a fitting psychotherapeutic framework from which to conduct counselling and psychotherapy with Punjabi Sikh clients.

Sandhu (2004) also provided a case vignette, situated in Canada, to illustrate how the Sikh spiritual traditions can be integrated with conventional counselling. Some specific interventions/strategies consistent with or incorporating traditional healing ideas or elements included in his case study with a Punjabi Sikh individual were: (a) empathizing with the client’s feeling about being born with bad “karma” and not challenging that her difficult life situation is part of her destiny and that she is bound by this, (b) discussing a particular Punjabi Sikh cultural story as an analogy for the client’s life situation, and (c) suggesting that the client attend the Sikh temple.

Sandhu (2005)

Sandhu (2005) outlined a framework for integrating the teachings of the Sikh religious perspective on life-stress with counselling and described a novel culturally-specific intervention. The

underlying foundation for the Sikh life-stress model is based on the path of the ego-oriented person. The ego desires to fulfill core human needs (i.e., security, love, respect, and freedom), which are pursued simultaneously. The fulfillment of these core needs is considered a natural process and can be pursued by the individual ego or the collective ego (e.g., family or religious sub-sect). However, obstacles, internal or external, can hinder the ego's ability to fulfill these core needs and, in the Sikh view, the ego-dominated personality deals with these obstacles habitually rather than insightfully, causing suffering. To address this, the life-stress model aims to educate clients about this cycle of suffering that affects a large proportion of humankind and how to thoughtfully cope and overcome it.

Sandhu (2005) suggested utilizing the following four steps when incorporating the Sikh life-stress model into counselling. First, the practitioner should provide empathy and communicate understanding. The practitioner should pay attention to non-verbal communication when empathizing with clients of Punjabi Sikh descent because non-verbal messages are usually considered much more credible, especially when they contradict verbal communication. Second, the practitioner introduces the life-stress activity, asks the client to share their views on the four core needs, how the individual meets those needs, and what obstacles block fulfilment of those needs. The client is then asked to explore the cognitive, emotional, and physiological responses to those obstacles, as well as maladaptive coping strategies. Third, any intervention can be used during or after the life-stress activity, as the counsellor deems necessary, to further promote the application of the insights gained through applying the life-stress model. Finally, the client is invited to complete the life-stress activity again and notice the changes from when it was done initially.

Sandhu (2005) demonstrated how the life-stress model can be utilized in a case vignette with an Indo-Canadian Sikh client. Culturally-consistent coping strategies promoted in this case study that involved or are highly consistent with Punjabi Sikh traditional healing methods or thought included: discussing the problem with others in a non-personalized abstract manner, normalizing the clients suffering related to the pressures of living in a traditional home, and using abstract art to help the client identify emotions by utilizing different colours, shapes, and patterns to express different feelings.

Nayar and Sandhu (2006)

Nayar and Sandhu (2006) described the different communication styles that often characterize the three generations of Punjabi Sikhs in Canada, providing suggestions for integrating traditional understandings into the work of mental health professionals. According to the authors, immigrant grandparents will often use collectivist statements with concrete phrases rather than affective or abstract language. Many older Punjabi Sikh clients will also often discuss their problems in an impersonal philosophical manner focused on the general human condition rather than in an individualized manner. When working with immigrant grandparents, the authors suggested catering to their oral tradition of communication to respect the client's historical role in providing guidance to others. Specific suggestions related to traditional healing included: incorporating cultural stories, life-review techniques, biographical storytelling, sharing folklore stories, and endorsing a mystical view of causality.

When working with immigrant parents and second-generation Punjabi Sikh Canadians, Nayar and Sandhu (2006) recommended matching their concrete interpersonal thinking and

communication style. This may include recognizing some individualistic desires within a collectivistic context and sharing objective facts. They proposed that immigrant parents may benefit more from and expect a directive teacher-student relationship, similar to traditional healers, where the professional provides concrete advice.

In contrast, children of immigrant Punjabi Sikh parents reasonably well acculturated to dominant Canadian Western norms may benefit more from insight techniques that still consider the client's familial communication styles. Nayar and Sandhu (2006) promoted utilizing brief, solution-focused, cognitive-behavioural, and life-skill strategies with Canadian-born Punjabi Sikh individuals due to their cultural congruence with the particular bicultural nature of the youngest generation of Punjabi Sikh Canadians.

In sum, Nayar and Sandhu (2006) emphasized the importance of attending to culturally directed and generationally bound communication patterns. Identifying the communication styles of each generation can be useful for guiding which types of traditional healing practices to consider incorporating with counselling.

Nayar and Sandhu (2006) also provided a short dialogue vignette with a Canadian Punjabi family representing three generations. The vignette displayed something that a Canadian counselling psychologist undertaking family counselling or psychotherapy with a Punjabi Sikh family would be likely to see: cultural conflict between immigrant South Asian parents and their children around individualistic and traditional values. The case study also demonstrated how differing communication styles can become a barrier between the generations.

Singh (2008)

Singh (2008) constructed a six-step hexagon model of Sikh Psychology. The six sides of the hexagon are: ego, self-realization, weakness (five vices), humility, strengths (five virtues), and meditation/spiritual liberation. In this model, the cause of mental disorder is primarily rooted in mental thought patterns. After providing psycho-education for the client, this model involves working with the individual's self-realizations to strengthen the five virtues of mental health (truth, contentment, patience, faith, and compassion) and minimize the five vices (lust, anger, greediness, attachment, and pride). The author suggested traditional healing interventions such as meditating to achieve a higher level of consciousness (1 to as the super-consciousness) and to relax the body and mind, spiritual meditation to become closer to God, and praying in the congregation as particularly beneficial interventions with Punjabi Sikhs.

Singh (2008) described how the hexagon model can be utilized in two case vignettes with Sikh clients. In the first case, the client becomes aware of how his ego has been hurt due to his financial struggles and how his vices, anger and greediness, are the causes of his poor mental health. Through strengthening his five virtues, accepting humility, and having faith in God, the client began regular meditation, stopped drinking, and ceased taking anti-depressants. In the second case, the counsellor helps the client understand how his ego has been threatened and how anger and pride are the two vices most negatively affecting him. Through anger management training, adopting humility, controlling his ego, and reducing stress through meditation, the conflict between the client and his wife subsided.

Sandhu (2009)

Sandhu (2009) presented a Sikh perspective on the cause of substance abuse (the path of the manmukh), the Punjabi historical traditions of substance use (e.g., alcohol use as a status symbol), the contradictions between this regional cultural system and the religious system, and how practitioners can utilize the Sikh scriptures to guide the client away from substance use. Specifically, the author suggested discussing the importance of the path of the gurmukh, which includes tackling the five barriers to self-actualization (i.e., lust, anger, greed, attachment, and the ego). In addition, he recommended that practitioners focus on existential issues such as suffering, despair, loneliness, lack of meaning, and death. In this article, Sandhu identified existential counselling as one of the best-suited approaches of the Western psychotherapeutic theories when working with Sikh clients due to its many similarities with the teachings of the Sikh religious scriptures. The specific interventions Sandhu recommended, all of which are religious or traditional healing interventions that can be readily included within the counselling process, were: reading the Sikh holy book, helping the client reaffirm their commitment to the Sikh religion (e.g., visiting a gurdwara or recitation of sacred texts), and suggesting and supporting the client in practicing the Sikh religion with more dedication. Moreover, Sandhu suggested incorporating traditional Sikh healing recourses through consultation with trained Sikh clinicians and Sikh religious organizations. Sandhu also recommended offering practical solutions and concrete advice, which he stated align well with existing Punjabi Sikh traditional healing practices.

In a case study, Sandhu (2009) illustrated these practices with a Punjabi Sikh client who was experiencing shame due to his drinking. The client was relieved when the counsellor told him that the Sikh worldview promotes the renouncing of one's ego and encourages separating oneself from their actions. The counsellor then discussed the path of manmukh to help the client understand their alcohol use and the path of gurmukh to support the client's recovery. While this case study incorporated the Sikh perspective in counselling, Sandhu provided some caveats. First, practitioners should not assume that a Punjabi client who refers to themselves as Sikh is familiar with the Sikh worldview. Second, practitioners must be aware of generational and gender differences in regards to the Sikh perspective (for example, see Nayar & Sandhu, 2006). Different traditional healing interventions may be more beneficial and well-suited for different generations.

Discussion

Culturally adapted counselling and psychotherapy should be central to the work of many mental health professionals, yet it is often difficult to find reputable systematic guidance about working with specific ethnic minority groups that can be readily utilized by a practitioner. To help address the counselling and psychotherapy needs of Punjabi Sikh individuals, a growing ethnic community in Canada, counselling psychologists should endeavour to incorporate traditional healing practices into culturally adapted counselling and psychotherapy with Punjabi Sikh clients. This paper sets out to summarize frameworks for integrating traditional healing practices counselling and psychotherapy with Punjabi Sikhs and provide samples of specific interventions and strategies to use within these frameworks.

In synthesizing the five articles located in this review: when working with Punjabi Sikh clients, it is important to be aware of and work with religious and spiritual beliefs as this group has high rates of religiosity and frequently brings up religion in counselling sessions spontaneously (Dhillon

& Ubhi, 2003; Hussain & Cochrane, 2002). In each of the case studies presented, the client's religion/spirituality was a central component of the therapeutic approach. Discussions related to religion and religious texts, as a way to conceptualize the client's issue and help clients understand their reality, was commonly demonstrated and encouraged by the authors of the reviewed articles. Further, fostering the client's connection to their religion and spirituality was a prominent theme throughout virtually all the case studies included within articles reviewed in this paper. Moreover, the importance of being close to God was frequently mentioned in the suggested interventions (e.g., spiritual meditation, reading the Sikh holy book, and practicing the Sikh religion with more dedication). In sum, working with the Sikh religion explicitly in counselling and psychotherapy is encouraged in this literature and supported by the case studies that accompany it more so than any other type of traditional healing practice. As such, practitioners providing mental health services to Punjabi Sikh individuals should seriously consider incorporating religious material when appropriate and be prepared for clients to bring up religious content or relate religion to their current situation throughout the therapeutic process.

In addition to religious interventions, when taken together, the reviewed articles provided higher order guidance on how to incorporate Punjabi Sikh traditional healing elements into counselling and psychotherapy. Many of the articles discussed working more holistically with the different parts of a person, such as the spiritual core, the mind, body, ego, and hidden record, for example. This duality, working with both the component parts of the person and a holistic representation appears to be a welcome intervention consistent with traditional Punjabi Sikh thought. The authors of the frameworks identified in this narrative review specifically suggest utilizing traditional practises such as cultural stories, folklore stories, life-reviews, and a mystical view of causality (the latter especially for grandparents who migrated from India). Due to their cultural conditioning, many less Westernized Punjabi Sikh clients prefer to discuss their issues in an impersonal philosophical manner, so using analogies related to cultural or folklore stories can be useful for facilitating difficult discussions (Bedi & Domene, 2015; Nayar & Sandhu, 2006). In sum, due to the utility of Punjabi Sikh traditional healing practices to help clients understand and work through their problems, it is suggested that counselling psychologists incorporate traditional healing practices, such as the ones presented here, into counselling and psychotherapy. The articles reviewed here did not suggest any barriers due to the ethno-cultural background of the practitioner in providing culturally adapted counselling and psychotherapy with Punjabi Sikh clients, including integrating elements of traditional healing.

Practitioners who are relatively unfamiliar with the Punjabi culture or the Sikh religion but wish to incorporate traditional healing elements into their work should first seek out background knowledge in order to gain a greater understanding of the Punjabi culture and Sikh religion. Abbreviated and accessible discussions most pertinent to counselling psychologists are available in Ahluwalia and Alimchandani (2013) along with each of the five summarized articles.

In implementing the suggestions provided in this review for clinicians who are not Punjabi or Sikh themselves and do not have extensive experience with this population, assuming the practitioner has reasonable familiarity with the culture and religion, we recommend that the counselling psychologist come from a place of transparency, invitation, and curiosity with the client. Rather than expect to be the expert, the practitioner can admit to limited understanding, use the client as a guide to judging relevance of particular strategies, and collaborate on integrating traditional healing thoughts and practices. Further benefit can be gained by reviewing the English-

translated Sikh scriptures, consulting Sikh religious figures, and consulting or seeking supervision from clinicians with more experience and expertise working with Punjabi Sikh clients.

Limitations

It is hoped that this narrative review will be helpful for practitioners, supervisors, and course instructors wanting to learn more about integrating culturally adapted interventions related to traditional healing when working with Punjabi Sikhs. However, some caveats are worth mentioning. First, this narrative review only looked at information that was indexed in PsycINFO and Google Scholar, which are primarily in English but do index worldwide literature to some limited extent. It is expected that there is other relevant literature not available through these bibliographic platforms, particularly that which is non-English. Therefore, more framework literature is potentially available, some of which will only be accessible to non-English speakers. Second, because all of the located articles are in the context of clients outside of India (coincidentally, the majority of case studies were with clients in Canada), the guidance provided in this particular article for counselling and psychotherapy with Punjabi Sikhs is inevitably interlaced with issues of acculturation, immigration, and ethnic minority identity development. Thus, one must more carefully apply this information to Punjabi Sikhs who reside in India. Third, the conclusions presented in this paper are disproportionately based on the ideas and experiences of a well-meaning and pioneering author, Mr. Jaswinder Sandhu. It is hoped that this article and its communication of the deficit of literature encourages more scholarly writing and some empirical research on counselling and psychotherapy processes with Punjabi Sikhs, especially those relevant to integrating traditional healing practices. Fourth, this article only provides some guidance and over-simplified recommendations for working with this group. It is suggested that practitioners attempting to apply this information remain aware of individual differences and use the information contained in this article as clinical hypotheses and remain flexible in the timing and appropriateness for each Punjabi Sikh client.

Future Research

Future reviews should expand into databases other than PsycINFO and Google Scholar, such as Medline, to locate more literature. In addition, given that the vast majority of the world's Punjabi Sikh individuals still reside in the state of Punjab in India (Office of the Registrar General and Census Commissioner, India, 2011), future reviews should examine India-specific bibliographic databases (such as Shodganga) in order to locate additional literature (Schlosser, 2007). Noting that much of the supportive evidence for these frameworks and requisite interventions and strategies is anecdotal and case study report based, the proposed strategies and interventions should be subject to research investigations and further clinically tested by practitioners to further increase confidence in their application and delineate more specific conditions for their application.

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Promoting Reflexivity and Reflectivity in Counselling, Education, and Research

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Abstract

Though reflectivity and reflexivity are often perceived as similar concepts with overlaps they both have variations and need to be understood as unique constructs with different manifestations within the field of counselling psychology. Both terms are relevant to the counselling profession; they play a role in how we as counselling psychologists promote and maintain culturally-appropriate interactions with diverse clients. The aim of this paper is to recommend that it is incumbent for us as counselling professionals to engage in reflective and reflexive practices to ensure that we are working in the best interest of everyone we engage with. With the understanding that both concepts are critical components of being ethical, responsive and active in our professional stance, we as counselling psychologists¹ are encouraged to use reflection and reflexivity to develop a good understanding of themselves and our identities inside and outside of the counselling context. It is hoped that this paper will enable the audience to generate meaningful discussions about practical ways to promote consciousness-raising around reflective and reflexive practices; particularly, as we strive to facilitate change in a supportive and safe environment when working within and across various social-cultural and historical contexts.

Keywords

reflectivity, reflexivity, counselling psychology, social justice, social construction

Reflective and reflexive practices are central skills for counsellors, and are therefore essential to the profession of counselling psychology. For this paper, *reflectivity* refers to be the “use of personal values, experiences, and habits to make meaning and is a central tenet of [inquiry-based learning approach]” (Wilhelm, 2013, p. 57) to process multiple perspectives and to solve problems in complex situations (Young, Lambie, Hutchinson, & Thurston-Dyer, 2011). Conversely, *reflexivity* describes “a practice of observing and locating one's self as a knower within certain cultural and sociohistorical contexts; [it] leads to self-awareness, scholarly accountability, and recognition of a range of human truths” (Sinacore, Blaisure, Justin, Healy, & Brawer, 1999, p.

¹ For consistency in this paper, the authors will use the terms counselling psychologists, practitioners, and counsellors interchangeably.

267). Both concepts are relevant within the field of counselling psychology as we take a critical stance in the work that we do and our intentional actions as counselling psychologists. Here, *counselling psychology* is viewed as a “broad specialization within professional psychology that is concerned with using psychological principles to enhance and promote positive growth and mental health of individuals, families, and the broader community” (Canadian Psychological Association [CPA], 2009, para. 1). Drawing from this inclusive view, counselling psychologists have a responsibility to bring a collaborative, developmental, multicultural, and holistic wellness perspective to their teaching, research and practice, to facilitate change at the micro, meso, and macro levels of society (Arthur & Collins, 2010).

Given the above definitions, engagement in both reflective and reflexive practices can better position us as practitioners to be able to promote and maintain culturally-appropriate interactions with our clients at a relational level (Fook, 2002). In so doing we have the capability to deepen our knowledge-base, culturally-responsiveness, and socially-just inquiries that can lead to better working alliance with clients (Arthur, 2019; Laitila & Oranen, 2013). Such practices also create a safe and collaborative space for consideration to be given to the integration of social justice and advocacy initiatives in our work with diverse clients (Arthur, 2019).

In this paper, the authors adopt a collaborative stance in addressing the concepts of reflectivity and reflexivity. To start, we will position reflectivity and reflexivity within a social constructionist framework as the theoretical grounding for these key concepts. Next, we provide an in-depth conceptualization of reflectivity and reflexivity within the context of counselling psychology. This will be followed by the effective roles these terms play in counsellor education. Then, we address the growing need for reflective and reflexive processes in research. Next, attention will be given to the infusing of reflectivity and reflexivity in social justice and advocacy work through a case study illustration. Key implications for counselling, teaching, and research are highlighted. We conclude with ethical considerations in our roles and responsibilities as reflective and reflexive counsellors, educators, and researchers.

Positioning Reflectivity and Reflexivity in a Social Constructionist Framework

The term *social construction* was firstly introduced to the field of psychology by Gergen (1985). The basic assumptions of social construction include that there are multiple truths, which are socially constructed and co-constructed (Gergen, 1985). Based on this perspective, social constructionist scholars emphasize individuals’ meaning-making process and challenge their “taken-for-granted” truths (Gergen, 1985, 2009). Integral to this process is the use of language in how we as unique and diverse individuals construct, deconstruct, reconstruct, and co-construct knowledge based on our lived experiences (McNamee, 2004). According to Prochaska and Norcross (2014), we can be viewed as agents who can make social justice and culturally-informed changes in how we deconstruct and reconstruct our subjective realities through language and social engagement with others. Further, as reflective and reflexive beings who value multiple understandings, we have the potential to view misinterpretation of meanings in our work as likely the ambiguity of the human experience (Gergen & Wortham, 2001). As counsellors, we can also negotiate meaning within the therapeutic process through the collaborative co-construction of realities with our clients (Gergen, 2009). This co-creation of meaning invites us to be respectful, optimistic, holistic, reflective, and reflexive in how we interact with our clients.

From this perspective, the authors support the collaborative position that we should act as our clients' accountability ally in working *with* them and not *for* them (Madsen, 1999, p. 21). As social constructionists, we believe that embracing this position enables us to take a non-expert stance and create space for cross-cultural dialogues with clients. Also, by engaging in reflective and reflexive practices, we can help our clients develop a sense of agency and empowerment to facilitate their own change. In this role of active engagement, we should strive to consider the construction and application of knowledge in socio-cultural, political, and historical contexts (Gergen, 1985). Within the social constructionist framework, knowledge is constructed and not discovered; it is also not universal or objective but rather subjective interpretations of our lived experiences (McNamee, 2004; Raskin, 2002). From this standpoint, we are encouraged to reflect on the complexity of the human experience and the value-laden processes of our approach to knowing that our social environments tend to limit, shape, create and reflect reality, and thus influencing the choices we make in constructing our worldviews (Galbin, 2014).

Another important point to note when addressing this framework is that from a socio-political standpoint, power structures within society dictate what is normal and abnormal (Gergen & Wortham, 2001). At the societal level, we as counselling psychologists who might adapt a social constructionist theoretical framework to inform our work with clients, are gently reminded to respect and value the lived experiences of the individuals with whom we engage (McNamee, 2004). Quite often, people in power are likely to impose ways of being and existing upon people who have less power. This means that as counsellors, educators, and researchers, we need to be mindful of our responsibility to challenge the status quo in our reflexive and reflective practices. In so doing, we are able to reflect on our own biases, assumptions, and values in order to determine how they might impact our research, teaching, and practice. In this vein, the authors support Cushman's (1995) perspective that it is the cultural interplay of our language, moral understandings, institutional arrangements of power and privilege, constructed narratives, and social engagements that complete us as human beings. We posit that through critical reflection and reflexivity, we can work mutually with diverse clients to change our personal interpretation and meaning of realities, given our unique and multiple experiences in the areas of counselling.

Infusing Reflectivity and Reflexivity in Counselling

Reflective practice is considered to be a critical component of culturally competent counselling (Collins, Arthur, & Wong-Wylie, 2010). As counsellors, we are encouraged to use reflectivity to develop a good understanding of ourselves and our identities to become more self-aware of how we engage with others. This means that we should "first activate prior reflections, then confront and build on prior experiences and knowledge" in the counselling process (Wilhelm, 2013, p. 57). The counsellor-client relationship can be better understood through reflections on our worldviews, which invites curiosity and non-judgment when working with diverse clients (Paré, 2013). This dynamic calls for us as practitioners to explore our assumptions, values, and biases that are often influenced by our multiplicity of worldviews (D'Cruz, Gillingham, & Melendez, 2005). It is also suggested that reflection-in-action must occur during sessions with various clients to maintain culturally-appropriate interactions (Collins et al., 2010). As counsellors who see value in embracing an *emic* worldview that considers "culturally-specific" perspective within group versus an *etic* perspective that is "culturally-universal" and embraces an outsider's

viewpoint (Sue & Sue, 2016, p. 41). We support Collins et al.'s (2010) position that increasing one's knowledge and skills is not enough for competent practice, but that as counsellors we must engage in continuous reflection in the context of our relationship with a wide range of clients.

Additionally, counsellor reflexivity should be considered within the context of ensuring cultural competency in the therapeutic relationship. Such consideration requires us as counsellors to examine our clients' (and others') assumptions, values, and worldviews in relation to how we interact with them (Cunliffe, 2016). This involves a critical analysis of our collaborative roles in counselling where we join with our clients and help them develop their competencies about cultural diversity. As such, the authors argue that reflexivity in practice is a significant component of being an ethical, responsive, and responsible practitioner (Cunliffe, 2016). We also support Collins et al. (2010) that a key aspect of reflexive practice is the opportunity for counsellors to be mindful of external factors and how these factors might directly and/or indirectly influence the counsellor-client relationship. These factors include, but are not limited to socio-cultural issues, historical contexts, language, and social justice concerns like educational, economic and social mobility inequalities, which can impact policy-making initiatives for oppressed and non-dominant groups in our society (Collins et al., 2010). Later in the paper, we will expand on the topic of social justice. In addition to counselling, the concepts of reflectivity and reflexivity are becoming increasingly prevalent in counsellor education discourse (Laitila & Oranen, 2013). Below, we argue that this prevalence is important in our professional identities as counsellor educators to help us function as change agents in our work with students.

Integrating Reflectivity and Reflexivity in Counsellor Education

Reflectivity and reflexivity are essential to counsellor education (Laitila & Oranen, 2013). As counsellor educators, it is important for us to adopt a reflective and reflexive stance in our work with graduate students (also referred to as trainees) in order to help them generate deeper insights into their learning. We argue that to encourage true reflection and reflexivity, counsellor education must be individualized where trainees are given the opportunity to identify their learning needs and focus on enhancing their own identified areas of competencies (Laitila & Oranen, 2013). One constant reminder for us as counsellor educators is to integrate reflectivity and reflexivity in our work with trainees to ensure that they are able to develop their professional identities in an emotionally safe and respectful environment (Luft & Roughley, 2016). For counsellor educators, this might mean modelling behaviours like self-compassion with our trainees to help them develop their self-awareness, and self-acceptance skills. *Self-compassion*, a concept coined by the researcher Dr. Kristin Neff, "involves responding to our difficult thoughts and feelings with kindness, sympathy, and understanding so that we soothe and comfort ourselves when we're hurting" (Neff, n.d., para. 1). By practicing these skills, we believe that trainees will be better able to engage in self-care strategies to make them more engaged and functional in their pedagogical learning.

According to Luft and Roughley (2016), cultivating a welcoming and collaborative space for graduate students will encourage them not only to feel empowered but also allow them to become critical thinkers in their reflexive practices. Sinacore and colleagues' (1999) work with students who have taken counselling and psychology courses support the above authors' position. Sinacore et al. (1999) highlight seven key strategies that can help to promote reflexivity in the classroom.

They briefly include the following: a) clearly stating goals in course objectives for using reflexivity; b) integrating readings on reflexivity in course content and materials to enhance student learning; c) modelling by acknowledging and explaining how our personal and professional history as counsellor educators might influence our teaching style and choices; d) invite speakers from diverse backgrounds (e.g., women with disabilities, ethnic minority women, gay men and lesbians, women from various religions, etc.) to include their voices by speaking about their experiences to offer students a solid source of knowledge; e) develop reflexivity in class discussions by having “students practice articulating and clarifying what professional and personal knowledge guides their understanding of peoples’ lives, including their own” (p. 268); f) creating assignments for students that encourage reflective practice such as giving them the opportunity to interview someone of a different race, class, religion and socio-economic status; and g) work collaboratively with students to develop grading systems that are congruent with the goals of the course that incorporate reflexive learning. The above strategies offer creative ways for counsellor educators to empower students to have self-agency in their learning.

Further, we believe that trainees will be encouraged to take risks in generating novel and innovative ideas, which are required for reflective and reflexive learning, growth, and development. Another practical strategy that can be used in counsellor education to help augment trainees’ learning in reflective and reflexive practices is creating the opportunity for them to engage in journaling (Luft & Roughley, 2016). The act of writing and reflecting on one’s and others’ feelings can stimulate deeper reflexivity for many students (Dixon, 2018). For example, through journaling, some trainees might begin to realize that their personal autonomy is dependent on their responsible actions, and the quality of the social relationships which are enhanced through interactions with others (Fook, 1999). Also, another useful exercise for students could be having them complete reflective/reflexive papers where they are challenged to become critical thinkers in their own graduate education learning (Wong-Wylie, 2008) and professional identity development (Luft & Roughley, 2016).

By partaking in the strategies outlined above, the authors’ perspectives correspond with Andersen’s idea (1991) that the development of reflectivity and reflexivity is influenced by both trainees’ outer dialogues with us as educators, and inner dialogues with themselves. In this way, learning is multi-dimensional and requires a more individualized approach which can motivate trainees to evaluate their skills, performances and needs, and receive tailored training according to these evaluations (Laitila & Oranen, 2013; Shaw, 2010). By joining with our trainees in their learning, as counsellor educators, we can observe them in their educational contexts and have a better understanding of how they construct their realities. Aside from counsellor education, the concepts of reflectivity and reflexivity are also applicable in the research context, and as such will be addressed below.

Creating Space for Reflectivity and Reflexivity in Research

Over the years, the need for reflective and reflexive practices in the field of research, particularly quantitative studies, has become a point of contention among various scholars (Attia & Edge, 2017; Mortari, 2015; Walker, Read, & Priest, 2013). From this perspective, we point to the philosophical polarizations that exist between quantitative and qualitative research methodologies,

which likely accounts for the limitation of reflective and reflexive practices within quantitative studies (Walker et al., 2013). Here, the authors briefly highlight three common research domains with the understanding that many more are prevalent in the field of research: experimental / positivism, postmodern social constructionism, and pragmatism (Crotty, 1998; Easterby-Smith, Thorpe, & Jackson, 2012; Scotland, 2012). First, the school of thought that tends to govern quantitative research is experimental / positivism. Positivists believe that there is a single objective reality, which can be measured and tested with the use of quantifiable tools (Crotty, 1998). Secondly, qualitative research tends to align with a postmodern social constructionist framework that accepts multiple truths and realities (Waller, Farquharson, & Dempsey, 2015). Such realities are subject to interpretations, and therefore are more likely to be explored using qualitative methods. Lastly, mixed methods adopt a more pragmatist approach with the emphasis that reality is constantly renegotiated, debated, interpreted, and as such the most effective method is the one that addresses the phenomenon been studied (Scotland, 2012).

Given the subjective nature of reflexivity and reflectivity, these concepts appear to be mainly practiced in qualitative research, where it is used to legitimate and validate research procedures (Mortari, 2015). Below, we will provide a rationale for the effectiveness of reflectivity and reflexivity in qualitative research, with which it is primarily associated. We will also address the value of these terms in quantitative studies, especially in mixed-methods research (Walker et al., 2013).

To start, the practices of reflectivity and reflexivity are valuable mental activities in both our private and professional lives (Mortari, 2015). As such, learning the benefits of both concepts are fundamental for researchers because they allow us to engage in thought-provoking dialogues and rich narratives with participants in a safe space without judgment (Fook, 1996, 1999). In the research field, reflection is considered a vital cognitive practice (Mortari, 2015). Further, in qualitative studies, reflection can be used to evaluate processes, results and how the research evolves, while reflexivity examines the socio-cultural and historical contexts of the the research and one's own interpretation of these influences in the research process (Roulston, 2016; Sinacore et al., 1999). Shaw (2010) explains that reflection in research is concerned with the research process, verification, and ensuring that measures are taken to accurately document participants' accounts of reality. Alternatively, reflexivity acknowledges the researcher's role in observing and positioning him/herself as a knower within certain cultural and sociohistorical contexts within the study (Sinacore et al., 1999; Wilhelm, 2013) and the co-constructed interpretations of this reality between the researcher and participants (Shaw, 2010). We also support Hsiung's (2010) view that reflexivity holds much significance in the qualitative domain as the process of examining both oneself as a researcher, and the research process.

Based on the above positions, we argue that by being aware of one's role, the researcher can address implications and be mindful about how they influence the research process. More so, building on the understanding that analysis of participants' accounts is not enough to provide accurate results, as researchers we need to analyze our own lived realities and determine how they might or might not influence the research outcome. Our position is strengthened by Roulston (2016) who postulates that being reflective about one's own role as a researcher and being reflexive about the experiences of our participants' socio-cultural and historical contexts can provide valuable information to increase research accuracy and contribute to knowledge of effective

qualitative research methods. As researchers, reflectivity can take the form of journaling about our biases, values, and assumptions during the research process (Leech & Onwuegbuzie, 2009; Yvonne Feilzer, 2010). Bringing these issues to the forefront can likely help us to accurately identify limitations in our research findings and possible ways to address these issues in future investigations (Dixon, 2015).

Additionally, one way to ensure that we are being reflexive in our research practice is to intentionally review transcripts to ensure that participants' voices are being validated and are true representations of their socio-cultural and historical experiences (Wong-Wylie, 2008). Research can take this reflexive process a step further by having participants review their stories to ensure that the inclusion of their voices is heard, and their experiences are not dismissed or minimized. This way, the participants have the agency to re-construct, re-evaluate, and reframe their narratives to fit their experiences if they see the need to do so (Dixon, 2015). To illustrate the utilization of both reflectivity and reflexivity in qualitative research, the first author² makes reference to her work that used a qualitative methodology known as heuristic inquiry (Dixon, 2015). Developed by Moustakas (1990), *heuristic inquiry* is a unique approach that attempts to discover the meaning and the essence of the unique human experiences through the process of reflection, reflexivity, exploration, and elucidation of the nature of the phenomenon being studied (Douglass & Moustakas, 1985). My research explored the reconstruction process of Jamaican Canadian immigrant women who used faith to cope with post-migration life stressors like racism and unemployment. As a researcher, I was able to integrate my story alongside the other co-researchers³. Utilizing critical reflectivity (Kondrat, 1999), I was able to acknowledge through journaling that I was both affected and being affected by my new socio-cultural contexts and geographical location, which in turn influenced my lived experiences as an immigrant in Canada.

Additionally, by engaging in reflexive practice, I became painfully aware of the common stories shared with me by my co-researchers of how they made meaning through their faith. According to these women, their faith helped them to cope with post-migration challenges amid adverse circumstances (Dixon, 2015). As a reflexive researcher, I privileged the perspectives and values of my co-researchers (Wilhelm, 2013) within their Canadian cultural and socio-historical contexts. In my reflexive role, I came to the understanding that in creating a safe space for the co-researchers to share their stories, I was supporting their reconstructed realities in meaningful ways (Sinacore et al., 1999). The integration of reflective and reflexive practices in my study allowed me to deepen my knowledge and foster a better understanding of both concepts. I also displayed transparency and empathy to my co-researchers while valuing their narratives and reducing the power imbalance that often exists in research contexts (Dixon, 2014). This form of power imbalance between researchers and participants is often prevalent in quantitative research due to its objective nature that tends to reject data that are considered subjective (Dixon, 2014).

It should be noted that in scoping the social science literature, there is a dearth of quantitative research that addressed the concepts reflexivity and reflectivity. These concepts appeared only in a few mixed methods studies (Leech & Onwuegbuzie, 2009; Walker et al., 2013; Yvonne Feilzer,

² As heuristic inquiry requires the researcher to integrate his/her voice in the study, I will use the first person because it aligns with this approach.

³ In heuristic inquiry, participants are referred to as co-researchers because both parties share common experiences and there is no power imbalance between them.

2010). To align with the literature, the primary focus will be given to reflexivity and reflectivity in mixed method approaches. Regarding quantitative research, the argument is often made that the utilization of reflectivity and reflexivity in this scope of investigation might limit its objective nature (Walker et al., 2013). However, this traditional way of thinking has been criticized by recent scholars who posit that using a mixed-methods approach can allow for the meaningful incorporation of reflectivity and reflexivity (Attia & Edge, 2017; Waller et al., 2015).

To illustrate, Walker et al. (2013) used a reflective research diary in their grounded theory's mixed-methods study that conducted a retrospective audit of 150 hospice case notes. The authors did not clearly identify the quantitative method used in the study but indicated that data were extracted from the "hospice case notes and transferred to a data capture form, which served as the data collecting instrument, with the first researcher acting as a technician" (Walker et al., 2013, p. 39). In terms of reflexive practice within the study, the authors reported that they kept a detailed history of the research process to critically reflect on their thoughts, feelings, and observations about interactions with staff and data. This form of reflexive practice supports Finlay's (2002) position that the reflexive process allows researchers to engage in explicit self-aware analysis of their roles. The outcome of this mixed-methods investigation supports the claim that reflexivity allows for critical analysis of the data, and as such challenges researchers' understanding and development of the research process in a meaningful and transformative way (Finlay 2002; Walker et al., 2013). In the same vein, reflective and reflexive practices have shown great importance in the social justice domain because they create space for meaningful discussion about advocacy and activism work.

Relevance of Reflectivity and Reflexivity for Social Justice

For many years, the philosophy and conceptualization of social justice have been discussed across academic disciplines without any concrete resolution (Arthur & Collins, 2014; Reisch, 2002; Thrift & Sugarman, 2019). In fact, recent discussions of social justice and social advocacy work in the counselling psychology literature have noted that the concept is often difficult to define and is commonly misunderstood as a taken for granted term that has varying interpretation (Arthur & Collins, 2014; Thrift & Sugarman, 2019). With this contention in mind, the authors borrow from the works of various scholars to provide an inclusive definition of social justice. We propose that *social justice* includes a fundamental valuing of fairness and equity of all groups in a society that is mutually shaped to address their collective needs in a safe and secure manner (Arthur & Collins, 2014; Bell, 1997). In line with this definition, we reason that at the heart of social justice is a need for critical reflection and reflexivity ranging from an individual practice skill to a force for social change (Fook, 2002; Kondrat, 1999). Examining social justice through a critical reflective and reflexive lens require us as counselling professionals to consider a paradigm shift in our attitudes, beliefs, and assumptions about justice and injustice (Arthur & Collins, 2014). Thus, being advocates for marginalized groups and giving them voice are important elements of social justice and social change practices, which are salient aspects of our professional identity (Arthur & Collins, 2014). Further, social justice can be practiced at three levels: individual, communal, and societal (Ratts, DeKruyf, & Chen-Hayes, 2007). For the purpose of this article, the authors focused on the "individual level", which means that we view counselling psychologists' reflective and reflexive practices as the starting point to facilitate social justice and advocacy work. We further acknowledge that changing societal injustice is the ultimate goal of social justice.

According to Collins and Arthur (2017), practicing social justice at the above individual level requires counselling educators to start with “conversation” in the context of teaching and training, which could facilitate counselling trainees and practitioners to reflect on their own social locations. This means that as counsellors, educators, and researchers, we need to be intentional in reflecting on the intersectionality of our own identities and evaluate how they might impact our work with diverse individuals. For instance, being socially mindful of our identities like race, social economic status (SES), gender, sexual orientation, faith, and ability within Canada can help us come to terms with our taken-for-granted privileges. For some of us, the examination of such identities might bring to our awareness feelings of oppression and being othered as members of a non-dominant group within a multicultural context. Regardless of our social location, reflecting on our own privileges and experiences of oppression can be challenging, and at times can create tension between counsellors and clients, educators and trainees, as well as researchers and participants (Luft & Roughley, 2016). We contend that cultivating a collaborative and respectful relationship between the above parties can prompt reflective questions about social justice. Also, we believe that the exploration of social justice issues through reflection can help to facilitate change as we recognize how our worldviews might inadvertently influence our privileges and/or oppressions based on our social locations.

The authors argue that reflectivity focuses on thinking dimension (i.e., awareness), while reflexivity emphasizes on action dimension (i.e., practice). Compared to reflectivity, reflexivity has a critical underpinning in that it allows practitioners to transfer knowledge into professional actions (Fook, 2002). In the context of social justice practice, reflexivity can be considered as the ability to apply reflective skills to one’s socio-political and historical locations in his/her professional learning and practice (Sinacore et al., 1999). To illustrate, let us consider the case of a trainee under supervision: biological male, European descent, working-class, heterosexual, cisgender, the preferred gender pronoun “his/him”, and abled-body. Given the opportunity to engage in reflection on his own privileges and oppression in relation to his social locations, he might recognize that his biological sex, gender, and sexual orientation have brought him access to privileges and opportunities to grow as a “traditional man”. However, his low SES has forced him to put his education on hold because he needed to work several jobs at the same time to afford his professional development. Based on his reflection on privileges and oppression, his reflexive practice might focus on “how” he utilizes these reflections into his own learning and lived experiences.

Within the context of professional learning, the supervisor might draw from the work of social constructionist scholars (e.g., Gergen, 2009; White & Epston, 1990) by using the externalization strategy. For example, when working with the supervisee seeing the above male client, the supervisor might ask the trainee whether or not the client views the presenting issue as the problem and not himself as the problem based on his social location. Utilizing this strategy with the trainee might be empowering for him to engage in further reflections and reflexivity about his social locations. Also, joining with the trainee, the supervisor might tentatively invite him to engage in journaling and/or incorporating more readings into his repertoire about socioeconomic disparity. These activities might stimulate the trainee’s awareness about the intersectionality between gender, social class, education, and SES, and how the interplay of these variables has influenced his social locations and cultural worldviews.

Furthering the dialogue in the context of professional practice and training, this trainee might be working with a lesbian client during his practicum, who is coming from a middle-class background, with a presenting issue of “feeling unmotivated” about her life. In this case, the trainee needs to be aware of the cultural differences of sexual orientation and SES between himself and the client. Additionally, he needs to be sensitive about what his thoughts and feelings are around these differences and how they might influence his ability to understand the client and emphasize with her situation. Further, to strengthen the working alliance, it might be beneficial for the trainee to be transparent about being a privileged heterosexual male and check in with the client about how his identified gender might create some discomfort for her. If the client responded that the trainee’s (counsellor) cisgender and other privileges made her uncomfortable, the trainee could demonstrate appreciation for the client’s response and acknowledge his own privileges and make efforts to avoid the obstacles of these privileges in their collaboration and conversations during counselling. Such openness from the trainee might create trust for the client and allow her to feel more comfortable discussing her sexual orientation and experiences of oppression in a safe space.

Thus, the trainee can take an affirmative position to gender and sexual orientation diversity and have more meaningful, nonjudgmental and compassionate conversations with the client. Of importance is the fact that working from a social constructionist framework also creates relational space for both the trainee and client to have these socially-informed conversations about her sexual orientation and experiences of oppression (Wulff & St. George, 2017). To this end, we argue that continuous engagement in reflections for us as professionals is likely to stimulate critical reflexivity, consciousness-raising, and intentional change that is action-oriented and socially-motivated. Furthermore, supervisors need to reflect on their own privileges and oppression related to social locations and be mindful about how these factors are likely to impact the supervisory relationship.

Implications for Counselling Education, Practice, and Research

Reflective and reflexive practices are key dimensions to the professional advancement of the counselling community on a whole. In support of this stance, Ratts, Singh, Nassar-McMillan, Butler, and McCullough (2015) indicate that practitioners’ self-awareness has been integral to the counselling profession, particularly in the development of their multicultural and social justice competencies. In this vein, the following implications for counselling education, practice, and research are warranted.

To start, counselling education adds fundamental value to the growth of the counselling profession. Several scholars have discussed counselling pedagogical approaches and the need to shift to feminist and multicultural pedagogy, in order to address more critical reflectivity and reflexivity of counsellors’ awareness and advocacy during counselling teaching and training (Enns & Forrest, 2005; Enns, Sinacore, Ancis, & Phillips, 2004). Additionally, numerous researchers have proposed a scientist-practitioner-advocate model (SPA model) to emphasize counsellors’ social responsibility in counselling professional work (Fassinger & O’Brien, 2000; Mallinckrodt, Miles, & Levy, 2014). As reflectivity and reflexivity are well encouraged in the educator-trainee relationship, counsellor educators are gently challenged to enhance their competency by

incorporating a social constructionist pedagogy (Gergen & Wortham, 2001). This pedagogical framework stresses both relationship and dialogue and considers education to be a relational process, which can be employed as a guide to facilitate future counsellors' reflectivity and reflexivity. Additionally, Laitila and Oranen (2013) proposed a training model, Developing Professional Practice (DPP), which is more tailored towards counsellor training. DPP is a five-phased training model, aiming to facilitate trainees' reflexivity on their professional practices by initiating reflection questions and asking them to respond in everyday and professional language (Laitila & Oranea, 2013). This model can be effective in supporting future counsellors to develop good reflective and reflexive skills that are critical for social justice and advocacy work.

Secondly, within the counselling process, counsellors have an ethical responsibility to provide an environment where clients feel safe, heard, and validated (Savickas, 2016). Based on the rapport and collaborative relationship between the counsellor and client, the counsellor can facilitate the client's awareness of his/ her situation (i.e., reflectivity) and actions based on his/her awareness (i.e., reflexivity) by prompting reflective questions, echoing the client's words, or requesting clarification (Guichard, 2016). For example, the counsellor could ask the client: "*What do you think of this situation where you have been feeling excluded in relation to your gender?*". Counsellors could use this question in future practice to guide clients' awareness about their situations and social locations.

Thirdly, counselling researchers' reflectivity and reflexivity are strongly connected to their integrality as scholars whose studies are ethically-based to demonstrate general respect to participants and the research process (CPA, 2014). Thus, counselling researchers' ability to engage in reflectivity and reflexivity is essential to conducting research regardless of the selected methodology being utilized. For qualitative researchers, ongoing reflecting on their own social locations and how these positionalities might influence the research process correspond to the concept of "epoché" from Husserlian phenomenology (Creswell, 2013). This means that researchers need to be aware of their own pre-concepts of the research topics, which are often related to their own lived experiences. By monitoring and managing the influence of their pre-concepts during the research process, researchers will be able to provide deep and rich descriptions of participants' experiences of the researched phenomenon (Creswell, 2013).

Furthermore, quantitative researchers are also encouraged to consider integrating reflective and reflexive practices into their work. By so doing, they can increase their awareness about their own social locations, which can positively influence the research topic undertaken and their respectful interpretation of the data (Sprague, 2016). Therefore, reflectivity and reflexivity enable researchers to consider culturally-sensitive counselling implications and place value on the applications of the findings disseminated to the broader society for the advancement of knowledge.

To summarize, the concept of reflectivity starts with the individual's cognitive processes by being aware of variables such as his/her⁴ own values, privileges, and oppressive experiences, and so forth in relation to his/her social locations as well as other subjective contexts. In contrast, reflexivity brings counsellors, educators, researchers, and trainees from cognition to action level.

⁴ Note that in this paper, the authors' use of his/her gender pronouns do not negate the fact that other gender pronouns might be excluded from the discussion, which is not our intention. As such, these gender pronouns can be replaced with ones that fit the readers' gender preferences.

The authors argue that we should strive to “enact” our reflections in the context of our professional learning and practices, including counselling and research (Fook, 2002). We believe that reflectivity and reflexivity are essential to all aspects of counselling because they are fundamental to how counsellors, educators, and researchers foster culturally-appropriate work that is socially-just and responsive to the diverse needs of *all* people.

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Career Preparation as a Student Wellness Issue: Considering the Relationship Between Career Development and Mental Health in Post-Secondary

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Abstract

The inseparability of career development and mental health is particularly evident within the context of post-secondary. Higher learners, specifically those at the undergraduate level, are widely recognized as a population that struggles with career uncertainty and unique mental health concerns. This manuscript delves into the reciprocal relationship between career development and mental health among post-secondary students and recent graduates of bachelor degree programs, exploring the impacts on both academic and personal wellbeing. Informed by the results of a recent study into the relationship between career preparation and student wellness, the author offers recommendations for students and service providers within the academic environment to better support both the career and mental wellbeing of higher learners.

Keywords

career development; mental health; student wellness; post-secondary

Undergraduate students are uniquely positioned as a group of individuals who are more directly, and arguably more considerably, impacted by both career development and mental health concerns than others. With career decision-making at the forefront of their experience, undergraduate students and recent graduates of bachelor degree programs recognize the process of launching their careers as the single greatest challenge facing them (Canadian Chamber of Commerce, 2014). Numerous authors have gone as far as to say that career preparation is the most stressful life decision that young adults must make (Bloxom, et al., 2008; Stringer, Kerpelman, & Skorikov, 2012). Given these surmounting pressures and the unsettled state of our current labour market, there are indications that individuals graduating into the current world of work will feel more unprepared, anxious, and generally uncertain about the future than ever before (Royal Canadian Bank, 2016).

Career Considerations

Career concerns among undergraduate students are most commonly perpetuated by a combination of poor labour market conditions and a lack of preparedness for working in these conditions. According to Bell, Benes, and Redekopp (2016), approximately one third of youth in Canada attribute unsuccessful attempts to enter the labour market to a lack of preparedness for employment. Part of the reason this may be is that students graduating with bachelor degrees are no longer afforded the luxury of post-secondary education leading to relevant and stable work experiences upon graduation. By overestimating the impact of these degrees, students and recent graduates are often disillusioned with the job search once realizing the mismatch between their expectations and the reality that faces them (Lau & Pang, 2000; McKeown & Lindorff, 2011; Perrone & Vickers, 2003).

Undergraduate students and recent graduates quickly learn that, with over half of Canadian adults successfully completing some form of higher education, the competition for entry-level skilled jobs is substantial (Royal Bank of Canada, 2016). As a result, the qualifications required by a profession are becoming more demanding, so much so that one in four Canadian employers report increasing the level of education for jobs over the past several years (CareerBuilder, 2013). This ultimately creates a high level of competition for jobs with few vacancies, and inadvertently leads to labour shortages in emerging markets, where there will be an estimated deficiency of workers nearing 2 million by the year 2031 (Bell et al., 2016). This combination creates an unstable economic environment and contributes to a labour market in which both the individual and the economy suffer. Unfortunately for those looking to enter the labour market for the first time upon completing an undergraduate degree, this adversity tends to impact not only their career health, but also their mental and personal health.

Mental Health Considerations

An understanding of the relationship between career health and personal health is required for one to truly appreciate the holistic and interwoven nature of human experience. Career development and personal adjustment are best understood as two scales existing along the same continuum, whereby each reciprocally impacts the other. For example, experiencing career related stress is known to not only contribute to, but also be the source of, mental health concerns (Wilhelm, Kovess, Rios-Seidel, & Finch, 2004). While this is true for the general population, the mental health impacts of career concerns are further exacerbated among undergraduate students, who are particularly susceptible to the influences of combined career and mental health issues (Domene & Arim, 2016; Domene, Arim, & Law, 2017). A recent article from *Psychology Today* even suggested that there is a mental health crisis among post-secondary students in general, noting above average rates of stress and psychopathology among this population as indicative of an epidemic that demands attention (Henriques, 2014).

The National College Health Assessment, a nationwide research survey developed by the American College Health Association (2013), further corroborates this stance. In its measure of undergraduate student health, behaviours, and perceptions, results from Canadian students indicate that mental health concerns are elevated within the post-secondary system. From data based on a student sample at the University of Calgary, the assessment found a majority of respondents felt overwhelmed (90%), very lonely (64%), anxious (58%), and very sad (67%) at some point in the past year. Further, one in four of students surveyed reported having been diagnosed or treated for

a mental health condition. The prevalence of career and mental health concerns among the population of undergraduate students demands a focus on what can be done to intervene and interrupt this cycle.

Current Research and Findings

In an exploration of the career planning and decision-making processes of undergraduate students and recent graduates from bachelor degree programs, I set out to understand how these individuals approached the process of career development. Specifically, the study measured attributions made by these higher learners about perceived successes in finding meaningful employment (i.e., work deemed to be personally fulfilling; Judge, Heller, & Klinger, 2008), given that meaningful employment is an effective safeguard against both occupational (Grant, 2012; Standing, 2011) and psychological (Domene & Arim, 2016; Domene et al., 2017; Goodchild, 2012; Pharr, Moonie, & Bungum, 2012) hardship. Building an awareness of and appreciation for how undergraduate students and graduates of these programs might enhance their own career development through job search success offers insight into the career health of this population. Given the connection between career health and mental health, this knowledge could be used to facilitate a deeper understanding of how factors related to career development might also serve as a means by which to bolster psychological health and wellbeing (Brott, 2001).

In-depth, semi-structured interviews with eight individuals from various post-secondary backgrounds and career paths informed the research study. The interview guide featured a series of probes and question stems that stimulated discussion around factors that participants believed to be associated with their ability to find meaningful employment. Analysis of the data followed the procedural steps of the Enhanced Critical Incident Technique (ECIT) designed by Butterfield, Borgen, Maglio, and Amundson (2009). This process also included the implementation of nine credibility checks outlined by Butterfield and colleagues (2009), which served to enhance the trustworthiness and robustness of the technique, as well as to strengthen the interpretation of and conclusions drawn from the results.

From the eight interviews conducted as part of this study, participants identified a total of 75 incidents or factors to which they attributed their job search success. Analysis of the interview data revealed that the factors most commonly referenced by undergraduate students and recent graduates of bachelor degree programs fell into two main categories (i.e., previous experience and personal qualities), which captured 48 of the 75 total incidents. The category of previous experience encompassed three main themes, including academic experience (i.e., active engagement in coursework or applied training), occupational experience (i.e., involvement in professional fields or occupations, whether paid or unpaid), and personal learning experiences (i.e., experiences related to activities pursued for internally motivated purposes). The category of personal qualities captured experiences related to a sense of control (i.e., an ability to make decisions and take responsibility for actions taken, often achieved by an expression of drive and determination towards one's career goals), confidence (i.e., an ability to efficiently and actively engage in the task of career planning), open-mindedness (i.e., an ability to observe and explore different ways of doing things by demonstrating flexibility towards career development), and opportunity readiness (i.e., an ability to recognize and take advantage of unexpected opportunities for career development). Frequencies and participation rates for each category and corresponding

theme are outlined in Table 1 below.

Table 1
Frequencies and Participation Rates Helping Incidents

Category	PA <i>n</i>	PA %	IN <i>n</i>
Previous Experience			
Academic	5	63	6
Occupational	8	100	10
Personal Learning	4	50	4
Personal Qualities			
Concern	4	50	5
Control	5	63	13
Curiosity	6	75	7
Confidence	2	25	3

Note. PA = participants (*N* = 8); IN = incidents (*N* = 48)

Interventions

Based on findings identified in my research, and support provided by relevant career and mental health literature, a more informed understanding of what is required for undergraduate students to experience success in their careers post-graduation is offered. I recommend a number of interventions and shifts in thinking for both students and service providers within the academic environment and beyond in order to better support the career health of higher learners and, in doing so, their mental health. These interventions include: viewing career preparation as a process rather than an outcome, acknowledging the intersection between career health and mental health, taking a holistic approach to career development, and broadening the definition of acceptable career paths. Although students and recent graduates of undergraduate programs are the primary stakeholders involved in their own career development, and thus would most directly benefit from the implementation of these interventions, it is worth noting that for any real change to occur in the employability of these soon-to-be workforce entrants, there must be accountability, change, and a commitment to appropriate intervention at all levels. This includes not only undergraduate students and recent graduates, but also those who work directly with them, including career counsellors and practitioners, post-secondary institutions and staff, as well as government and the community at large (Bell et al., 2016).

Career Preparation as a Process

While there is much evidence to suggest that students would benefit from engaging in career development, few proactively participate in activities to foster career growth. In fact, Perrone and Vickers (2003) found that many recent graduates still operate from the assumption that they will find work soon after completing their studies, with the image that receiving a degree will also come with immediate offers for employment. To avoid this pitfall, a shift must occur so that career preparation is viewed as a process, rather than an outcome or a next step following graduation. Doing so will not only increase the relevance of career development for students, but will also encourage them to pursue career preparation simultaneously and in accordance with their

education.

Career Health and Mental Health

Although debate continues to surround the relationship between career counselling and personal counselling, as well as the responsibilities of those providing each service, it is increasingly understood that “career is personal” (Savickas, 1993, p. 212). This intersection is perhaps most undeniable among the student population, where both mental health concerns and career concerns out-pace the majority of other populations. In order for students to best manage these concerns, and for career counsellors and mental health practitioners to provide meaningful and appropriate support, a holistic approach to helping that disengages the false-dichotomy between career and life is necessary (Brott, 2001). Acknowledging the dual-relationship between career concerns and personal concerns encourages an approach to support and help-seeking that builds success through assisting individuals in both of these areas.

Holistic Career Development

In many ways, career decisions are made based on a consideration of one’s various life roles and experiences (Brott, 2001); including education, prior employment, and personal learning (e.g., involvement in extracurricular activities). Given that a large proportion of students and recent graduates are unlikely to have an extensive employment history prior to beginning their job search, taking the time to explore other life roles and to identify transferable skills will naturally increase their competitiveness as new entrants to the workforce. This is because life roles beyond work not only inform career and self awareness, increasing an understanding of oneself in a holistic way that allows for the conceptualization of possible career opportunities, but also naturally enhances the desirability of an applicant given their ability to emphasize and speak to their well-roundedness to a potential employer (Stuart, Lido, Morgan, Solomon, & May, 2011).

Broadening what is defined as an acceptable career path involves both psychological flexibility (i.e., an ability to envision diverse career options; Forret, Sullivan, & Mainiero, 2010) and job flexibility (i.e., the willingness to accept a job that deviates from expectations; Van den Broeck et al., 2010). When individuals have the capacity to envision a variety of viable career options, they tend to engage in a more exploratory job search process, which ultimately exposes them to previously unidentified opportunities. Not only does this increase the quantity of job options available to students and recent graduates, but it also bolsters their competitiveness among applicants who may not express such high levels of adaptability towards the job search and potential job opportunities, which is shown to be a major consideration for hiring decisions among employers (DeBell, 2006; Savickas, 2005).

Implications and Outcomes

Career preparedness among students is mutually beneficial to employment outcomes and mental health. When students engage in and see the relevance of activities that promote their career development, not only do they experience improvements in self-awareness and personal learning, but also a heightened sense of purpose and direction in pursuing their career goals. This is often a result of better understanding how one’s role as a student directly translates and relates to one’s

career in a broader sense, thereby encouraging a proactive approach to learning and growth that contributes to an ability to secure employment upon graduating (Bridgstock, 2009; Brown, Cober, Kane, Levy, & Shalhoop, 2006). When a clear sense of career direction is determined and actively pursued, individuals tend to experience higher levels of self-efficacy, optimism, and achievement motivation compared to individuals who are dissatisfied with their employment prospects (Cassidy & Wright, 2008; Jalles & Anderson, 2014). Not only that, but career preparation also commonly serves as a safeguard against various mental health challenges, including depression, suicidality, mental stress and anxiety, as well as physical health concerns, such as insomnia, sleep deprivation, and poor overall health (Domene & Arim, 2016; Domene et al., 2017; Goodchild, 2012; Pharr et al., 2012).

Conclusion

Career development and mental health are increasingly recognized for their interactive and often reciprocal influences. This relationship is perhaps most evident among post-secondary students, who generally experience elevated levels of both career and mental health concerns compared to the general population. In better understanding how students can successfully and proactively prepare for their careers, appropriate interventions can be implemented that will ultimately contribute to improvements in the mental wellbeing and employability of recent graduates as they make their transition into the workforce.

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Investigating Migration through the Phenomenon of School Integration: Anaya's Experience of Resettlement in Canada

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Abstract

Using a social justice framework, this arts-based engagement ethnography (ABEE) investigated the phenomenon of school integration among newcomer youth who migrated to Canada. Defined broadly, this phenomenon captures the adjustment of newcomer youth across all aspects of student life – both inside and outside the school context, including English Language Learning (ELL), academic performance, classroom behaviour, social networking, emotional and familial well-being, involvement in school life, and understanding of the educational system. Specifically, two research questions were investigated: 1) *How do newcomer youth experience school?* and 2) *How do these experiences influence their positive integration into the school system?* Results from one participant – Anaya, a 19-year-old cisgender female who migrated to Canada from India with her family at the age of 12 – are presented to illustrate the manner in which the phenomenon of school integration can be used as a point of entry to study migration. These results included the following five themes: 1) The Struggle to Fit In / *"I regard myself as a social outsider"*, 2) Managing Parental Expectations / *"Our values started to clash"*, 3) Implications of Self-Exploration / *"I was kind of in the middle"*; 4) Finding a Passion and Getting Involved / *"I became a lot more friendly"*, and 4) Embracing a Multicultural Identity / *"I am reembracing my heritage."*

Keywords

Social justice framework, arts-based engagement ethnography, school integration, newcomer youth, migration.

The 21st century has been identified as the age of migration (Castles, de Hass, & Miller, 2013) with a marked increase in immigrants, refugees, and asylum seekers across the globe (Arthur, 2013). For example, over a quarter of a million newcomers with permanent residency status currently live in Canada, with the cities of Toronto, Montreal, Vancouver, and Calgary receiving

the largest numbers (Citizenship and Immigration Canada, 2015). As a large segment of the population, young newcomers play a vital role in the social fabric and future success of Canadian society (Areepattamannil & Freeman, 2008; Rossiter & Rossiter, 2009). Their integration is highly dependent on their educational, occupational, and civic opportunities as well as their engagement as they integrate into the host country (Banks, Suárez-Orozco, & Ben-Peretz, 2016).

For most newcomer youth, entrance into a school system is their first introduction to the host culture within which they reside (Stermac, Clarke, & Brown, 2013; Suárez-Orozco et al., 2010; Suárez-Orozco & Suárez-Orozco, 2001). Newcomer students themselves have identified schools as the main arena in which their social, emotional, and academic transition takes place (Li, 2010; Stodolska, 2008). Moreover, research has shown how critical the high school experience can be in ensuring a successful transitioning to post-secondary education (Gallucci & Kassan, 2019). Consequently, school life has been positioned as a vital and predictive component of newcomer youth's future careers and civic contributions. However, studies have found that problems adjusting into the school system in Canada can begin as early as the first day of class (Banks et al., 2016; Naraghi & Kassan, 2015).

Research on Canadian migration dates back to the early 1970s (Sinacore, Kassan, & Lerner, 2015). While extremely informative, many of these studies have been segregated in nature (only focusing on a small set of factors that impact newcomer youth) and have employed quantitative methodologies. Further, this research has rarely taken into account the voices and experiences of newcomer youth themselves. A number of migration frameworks have also been proposed – for example, acculturation (see Berry, Phinney, Sam, & Vedder, 2006), identity formation (see Phinney & Ong, 2007), cultural transition (see Sinacore, Mikhail, Kassan, & Lerner, 2009) – establishing a critical foundation for scholarship with newcomer populations. However, situated within a global migration context, these efforts do not sufficiently capture the nuanced experiences of newcomer youth.

To address these limitations, we adopted a social justice framework (Stewart, 2014) to investigate the experiences of *school integration* among newcomer youth across Canada. This phenomenon captures the adjustment of newcomer youth across all aspects of student life – both inside and outside the school context (e.g. English Language Learning [ELL], academic performance, classroom behaviour, social networking, emotional and familial well-being, involvement in school life, and understanding of the educational system) (Gallucci & Kassan, 2019). To obtain a rich description of this phenomenon, we employed an arts-based engagement ethnography (ABEE; Goopy & Kassan, 2019; Kassan et al., 2018) to investigate the experiences of newcomer youth integrating into a new school system in Canada following migration.

In this paper, we aim to demonstrate how the phenomenon of school integration can be used as a point of entry to investigate the experiences of migration among newcomer youth in Canada. To this end, we present findings from one participant, Anaya (pseudonym), to highlight the richness, depth, and engagement that emerged from this study on school integration. To begin, we provide a brief review of the literature on youth and migration as well as a description of the social justice framework (Stewart, 2014) and ABEE methodology (Goopy & Kassan, 2019; Kassan et al., 2018) employed in this study. Subsequently, we provide an overview of Anaya's experience of school integration along with implications for practice, training, research, and

policy.

Youth and Migration

For newcomer youth, the process of school integration is often extremely daunting (Gallucci & Kassan, 2019). Inadequate preparation and a lack of proper orientation leave many newcomers at a disadvantage when trying to navigate North American school practices and norms. Insufficient support during the initial phase of adjustment can also prove detrimental to students who have had limited formal education and can result in a lack of motivation and classroom engagement (Stermac, Elgie, Clarke, & Dunlap, 2012). Disengagement is further fueled by inappropriate grade placements, which commonly occurs when students transition from very different educational systems. This shift can result in students feeling over-challenged or under-challenged. Research has pointed to a decline in academic motivation as a result of feeling bored and disappointed with the Canadian curriculum. For example, newcomer youth often have to repeat material they have already covered in their home country, while also learning a new language (Anisef, Brown, Phythia, Sweet, & Walters, 2010; Naraghi & Kassan, 2015).

Even students who do not find the Canadian curricula intellectually challenging may find that linguistic barriers have a negative impact on their performance within the classroom. For students with limited English knowledge upon arrival, the establishment of a level of proficiency necessary for academic success can take up to seven years (Rossiter & Rossiter, 2009; Suárez-Orozco et al., 2010). The development of these language skills is not only critical to succeed academically but socially as well (Suárez-Orozco et al., 2010). Despite the availability of ELL services, many studies have established that newcomer students find these classes ineffective, or lack motivation to excel, as ELL classes do not translate into course credit toward graduation (Li, 2010; Stodolska, 2008).

Among the challenges entailed in linguistic transition, the inability to freely express oneself to others has been highlighted as a roadblock to social integration. From a developmental perspective, the significance of positive peer connections increases during adolescence as greater amounts of time are spent with friends. However, research has demonstrated that newcomer youth across Canada are facing social barriers including discrimination, bullying, and social exclusion (Naraghi & Kassan, 2015; Stermac et al., 2012). A study that examined the involvement of immigrant and refugee youth in criminal and gang activity across Alberta discovered that social isolation and bullying at school are primary risk factors for criminal involvement (Rossiter & Rossiter, 2009). Research has also shown a strong correlation between perceived discrimination and rates of depression, which in turn has been linked to a decline in academic performance (Fawzi, 2009). Thus, many newcomer youth are at greater risk of dropping out of high school (Anief et al., 2010).

Integration in a new school is also shaped by factors that occur off-campus (e.g. pre-migration experiences and home life influences). For those seeking refuge in Canada, pre-migration exposure to trauma may result in post-traumatic stress disorder, bereavement, and anxiety (Stermac et al., 2012). Family life for newcomer youth can also adversely affect school integration (Li, 2010). For many, pursuing education in Canada is the fulfillment of their family's motivation behind migrating to a new country. Pressure to succeed academically is often compounded by the

desire to make parents proud, recognizing their sacrifices throughout the migration process. Yet school systems in Canada are foreign to most newcomer parents and their capacity to offer their children academic support is often compromised. Facing their own barriers to social integration, parents do not necessarily have the time or energy to be closely involved in their children's lives (Anisef et al., 2010; Sinacore et al., 2009). Additionally, financial strain and family poverty mean that some parents must work additional hours while their children help contribute to the household by finding part-time employment outside of school. Parent-child relationships are further complicated by discrepancies between school and home culture as well as prolonged periods of family separation due to staggered migration (Rossiter & Rossiter, 2009). The potential challenges found within the homes of newcomer youth can be disruptive to the stability necessary for them to focus on academics and highlight the need for additional support systems in schools (Suárez-Orozco et al., 2010).

School Integration

The phenomenon of school integration represents an important point of entry to investigate the experiences of newcomer youth in Canada. According to Gallucci and Kassan (2019), school integration captures the adjustment of newcomer youth across all aspects of student life – both inside and outside the school context, including ELL, academic performance, classroom behaviour, social networking, emotional and familial well-being, involvement in school life, and understanding of the educational system. Results of a qualitative study centering on the phenomenon of school integration demonstrated that newcomer youth themselves identify numerous factors as critical in their process of integration into the school system, including a) elements within the high school setting (i.e. the school culture and support of teachers), b) variables that straddle between the school and the community (i.e. language transition and peer groups development), and c) experiences in the home environment (i.e. the role of family) (see Gallucci & Kassan, 2019; Kassan, Tkachuk, & Gallucci, n.d.).

To further investigate this phenomenon in ways that are culturally sensitive and meaningful to newcomer youth, we employed a social justice framework (Stewart, 2014) and ABEE methodology (Goopy & Kassan, 2019; Kassan et al., 2018) to address the following research questions: a) *How do newcomer youth experience school?* and b) *How do these experiences influence their positive integration into the school system?* In this paper, we present findings from one participant (Anaya) to demonstrate the manner in which the phenomenon of school integration was used to capture experiences of migration in Canada. The data presented in this paper is part of a larger arts-based ethnographic research project investigating the experiences of newcomer youth integrating into the school system at the high school and post-secondary levels in Canada following migration.

Method

Theoretical Framework

To guide this study, we employed a social justice framework. According to Stewart (2014), social justice must be taken up as a process and a goal. The process centers on understanding and dismantling inequities related to age, race, ethnicity, gender, sexual orientation, (dis)ability,

religion, nationality, status in a country, and accessibility. The goal focuses on full and equal engagement of all groups within society. Implementing a social justice framework requires critical, ongoing, interdisciplinary research, which addresses issues of inequity, power, and oppression, with the aim of challenging unjust policies and systems. In the context of this study, foregrounding the phenomenon of school integration provides a holistic approach to investigate the factors that impact newcomer youth, inside and outside of the educational setting.

Research Design

To capture the experiences of school integration among newcomer youth, we implemented an innovative research design – ABEE (Goopy & Kassan, 2019; Kassan et al., 2018), Ethnographic research aims to understand the social and cultural meanings of a phenomenon in order to gain a deeper understanding of the lived experiences of individuals within a specific group (Creswell, 2013). In this case, the central phenomenon is *school integration* and the specific group is *newcomer youth* in Canada. As a methodology, ABEE has been employed to elicit rich, multi-layered data in a relatively short time, as lengthened periods of field observation represent a challenge with this phenomenon and group. Researchers across the fields of design research as well as, education, health, and business have employed similar approaches to study complex processes and experiences (see Gaver, Dunne, & Pacenti 1999; Wherton et al., 2012).

Data Collection

Cultural probes are bespoke and purposefully chosen items that are given to participants (e.g. maps, postcards, diaries, cameras) to assist them in recording specific events, feelings, or interactions in their everyday environment (Goopy & Kassan, 2019; Kassan et al., 2018). They were first used in an EU-funded project as a deliberate strategy to allow participants to use and engage with the probes to track, record, and tell the researcher what they felt was important (Gaver et al., 1999). Cultural probes are carefully chosen by researchers to both match and stimulate the interests of the research participants. They are distributed to participants to use as they see fit. The artifacts that they create with these allow the researchers to capture a glimpse of participants' everyday experiences – what they do, what they feel, etc. Through these artifacts the research come to have a deeper, thicker understanding of who the participants are and what issues are important to them.

The cultural probes used in this study included a personalized box containing a diary, stationery, post cards, maps, and a camera. Participants were asked to use these items to document and represent their experiences of school integration in Canada. They enabled participants, who might have varied facility and comfort with relying entirely on verbal or textual means of communication in English, to express themselves through alternative forms (e.g. drawn, photographic, video). Participants then had an opportunity to share their resultant artifacts through individual semi-structured interviews.

Participants. To be eligible to take part in this study, individual had to be a) newcomers to Canada (i.e. immigrants, refugees, asylum seekers), b) between the ages of 14 and 17 (group 1) or 18 and 24 (group 2), c) currently attending high school (group 1) or successfully transitioned into post-secondary education (group 2) in Canada, and d) minimally proficient in English so as

to engage in a qualitative interview. To date, a total of 15 participants have taken part in the study. The participant we have chosen to highlight in this paper, Anaya (group 2), is a 19-year-old cisgender female who migrated to Canada from India with her family at the age of 12. She completed all of her junior high and high school schooling in Canada and is currently enrolled in her first-year of post-secondary education at university. Anaya was selected as her participation in the study showcases the manner in which the phenomenon of school integration can be used to elicit experiences of migration. Moreover, while she was able to migrate to Canada due to certain privileges (e.g. her parents' status in India and their ability to demonstrate certain financial means), she disclosed struggling a great deal as she integrated into a new school system. In that sense, her experiences of school integration, which will be described in greater depth below, are typical of that of many newcomer students.

Procedures. Following ethics approval, participants were recruited through criterion sampling (Fassinger & Morrow, 2013) via information sessions and flyer advertisements across two educational settings (i.e. high school and university). Participants were given information about the goals of the study, parameters of participation, and a consent form to complete. Each participant had an individual appointment where they met with a graduate research assistant, who distributed the cultural probes and offered instructions on how use them. These instructions were given as ideas for use and it was made clear to participants that there are many ways that the cultural probes might be employed and there is no one right or wrong way to use them. Participants were asked to use the cultural probes to document, record, and express their experiences of school integration in Canada. After a two-week period, each participant shared their completed cultural probes (which now became their artifacts) with the graduate research assistant who logged them in preparation for the individual qualitative interview. This process allowed the researchers to review all of the participants' materials (i.e., photographs, journal entries, maps, etc.), organize them according to similar themes, and prepare the semi-structured qualitative interview protocol. In this way, each interview was unique to the participant. Approximately one week later, once the artifacts had been logged, the graduate research assistant and participant met to complete the interview that centered on the artifacts created and the things that the cultural probes had uncovered. These interviews were approximately 90 minutes and were audio-recorded and later transcribed for data analysis. Please see Figure 1 for an overview of the data collection procedures.

Data Analysis

A professional transcriptionist transcribed the individual interviews and removed all identifying information. The artifacts, which included text (e.g., diary) and visual material (e.g., photographs), were sorted, de-identified, and ultimately grouped with their corresponding individual interviews. Individual transcripts and artifacts were then analyzed using a number of systematic steps outlined for ethnographic research (Creswell, 2013; Saldaña, 2014). First, each transcript was read from start to finish to obtain a general sense of each participant's experience. Here, margin notes and initial codes may be created. Second, each transcript was re-read for meaningful themes and patterned regularities, and meaning units (sentences or paragraphs from the transcripts) were recorded. Third, a cross-case analysis will be performed whereby meaningful themes and patterned regularities will be compared and contrasted across all participants in the study. Fourth, assertions and interpretations are made about the central phenomenon, describing how the culture

works among the group.

Results: Anaya's Experience of School Integration

Results from the analysis of Anaya's artifacts and qualitative interview yielded five main themes pertaining to school integration in Canada, including 1) The Struggle to Fit In / *"I regard myself as a social outsider"*, 2) Managing Parental Expectations / *"Our values started to clash"*, 3) Implications of Self-Exploration / *"I was kind of in the middle"*, 4) Finding a Passion and Getting Involved / *"I became a lot more friendly"*, and 5) Embracing a Multicultural Identity / *"I am reembracing my heritage."*

The Struggle to Fit In / *"I regard myself as a social outsider."*

Anaya, a first-year university student from India, illustrated that one of the primary concerns facing newcomer youth as they enter school in Canada is the "struggle to fit in." Contrary to her previous school experiences, Anaya was shocked by the limited diversity within her junior high school and became "strikingly aware of [her] presence in this country as a visible minority." She found that Canadian students were less willing to engage with her because she was a newcomer – leaving her unsure how to act around them. Anything that went against the dominant culture of the school (i.e., having a thick accent, different attire or hair style, not having a car), left Anaya and her newcomer peers at a social disadvantage. Fearing what was different, she recalled that the Canadian students simply stuck to their "elite groups." Anaya felt that the Canadian born students in her school were very "sheltered" from understanding the obstacles she faced as a newcomer. She recalled, "there were so many obstacles preventing me from doing the things that I wanted, and they didn't have those obstacles for them." This dissonance in experiences left her feeling very isolated and alone during her initial integration into the school system in Canada. Although she does not think her peers were trying to be overtly discriminatory, she noted that:

The culture shock I experienced upon arriving at this school was nonetheless unpleasant, to say the least. Socially, incidents like these have formed my experience in Canada in a way that makes me regard myself as a social outsider, constantly checking myself to see if I fit in.

Managing Parental Expectations / *"Our values started to clash."*

Anaya described her parents' strict conservative views as being "a huge obstacle" to her school integration. For the first time, she was exposed to Western norms such as going for a sleepover and dating. However, her parents did not want her being involved with the "dangerous Western culture." In her journal, she wrote, "My parents always feared that our living in Canada would make their children lose their Indian values and knowledge of Indian customs and traditions, so they did everything in their power to prevent that from occurring." She described that similar to other newcomer students, her parents wanted her to get a good education in Canada, but did not want her to get involved with anything that did not fit within their cultural values. They prevented her from participating in any activities that would distract her from school (i.e., social media, going to parties) – causing their values to come into conflict as she tried to manage the expectations of her parents while attempting to make friends. In the qualitative interview, when asked about an

entry in her journal, she explained:

What I mean by that, is typically, people think that's just like you're not allowed to have alcohol when you hang out. But is also, I just didn't really get to hang out with a lot of people. I just wasn't allowed. No one else's parents were that conservative and none of them had the thing where you're not allowed to hang out with other people or have sleepovers and stuff. And once I was like, "Well. I don't want to not have any friends, I'd prefer to have friends." The more they said no, the more I was like, "Why not?" And then that's when my value started to change ... Whenever I talked to my parents about it, it ended in fighting about it and stuff. So that's when our values started to clash a lot.

Implications of Self-Exploration / *"I was kind of in the middle."*

In high school, Anaya was faced with deciding if she should follow her parent's rules or begin experiencing "normal North American experiences." Wanting to feel less isolated and have more friends, Anaya "rebelled" in high school as she became more liberal with her values. However, the more she tried to negotiate with her parents, the stricter they became. She felt conflicted between embracing the values of her Indo-Canadian friends who "knew their heritage, but they still knew that they were a Canadian" and her friends that were "hardcore Indians that just wanted to stay and remain Indian and maintain their culture and identity." Wanting to please her parents, but not wanting to isolate herself further, she felt "stuck in the middle." She tried to maintain her grades while "starting to have fun in [her] life." However, developing an "alternate life" outside of her parents' values had some negative implications on her self-worth, as she described in the following:

[My success] didn't really matter at that point. It stopped mattering because since you were a child, what your parents think of you is very important to how you perceive yourself. I think what you find is even if you don't get good grades, to them, obeying your parents is a high indication of your self-worth too. So they just didn't think very highly of me as a person... I do feel like I was a bit of a disappointment to my parents in my high school years.

During this time of conflict, she also found that her teachers could not understand her situation and wished there was more support for students trying to find their place between the two cultures within the school system. Ultimately, she believes teachers need to have a greater understanding of the newcomer students' situation, but also become more empathetic to the values held by newcomer parents. She stressed:

Maybe if there was something to bridge the gap between the students that are having these conflicting values and their parents, and the atmosphere around them. Like the teachers and the other peers at their school. And what I mean by that is . . . [if there was] a counselor who could talk to my parents and be like, "See, this is the situation your child is in right now. Regardless of what you want to do, this is the situation your child is in and this is how they are feeling." Something should be done in order to let parents know that they're not being threatened just because people want to talk to them about how their child is feeling at school. Because it almost feels as though there's a fight going on in school between... It's like it's always going to be opposing between the liberal values of Canadian people and the strict

conservative values of wherever you're from.

Finding a Passion and Getting Involved / *"I became a lot more friendly."*

Anaya described that getting involved in school activities "greatly improved [her] quality of life." Being integrated into social activities increased her comfort level and ultimately her self-confidence. Having real life experiences in high school exposed her to a diverse group of peers who she felt were genuinely interested in learning about her culture. Once she began to open up to her peers, she discovered that:

I think the reason I became friends with everyone else in my grade is because I just realized that I'm not as much of an outsider as I think I am. And if I reach out to them that they'll be, like, cool as well.

Now in university, engaging in social activities she is truly passionate about has provided Anaya with an outlet to express her opinions freely – "finally feeling truly welcomed and appreciated." At times, she has found that her passions come into conflict with that of her parents. However, joining social activities that do not "out right defy" her parents enables her to feel more confident and social. In her journal, she wrote:

My interests, in dance and other aspects of my life, often came into conflict with traditional Indian values, which left me in a state of limbo. On the one hand, I loved and belonged to India, my homeland, but many aspects of Canadian multiculturalism appeal to me... [Dance] is one of the ways that I get to explore these interests without openly defying my parents, so I thoroughly enjoy it.

Becoming More Multicultural / *"Reembracing my heritage"*

The culmination of negative social experiences and her parents' strict values throughout the process of school integration left Anaya "resenting India a lot" when she was growing up. Although she continues to feel extremely self-conscious in large crowds, having a diverse multicultural peer group has aided her in "reembracing [her] heritage." Learning more about Indian history and culture, she has become more comfortable in her bicultural identity as an Indo-Canadian woman. "India is really beautiful and it has a really rich culture. I've re-embraced my Indian heritage, wearing a 'bindi' on the middle of my forehead around campus to signify my commitment to preserving the beauty of Indian culture." Through her integration experience in school, Anaya has come to embrace her multicultural identity, realizing that:

The two don't have to be conflicting. That, yeah, my parents are conservative, but I think that they're strict not because they're Indian but because they're just strict. Like I think it's possible to be Indian and be cool and be popular or have friends at least without ... Yeah, I kind of realized that those two don't have to conflict.

Discussion

As discussed above, in this paper, we aimed to showcase how we used the phenomenon of school

integration as a point of entry to investigate the experiences of migration among newcomer youth in Canada. To this end, we presented findings from Anaya's experiences of school integration after migrating to Canada. Snapshots from her journal along with excerpts from her qualitative interview highlight the ways in which her experiences in various school systems (i.e., junior high, high school, and university) represented a parallel to her integration into Canadian society. For Anaya, like many other newcomer youth, the school context into which they integrate after migrating to a new country is their main point of contact with the host country (Gallucci & Kassan, 2019; Kassan et al., n.d.; Li, 2010; Naraghi & Kassan, 2015). However, given that school systems are typically entrenched in Western ideologies and teaching practices, they often leave newcomers like Anaya feeling isolated and conflicted.

Many of the experiences that Anaya shared in the context of this study have previously been documented in the migration literature (e.g. Banks et al., 2016; Stermac et al., 2013; Suárez-Orozco et al., 2010). However, through the process of school integration, broader experiences can be captured and hence a fuller understanding of a young newcomer's process can be documented. When we provide the time and space for newcomer youth to discuss their experiences of school integration, academics are not the primary concern. Rather, like in the case of Anaya, the primary focus is often on social integration, which is influenced by school environment as well as the values promoted in the home and community. Within this context, the importance of support staff such as teachers and counsellors is critical, but not solely for academic reasons.

We would be remiss not to discuss the manner in which the social justice framework (Stewart, 2014) and ABEE methodology (Goopy & Kassan, 2019; Kassan et al., 2018) contributed to the youth-centered, rich description of school integration that we were able to obtain in this study. When we prioritize the voices of newcomer youth and ask them to document their experiences for an extended period of time, we obtained a richer, fuller understanding of migration process. In this case, it appears that giving Anaya time with the cultural probes and later unpacking her experiences in a qualitative interview revealed a great deal of information about her process of identity negotiation following migration to Canada. Such information would not necessarily have emerged through a single qualitative interview. The unique nature of this study allowed for traditional ways of knowing to be challenged in that Anaya was given space to address what was most salient to her in terms of her school integration. Her experiences demonstrate the complexity of the phenomenon as a process that may have been missed if she was not given the time to reflect on her experiences prior to the qualitative interview.

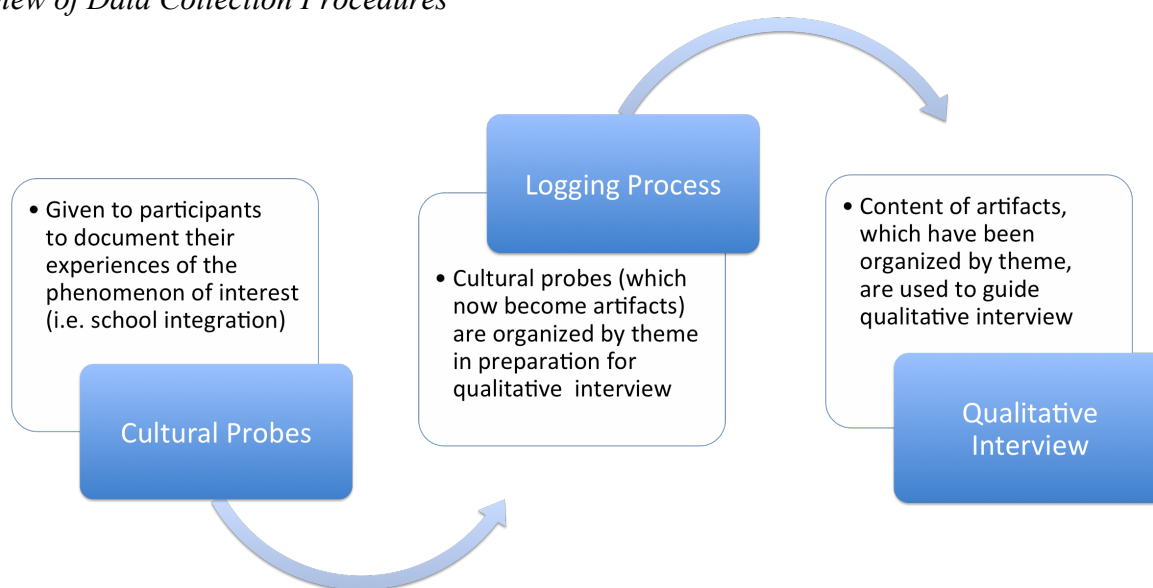
Implications

Canada is internationally renowned for its multicultural philosophy and active migration program (Kelley & Trebilcock, 2010; Sinaocre et al., 2015). However, the everyday reality of newcomers, particularly youth, can be extremely challenging, and this group has been said to underuse support services, particularly in their school setting (Yeh & Kwan, 2010). Educational systems have a cultural and social responsibility to create welcoming and engaging spaces for newcomer youth in order to maximize their academic success and civic potential. For example, in the case of Anaya, more direct engagement on the part of support staff and/or other students in the school would have been helpful, as she felt completely isolated and uncomfortable reaching out for assistance. Results of this study highlight the everyday experiences of a young newcomer, Anaya, who

integrated into several school systems in Calgary, Alberta. Her voice and experience can inform the scholarly literature in areas such as migration, educational psychology, and teaching and learning. Centering on the phenomenon of school integration represents a new point of entry for research with newcomer youth, and can add new understandings to how service providers can work with this group across different modalities (e.g. teaching, advising, counselling). From a psychological perspective, results illuminate the needs of newcomer youth as they integrate into Canadian society, thereby increasing understanding about how to nurture their well-being and sense of belonging in the country. Finally, on a policy level, this research can inform migration and education policies across different systems, including school boards, settlement services, and provincial and federal government.

Figure 1

Overview of Data Collection Procedures



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Toward a More Generous Space for Grief: Advocating for the Bereaved

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Abstract

The loss of a loved one is an immensely painful experience that leaves many clients, and their helping professionals, struggling to know how to respond to the depth of their suffering. In western society, death is frequently avoided among community members and professionals alike, and grief has become increasingly understood as a disorder to be diagnosed and treated rather than a profound existential reality that requires personal accompaniment. The aim of this paper is to provide a critique of these dominant attitudes towards death and grief and to outline an alternative, existential approach. Drawing upon the model of grief accompaniment proposed by Existential Analysis, we describe the ways in which we can make space for grief in ourselves and our relationships by *turning-toward* our loss. Such an approach is not only accepting of a wide variety of responses to loss, but also encourages more authentic emotional engagements with our own suffering and other bereaved persons. This attitude and approach to grief is illustrated through four recent qualitative studies, which explore how individuals, families, and communities made space for grieving in their lives. These research examples give rise to suggestions for how professionals and lay communities alike may advocate for the bereaved by participating in the shaping of more generous personal and social spaces for grief.

Keywords

grief, existential-analysis, phenomenology, death anxiety, qualitative research

The death of a loved one is an immensely painful experience, especially when we experience this loss suddenly, unexpectedly, and in an untimely fashion. If you have had the privilege of sitting with someone who is grieving intensely or have experienced such a loss yourself, you likely know this intimately. Grief can be hard and messy, it is often immensely painful, leaving us feeling exhausted, confused, and searching for meaning (Worden, 2018). In our grief, we yearn for our loved one, for another touch, another look, for relief from suffering. As counsellors and researchers, we frequently encounter clients who have faced and are facing this kind of profound loss. We endeavour to be with them in ways in which our presence, our relationship and our investigations may contribute even a little to the alleviation of their suffering and to their healing.

It has now been over 100 years since Sigmund Freud's (1917/2005) landmark study, *Mourning and Melancholia*, initiated the modern psychiatric and psychological engagement

with bereavement. While much progress has been made with respect to our understanding of grief and its “treatment” (e.g., Jordan & Neimeyer, 2003; Stroebe, Hansson, Schut, & Stroebe, 2008), it is not at all clear that grief has become “easier” for our clients and ourselves. Most certainly this has to do with the fact that the loss of a loved one and the associated suffering is a profound human reality and one that is unlikely to change. And yet, the question remains for counselling psychology researchers and practitioners whether we may be able to contribute to an understanding and engagement with grief that does justice to its existential reality and emotional suffering. Moreover, we believe that it is worth considering whether the culture and practices of western society¹ and our understanding of grief may contribute, positively or negatively, to the suffering of the bereaved.

The aim of this paper is to focus on these two latter points, on cultural practices around death and loss in western society, and on our prevalent understandings of grief and its “treatment”. We would like to suggest that both of these are in need of some revision and that, as counsellors and researchers, we would do well to advocate for a more adequate understanding and treatment of grief amongst our professional colleagues and in our communities. We believe that our clients and families would benefit from a more person-centred engagement with grief, an approach and attitude in which we make space within ourselves and in our communities for the suffering of the bereaved, and in which we seek to accompany the bereaved with closeness and compassion. Such an approach would, however, require not only change within our communities. It would also demand a change in us as professionals, a change in which we step back from seeking to ameliorate suffering with the right technique or method, and open up space to hold suffering and accompany the bereaved in a person-centred and empathic manner.

The following sections aim to describe such an approach to the understanding and accompaniment of grief. We begin, first of all, with exploring the cultural context of western society, which contributes to the death (and grief) denying attitudes that are prevalent. This is supplemented, on a professional level, with an exploration of our understanding of grief and a critique of its increased pathologization and the resulting consequences. What follows is our attempt to provide a theoretical understanding of grief, grounded in Existential Analysis (EA; Frankl, 1982; Längle, 2003a), that honours its personal nature, and then a summary of four qualitative studies, which sought to provide a generous space in which grief could be understood and lived. While there are many differences in these studies with respect to their foci and research methods, what unifies them is the intention to explore what it might mean for bereaved individuals, families and communities to make space for suffering and grief.

The Context of Bereavement: The Denial of Death and the Pathologization of Grief

The aim of this first section is to provide the reader with an overview of the cultural and professional context in which many bereaved in western society grieve for their loved ones. Such an understanding requires close attention to two areas: (a) the awareness of a death-

¹ We join Harris (2010) in employing this term for the sake of simplicity. It is worth noting that ‘western society’ refers to societal practices of Western European and North American mainstream cultures, as well as those societies influenced by these cultures, which are shaped by the enlightenment, as well as capitalism and a market-based economy (cf. Taylor, 2007, for an elaboration on the development and characteristics of modern western society).

denying culture, and (b) an understanding of the evolution of grief theory.

The denial of death

The well-known American sociologist Ernest Becker (1973) has called attention to dominant cultural attitudes towards death. He stated that, “the idea of death, the fear of it, haunts the human animal like nothing else” (p. xvii). As a result, death anxiety emerges not only when someone dies, but also when we come face to face with the topic of death. Western society largely embraces a death-denying, death-avoidant mentality, and these strong societal attitudes are likely to leave the bereaved invariably feeling excluded, isolated, and oppressed (Harris, 2010). We believe, and will endeavour to demonstrate, that societal norms regarding grief are influenced by death anxiety, our common grief discourse, and the pathologizing of the grief experience shared by a variety of grieving theories.

The topic of death has the ability to silence a room and cause profound anxiety (Bartel, 2019), and even though “death is less of a taboo subject now” (Northcott & Wilson, 2017, p. 3), most people avoid dwelling on their own death or on the potential death of others. Dying and death are uncomfortable topics that might result in anxiety, fear, or avoidance. Western societies have reacted by treating death as optional or avoidable with an emphasis on denying rather than acknowledging losses. Many people seem to believe implicitly that they can beat death or dismiss it as primarily an issue of old age. Northcott and Wilson (2017) summarize that, “dying and death are topics people would much rather not think about nor personally experience in the near future” (p. 3).

Death anxiety is an actuality that humans live with on a daily basis, as the terrifying dilemma of death haunts their dreams and sunny days (Becker, 1973). Death anxiety is defined as the fear and dread associated with anticipation of mortality that varies across individuals and over the life course, and has been related to differences in spirituality, life stages, attachment security, self-worth, and coping strategies (Tong et al., 2016). Numerous studies have been conducted to improve our understanding of death anxiety, which have led to development of a variety of death anxiety scales (Thorson & Powell, 1992), as well as a social-psychological theory of death anxiety, terror management theory (Pyszczynski, Greenberg, Solomon, Arndt, & Schimel, 2004). Numerous investigations into death anxiety, including highly rigorous experimental investigations (see Pyszczynski et al., 2004) have offered evidence to suggest that death anxiety is at the root of problems such as denial, avoidance, and shame, and also lies at the core of the struggle to understand and deal with losses.

The pathologization of grief

Not only are bereaved individuals faced with anxiety about death, they also frequently battle oppressive societal norms about how one should grieve. Harris (2010) examined social rules that govern the expression of grief in western society and found that bereaved clients are confused about how they should grieve and are often distressed by the responses of others to their grief. Harris suggests that western societies shape how bereaved individuals are expected to grieve, which in turn leads to the question of what is normal in the grieving process. The increased pathologization of grief thus leads to its suppression, in spite of persistent empirical evidence for the normalcy of a variety of responses to loss.

In an effort to advocate for a breadth of human grief responses, Breen and O’Connor (2011) have sought to highlight some of the differences between dominant grief discourse and the

actual lived experience of the grieving process. In contrast to the dominant discourse, which frequently portrays grief as a short-term, linear, predictable process that requires a defined process and culminates in a detachment from the deceased, these authors have suggested that, more frequently, grief is a unique, lifelong, oscillating and diverse process that results in a healthy and adaptive continuing bond between the bereaved and deceased. Breen and O'Connor advocate that, on the basis of the discrepancy between the current grief literature and commonly held beliefs by professionals and laypeople, there is a need for developing improved grief education.

The question about the pathological status of some forms of grief has recently gained traction, especially after the publication of the DSM-5 (American Psychiatric Association, 2013). Following a lengthy debate within the literature (cf. Rubin, Malkinson, & Witzum, 2008), the authors of the DSM-5 included "Persistent Complex Bereavement Disorder" as a diagnosis to be studied in section III of the manual. Granek (2012) suggests that, in an effort to model ourselves after the "hard sciences", helping professionals have been too quick to jettison traditional understandings of grief, which made room for diverse expressions and emphasized that it was a healthy response to following the loss of a loved one. This has resulted in an over-emphasis on functioning and effectiveness, while simultaneously leading to a lack of understanding of the grieving process and an impersonal approach to grief counselling. This pathologization of grief is compounded when communities and well-meaning but relatively ignorant friends and family members dictate how one is to grieve and the bereaved find themselves not only grieving, but also trying to live out the expectations of others. Accordingly, "much of the focus in grief therapy and support is often upon the 'un-doing' of oppressive social norms" (Harris, 2010, p. 248), which can prevent the bereaved from engaging in the natural unfolding of their own unique grief process.

In light of these challenges to our understanding of and engagement with grief, how may we as professionals and members of our communities respond in ways that are beneficial to our clients? Through our collaborative professional and personal experiences, we believe that working with the bereaved requires the ability to provide and hold the space for grieving, as we walk alongside of our clients in their experiences, validating, acknowledging, and bearing witness to their suffering. As Granek (2013) asserts, "pain, or one might argue, grief, is not a pathology. It's our inability to respond to and acknowledge it that makes us sick (p. 285). This leads us to consider an approach in therapy that responds to and acknowledges the bereaved through grief accompaniment.

Making Space for Grief in Practice: An Existential-Analytical Approach

In an effort to describe a more person-centred approach to grief, the following section provides an overview of the existential-analytical approach to understanding grief and its accompaniment². EA offers an approach that, in the first instance, is concerned with understanding and supporting human suffering. This does not mean that existential analytical psychotherapists are inherently opposed to psychological or medical diagnoses (cf. Längle, 2016) or that we are convinced that grief might not become arrested or go awry and thus benefit

² With 'accompaniment', we are referring to an empathic, compassionate 'walking-with' approach to a helping relationship. Since grief is a natural process, that is, a process which unfolds without intervention and simply requires our emotionally-attuned attention and turning-towards, active therapeutic intervention is generally not required. When this is the case, therapy typically involves assisting clients in removing barriers to grief or assisting them in addressing the ways in which grief has become arrested in its flow (e.g., depression; cf. Längle, 2016)

from therapeutic intervention. Rather, the EA approach is characterized initially more by a desire to accept clients as they are, and to understand their situation, emotions, and motivations for action (cf. Spaemann, 2006). Within such a psychotherapeutic context, a generous and supportive space is opened up in which clients are invited to *turn-towards* their grief, to come to know the places in which their life is hurting, to come closer to themselves.

Such an approach to accompaniment benefits significantly from a phenomenological (open and attentive; cf. Heidegger, 1927/1967; Längle & Klaassen, 2019) and understanding (vs. evaluative or explaining) attitude, in which we seek to understand and accept clients in their suffering. “Symptom” alleviation – or turning away from suffering – is explored only as needed. As we have seen in the previous section, our culture offers us many opportunities to become distracted in our life in general and in our grief more specifically, and this is motivated also by the desire to avoid dealing with suffering and death. And so, on the whole, we propose that further support is needed, for individual clients and for families and communities, to endure, accept, and even turn towards suffering rather than being supported in their avoidance of it.

Before we go on to elaborate on the specifics of this approach to grief accompaniment, it is probably of benefit to provide a brief context and outline of EA. Many readers are likely familiar with the founder of EA, Viktor Frankl, and his numerous publications, including *Man’s Search for Meaning* (Frankl, 1984). Frankl (1905-1997) was a Viennese physician and psychologist whose approach to counselling (or Logotherapy; logos = meaning) was primarily focused on assisting clients in finding meaning. Finding meaning, for Frankl, required what he called a “Copernican turn” (Frankl, 1982, p. 87), a turn in which human beings turned from asking life (or God or the universe or a philosophy) about the meaning of their life and suffering, and understood themselves instead as the ones who were being questioned by life. Their loss, their suffering, and their daily life could be understood as a question which they were being asked by life itself, and their actions, how they responded to the questions of life, was the lived answer. Meaning, within this context, was understood as the most valuable possibility in a given situation (Längle, 2005).

While Logotherapy provided a ground-breaking and immensely helpful approach to problems related to meaning and meaninglessness, it became evident in practice that not all psychotherapeutic problems could be addressed in this manner (Längle, 2016). An expansion of the theoretical structure and psychotherapeutic process and methods was needed (for a fuller discussion of EA in relation to other humanistic approaches to psychotherapy, the reader is referred to Längle, 2016, and Längle & Kriz, 2012). Grief actually serves as a good example of this necessity. While clients frequently benefit significantly from finding meaning in their loss (cf. Neimeyer, 2000), finding existential meaning alone is not sufficient for a deeper engagement with grief. In fact, finding a positive meaning to loss might at times prevent us from allowing, experiencing and understanding emotions associated with deep grief.

For EA, a closer, more emotional and relational approach was needed, an approach that supplemented the focus on finding meaning with an engagement with the facticity of oneself and the world, an emotional turning-towards the joys and losses of life within a relational context, and a development of oneself as a person. This development was accomplished through the work of Alfred Längle (2016), likewise a physician and psychologist, whose main contribution to EA was a turn towards existential phenomenology (cf. Heidegger, 1927/1967). This turn yielded both methodological innovations, primarily focused around the introduction of phenomenology as a psychotherapeutic method (Längle, 2003b) and a theoretical structure

that introduced four fundamental conditions for fulfilled existence (Längle, 2003a): (a) the world in its factuality and potentiality; (b) life with its network of relationships and its feelings; (c) being oneself as a unique, autonomous person; and (d) the wider context in which we develop ourselves over time. Modern EA, thus, can be defined as a phenomenological and person-oriented psychotherapy, with the aim of leading the person to (mentally and emotionally) free experiences, to facilitate authentic decisions and to bring about a truly responsible way of dealing with life and the world.

Understanding of grief

The innovations with respect to theory and process also provided the ground for understanding and working with grief. Grief in EA is understood as an intimate and personal reestablishment of the connection to life following the loss of life-relevant values (Längle, 2016). The fundamental question with which we are faced after a loss is: Would I still like to live after the loss of this loved one, this relationship, this job? If we find, within ourselves, an inner “yes” to this fundamental question, an *inner consent to life*, then grief and grief accompaniment becomes a process through which the bereaved re-establish a relationship to life. This process follows the four fundamental conditions mentioned above, although frequently not linearly. Grief accompaniment generally takes the form of close, emotionally-attuned walking-with the bereaved and is understood more as the letting-be and allowing of a natural process rather than as “grief work” (Freud, 1917/2005) or “reconstruction” (Neimeyer, 2000). Of course, there may be circumstances in which a more active therapeutic stance is needed; when a client despairs, is overwhelmed with feeling (e.g., in depression), when there is a felt lack of ground or in cases of traumatic loss (e.g., the death of a child, cases of abuse). But even in such cases, the main aim of psychotherapeutic intervention remains on assisting the client in turning-toward the loss and preventing the arrest of the grief process, from getting stuck in anxiety or falling into the inactivity of depression.

Grief accompaniment

Grief accompaniment in EA (Längle, 2016) begins, according to the first fundamental condition, with a simple being-there, a word-less caring and compassionate presence of the therapist that does not disturb the intimacy of the client but rather offers a supportive being-with. Care is given initially to attending to how the client is dealing with the loss. What is taking place within him or her? How is the client attending to his physical needs, to sleep, eating, daily functioning? Perhaps the client may need practical support in the service of opening up a space within his or her life to allow also for empathic engagement with the loss. We seek carefully for information about the loss, about what led to the death, and about how the client is dealing with his or her suffering. At times, work may be needed in helping the client process what has happened, and in assisting him or her in enduring, and eventually, coming to *accept*³ the situation and reality of the loss.

This dealing with loss at the factual level, attending to the day-to-day needs of the client prepares the way for an emotional engagement with the loss. As is evident above, this already begins in the previous phase, but at this point there is a gradual increase of the focus on empathic accompaniment. The client is invited to share how she is feeling, how he is suffering,

³ In cases of traumatic bereavement, the process of coming to accept the loss, to allow it to be what it is, may take up significant time and psychotherapeutic effort. A fuller engagement with this topic exceeds the scope of the current paper. The reader is referred to other publications, such as Klaassen (2017), and Längle (2003a, 2003b).

and how the loss is being addressed (or avoided) in the family context. Empathic engagement with the loss both provides emotional containment and safety for the client, and also models the phenomenological attitude of *turning-toward* where life is hurting.

Emotional accompaniment of the client opens up spaces for dialogue. The therapist adopts the attitude of a “kind and supportive mother” (Längle, 2016), who uses words sparingly, but maintains hope for the client. The focus is on offering comfort and encouragement, which is not offered in a general or vague manner (e.g., “something good will come of this tragedy”) but rather emerges from taking up specifically what the client discloses throughout the sessions. The therapeutic attitude and action consist in holding an empathic and supportive space in which clients can share what is happening with themselves and their situation. Concrete values concerning the deceased or the relationship to the deceased can be addressed. Specific questions or beliefs, for example about an afterlife, can be explored. Generally, the dialogue is maintained through empathic attention to and direction from the client rather than focused on therapist-supplied foci.

The attention of the accompaniment can now turn towards the ongoing *relationship to the deceased* and to the *future* of the client and his or her grieving process. Rather than severing the relationship to the deceased or “letting go”, the question at this point becomes about the internalization of the relationship. How can the relationship between the deceased and the bereaved be lived now? The spiritual presence of the deceased can become concretized through the living of values associated with the deceased (e.g., if the deceased was an avid hiker, the bereaved may take up this activity, focus on the values associated with it, and experience the presence of their loved one most acutely on favourite hiking trails). At times, the bereaved take comfort and even guidance from such presence; the loss of the loved one may also clarify and highlight important values for the bereaved, which they may want to incorporate into life.

Making Space for Grief: Research Examples

In addition to the EA approach to creating space for grieving in psychotherapy, there are several recent examples of qualitative research that highlight the possibilities inherent in turning-towards the experience of grieving. In this section, four of these examples will be discussed. The first study outlined here is titled “The labyrinth of grief: A phenomenological exploration of turning toward loss” (Drisner, 2017), and examines the possibility of making space within ourselves through the personal activity of turning-towards loss. The second example explores this activity within the context of family relationships and is titled “Death ends a life not a relationship: Family bereavement, relational grieving and continuing bonds” (Bartel, 2019). Both the third and fourth examples address communal opportunities to hold space for grieving and are titled “Grieving together: An ethnography of grief in community” (Bentum 2017), and “Grieving in community: Accompanying bereaved parents” (Venema, 2019). These four studies give essential evidence of the potential for healing through turning-towards suffering.

In her research, Drisner (2017) artfully represented participants’ inner experience of turning-towards loss. She described turning-towards as an opportunity to advocate for the grieving self within a social climate that is often restrictive, dismissive, or shaming of grieving processes. Following van Manen (2014), Drisner (2017) employed a hermeneutic phenomenological method to answer the question: “what is the lived experience of turning

toward loss?”. Drisner interviewed four female participants and transcribed and analyzed the interviews to understand further the fundamental nature of turning-towards loss.

Out of the process of engagement with these participants Drisner (2018) described eight themes, which cohered around the metaphor of a labyrinth and were disclosed through the process of phenomenological writing and eight paintings. The themes were, (a) encounter with death, (b) surrendering to grief, (c) choosing community, (d) permitting and pursuing grief, (e) transformation of self, (f) rooting in relationship, (g) embracing life and, (h) ground of faith. While an exhaustive treatment of the findings exceeds the scope of this current article, one theme that is of particular relevance to bereavement advocacy is described below.

Drisner (2017) highlighted the theme of *transformation of self* as particularly important in making space for grief. She wrote that this internal and relational process led research participants toward self-advocacy. As participants allowed themselves to encounter their own grief, they were changed in ways that equipped them to make space for their own grieving in their relational context. Drisner identified several ways that participants changed including: (a) connecting to their authentic selves, (b) discovering a newfound creativity, (c) acting courageously, (d) asking for what they needed, (e) being honest about their feelings, and (f) finding strength and exploring places of depth within themselves. Through these new-found ways of being, participants could relate with others in ways that promoted their own grieving and growing process.

The second study moved outward from the inner experience of grieving and explored how families grieve together, and how grieving within families can be facilitated (Bartel, 2019). Bartel employed the Qualitative Action Project Method (Young, Valach, & Domene, 2005) to gather information from three families about their individual and relational grieving activities following the death of a family member. Using this method to answer the question: “How do families grieve together” allowed Bartel to gather both data from the family as a group and from each individual family member. Bartel found that families: (a) turned towards the loss individually and together; (b) had ongoing rituals and remembrances; (c) recognized and accepted different expressions of grieving; (d) shared in the pain; (e) experienced joy and sorrow simultaneously; (f) found healing through shared meaning; and, (g) shared a continuing bond with the deceased that connected them to each other.

According to Bartel (2019), there are several important ways that families can be supported in their grieving. First, space needs to be created for family bereavement in the recognition that grieving is a shared, relational process. Second, individual and differing ways of expressing grief within the family unit must be validated. Third, family rituals and remembrances can be facilitated. Finally, instead of pathologizing continuing bonds with the deceased, encouraging continuing bonds can enhance ties within family relationships. The process of finding meaning in suffering and living post-loss can be facilitated through engagement in family conversations where family members provide a safe environment for sharing about the deceased and the grieving process.

Even as individuals within families share their experience of grief with those around them, larger communities also contain these multilayered and interactive relational activities of grieving (Bentum, 2017; Venema, 2019). Bentum (2017) described how a community grieves together, highlighting the reciprocal nature of grief interactions. This will be discussed first,

followed by an overview of Venema's (2019) findings, which highlight how community members can accompany the bereaved.

Using a focussed ethnography (Simonds, Camic, & Causey, 2012), Bentum (2017) observed a community grieving together after the death of members. He sought to answer the question: "How does a religious community grieve the deaths of members together?" The findings captured four main themes which revealed that community members: (a) are drawn to care; (b) assess what their roles are; (c) grieve together; and, (d) have uniqueness in community. Bentum argued that the multiple layers of contextual features influenced both how the community interacted with the bereaved and what the bereaved expected of the community. He noted that this impacted the grief experience of both the bereaved and community members around the bereaved. Reciprocal interactions between members gave shape to the experience of grieving together, which was sometimes experienced as supportive and healing, and other times as isolating, dismissive, and inappropriate. Advocacy in this area can focus on increasing individual distress tolerance, and on grief accompaniment education so that community members can share grief at the unique paces of each person in the interaction.

Whereas Bentum's (2017) research gave a broad view of reciprocal interactions in the community, Venema (2019) focussed on the experience of community members in a more detailed way. She used the Qualitative Action Project Method (Young et al., 2005) to answer the question: "How do communities grieve with bereaved parents after the death of a child?" In her interviews, Venema brought together bereaved family members and community members who supported them in their grief. Although her analysis is still ongoing, Venema was able to identify three main grieving processes for bereaved families and their communities. She noted that grieving within relationships was characterized by, (a) engaging in and honouring vulnerability, (b) fostering remembrance, and (c) holding complexity.

As is clear from these three processes, advocating for grieving in community requires intentional and opened interactions (Venema, 2019). Venema outlined that community members who view grief not as a problem to be fixed, but as a journey of deep connection with, and trusting of, the bereaved might experience the process as healing. She also noted that remembering the deceased child was paramount. This remembering included using the child's name, remembering important dates, and having visual reminders. Finally, Venema described that holding complexity requires community members to be able to allow their grief and the other person to change, hold seemingly opposing emotions, and seeing grief as woven into all of the person's life and context.

These four studies highlight the importance of turning-towards grief relationally in different ways. Drisner (2017) described the relational possibilities of advocating for the self in turning-towards loss. Bartel (2019) showed the importance of advocating for making and holding space for families to grieve together and individually with a special emphasis on continuing bonds with the deceased. Bentum (2017) and Venema (2019) presented ways that reciprocal interactions between community members shape the journey of grief and can build relationships toward healing or increase feelings of isolation and invalidation. These are all important evidences of the impact of turning-towards where the loss is felt.

Concluding Remarks

The loss of a loved one is an immensely painful experience for bereaved persons. The inevitable suffering is, at times, exacerbated by the lack of cultural resources in western society, an

attitude of negation and avoidance towards death, and the conflicting messages that come from the pathologization of grief by community members and professionals. We have sought to describe an approach to grief that restores a more human way of understanding and dealing with loss. Such an understanding supports a model of grief accompaniment that is characterized by phenomenological openness and acceptance, and encourages clients and therapists alike to make space for grief in turning-towards our suffering. The model is exemplified in four qualitative studies, which have explored the ways in which individuals, families, and communities can likewise provide a more generous space for grief and thereby advocate for the bereaved. We hope that the readers will join us in standing with those who are grieving and advocate for a more human approach to grief accompaniment.

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Reclaiming the Person in Counselling Psychology Research and Practice: An Existential-Analytical Approach

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Abstract

The specialization of counselling psychology offers a strength-oriented and holistic view of the person. While the person is of central concern for counselling psychology as a discipline, research and counselling practice can easily become problem-oriented rather than person-oriented. Consequently, the authors of this paper contend that maintaining a central focus on the person in counselling psychology practice needs to be specifically emphasized and cultivated. Toward this aim, the concept of personhood is elucidated from an existential-analytic theoretical perspective in order to provide a tangible framework for upholding a person-centered focus in counselling psychology practice. Drawing on this framework, the authors offer personal reflections on re-centering personhood in both research and clinical practice in counselling psychology.

Keywords

personhood, existential analysis, phenomenology, counselling psychology

We are pleased to be able to address an important topic, such as *reclaiming the person* in counselling psychology. However, to assert that “the person” is in need of reclamation within the discipline of psychology and that we may have something substantial to contribute on this subject, may strike the reader as somewhat presumptive. We feel similarly. And yet, we are convinced that the focus on the person in counselling psychology research and practice is very timely and essential. We believe that, in this age of technique (Heidegger, 1959/2018) and the manualization of psychotherapy (Strong, 2017), it is easy to lose sight of the central focus of our discipline, and to become preoccupied with methods, interventions, or outcomes, while disregarding the person who is central to the values and endeavours of our discipline (Canadian Psychological Association, 2009).

Our question about whether we are missing the person in counselling psychology practice may seem to the reader initially as a somewhat unusual concern. Is it not self-evident that we, as counselling psychologists, work with human beings, and that this justifies the claim that our efforts are “person-centered”? This is indeed correct, and yet, when we try to describe what we mean by “the person” or how we might work with “the person” concretely and practically, we may find ourselves somewhat at a loss. Although we may have an intuitive understanding of this, a well-articulated description of the person seems like a somewhat elusive task.

Thus, the aim of this paper is, first, to describe what we mean by person. Next, drawing upon the theoretical framework of Existential Analysis (EA, Frankl, 1970; Längle, 2003), we will elaborate the existential-analytical understanding of the person and how this resonates with the core values of the counselling psychology as discipline. Then, we will discuss how the person can be encountered within phenomenological research, counselling and psychotherapy. We will conclude with some remarks regarding the implications of our proposed understanding of the person for the counselling psychology praxis.

The Person: Mystery and Paradox

We frequently begin to speak of the person as if she or he were an object, something to be grasped, captured linguistically, examined and described by our psychotherapeutic or research methods (cf. Heidegger, 1927/1962). However, such an approach may miss the mark and actually do violence to the person (Levinas, 1985). For this – an object or substance to be analyzed and defined – is precisely what we do *not* mean by “the person”. Rather, we regard the person as a fundamental mystery and paradox that eludes our intellectual efforts of definition. Although essentially ungraspable, we can experience the person in our encounters with the others, when we look into the eyes of a friend, a loved one, even a stranger. As we allow our gaze to settle, to “sink in”, and open ourselves to be touched by the beauty and mystery of that other, we begin to experience glimpses of this person as a mysterious, free, ever-changing, inviting and sometimes unsettling flow of energy that enlivens one’s being and carries someone’s unique essence. It is this mystery that we are seeking to describe and understand in this paper, the mystery of the person who is infinitely knowable (Rohr, 2016).

Someone’s personhood shows and hides itself simultaneously, it shines briefly in the ephemeral eye sparkles and then withdraws to the depth from where it springs again. It dwells in silence and speaks from a place of stillness. This paradoxical nature of the person is well captured etymologically by the Greek and Latin words for person: the Greek word “prosopon” designates a mask that was intended to hide an actor’s face in order to reveal a character, and the Latin word “personare” or sounding through, suggests that the person sounds through out of an intimate transcendence (Spaemann, 2006).

The Existential-Analytical Understanding of the Person

Philosophical underpinnings. The existential-analytical understanding of the person emerges at the confluence of several philosophical streams. Specifically, this understanding is shaped primarily by Scheler’s (1913-1916/1973, 1987) philosophical view of the person, subsequently elaborated in psychology by Frankl (1970) in his anthropological model, and then by Längle (2013a). The work of Buber (1923/1970) and Levinas (1985) has further influenced how the person has been depicted in EA as the spiritual capacity for dialogue and encounter, and as the source of ethical-moral action.

Scheler (1913-1916/1973) described the person as the “act-being” (p. 385) unfolding in a constant flow of acts (e.g., thinking, loving, communicating) through which someone’s essence is revealed. By considering the person as the “pure becoming different” (p. 582) while maintaining an “ideal unity” (p. 583), Scheler situates the person within the temporal horizon of becoming: although I experience myself as a continuous identity across time and situations, as a person I am also free to act anew in each situation. This inherently dynamic capacity to act also endows the person with the possibility of becoming an agent of change, including systemic social transformations of oppressive systems or institutions (Fay, 2008; Foucault, 1980).

Frankl subsequently began writing about the person in the 1920s, and, throughout his lengthy career, he returned again and again to his passion for the person and against the reductionism in psychology that would reduce human beings to determined, fixed biological or psychodynamic organisms (Frankl, 1970). In Frankl’s Logotherapy, the person is an anthropological dimension that endows human beings with the capacity to stand against the limitations of life, and say “yes” to life in spite of its inevitable suffering. This capacity to stand against and prevail “in spite of” confers the human person the vocation to resist, either in acts of intimate resistance or as overt social or political resistance (Foucault, 1980; Yancy, 2008).

Frankl (1970) understood the person as that which is free in human beings. Although limited by the lawful comportment of body and psyche, human beings retain some amount of freedom to choose their attitude freely in relation to a given situation. This ontological freedom represents the *sine qua non* condition for rising above the oppressive conditions of one’s existence to promote social change and to advocate for those marginalized or oppressed (Dallmayr & Godrej, 2017).

The dialogical capacity of the person. Fundamental to Frankl’s (1970) understanding of the person is its dialogical capacity: as a person, I am in constant relation both with myself and with my world, and I engage in a double dialogue with myself and with the world (Längle, 2003a). My being is always a situated being, a being-in-the-world, which both precedes and transcends my individuality (Heidegger, 1927/1962). Thus, as persons, we care for the world in which we live, and are called to respond to the concerns presented in our given social-political or cultural situations. Specifically, as persons, we have the capacity to perform a “Copernican turn” (Frankl, 1982, p. 87) or existential turn (see Figure 1), as we understand ourselves not as the ones questioning life, but instead as the ones being-questioned by life, and, thus, responsible to give our answer. This act of personal “response-ability” represents the basis for acting in the world within a horizon of meaning and values, such as justice, equity and cultural hospitality, to respond to the call for social justice incarnated as the Face of the Other (Levinas, 1985).

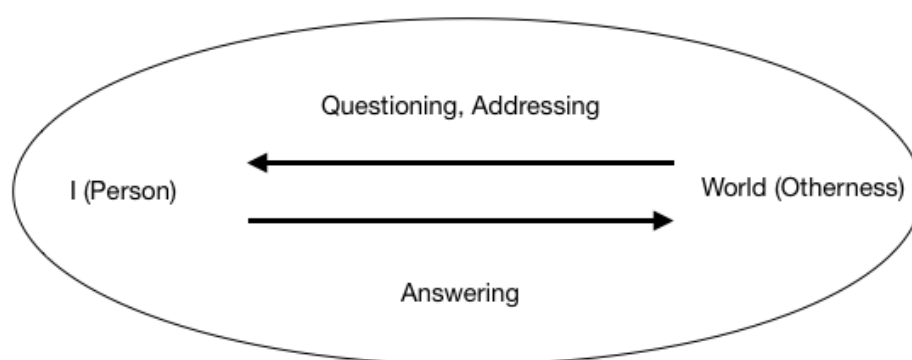


Figure 1. The existential turn.

The existential-analytical model of the person. Drawing primarily on Scheler's (1913-1916/1973, 1978) and Frankl's (1970) work, the contemporary EA framework developed by Längle (2013) proposes a model of the person and the I/ego¹ (see Figure 2), which portrays the person as "that which says I within me" (p. 213). In this representation, the person is depicted as an endless, dynamic flow, springing from a well of unfathomable depth. The flow of the person represents someone's unique, free essence that is captured by the I/ego, similar to how the mouth of a well captures the water of the spring. The more developed and the better structured the ego, the more flow it can capture, process, and channel into one's life. Further, the more we can allow the personal flow to permeate one's ego, the more one lives in an essential, personal way, and can bring these personal qualities to one's encounters with others and with the world. The confluence of the person with the I/ego (marked by the two horizontal, parallel lines in Figure 2) represents the deepest point of intimacy with one's self (me with myself) and the seed of authenticity (who I am in my unique essence). It is at this point that I am, paradoxically, mostly myself and yet drawing upon a source that transcends my individuality.

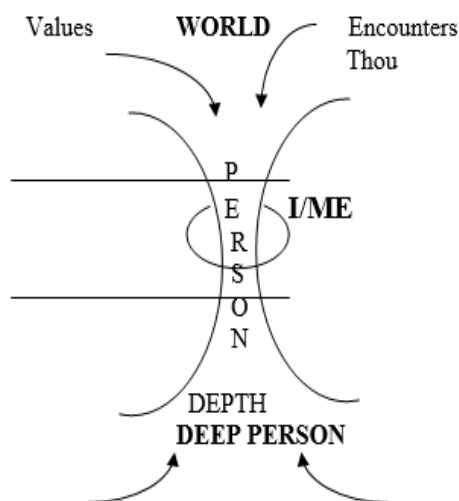


Figure 2. The Existential-Analytical model of the person.

As the visual depiction suggests, the person moves between the inner pole of intimacy with one's self, and the public pole of the personal encounters with others. It is this paradoxical nature of the person that enables us to experience our actions in the world simultaneously as most personal, corresponding to our deepest essence, and most far reaching in terms of social impact. Thus, social action is grounded not only in social convictions and external advocacy but also in our innermost resonance with social values, stemming from an "ethics of authenticity" (Taylor, 1991).

Personal Phenomenology: A Way to the Person in Research and Counselling Practice

¹EA understands the 'I' or the ego as the main executive psychological structure that receives and processes information from both the outer and inner world in order to make decisions and act accordingly. The ego/I structures form a rim or a funnel that can receive the person and then channel it in someone's life. In EA, the 'I' or ego is different from the self, understood as the totality of someone's self-identifications and self-representations. Thus, the self is broader than the I.

Although the existential-analytical understanding of the person affirms the importance of encountering the person within oneself and the other, the challenge of how we can encounter this free, dynamic essence presents the psychotherapist and researcher with a dilemma. What is needed is an approach to encountering the person that allows us to mobilize the freedom of the person in a systematic and yet open manner; phenomenology offers such an approach (Länge & Klaassen, 2019).

Rooted in the continental philosophy tradition, phenomenology has been adapted and implemented as a qualitative research method in social sciences, including psychology (Gallagher & Zahavi, 2012; Zahavi, 2018). Whether descriptive (Giorgi, 2014), transcendental (Moustakas, 1994), interpretative (Smith, Flowers & Larkin, 2009), or hermeneutic (Finlay, 2011, 2014; van Manen, 1999, 2014), phenomenology as a research method aims to explore how we experience ourselves and various phenomena of our world in a concrete, unmediated manner. The personal phenomenology discussed here has the strongest theoretical and methodological affinities with hermeneutic phenomenology; yet, it elaborates and places at its core the existential-ethical understanding of the person as the integrating centre of the phenomenological experience.

Personal phenomenology. The personal phenomenological research approach acknowledges its philosophical moorings at the intersection of two traditions: the lineage of the existential phenomenology (Heidegger, 1962; Merleau-Ponty, 1962) and philosophical hermeneutics (Gadamer, 1977; Ricoeur, 1981), and that of the European personalism (Buber, 1970; Levinas, 1985; Marcel, 1951; Scheler, 1973; Tillich, 1952; Wojtyla, 1979). The existential underpinnings of this approach to research are reflected in the way in which our being-in-the-world cares about its own being, and makes its being an issue for itself (Heidegger, 1927/1967). Thus, the role of research is to nurture phenomenological openness and a lived, embodied knowing of the world. The hermeneutic penchant of this research approach values the embedded/contextualized interpretation (Gadamer, 1977). The personal aspect recognizes that human phenomena explored in psychological research are personal phenomena as they reveal our essentially personal relationship with the world, the others, and ourselves (Yannaras, 2007).

The personal dimension is constitutive to a phenomenological view and the act of disclosing (Yannaras, 2007; Wojtyla, 1979). Human beings exist not only as Dasein, and as bearers of the disclosures of being (Heidegger, 1927/1962), but they actively partake in the mystery of Being (Marcel, 1951) as ethical, communal persons (Wojtyla, 1979; Zizioulas, 2007). Their person is endowed with irrefutable dignity, uniqueness, openness to the spiritual (self-transcendence), potential for becoming, creativity and transformation, and capacity for encounter and moral action (Scheler, 1973; Wojtyla, 1979). The personal aspect draws on the understanding of the person as an “ethical being-to-and-for-the-other person” (Levinas, 1985; Wojtyla, 1979; Zizioulas, 2007), and as an “I” who encounters and is encountered by a “Thou” (Buber, 1970). Thus, personal phenomenology brings to the fore the relevance of the ethical call, social justice and personal encounter amidst embodied alterities (Ahmed, 2000) at the core of counselling psychology practice, and provides an existentially grounded response to the impetus for social justice and multicultural awareness as core values of counselling psychology as discipline (Canadian Psychological Association, 2009; Sincore & Ginsberg, 2015).

Personal phenomenological research. Building on this philosophical foundation, the personal phenomenological research approach expands and complements the focus of the current hermeneutic phenomenology undertakings (Finlay, 2011; van Manen, 2014), by bridging the receiving and uncovering of lived experiences and meanings with activating the

personal capacities of taking an ethical stand and responding or acting in the world (Längle, 2003a; Levinas, 1985; Wojtyla, 1979) in a manner able to acknowledge and offset the pernicious consequences of various systemic oppressive frameworks, such as racism (Gordon, 2007) sexism (Ahmed, 2006), or ethnocentrism (Ahmed, 2000; Yancy, 2008). At the core of this research approach is the personal encounter between researcher and research participants throughout the research process as well as the inner encounter of the researcher with one's self (e.g., reflexivity, phenomenological writing) and the dialogue among research team members during data analysis process and afterwards.

The act of the personal encounter is inherently intimate and thus represents both a significant possibility but also some risk. If anything, greater care must be exercised in adopting a personal ethic that strives to uphold the dignity of the participant. Thus, encountering someone's person in research begins with a particular attitude of heart or "posture of expectancy". This posture is one that acknowledges the other as mystery and gift, and as one to be encountered and received in their total "otherness", unadulterated by exoticizing the intrinsic differences (Ahmed, 2000; Levinas, 1985).

Reflections on encountering the person in research. A phenomenological research project exploring the lived experience of shame in the context of elite athletics will be used as a case study to illustrate how such posture was adopted during this project. A series of personal reflections written from a researcher's (Konieczny) first person perspective are shared along with some corresponding quotes illustrating examples of encountering the person in research. Adopting a first person perspective resonates with the personal I-Thou encounter between researcher and research participants.

Initiating contact with participants and planning for the subsequent interviews invited a reflective evaluation of my (Konieczny) willingness to be engaged with the topic of shame. As an emotional experience that is innately hidden and difficult to speak about, I (the researcher, Konieczny) questioned whether or not I would garner any significant insight about the phenomenon through formal interviewing. However, I was encouraged by the writing of Henri Nouwen (1979) who said in his book *The Wounded Healer*: "Who can listen to a story of loneliness and despair without taking the risk of experiencing similar pains in his own heart and even losing his precious peace of mind? In short: Who can take away suffering without entering it?" (p. 72). Through these words, I felt invited to encounter my participants in their suffering and join them in their experiences.

The research interview has great potential for the participant and researcher to simultaneously encounter one another and be impacted by each other's "otherness." I was invited to see the other through eyes of curiosity and wonder, while not desperately grasping after "knowing something" in particular. In other words, instead of the interview being a transactional exchange where information is gathered and extracted, an interview privileging an "encounter" is one where both parties are open to "seeing" each other as they are and exchanging impressions of that encounter in the context of a dialogue. Although this attitude of openness and the invitation to encounter cannot and should not override completely the power differential inherent within the researcher-participant dynamic, it provides the opportunity of personal encounter within the ethical bounds of a specific research context.

I therefore came to realize that I was playing a very active role in these interviews, and became occupied with questions such as: In what ways am I being moved by the presence of the other, my participant? What is moving me as he/she speaks about this topic? This posture

felt innately dignifying and honouring of both myself as the researcher as well as of my participant's experiences.

These preoccupations subsequently gave way to sharing how my participants' presence and words left an impression on me. In essence, encountering my participants changed me as the researcher and resulted in thoughts, feeling and responses that I actively engaged with and shared openly as they arose in me. For instance, after listening to one participant speak about their experience with a coach callously cutting them from the Olympic team, I commented:

It irks me and makes me mad even hearing about it, actually. It is very confusing and emotional...like you said, you could call it emotional abuse, or some kind of upheaval, or I don't even know what the word is.

Encountering this participant as they described their experience moved me to respond with frustration and to join them in anger for the ways that they were treated. This was a response that seemed both appropriate and validating. This exchange seemed to have also led to a deeper exploration of their experience of shame, both adding to the research objectives while also reverencing the experience of the participant.

This dialogue, however, was wrought with challenges at times. Speaking about experiences of shame was difficult. The analogy of two inexperienced dancers being asked to perform an unfamiliar dance captures this reality well. The dance, at times, was awkward, toes were stepped on, the rhythm seemed to be off, and although there were moments of rich connection, there were also just as many moments of disconnection. This proved puzzling but also highlighted the ever-changing nature of the encounters of persons, and begged me to ask the question: What conditions are necessary to facilitate encounter? Although there is a posture of openness that can be adopted, the complexity of the encounter of two persons is unique, such that one cannot replicate an "encounter".

Finally, encountering the emotionality of my participants played a crucial role in experiencing their unique "otherness", thus further illuminating the research phenomenon. When I encountered the emotional life of my participants, I encountered something deeply connected to their person, and I came closer to that which reveals something vital about them. According to Längle's (2011) theory on emotionality, emotions detect the personally relevant values in someone's experiences and thus give indication of what animates their life. Since feelings have an existential weight, they innately impact one's attitude towards life, and reveal one's personal preferences as the ground for decision making. Furthermore, Längle (2011) describes that the power of life is brought into existence through emotional experiences; it is through connecting with this vitality that we are moved by the person of the other. Hence, emotionality and relationality are inextricably linked. This example illustrates just that:

Participant: Yah it was like a collapse. Yah, I just felt I felt, crushed, like that was the last straw. That was what it felt like. It felt like, everything changed after that moment.

Researcher: I am broken. I am done.

Prt: Yah, like, I don't think I could have been able to say I'm done, cause I didn't know how to stop, at that point, but like I, I just felt, well that's it. Like, I, I felt like...

R: There is nothing after that...

Prt: ...there is nothing after that. I can't give you anymore.

R: I can't give you anymore and...the pain that you can't give anymore, it is not that I can't give you anymore and screw you, no, it was like I can't give you anymore and...what was the feeling?

Prt: I cast my eyes down, and like, just the wind was just knocked out of me and I think I probably felt like, just dejected, just like so...numbed, almost. I didn't know what else to do, and, and, yah, there is nothing left.

This dialogue highlights how both the participant and researcher encountered each other via their emotionality, and how in these moments of vulnerability the personal encounter is possible within phenomenological research.

Encountering the person in counselling practice. In the counselling context, more central than the question of whether the therapist can conceptualize the clients' suffering and offer sound interventions, reverberates the question, *do I see you?* Broken down more specifically, the therapist as the person seeing, asks, *do I see you?* And facing the "other" in the client, asks, *do I see you?* As therapists, we listen, take notes, draw genograms, engage in consultation and supervision, apply theoretical understandings to problems, and execute established interventions. But how do we train the capacity to come person-to-person, essence-to-essence in the therapeutic encounter?

If, as we stated earlier, it may come across as a bit presumptive to suggest that we have something substantive to offer to "reclaiming" the person, it may also come across as presumptive and simplistic to suggest that we can offer a counselling map for how to effectively encounter the person in counselling practice. This is not what we presume or intend to do. Instead, in this section, we offer an anonymized case illustration from counselling practice and therapeutic considerations for re-centering the client's personhood into the primary therapeutic focus.

Meet "Zoya."² Zoya is in her mid-fifties and serves as a spiritual leader in her community. Although she is in a high-ranking position in her religious tradition, she describes that this tradition continues to operate as a patriarchal system in which there are relatively few other female leaders. Zoya entered her counselling session prepared to ponder which themes she wanted to explore in the session that day. At first, she brushed off the fact that there had been a situation from work that had annoyed and "gotten to her" for the last few days. However, it became apparent to Zoya and to the therapist (Kwee), that Zoya continued to be preoccupied by this situation, and that it warranted time and attention.

Zoya recounted that she had been tasked with the responsibility of conducting the marriage ceremony for the son of a national-level leader in her religious tradition. This had included a season of preparation, in which she had provided spiritual accompaniment to the family in preparation for the marriage ceremony. During this time, Zoya had felt a sense of personal vitality, and was inwardly connected to her own personal and spiritual gifts that could bless this family. Indeed, she had resonance with the inner speaking of 'I' within her, and felt free in living out her sense of calling. She also described an inner vital feeling of confidence about the personal words that she would share at the ceremony.

Then came the actual ceremony. In the ceremony, with hundreds of people in attendance, Zoya described that she suddenly felt aware of the perceived critical gaze of a select few other high-ranking leaders. She perceived these individuals as power brokers of an "old boys club" in which there was not a welcome space for her gifts and leadership. Within the contrasting context of the therapy space where Zoya was listened to and received as a unique and precious

² Zoya's case is an example, developed as a composite of real clients seen in Dr. Kwee's clinical practice, and whose therapeutic work captures the dynamics of this topic. The name and identifying information are fictional.

“other” as she recounted this event, she looked at the therapist and stated her realization, “I completely stepped out of myself.” She then offered a description of being functionally “saved” at the event by the written religious protocols that she could follow, even as a shell of herself.

Zoya described shifting from an inner sense of connectedness and knowing to acting absently in a role. Following the ceremony, she describes how she interacted with the guests in a way that was vacant of herself, without personal encounter. She acknowledged that following the protocols during the ceremony and the way she engaged people during the ceremony adequately fulfilled all external expectations for the role. Yet, there was a persisting sadness that something was “off” inside. Zoya expressed an awareness of shame in the moment that led to her protective move of stepping outside of herself during the marriage ceremony. She had objectively fulfilled expectations, but the vital feeling of her personhood flowing through her was blocked.

What might we do to support Zoya therapeutically? Among accepted therapeutic approaches, the therapist may seek ways to foster Zoya’s resilience to the shame that she was experiencing, to normalize what happened, and to provide reassurance of her actual capabilities. In this instance, in the intimate context of the counselling encounter, I (Kwee) experienced a sense of deep sorrow in response to Zoya’s experience, captured in Zoya’s own declaration that she had “stepped out of herself.” The part in her that was free and flowing and trusting of her inner knowing and being had been constricted. From this personal place of being touched in sorrow, I was able to see a glimpse of Zoya that would have been missed in reassurances or cognitive reframing. In fact, this encounter revealed that Zoya had been lost in a moment when she had the potential to experience a fulfilling sense of being her whole self. She had stepped out of herself and had lost intimacy with herself.

As her therapist, there was part of me that was fooled by Zoya’s competence and I knew that there was no objective failure on her part. This part of me could have easily offered encouragement, reassurance, and normalization of what had happened. There is another part of me that feels enraged by the dynamics of systemic oppression and I was provoked that Zoya’s unique personhood was being silenced by a patriarchal religious system. This part of me could have easily moved the session toward a rallying cry for social justice and motivating Zoya toward social action in this regard.

However, I remember distinctly a particular moment in which our eyes met, and I was gripped with sorrow. It appeared like a weight and constriction in the core of my body as our eyes met and I recognized that I physically felt an echo of the pain lingering in Zoya’s eyes. In this encounter I knew I wanted to honour her personhood by taking her seriously and allowing myself to feel the grief with Zoya. In fact, this particular incident connected to a deep and painful theme in Zoya’s life of being stepped over and of stepping over herself. I felt inwardly that it deserved our devoted attention. While there is an important place for social action as a response to this systemic silencing, Zoya was well equipped in this way and already embraced a clear stance of resistance through the way she lived out her role and embraced advocacy for others who had been historically marginalized within her religious system. Public social action was something that we regularly explored therapeutically. However, meeting Zoya in this moment appeared to me as an opportunity for a sort of *intimate activism*, which occurred in the activity of taking her personhood seriously. Social justice in this encounter was embodied in the person-to-person encounter between us.

The question, “*do I see you?*” led me as therapist to a deeper level of seeing: seeing the obscured place where Zoya’s unique essence had been stepped over. As I verbalized my felt

sense of sorrow, Zoya's grief deepened. She acknowledged that, even though nobody was concerned about her performance in this role, she had actually let them down, too. She had so much more of herself to offer and had even felt a sense of spiritual inspiration in bringing the unique gifts of her person to the role. She had let herself down and she had let the others down.

By continuing to turn towards this grief, Zoya came more into a personal intimate encounter with her own inner, free self, and connected with the sense that her actual personhood, not just her role, was precious to her. Indeed, agreeing that she had, in a sense, failed, honoured the mystery and gift of the precious uniqueness of who Zoya was; her personhood was not constrained by the religious protocols that she could competently yet absently follow. The tone of the session was sobering more than encouraging. Zoya left the session not with the benefit of a pep talk that normalized and validated the discomfort of her experience, but in a quiet and reflective intimacy with herself.

In EA, personhood is understood to be fundamentally enabled for dialogue, and personal meaning is accessed through the subjectivity of two persons entering into dialogue with each other in a personal encounter. In Zoya's example, by giving space for Zoya to explore what had felt "off" for her in what she initially brushed off as just a work problem resulted in a precious opportunity to encounter Zoya herself. Most importantly, in this dialogue, Zoya's grief turned her towards the flowing, inwardly speaking 'I' of her own person. We hope that this brief summary of a therapeutic encounter illuminates how the methods of Existential Analysis, aimed at dialogue, can provide a meaningful pathway to the person in counselling and psychotherapy.

Concluding Comments

EA understands the person as that aspect of human beings that refers to their pure potentiality, the flow within and through us that is never fully actualized, but always in the process of becoming (Längle, 2003). We come upon this inner flow when we turn inwardly to listen to our own inner speaking, when we encounter another human being, and when we are called to respond to the injustices and the suffering encountered in our world. In responding to the ethical call of the Face of the Other (Levinas, 1985), our person becomes the epicentre for encountering the embodied stranger as ineluctable, irreducible difference (Ahmed, 2006), and for social justice (Pedersen & Altman, 2015). As such, the EA understanding of the person resonates very well with core values of the profession of counselling psychology, such as social justice and multiculturalism (Sinacore & Ginsberg, 2015), and offers practical opportunities for multicultural and social justice focused counselling practice.

A unique contribution of the EA understanding of the person is that it may offer a counterbalance to the externally motivated impetus for social justice that, at times, may be easily hijacked by purposeless activism or reactive advocacy that bypass the reflective component of the personal engagement. Hence, this perspective offers a unique possibility to bear witness and integrate both the intimate and overt forms of social resistance and activism as personal, authentic and fully assumed acts of social justice.

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A Family Picture of Just One? Including Career Health, Engagement, and Identity into the Representation of Student Well-Being

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Abstract

Trending discourses in post-secondary student health are relevant to the practice of counselling psychologists. Over the past decade, conversations on well-being have been dominated by mental health issues as if we are looking at health with a high-resolution zoom-focus instead of a wide-angled lens. The focus on mental health was necessary, but research is showing that we need to reconnect mental health with its physical, social, spiritual, and intellectual relatives. Further health areas like career development, engagement, and identity also need to be added back into the frame. Career development can be understood as a unique health construct in its own right and is especially relevant to the post-secondary sector. The association between student engagement and success has been well studied, and the link with overall well-being is being uncovered. There has been a corresponding call for institutions to dismantle colonization practices and create opportunities for active citizenry among the student populace. Identity constructs are also being linked with health, including intersectionality, fluidity, and non-binary facets. Developments in each of these domains challenge the status quo of what it means to be healthy, and pulling back from the singular focus on mental health will allow the complete picture of student health to come into view. Psychologists working with this dynamic population are invited to consider how these shifts in the health conversation impact their counselling practice.

Keywords

post-secondary, health, counselling psychology, students, emergent adults

Post-secondary study offers incredible opportunity for personal growth, intellectual development, and social engagement. When describing the emerging adult, Arnett (2000) noted that this distinct developmental stage is characterized by the opportunity to explore identity, interests, and possible life directions before the restraints of employment, marriage, or parenthood take hold. A broad array of research from psychology, neuroscience, political science, and history (e.g., Jensen & Ellis Nutt, 2015; Nelson & Padilla-Walker, 2013; Thompson, Blair, & Henrey, 2014) suggest that the emerging adult is primed to be innovative, visionary, creative, curious, driven to take risks, and motivated to question the status quo (Dougherty & Clarke, 2018). As cohorts of Millennials

and Gen-Z students have come through the post-secondary system, a disruption has flowed through conversations about how students are to be engaged, and how identity and health are to be defined.

While the outcomes of emergent adulthood are described as generally positive (Arnett, 2000; 2007; 2013; Galambos, Barker, & Krahn, 2006), this stage of life is also associated with angst, vulnerability, and uncertainty (Nelson & Padilla-Walker, 2013). Within a university or college context, stress among students is high, and presenting mental health concerns can be complex (Crozier & Willihnganz, 2005). The emphasis placed on mental health programming for post-secondary students has been welcomed, but the strength of the movement has created a conversation that often excludes other important facets of overall well-being. It is as if the other elements of health have been cropped out of the picture. The post-secondary landscape—which was once full of information about nutrition, exercise, substance abuse, spiritual health, and sexual education—now appears to be more and more exclusively constructed as a discourse on mental health. This paper flags a need for a more holistic definition of health that brings physical, career, mental, and social elements back into the frame.

Research across the post-secondary sector suggests that additional elements of health need to be invited in to the conversation. For example, campus leaders emphasize active citizenship and express a need to foster a sense of belonging on campus. Binary definitions of gender are being challenged, and individual identity is more clearly understood as involving an array of intersections, all of which impact health. The emphasis placed on reducing stigma, increasing peer-to-peer supports, and teaching about mental health issues was largely empowering at first, but over time has resulted in a somewhat alarmist (and ironically stigmatizing) climate, resulting in longer wait times for professional mental health interventions for those who need them most. Further, the movement has excluded other important aspects of overall well-being. A brief look at the evolution of this health discourse suggest a need to pull back from the zoom focus on mental health exclusively to capture the broader picture of what it means to be healthy.

Mental Health

Perhaps it is no surprise that the dialogue around mental health converges on a discussion of stress. Within a post-secondary context, striving for success is quite demanding. Students are required to demonstrate their learning, stretch their capacity, rise to the pressures to perform, and manage stress related to achievement, while simultaneously navigating developmental milestones on the pathway through emergent adulthood (Arnett, 2007). Positive stress can be a motivator, providing impetus and energy to help us achieve our goals. The iconic Yerkes and Dodson study (1908) showed that peak performance requires stress, and later Hanson (1986) coined the term the *joy of stress* to capture that experience. The concept of flow goes further to illustrate the psychological experience of being in this state of positive stress and high productivity (Csikszentmihalyi, 1990; 1994).

However, too much stress, or psychological distress, has been shown to contribute to many kinds of negative outcomes including reduced academic performance (Palmer, 2013), attrition, onset of psychiatric disorders, substance use, decreased physical health, and diminished attention to self-care including neglect of exercise or poor diet (Davison, et al., 2012; Robinson, Segal, & Smith, 2019). Other outcomes of high stress could include job difficulties, relationship breakups,

and even suicide (Hartley, 2011; Vázquez, Otero, & Díaz, 2012). In a survey involving 117 higher education institutions, 32% of undergraduate students reported that stress was the most common health factor negatively impacting academic performance (Byrd & McKinney, 2010).

Initially, using a traditional medical model of pathology, mental health issues were placed along a linear continuum from illness-to-wellness. One's mental health could be plotted along the continuum, and impairment labels such as mild, moderate, or severe would follow. This unidimensional conceptualization was challenged by Keyes (2007) who went on to develop a dual-continuum model of mental health and flourishing (Westerhof & Keyes, 2010). Here *mental health* is described as a mental state of high functionality that is available to every individual, regardless of whether or not a mental illness is present. This model acknowledged that those who have been diagnosed with a mental disorder can also flourish, manage symptoms effectively, and live productive, happy, meaningful lives. Mental health is therefore understood to be more than the absence of illness. Further, this dual continuum model of mental health also notes the possibility of floundering in life, even when one is not mentally ill (Westerhof & Keyes, 2010; Provencher & Keyes, 2011).

The World Health Organization (WHO, 2013), referenced this model, and went on to define mental health as, “the ability for people to realize their potential, cope with the normal stresses of life, work productively, and contribute to their communities” (WHO, 2013, p. 5). In Canada, the first national Mental Health Strategy, launched in 2012 (Mental Health Commission of Canada, 2012), included a proactive public health philosophy and suggested that good mental health should be cultivated within families and across the public education system. Research among samples of university and college-aged students suggests that both the complexity and number of individuals with mental health issues are on the rise (Blanco, Okuda, & Wright, 2008; Canadian Association of College and University Student Services & Canadian Mental Health Association, 2013; Kadison & DiGeronimo, 2004). In the context of violent acts that have happened in schools and in acknowledgment of young people who die by suicide, mental health strategies have developed as a means to mitigate risk. Improved mental health as an outcome of higher education has been trending. To this end, the Mental Health Commission of Canada (MHCC) is in the progress of creating a set of post-secondary student standards regarding mental health (Linden, Gray, & Stuart, 2018).

The movement to address the mental health crisis on higher-education campuses has been met with minimal debate. Some investigators note that the incidence of mental health concerns is confounded when words like “depressed” or “anxious” are used to describe experiences of feeling low, not happy, worried, or stressed (Brown, 2004; Hunt, Wisocki, & Yanko, 2003; Rossiter, 2017). The intention seems to be to increase awareness and reduce stigma, but for others this is perceived as minimizing what it means to live with a chronic condition or clinical symptoms (Maj, 2011; Moses, 2011). Across the post-secondary sector there has been a rise in peer-to-peer programming, mental health coordinators, and a variety of campaigns sponsored by private organizations, corporations or government funding. Concurrently students have experienced a reduction in access to specialists: post-secondary student counsellors, psychiatrists and other practitioners positioned to treat mental illness or complex mental health issues (Gibbons, Trette-McLean, Crandall, Bingham, Garn, & Cox, 2018). It is ironic that so much concern is expressed around the issue of mental illness at the same time that services are being reduced. Some suggest

that the mental health *crisis* is a discourse that benefits corporations and private agencies without providing substantive benefit to the students most impacted by mental illness diagnoses (Phillipson, 2017; Price, 2011). A less cynical reflection notes that the movement remains generally silent on aspects of health beyond the mental domain.

Broad View of Health

For instance, the Guide to a Systemic Approach for Post-Secondary Student Mental Health (CMHA & CACUSS, 2013), does not mention exercise, nutrition or career development in its 40-page report. Physical health of course impacts a person's ability to cope with the strains of being a post-secondary student. It also has a direct impact on resilience and other aspects of overall health (Downs & Ashton, 2011; VanKim & Nelson, 2013). Nutrition, exercise, and sleep set the foundation of a healthy lifestyle, and the transition to university is known to challenge pre-established habits. For example, in a study that looked at physical activity levels among a sample of Canadian students, researchers found that 61% met minimum physical activity standards in grade 12, but that number dropped to 44% after the first year of university (Bray & Born, 2004).

University students seem to blend physical behaviours and mental/emotional attitudes together when describing their overall health. For example, in an analysis of National College Health Assessment (NCHA) survey data from one Canadian university (Flessati & Miller, 2014), self-reported health behaviours and attitudes of students with "excellent" overall health (E group) were compared to those who reported "very good" overall health (VG group). No significant differences between groups were found when looking at the prevalence of mental illness or levels of self-reported stress. Self-reported frequency of tobacco, alcohol, and drug use were also equivalent between groups. The factors that were different between the VG and E groups included reported frequency and duration of exercise, and intake of fruits and vegetables (with the E group reporting significantly more of these behaviours). Those who reported excellent health were also more likely to see stress as a challenge, reported having a stronger sense of direction and meaning in their daily life, and were more likely to report that they felt they made a valuable contribution to their community. Taken together this suggests that students are reflecting on their health across multiple dimensions, with less emphasis on mental illness or stress levels, and more emphasis on exercise, nutrition, and meaningful engagement.

Moving forward towards a broad, wide-angle, holistic model of health that acknowledges the importance of mental health is required. Such an approach would provide individuals opportunity to customize both their definition of health and modes of intervention. For example, many indigenous medicine wheels (e.g., Pidgeon, 2008a; 2008b) include at least four areas of health (emotional, mental, physical, and spiritual). Other holistic models include financial health, environmental safety, and social domains, or factors relating one's relationship with their family, community, or nation (Myers, Sweeney, & Witmer, 2000; Pidgeon, 2008a; 2008b). Within the post-secondary domain, recognition of career development as part of the health spectrum would also be warranted.

Career and Health

Career development refers to the ongoing process of managing learning, training, leisure and work towards a “personally determined and evolving preferred future” (Canadian Council for Career Development [CCCD], 2012, p.2). From this perspective, post-secondary studies can be understood as part of one’s career: a series of jobs involving learning, training, and work. Career success has been defined as full time employment, salary growth, progression or promotion, and minimizing working hours while maximizing income (CCCD, 2012). Career success can also include satisfaction, optimism, flexibility, and having a sense of accomplishment on the job (CCCD, 2012; Neault, 2002). Flourishing in one’s career can thus be easily linked with a holistic wellness framework.

A model has recently been developed by university-based counselling psychologists (Miller, Flessati, & Ciccocioppo, 2018) to illustrate how career health can be cultivated. In the absence of salary increases, high financial return on time invested, or possibility of promotion, individuals can still enhance job satisfaction, strengthen transferable skills, bolster their network or find meaning in their career. Like the Dual-Continuum Model of Mental Health (Westerhof & Keyes, 2010; Provencher & Keyes, 2011), this Career Health Model (Miller, Flessati, & Ciccocioppo, 2018) illustrates that there is a risk of feeling bored or stagnant regardless of type of work. Career health is a construct that can be intentionally nurtured and developed.

Conceptualizing career development as part of one’s health would encourage targeted interventions and programming. While in school, career health could be fostered by strengthening study habits to cultivate a strong work ethic. Developing the ability to meet deadlines and manage competing priorities are relevant examples of transferable skills that foster career health. Cultivating optimism, flexibility, curiosity, and the ability to network or take risks have also been associated with career success (Neault, 2002) and health (Keyes, 2007). Some attitudes and behaviours that foster mental health seem associated with career health as well. Finding meaning in one’s work, making a contribution to a community and having a sense of affinity or belonging are associated with both health domains. Taken together career health and mental health appear to be related, but distinct, constructs.

Being able to manage uncertainty is also linked with career health and academic success. In longitudinal studies of undergraduate cohorts (Miller, Smith, Best & Hellsten-Bzovey, 2013; Miller, Rude, Simpson, & Whitehead, 2018) career uncertainty was shown to be a strong predictor of university drop-out, especially among students enrolled in degree programs. Other studies have also found similar effects of career uncertainty (Ketonen, Haarala-Muhonen, Hanninen, Wahala, & Lonka, 2016; Lewis & Hodges, 2015).

The issue seemed not to be the uncertainty itself, but rather the perception that uncertainty was abnormal within the post-secondary context. Uncertainty could be addressed by accessing resources and gaining information to inform decisions. For example, many students enter into courses or programs without understanding what they entail (e.g., Connolly et al., 2016), and once enrolled, may find it difficult to switch majors due to intrapersonal pressures or institutional constraints. Seeking support during times of uncertainty would help to normalize that experience, and may provide emotional support to manage the experience of not being sure. Developing

resilience to persevere through times of ambiguity also relate to career success.

Engagement

As health frameworks evolve, so too does our understanding of student engagement. According to Tinto's theory of student retention and success, key determinants of academic persistence include both academic and social integration (Tinto, 2012; 2015). The higher the integration, the more likely the student is to be committed to the institution and to the goal of graduation. The related student involvement theory developed by Astin (1999) linked physical involvement and psychological investment together, noting again that the quality and quantity of these would be strong predictors of student success. Social support is strongly linked with well-being generally (Collins, Coffey, & Morris, 2010; Paulisová, et al., 2014; Tao, Dong, Pratt, Hunsberger, & Pancer, 2000) and with academic success specifically (Wilcox, Winn, & Fyvie-Gauld, 2006).

Supporting a student to integrate into the social world of the university is just as important as academic integration (Heron, Pidgeon, Ksionzena, & Miller, 2019; Lewis & Hodges, 2015; Wilcox, Winn, & Fyvie-Gauld, 2006). Once the business of creating new friends, managing old-friend transitions, and joining with a cohort has been established, stress is often reduced and/or resources for managing stress are enhanced. Students link these community experiences with overall health. In an analysis of the national NCHA data discussed above (Flessati & Miller, 2014), students who categorized their health as "excellent" also reported significantly higher levels of happiness over the last month compared to those who categorized their overall health as "very good". Happiness could of course be the result of excellence in health, but interestingly those in the E group also said they were significantly more interested in life, felt they could contribute to society, and felt they belonged. When social supports are in place, students are much more likely to thrive in university (Lewis & Hodges, 2015; Pancer, Pratt, Hunsberger, & Alisat, 2004). Linking the student with spaces and people who will support their emotional and spiritual development is important, and cultural connections can be essential (Barry, Nelson, Davarya, & Urry, 2010; Heron, Pidgeon, Ksionzena, & Miller, 2019). Many students indicate being aware of campus resources, yet state that they are unlikely to use these services (e.g., Einsenberg, Golberstein, & Gollust, 2007; Heron, Pidgeon, Ksionzena, & Miller, 2019). The National Comorbidity Survey Replication (NCS-R) revealed that less than half (41%) of those who experienced a mental disorder accessed services, with a median delay of 11 years between the onset of a mental health disorder and first access to services (Kessler et al., 2004; Kessler, Berglund, Demier, Jin, Merikangas, & Walters, 2005). This is particularly concerning since the age of onset of many chronic mental health disorders coincides with the age at which many young adults pursue higher education (Kessler et al., 2005). Results of a pre-post-follow up mixed methods study involving students who accessed an Early Support program during their first year of university suggest that this kind of individualized outreach can positively impact willingness to access campus services across an array of supports including mental health, career, financial, advising, etc. (Rude, Boczek, & Miller, 2019). To further increase ease of access, many academic services have been integrated into course curricula, or may be offered in a peer-to-peer model.

Engagement from these perspectives puts the onus on students to get involved with student life inside the classroom and beyond. The alternate discourse on engagement splits responsibility between the student and the institution, or emphasizes the institution's responsibility to create

spaces where students can meaningfully engage. Institutional strategic plans from Canadian institutions are beginning to cite student engagement as a desired outcome of higher-ed (Zhao, 2011). Creating better citizens has also been identified as a priority (Ahier, Beck & Moore, 2003; Billings & Terkla, 2011; Hollander, 2011), although the meaning of this is unclear. While the term is ancient, definitions of citizenship are varied and measurement of students' achievement of citizenship is fraught with challenge and nuance.

In a post-secondary study qualitative analysis of individual interviews uncovered differences in the way student-leaders and administrative-leaders thought about citizenship (Miller, Connolly, & Racy, 2015). Students were more likely to define citizenship as social, local, and highly participatory, compared to a more duty-based, political, and global construct described by administrators. In a follow up study using focus groups of students in non-leadership roles (Connolly & Miller, 2017), qualitative content analysis uncovered six themes that captured how these students thought about citizenship: taking pride in their institution, valuing community, linking individual contributions to the greater good, valuing diversity/respect/inclusion, being a good person who helps individuals, and seeing the university as having responsibility for fostering campus citizenship.

Engagement with place, with the land beneath our feet, has been emphasized as we work to implement the recommendations made by Canada's Truth and Reconciliation Commission. Indigenization movements across higher-education call-out the ongoing colonization in our mainstream systems, and invite engagement with historical and contemporary truths regarding the treatment of Indigenous peoples. In their book, *Pulling Together*, authors document the ways that the academic curricula,

... have been developed to privilege the dominant, Euro-Western culture through the content, approaches to teaching and learning, and values about knowledge. The experiences, worldviews, and histories of Indigenous Peoples have been excluded in education systems, because they were seen as less valuable or relevant... This exclusion and misrepresentation was one of the most damaging impacts of colonialism and one of the strongest tools of assimilation. (Antoine, Mason, Mason, Palahicky, & Rodriguez de France, 2016, Section 1).

These last points link with researchers who criticize traditional retention (e.g., Pidgeon, 2008a; 2008b, Shotton, 2008; Shotton, Lowe, & Waterman, 2013), for putting too much emphasis on the students' *need to adapt*, rather than the institutional *need to respond*. To promote health and well-being, the discourse on engagement must include the person, institution, and place, in a holistic way that appreciates identities, histories, and truths.

Identity

In addition to engagement, citizenry, and culture, conversations about identity among the post-secondary emerging adult population have become increasingly complicated. This cohort has questioned binary descriptions of gender and has demanded that space be created for non-conforming, non-binary identities. In a therapeutic setting, transgender clients have identified numerous factors that were unhelpful, including having to teach therapists about transgender issues

(Benson, 2013). Having to explain the difference between sexual orientation and gender identity was a barrier to services (Benson, 2013) and experienced as a source of frustration. The multiplicity of gender identity combined with orientation, sex, and gender roles has been well described by the Genderbread Person motif (Killerman, 2017) and is well embedded in social justice competencies.

Although campuses (and other institutions or establishments) are moving towards non-gendered language, washrooms and policies, ignorance, bias and fear of disclosure are still realities. For example, in 2009, a survey was made available to all students enrolled in a medical degree across the USA and Canada. Respondents were asked about their gender identity and sexual orientation, whether they had publically disclosed their identity and if not, what the reasons were for concealing this part of themselves (Mansh, et al., 2015). Results showed that sexual identities were more likely to be disclosed (70%) than gender identities (40%). Reasons for concealment included fear of discrimination and lack of support.

As Callis (2011) describes in her dissertation, “non-binary identities such as bisexual, queer, and pansexual provide a critical site for the investigation of how sexual identity is both constructed and de/reconstructed” (p.219). This study attempted to describe the fluidity of identity, but also acknowledged the agency individuals have to interpret themselves and the society around them. Christodoulou (2010) argues that identities are not so individually defined. Rather she asserts they are constrained and shaped by what’s possible. Norris (2016) explored how job loss or failure impacts identity, and discusses how people link who they are with what they do. Identity is also impacted by how we are treated. For example exposure to racism can shape identity and damage health (Ziersch, Gallaher, Baum, & Bentley, 2011). Such external factors and experiences combine with individual choices, exposure, and internal constructs in an ongoing formation of identity (Christodoulou, 2010). Identity is experienced independently from mental health and subjective well-being, yet stands as part of the overall health picture.

Conclusion – Whole Picture Health

This paper reviewed trending discourses in post-secondary student health which are relevant to the practice of counselling psychologists. Counselling psychologists will be interested in the expanding discussion of health that reintroduces physical, spiritual, social, and financial domains, captures career development, and links engagement and identity with overall well-being. A broader picture that brings all of these elements into focus would be in service to our understanding of health.

Post-secondary students have been leaders expanding our understanding of identity beyond culture and sexual orientation. Space is being made for non-binary, fluid intersections of identities within student services and campus policies. Themes of equity, social justice, and inclusion have taken up prominent positions in many post-secondary institutional strategic plans. With respect to citizenship and engagement, students are demanding access to resources, and are taking hold of opportunities to engage with their communities in a meaningful way. Student counsellors are well positioned to support these emerging adults, to normalize the stress of this developmental stage, and provide support to assist with their learning. Counselling psychologists working outside of the post-secondary context will likely see evidence of these trends in their own practices as emerging

adults enter the workforce, the health care system, and the private and public employment sectors. A holistic model provides a clearer picture of what it means to be healthy and guides practitioners in tailoring assessment, interventions, and resource plans. This picture of health absolutely involves mental wellbeing, but to be complete, the other health relatives must be brought back into the frame.

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Action-Based Psychosocial Reconciliation Approach: Canadian Counselling Psychological Contribution to Interpersonal Reconciliation in Post-Genocide Rwanda

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Abstract

The author introduces rural communities in post-Genocide Rwanda, where needs for interpersonal and psychosocial reconciliation between survivors and perpetrators of the 1994 Genocide against the Tutsis are grave. The author illuminates unintended yet common side effects of forgiveness-seeking as a method of interpersonal reconciliation, including the dignity injuries this approach has brought to survivors. An overview of an alternative approach to interpersonal reconciliation, termed Action-Based Psychosocial Reconciliation Approach, will be introduced along with its conceptual-empirical foundations and beneficial effects. The second half of the paper discusses the author's personal reflections on how his training in the context of Canadian counselling psychology has shaped and continues to guide his ongoing work supporting community psychosocial reconciliation in Rwanda. The author shares his views on the relational signature of the counselling psychological approach, its applied nature, a directionality of scholarship, its harmonious fit with the field of mental health services research and praxiological epistemology, and ethicality of engagements. The author concludes with a call to fellow Canadian counselling psychologists for their active participation in international/global endeavours.

Keywords

interpersonal reconciliation, Morita therapy, contact theory, praxiology, mental health services research

Conducting international research can be challenging yet rewarding. It often encounters uncontrollable barriers, disappointing yet unavoidable silly little mistakes, necessary redundancies and repetitions, meaningful wastes, and daunting unfamiliar procedures that just cannot be re-routed or bypassed. However, it is not without immense and delightful unexpected rewards, joyous successes and serendipitous discoveries, a constant supply of eureka moments, new and heartwarming encounters, a wealth of opportunities for growth and learning, and life-changing moments. It welcomes us, counselling psychologists, to also pause and reflect on givens of our discipline and demands us to reorient ourselves to look closely into our own theory, research, practice, and education. By throwing ourselves into the challenge of international work, and relinquishing all we have gained around us as armours of our discipline, we find in it, an ample potential to re-examine, re-evaluate, re-appreciate, challenge, and, by the end of the day, advance

our discipline. This paper begins with a narrative introduction to the beginning, overview and brief history of my reconciliation project in Rwanda. Then I will share my personal reflections, based on my journey in Rwanda, on the unique contributions Canadian counselling psychology could potentially make in the lives of people around the globe through international/global research endeavours.

Rwanda Project Background

In April of 1994, the genocide against the Tutsis occurred in Rwanda. UNICEF (Chauvin, Mugaji, & Comlavi, 1998; Dyregrov, Gupta, Gjestad, & Mukanoheli, 2000) reported that between April and July, approximately 800,000 to 1 million people of Tutsi ethnic background were systematically murdered by Hutu extremists, the *Interahamwe*. Subsequently, in 2003 a presidential decree was released to pardon and reintegrate genocide perpetrators/prisoners back into their community. The 1994 genocide was characterized as an ‘intimate genocide’ in which families, relatives, friends, and neighbours sharing same village/community turned to kill each other (Staub, Pearlman, Gubin, & Hagengimana, 2005). The 2003 release of prisoners created a rare circumstance (in the context of post-war restitution) in which genocide survivors must live side by side with the returning perpetrators to share the same home community. Consequently, community reconciliation has become a national priority of Rwanda (National Unity and Reconciliation Commission, 2014).

The Dignity Injury and the Birth of Rwanda Reconciliation Project

In close collaborations with Prison Fellowship Rwanda (www.pfrwanda.com) and Rwanda National Unity and Reconciliation Commission (www.nurc.rw.gov), I have been given an opportunity to support community reconciliation efforts in two rural villages of Rwanda. Back in 2009 when I first travelled to Rwanda, I was offered to observe a session of forgiveness-based reconciliation counselling practised then as a way to reconcile survivors and perpetrators in rural communities. Under this model, a forgiveness counsellor provided teaching of the Bible and “prepared” a survivor and her perpetrator to meet for a forgiveness-seeking session. In the session, the counsellor encouraged the perpetrator to confess all “evil deeds,” apologize and ask for forgiveness from the survivor. The counsellor then encouraged the survivor to forgive. Despite her strong spiritual value of giving forgiveness, the survivor could not forgive the perpetrator, perhaps understandably. Hinson’s (2009) documentary film also captured another survivor’s moment of unforgiveness. She testified:

Forgiving or not forgiving him, it’s all the same to me. If I forgive, I still have no peace. If I don’t forgive, it’s the same. What’s inside me will never go away. I don’t know if anything can remove what’s inside of me!

I was told that the case of unforgiveness was not uncommon and that they just need to be encouraged and supported to let go of their bitterness through forgiving. Then the counsellor continued to hold subsequent sessions until survivors could forgive.

As a mental health professional trained in Canada, my initial reaction was anger. “*How dare.*” I immediately questioned the fairness of this asking. I also questioned the approach itself and counsellors’ insistence on forgiveness. “*Who in the first place determined that they must forgive?*”

I understood that the majority of Rwandans were and still are Christian. According to statistics at that point in time, 56.5% of Rwandans were reported Roman Catholic, and 26% were Protestant (United States Bureau of Democracy, Human Rights, and Labor, 2007). Especially post-Genocide, survivors held dear beside them the teaching of the Bible. Sometimes, it was all they had left to cling onto to stand, cultivate, and continue living their lives. As pious Christians, they knew that it was the “right” thing to forgive, but their very heart did or could not allow them to. The survivor I met did not shy away from speaking up, “You have taken everything away from me. Now you want forgiveness from me? I am not going to forgive you today.” Later on, I learned from survivors I worked with, that one of the reasons they could not forgive initially was because they believed it would dishonour their perished loved ones. A survivor shared, “If I forgive him, I would let go of my father.” It was as though, I heard their voice from a place of inner dignity that also questioned the fairness of granting this “divine gift” of forgiveness.

Tragically, the consequence of not being able to forgive as a faithful Christian was grave for many. The survivors continued to be tormented not only by the initial confrontation by their perpetrators but also by their moral dilemma between the religious virtue (of forgiving) and their candid emotional experience (of not being able to forgive). For them, the inability to forgive could really mean that they are not good Christians. They could end up subtly oppressed or marginalized with the label that they are the “unforgiving” ones. But for them, forgiving the perpetrators would have just meant a dishonour to their own dignity, and perhaps more importantly to the dignity of their entire family who has been killed by the very perpetrator begging to be forgiven. “*What a setup.*” It occurred to me at that moment that there is an element of dignity injury exerted by this forgiveness-seeking approach and the unfair set-up. I clearly witnessed the irony of the iatrogenic outcome of a so-aimed “moral” approach leading to the very dignity injury. My strong initial reaction (to which I am still to-this-date holding onto) led to the development and implementation of my Action-Based Psychosocial Reconciliation Approach (ABPRA) (Minami, 2014).

Action-Based Psychosocial Reconciliation Approach

Action-Based Psychosocial Reconciliation Approach (ABPRA) (Minami, 2014) was developed by conducting a series of narrative literature reviews to logically model process and mechanisms of change underlying interpersonal reconciliation. The mechanisms of change underlying ABPRA as an interpersonal and psychosocial reconciliation approach are founded on (a) action-based therapeutic principles of Japanese Morita therapy (Morita, 1928) and (b) principles of contact theory (Allport, 1954; Amir, 1969; Pettigrew, 1998) in fostering attitudinal change between conflicting parties. ABPRA was developed as an alternative approach to forgiveness-based reconciliation counselling (FBRC). In the FBRC, perpetrators ask survivors to *forgive*. However, in cases where survivors are unable to forgive, ABPRA offers an alternative to forgiveness-seeking, and instead, perpetrators offer survivors if they would consider *receiving* service from them as concrete acts of their apology. ABPRA is designed to circumvent the unfairness and the set-up for dignity injury of coercing or insisting on forgiveness to survivors discussed earlier. ABPRA invites survivors and perpetrators to refrain from futile or harmful forgiveness-seeking, and to acknowledge, recognize, respect, and honour unforgiveness. It avoids further perpetuating dialogue and/or set-up sessions for forgiveness-seeking. It instead welcomes the dyads to collaboratively explore possible ways to engage in practical, helpful, and meaningful actions/interactions for the service of survivors. Survivors are then given ample time to consider

the offer. In cases where survivors grant the opportunity, the perpetrators and survivors then engage in sharing labour (e.g., harvesting corn, processing ground nuts, weeding cassava field, brick making) in service of survivors. Perpetrators offer their labour as an impetus to invite survivors to have new *experiences* (of receiving help and support) with the perpetrators. Literally, they engage in reconciliation in action. Under the ABPRA model, it is the new emerging shared-experience with each other that evokes the change, but not the intervention (e.g., forgiveness-seeking) or intervener (e.g., forgiveness counsellor) per se. ABPRA reconciliators optimize the environment and parameters of engagement, nurture their optimal course of reconciliation experience by allowing the two to engage, and watchfully witness their shared experiences.

Field Piloting and Beneficial Impact of ABPRA

ABPRA was implemented in two remote villages of Rwanda between 2011-2013 in collaborations with Prison Fellowship Rwanda and Rwanda National Unity and Reconciliation Commission. I wish to acknowledge here that I, as a reconciliator-researcher present at the villages, affected the relational dynamics between survivor and perpetrator dyads. I was aware of myself as a foreigner who lacked contextual knowledge and experience and might not be welcome or accepted. In preparation for this research, I lived in Rwanda for a year. It took me time to build rapport with survivor-perpetrator participants, share the “living” in their context, and earn their understanding of the purpose and intent of the research I was embarking. Regardless of the positionality as a survivor or a perpetrator, I, as a researcher and a foreigner, referred to them both as my *umwarimu* (teachers) of reconciliation. Over the course of time, participants in turn gradually accepted me as their *umunyeshuri* (student) of reconciliation. Developing such trusting rapport and relationality as a triad (of survivor-perpetrator-reconciliator/researcher) and gaining the contextual knowledge take time, but were key prerequisites, in my view, in conducting this services-research with integrity and rigour.

Lived experiences of survivors and perpetrators who participated in the process of ABPRA were qualitatively investigated by employing semi-structured interview combined with the interpersonal process recall (Kagan & Kagan, 1997). Over a period of two years, a total of 8 pairs engaged in ABPRA and our team was able to gather over 9,600 minutes of interview, video, and audio data capturing participants’ lived experiences in the ABPRA. The interview data were transcribed, translated into English, back-translated and checked by a native Kinyarwandan translator, and analyzed by employing a hybrid interpretive phenomenological (Smith, Flowers & Larkin, 2009)-thematic content analyses (Krippendorff, 2014) to reveal themes.

Ubwiyunge mubikorwa (reconciliation in action) is the Kinyarwandan nickname of ABPRA, given by the participants who took part in this program. Dyads who participated in the *Ubwiyunge mubikorwa* reported 5 main beneficial impacts of the program: (a) healing, (b) attitude change, (c) reconciliation, (d) relationship building, and (e) psychosocial development (Minami, 2018). Detailed descriptions of each effect along with its elements are beyond the scope of this paper (See Minami, 2014). Field piloting of ABPRA was a major success with encouraging results with a rich pool of narrative interview data, which provides us with an essential empirical foundation for the next phase of this services-research trajectory.

The Next Step - Improving Access to ABPRA

Towards the end of our pilot, our team encountered joyful news. All of the pairs who participated and completed the program had decided to continue their *Ubwiyunge mubikorwa* (ABPRA) on their own. Further to this pleasant surprise, other non-participating villagers in the pilot village began to appear at the village leader's house inquiring how they can join the program. The leader learned that non-participating villagers could not believe what they have seen over the course of two years of the pilot program. Initially, villagers gave a sceptical view of the dyads engaged in the program. Some questioned whether the dyads wanted to continue because of remuneration. Each dyad proudly and consistently responded to them: "We are not doing this for the money. We are doing this so people can believe that our reconciliation is in action. We are proof that Rwanda is reconciling. That's why we continue." Other villagers, although sceptical at first, approached the leader to learn more about the program. Not just one, but dozens of villagers visited the leader to inquire. I was touched by their courage to reconcile and have been since supporting village-wide reconciliation activity. Now the ABPRA has been adopted as the official village reconciliation activity in the village. Witnessing the movement, our team was strongly encouraged, and many recommended its expansion to other villages. The 1994 Genocide against the Tutsis swept the country and reached every tiny corner of the land to inflict tragedy on every Rwandan. No one could escape. Correspondingly and rightfully, I believe its restitution and reconciliation support must also reach every tiny corner of this beautiful resilient country.

My next goal has become clear to extend the reach to have ABPRA, or the *Ubwiyunge mubikorwa*, available to all who still to this day suffer from lack of reconciliation support. In order for our team to efficaciously, cost-effectively, and ethically expand our reach, we have adopted various strategies from the field of mental health services research. Our next phase scopes the exploration of feasibility and acceptability of this program to new pools of participants in order to refine and optimize not only ABPRA as an intervention, but also its implementation efficacy, efficiency, cost-effectiveness, and ethicality. To date, our two years of rich pilot data have enabled us to develop (a) the ABPRA intervention protocol along with its data-informed logic model of its micro-mechanisms of change, (b) the ABPRA psychosocial reconciliator training manual, and (c) ABPRA intervention fidelity check sheets. We are delighted to share that the reconciliators to be trained to deliver ABPRA to a new set of participants are the very participants who experienced the ABPRA during our pilot. A total number of 15 individuals consisting of 7 survivors (6 females and 1 male) and 8 perpetrators (all male) will form pairs (we termed the "pair" reconciliator), and each pair will be reconciling a new dyad. We believe that the 15 who lived the experience of the Genocide and the process of reconciliation through ABPRA will be best suited to "hold hands" of and accompany the journey of new participants.

Reflections on Canadian Counselling Psychological Contributions to International Research

Thus far, I have introduced the beginning, overview, and a brief history of the reconciliation project in Rwanda. Now I will turn to share my personal reflections, using my own experience of working with the people of Rwanda as an example, on what unique contributions our Canadian counselling psychology can make to make a difference in the lives of people through international undertakings.

The Signature of Counselling Psychology as Relational

The first and foremost point that comes to mind in reflecting on counselling psychology's unique contributions to international research, stems from its distinct characteristic of approach. The "signature" of counselling psychological approach is relational. From renowned expertise in therapeutic alliance (Horvath & Symonds, 1991) to the recent emergence of the common factors approach (Hubble, Duncan & Miller, 1999; Wampold, 2001) in psychotherapy integration literature, we, as counselling psychologists, pay close attention to how 'shared' and/or interactional dynamics and exchange can play a role in the process of change. Our emphasis on relationality is engraved in every corner of our discipline (e.g., Bedi et al., 2011) and steers our quest for conducive epistemology, theory, research methodologies, practices, clinical education, training and supervision, and even extends to program development, implementation, and evaluation. It follows that we do not hold limited or perhaps narrow focus only on the effectiveness of an intervention. Counselling psychologists are not only concerned with treatment-specific factors (the interventions) and its subject matters (therapeutic change), but also attentive to factors I refer to as "parameters" influencing the process and outcome of counselling and psychotherapy such as quality of a therapeutic relationship. Correspondingly, we have advanced our discipline to be adept at and equipped with addressing issues that are relational in nature and have endless "parameters." We are equipped with languages of epistemologies, theories, methodologies, methods, ethics, and ethos to articulate the relationality and holistic "parameters" including interventions that give rise to relational change, and growth. Our arsenal, in an international and interdisciplinary setting, shines ever-so-distinctively and promisingly.

What does this imply in the context of international research? Well, with regards to the Rwanda project, the subject matter of interpersonal reconciliation is a *relational* issue. It concerns the reparation of (or change in) relationship between survivors and perpetrators who now must share the same village. It entails two agents (survivor and perpetrator) and a medium (way) through which the dyad must reconcile through. It involves two differing perspectives (of survivor and perpetrator) of change and process, yet the need to mend the dynamics in which the conflicting two interacts must be addressed *relationally*. Furthermore, careful attention to "parameters" (e.g., political context, history of ethnicity, systemic barriers, gender-issues) determines success or failure of a program to promote interpersonal reconciliation. Reconciliation is a broad concept that can be approached from various "levels" or sectors if you will. Reconciliation, as a way of restitution to support post-Genocide community recovery, healing and development in Rwanda, has been traditionally approached from political or sociopolitical, judicial and legal, economic, humanitarian, educational, and socio-communal standpoints. Correspondingly each level of reconciliation support has captured 'reconciliation' in a very different way. Interpersonal reconciliation is closely nested in the lives of people, yet a distinct realm of investigation of an authentic process of change in interpersonal reconciliation and intervention from the psychological or interpersonal point of view has been extremely scarce to nonexistent in Rwanda. Indeed, we are in desperate need for them in Rwanda. By interpersonal reconciliation, I particularly refer to a method of how to foster conciliatory and restorative mechanisms in the relational/interpersonal dynamics between survivors and perpetrators. What can a survivor do? What can a perpetrator do? What can they both do *together*? How could they interact with each other? On what purpose and cause? On what activity? What would the picture of them reconciling look like? Imagining such dynamics is critical in fostering interpersonal reconciliation but can also pose harm if due attention to relationality is missing (as in the case of forgiveness-seeking). Interpersonal reconciliation is a

relational construct/issue. Once again, it concerns the dynamics “shared” by the dyad. Therefore, it calls for the same relational or interpersonal approach to investigation, understanding, and resolution that is adept at addressing the shared-ness, mutuality and transactional dynamics of their relationship. I assert that counselling psychologists are one of the best-equipped professionals to tackle this relational issue of interpersonal reconciliation.

Counselling Psychology as an Applied Psychological Practice

Counselling psychology is an “applied” area of psychology. Let me reflect on what that word, “applied” *could* mean. Our “applied-ness” can be nested in every aspect of our discipline. First and foremost, counselling is an applied psychological *practice*. We provide counselling, psychotherapy, and/or other kinds of psychosocial interventions as our *service* to communities. We do not only *generate* and *validate* knowledge but also apply them to resolve real-life issues that matter to the lives of people. We *translate* the language of experimental/scientific/empirical knowledge into the language of daily life in our applied practice of counselling to effect change desired by people. We *disseminate* and *mobilize* knowledge to address issues that are imminent to our society. We do not stay in a laboratory. We engage in services and applied research in communities. Our applied research even concerns the delivery of services to improve *access* to our knowledge. We are trained academically as well as practically. We are scientists as well as practitioners. This applied-services aspect of our discipline is our strength and the unique contribution we can make in international endeavours. Why not bring this feature of our discipline to the forefront and construe our capacity to provide services as a part of research or as *the* research? We could even go beyond the dichotomy of service and research and harmonize the two. It may be time to entertain the notion of our discipline as praxiology.

The directionality of scholarship in counselling psychology. Our CPA definition of counselling psychology (Bedi et al., 2011) acknowledges our research and practice as mutually informative. I propose here to take the step further and envision our research as our practice, and our practice as our research. What would that look like? What would it take to envision our research “equaling” our practice? “Traditional” directionality of scholarship begins with the academy, and engages in knowledge generation, to validation, to translation, to dissemination and mobilization, and finally to access people with the knowledge in the community. In contrast, our “applied” discipline is often called for a reverse, bottom-up approach beginning from the very people in the community, driven by their critical needs in daily lives. Figure 1 depicts the contrasting directionality of scholarships between traditional and applied disciplines.

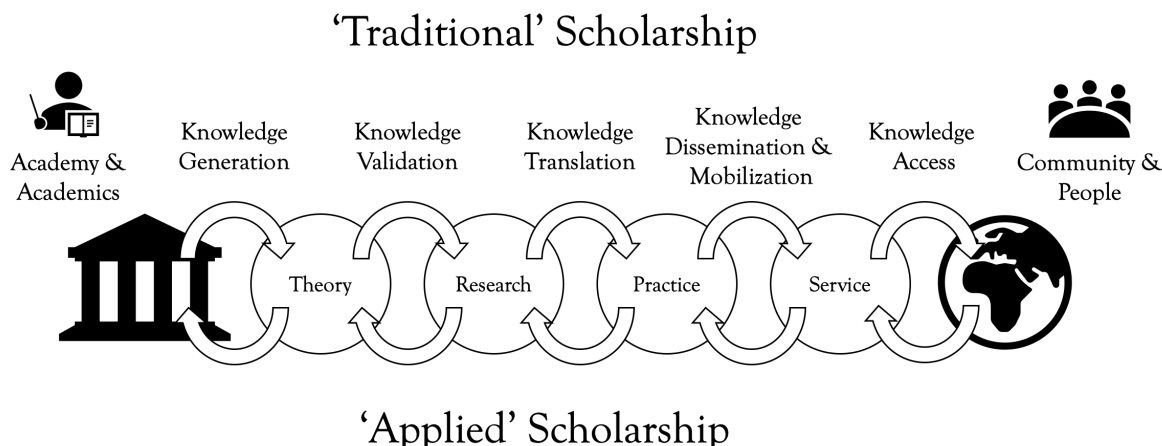
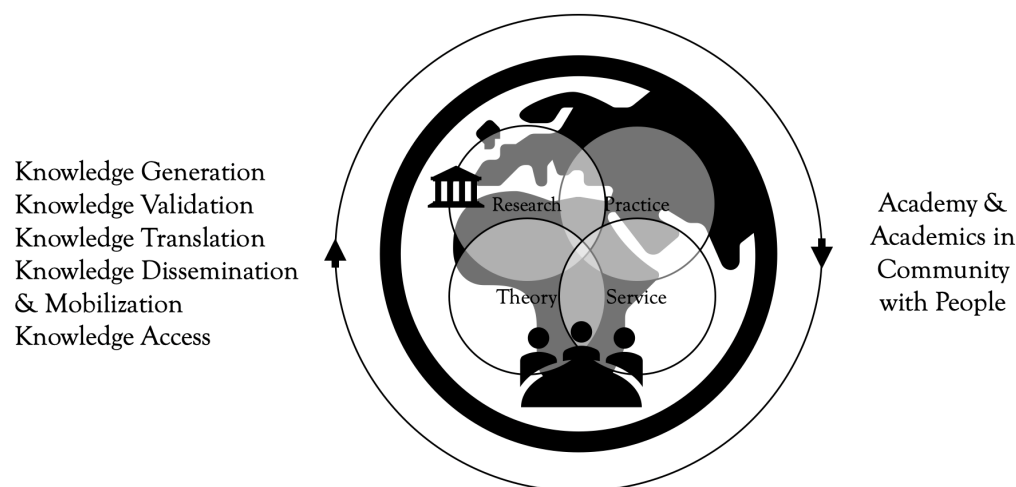


Figure 1. Schematic drawings of contrasting directionality of scholarship between traditional and applied disciplines.

One of our driving forces calling for the “other way around” directionality is the fact that our subject matter of what is at stake is always near and imminent to people’s lives. They cannot and will not wait for the conventional course of directionality to take place, hoping that one day the knowledge of the “ivory tower” would reach out to make the needed difference in people’s lives. We not only know this fact but also face it day in and day out in our applied psychological practice. In fact, another key aspect of our “applied”-ness is concerning our strong mindfulness of this consequential use of our disciplinary endeavour. We think of applications to people’s lives all the time. Questions such as “So what?”, “Why bother?”, and “For whom?” are very much of interests to us counselling psychologists. Are we making good use of our knowledge? Are we making ourselves useful? Fortunately, at least for me, implications and applications of our discipline have real “faces” of people who can benefit from our “applied” psychological practice. We are responsive to the needs of the community and mobilize an entire disciplinary capability to address the needs. I emphasize here that our discipline is one of the most well-equipped to endeavour systematically pursuing this directionality.

Research as praxiology – Spirit of mental health services research. Another exemplary discipline I wish to feature, that champions this counter-traditional directionality (and beyond) is the field of mental health services research (MHSR). MHSR is an applied and interdisciplinary area of research where teams of professionals approach critical mental health and related issues with a goal to make the lives of people better (Richards & Hallberg, 2015). Research agendas related to the psychological and/or psychosocial well-being of individuals in communities are often generated from the very communities and resolved through either reorganizing existing or developing new services. Mental health services researchers orchestrate various interdisciplinary capabilities (e.g., professional service capacities, implementation science, research methodologies and methods, clinical epidemiology, health economics) to meet the needs of the communities in a manner that is most efficacious, efficient, and cost-effective. A notable nature of MHSR is that it engages in rigorous and pragmatic orchestration of knowledge generation, validation, translation, dissemination and mobilization, and access in service of people at stake in communities. Figure 2 depicts this point.



Orchestration of Scholarship Elements

Figure 2. Schematic drawings depicting orchestration of knowledge generation, validation, translation, dissemination and mobilization, and access in MHSR

In sharp contrast to more traditional directionality (depicted in Figure 1), MHSR carries out all scholarship elements at the same time. For this reason, ‘research’ is conceptualized as identical to service and/or practice under the MHSR framework. One key factor pushing for this so-seemed “rush to practice” is again that the real-life issues cannot, do not, and will not wait. Correspondingly, the field of MHSR has been advancing its paradigmatic stance, frameworks, guidelines, and standards, rigour in the systematic orchestrations (of disciplinary capabilities), wealth and diversity of research methodologies and methods, and interdisciplinary team approach necessary to meet the critical needs of communities. I assert here that the field of counselling psychology and MHSR share the same epistemological stance of praxeology (Bourdeau, 2000; Kotarbinski, 1965), where no element (of theory, research, practice, and service) exists in unrelated segment, but all “functions” in purposefully harmonious and orchestrated way, in order to engage in the “science of action” to achieve the shared goal of making the lives of people better.

In relation to my project in Rwanda, our team goal of the next phase is to improve access to ABPRA for people in remote areas of Rwanda. Scaling up requires us to develop more systematically, a stronger evidence base for ABPRA. The next step of examining feasibility, acceptability, effectiveness, and cost-effectiveness of this program, with the goal to optimize intervention and delivery, would be an essential step towards larger scale evaluation and developing the evidence base and ultimately to achieving nation-wide reach. Methodological rigour and the frameworks for the development and implementation are borrowed from the guiding principles of MHSR. I wish to highlight the harmonious fit that exists between the spirit of counselling psychology and that of MHSR. The two fields are mutually complementary and would greatly benefit from interdisciplinary collaboration.

Counselling Psychologists as Ethical Engagers

We, as counselling psychologists, are not only relational and applied, but also exemplary in getting the job done “right.” We care about our clients, but we also care about articulating how best to serve them. Prilleltensky (1997) calls for two requirements for psychologists. First, “psychologists *articulate [emphasis added]* their personal and collective vision of the good life and the good society. That is, they should make clear the values, models, and ideals they wish for individuals and for societies. [...] the consequences of operating without a lucid set of guiding principles can be grave” (p. 518). From the general codes of conduct/ethics of psychologists (e.g., CPA, 2017) to more practitioners’ codes of conduct (e.g., BCACC, 2014; CCPA, 2007; CPBC, 2009), ethical principles that guide us are translated in every aspect of our discipline. It may not be an overstatement that our entire discipline of counselling psychology is founded on our ethical principles and codes of conduct. Even then, we do not purport that our codes apply to universal context, all cases and individuals, and circumstances. My understanding is that our codes rather symbolize our commitment to and aspiration for ethical conduct and practice as counselling psychologists. We are aware that every case is unique, and our values and moral principles are relative, rather than absolute. Yet we chose to continue grappling with this challenge for the sake of defending, honouring, and often advocating for the dignity of other fellow human beings.

During my time in Rwanda, I clearly witnessed the dignity injury in survivors. Now I am aware I have been using the terms *value*, *moral*, and *ethics* interchangeably. Let me walk through what each of those terms meant to a particular moment and circumstance I encountered in Rwanda. As a society, Rwanda values forgiveness. Was it valuable for the survivor I encountered to forgive? Absolutely. Now was it moral to continue insisting on forgiveness-seeking? Again, absolutely in the context of Rwanda. It was and still is the “right” thing for her to do. Even the very survivor knew. However, the relativism of value and morality as unquestioned was what had brought dignity injury to the survivor. These particular societal values and morals were harming her dignity as a human being. Was it ethical to continue insisting on forgiveness-seeking? Absolutely not. This is just a narrow and specific instance, but that moment clearly displayed the difference between the three terms for myself and made me re-appreciate our commitment to ethical engagements as counselling psychologists. For me, what was required to be ethical in that moment, was the capacity to pause and reflect, to listen to the survivor’s voice sincerely from her point of view by relinquishing our own hang-ups, to question at the sight of the survivor shedding tears, and to engage in discussion, debate, and advocacy together with the survivor to protect her dignity as a human being. We do not simply remain as a slave of value and societal moral relativism, we stand and act on what is ethical.

Prilleltensky (1997) continues, that secondly, “psychologists should *formulate ways of translating [emphasis added]* these visions into action” (p. 518). It is my view that our professional codes exemplify such an attempt articulating and translating the principles into our action. But we do not end there. Canadian counselling psychologists are the primers of ethical thoughts and actions even within the field of counselling psychology. We have pioneered and advanced “aspects” of our ethical thoughts “beyond boxes.” They include, but not limited to, multiculturally competent care, social justice, equity, advocacy and activism, and decolonization and revitalization of indigeneity (Sinacore et al., 2011). As exemplified by the Rwanda story, we can never know and expect what is to come in a global undertaking, as we will be thrown right into the context beyond

the known. Maintaining ethical practice in an unknown context would require innovative ethics and ethical action beyond boxes. Again, I would argue here that counselling psychologists, especially those of Canadian-trained, who have always been the pioneers in this area would be most suited to take on the challenge of international/global research endeavours. In clarification, I am not claiming that we always get, say, and do what is right. I am saying here that we are ready to pause and question ourselves, with our heart and soul, gut intuition, our commitment for justice and fairness, and burning passion and courage to take action and advocate for the dignity of our fellow human being.

Conclusion

In this paper, I have shared a narrative overview of my services research project in Rwanda, and highlighted, using the project as an example, three unique contributions that our field of Canadian counselling psychology can make in international/global research. These points are in no way intended to claim validity, but rather sharing of my own learnings and reflections from the project. I have highlighted the relational “signature” of our discipline, and how the relationality can be manifested in our scholarship. I have featured our applied nature and discussed what the term implies, and how our scholarship is dedicated to making the lives of people better. I have celebrated, then, one of our foremost contributions to the field of psychology in general, our expertise and frontier-thinking in expanding our scope to ethical engagements. Syncing altogether, our discipline is one of exemplary that can potentially make a difference in resolving critical global issues of today, with our applied approach, in a manner that is ethical, honours and advocates for the dignity of our fellow human being. I conclude this paper with a hope that more fellow Canadian counselling psychologists, dear students, and allies would join me in international/global endeavours, and in celebrating our unique contributions to our global community.

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What do Canadian Counselling Psychologists Who are Not Affiliated with the Canadian Psychological Association Think? Results from a National Survey of the Profession

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Abstract

The only previous nation-wide survey of Canadian counselling psychologists (Bedi et al., 2016) was conducted with those affiliated with the Canadian Psychological Association (CPA) and its Section for Counselling Psychology (SCP). As most Canadian counselling psychologists do not belong to the CPA and SCP, the previous survey is limited in its generalizability. This paper reports the results of four open-ended questions administered to Canadian counselling psychologists not affiliated with the CPA and its SCP. One hundred and seven participants responded to questions pertaining to training, pressing professional issues, next steps for the field, and recommended focus areas for a future Canadian Counselling Psychology Conference. With respect to training, participants reported that there should be increased training in testing/assessment, increased training in the business side of psychology for private practitioners, and more supervised practice. The most pressing professional issues experienced by the participants were clients' limited access to services and the need to promote the counselling psychology profession. Participants reported the most important next steps for the field to be increased coverage of services and increased status of counselling psychology. Respondents hoped the next Canadian Counselling Psychology Conference to focus on skill-building, the professional identity of the field, and networking. A comparison with answers provided by CPA SCP affiliated counselling psychologists is provided. The results of this study provide a broader understanding of the views of Canadian counselling psychologists and have implications for the future practice and training of Canadian counselling psychologists.

Keywords

Canadian counselling psychology, Canadian counselling psychologists, professional issues, survey

Research about the profession of counselling psychology in Canada and the characteristics of its professionals is finally emerging. Recent studies have focused on Canadian counselling psychology doctoral students (Bedi, Christiani, & Cohen, 2018a, 2018b) and doctoral programs (Bedi, 2016; Bedi, Klubben, & Barker, 2012). Only two articles offer a recent in-depth

examination of the practice of counselling psychology in Canada and the characteristics of Canadian counselling psychologists (Bedi, Christiani, & Sinacore, 2018; Bedi, Sinacore, & Christiani, 2016)¹. Of the two, only Bedi, Christiani and Sinacore (2018) report on Canadian counselling psychologists' open-ended thoughts about topics highly pertinent to the profession in Canada. In this study, Canadian counselling psychologists affiliated with the Canadian Psychological Association's (CPA) Section of Counselling Psychologists (SCP) identified a desire for increased testing and psychological assessment and business management education for private practice as the most salient aspects of counselling psychology graduate training requiring modification based on their experience of the job market. The most pressing professional issues for respondents was protecting the scope of practice for counselling psychologists, self-care, and building a private practice. The participants identified the most important next steps in the development of the field to be building a clearer professional identity and advocating for counselling psychology as a profession. Respondents in Bedi, Christiani, and Sinacore's study also indicated a desire for increased educational opportunities and knowledge and resources about best practice from the CPA's SCP at future conferences. While this study provided a richer understanding of Canadian counselling psychologists' perspectives, it was limited by only sampling members of the CPA and its SCP, raising concerns about the generalizability of its findings, as most Canadian counselling psychologists are not members of the CPA and SCP (Bedi, Christiani, & Sinacore, 2018; Bedi et al., 2016). The current study addresses this significant limitation of Bedi, Christiani, and Sinacore's (2018) study.

The purpose of this article is to describe how counselling psychologists not associated with the SCP think about (a) how counselling psychology training should be modified (given the current marketplace), (b) challenges impacting the profession, (c) next steps in the development of the profession, and (d) recommendations for the focus of the next Canadian Counselling Psychology Conference. It is important to involve counselling psychologists who are not associated with the CPA and SCP to ensure that findings reflect the view of majority of Canadian counselling psychologists and that we develop the field accordingly. Further, it is important to continue conducting research on the profession specifically in Canada because research conducted in other countries may not generalize to Canada. This is due to the relatively distinct characteristics in the development of the profession in Canada, Canadian practices, and the unique Canadian context (Beatch et al., 2009; Goodyear et al., 2016).

Method

Participants

A total of 107 counselling psychologists who were not members of SCP participated in the survey. Our respondents were overwhelmingly female (73.8%), heterosexual (88.8%), and of European origin (79.4%). The age range among respondents was between 24 to 71 years of age ($M = 42.42$, $SD = 11.81$). We received responses from 11 out of the 13 provinces and territories in Canada. See Table 1 for a detailed breakdown of the demographic characteristics of survey respondents.

¹ A dated account is provided by Hiebert and Uhlemann (1993). However, Hiebert and Uhlemann's (1993) report partially conflated counselling psychologists and counsellor educators, received a low response rate (9%), and their findings reflected the perspectives of only 16 Canadian counselling psychologists.

Procedure

Canadian counselling psychologists who were not members of CPA and its SCP were invited to complete an online survey. The survey was advertised twice, four months apart, through e-mail newsletters, research sections on websites, social media (e.g., Facebook), and the publications of the 11 provincial/territorial professional associations across Canada (e.g., British Columbia Psychological Association). Snowball sampling procedures were also employed by asking survey respondents and counselling psychologists to forward the survey onto colleagues who met the inclusion criteria. Finally, the survey was e-mailed to the faculty and doctoral alumni list-serves of the five CPA-accredited counselling psychology programs in Canada. To encourage participation in the survey, respondents were offered a \$20 gift card honorarium.

Survey

A 66-item survey – adapted from a survey created by Bedi et al. (2016) – was used. The survey consisted of questions relevant to participants' (a) demographic characteristics, (b) theoretical orientations, (c) professional activities, (d) training and career experiences, and (e) considerations about the future of Canadian counselling psychology. This article reports the qualitative responses to the four short-answer, open-ended survey questions focused on considerations about the future of the profession. Participants were asked to respond to the following questions:

1. Given what you know of the current marketplace for counselling psychologists, what aspects (if any) of Canadian graduate training in counselling psychology should be modified?
2. What is the single most pressing professional issue for you right now?
3. What do you think is the most important next step for the field of counselling psychology in Canada?
4. If you are interested in attending a Canadian counselling psychology conference or summit within the next 3 years, then what should the purpose, goal, or focus of the next conference/summit be?

Data Analysis

Each of the questions were analyzed using inductive content analysis (Elo & Kyngäs, 2008). Inductive content analysis involves creating categories by first reviewing the data then quantifying frequencies of similar responses. For this study, we focused on manifest content rather than latent content. Constituent codes and categories were identified using correspondence-discussion-consensus procedures between the two authors. Categories were then further modified based on critiques provided by an external auditor (who reviewed the open-ended answers and the proposed categorization scheme) to further promote the trustworthiness of the categorization system. Categories common across at least 10% of the participants who responded to the questions are presented in this paper.

Results

The content analysis of each of the four questions is presented in Tables 2, 3, 4, and 5, respectively. The tables present the most common categories, constituent codes for the categories, prevalence rates, and example quotations.

Discussion

The current study most notably extends the research by Bedi and colleagues (Bedi et al., 2018; Bedi et al., 2016) by surveying counselling psychologists who are not members of the SCP to develop a more generalized understanding of Canadian counselling psychologists' thoughts about the future of the profession. When asked about how graduate training should be modified based on the current marketplace for psychologists, participants most frequently identified a desire for increased training in testing and assessment. This finding is consistent with SCP counselling psychologists' and counselling psychologist trainees' only moderate satisfaction with their graduate training in assessment, reported lack of overall assessment training, and strong desire for increased assessment education (Bedi et al., 2018a, 2018b; Bedi et al., 2018). This point needs to be considered in light of differential training emphases observed among CPA-accredited counselling psychology doctoral programs (Bedi, 2016; Bedi et al., 2011). The robust desire for increased training in assessment, particularly diagnostic and clinical assessment, which is more characteristic of clinical psychology in Canada (Bedi et al., 2012), may also be part of a future trend in which counselling psychology and clinical psychology could be amalgamating into one specialty (noting the first combined PhD program in counselling and clinical psychology in Canada at the University of Toronto) or could reflect a desire to be more competitive for APPIC internships – most of which heavily favour strong clinical assessment training (Haverkamp, Robertson, Cairns, & Bedi, 2011).

Despite counselling psychology doctoral trainees receiving standalone courses or practicum placements in supervised counselling/psychotherapy and clinical supervision (Bedi et al., 2012), participants believed there is a need for increased training in providing clinical supervision and more and improved supervised counselling practise to ensure counselling psychology trainees are maximally ready for the current marketplace. The desire for increased training in clinical supervision is consistent with SCP counselling psychologists' low levels of satisfaction with their graduate training in providing clinical supervision (Bedi, Christiani, & Sinacore, 2018). Respondents suggested mandating internships through the Association of Psychology Postdoctoral and Internship Centers (APPIC). Currently, Canadian counselling psychology doctoral programs typically recommend, but do not require, trainees to engage in APPIC internships (Bedi, 2016). Mandating APPIC internships is a challenge because there is a severe lack of available and appropriate accredited counselling psychology internship sites in Canada (Bedi, 2016; Haverkamp et al., 2011). Although there are non-counselling psychology alternatives (i.e., clinical sites) that sometimes accept counselling psychology students, these sites tend to be highly competitive and typically favour interns from clinical psychology programs, thus are much less common amongst counselling psychology doctoral students (Bedi, 2016; Haverkamp et al., 2016). While the SCP has engaged with the CPA Committee on Accreditation to increase the number of counselling psychology internships (Bedi et al., 2011), there continues to be a lack of CPA-accredited designated counselling psychology internship sites (Bedi et al., 2012).

Some aspects of training that should be considered for modification but have not been widely considered in past literature are the increased desire for training on the business side of psychology for private practice and more training working with non-psychologists. These modifications were also endorsed by SCP members, albeit with less frequency than in our sample (Bedi, Christiani, & Sinacore, 2018). In our sample, 20.0% wanted more business training and 12.9% wished for more training in working in multidisciplinary teams while in Bedi, Christiani, and Sinacore (2018) the numbers were 12.8% and less than 5.1%, respectively. The desire for increased training in business management is consistent with the finding that Canadian counselling psychologists' most common primary and secondary work setting is independent practice (Goodyear et al., 2016) and that most Canadian counselling psychologists engage in some private work (Bedi et al., 2016). The desire for more training in working with non-psychologists may be associated with the finding that more and more Canadian counselling psychologists are now working in non-traditional work settings (e.g., hospitals) that require collaboration with other professionals (Bedi et al., 2016).

Regardless of counselling psychology being distinguished as a distinct specialization with its own definition (Beatch et al., 2009; Bedi et al., 2011), this study's sample of counselling psychologists identified distinguishing themselves from similar mental health professionals as one of the most pressing professional issues, the most important next step for the profession, *and* a potential focus of the next Canadian Counselling Psychology Conference (i.e., it was brought up very frequently across three out of the four questions). This concern has been raised repeatedly among Canadian counselling psychologists (Bedi, Christiani, & Sinacore, 2018; Bedi et al., 2011). Nevertheless, tensions exist as some respondents were not concerned with professional identity issues or believed that they were overemphasized (see also Bedi, Christiani, & Sinacore, 2018). Professional identity concerns may be a function of age and work setting, with older counselling psychologists and individuals working in academia more likely to believe that there is a difference between counselling psychology and counsellor education and clinical psychology, respectively (Bedi, Christiani, & Sinacore, 2018). A reason for this struggle with professional identity may be related to the transdisciplinary characteristic and shared area of practice between counselling psychology and other branches of psychology and other professions, which is acknowledged within the definition of counselling psychology (Bedi et al., 2011). Distinguishing counselling psychology from its clinical counterpart for both professionals and the public is frequently identified within our profession as one of the most challenging aspects of delineating a clear professional identity (Bedi et al., 2018a, 2018b; Bedi et al., 2016).

The lack of clarity about counselling psychologists' professional identity appears to arise during graduate training (Bedi et al., 2018a, 2018b). Despite findings that there are distinctions between clinical and counselling psychology doctoral programs, there continues to be considerable overlap in training and scope of practice which allows trainees from both specializations to meet identical requirements to register as a psychologist (Beatch et al., 2009; Bedi et al., 2012; Linden, Moseley, & Erskine, 2005). Counselling, clinical and school psychology doctoral programs are tasked with meeting the same CPA accreditation requirements, while unique ones only exist for clinical neuropsychology (Canadian Psychological Association, 2011). Other aspects of the past and present counselling psychology training environment may also instill and perpetuate the confusion about professional identity (Bedi et al., 2012). For example, counselling psychology's origins within Canada are within both the disciplines of psychology and educational counselling. Furthermore, Canadian counselling psychologists in provinces where counselling is licensed can

often choose to license as psychologists or counsellors, or both; one exception is Quebec where where it would be highly unusual for a counselling psychologist to have sufficient career development/counselling coursework to qualify for licensure as an a Conseillieur d'Orientation (Bedi et al., 2011; Young & Nicol, 2007). This is in sharp contrast to the situation in the United States where psychologist licensure does not necessarily meet the requirements for counsellor licensure (and vice versa) and those trained in counselling psychology are deemed unqualified, or at least inappropriate, to be core faculty in counsellor education programs (for example, see Council for Accreditation of Counseling and Related Educational Programs, 2015).

In addition, student trainees who had aspirations for acceptance into clinical psychology programs may get accepted into counselling psychology programs and continue to emphasize the perspectives and values of conventional clinical psychology throughout their training, further contributing to the confusion between clinical and counselling psychology professional identity (Beatch et al., 2009; Bedi, Christiani, & Sinacore, 2018). This issue is further compounded when these students are supervised by clinical psychologists or taught by faculty trained in clinical psychology (at least by those who utilize a conventional clinical psychology lens). Further, the limited number of accredited counselling psychology internship sites in Canada hinders the development of a strong counselling psychology professional identity for trainees. This limitation may lead trainees to compete for internships in another specialization (e.g., clinical psychology), exacerbating the professional identity confusion by giving the impression that training in counselling psychology and clinical psychology are interchangeable for the marketplace (Bedi, Christiani, & Sinacore, 2018; Bedi et al., 2011, 2016, 2018a; Haverkamp et al., 2011). Based on concerns about professional identity, counselling psychology graduate programs may want to reconsider how they promote students' identification and pride in the profession (Bedi, Christiani, & Sinacore, 2018).

Further contributing to the professional identity and scope of practice confusion is the definition of counselling psychology in Canada. The CPA-endorsed definition of counselling psychology describes a meta-perspective on applied professional practice rather than unique skills, distinct scopes of practice, or a specific knowledge base (Beatch et al., 2009; Bedi et al., 2011), which is inadequate for making practical distinctions between counselling psychologists (and their scope of practice) and other mental health professionals. Moreover, some provinces (e.g., Quebec) do not recognize counselling psychology as an area of specialization (i.e., the definition is irrelevant in these jurisdictions), resulting in counselling psychologists typically identifying as practicing in the area of clinical psychology.

The need to promote counselling psychology and its distinctiveness among other mental health professionals clearly relates to perceived professional hierarchies (as noted by many participants in our study), with counselling psychology usually considered to be inferior to clinical psychology. A similar hierarchy was experienced by practitioners who were members of the SCP and identified as an important next step for developing the field (Bedi, Christiani, & Sinacore, 2018). This apparent lower status may be partially attributed to the fewer number of counselling psychologists than clinical psychologists in practice, on provincial regulatory boards, and within CPA, which may contribute to the lack of awareness about the profession (Bedi et al., 2011, 2012). There also seems to be systemic differences in valuation of counselling psychology and clinical psychology during training, with Canadian counselling psychology internship sites being more welcoming to

clinical psychology students than vice versa (Bedi et al., 2011). In sum, the experience of inferiority among respondents seems to reflect the systemic devaluation of counselling psychology in training and professional environments, which could be loosely considered analogous to a colonial mentality or at least an early stage of identity development in which the group in power is admired and mimicked (Bedi, Christiani, & Sinacore, 2018).

Respondents in this study had a significant number of common beliefs with the SCP-affiliated counselling psychologists surveyed in Bedi, Christiani, and Sinacore (2018), suggestive of general lived experiences of Canadian counselling psychologists broadly. For example, our sample of respondents indicated maintaining or expanding competence and self-care or balance as important and identified a desire for professional skills training to be a focus of the next Canadian counselling psychology conference. Similarly, SCP members identified the same factors to be important next steps in the field and how the SCP could better serve their members (Bedi, Christiani, & Sinacore, 2018). Additionally, advocating for counselling psychology, promoting its distinctiveness, and increasing the profile and awareness of the profession among allied professionals and the public were considered important next steps for the field among our sample of respondents and SCP-affiliated counselling psychologists (Bedi et al., 2018a).

There were also some novel responses in this study that were not found among SCP-affiliated counselling psychologists surveyed in Bedi, Christiani, and Sinacore (2018). Respondents in this study identified clients' limited access to mental health care services due to affordability as the most pressing professional issue. For SCP-affiliated counselling psychologists the most pressing issue was protecting counselling psychologists' scope of practice and did not mention affordability at all in their most common answers. While Canada has a publicly funded universal health care system, psychological services are not fully covered beyond specific institutional settings (Bedi et al., 2016). Nevertheless, there is a high demand for psychological services, as such, many individuals rely on private insurance plans. Although such plans provide some support for seeking psychological services, there continues to be limitations on health insurance coverage (Bedi et al., 2016; Domene & Bedi, 2013). Participants in this study further suggested that the most important next step for the profession would be to work towards advocating for increased coverage of psychological services by insurance and health care system – an answer not common amongst SCP-affiliated counselling psychologists from the previous survey. Further, participants identified networking as a desired focus for the next Canadian counselling psychology conference, while SCP-affiliated counselling psychologists did not. These differences indicate that the beliefs of the majority of Canadian counselling psychologists may not be fully in line with the beliefs of Canadian counselling psychologist who choose to affiliate with CPA's SCP.

Limitations

There are several limitations to this study. First, while recruitment procedures aimed to recruit a representative sample of Canadian counselling psychologists who were not SCP members, it is possible that there are still systematic differences between respondents and counselling psychologists who did not respond to the survey, limiting the generalizability of these findings. This limitation can be addressed by replicating this study with a larger sample, to assess how relevant the results of this survey are to the population of Canadian counselling psychologists. Second, as with all qualitative analyses, it is important to be cognizant that any set of open-ended

data can have multiple interpretations. Although alternative interpretations are still possible, we are hopeful that our use of qualitatively rigorous analyses identified results that are credible and trustworthy. A third limitation of this study is that the results will continually change and evolve as the profession. What is presented here is only a snapshot of counselling psychologists during the time of data collection, rather than an indication of what may persist in the future. Fourth, as the responses were collected through written responses on an online survey, there was no opportunity to ask follow-up questions to increase the richness of participant responses. This limitation can be addressed in future studies by using interviews to collect data for the open-ended responses. Despite the limitations identified, the results of this study are important in understanding the current state of the profession and better informing future directions based on the experiences of Canadian counselling psychologists.

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Table 1

Demographic characteristics for sample participants

Characteristic	n	%
Sex		
Female	79	73.8%
Male	28	26.2%
Sexual Orientation		
Heterosexual	95	88.8%
Bi-Sexual	6	5.6%
Lesbian	3	2.8%
Queer	1	0.9%
Not specified	2	1.9%
Ethnic Origin		
European	85	79.4%
Asian	8	7.5%
Aboriginal	2	1.9%
Multi-ethnic	6	5.6%
Other	6	5.6%

Province of professional activity		
British Columbia	23	21.9%
Alberta	18	17.1%
New Brunswick	18	17.1%
Saskatchewan	16	15.2%
Ontario	6	5.7%
Quebec	6	5.7%
Manitoba	4	3.8%
Nova Scotia	4	3.8%
Newfoundland and Labrador	3	2.9%
Prince Edward Island	3	2.9%
Northwest Territories	3	2.9%
Non-Canadian Province	1	1.0%

Table 2

Most Common Responses to Question About What Aspects of Training Should be Modified (N = 70)

Category	Constituent Codes	Prevalence	Example Quotations
Increased training in testing and assessment	<p>More training on assessment</p> <p>More training in testing and assessment</p> <p>More rounded training in assessment</p>	22.9%	<p>“Assessment courses and practicums for graduate students, as well as how to use these assessment findings in treatment.”</p> <p>“More thorough training in assessments.”</p> <p>“Testing/assessments”</p>
More training on the business side of psychology regarding private practice	<p>More training on the business side of psychology regarding private practice</p>	20.0%	<p>“More training in the business aspect of running a private practice.”</p> <p>“Professional business considerations for psychologists seeking private practice.”</p> <p>“Training in starting and growing a private practice.”</p>
More and improved supervised practice	<p>Requirement of multiple internships</p> <p>Mandate APPIC Doctoral Internships</p> <p>More focus on supervised professional practice (rather than coursework)</p>	20.0%	<p>“A longer practicum/internship as part of the training.”</p> <p>“Longer, more intensive practicums.”</p>

	<p>More emphasis on training to provide counselling/psychotherapy</p> <p>More extensive supervision of professional practice</p> <p>More reviewing of taped sessions/transcripts</p> <p>More practical training</p> <p>Greater standardization of professional practice opportunities and competencies across students</p> <p>Greater diversity of professional experiences</p> <p>Better vetting of practicum placements</p> <p>Longer practicums</p> <p>More practicums</p>		<p>“More practicums with a greater number of clients seen within each practicum.”</p>
More training in working with non-psychologists	<p>More training on working within multidisciplinary teams</p> <p>More training in working with third party referrers</p> <p>More training on providing and requesting consultations</p>	12.9%	<p>“Working within multidisciplinary care settings.”</p> <p>“More practice working with multi-disciplinary providers”</p> <p>“Integrated practice with other health care professionals.”</p>
More training on providing clinical supervision	<p>More training on clinical supervision</p> <p>Training in providing supervision should be mandatory</p>	11.4%	<p>“Course work in clinical supervision.”</p>

			<p>“More courses on clinical supervision - how to provide it.”</p> <p>“Training in providing supervision should be mandatory.”</p>
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Table 3

Most Common Responses to Question About the Most Pressing Professional Issue for Individuals (N = 81)

Category	Constituent Codes	Prevalence	Example Quotations
Limited Client Access due to Affordability	<p>Clients cannot afford services</p> <p>Client access to services</p> <p>Limited private insurance coverage</p> <p>Limited public health insurance coverage</p> <p>Lack of service accessibility for clients</p> <p>Lack of funding for services for clients</p>	14.8%	<p>“Funding for psychological services. Most people cannot afford the recommended fees of a private practitioner.”</p> <p>“Lack of affordable resources for clients.”</p> <p>“Most people's extended health coverage is so minimal that it only covers a few sessions - we are not as accessible to people as we could be when working in private practice.”</p>
Need for promoting the profession and its distinctness	<p>Advocacy for the profession</p> <p>Better differentiation of psychologists and non-psychologists</p> <p>Administrator lack of understanding of role and ethics of counselling psychologist</p> <p>Improved recognition of counselling psychology</p> <p>Lack of other's awareness of differential credentials for mental health professionals</p>	13.6%	<p>“Advocate for the profession and its recognition.”</p> <p>“Defining respective roles for Psychologists versus non-Psychologists in this province. Very little professional distinction exists”</p> <p>“To be seen as well trained as those in clinical psychology”</p>

	<p>Clarifying similarities and differences between counselling and psychotherapy</p> <p>Lack of clarity of regulatory bodies on similarities and differences between counselling and psychotherapy</p> <p>Professional hierarchy (counselling psychology is lower)</p> <p>Professional rivalries across disciplines</p>		
Maintaining/ Expanding competence	<p>Staying current with professional knowledge</p> <p>Ensuring self-competence in practice</p> <p>Gaining more practical skills</p> <p>More opportunities for training</p> <p>Obtaining up-to-date training</p> <p>Lack of relevant training through professional association</p>	12.3%	<p>“Being able to keep up to the growing information there is to read and learn.”</p> <p>“Remaining abreast of information, research and techniques, but also ensuring competence in use of techniques.”</p> <p>“Staying current with professional knowledge.”</p>
Competition/Loss of marketshare	<p>Marketshare lost to others professionals</p> <p>Competition from insurance companies who charge less</p> <p>Insurance companies use non-psychologists</p> <p>Lack of supply of counselling psychologists to fill positions leading to growth of competing professions</p> <p>The recognition of master's trained professionals for providing services</p>	9.8%	<p>“...there are many government positions for clinical/educational psychologists vacant because there are not enough psychologists to fill the positions. These positions are changed to other professional positions because they can't fill them with Psychologists...Furthermore, private psychologists face competition with insurance providers who provide businesses</p>

	Resistance to moving field to a PhD standard for entry		<p>with mental health services at a lower rate...”</p> <p>“The recognition of the role of counsellors/counselling therapists in the mental health system.”</p> <p>“Being in Alberta, the single most pressing issue for me is the movement toward a Ph.D. standard for this province. The provincial association has lobbied for this change, but the licensing body has put out a statement against a Ph.D. standard.”</p>
Self-Care/Balance	<p>Balancing different work responsibilities (teaching, research)</p> <p>Managing workload</p> <p>Self-care</p> <p>Reducing waitlist/too much demand for services</p> <p>Work-life balance</p>	9.8%	<p>“Balancing work (e.g., research and teaching)”</p> <p>“Managing the number of clients I see because in the community where I work there aren't enough psychologists for the number of clients needing counselling.”</p> <p>“Work/Life balance. It's a big work in progress. I'm still within my first 5 years of full-time work, and I have at times felt at the edge of burnout already. Self-care is 'preached' regularly in graduate training, but the realities of starting a career, undergoing the process to register as</p>

			a psychologist, and learning how to cope with the demands of a job within the not-for-profit sector/learning my own personal/professional limits has been a real challenge.”
Obtaining/ maintaining licensure	<p>Completing requirements for psychologist licensure/registration</p> <p>Getting licensed as a psychotherapist (Ontario)</p> <p>Lack of consistency of licensure across provinces</p> <p>Costs of registration/licensure</p>	9.8%	<p>“Completing all of the requirements to register as a psychologist”</p> <p>“Getting grandparented into the new College of Registered Psychotherapists of Ontario”</p> <p>“Getting accredited in BC and not just simply registering with RCC. Also for the professional accreditation and practice to be consistent across Canada.”</p>

Table 4

Most Common Responses to Question About the Most Important Next Steps for the Profession (N = 59)

Category	Constituent Codes	Prevalence	Example Quotations
Increased coverage of services by insurance	Advocating for services to be covered by health insurance Coverage of services by public health insurance Coverage of services by private health insurance Increased funding for services for clients Increased client access to services	18.6%	“I’d love to see insurance companies provide more coverage to clients “ “Medical Services Plan coverage for counselling services to increase accessibility.” “Advocating for more accessibility for public in public system.”
Increased Status and Awareness of Profession	Increasing the reputation/profile of counselling psychology in the mental health field Informing the public about the benefits of counselling psychology Promoting counselling psychology To be have equal status to clinical psychology Promoting the profession as best of both psychology and counselling Increased legitimacy amongst other health professions	11.9%	“Increasing the profile of counselling psychologists in the mental health world in Canada.” “Gaining more legitimacy in the eyes of the professional/medical system and community, e.g. recognized more properly.” “We need to increase our contribution to the professional psychology through research, practice and advocacy. We cannot stop at a level of just being a therapy practitioner.”

Communicating Distinctiveness of Profession	<p>Creating a distinct scope of practice</p> <p>Explaining distinctness of counselling psychology to the public</p> <p>Differentiating from related professions (e.g., clinical psychology, professional counselling) and communicating this</p> <p>Differentiating from physicians who provide counselling</p>	10.2%	<p>“Further explaining the difference between clinical and counselling psychology and making this information more readily available to all psychology disciplines.”</p> <p>“Differentiating between psychotherapist, therapist, psychologist, mental health clinician, etc. Too many titles present a convoluted message for the public and significant overlap with social work professionals further cloud this distinction.”</p> <p>“Defining a distinct scope of practice when the marketplace is crowded with counsellors, psychotherapists, therapists, life coaches and so forth and then explaining that to the general public in a digestible manner.”</p>
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Table 5

Most Common Responses to Question About the Focus of the Next Canadian Counselling Psychology Conference (N = 49)

Category	Constituent Codes	Prevalence	Example Quotations
Professional Skills Training	Professional skills training Professional development Training Learning about current research New research/practice findings Best practices New therapies DBT Short term counselling Crisis intervention Treatment approaches/interventions Positive psychology Treating families Dealing with different generations (aged) clients	36.7%	“Unique workshops that would focus on enhancing skill development.” “Education around best practices.” “Professional skill building. Practitioner oriented workshops and training.”
Professional identity of field	Clarifications of professional identity Describing practices in line with field's values Uniqueness of counselling psychology Distinctness from clinical psychology	16.3%	“Certainly, further clarification of professional identity as counselling psychologists would be of value. What is it that counselling psychologists have to offer that represents unique contributions to the helping professions? What is the

	<p>Commonalities with other MH professions</p> <p>Scope of practice</p> <p>Defining the field for all provinces/territories</p>		<p>nature of our complementarity? What are the commonalities shared with other helping professions?”</p> <p>“How do we know when we are embodying/enacting the profession's core values?”</p> <p>“Defining it so that it can be understood within all provinces in Canada.”</p>
Networking	<p>Connecting with colleagues</p> <p>Sharing one's work with colleagues</p> <p>Networking</p> <p>Professional collaboration</p>	16.3%	<p>“Encouraging networking. Just bringing people together to share current work and further get to know each other.”</p> <p>“Network. Professional collaboration”</p> <p>“To make connection with the colleagues in the field to advance the profession.”</p>
Increasing the profile of counselling psychology	<p>Increasing the reputation/profile of counselling psychology in the mental health field</p> <p>The field taking a leadership role within the mental health field</p> <p>Furthering the profession through public education</p>	10.2%	<p>“Determining how to accomplish increasing the profile of counselling psychologists in the mental health world in Canada.”</p> <p>“In what manner can we offer leadership to the world of helping.”</p>

			“Strengthening Counselling Psychology's reputation in Canada.”
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Methodological Considerations when Conducting Research with Vulnerable Populations

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Abstract

Critical analysis of current research methods is aimed at shedding light on the concerns and challenges confronting vulnerable populations. The following conference proceeding will address how research methods embedded in Eurocentric epistemologies can inadvertently have a negative effect on the populations they are meant to understand and support. Theories of intersectionality and social justice are used throughout to inform how researchers may be attuned to the ways in which their studies may be beneficial or harmful to vulnerable populations. Firstly, the ways in which research can serve to further marginalize already vulnerable populations is addressed. Next, ramifications of recruitment and compensation with vulnerable populations are discussed. Finally, the role of technology in research and the ways in which employing technology can lead to either inclusion or exclusion in research practices is considered.

Keywords

Research methodology, vulnerable populations, marginalization, recruitment, compensation, technology

The lack of research and recognition of vulnerable populations' lived realities can lead to an organization's inability to provide services that reach individuals marginalized by economic, political, social, or cultural circumstances (Corey, Corey, & Callanan, 2007). In order to understand the circumstances that create multiple vulnerabilities, researchers need to closely assess the interconnected qualities of people's lives given their social and cultural contexts. There are systematic ways to do this research, however there are many challenges and pitfalls along the way,

as well as the ongoing requirements of researchers to be self-critical, reflexive, flexible, disciplined, and patient (Court, Abbas, Riecken, Seymour, & Le Tran, 2018). In order to consider ways to conceptualize research with vulnerable or marginalized populations, it is important to incorporate tenets of social justice, such as; reflexivity (Sinacore & Enns, 2005), partnership, participation, protection, and power (Wilson and Neville, 2009).

Sinacore and Enns (2005) proposed an Integrated Social Justice Pedagogy, with *reflexivity* as a main component. They suggest that reflexivity involves continually reflecting on and addressing one's personal biases, assumptions, and attitudes. With regard to research, as previous mentioned it essential to not only reflect on one's personal bias but how these biases will influence the research questions, methods, and analysis.

Next, *partnership* involves establishing and maintaining relationships based on trust and respect with members of the population of interest. These relationships can be developed through engaging with the population in genuine ways, such as creating space for dialogue and negotiation throughout the entire research process. Thus, researchers need to be informed about the population's worldview, epistemologies, protocols, as well as, historical and contemporary realities (Wilson & Neville, 2009). As well, *participation* refers to involving key members of the population of interest in all stages of the research, including decision-making and planning (Wilson & Neville, 2009).

Further, *protection* describes conducting research in ways that do not exploit vulnerable populations, and do not reinforce existing negative stereotypes. Rather, research should be conducted in ways that provide explanations that benefit the population being studied. Research processes should be congruent with the key beliefs, epistemologies, traditions and protocols of the population. However, it is important to acknowledge that the title *protection* may be problematic, as it could be perceived as patronizing. Nevertheless, researchers are strongly encouraged to examine and address the ways in which their research could pose risks to the populations with which they work and put systems in place to minimize that risk (Wilson & Neville, 2009). As well, sharing *power* with research participants is essential to ensure that the data collected accurately reflects the voices and experiences of the populations of interest (Wilson & Neville, 2009). However, even when researchers attend to reflexivity, partnership, participation, protection and power, it is crucial that they are cognizant of fundamental challenges inherent in conducting research with vulnerable populations.

Challenge One: Overrepresentation

When a particular population is disproportionately overrepresented or identified as having a specific problem, consequences of such overrepresentation can result in generalized labeling effects and reinforced biases. One example is the overrepresentation of Indigenous people in the criminal justice system. However, this overrepresentation can be explained by analyzing structural inequalities such as, historical abuses, institutional racism, colonialism, socioeconomic marginalization, and the impact of specific practices of criminal justice agencies (e.g. racial profiling) (Corrado, Kuehn, & Margaritescu, 2014; LaPrairie, 2003). A second example is the overrepresentation of culturally diverse students in inclusive education. That is, educational inequities may result in certain student populations having less access to information, resources,

and opportunities, consequently missing the requisite knowledge and experiences that leads to academic success (Waitoller, Artiles, & Cheney, 2010). These examples highlight the importance of understanding the contexts and structures which advantage or disadvantage certain populations such that the researcher adequately consider how these variables influence their research questions, epistemology, methodology and data analysis.

Challenge Two: Language

The words used to define populations may ascribe value and meaning to these populations that can have longstanding consequential impact. For instance, biased, and stigmatized language can result in labeling, stereotyping, and discrimination (Link & Phelan, 2001). Particularly with vulnerable populations, the representative research labels that have been used to identify these populations have often not recognized the hardships these populations face. For example, labels such as “hard to reach”, “hidden”, and “difficult to access” make the researcher’s experience salient rather than the participants. This language suggests that certain populations are less cooperative and depicts these populations as less than optimal research subjects. These labels ignore the pervasive danger that vulnerable populations often face, particularly in regard to research. Employing language that marks populations as difficult is a disservice to these populations and perpetuates marginalization. Furthermore, this kind of language likely maintains the distrust in research that keeps marginalized populations from participating in studies.

Challenge Three: Clear Beneficence

Beneficence is how the research benefits the participants and society as a whole through minimizing the risks associated with research. Engaging in research may result in participants experiencing anxiety, distress, exploitation, and misrepresentation (Department of Health, 2014). Certain individuals may feel alienated and disempowered when they participate in research without being informed about the researcher’s intentions and how their participation and the dissemination of research findings will benefit them and the populations they represent (Beauchamp & Childress, 2001).

Furthermore, with the intention of supporting diverse populations, many researchers tend to focus only on the negatives and ignore the positives that exist within marginalized populations (Yoshioka & Choi, 2005). Employing a strength-based epistemological position will ensure that researchers are not employing deficit-based models when engaging with populations who face numerous challenges. Researchers need to consider how their epistemological and methodological choices enhance or inhibit the resourcefulness and strengths that individuals and their communities possess, despite extraordinary circumstances. As such, cultural values or norms, are considered as potential resources for change (Yoshioka & Choi, 2005).

Challenge Four: “Othering” Culture

Historically, in the context of multicultural research the term culture was used to imply race or ethnicity that was other than White or of European heritage. As a result, the term was used when the focus was the culture of “others” (Montoya & Agustin, 2013). However, it is important to note that everyone is a cultural being, and therefore cultural-neutrality is not possible. Thus, it is

essential to use an inclusive definition of culture based in intersectionality and diverse identities such as, ethnicity, nationality, gender, age, social class, sexual orientation, and disability (Pope & Arthur, 2009).

In addition, researchers need to be cognizant of how focusing on cultural factors raises certain challenges. Researchers may need to ask critical questions to assess the whether or not they are integrating culture in a competent and appropriate manner. For example, when is a behaviour called “cultural” and when is it not? Why is the researcher distinguishing behaviours in this way? What are the consequences and benefits of recognizing and naming culture? Volpp (2000) argues that when a person from an ethno-cultural minority group engages in a behavior seen to be problematic, there is a higher tendency for researchers to name said behaviour as cultural, which may result in generalizing the behavior to a particular cultural group. The assumption that a group of people are solely governed by cultural factors can be both dehumanizing and depoliticizing through neglecting the analysis of how structural forces shape reality (Volpp, 2000). Furthermore, situating the problem in cultural factors may result in researchers proposing policies and/or theoretical conclusions aimed at rescuing culturally-diverse groups from their cultures. As a result, these recommendations may serve to stigmatize and silence culturally-diverse groups as well as exaggerate the differences between “us” and “them,” thereby “othering” the population (Montoya & Agustin, 2013).

Alternatively, researchers using intersectionality as an approach consider the complexity of multiple identities. Intersectionality focuses on multiple and converging identities, drawn from race, age, social class, sexual orientation, abilities, religion, spirituality, ethnicity, nationality, citizenship status, physical characteristics, culture, history, geographical location, and language, while still being uniquely whole (Lockhart & Mitchel, 2010). An individual’s identity can only be understood through exploring the unique place that emerges at the intersection of these multiple identities. Yet, these multiple identities must be understood as dynamic inequalities in changing relationships with each other, rather than a static list of structural locations (Collins, 2010). The inclusion of intersectional epistemological positions requires researchers to focus on the interplay between various inequality-creating categories and the resulting negative effects, while respecting and addressing diverse experiences (Montoya & Agustin, 2013).

Challenge Five: Recruitment and Compensation

There is an egregious history of harm within psychological research and clinical practice (e.g., The Stanford Prison Experiment, Conversion Therapy, and Project MKUltra). The Nuremberg Code in 1946 shed light on the potential risks of participating in research, and yet there are still many ways that research does not follow the psychological ethical code of non-maleficence (Haverkamp, 2005). In addition to harm directly from participating in research, there have been serious repercussions for many vulnerable populations through the dissemination of delusive and damaging perspectives that legitimize structural oppression. Haverkamp (2005) indicates many valid reasons that vulnerable populations may be wary of joining research including research being unsafe, participants being misrepresented, research not benefiting the participants, participation not being worth the compensation, and participants experiencing micro and macro aggressions.

An example of these types of transgressions can be seen when examining research with sexual and gender diverse populations, such as lesbian, gay, bisexual, transgender, queer, and gender non-conforming people. These populations have faced deplorable misrepresentation and mistreatment within psychological domains, including pathologization within The Diagnostic Statistical Manual and The International Classification of Diseases and traumatic corrective techniques such as conversion therapy (Drescher, 2010; Liamputtong, 2007). Within clinical categorizations and research outputs, gender and sexual diverse populations have faced stigma, prejudice and discrimination that contribute to broader societal marginalization (Drescher, 2010; Liamputtong, 2007).

Recruitment

Recruitment can be a very difficult stage of research that has significant implications for the research, and the participants. In the majority of research paradigms employed, the researcher seeks participants to investigate the researcher's interest, rather than the alternative, where participants seek researchers to investigate participant interests (Given, 2008). Unfortunately, not many papers include reflections on how and why participants were recruited for a particular study, however, given the structure of recruitment, most researchers must speculate on who to include and the reasons why anyone would participate in their study.

That said, when recruiting any population, researchers will come into contact with the innumerable intersecting identities inhabited by members within a community. It is crucial to consider the myriad of ways that a participant may be vulnerable with regards to their personal experiences as well as the recruitment criterion and the research being conducted (Sprague, 2016). For example, it is common for sexual and gender diverse populations to be aggregated into "The LGBTQ community" (*LGBTQ* refers to Lesbian, Gay, Bisexual, Transgender, Queer, and the many other non-dominant gender and sexual diverse identities) as a fixed and homogenous identity, whereas these populations comprise many different people coming from various communities with diverse lived experiences. The way that identities, groups, and social locations (e.g., gender, sexuality, race, ability, social economic status, religion, age) come together in an individual may profoundly change the experience of any one of these identities (Sinacore, 2017). Research has the potential to attend to and honor the intersectional identities of participants. However, making assumptions that ignore these realities may serve to bolster stereotypes and misconceptions, as well as to possibly put participants in dangerous or unethical situations.

Further, there are many research paradigms that honor multiple intersecting identities by recognizing and working to reduce social, political and power inequities, and these paradigms are recommended when working with vulnerable populations (Chilisa & Kawulich, 2012; Given, 2008; Haverkamp, 2005; Sprague, 2016). During recruitment, it may build trust to be transparent about the research paradigm chosen for the study, as well as the reasons for selecting the paradigm. Some research paradigms, such as participatory-action research, prioritize the explicit benefit toward participants, rather than focusing on societal research benefits (Haverkamp, 2005; Kidd, 2005).

Population definition is a critical aspect of recruitment that influences results, as well as societal views of populations. The parameters of a population influence where and how researchers recruit. There can be consequences when choosing between criteria that are inclusive and those that limit within-group variability (Moradi, Mohr, Worthington, & Fassinger, 2009).

For example, the notion of a singular “LGBTQ community” combines gender and sexuality in an inclusive way that may acknowledge common experiences such as discrimination and resiliency, but also introduces tremendous variability (Moradi, et al., 2009). There are also ways that population definition may ignore intersecting identities. For example, “LGBTQ” is not an internationally recognized means of identifying the diverse sexual and gender minorities assumed within this label. If researching in Canada, immigrants and refugees may not see themselves in this label and thus may not join the study. Acknowledging population variations can inform recruitment parameters and bring awareness to the far-reaching implications these parameters may have on participants.

Moreover, when working with vulnerable populations, the outreach method employed for recruitment will vastly influence access to the population. Recruitment methods aimed at reaching vulnerable populations often rely on using social networks, such as the researcher’s personal connections, a community leader, or organizations that serve the population. However, these strategies may limit sample diversity as they are passive in nature and rely on a fixed individual for recruitment. As well, these methods may place an undue burden on researchers, community leaders, and organizations (Liamputtong, 2007; McCormack, 2014). Further, sampling techniques may serve to enhance or inhibit the recruitment process. For example, criterion sampling may limit diversity if a narrow criteria is applied. Alternatively, using the snowball technique allows participants to offer potential participants access to the research. This approach can be a means of gaining community trust, but potentially may pressure participants to do additional work (McCormack, 2014).

Researchers can also reach communities by spending time participating with community members before beginning the study. As relationships and trust develop, researchers may be able to introduce their research and recruit participants (McCormack, 2014). An additional challenge to think through during recruitment is saturation, which is a methodological principal used in qualitative research to decide whether or not further data collection is necessary (Saunders, et al., 2018). To calculate saturation, both the population definition and intersecting identities must be taken into consideration. For example, if a study includes all sexual and gender minorities – in order to capture innumerable identities, how many participants will a researcher need to reach saturation? Finally, during recruitment phases, it is important to think through how the researcher presents the implicit power dynamics and the influence these dynamics will have on the participants and research (Haverkamp, 2005).

When working with vulnerable populations, building trust is essential, and transparency about the research project is an avenue to trust. Participants have the right to be informed of the scope of the research, epistemology, methodology, procedures of recruitment, compensation, data analysis, decision-making processes, ethics, research dissemination, data confidentiality, consent, funding of the project, as well as the risks and benefits participants may face (Fassinger & Morrow, 2013; van Wijk, 2014). There are ramifications to how information is provided: websites can display basic details, but researchers may feel vulnerable disclosing the entirety of their research online. Trust is also built through relationships. Recruitment is a process of initiating relationships that are fostered throughout the research. However, researchers may find themselves in multiple roles as they also become trusted community members. Participants have the right to know the ways in which a researcher suspects their relationship to participants may change through the research process (Fassinger & Morrow, 2013; van Wijk, 2014).

Compensation

There are four essential questions behind compensation: What incentives do participants have to participate? Is the compensation beneficial to the participants? Might the compensation induce harm? How can compensation be offered without coercion? Compensation decisions are rarely included in publications yet have serious implications for participants. Financial compensation is one of the more commonly used types, whether through direct remuneration, or financial representation, such as gift cards. However, those who are economically disadvantaged may not be able to afford *not* to participate in the study and thus, compensation may be experienced as coercive (Tishler & Bartholomae, 2002).

An additional concern is when volunteers attempt to participate in research in order to gain compensation, even when they do not meet criteria (Riggle, Rostosky, & Reedy, 2005). As such, it has been recommended to offer low compensation when working with economically disadvantaged populations (Riggle, Rostosky, & Reedy, 2005; Tishler & Bartholomae, 2002). However, this suggestion perpetuates the economic inequities faced by low-income populations and puts in place unfair compensation guidelines for the populations in the greatest need of financial gain (Tishler & Bartholomae, 2002). Transparency surrounding compensation decisions can work against the unjust power differentials that are inherent in the researcher-participant relationship (Fassinger & Morrow, 2013; van Wijk, 2014). Participants should know why they are being compensated, how much they will be paid and when. They should also be made aware of the interaction between payment and participation. There is a paucity of research detailing the relationship between participant volunteerism and financial compensation, raising an unknowable ethical concern for the vulnerable participants who may make difficult choices to join or decline a study (Tishler & Bartholomae, 2002).

Financial compensation is not the only method to recompense participants. Other compensation types may reduce concerns of fraud and inducement (van Wijk, 2014). Some researchers have found that participants are not financially motivated to enroll in studies. Rather, they are interested in sharing their story for validation, as well as a form of activism (van Wijk, 2014). Ease of access to the study can also be a method of compensation. Day care, snacks, transportation, and hours outside of work schedules are examples of ways to demonstrate respect for the lives of participants and the effort required to participate (Fassinger & Morrow, 2013). When working with organizations, researchers can volunteer to compensate for the time and effort allotted to the research study (Fassinger & Morrow, 2013). An empowering approach to compensation is to provide community access to research results (Kidd, 2005).

Challenge Six: Using Technology in Research

Given the significant increase in innovative technology it is important to consider the implications of using these technologies in research. Thus, as researchers embrace these advancements, it is necessary to think critically about the influences of technology on research with human participants, particularly vulnerable populations.

In order to assess the use of technology in research, it is important to understand the prevailing phenomenon termed The Digital Divide. The Digital Divide refers to differential access to the

internet and digital devices among populations, depending on intersectional positionality (Chang et al., 2004). For example, as a result of lower socio-economic status, certain individuals may have significantly reduced access to digital devices and the internet. As such, researchers need to consider differential access to technology. If researchers heavily rely on recruitment through technology, they may exclude and marginalize participants and may attain a sample that is non-representative. Therefore, researchers need to consider how to use technology in ways that does not exclude or marginalize the potential participants with whom they are working.

Technology in Recruitment

As previously indicated when recruiting participants from vulnerable populations, research has shown that fostering trust is of the utmost importance. Moreover, face-to-face interaction has been demonstrated to be the best method for establishing relationships that are based on trust and respect (Wilson & Neville, 2009). However, certain situations make face-to-face interactions less feasible (e.g., research with people experiencing physical or mental illnesses that significantly limit mobility). Therefore, in such situations, technological tools present obvious advantages in establishing relationships. These tools can also be used to complement face-to-face methods to help build trust and alliance with key members of the vulnerable population. In addition to traditional tools such as phone calls, emails, and listservs, more recent technological tools include social media platforms such as Facebook, LinkedIn, Google Plus and Instagram as well as, independent and institution-hosted websites; mobile phone applications; and recruitment-matching companies (Chang et al., 2004; McKinnon, 2018).

Given the history of oppressive methods used in some psychological research, researchers need to reflect upon the potential pitfalls of using technological tools before they implement them. Important considerations are as follows. Researchers need to be thoughtful about the mediums of publicizing their research and the content of their research invitations. Researchers will need to show transparency by providing enough information about themselves, their intentions behind the research, the intended benefits and the potential risks. As much as possible, researchers also need to ensure that their content, such as wording and images, do not further propagate negatives stereotypes in public media about that population. Furthermore, depending on their purpose, media may hold various levels of credibility to viewers. For example, a post about a research advertisement on Facebook may appear less legitimate to a potential participant than the same information on a research website. To exemplify integrating technology into research with vulnerable populations, in a study employing a narrative approach to understanding the stories of artists with congenital and acquired disabilities, the researcher (in order to establish trust and credibility with this population) contacted key members in the community and attended community events, such as art exhibitions. Afterwards, the researcher used technological tools, such as email, to stay in contact with community members who decided to participate in the study (Titus & Sinacore, 2017).

Technology in Data Collection

Rapid technological innovation has provided tools for collecting data in qualitative research. Available tools include Voice over Internet Protocols with video features (e.g., Facebook, Skype, Google Hangouts, and WeChat), Telemedicine applications (e.g., Doxy.me), instant messaging

interviews (e.g., Facebook messenger, WhatsApp, etc.), chat-room focus groups, online focus groups, live polling, photo-sharing programs, and email interviews (Redlich-Amirav & Higginbottom, 2014).

Nevertheless, in using these internet-based tools for qualitative research, many ethical considerations arise. According to Redlich-Amirav and Higginbottom (2014), a very common dilemma among qualitative researchers is differentiating between the private and public spaces on the internet. As technological tools are managed by external companies, and participants experience differing levels of privacy and security, it has become increasingly challenging to ensure informed consent, confidentiality, anonymity, and voluntary withdrawal from research studies (Redlich-Amirav & Higginbottom, 2014). In order to make informed decisions about appropriate tools, researchers need to study the privacy and ownership policies of the tool of interest and reflect on the potential risks to participants. Researchers should also seek external consultation from ethics boards and key members of the vulnerable population. Additionally, they should receive training to prepare for unintended consequences of technology use in research, such as breach of participants' confidentiality online.

Some researchers have used Skype for Business and in-person individual interviews to collect data (Titus & Sinacore, 2017). These methods enabled the researcher to establish rapport with participants and to engage in the non-verbal communication necessary for qualitative research. Furthermore, others have used the telemedicine application called Doxy.me and in-person individual interviews to collect data in order to reach participants living in other provinces via video chat, while interviewing nearby participants face-to-face (Adekoya & Sinacore, 2018).

Technologies in Data Analysis

In qualitative research, transcribing interviews and analyzing transcripts are time consuming and labour-intensive activities. Research software can now aid in transcription, coding, and developing visual concept maps. Some of the recent data analysis software include ATLAS.ti, NVivo, HyperRESEARCH, DEdoose, WinMax, and QSR NUD*IST (Brown, 2002; Moylan, Derr, & Lindhorst, 2015).

As Baptiste (cited in Brown, 2002) stated, various qualitative data analysis softwares are embedded with their designer's epistemology, which may promote particular ways of construing and performing data analyses, while excluding others. According to Baptiste (cited in Brown, 2002), since computers make counting more efficient, researchers may be enticed to base their indicator of meaningfulness or significance of data points solely on the "frequency of occurrence" (p. 8). Therefore, it is crucial for researchers to be informed about the epistemological, axiological, ontological and methodological positions through which the software processes data.

Finally, another consideration regarding data analysis software is data immersion. One of the key processes of qualitative data analysis is the immersion into the data which, in turn, leads to the creation of rich accounts and descriptions. As such, this raises a question as to whether technologies take away from the opportunity of researchers to be more intimate with the data as instead of viewing transcripts as comprehensive documents, software may prematurely breakdown the data into smaller units. Thus, the researcher needs to be cognizant of the relationship

between the parts and the whole such that using technology does not inadvertently create a micro-picture versus rich description.

Technology in Research Dissemination

In addition to collecting and analyzing data, technologies now offer new avenues for writing and disseminating research results. Various tools are discussed by Moylan, Derr and Lindhorst (2015). For example, Scrivener, a writing software, accommodates non-linear writing which is common in qualitative research. Additionally, programs such as PowerPoint, Keynote, and Prezi allows for creative and effective ways of reporting on research findings. Multimedia (e.g., photos, videos), blogs, and social media platforms (e.g., Facebook, LinkedIn, Research Gate) are now used creatively to disseminate findings to audiences other than the readers of traditional academic journals (Moylan, Derr, & Lindhorst, 2015).

An important consideration for adopting these technologies for the dissemination of results is the concept, “the medium is the message,” coined by McLuhan (1967). This concept emphasises that the ‘*how*’ of a message presented is just as important as the ‘*what*’ of that message (McLuhan, Fiore, & Agel, 1967). For example, a photo exhibition featuring issues related to poverty among a certain people group presented in a university hallway has different implications when compared to an academic journal article on the same issue. Ultimately, it is important for researchers to reflect on how to disseminate research findings in ways that can benefit the populations being studied.

Summary and Conclusion

There is an ethical necessity to consider the ways in which research may harm those who choose to participate. Particularly with vulnerable populations, ongoing efforts to safeguard participants is required at every stage of research. Researchers are encouraged to incorporate understandings of sociopolitical histories and structural power dynamics that impact the varying identities of all parties engaged in research. Furthermore, researchers are asked to reconsider how known research conventions may cause harm in ways that have gone unnoticed or ignored, and to adjust and correct these conventions to the best of their ability. The ethical commitment to non-maleficence should be a priority for researchers, above productivity. For example, recruitment and compensation have ethical implications, directly impacting participants, as well as indirectly contributing to societal norms. Deep and ongoing reflection on method selection can reduce harmful outcomes (Haverkamp, 2005). The vulnerability of participants, as well as researchers, should be considered, with attention to the wider, sociopolitical implications related to the varying intersecting identities of researchers and participants. Efforts to think through any benefits or harm that may result from participation is required for ethical research. It is the hope that calls to action for more intentional consciousness of the benefits and consequences of research production will lead to improved practices that better serve our communities.

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Creating Space for Indigenous Research in Canadian Counselling Psychology Graduate Programs

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Abstract

This article builds off the symposium presentation entitled “Decolonizing Canadian Counselling Psychology: Creating Space for Indigenous Scholarship” which was delivered by the authors at the 2018 Canadian Counselling Psychology Conference. The symposium presented Ms. Inkster and Ms. Smeja’s respective Master’s research projects, while Dr. Jordan and Dr. Goodwill shared their supervisory experiences overseeing research aimed at advocating for Indigenous communities. This paper expands on the individual presentation topics by discussing broader systemic issues and considerations relevant to making space for Indigenous scholarship within Canadian CP programs. Personal narratives are weaved throughout the paper, emphasizing challenges in academic environments, resilience and resistance strategies, as well as the important role of mentors in graduate students’ decision to pursue Indigenous Research Methods. Specific recommendations addressed to our field are also discussed.

Key words

Indigenous, epistemology, research, supervision, decolonization

First Nations, Métis, and Inuit peoples have inherent rights to self-government within Canada and the right to define their own goals of education (Stonechild, 2006). Federal Government assimilation policies violated these rights and have left an indelible mark on Aboriginal* peoples (RCAP, 1996). When making space for Indigenous Research in Canadian Counselling Psychology (CP) graduate programs, it is good practice to be familiar with the depth and extent of Indigenous students' inherent rights as protected by Section 35 of the Canadian Constitution, the Royal Proclamation of Canada, and the numbered Treaties. For example, Section 25 of the Canadian Charter of Human Rights makes it clear that other rights contained in the Charter must not interfere with the rights of Aboriginal peoples. Where Aboriginal students are entitled to special benefits under treaties, other persons who do not enjoy those benefits cannot argue that they have been denied the right to be treated equally under sections 15 and 25 of the Charter. Canadian discourse around "post-secondary education is free for Indigenous peoples" reflects the need for remedial education on the meaning of inherent rights of Indigenous peoples, as well as a history lesson on the violation of inherent rights in the context of post-secondary education.

The Canadian post-secondary education system has been used as an assimilation strategy. For example, from 1880-1960 under the Indian Act, an Indigenous person's status was terminated upon admission to university. The Indian Act is a Canadian federal law that governs in matters pertaining to Indian status, bands, and Indian reserves (Venne, 1981). Enfranchisement is the legal process for terminating a person's Indian status and conferring full Canadian citizenship, which occurred if you were an "Indian" admitted to university between 1880-1960.

Indian Act Section 99.(1) Any Indian who may be admitted to the degree of Doctor of Medicine, or to any other degree by any University of Learning, or who may be admitted in any Province of the Dominion to practise law [...], or who may enter Holy Orders, or who may be licensed by any denomination of Christians as a Minister of the Gospel, may upon petition to the Superintendent-General, ipso facto become and be enfranchised under the provisions of this Act [...].

Knowledge of Federal Government assimilation tactics such as these are important to recognizing their reappearance in our education practices and discourses within our graduate training programs. The CP graduate students' experiences shared here will illustrate the subtle and overt ways assimilation practices have affected their pursuit of Indigenous Research Methods (IRMs)* in Canadian CP graduate programs (i.e. the problem/challenge). Student narratives discuss how the problem surfaces in their respective academic environments (i.e. the environment), as well as how they navigate educational institutions that prioritize colonial* worldviews by challenging the status quo through their research initiatives (i.e. taking it on). Students' and CP professors' combined perspectives highlight the important role of Indigenous scholarship and mentors, share resilience and resistance strategies, and reflect on ways of honouring community in their professional roles (i.e. carrying forward). Finally, specific recommendations addressed to our field are made by a CP professor.

Operationalization of Terms

Aboriginal. Though we use the term "Aboriginal" to encompass First Nations (status and non-status Indians as defined in the Indian Act), Métis and Inuit peoples whose traditional and

ancestral lands spread across (but are not limited to) Canada, we mainly use the more current term “Indigenous”. We acknowledge the diversity of the peoples this represents and the limits of using such vast terms. Given the brevity of this paper, we hope they serve its purpose by conveying what are perhaps common experiences between these groups in dealing with colonial spaces, particularly educational institutions.

Colonial(ism). We also use the terms “Western” or “Eurocentric”.

Decolonization. We refer to the long-term process of Indigenous people resisting colonialism. We understand this as a cultural, political and theoretical movement involving Indigenous revitalization and self-determination, an awareness and critical analysis of the impacts of colonization on Aboriginal people, as well as a focus on Indigenous perspectives and concerns (Smith, 2012).

Indigenous research methods (IRMs). We mean ways of conducting research that are grounded in Indigenous epistemologies/worldviews.

Problem/Challenge

For CP research to prove valuable in the urgent project of enhancing and decolonizing Indigenous mental health (CPA, 2018), our research and counselling praxis must make space for Indigenous worldviews and ways of knowing. We argue that the urgent need for responsive, safe mental health care in Indigenous communities is connected to the safety of Indigenous persons and practices in CP graduate training. One such practice is how knowledge is produced, recognized, and honoured within the academic framework. In spite of our field’s stated commitments to meet the need for Indigenous centred research, graduate student researchers face challenges in carrying out Indigenous research within Canadian CP Traditions.

The Environment

All authors have the shared experience of living, working, studying and practicing on the unceded Coast Salish territories. We acknowledge the Halq’eméylem and Hən’q’əmin’əm speaking peoples with whom we share space as uninvited guests in their lands. While authoring this paper in the English language, we acknowledge their ongoing efforts to revitalize and reclaim their languages. We share the predicament of negotiating the tensions of using English to express Indigenous concepts in spaces that might contribute to hermeneutic deficits that negatively affect the “researched”.

Epistemological Violence is closer to personal than to structural violence in that it has a subject, an object, and an action, even if the violence is indirect and non-physical, the subject of the violence is the researcher, the object is the Other, and the action is the interpretation of data that is presented as knowledge (p. 295, Teo, 2010).

The environment that Indigenous graduate students navigate during their training is an important context to consider when discussing spaces for Indigenous scholarship. Universities are complicit in the colonial project when Indigenous students encounter epistemic erasure, with

Western post-positivist research methods given primacy over Indigenous worldviews and research methods. It is an environment that has been referred to as hostile, toxic, alienating and destructive by Indigenous staff and students (Smith, 2012). The following paragraphs describe two graduate students' experiences that speak to a larger issue often echoed by Indigenous scholars (Smith, 2012).

Cheryl's Experience

In my undergraduate research courses there was no mention of IRMs. In my graduate research courses there was brief mention of IRMs, in that they exist, but this was not the professors' area of expertise, so we were advised against using them for our thesis research and in-class assignments. We were told that if we wanted to publish our thesis, IRMs were not widely accepted. This narrow, ignorant viewpoint made me originally design my Master's study with a Western method despite my intention to pursue IRMs. I received similar statements from classmates questioning the validity of IRMs. As a new researcher, these combined experiences made me move away from my desire to pursue IRMs.

Katrina's Experience

During my undergraduate studies in psychology, IRMs were never discussed in the courses I enrolled or the laboratories I volunteered for. There was a strong emphasis on quantitative research methods and qualitative research was only mentioned in passing, conveying to me that it was less desirable. Given those parameters, I didn't feel a pull towards conducting academic research. Outside of my studies, however, I had opportunities to work on community-based research projects in my traditional territory. I personally connected with the research I was involved in because I was able to get familiar with Cree language, connect with Elders, and learn about practices such as those based in Traditional Ecological Knowledge. Those experiences showed me that I did have an interest in research, provided it was related to Indigenous ways of knowing. When I was applying to graduate studies, I was seeking out supervision to carry out research in an Indigenous context. None of the professors I encountered had expertise in this area or seemed interested in supporting it. The lack of Indigenous scholarship and mentorship at the time, discouraged me from pursuing research altogether. The message seemed clear to me: there was no space for the work that was meaningful to me. Therefore, I applied to graduate programs with a stronger emphasis on practical training and was admitted to the non-thesis stream of SFU's CP program.

Knowing the challenges Indigenous students face in their graduate programs, such as the self-doubt fostered about the legitimacy of IRMs, raises the following question: What would it take to for Indigenous researchers to feel that Indigenous scholarship belongs in CP?

Taking it on

Encountering Indigenous Scholarship

Going beyond University classes and discovering the depth of knowledge in Indigenous scholarship was an important part of the student authors' learning process and path to engaging in

Indigenous centred research. In this section, they share how connecting with the literature and other Indigenous scholars was a validating experience that encouraged their pursuit of IRMs.

Cheryl's experience. Connecting with Indigenous scholarship and mentors aided me in returning to IRMs. I learned from existing literature that Western epistemologies have been colonially established as superior and are privileged through research practices (Chilisa, 2012), and about the need for Indigenous informed and Indigenous centred research (Duran, 2006; Duran & Duran, 1995). Researchers also argue that Indigenous knowledge frameworks should be recognized within academia (Chilisa, 2012; Smith, 2012; Wendt & Gone, 2012). Connecting with other Indigenous scholars and mentors, taught me that there is lots of important, rigorous and meaningful research being done.

For my Master's research, I interviewed female Indigenous youth who had been relocated from rural northern communities in the Northwest Territories to live in foster care in British Columbia's Lower Mainland (Inkster, 2017). Using Indigenous Storywork (Archibald, 2008) and Métis Beadwork methodologies, youth were invited to share their experiences of relocation. When designing my study, I learned from other researchers that qualitative methods (QMs) used within an Indigenous methodological framework have the potential to be decolonizing (Wendt & Gone, 2012). Scholars have shown that most, and perhaps all, major issues for Indigenous groups cannot be separated from the atrocious histories that continue to affect them (Wendt & Gone, 2012). The goal of a decolonizing methodology, therefore, is to assist colonized groups to reclaim their specific cultural traditions as well as to reveal the effects of colonialism (Smith, 1999). This became apparent to me as I reclaimed my specific cultural traditions and Teachings through Métis beadwork. Also, the effects of colonialism were revealed in the girls' stories of relocation (Inkster, 2017). My experience conducting my Master's research highlights the importance of using IRMs to advance the decolonization of CP.

Katrina's experience. My experience in graduate school was different from that of my undergraduate studies, thankfully. For the first time within academia, I was encountering pockets of Indigenous scholarship. For instance, we read Kathy Absolon's (2010) article on Indigenous Wholism during a Theories of Counselling class taught by Dr. Jordan. I was finally becoming familiar with material referring to Teachings and worldviews that were in line with those of my birthplace in a classroom setting. Furthermore, during a QMs class, I was introduced to IRMs after engaging with Michael Hart's (2010) article, which was another required course reading. These were key moments that opened up my research process: I eventually switched to the thesis stream of my program. Those experiences also encouraged me to incorporate IRMs into my study design and invited me to delve deeper into Indigenous scholarship.

Eduardo Duran (2006), for instance, highlighted how the mental health field has been another avenue for colonial ideas to be pushed onto Indigenous people. He put professional terms to what I was experiencing and noticing. I also became familiar with the work of Rod McCormick, another Indigenous scholar who stressed the need for culturally relevant practices. He has also commented on the general direction the literature has taken, in that little emphasis has been put on the strengths of Indigenous peoples, which he argues perpetuates their disenfranchisement and disempowerment (McCormick, 1998). Furthermore, Shawn Wilson (2001) outlined some ways qualitative approaches overlap with Indigenous perspectives. Much like him, I couldn't help but feel they were incomplete in some respect. Therefore, I found the works of IRMs scholars Linda Smith

(2012), Margaret Kovach (2005) and Michael Hart (2010) helpful to my research design and process. These scholars discussed ways of knowing and sharing knowledge that were more in line with those of my community Teachings.

Resilience and Resistance Strategies

Navigating systems require resilience and resistance strategies on Indigenous students' part. Making use of academia's platform can create tensions for Indigenous students and scholars, especially when they are trying to ensure that they do not become alienated from Indigenous ways of being, knowing and doing (Hart, 2010; Smith, 2012). The student authors certainly experience these tensions, particularly the more immersed they become in both worlds. The following are some strategies they have found helpful. Much of their experiences overlapped, therefore they are presented in a joint narrative.

Collective student authors' experiences. In order to thoroughly engage with Indigenous scholarship in a university setting, we have mainly had to create those spaces for ourselves. We have, for instance, chosen to write course papers on Indigenous topics and have decided to take on theses. Writing represents an act of resistance (Anderson, 2006). We have also sought out courses outside of our programs with an Indigenous focus, but these were not always safe learning spaces. Whereas we encountered the microaggression of oversimplified statements negatively stereotyping Indigenous people in general required coursework, we experienced moments of alienation in courses with an Indigenous focus when we were singled out or tokenized in front of the class.

When we have the energy to do so, we may choose to offer remedial education to peers and instructors diplomatically. Holding difficult conversations such as these, however, requires us to be in a good place. At times, we feel like we are “walking on eggshells”, not wanting to bring up defensive reactions in others, which becomes exhausting. When we are feeling depleted, we may choose instead to withdraw and distance ourselves from those who hold ignorant views. We argue though, that these moments of retreat or silence, are still acts of resistance and a form of resilience. Putting adversity aside and focusing our energy on other areas that move us forward (e.g. coursework, research, training, practice) give us opportunities to channel our voice on different platforms, ones where we can have more impact (e.g. writing this paper, reaching a wider audience). When we do step back, we may question whether or not these (in)actions are in line with our values and may need to work harder on reminding ourselves that we need to “pick our battles” now and then.

We recognize this is not a struggle we can take on alone though. Some of our strategies are based in building supportive networks on and off campus. For example, we have sought opportunities to meet other graduate students and professors who lift us up and who engage in Indigenous Research. We have been able to do so by attending and sitting on the planning committee for the Indigenous Graduate Student Symposium (IGSS), a partnership between SFU and the University of British Columbia (UBC) arranged to bring graduate students together to share their research. We also made use of visible campus spaces, such as the Indigenous Student Centre, that offer practical resources and a safe, welcoming environment. These spaces represent an informal personal support system that created an extended sense of community, when contacts

with our home communities were disrupted. Connecting with Elders also fostered skills that promote resilience and ideas for resisting marginalization. When available to us, we made use of community resources (e.g. counsellors, post-secondary student support) from a distance too.

Building Relationships with Mentors

Mentorship was another key factor in supporting the student authors' research journey. In the following paragraphs, student authors share how mentors provided them with guidance and encouragement, as well as connected them with valuable resources, such as Indigenous scholars and campus supports. They highlight that perhaps most importantly, mentors created a safe space that recognized their work as legitimate and as a valuable contribution to CP. Dr. Jordan speaks to her role engaging in co-mentorship as a way of supporting the student authors Masters research.

Cheryl's experience. Making space for Indigenous scholarship in academia involved connecting with mentors and faculty members who were willing to admit their limitations and help connect me with others. Dr. Jordan first supported me by agreeing to supervise me. She has an extensive background working with QMs but did not have a background with IRMs. She did not advise against using IRMs but rather modeled how to search for assistance. Dr. Jordan can be a great example for educators wanting to support Indigenous students in pursuing Indigenous centred research. Dr. Jordan connected me with my second thesis co-supervisor, Dr. Amy Parent. As an Indigenous scholar, Dr. Parent has been a great role model for me. She supported me in carefully following protocols of Indigenous Storywork (Archibald, 2008). She was also flexible, encouraged me to use teachings from my Métis community in my research, and challenged me to be bold in my discussion section. With the support of my co-supervisors, I invited Elder and Scholar, Dr. Richard Vedan, to join my thesis committee. Dr. Vedan provided invaluable guidance, Teachings, and encouragement throughout my research process. My co-supervisors also supported me by approaching my institution and securing an honorarium for him. When it came time for my defense, Dr. Goodwill was my external examiner. It was helpful to connect with her and have her read and critique my research.

Outside of my thesis committee, it was important for me to connect with other role models to move forward in academia. In my first year of graduate studies, I made connections through the IGSS. By sitting on the planning committee with other Indigenous students and allies, I gained confidence and felt a sense of belonging. The support I gained from my thesis committee and other mentors ultimately led to my successful defense and graduation from my Master's program. Just before completing my Master's program, I was hired as a faculty member at a local community college and prepared and gained acceptance into a CP PhD program to conduct further Indigenous centred research.

Katrina's experience. I likely would not have embarked on a research path, had it not been for the role mentors played in my professional development. Dr. Jordan, for instance, recognized that I had something valuable to contribute and fostered a safe space for me to engage in academic research. It was helpful to have found a genuine and self-aware ally in her. Moreover, Dr. Jordan connected me with her fellow scholar-practitioner, Dr. Goodwill. Together, they formed my thesis supervisory team, each bringing their own expertise and guiding me in indispensable ways. Dr. Goodwill recommended key Indigenous scholars for me to look up and their writings became an

integral part of my learning. For example, Kim Anderson's (2006) model of the reconstruction of Native Womanhood is central to my research process. Having engaged in Indigenous research herself, Dr. Goodwill cautioned me on certain aspects of my preliminary research design and provided information on community resources. Seeing Indigenous people represented in CP, helps me believe I can achieve my career goals and creates space for me to feel welcome as I enter the field. It has been a real privilege to have mentors whom I look up to and can relate to.

Co-mentorship as solidarity praxis: Sharalyn's experience. I believe that we will all be enriched by creating academic spaces that are open to and informed by Indigenous ways of knowing. We all have a role in creating universities where Indigenous and Western ways of knowing can circulate together, with equal respect and validity—transforming our scholarship and clinical practices. I also firmly value that efforts to address the grave inequities in Indigenous mental health must be led by Indigenous communities. Graduate schools in CP have not yet risen to the challenge of truly nurturing and developing the skills of Indigenous students as leaders in this effort.

For these reasons, when Cheryl and Katrina started asking questions about Indigenous worldviews, I encouraged this inquiry. When they became excited about research and its social justice potentials, I agreed to help them transition to a thesis trajectory. When they started asking about conducting their research using IRMs, I wanted to be able to say yes. I also felt profoundly inadequate to the task. What is my place? What are my responsibilities? To whom? How do I most responsibly use the power and privilege I occupy?

Cheryl has stated that one of the first ways I supported her was by not advising her against using IRMs. This speaks to the pervasive power of epistemic invalidation in universities. Saying yes, rather than using my authority to delegitimize, was a small but important act of resistance to the colonial logic of academia. I wanted to say yes, but I also knew I could not do the work alone. My knowledge of IRMs was limited. I was familiar with Linda Smith's (2012) *Decolonizing Methodologies*, and work by Joanne Archibald (2008), but lacked the deep knowledge needed to supervise their research. I knew from my praxis as a Queer researcher in LGBTQ2+ communities that responsibly navigating the complexity of insider/outsider researcher positionalities requires mentorship from someone with lived, embodied knowledge of the communities, issues and stakes involved.

This awareness informed my decision to seek out collaborators and offer mentorship as a co-supervisor. I am fortunate to be in a Faculty of Education and wider University with some exceptional Indigenous scholars. I could look beyond our immediate program to build a team that offers the best possible chance of bridging good Indigenous Scholarship and the disciplinary expectations of CP. Dr. Parent agreed to co-supervise Cheryl. Dr. Goodwill joined our program in 2018, offering CP-specific expertise to guide Katrina, and future Indigenous graduate students. Co-mentorship has proven both challenging and deeply rewarding. I will share some of my learnings, in hopes that they are helpful particularly to others who, like me, were schooled almost exclusively in Western ways of knowing and schooled out of recognizing our own responsibility in a colonial-settler state.

In the early formation of the research team, we had helpful conversations about what knowledge areas we could each contribute. I tried to work from a stance of self-reflexivity and cultural humility: What do I have to offer—as a person and as a scholar? What are my limitations? What is my responsibility and stake in this research process? In both Katrina and Cheryl's projects, narrative has been a great bridging epistemology. Together, we have found resonance between narrative research and IRMs. Supervision meetings have become places where we ask and explore questions from these distinct, but complementary, ways of knowing.

This is not a seamless process, however. I remember, for instance, discussing how to interpret Cheryl's narrative interview transcripts. Referring to a form of dialogical analysis I often use, I would describe the voices/selves I was reading, interpreting as I went. At first, Cheryl would look at me perplexed and ask: "where are you getting that?" After some more examples, she acknowledged that she could see where these interpretations came from but remained very uneasy with the approach. "How do you know that you're not imposing something on them?" I shared my process of bringing interpretation back to participants, owning the responsibility of interpretation, and the epistemology of polyphony or multivoiced texts. Cheryl stayed steadfast in her commitment to represent the voices of her participants with minimal interpretation. This is when I saw the power of unembellished narratives. Bridging, rather than trying to integrate, distinct epistemologies is a stance Dr. Goodwill recommends. I have learned to sit with the unease of this and have seen that it is generative.

Bridging epistemologies also occurs in the research design and ethics review process. While working on her ethics application, Katrina called and sounded concerned. "Do I have to store my interviews on RADAR (SFU's digital data repository) when I am done?" She had been reading other data stewardship plans which cited open-access initiatives like digital repositories as examples of best practices. I heard the unspoken issues in the question: Katrina interviewed psychotherapists who work with Indigenous clients. Her interviews are not simply practitioners' stories, but also those of their Indigenous clients, as Dr. Goodwill highlighted in an earlier research meeting. We needed to carefully consider our responsibilities for sharing these stories, which could include Indigenous community Teachings. Katrina could not commit to digital storage of transcripts. Would Storytellers want their Teachings stored at a University and if so, could they potentially be misinterpreted or misappropriated? Once again, it was important for me not to assume that the best practices of the discipline were best practices for this project. Together, we discussed the rationale for the ethics review board. Senior Indigenous scholars at SFU have done considerable work in advising the ethics review board, and so Katrina's approach was understood and accepted.

As a final example, I have learned that co-mentorship with Indigenous students sometimes requires stepping into advocacy. Dr. Parent helped Cheryl invite Elder Dr. Vedan to advise us on her project. He brought years of experience with Indigenous health and social service agencies across Canada. Although SFU has official policies of providing honourarium for Elders, we soon learned that the amount available did not reflect the knowledge and time Dr. Vedan had brought to the project. Reciprocity was undermined, and we risked tokenizing his contribution. Amy and I, two junior faculty members, needed to advocate with senior administration to ensure that an appropriate honourarium was offered. We were successful, largely, because of the network of Indigenous and allied scholars that weighed in on behalf of the principle of reciprocity and respect.

This was a small but important act of resistance to a practice that would have perpetuated a colonial practice of undervaluing or tokenizing Indigenous knowledge.

Carrying Forward

This section centres the voices of the authors who identify as Indigenous: the student authors and Dr. Goodwill. They introduce the section using a collective voice then share their individual experiences of carrying community forward.

Moving forward in our careers, we carry a deep sense of commitment to the communities we are linked to. With that dedication in mind, we feel a duty to regularly reflect on how we might carry the community Knowledge and Teachings shared with us, all the while balancing our professional demands and abiding by ethical codes of conduct outlined by professional/regulatory bodies. Having been trained in a predominantly Eurocentric field, we are particularly attuned to our need to envision ways of honouring marginalized worldviews so as to not commit epistemic violence against others.

Katrina's Experience

I have not lived in my traditional territory for a long time, attending educational institutions based in Eurocentric worldviews, in order to meet the standards of professional training for the career I chose. Carrying forward, therefore, requires me to acknowledge warranted fears and skepticism from community and family members while I am away and when I go back. My hope is that, when I do return home, I will have professional skills that will allow me to give back to community. Regardless of the level of professional training I acquire, I believe carrying forward involves a level of humility, such as recognizing that “book knowledge” is but one form of learning and admitting its (and my own) limitations. I also need to continue being mindful of past and current extractive and exploitative research practices within Indigenous contexts and act by doing things differently. When returning to practice in my community (and that of any Indigenous peoples), I want to ensure I am honouring the worldviews of the people I am working with. I think adapting my training to the context I find myself in, might help with this.

Carrying forward also means lifting others, just as they supported me. I aspire to maintain strong working relationships with my Indigenous colleagues and support their professional endeavors through research collaboration, conference presentation attendance, and consultation to name a few. Furthermore, I hope to someday offer guidance to Indigenous graduate students and encourage their clinical and research initiatives. I believe that taking on a mentorship role myself might be a way of ensuring further Indigenous representation in universities and in CP. I anticipate that, much like my experience thus far, my professional aspirations will come with challenges. Still, Indigenous scholars have already begun to pave the way for students like myself and this helps my goals seem possible and achievable.

Cheryl's Experience

As I move forward in my career as a scientist-practitioner, I have concerns about fitting into CP. My master's research taught me the importance of staying close to community and taking the time

to foster respectful relationships. From the powerful stories of the girls I met and got to know, the Teachings from my Métis community and Dr. Archibald's Indigenous Storywork method (2008), I was sustained and motivated through the research process. I hope to carry forward this way of conducting research, but I worry about how it will fit within academia. Connecting with community is an important research step and one that cannot be rushed. I am concerned about how this might fit as I pursue further positions in academia, with the strong focus on output that is placed on new faculty members to move forward in university positions. Where is the space and acknowledgement within academia for the important work being done in and with communities?

Alanaise's Experience

As a CP tenure-track faculty, I have a rare vista into the workings of academic programming/accreditation reviews, administration of graduate awards, student admissions, and in-camera meetings. The residue of post-secondary assimilationist policies is enacted at multiple levels of decision-making which determine how we support/thwart IRMs in CP scholarship, and Indigenous students' rights and access to the full resources of graduate studies at our respective institutions. Ensuring fair consideration of scholarly potential in Indigenous students (potential and active) requires all of us in CP to be knowledgeable of postsecondary education's complicity in colonization so as to ensure we do not replicate these harms.

Given our personal and collective experiences as CP graduate students and professors, we are acquainted with the need to support Indigenous scholarship within Canadian CP graduate training programs. We have highlighted only some examples of the impacts assimilative practices can have on Indigenous students with their pursuit of Indigenous centred research, and some ways we are challenging systemic and epistemic violence in education. We hope that in sharing our stories and perspectives, we are encouraging other CP professionals to consider how they might make space for Indigenous scholarship at their institution and how they can contribute to decolonizing CP.

Alanaise's Recommendations for Systems and Institutions

Graduate training in CP is placed at the end of an obstacle course best run by candidates unencumbered by geography, mobility, structural and systemic racism, and diversified life roles and responsibilities. One value marker for CP graduate programs is gauged by the competitiveness of their students and attainment of tri-council funding. The perseverance and precious presence of Indigenous graduate students who have made their way into our programs in spite of hundreds of years of assimilation policies also has unique academic merit and should be viewed as such. If these students have also subverted the post-secondary funding cap imposed by the federal government, or obtained funding from their bands, school boards, communities, or Métis groups, the administration of these funds under the rubric of "government program" still does not deteriorate the inherent nature of their rights to an education. We should eliminate the practice of discouraging Indigenous students from applying for competitive funding just because they have accessed their inherent rights to an education, nor should we view their "funds" as a scholarship.

There is a persistent myth that the presence of IRMs in research proposals result in lowered scholarly competitiveness or compromised academic integrity. Other disciplines in education are outrunning CP in their advancements in IRMs and remediation of epistemic violence at multiple

levels of the academy. The presence of scholars like Linda Smith (2012), Jo Ann Archibald (2008) and others have made space for novice and established researchers to re-envision an inclusive field where Indigenous peoples realize their education priorities. Indigenous CP students are innovating by necessity and have the capacity to advance our field's stated commitments in the urgent project of enhancing and decolonizing Indigenous mental health (CPA, 2018).

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‘All other things being equal’: Conducting cross-cultural research in counselling psychology

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Abstract

With multicultural competence, social justice, and methodical diversity which lie at the core of counselling psychology identity, Canadian counselling psychology is well-positioned to conduct cross-cultural research in a non-colonial, socially just manner. In this paper, we will use our own cross-cultural grief research as a means to discuss the challenges and issues that researchers need to navigate in the research process. This includes the assumption of *ceteris paribus*—all things being equal—that underlies cross-cultural quantitative research. Overall, we argue for critical cross-cultural research that fits with the ethos of Canadian counselling psychology: one that reveals Eurocentric, ethnocentric, and individualistic assumptions in psychology knowledge.

Keywords

cross-cultural psychology, internationalization, international research, counselling psychology, grief, persistent complex bereavement disorder

In cross-cultural psychology, there has long been an implicit, if not outright explicit, motivation to search for the psychological ‘order’ across cultures (Lonner, 2011). One type of such order is psychological universals. For example, John Berry, a notable Canadian researcher on acculturation, and his colleagues wrote in the first edition of their widely-used textbook of cross-cultural psychology:

It is a working assumption of this textbook that such ‘universal’ laws of human behavior are possible to achieve. That is, we believe that we will eventually discover the underlying psychological processes that are characteristic of our species, *homo sapiens*, as a whole. (Berry et al., 1992, cited by Lonner, 2011, p. 71)

Seemingly contradictory, but still consistent in the premise of the psychological order is the search for cultural explanations for varieties within the human species. Geert Hofstede’s (1980; 2001) dimensions of culture, or cultural psychiatry’s preoccupation with ‘culture bound syndromes’ (Hughes, 1998; Kirmayer & Ryder, 2016), fall within this category of psychological order.

Unfortunately, searching for universals or cultural explanations have often been accompanied with the lack of attention to underlying postcolonial power relations such as: the unilateral direction in the search for, and dissemination of, knowledge; who gets to be the subject, who is rendered as the object to be studied; and once so rendered as the objectified *Other*, whether or not subalterns can speak for themselves (Said, 1978; Spivak, 1983). For example, the glossary of cultural-bound syndromes in the successive editions of the *Diagnostic and Statistical Manual of Mental Disorder* (DSM; American Psychiatric Association, 2013) is critiqued as a “museum of the exotica” (Kirmayer & Jarvis, 1998) observed in the Third World, while forgetting that many of the DSM disorders can be best understood as Western cultural-bound syndromes reflecting a particular sociopolitical, cultural, and historical contexts of the Western societies (Hacking, 1998; Hughes, 1998; Huygens, 2009). When empirical knowledge constructs people from other cultures as inferior or problematic despite alternative theorizing and interpretations that are available, then cross-cultural researchers are said to be committing what Teo (2014) calls *epistemological violence*.

Thus, as a discipline that is concerned with social justice, counselling psychologists need to attend to postcolonial power relations when conducting cross-cultural psychological research. One way to achieve this is to invert cross-cultural psychology’s tradition of studying people across culture to make visible Eurocentric, ethnocentric, and individualistic assumptions in psychology knowledge (Moodley, Gielen, & Wu, 2013). However, doing so requires that the researcher adhere to the standards of methodological practices in cross-cultural research, but at the same time questions its epistemological assumptions of such practices. In this article, we argue that, while challenging, cross-cultural research can be a powerful research paradigm that counselling psychologists can use to advance psychological science. First, we will discuss the issues of equivalence in conducting a cross-cultural quantitative research. We will then describe the challenges that we encountered in the process of conducting an ongoing cross-cultural study on the boundary between normal and pathological grief. Briefly, this study utilized a mixed-methods design involving a qualitative component (focus group and individual interviews with mental health practitioners) and a quantitative component (survey with undergraduate students), with data collected in Japan and in Canada. For the purpose of the paper, however, we will focus on the quantitative component. Following the brief report on the preliminary results of the study, we will discuss the relevance of cross-cultural research to the discipline of counselling psychology. In particular, we will argue for a non-colonial, socially just approach to cross-cultural research.

Challenges of Cross-Cultural Quantitative Research

Cross-cultural research is labour-intensive and time-consuming. If the study entails data collection from two countries, as was the case for our grief study, then the researcher needs to obtain ethics applications from two (or more) institutions and prepare documents for data collection (e.g., informed consent, recruitment materials, and demographic forms) in two (or more) languages. Furthermore, prior to data collection, cross-cultural research often involves the translation of the research instruments (e.g., psychological measures, survey questions). This task further entails rigorous steps that ensure the quality and validity of the translated instrument, including backtranslation. Moreover, a translated version of the instrument typically goes through an additional separate validation study. Thus, even when it is conceptualized as one study, these steps amount to an equivalent workload for conducting more than two studies.

Establishing Equivalence

The need for rigorous procedures to ensure the quality of translation stems from the issue of equivalence (Van de Vijver, 2011). In the crudest form, quantitative cross-cultural research in psychology typically involves (a) administering instruments, often in multiple linguistic versions, to samples drawn from two or more cultural groups; (b) conducting statistical analyses to detect significant differences between groups; and (c) attribution of statistically significant differences to cultural differences, whereas statistically insignificant results are deemed the result of universal psychological traits. Of course, the matter is more complicated, but if cross-cultural comparisons of observations are to be made, the research design then inheres to the assumption of *ceteris paribus*—that is, all other things are being equal, or all other things are held constant (Reutlinger, Schurz, & Hüttemann 2019). In cross-cultural research, efforts are made to hold all other things constant by establishing equivalencies.

While several terms, forms, and levels of equivalence have been discussed, Ægisdóttir, Gerstein, and Çinarbaş (2008) summarized the following four types based on the work of Lonner (1985). First, *functional equivalence* concerns with the function of the behavior under study in different cultures. Green and Alden (1988), for example, argued that the function of gift-giving is nonequivalent between Japan and the U.S. in their consumer psychology research, by demonstrating that these cultures differ in terms of frequency of common gift-giving occasions, the emphases on wrapping, and the whether or not the gift should be opened at the time of exchange, and so on. Second, *conceptual equivalence* refers to the similarity in meaning attached to a behavior or a concept. For example, a college student's help-seeking behavior from on-campus counselling service may be seen positively (e.g., a sign of proactive coping) or negatively (e.g., an inability to cope demands of student life, or mental health stigma). *Metric equivalence* concerns the extent to which psychometric properties of the instrument, such as factor structure and loadings, are compatible across cultures. Metric equivalence allows attribution of statistically significant differences in scores to differences across groups, rather than psychometric artifacts. Lastly, *linguistic equivalence* is achieved when a translated version of an instrument maintains the same linguistic form (e.g., length of each item, formality), reading level, and naturalness as the original version.

Cross-Cultural Grief Study

The above-mentioned types of cultural equivalence are interrelated. For example, bad translation (i.e., linguistic inequivalence) introduces bias that may lead to metric inequivalence. Conversely, an effort to improve one type of equivalence could lead to a compromise in the other type. In this section, we will describe the process of conducting our grief study to illustrate some of the complex issues that can arise in cross-cultural research. We will first describe the context of the research and methodology, and then discuss actual challenges that we encountered in the process.

Context of the Study & Research Design

The first author (KW) conceptualized this program of study in 2016, in light of how pathological grief was making its way into the two most widely used diagnostic systems of mental disorders: DSM-5 (American Psychiatric Association, 2013) and the International Classification of Disorders

(ICD-11; World Health Organization, 2018). The DSM-5 included *Persistent Complex Bereavement Disorder* (PCBD) as a condition needing further study, while *Prolonged Grief Disorder* was expected to be added in the ICD-11.

As a Japanese native who became interested in thanatology (i.e., study of death, dying, bereavement) during her undergraduate study in Canada, KW had been captivated by cultural aspects of grief and bereavement. While grief is a human experience related to the loss of loved ones, practices of grieving and meanings around them are culturally shaped and diverse (Rosenblatt, 2013; Wada & Park-Saltzman, 2009). She was also fascinated by how psychological concepts (e.g., mental disorder) and practices (e.g., psychotherapy) traverse cultures, changing the social meanings and individuals' behaviors, and how particular power relations operate in this process (Said, 1983; Watters, 2010). Thus, the idea of pathological grief and formally institutionalizing it in major diagnostic systems begot questions such as: where is the line between normal and pathological grief?; how is that line shaped by culture and various social practices?; and whose interest gets reflected and what effects does this medicalization of grief have?

To explore possible cultural differences in beliefs about what is normal and pathological grief, KW invited the second author (HS) to collaborate. We borrowed an innovative methodological approach that Chia-Chih D. C. Wong and Brent S. Mallinckrodt (2006), both counselling psychologists, used in their work on cultural beliefs about attachment. In their study, they asked undergraduate students from Taiwan and the United States to fill out a widely used adult attachment scale (the Experiences of Close Relationships Scale; Brennan, Clark, & Shaver, 1998), but adding a clever twist to the instruction; they asked the participants to answer the items "as they believe 'an ideally emotionally and psychologically healthy person of your own gender in your culture' would respond" (Wong & Mallinckrodt, 2006, p. 192). The results of their study demonstrated that Taiwanese young adults' beliefs about healthy attachment were different from those of American students, thus revealing Euro-American ethnocentric assumptions in what is upheld as secure attachment.

By adopting Wong and Mallinckrodt's (2006) methodological ingenuity, we embarked to conduct a survey study with Japanese and Canadian undergraduate students. Instead of an attachment measure, we used the Persistent Complex Bereavement Inventory (PCBI; Lee, 2015), an inventory that turned proposed PCBD criteria into test items. By asking undergraduate students to imagine how a healthy bereaved would answer a set of questions, the study was designed to tap into the ideas about normal grief that young adults have internalized through socialization.

Linguistic Equivalence of the DSM-5

At the time of grant writing, PCBI was just published and there was no Japanese version. Nonetheless, KW thought that the translation of PCBI would be relatively easy and quick, because the DSM-5 had already been translated and published in Japan. Rather than beginning the translation process from scratch, she thought she could simply look up the PCBI criteria in the Japanese DSM-5 and use its wording to construct a Japanese version of PCBI.

Once we began the study and examined the Japanese translation of DSM-5, it immediately became clear that we would not be able to use the Japanese DSM vocabularies as they are.

Although PCBI criteria in the original DSM-5 uses fairly straightforward language such as “intense sorrow and emotional pain” and “disbelief or emotional numbness”, these items were translated into Japanese with highly specialized terminology and academic language, to the point laypeople would not understand what they mean. Put simply, the Japanese and English versions of the DSM-5 were not linguistically equivalent.

To explore undergraduate students’ beliefs about normal and ideally healthy grief reactions, they would have to be able to read and understand the survey questions. Using the official Japanese translation of DSM-5 would have made the study pointless. Thus, we decided that we had no choice but to re-translate PCBI for the purpose of the study. However, this also meant that we have to conduct an additional validation study to ensure proper translation. Meanwhile, this very situation we found ourselves in already inhered with the questions of functional and conceptual equivalence of DSM-5 and mental health diagnoses—if specialized knowledge is required to understand the DSM language describing mental disorder symptoms, what does it mean for Japanese laypeople to be told that they have PCBD when they cannot understand what the symptoms as they are listed in the DSM really mean? The DSM’s function in doctor-patient relationships appear different in two countries; English speakers can verify, or even refute, diagnoses given to them by examining the DSM by themselves, whereas Japanese people would require professionals to mediate their understanding of the diagnosis. In other words, even though linguistic equivalence could be resolved through retranslation, the question of functional equivalence of DSM diagnoses would remain.

Translation of PCBI into Japanese

Upon deciding to retranslate PCBD criteria by ourselves, we began the work of forward translation. A Japanese graduate student in psychology who was studying at an Canadian university, who had no prior scholarly knowledge on grief nor seen the Japanese translation of the DSM-5, was hired to translate PCBI into Japanese. We then compared and contrasted his translation with the English and Japanese version of DSM-5. We also examined how Inventory of Complicated Grief (ICG; Prigerson et al., 1995), Prolonged Grief Disorder-13 (PG-13; Prigerson et al., 2009), and Brief Grief Questionnaire (Shear & Essock, 2002) had been translated into Japanese. The rationale being, since the conceptualization of the proposed PCBD criteria had been informed by research using these measures, there was considerable similarity between the wording of the PCBD criteria and items of these measures. Thus, staying close to wording of the Japanese versions of these measures helped us avoid reinventing the wheel and maintaining consistency with existing knowledge.

It should be noted that contrary to the recommended procedure (Ægisdóttir et al., 2008), we did not employ the method of backtranslation in a strict sense (i.e., use of an independent translator outside of research team). This is in part given the availability of Japanese versions of similar measures with which we consulted, but also because the literature points out a positivist assumption underlying backtranslation; the method presupposes that there is only a single corresponding word in the target language for each word in the original language, which rarely is the case (Jagosh & Boudreau, 2009; Tyupa, 2011). Although backtranslation could minimize translation errors and even provide valuable information on possible conceptual non-equivalence, the collaborative process of discussion and consensus building in a collaborative team of bilingual/bicultural researchers is increasingly gaining favor (Colina, Marrone, Ingram, & Sánchez,

2011; Douglas & Craig, 2007). Accordingly, we went through the iterative process of discussing differences in nuances in different versions, back-translating them, rewriting the wordings and proposing alternatives, and debating for better translation. Next, the draft of transition was subjected to a cognitive interview. For this, during one of KW's visits to Japan we met four Japanese undergraduate students (second-year undergraduate students in psychology; one male and three female) and asked them to think out loud as they read the survey instruction and items one at a time. The purpose of this pretest procedure was to check for clarity, appropriateness, and meaning based on members of the target population's *in vivo* reactions to the test materials (Ægisdóttir et al., 2008).

During this process, issues around conceptual equivalence surfaced. For example, the PCBI contains an item “preoccupation with the circumstances of the death”. The Japanese version of the DSM-5 employed a literal translation of the item (死の状況へのとらわれ). However, the cognitive interview revealed that the Japanese word chosen for “preoccupation” (とらわれ) evoked the image of being imprisoned, or a state of being possessed by spirits—a completely different meaning when talking about death! Furthermore, a question was raised whether the “circumstances of the death” include only the final few moments of the death (e.g., at the time of the last breath or when the doctor pronouncing the death) or cover several hours or the days leading up to the death as well as rituals following the death (i.e., wake, funeral, cremation). This unexpected question provoked the need for discussion among us researchers, checking how each understood the original English phrase ourselves.

In the midst of the cognitive interview, one of the undergraduate students suggested an alternative translation for “the circumstance of death”. The suggestion (最期の場面) included a word *saigo* (最期), which is pronounced the same as *saigo* (最後), a commonplace vocabulary which means final or last. However, while the latter (最後) can be used for anything (e.g., the *last* person in the line; the *final* announcement), the former (最期) is reserved to refer specifically to a time around the end-of-life/death. This was a light-bulb moment where we thought we had found a perfect Japanese translation that required no further explanation.

Just as we were about to move onto the next item, however, the participant said, in confirmation, that she liked this phrase better than the DSM version, “because there is something dignified about it”. This triggered an entirely new set of questions. Are all “circumstances of death” dignified? No. Then, using the word 最期 introduce a bias to the translation? Maybe. Could we come up with an alternative, more neutral translation that does not contain an implicit meaning dignity? Yes, but the alternative, more “neutral” translation would sound overly medical or forensic, a sort of language that autopsy specialists might use to determine the “circumstances of death” by examining a dead body. This, of course, is inappropriate for the purpose of the study, in which the participant was asked to imagine ideal grief responses to the death of a loved one.

The key question for us was “could the word 最期, the word denoting to the period around end-of-life, be used when we talk about the most tragic, inhumane, pointless, otherwise undignified death?” After consulting dictionaries, Japanese scholarships on thanatology, and a few Japanese scholars, we came to see the answer was affirmative. In other words, 最期 implicitly encompasses dignity, and yet the word is applied unselectively to any death. In other words, dignity is an inherent

and inseparable part of life and death, which does not fit neatly into the dignified-undignified duality (see Wada & Park-Saltzman, 2009, for the inseparability of life and death and non-duality in Buddhist psychology).

During and after the cognitive interview, we continued to discuss, consult others, refine the wordings, and finally decide on the candidate translations. We documented the entire process, with a rationale for every decision. We then subjected the document to an expert consultation. We consulted a seasoned researcher with a wealth of experience in cross-cultural psychology research and the translation of instruments. The consulting researcher examined the original and candidate translations for all the items. While the item containing the phrase “circumstances of death” had been the one of the most debated items up to this point, the word 最期 remained in the final version upon the consulting researcher’s endorsement.

Validating the Japanese Version of PCBI

Once the instrument went through a rigorous translation process, it had to be validated, which is a study in and of itself. Validating an instrument involves selecting measures to examine convergent and discriminant validity (Ægisdóttir et al., 2008). For the original version of PCBI, Lee (2015) used other measures of pathological grief (e.g., PG-13, ICG) for convergent validity, and instruments that measures other constructs such as depression, PTSD, and coping for discriminant validity. Our challenge then was to find equivalent measures that have already been translated and validated; otherwise we would find ourselves in a catch-22 situation, where we would have to translate another instrument to validate the instrument, the validation of which requires translation of another instrument, the validation of which...and so on. Fortunately, the measures included in the validation study of the original PCBI have, for the most part, been translated and validated in Japan; for the few that had not, we were able to find similar but well-established measures that worked well for the purpose of the study.

The following anecdote further illustrates complexities of cross-cultural research from another angle. While we were exploring validation measures and contacting researchers, one of the researchers replied that the measure was not ready for use. The researcher explained that it had been going through another iteration of translation and validation process, as it had not been showing the same factor structure as the original English version. From this brief comment, it could be inferred that the researcher was trying to establish metric equivalence, tweaking the translation until the same factor structure of the original version was found. This raised another question: does failure to establish configural invariance—the factor structure between the original and target versions is different (Chen, 2008)—always indicate a measurement bias, or could it be accurately detecting cultural differences?

According to Chen (2008), the lack of configural invariance is not necessarily a bias. In fact, Chen (2008) reports that a construct can be more differentiated, thus revealing a greater number of factors, in one culture than another. To demonstrate this point, Chen (2008) refers to the research that demonstrated how the notion of individuation, a unidimensional construct in the U.S., is better understood as a two-factor construct in China (Kwan, Bond, Boucher, Maslach & Gan, 2002). It is possible that the above-mentioned researcher may have been detecting a cultural difference, when the scores derived from the translated version of an instrument did not reveal the same factor

structure. Then, the researcher's effort to derive an invariant factor structure by revising translation, ironically, could potentially result in introducing a bias. We are raising this point as a possibility, not to intend to accuse this researcher's attempt; establishing metric equivalence in this way could very well be a right decision, depending on the data and research context. However, this anecdote demonstrates an additional layer of challenges in validating measures cross-culturally and relying upon existing translated measures to validate a new instrument for further cross-cultural research purposes.

Preliminary Results of the Grief Study

Given the labour-intensity and attempts to strive for cultural sensitivity and understanding, the cross-cultural grief study has been taking longer than we originally anticipated. However, the process itself is informative and thought-provoking. The issues that we encountered in the very process of trying to cross-culturally examine the validity of PCBD criteria revealed some of the particular sociopolitical, cultural, and historical contexts in which the medicalization of grief transpires. This not only includes cultural nuances around the meaning of death and grieving, but also power dynamics underlying in the process of Western psychiatric diagnoses travelling across the globe, which has the potential to alter and homogenize the way people express distress, see themselves, and are treated (Norsworthy, Heppner, Ægisdóttir, Gerstein, Pedersen, 2009; Watters, 2011).

Although the data collection in Japan is still underway, we would like to briefly summarize the finding from the Canadian data as it exposes potential biases in how the DSM-5 conceptualizes pathological grief (Buote, Wada, & Kawamoto, n.d.). For the Canadian portion of the study, a total of 385 undergraduate students in a Canadian university answered an online survey consisting of PCBI (Lee, 2015) and Continuing Bond Scale (CBS; Field, Gal-Oz, & Bonanno, 2003), a measure of orientation to maintaining their internal bonds with the deceased, as “an ideally emotionally and psychologically healthy person” of their own culture and demographic, 12 months after experiencing a loss.

The results indicated that PCBI scores were positively related to CBS scores and three demographic variables—gender, religion, and previous bereavement (Buote et al., n.d.). Specifically, women, religious individuals, those with bereavement experience(s), and those who believe it is healthy to maintain internal attachment with the deceased were most likely to perceive what the DSM-5 conceptualized as symptoms of pathological grief as healthy. In other words, these people's idea of healthy grief can be pathologized with these new diagnostic criteria, as the results suggest that the DSM-5 criteria for PCBD may be reflective of the idea of (ab)normalcy held by men, secular individuals, those without previous experience of bereavement, and those who think continuing bonds with the deceased is unhealthy. By obtaining cross-cultural data from Japan, we are aiming to further examine cultural ideals about grief and how they relate to the DSM criteria.

Cross-Cultural Research & Counselling Psychology: Eschewing Colonial Research

In this article, we used our grief research as a means to describe how the process of conducting this cross-cultural study reveals the paradox of the underlying assumption of cross-cultural

research. On one hand, cross-cultural quantitative research relies on the assumption of *ceteris paribus*—all other things being equal—to make inferences about cross-cultural comparisons of obtained scores, and in doing so the researchers need to follow rigorous procedures to establish various kinds and levels of equivalence. On the other hand, such rigorous procedures are so demanding that “they are only used by methodological diehards” (Van de Vijver, 2011, p. 236). Furthermore, what exactly the law of *ceteris paribus* entails has been a contested topic in philosophy; although useful for causation and argumentation, this abstract notion derived from physics cannot be easily translated in other sciences, where nonequivalence is the norm rather than the exception (Reutlinger et al., 2019). Van de Vijver (2011) argues that the distinction between bias and true cultural difference, along with the idea that all bias needs to be eliminated, is counterproductive. Instead, Van de Vijver advocates for a combination of statistical analysis (e.g., item analyses, inclusion of an exploratory variable) and qualitative methods, such as focus groups, to account for possible cultural specifics underlying bias and nonequivalence.

Canadian Counselling psychology has prized methodological diversity (Bedi et al., 2011; Domene, Bachanan, Hiebert, & Buhr, 2015; Hiebert, Domene, & Buchanan, 2011). However, most often this notion of methodological diversity is discussed in terms of quantitative and qualitative research traditions. We make a case here that counselling psychology should further enrich methodological diversity by embracing cross-cultural research. With competence in both quantitative and qualitative methods, counselling psychologists are well-positioned to conduct a kind of cross-cultural research that Van de Vijver (2011) advocates. Furthermore, we believe that counselling psychology’s professional identity, values, and training prepare us for conducting cross-cultural research in a multiculturally sensitive, social justice oriented way, while being attentive to pitfalls of cultural encapsulation (Heppner, Wang, Heppner, & Wang, 2012; Marsella & Pedersen, 2004) and epistemological violence (Teo, 2014). In particular, when used intentionally and appropriately, cross-cultural research can be a powerful tool to make visible Western psychology’s colonial impact on other cultures.

Conducting cross-cultural research in a socially just manner requires the understanding of the culture, language proficiency, and attention to power dynamics. This is a sharp contrast from colonial research. One type of colonial research is “helicopter research”, in which researchers from wealthier countries fly into a less developed country, collect data, fly out, and analyze and interpret the data with little involvement of local researchers or consideration of local cultural practices (Minasny & Fiantis, 2018). The other, even more problematic form of research involves outsourcing (Vincent-Lancrin, 2006), in which researchers commission for-profit agencies or contract research assistants to collect data from other countries on their behalf and are thus able to conduct international research without ever visiting the country of interest. Although local researchers may be employed in these agencies, the relationship is top-down, that of the customer and service provider, the contribution of the latter is rarely acknowledged in authorship (see Sukareh & Tannock, 2019, for an example of exploitation transpired in the UK overseas Syrian refugee research). Missing in such colonial research are meaningful collaboration and fair distribution of benefits resulting from research outcomes.

In conclusion, conducting cross-cultural research in that way that is consistent with the ethos of counselling psychology requires cultural competence, knowledge and skills in a myriad of research methods, and understanding of postcolonial knowledge production. For the latter, the

researcher needs to reflect on the one's relationship with Western psychology—the chief exporter of psychological knowledge that renders certain aspects of human nature as normal and ideal, while others as pathological and inferior. Obviously, this is not an easy endeavour. However, social justice potential of such research is paramount, and Canadian counselling psychologists' engagement in this terrain is warranted.

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It Takes a Village: The Role of Counselling Psychology in Advancing Health and Wellness in a Faculty of Education

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Abstract

Counselling psychology departments have historically been situated within Faculties of Education rather than Departments of Psychology. These placements within Faculties of Education have often led to confusion as to what the role of counselling psychology is, and how it relates to education. In this paper, we argue that there is an opportunity for counselling psychologists to impact and be impacted by their location in Faculties of Education. This paper offers an exemplar of how a counselling psychology department informed and impacted a culture of wellness within a Faculty of Education and also within the greater university culture, at the University of Calgary. Through partnership with other faculties and community partners, the efforts of counselling psychology began to impact other systems, which in turn influenced Bachelor of Education teacher preparation at the post-secondary level. Through collaboration with multiple partners and with the support of the Faculty of Education, a mandatory course on health and wellness was introduced to the Bachelor of Education curriculum. Perspectives of a counselling psychologist, faculty of education administrator, a community partner, and former counselling psychology graduate student are highlighted in this paper, with the intention of demonstrating how collaborations between two seemingly distinct disciplines can be mutually beneficial to the university, students, faculty, and also the greater community.

Keywords

counselling psychology, faculties of education, comprehensive school health, teacher education

Counselling psychology departments are situated within Faculties of Education rather than a part of Departments of Psychology, leaving counselling psychology programs to feel isolated or misplaced based on different professional interests, training, research emphases, and policy concerns (Beatch et al., 2009). At the same time, many academics and members of Faculties of Education are not psychologists, and for these individuals, departments of counselling psychology may come across as elitist or seeing themselves as unique. With experience that has grown with time, we (a group comprised of counselling psychologists, Faculty of Education administrators and community partners) have learned that departments of counselling psychology can be team players in the Education Faculties in which they are part.

In this paper, we offer our perspectives on how counselling psychologists are in a unique position within Faculties of Education and have the opportunity to impact and be impacted by other systems. In support of this argument, we provide an exemplar of how a counselling psychology department informed and impacted a culture of wellness within a Faculty of Education and also within the greater university culture. Further, we portray how leadership from the field of counselling psychology moved the core curriculum in a Bachelor of Education program to focus on wellness.

Rather than working independently from other academics and specialties found within Faculties of Education, departments of counselling psychology can be actively involved in various ways that are meaningful, not only to the students and faculty, but also to the encompassing political and cultural environment. Namely, of great importance is counselling psychology's impact and influence over health and wellness within a faculty, something that is not traditionally prioritized in Faculties of Education or their Bachelor of Education (BEd) programs (Russell-Mayhew et al., 2017). Until recently, in Canada, no existing BEd program provided mandated wellness education, yet teachers, principals, and school counsellors were expected to contribute to school wellness once employed in these settings (Russell-Mayhew et al., 2017). Further, prior research has suggested that pre-service teachers have a moderate degree of concern in regard to classroom management and instruction (i.e., task-related concerns), academic range and personal growth of students (i.e., task- and student-related concerns), along with professional adequacy and acceptance (i.e., self- and impact-related concerns; Hagger & Malmberg, 2011). In comparison to experienced teachers, novice teachers have commonly expressed concerns about classroom discipline, managing individual differences, motivating students, relationships with parents, organization of class work, dealing with student problems, and personal support (Tschannen-Moran, & Hoy, 2007). Taken together, teachers are expected to contribute to school health and wellness and connect with the broader community, yet are evidently concerned with their competency in doing so.

Opportunity for Counselling Psychology

In order to have impact on the culture of wellness, the training of undergraduate students preparing to be teachers can be greatly influenced by counselling psychology, given the location within Faculties of Education. This location and close proximity to Education and related specialties allows for partnerships where ideas and pedagogies can be shared that may not be expected. In this same vein, research conducted by counselling psychology can inform practice and impact the

educational and health systems of the Faculty of Education and the larger university context. Further, to have impact within the Faculties of Education in which they are housed, the counselling psychology discipline can network inside and outside faculties with a focus on health and wellness for all stakeholders. Essentially, counselling psychology departments can become collaborative associates and even partners with the faculties in which they find themselves a part, and these collaborations can be mutually beneficial.

The increased public debate on health and wellness is evident, yet, little has been done to address how universities educate future school professionals (Russell-Mayhew et al., 2017). In order to address this critical gap, a system promoting health and wellness that is both research and practice-informed must be put in place. In response, a taskforce at the University of Calgary collaboratively worked toward this goal, and the applied outcome was a research and practice-informed system of wellness education that better prepares teachers to support their own, and their students' well-being, while improving the capacity of the larger educational system by positioning teachers as health champions to work on wellness from within the education sector. This endeavour required partnership across various faculties, support from administrators, and a shift in culture.

Objective

In this paper, we provide context for how counselling psychology can impact and be impacted by the faculties in which they are housed. Specifically, in order to demonstrate a successful partnership between departments within faculties, we describe how the department of counselling psychology within the Werklund School of Education (WSE) at the University of Calgary collaborated in efforts that have informed, and been informed by, the culture of wellness in the WSE. The result of this work is a prototype for a system of wellness education, modeled on the Comprehensive School Health (CSH) approach and involving the development of key partnerships, addressing the social and physical environment of the faculty, implementing healthy school policies, and requiring mandatory coursework in wellness.

We offer perspectives from multiple stakeholders in this paper, including perspectives from a counselling psychologist, a post-secondary administrator in the WSE, a community partner, and former graduate student of counselling psychology. Most counselling psychology programs in Canada are housed in Faculties of Education and are uniquely positioned to influence and be influenced by the teacher preparation programs with which they align. Thus, this paper serves as an example of that.

Key Perspectives

The need and priority of wellness is not a contested issue in education. That said, the challenge of multiple and competing demands has meant that teacher education programs struggle to make wellness a central and integrated component of their programs. Traditionally, wellness has been viewed as a subcomponent of health or physical education classes, which would have the expertise from those teachers who have had disciplinary knowledge in some aspect of these two overarching themes. However, if one starts from the assumption that all teachers have a requisite obligation to promote and foster wellness, as part of the broader culture and ethos of the school (Joint

Consortium for School Health [JCSH], 2018; Russell-Mayhew et al., 2017), then the responsibilities required for pre-service teachers change.

Political Context: Views from Post-Secondary Administration

Wellness initiatives have traditionally sat on the periphery of teacher education programs, given that a number of competing demands often take priority including English Language Learners, and increased Mathematics, Arts, Science, and Literacy. Further, once in the schools, lessons on wellness have typically been implemented by physical education and health teachers, sporadically at best. Thus, as an administrator in a Faculty of Education, I (DG) was curious how teachers could receive training on notions of health and wellness, aside from the professional learning workshops, commonly held only once, and assumedly easily forgotten. Thus, we were faced with a situation that needed to be addressed - while such traditional initiatives (i.e., one off training workshops) are a step, it does not start from the premise that wellness is a precondition for all student learning, and the concomitant responsibility of all teachers to embed and create a wellness-based learning environment in all aspects of the school community. Accordingly, political deliberations and shifts in discourse toward a mandatory wellness course into the BEd program took shape.

As discussions around wellness and incorporating this into the curriculum began, it soon became political from an administrator's perspective: Was it possible to mandate a course on health and wellness in teacher education? How would such a course fit into the existing curriculum? Would the political context within the WSE allow for this initiative to take shape? Was wellness valued by the faculty, and if so, what would be cast to the side to make room? The questions came faster than the answers.

Tracing back to 2009, wellness was not part of the initial task force report for the BEd program at the WSE. The fundamental changes to the BEd program reflected broader discussions about the changing nature of learning with knowledge, skills, and attitudes that was to be central to teacher education programs. While there was little pushback of the notion of wellness, it simply was not explicitly articulated or prioritized within the broader aims of education. The idea of adding a mandatory course that was not targeting traditional priority areas was simply not considered. While feeling this pressure and noticing the tension building within the WSE, we were cognizant of the broader public discourse growing regarding wellness and mental health. As public discourse grew, the topic of wellness trickled into faculty meetings and discussions about wellbeing. At the same time, the University of Calgary announced the Campus Mental Health Strategy, a plan recognizing the symbiotic nature between health and education, and the university's responsibility to promote the health and wellbeing of their students, staff, and faculty (University of Calgary, n.d.). This initiative committed to enhancing the mental health of everyone within the university community, while encouraging the development and implementation of a comprehensive, multi-faceted, and sustainable approach to wellness and health (University of Calgary, n.d.). In addition to the institutional changes toward health and wellness, we also felt pressure from school boards in Alberta to address wellness for students and educators, and at the same time, changes to reflect a shifting priority on wellness was occurring in Provincial Programs of Studies. The implementation of the Comprehensive School Health and Wellness framework that was endorsed by the province, along with increasing discussions about safe and caring schools

necessarily highlighted a need for a more robust conception and implementation of wellness on multiple levels. With the broader public discourse as a driving force for change, administration made the compelling case that wellness was, and always had been, a pressing issue that deserved a raised profile internally within the WSE. In order to do this, we joined efforts with the counselling psychology and school and applied child psychology specializations within our faculty, realizing collaborations were vital in order to prepare BEd students for their teaching careers. Once in partnerships, impactful political strides were made to address other competing demands. In response to conversations with Associate Superintendents noticing the increase in medical leaves due to stress of new teachers, the pressure and feedback from school districts suggested that the need for a mandatory wellness course was of critical importance. After years of negotiations and making a case for the importance of wellness education within administration, the WSE was able to create a mandatory BEd course on CSH. The Faculty of Education's culture and priorities underwent a shift, largely made possible through partnership with counselling psychology and also through community partnership.

Provincial Context: Views from a Community Partner

In addition to the support of WSE administrators and the role they played in the political climate of including wellness into BEd teacher training, the inclusion and reliance of community partners reflecting the values of the province was also essential. In this section, I (KM) will offer the perspective of a community partner, highlighting the critical role of community partners in supporting Faculties of Education and associated professionals who can be effectively positioned as central in advocacy efforts and action in the advancement of wellbeing.

To provide context, Ever Active Schools is a provincial initiative in Alberta that promotes healthy school communities. Ever Active Schools supports student, staff and whole school community wellbeing in a universal and upstream manner through a CSH approach. By recognizing the importance of teacher preparation in the development of healthy school culture as a foundation for successful health and learning outcomes, we welcomed a partnership with WSE and leaders in counselling psychology passionate about the inclusion of health and wellness to education, to explore how shifts in the Faculty around wellness could impact pre-service teachers as both students and emerging professionals.

Participating as a provincial community partner on the committee allowed us to bring practical experience from CSH systems change in the kindergarten to grade 12 (K-12) educational setting and apply it to the post-secondary setting. We were also able to convene collaboration from other community and government partners to amplify school health promotion expertise and situate the Faculty within the broader context of wellness work going on in the province. Evidently, the partnership proved beneficial for all collaborators in this effort. By partnering with leaders in counselling psychology within the WSE, as a community partner, we benefited from the research expertise of counselling psychologists and had access to the BEd students studying to become teachers. The partnership enabled us to collectively and bilaterally leverage further opportunities around content, funding and system alignment. For example, content from health promotion and wellness education experts was shared to inform the development of the course, while provincial dissemination platforms became available to disseminate research findings and knowledge applications from the Faculty. The partnership attracted funding opportunities for research and

projects alike due to our ability to act in support of wellness across the continuum of the education spectrum (i.e., pre-service and in-service teachers). As we developed our own curriculum, we were able to align broader systemic actions such as the development of provincial wellness curriculum and release of Teaching Quality Standards. Moreover, we recognized the provincial context for wellness, in that there was a shift towards mental wellness, implemented through a series of policies such as the Ministerial Order on Student Learning, sustained funding for schools around wellness through the Alberta Healthy School Community Wellness Fund and Mental Health Capacity Building Projects, and the emerging presence of wellness consultants within school jurisdictions. Thus, the time seemed to be right and welcoming of a strategic plan shifting post-secondary education of BEd students to include emphasis on mental wellness and a comprehensive, multi-faceted approach to health. Made possible by those in counselling psychology that saw this as a critical evolution of the education system, the efforts of our partnership were deemed incredibly successful, as the first Canadian BEd course on CSH became a part of the mandatory curriculum.

Training Context: Views from a Counselling Psychology Graduate Student

In addition to the beneficial collaborations that made inclusion of wellness into a faculty of education and its curriculum possible, partnerships with administration and community partners proved beneficial to aspiring counselling psychologists completing their training at the WSE. In this section, I (AI) offer a counselling psychology graduate student's (now a doctoral psychologist) perspective.

A focus on wellness is foundational to the work that counselling psychologists do. Those within the discipline are committed to advocating for greater wellbeing in our communities. Involvement with efforts to promote wellness within the WSE BEd program provided an opportunity to develop a more nuanced understanding of wellness within the field of education, as well as to reflect on how promoting wellness aligns with competencies as a counselling psychologist. Involvement within this evolving wellness initiative yielded numerous insights into theory, research, and practice. Social justice efforts as well as opportunities to observe the overlap in principles of wellness, prevention, and CSH acted as helpful reminders of the discipline's key tenants, including: health as holistic, individual's pre-existing strengths and resourcefulness, and a sensitivity to diverse sociocultural factors (Bedi et al., 2011). Further, this collaborative effort provided experience with research design, data collection and analysis procedures, and dissemination of findings. Finally, being part of ongoing efforts to include wellness in the BEd curriculum, I learned about the application of health and psychological principles in educational settings, and how these concepts could be used to facilitate conversations and systemic change in relation to comprehensive approaches to health and wellness.

Consequently, working on this venture as a student within the WSE created many opportunities to develop as I transitioned from a Master's student, to a doctoral graduate taking on roles of research assistant, teaching assistant, and finally sessional instructor. Reflecting on my involvement with this collaboration, the efforts to help teachers better position themselves as health champions contributed to my key professional competencies as a counselling psychologist.

Conclusion

Evidently, collaborative practice within faculties is critical for advancement and remaining current with pressing public discourse on wellness and health. As a result of collaboration, we came to the realization that key partnerships, addressing the social and physical environment of the faculty, implementing healthy school policies, and requiring mandatory coursework in wellness were the pathways to promoting health and wellness not only within our Faculty of Education, but also within the larger community and system to which we belong. Counselling psychology specializations are in unique positions to inform and impact a culture of wellness within faculties of education. Through partnership with other faculties and community partners, the efforts of counselling psychology can have tremendous impact on other systems, which in turn influenced BEd teacher preparation at the post-secondary level.

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Canadian Counselling Psychology Conference Keynote Address:

Counselling Psychology at the Crossroads: Discipline or Social Movement

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Abstract

Due to the work of a small number of dedicated counselling psychologists, in 1986 the Canadian Psychological Association's Section on Counselling Psychology was established. Since that time, the Section has reached a number of important milestones such as, the accreditation of counselling psychology programs, the establishment of the Canadian Journal of Counselling and Psychotherapy, the development and approval of the official definition of counselling psychology, the Inaugural Canadian Counselling Psychology Conference, and the creation of the Section's archive. Additionally, there have been a number of formative articles published in Canadian Psychology, including articles about identity and the first Special Section of within an Issue of Canadian Psychology on Counselling Psychology, as well as, the first edited book entirely devoted to Canadian counselling and counselling psychology. While, this work has laid an important foundation for the field, Counselling Psychology as a discipline is at the crossroads. The history and contributions of counselling psychologists highlight that counselling psychology has been innovative in the field of psychology, especially in the areas of career psychology, feminism, multiculturalism, social justice, and qualitative research. As other disciplines within psychology begin to take on topics that historically have been the domain of counselling psychology, moving forward; What needs to happen to ensure that counselling psychologists continue to be innovators and forward thinkers in psychology? This keynote applies social movement, advocacy, and activist frameworks to challenge the current state of the discipline, and to implore counselling psychologists to challenge the status quo and continue to be leaders and innovators in psychology .

Keywords

counselling psychology; social justice

Preamble

The first goal of this keynote was to take stock of the history of the discipline, in particular the history that relates to the development of social justice frameworks within counselling psychology. A second goal was to motivate counselling psychologists, especially future generations of counselling psychologists, to consider counselling psychology's role in forwarding a social justice agenda both within counselling psychology and the broader psychological community. Thus, this keynote is a call to action and implores counselling psychologists to take stock of what is happening in psychology and the unique and viable role that counselling psychologists have in bringing about positive and lasting social change; informed by diversity, inclusion, and social justice. As such, below is the address as presented at the conference, with dashes and dots demarking pauses or emphasis. The hope is that the reader will engage with the content, even though it might be provocative.

The Address

Thank you for inviting me to be a keynote speaker at this very important and monumental conference. I am really touched and honored. First, I want to apologize to those of you who would benefit from a visual presentation of my address; however, I chose not to use PowerPoint as I do not want to be bound by the slides and honestly, I was not sure how to put the ideas I am about to put forth into slides.

That said, before I begin, I want to say that this address is meant to be both provocative and controversial. It is also personal. Anyone who knows me -- knows that I do not shy away from controversy. My goal here is to challenge you to consider how we as a discipline might need to rethink the ways we are currently doing business and reflect on the idea that we may need to adopt a more activist and advocacy orientation, to advance the discipline of counselling psychology in Canada.

I want to start by acknowledging the journey that our predecessors have taken to bring the discipline of counselling psychology to this moment – to this conference. As many of you know, a small group of dedicated counselling psychologists, including but not exclusively, Drs. Mark Schoenberg and George Hurley were instrumental in establishing the Canadian Psychological Association's Section on Counselling Psychology in 1986, and others including Drs. Richard Young and Vivian Lalonde were early leaders in the section that secured its success.

I am not going to go into the history of the section prior to 1986 or the history up until 2010, because at the last conference Drs. George Hurley and Richard Young did a wonderful job of presenting that history to conference attendees. The history is well documented in a number of articles, which I would be happy to share with you and I implore you to read. Knowing our history is important.

However, it is also imperative to note that since 1986, the section reached a number of important milestones. These include; the accreditation of counselling psychology programs in Canada, the establishment of the *Canadian Journal of Counselling and Psychotherapy*, the development and approval of the official definition of counselling psychology (initiated by Dr. Vivian LaLonde), the creation of the section archive, and the *Inaugural Canadian Counselling Psychology Conference (ICPC)* held in Montreal in 2010.

While, each of these milestones has been significant in the advancement of the discipline, and at the risk of sounding as if I am promoting myself – which I hope I am not - I would like to take a moment to talk about the ICCPC, as I believe that conference was foundational to why we are here today. Unlike this conference, ICCPC was not a section initiative, it was not a CPA initiative, it was an independent conference, with no funding. As founder and Chair of ICCPC, I was not on the section executive – The conference was just this idea I had and the activist in me wanted to make it happen.

How did I come up with the idea for ICCPC? In 2009, the CPA convention was in Montreal. I went to the meetings about the definition of counselling psychology and at that convention; the definition was officially adopted by the section. After those meetings, I was sitting in the lobby of the Queen Elizabeth Hotel, with a number of my students and I looked at them and said; “We need a conference”. They all looked at me, as if I was nuts (maybe I was and still am) – but at our next lab meeting I pitched the idea and ICCPC was born.

Next, I had one of my students develop a spreadsheet of every counselling and counselling psychology program and internship in Canada. On that spreadsheet was a list of everyone who worked in those programs, I proceeded to call every single person on that list inviting them to come to the conference. “Hi, I am organizing a conference, I have no funding but I think this conference is going to be important – will you come” (some of you here today received that phone call). I then invited presenters and workgroup leaders from across the country. Students submitted posters, which they presented at a session called *Pool, Posters, and Pinot Noir*. At the poster session, we read posters, drank wine, and played pool.

The conference was structured around the definition of counselling psychology with symposia and workgroups designed to address each of the six components of the definition:

- (1) Professional Issues and Identity,
- (2) Multicultural Counselling, Social Justice, and Advocacy,
- (3) Career Development,
- (4) Counselling, Training, and Supervision,
- (5) Research and Scientific Issues
- (6) Health, Wellness and Prevention

Why ICCPC? The reason I thought a conference was essential -- in that moment -- in the history of Canadian counselling psychology – was because I believed, we had an opportunity as a discipline to move beyond discussions of identity.

In my mind, the definition was pinnacle in the history of Canadian counselling psychology, as it clearly articulated ...Who we are, ...What we believe, ...What we do, and ...What we value.

The definition gave us a foundation,... a foundation which created a time,... a time to move forward,... forward from a foundational space,... a unified space,... a space where we could articulate our future,... and a space where we could clearly document and take stock of who we are and our contributions to the broader field of psychology.

I firmly believed that ICCPC was an opportunity for the discipline to move beyond identity and territorial debates. By territorial debates, I am talking about areas of research, scholarship, and clinical practice that we as counselling psychologists have deemed our purview.

In my mind, ICCPC was an opportunity to deconstruct the divisions between counsellors and counselling psychologists. As well, I wanted to move beyond the debates about what we share and how we part from clinical psychology. I hoped that by clearly understanding ourselves as a discipline, how we compared to other disciplines would become irrelevant.

As a minority discipline, my contention was (and still is, to a certain extent) that we fell into the same trap that often befalls people who live in minority social locations. That is, we experience pressure to justify ourselves, in the same way that racialized individuals, sexual and gender minorities, Indigenous peoples, and other marginalized populations are asked to justify who they are and their right to hold a position or point of view.

As a lesbian, I have had to learn how to stop justifying “who I am”, and the legitimacy of my achievements to people in power. There was a time, when I had to prove, that I earned my job as a professor – legitimately because of my knowledge, skills, and credentials and that I was not just “a diversity hire”. As a result, of those experiences, I have learned that -- *My Diversity is My Strength*.

When I hear counselling psychologists justifying who they are through research and other means, I want to scream – *Our Difference is Our Power*. We do not have to justify our discipline – members of our discipline have made and continue to make, enormous contributions to the field of psychology.

At the same time, my message to the broader field of psychology is, if you listen to counselling psychologists, and respect counselling psychologists, you can learn a great deal from us, from our knowledge, and our expertise. That said, ICCPC was successful in bringing together counsellors and counselling psychologists from across Canada to discuss and debate the future of these disciplines. As well, the conference led to some landmark publications: the First Special Section on Counselling Psychology published in *Canadian Psychology* in November 2011; and in 2015 – a book entitled, *Canadian Counselling and Counselling Psychology in the 21st Century* was published by McGill-Queens Press. This book was the first book in the history of Canadian Counselling and Counselling Psychology that brought together all the scholarship, written by Canadian counsellors and counselling psychologists and published in a single volume.

Nonetheless, ICCPC achieved what I hoped it would achieve in that it documented and secured the history and foundation of these disciplines in Canada. However, ...sadly... I am not sure that it achieved my second goal of moving beyond identity and territorial debates.

After ICCPC, in 2012, I became Chair of the CPA Section on Counselling Psychology. The spirit of the executive was to have another conference. However, I was clear that I was unwilling to engage in a conference about identity and territory. I strongly believed that we needed to be distinct about the goals of the next conference in order for it to be meaningful. It was difficult for the executive to articulate what the next conference would or could be. As a result, during my tenure as Chair, no conference was planned.

Yet, I am excited to see that we are now at a place to engage in a dialogue about the future of the discipline in order to advance the field and, hopefully...hopefully...identify new directions. The theme of this *Canadian Counselling Psychology Conference (CCPC)* is *Advocating for Ourselves, Advocating for Our Communities* is laudable.

However, I caution you, in the conversations you will have in the next few days about advocating for ourselves, be cognizant that advocating is NOT justifying. We need to move away from justifying who we are and what we do. We need to move towards advocating for the importance and uniqueness of our expertise in career, multicultural, diversity, health, wellness and other areas of psychology as highlighted in the definition.

Our days of justifying -- need to be over -- it is time for acknowledging and advocating to begin. As such, in the next part of this address – I hope to challenge you to think about this theme of advocacy – What do you think this theme means and how do you think this theme has the potential for advancing the discipline?

I surmise that we as a discipline are confronting another milestone. We are at the crossroads. Since ICCPC and being Chair of the section, I have had many roles within CPA and the broader psychological community. Wearing an “array of hats”, I have attended CPA, APA, ICP, SOGI, ICAP, ACPRO, CCPPP, ASPPB, and many other meetings. At these meetings, I have interfaced with government officials, regulators, accreditors, clinicians, and researchers, to name just a few. I know that there are many people across the fields of clinical, counselling, and school psychology who are working hard to address issues around globalization, mobilization, social justice and diversity... and they are doing it with thoughtfulness and integrity.

However, more often than not, I am the only counselling psychologist at the table, even though historically counselling psychologists have been at the forefront of identifying and confronting those very issues and challenges related to social justice and diversity. Then I listen to counselling psychologists, who frequently sound like they are victims of the broader fields of counselling and psychology; in particular victims of clinical psychology, without necessarily insisting, they be at a table where they can have a voice to bring about change. As such, I am tired,... I am tired of:

Complaints coupled with complacency
Rhetoric without action
Good intentions without courage

So, what do I hear? And what can we do about it?

A common complaint I hear from counselling psychologists, is that other areas of psychology are saying “they do what we do”. I interpret this complaint as other areas of psychology are encroaching on our territory. The territory often referred to in this complaint is -- diversity, multiculturalism, and forays into qualitative research.

I have heard counselling psychologists say that they think this encroachment is problematic. They are concerned that counselling psychologists are being made redundant – unnecessary – or that what has been our purview is being taken over and executed in ways with which we do not agree. However, I do not share these concerns. I have a different perspective.

Counselling psychology was founded in social justice in the early work of Frank Parsons (the founder of vocational psychology) in the early 1900s. As well, feminist, multicultural, and career psychology, have long been cited as the pillars of counselling psychology. Thus, since its inception, counselling psychology as a discipline has been concerned with social justice, diversity, human rights, and human dignity.

To give you some perspective on what I am about to say, I am going to provide you with a bit of history – my history – but history nonetheless. While the Canadian Section for Counselling Psychology was in its infancy, I was the graduate student coordinator, at the first cross-cultural roundtable (now known as the multicultural roundtable), organized by counselling psychology faculty, in particular Dr. Sam Johnson, held at Teachers College/Columbia University in New York City in 1987. -- One year after the founding of the section. -- As far as I know, (and I am pretty confident about this information), that meeting was the first conference specifically devoted to discussing cross-cultural psychology in North America.

I was also a workgroup leader at the *Advancing Together Conference*, held in Michigan in 1998 – Organized by the leadership of the *Section for the Advancement Women*, in particular Drs. Linda Forrest and Ruth Fassinger. The section was a subgroup of the *American Psychological Association's*, then called, *Division 17 Counselling Psychology*. The goal of this foundational meeting was to discuss the intersections of feminism and multiculturalism – a major step toward what is now called Social Justice. Simultaneously, the first *Multicultural Summit* was being developed by Dr. Rosie Bingham as her, *Division 17 Counseling Psychology*, Presidential project, and subsequently held in 1999.

These three conferences, founded and chaired by counselling psychologists, each were the first of their kind. These conferences laid the foundation for our current discussions about diversity and inclusion.

Racialized people, LGBT+ people, Indigenous people, feminists, and others from marginalized social locations founded and organized these conferences. Brave People -- People with Courage -- The very people who were, and in some ways still are, marginalized by mainstream psychology had the courage and conviction to develop forums to discuss diversity, oppression, and discrimination; At a time when the laws did not necessarily protect minority populations in general, and Indigenous peoples and sexual minorities in particular.

During that period, the late 1980s and mid to late 1990s, the goal of these conferences – these social movements within counselling psychology -- was to change the broader discipline of psychology. That is, the goal was to let mainstream psychology know -- that it had a role in oppressing, marginalizing, and pathologizing certain persons and peoples – certain individuals and groups.

At these conferences, the meetings were about activism. The discussions focused on the oppressive and the discriminatory nature of training, research, and practice in psychology and how it needed to change.

That said, when I presently hear, the previously mentioned territorial and encroachment concerns, I believe that counselling psychologists embracing this ideology have “missed the boat.” When I see that other areas of psychology have taken on the diversity discussions – although, I am not always pleased with the way in which these discussions are held, though mostly I am impressed with the complexity of analysis these discussions present. – The very fact that these discussions are happening is a testament to counselling psychology. We should not be threatened that these discussions are happening outside of counselling psychology or that they have entered the broader discourse of psychology. *We should be celebrating counselling psychology’s contribution* -- And the success of our social movements.

Thus, the feminist and multicultural work that historically has been the purview of counselling psychology is being integrated into other areas of psychology. That was the hope -- that was the goal of those social movements in counselling psychology. The goal was to move the margins to the center... We should be proud!

It was counselling psychologists who had the courage to give voice to the oppressive nature of psychology and it is counselling psychologists who need to continue to identify and give voice to oppressed, marginalized, and vulnerable populations.

That said, instead of worrying that these conversations about diversity are being held outside the purview of counselling psychology or that our “territory” is being encroached upon; We need to be cognizant and even concerned about the ways in which these conversations about diversity are being held and how cultural competent practices are being applied in the broader psychological community. We need to be the leaders in this discourse.

However, as typically happens to minority populations, and counselling psychology is a minority discipline in Canada, -- their voices, -- their histories are not prioritized, and oftentimes are made invisible. We should be concerned that the historic contributions of counselling psychologists to multicultural, feminist, and social justice psychology are being rendered invisible, as other areas of applied psychology take on this work -- as if it is a new idea -- without reading or citing the research done by counselling psychologists over the past 30 years.

For example, in 2016, there was an article published in *Canadian Psychology* (which I will not name) about diversity, this article did not cite a single counselling psychologist though many counselling psychologists have published and done much foundational work in the areas discussed in the article.

Is this omission a deliberate erasure? Is it an artifact of the silos prevalent in psychology? Or is it an example of the marginalization of counselling psychology research and scholarship?

While, I cannot answer these questions – I can suggest that we have a responsibility to combat our own marginalization and not marginalize other disciplines – such as counseling; A discipline that shares much of our history and our marginalization. In fact, we may be contributing to marginalization through being complacent and insular versus making sure we are sitting at the powerful tables available to us at Canadian and International forums.

Further, are we guilty of making our own history, and the history of counsellors who have contributed to that history invisible? That is, by calling the work we do, social justice without attending to the important contributions of feminist and multicultural counsellors and psychologists who were foundational to this work -- Are we participating in marginalizing the histories of counsellors and psychologists of color, LGBTQ+ counsellors and psychologists, feminist counsellors and psychologists, Indigenous counsellors and psychologists, just to name a few.

As previously mentioned, psychologists who live on the margins often found their home in counselling psychology because counselling psychology was a discipline discussing diversity -- long before the discourse around diversity became popular. The erasure of the voices of feminist, multicultural, and Indigenous scholars, in the current diversity discourse reproduces the marginalization and discrimination of the very same persons, peoples, individuals and groups for whom counselling psychologists have worked so hard to centralize their voices. Counselling psychologists may be inadvertently participating in this process of erasure. Therefore, it is important that we recognize and honor our history so we can build upon and advance the social justice, multicultural, and feminist foundations of the discipline.

Furthermore, we know that diversity leads to innovation. Counselling psychology as a discipline has a history of inclusion, advocacy, outreach, and activism. As such, the history of the discipline is a tribute to counselling psychologists as innovators.

Being forerunners in the areas of career, multicultural, feminist, and social justice psychology – counselling psychologists have been innovators in the field of psychology. Perhaps as a minority discipline, we have had no other choice but to be innovators. However, we were innovators nonetheless.

Nevertheless, I caution you, if presently we continue to focus on identity and territory we will lose our edge in being innovators in the field of psychology and -- our impact -- our social movements -- run the risk of being minimized, marginalized, and rendered invisible.

Moreover, territorial concerns and an orientation to identity preservation – is counter to my proposal that counselling psychology is a discipline of innovators. Identity preservation and territoriality requires us to metaphorically close our borders – closed borders suggests we need to protect ourselves – in our case those borders have often been about protecting ourselves from clinical psychology and/or counsellor education.

We have spent an enormous amount of time and energy trying to define the borders between these three disciplines. I think it is time to take a critical look at why we thought we needed to define borders in the first place versus building alliances -- and if we needed to define borders -- Why we chose the borders we chose?

In reality, I think borders have only served to further marginalize our discipline and make invisible our contributions. Borders may result in us feeling secure but they are counter to inclusion. Preservation does not and cannot lead to innovation. Closed borders do not allow for new ideas. In fact, closed borders are counter to counselling psychology's values of inclusion and diversity, which, are clearly articulated in the Canadian definition of counselling psychology.

A respect for the diversity of persons, peoples, thoughts, and practice is not possible with closed borders. Open borders and diversity leads to innovation – Innovation requires controversy. Diverse thinkers are not going to agree all the time.

Anyone who knows me well, knows -- I firmly believe that controversy is essential for social justice to occur – Without controversy – rich discussions – and challenging dialogues – growth cannot happen. I am not talking about conflict, which suggests that there is a winner or loser – a right and a wrong. Conflict, oftentimes, is used to describe war. We are not at war with each other or any other specialty. We need to hold on to a spirit of inclusion around disagreement and difficult dialogues.

Without difficult dialogues there is no innovation... without innovation there is no social change -- without social change there is no equity or justice. The founding of the Section and those early conferences, were fraught with controversy and, -- nonetheless, they brought about an enormous amount of change in psychology.

However, I am not sure we are having those difficult dialogues in counselling psychology in Canada. I am concerned that we may have become complacent and comfortable with identity and territorial conversations and complaints. We need to stop comparing ourselves to other disciplines – *What does it matter?*

Creating 'us and them' binaries does not lead to innovation and inclusion. While, there may have been a time that identity discussions were essential -- that time is over.

Going forward, we need to take stock of our achievements and shift the dialogue. Psychology needs innovation and counselling psychologists are the innovators – *You in this room are the innovators.*

Counselling psychologists were pioneers in founding vocational psychology, they were activists when they founded the section, and -- counselling psychologists were innovators when they engaged in the conversations – the social movements -- about feminist, multicultural, and social justice psychology.

We – counselling psychologists – have changed mainstream psychology, mainstream psychologists are having the diversity discussions, and while counselling psychologists may not be given enough credit for being the architects of that work.

We need to celebrate our success!

In these celebrations, we need to honor those people who came before us -- the architects of counselling psychology. We need to make sure their contributions are not rendered invisible. At the same time, we need to ensure that our voices are heard and that our contributions are not marginalized and that we are not marginalizing other disciplines.

What's next? Where do we go from here? I believe it is our destiny – to be forward thinking – the innovators in psychology. Quibbling over who owns diversity, multiculturalism, qualitative methods, or any other area of counselling and psychology is a waste of time.

There is far too much social justice, activist, and advocacy work that needs to be done.

Psychology is light years from being inclusive – New anti-oppressive and social justice challenges present themselves every single day. It only takes 30 seconds of watching or streaming news from around the world to understand -- that the intersections of social justice, human rights, and mental well-being are profound.

Why are we here? At this conference? At this moment in time?

At this conference, we have the opportunity to be innovators,-- to engage in controversy, -- to ask hard questions,-- and to identify areas where activism and advocacy are essential. At this conference we have the opportunity to push the field of psychology forward, to start a new social movement in psychology – to better serve a diversity of peoples, persons, and communities.

Counselling psychologists have been the innovators,-- the risk takers -- and the activists in the field of psychology. That is our legacy, and this conference is an opportunity to recognize and honor that legacy. I implore you, -- if you need to hold on to identity politics and even if you do not, -- I implore you to embrace the identities of innovator, advocate, and activist as central to being a counselling psychologist.

If any group of people can address societal inequities, -- it is the group of people -- sitting in this room today. We need to stop looking inward toward who we are – We need to start looking outward to who we want to become and how we want to honor our history, while advancing the discipline.

What important “tables” should we be sitting at? I invite YOU to sit at those tables.

How are we –YOU – going to be innovators and activists to change the future of psychology -- such that it serves competently, with integrity, and justice -- all persons, all peoples, all individuals, and all groups?

That said, I wish you all a challenging, enlightening, innovating, empowering, and, at times, controversial conference. In tribute to the legacy of counselling psychologists, I hope at this conference, you/we start the next social movement in counselling psychology.

Thank You!

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