

Social Justice and Multicultural Issues: Implications for the Practice and Training of Counselors and Counseling Psychologists

Madonna G. Constantine, Sally M. Hage, Mai M. Kindaichi, and Rhonda M. Bryant

The authors discuss the historical and contemporary connection to social justice issues in the fields of counseling and counseling psychology via the multicultural counseling movement. In addition, the authors present ways in which social justice issues can be addressed in counselors' and counseling psychologists' work with clients from diverse cultural backgrounds and in graduate training programs.

For many decades, counselors and counseling psychologists have been concerned with the relationship between individuals' mental health and the social milieu in which people live. As the racial and ethnic diversity of the United States continues to increase, the need for mental health professionals to tailor their mental health services to the needs of various cultural populations has become more germane (Constantine, Kindaichi, Arorash, Donnelly, & Jung, 2002). In particular, the growing recognition of the negative consequences of oppression in the lives of people of color has been crucial in helping many counselors and counseling psychologists to identify effective interventions to address such issues and to work more broadly to effect social change (Hage, 2003; Vera & Speight, 2003). Such awareness and actions have paralleled the emergence of the multicultural competence movement (Arredondo & Perez, 2003; Sue et al., 1982).

Multicultural competence generally is defined as the extent to which counselors possess appropriate levels of self-awareness, knowledge, and skills in working with individuals from diverse cultural backgrounds (Arredondo et al., 1996; Sue, Arredondo, & McDavis, 1992). In particular, self-awareness entails being cognizant of one's attitudes, beliefs, and values regarding race, ethnicity, and culture, along with one's awareness of the sociopolitical relevance of cultural group membership in terms of issues of cultural privilege, discrimination, and oppression. The knowledge dimension of multicultural competence refers to information one has about various worldview orientations, histories of oppression endured by marginalized populations, and culture-specific values that influence the subjective and collective experiences of marginalized populations. The skills component of multicultural competence involves the ability to draw from an

existing fund of cultural knowledge to design mental health interventions that are relevant to marginalized populations. In many respects, multicultural competence has become inextricably linked to counselors' and counseling psychologists' ability to commit to and actualize an agenda of social justice (Kiselica & Robinson, 2001).

Social justice reflects a fundamental valuing of fairness and equity in resources, rights, and treatment for marginalized individuals and groups of people who do not share equal power in society because of their immigration, racial, ethnic, age, socioeconomic, religious heritage, physical ability, or sexual orientation status groups (Fondacaro & Weinberg, 2002; Prilleltensky & Nelson, 1997). In order to address social justice issues, some counselors and counseling psychologists in the United States have adopted a professional commitment to ensuring global or international social change (Osborne et al., 1998). Others have been involved primarily at a domestic level by being concerned with helping members of U.S. society to deal with the personal, societal, and institutional barriers that impede their academic, personal, social, or career development. Both of these levels of involvement in social justice issues, however, are critical in understanding the interdependence of macrosystems and microsystems in people's lives, especially in the lives of marginalized populations.

In this article, we discuss the historical and contemporary connection to social justice issues in the fields of counseling and counseling psychology vis-à-vis the multicultural counseling movement. In addition, we underscore ways that social justice issues can be incorporated into counselors' and counseling psychologists' work with culturally diverse clients and into the curricula of academic training programs.

Madonna G. Constantine, Sally M. Hage, and Mai M. Kindaichi, Department of Counseling and Clinical Psychology, all at Teachers College, Columbia University; **Rhonda M. Bryant**, Department of Counseling, Educational Leadership and Foundations, Albany State University. Correspondence concerning this article should be addressed to Madonna G. Constantine, Department of Counseling and Clinical Psychology, Teachers College, Columbia University, 525 West 120th Street, Box 92, New York, NY 10027 (e-mail: mc816@columbia.edu).

Social Justice and the Multicultural Competencies: Their Connections to the Fields of Counseling and Counseling Psychology

Within the fields of counseling and counseling psychology, the holistic, strengths-based philosophy about human nature and its emphasis on instituting culturally relevant psychoeducational, developmental, social, and vocational interventions for diverse populations have provided fertile ground for many social justice initiatives (Vera & Speight, 2003). In fact, many counselors and counseling psychologists have functioned as leaders in identifying and implementing guidelines that address multicultural competence in mental health professionals (e.g., American Psychological Association [APA], 2003; Arredondo et al., 1996; Sue et al., 1992; Sue et al., 1982; Sue et al., 1998). The development of such guidelines or “competencies” has exemplified these fields’ commitment to social change and remedying social injustices by assisting various mental health professionals to understand individuals’ circumstances and concerns from a more ecological perspective (Fondacaro & Weinberg, 2002; Vera & Speight, 2003). Moreover, the Multicultural Competencies have contributed to greater awareness of the potentially oppressive roles that these professionals could unintentionally play through unfounded assumptions about the universality of cultures and human experiences (Arredondo & Perez, 2003).

The original presentation of the Multicultural Counseling Competencies was published in a counseling psychology journal in the early 1980s (i.e., Sue et al., 1982). Ten years later, under the leadership of Thomas A. Parham, then-president of the Association for Counseling and Multicultural Development, the second iteration of the Multicultural Counseling Competencies was presented (i.e., Sue et al., 1992). In 1996, Arredondo et al. issued a framework that operationalized the revised version of the Multicultural Counseling Competencies. In 1998, Sue et al. added two competencies related to organizational multicultural competence. Previous delineations of the Multicultural Counseling Competencies served as the backbone of the recent “Guidelines on Multicultural Education, Training, Research, Practice, and Organizational Change for Psychologists” (APA, 2003), which was endorsed by the APA Council of Representatives in August 2002. Thus, the broader field of psychology was challenged to adhere to these aspirational guidelines to promote multicultural competence in various dimensions of professional practice (e.g., service delivery, research, and training).

The Multicultural Counseling Competencies (Sue et al., 1992) were developed as an independent social justice movement devoted to increasing the relevance of mental health practice, research, and training to diverse populations (Arredondo & Perez, 2003). However, most of the existing

literature related to the Multicultural Competencies reflects attention to issues of social justice at a microlevel (e.g., individual counseling and small-group interventions). Such interventions, however, are generally limited in their ability to foster broader social change and, consequently, to bring about true social justice (Helms, 2003). Fairly recent writings (e.g., Blustein, Elman, & Gerstein, 2001; Eriksen, 1999; Fox, 2003; Jackson, 2000; Lee, 1997; Prilleltensky & Prilleltensky, 2003; Vera & Speight, 2003) have called for increasing numbers of counselors and counseling psychologists to engage in professional roles that attend more fully to social and contextual forces that affect people’s mental health and well-being. As such, in conducting social justice work, some of these mental health professionals have adopted roles that have taken them beyond their offices to settings such as community centers, churches, school systems, and even legislative bodies for the purpose of facilitating systemic changes in response to social injustices (Hage, 2003; Kiselica & Robinson, 2001; Thompson, Murry, Harris, & Annan, 2003). In addition, counselors and counseling psychologists have been encouraged to assume preventive mental health roles (e.g., Hage, 2003; Romano & Hage, 2000) as extensions of social justice and multicultural agendas.

In our clinical and research work in the areas of multicultural competence and social justice, we have identified nine specific social justice competencies that we believe are important for counselors and counseling psychologists to consider as they work with increasingly diverse cultural populations in the United States. These competencies are as follows:

1. Become knowledgeable about the various ways oppression and social inequities can be manifested at the individual, cultural, and societal levels, along with the ways such inequities might be experienced by various individuals, groups, organizations, and macrosystems.
2. Participate in ongoing critical reflection on issues of race, ethnicity, oppression, power, and privilege in your own life.
3. Maintain an ongoing awareness of how your own positions of power or privilege might inadvertently replicate experiences of injustice and oppression in interacting with stakeholding groups (e.g., clients, community organizations, and research participants).
4. Question and challenge therapeutic or other intervention practices that appear inappropriate or exploitative and intervene preemptively, or as early as feasible, to promote the positive well-being of individuals or groups who might be affected.
5. Possess knowledge about indigenous models of health and healing and actively collaborate with such entities, when appropriate, in order to conceptualize and implement culturally relevant and holistic interventions.

6. Cultivate an ongoing awareness of the various types of social injustices that occur within international contexts; such injustices frequently have global implications.
7. Conceptualize, implement, and evaluate comprehensive preventive and remedial mental health intervention programs that are aimed at addressing the needs of marginalized populations.
8. Collaborate with community organizations in democratic partnerships to promote trust, minimize perceived power differentials, and provide culturally relevant services to identified groups.
9. Develop system intervention and advocacy skills to promote social change processes within institutional settings, neighborhoods, and communities.

Social Justice Issues and Counseling Practice

Active involvement in advocacy, community outreach, and public policy making are prime examples of interventions that can promote attention to social justice issues among practicing counselors and counseling psychologists (Eriksen, 1999; Hage, 2003; Vera & Speight, 2003). In the spirit of encouraging mental health professionals to broaden their potential repertoire of helping behaviors beyond those associated with providing individual counseling or psychotherapy, Atkinson, Thompson, and Grant (1993) presented a framework that addressed eight potential helping roles in relation to working with diverse cultural populations: (a) facilitator of indigenous healing methods, (b) facilitator of indigenous support systems, (c) adviser, (d) advocate, (e) change agent, (f) consultant, (g) counselor, and (h) psychotherapist. Atkinson et al. proposed that the assumption of any given role(s) depended on the interaction of three client-based factors: clients' level of acculturation (i.e., the degree to which clients identify with the values, beliefs, customs, and institutions of their culture of origin and the host culture), the locus of the etiology of clients' presenting problem(s) (i.e., the extent to which clients' presenting issues stem from internal issues or dynamics or from external sources), and the goals of intervention or treatment (i.e., the desired outcomes of helping).

Mental health professionals often adopt the counselor and psychotherapist roles because they have been taught almost exclusively to do so in the context of their training programs (Constantine et al., 2002). However, the assumption of such roles without full consideration of clients' level of acculturation, problem etiology, and treatment goals might result in the delivery of ineffective or culturally irrelevant services. For example, some low-acculturated individuals might experience interpersonal difficulties stemming from internal issues (e.g., low self-esteem), but these individuals may not feel comfortable or safe in helping relationships with counselors or counseling psychologists who are not members of their indigenous frameworks of helping (e.g., family members or

close friends). In such cases, these clients might benefit more from working with counselors or counseling psychologists who are able to serve as facilitators of indigenous support systems or facilitators of indigenous healing methods. In adopting either of these latter roles, these mental health professionals should be aware of the potential functions and importance of indigenous cultural resources, such as family and friendship networks, religious figures and institutions, respected community elders or leaders, and "energy healers," who could provide assistance that might be more synchronous with some clients' worldviews and values.

The roles of adviser, consultant, advocate, and change agent embody tenets of social justice and activism through client empowerment and advocacy. In particular, counselors and counseling psychologists serve as advocates and change agents when they communicate or interface with structures, organizations, or institutions that marginalized or disenfranchised individuals or groups of people perceive as inherently oppressive to their well-being. For example, a Black gay male real estate agent, repeatedly overlooked for promotions despite an exceptional sales record, might seek counseling or psychotherapy to address his depressive symptoms arising from a sense of feeling powerless at work. Although counseling or psychotherapy might assist this client in achieving his stated presenting goal, the client also might be helped by a counselor or counseling psychologist who could assume other roles such as (a) aiding the client to identify his experiences regarding racial and/or sexual discrimination and (b) helping the client to identify potential legal recourses related to his experiences of discrimination on the job (e.g., serving as an adviser or consultant). The client also could be encouraged to join a gay men's support group or a support group consisting of men of color in order to obtain support for discussing issues of discrimination based on race or sexual orientation (i.e., serving as a facilitator of an indigenous support system). This example shows that counselors and counseling psychologists committed to principles of social justice must develop skills in creativity and courage in order to ameliorate the consequences of social injustice.

Using the following case example, we illustrate some ways in which several of Atkinson et al.'s (1993) helping roles outside of those of counselor and psychotherapist might be assumed by a counselor or counseling psychologist working with an international college student.

Case Example

Lydia (a pseudonym) is a 20-year-old, 3rd-year college student from Lima, Peru, who attends a predominantly White university in the midwestern United States. According to the intake counselor at the university college center, Lydia presented with issues related to feelings of homesickness. Throughout her college experience, Lydia stated that she has struggled to "fit" into the campus community. She also indicated that she daydreams about her life in Peru, especially her friends and

family, and that she misses speaking Spanish. Lydia spoke fluent English, with a very slight Peruvian accent. At the end of her intake session, Lydia requested to work with a Latina therapist, preferably one who spoke Spanish. However, no Latina counselor was available for ongoing counseling sessions, so Lydia was assigned to work with an Asian American female counselor.

During her initial counseling sessions, Lydia discussed her erratic sleeping patterns, noting that her sleep cycles had been short and interrupted over the past 3 weeks. She also stated that she often had to remind herself to eat and that she had been feeling lethargic and disinterested in her academic courses. In addition, she reported that she had begun to withdraw from her friends in the dorm because, she said, she “doesn’t want to burden them with my problems.”

Lydia indicated that her symptoms began shortly after the semester had begun, about 1 month ago. After 2 years of working part time as a teller with a Latino male supervisor with whom she was on friendly terms, the supervisor left and was replaced by a White woman. When Lydia was under review for a salary increase, a financial discrepancy arose in which the bank till was short. The female supervisor denied Lydia a raise, despite a flawless work record, and then accused Lydia of stealing from the bank. During this same time period, Lydia’s philosophy professor asked her to respond to a question in class, to which she hesitated because she felt “self-conscious” about her accent and ability to articulate her thoughts clearly. In the middle of Lydia’s response, her professor interrupted and said, “Hurry up, chica,” to which her classmates laughed. Lydia felt mortified, and, shortly after these incidents, she became easily distracted from her studies and cared less about schoolwork in general. Lydia remarked,

It’s not only that I think I don’t fit in here, but it’s like nobody really wants me here, and I don’t want to be here either. I work 20 hours a week at the bank with that woman and twice as long as other students [in completing homework assignments]. Somehow, even though my grades are good, I feel down and drained. I try to show my teachers that I’m as smart as everybody else, but they keep asking me if I need a tutor and to speak quicker. I feel like no one else is going through what I’m going through. Maybe I should just go back home to Lima.

Discussion of the Case Example

Lydia’s intake counselor initially had conceptualized her situation as involving feelings of homesickness. However, as Lydia worked with her assigned counselor, it appeared that her experiences of cultural discrimination in her work setting and in her classes had precipitated some depressive symptoms. Lydia’s counselor explored her feelings about her employment and educational experiences as related to ethnic and gender discrimination and considered additional ways she might be able to help address some of Lydia’s concerns in ways that extended beyond their direct one-on-one work together. For example, her counselor assumed the role of adviser by

educating Lydia about how to access civil protections against discrimination, such as consulting with the campus Affirmative Action Office and the Equal Employment Opportunity Commission. The counselor also undertook a change agent role on the university campus by offering cultural sensitivity workshops to faculty members and students, focusing on raising participants’ awareness of international college students’ cultural adjustment experiences. Such a role could represent one potential way of indirectly helping Lydia and other international students to experience less distress related to cultural insensitivities or racism on campus. Lydia’s counselor also served as a facilitator of an indigenous support system by referring Lydia to a Latino(a) student organization so that she could interact with and obtain support from other Latino(a)s on campus who might be experiencing similar issues.

Social Justice Issues and Counseling Training

To prepare future counselors and counseling psychologists to assume social justice roles, it is vital that the structure, requirements, and goals of many graduate training programs are modified to assist students in developing competencies to intervene at broader levels. Social justice training initiatives, which often include applied service delivery components (e.g., Kenny & Gallagher, 2000; Pearlman & Bilodeau, 1999; Victims’ Service Program, 1992), have offered some graduate students in counseling and counseling psychology with opportunities to translate their academic knowledge into real-world contexts by developing and implementing innovative models and programs within large community sites and by becoming involved in social policy work (Pearlman & Bilodeau, 1999). For example, service-learning training programs can provide students with a practical understanding of large-scale societal inequities, along with mechanisms by which they may intervene to effect change (Kenny & Gallagher, 2000). In addition, service-learning programs could offer opportunities to gain valuable research, evaluation, and program development skills in the context of community mental health settings, which counselor and counseling psychology trainees could then transfer to other related settings (Kenny & Gallagher, 2000).

Some counselor and counseling psychology training programs also might consider including educational, legal, and public policy institutions as experiential or applied learning sites for the development of critical social justice competencies among their students. For example, Boston College has partnered with the Boston Public School System’s School-to-Career program to facilitate academic–community collaboration and to provide trainees with an opportunity to learn from educational empowerment programs (Hartung & Blustein, 2002). Within this partnership, trainees work with ninth-grade students by offering career counseling psychoeducational services focusing on four areas (i.e., identity development, recognizing resources and barriers to academic and career goals,

bridging school and work, and building personal strengths). Academic–legal collaborations also may offer counselor and counseling psychology trainees with opportunities to witness litigation issues related to the victimization of specific groups of people, such as racial discrimination and sexual harassment cases. Furthermore, collaborations with legal entities or institutions might provide these trainees with increased fluency in navigating bureaucratic processes (Fox, 1993, 1999).

Working in social justice training settings that emphasize less traditional helping roles could challenge some counselor and counseling psychology trainees to work outside of their comfort zones. Moreover, trainees who work with some community action organizations might encounter difficulties in the initial stages of establishing trust with some of these entities, particularly if these students and the community's constituents are racially, ethnically, and/or socioeconomically different from each other. Hence, it is vital that counselor and counseling psychology trainees who engage in social advocacy work with organizations reflect on their personal ecological histories and how their values, beliefs, and privileges can either facilitate or undermine their work efforts (Prilleltensky, 2001). Experience in community-based social justice settings also could contribute to these trainees' abilities to self-reflect about issues of race, ethnicity, oppression, power, and privilege relative to their own lives (Mulvey et al., 2000) and to nurture their competence in working with a broader array of individuals.

Another potential issue related to counselor and counseling psychology training and social justice initiatives pertains to the importance of trainees critically examining their ethical judgment and decision-making styles in relation to clients from diverse cultural populations. For example, Welfel and Lipsitz (1983) reported that counselors' ethical orientation was positively correlated with moral reasoning, counseling experience, and number of contributions made to professional and social action organizations. If attention is given to understanding how ethical orientation and decision-making processes of counselor and counseling psychology trainees might relate to the assumption of social justice initiatives in a professional context, it might encourage these students to recognize areas that might need attention with regard to their competence as service providers.

Lee (1997) asserted that mental health professionals should become better trained to understand social justice issues from a more global perspective. This point is based on the notion that as the interconnectedness of the world becomes increasingly acknowledged in psychology, social and economic forces will continue to reshape the composition of societies throughout the world and narrow the physical and social distance between groups of people. As such, counselor and counseling psychology training programs also should focus on worldwide social transformation and the need for mental health intervention at the individual, group, organizational, societal, and international levels. Hence, counselor and counseling psychology trainees should be encouraged and required to understand

how mental health issues may be manifested in populations residing outside of the United States.

One mechanism that could provide counseling and counseling psychology students with applied training in this vein would be the opportunity to conduct a practicum or internship outside of the United States (Lee, 1997). For example, in a collection of narratives by feminist community psychologists (Mulvey et al., 2000), Ingrid Huygens described how her efforts to engage Maori women in a lesbian health promotion group forced her to reevaluate her notions of relationship building, in comparison with Maori cultural practices that initiate collaborations. Her efforts also led her to realize that the numerical or physical representation of people from marginalized groups within certain contexts was not necessarily equivalent to the sharing of procedural power in such contexts. Thus, opportunities for counselor and counseling psychology trainees to participate in foreign exchange programs would expose students to different cultural ecologies and racial landscapes that could encourage them to reflect more deliberately on their status as helpers and as cultural beings (Lee, 1997).

Finally, counselor and counseling psychology training programs might consider increasing the emphasis given to prevention in their curricula and research initiatives (Conyne, 1997; Romano & Hage, 2000). In addition to developing practicums that give greater emphasis to applying and evaluating prevention interventions, a prevention focus could be achieved either through freestanding courses or through infusion into existing courses. Romano and Hage suggested eight training domains relevant to prevention that could be the content of such course work: community and multidisciplinary collaboration, social and political history, protective factors and risk-reduction strategies, systemic intervention, political and social environment, psychoeducational groups for prevention, prevention research and evaluation, and prevention ethics. These training domains could provide students with knowledge and skills to engage effectively in the practice of prevention.

Conclusion

Counselors and counseling psychologists must continue to think creatively about how to address social justice issues in their own work with clients and with students in training in their fields. As leaders in the multicultural competence movement, counselors and counseling psychologists are also in unique and powerful positions to educate their peers about the importance of mental health professionals achieving appropriate levels of competence in working with diverse cultural populations. Counselors and counseling psychologists are situated in an optimal position to help society's inhabitants understand the undue effects of social injustices for the well-being of the larger society. The increasing cultural diversity of the United States underscores the importance and timeliness of these issues, which ultimately could have profound implications for the well-being of individuals around the world.

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