Reflecting on Black History Month

BY KYESHA M. ISADORE, PH.D., NCC, CRC

As February comes to a close, we take a moment to reflect on the significance of Black History Month. This annual observance in the United States and Canada provides an opportunity to honor the accomplishments and contributions of Black individuals throughout history. It is a time to celebrate the cultural richness and diversity of the Black community, and to recognize their sacrifices and struggles. However, Black History Month is not just a time for celebration. It is also a time for education, reflection, and action. We must acknowledge that the fight for racial justice is far from over. Systemic racism continues to impact the lives of Black Americans in countless ways, from disparities in healthcare and education to the criminal justice system and beyond. Black History Month is an opportunity to confront these issues head-on, to learn from the past, and to work towards a better future.

Here are a few ways to continue to honor and celebrate the contributions of the Black community:

- Seek out books, documentaries, and online resources that delve into Black history beyond the usual figures and events that are often highlighted in February
- Support Black-owned businesses
- Cite Black scholars
- Donate to organizations that promote racial justice and support Black communities
- Advocate for policies and initiatives that promote racial equity and justice

AMCD African American Concerns Group:

Thank you to everyone who attended the Black History Month events!

AMCD VP for African American Concerns:
Charmaine Connor, Ph.D., LPC (TX), NCC; Roosevelt University
NOTE FROM THE PRESIDENT

Thank you for your continued work and commitment as AMCD ambassadors and advocates. I am thrilled about our continued programming hosted by our various Concerns groups, Regional Reps., and Writer's Consortium. Be sure to consult with future AMCD newsletters, email notifications, and our website for updated information and programming:

https://www.multiculturalcounselingdevelopment.org/

Our next upcoming special webinar will be presented by our very own ACA and AMCD Past-President Dr. Patricia Arredondo. This webinar will be open to all AMCD members, especially if you are considering your next career move or just getting started.

Upcoming Webinar:

Title: Career Empowerment through Career Circles
When: Thursday, March 23, 2023 (7-8 pm EST)
Presenter: Dr. Patricia Arredondo

Webinar Description:
Professionals have received messages about the need for career planning for advancement in our individualistic society. This requires knowing your assets—skills and experiences, networks, and vision for the next milestone or two. Professionals from marginalized identities have often gone it alone, uncertain of whom to reach out to for career advice. If mentorship was absent in graduate school, individuals may be at a disadvantage. In this workshop, the conversation will address career circles, inside and outside one’s profession and the workplace, and who may become the “go-to” resources for career empowerment and reliability.

Join Zoom Meeting
https://SDSU.zoom.us/j/83407439492
Remembering Dr. Mark Pope

BY RONI K. WHITE

AMCD generally and Native American Concerns specifically would like to take a moment to honor the recent passing of ACA’s 2002-2003 president, Dr. Mark Pope. In addition to this role, Dr. Pope was president of the National Career Development Association from 1998-99 and the Society for the Psychological Study of Lesbian, Gay, Bisexual, and Transgender Issues from 2010-11. He was also a fellow of several major professional societies, including the American Counseling Association, three divisions of the American Psychological Association (Society of Counseling Psychology of Sexual Orientation and Gender Diversity), and the National Career Development Association. He was also one of the very early advocates for recognizing Native American concerns and a founding member of CSJ. He wrote a bit about his intersectional identities as a Cherokee, gay, man with disabilities and was a mentor to countless people.

Dr. Pope spent more than two decades as a counselor educator at the University of Missouri – St. Louis, beginning in 1997 and continuing until his retirement in 2018, and was widely considered to be one of the founders of and leading authors in the field of cultural diversity issues in career counseling and career development, especially gay and lesbian career development. He served as chair of the Department of Counseling and Family Therapy from 2006 - 2016. He was a Curators’ Distinguished Professor Emeritus in the Department of Education Sciences and Professional Programs in the College of Education. He received several accolades in the field of mental health for his leadership, scholarship, and teaching. The role he was most proud of was one of a mentor to his students and colleagues. In 2018, the University of Missouri System presented him with the prestigious Thomas Jefferson Award, the highest award that any faculty member may receive.

Dr. Pope was an Elder of the Saint Francis River Band of Cherokees. He also served as the Director of Psychological Services for the American Indian AIDS Institute and the Native American AIDS Project in San Francisco.

For anyone who would like to do something in memorial, his family requested that in lieu of flowers or gifts, donations can be made to the following organizations: Lymphoma Research Foundation (Mantle Cell Lymphoma) or the American Cancer Society in honor of Dr. Mark Pope.
I hope you are as excited about our upcoming gathering at the ACA Conference in Toronto, Canada as I am. It is a key time in which we gather as AMCD members for our annual meeting as well as enjoy educational, social, and professional networking opportunities. Please mark your calendars for the following important meetings:

AMCD Board Meeting: Thursday Mar. 30th; 9:00a-12:00p (Pier 4 - Convention Level)
AMCD General Body Meeting: Thursday Mar. 30th; 1:00p-2:00p (Pier 4 - Convention Level)
AMCD Reception: Friday Mar. 31th; 7:00p-8:30p (Met West - Conference Center 2nd Floor)
AMCD Mixer: Saturday April 1st 9:00p-12:00a (Met West - Conference Center 2nd Floor)

The conference will host over 200 educational sessions intended to increase our knowledge about counselor education, K-12 advocacy, community outreach, teaching, and research. Several sessions will be presented by our very own esteemed AMCD board members: Carla Adkinson-Johnson, Noreal Armstrong, Aja Burks, Sachin Jain, Maia Niguel Hoskins, Yoon Suh Moh, Kyesha Isadore, and Jung Hee Hyun. Additionally, AMCD has two sponsored presentations:

#388: Women of Color in Counselor Education Leadership: Bridging Past, Present, and Future
Presenters: Angela D. Coker, Patricia M. Arredondo, Ann Shillingford, Jung Hee Hyun, Natoya H. Haskins
Saturday April 1, 2023, 1:30 PM - 2:30 PM
1 CE Hour(s), Education Session, 60-Minute

#523: Exploring 988 Suicide and Crisis Lifeline use among College Students of Color (Poster Session)
Presenters: Afroze Shaikh & Catherine Y. Chang
Friday March 31, 2023, 10:00 AM - 10:30 AM
0 CE Hour(s), Poster Session, 30-Minute

I look forward to your continued professional engagement as well as seeing you all in Toronto!

Angela Coker, PhD, LPCC, NCC
AMCD President (2022-2023)

Early Registration: October 17, 2022-February 13, 2023
Regular Registration: February 14, 2023-March 29, 2023
Onsite Registration: March 30-April 1, 2023

Your conference planning committee is super excited about the upcoming 2023 ACA Conference and Expo in Toronto, Canada! Don’t forget to stop by the AMCD booth in the Expo. Our theme is Wellness of the Counselor and we will be focused on providing a space for you to relax, recharge and refresh during the hustle and bustle of the conference. We are hard at work making sure you have a fun time at the conference. Can’t wait to see you there!

Cha’Ke’Sha Spencer - Conference Chair
Shaketa Robinson Bruce - Conference Planning Committee
Brentia Cladwell - Conference Planning Committee
Cherae Stovall - Conference Planning Committee
AMCD is pleased to announce the selection of the 2023 Awards recipients:

**Distinguished Service Award**

**DR. S. KENT BUTLER**

This award honors an AMCD member whose service at the local, state, national, or international level has stimulated interest in multicultural counseling and development and/or enhanced the well-being of members of the populations served by AMCD.

**Compadrazgo/Comadrazgo Award**

**ROBERTO CARLOS MARTINEZ**

This award honors a member of the Latinx Network of AMCD who is active in the mentorship of Latinx counseling students or professionals, demonstrates a commitment to multiculturalism and social justice, and has demonstrated leadership (or leadership potential) within the Latinx Network.

**Advocacy Award**

**DR. SZU-YU DARLENE CHEN**

This award honors an AMCD member who has exemplified competent practice in advocacy and/or fostered an awareness of advocacy among members of the counseling profession.

**Young Emerging Leader Award**

**DR. SHERYA VAISHNAV**

This award honors an early-career AMCD member who has demonstrated a commitment to multicultural counseling and development and the potential for future leadership in the counseling profession.

**Emerging Graduate Student Leader Award**

**KRISTAL MILLER**

This award honors an AMCD student member who has demonstrated a commitment to multicultural counseling and development through outstanding scholarship, service, or leadership.

**Exemplary Diversity Leadership Award**

**DR. SYLVIA NAASSAR**

This award honors an AMCD member who has exemplified a career-long commitment to multiculturalism and diversity and/or promoted and enhanced cultural sensitivity among members of the counseling community and the society at large.
AMCD 2023 AWARD RECIPIENTS

AMCD is pleased to announce the selection of the 2023 Awards recipients:

AMCD Research Grant Recipient

DR. RICHELLE JOE AND HEART (HIV EDUCATION, AWARENESS, AND RESEARCH TEAM)

Study Title: Still Positive: Using Photovoice to Understand the Experiences of Long-term Survivors of HIV

AMCD Research Grant Recipient

DR. CHAE (PICTURED), DR. EDITH GONZALEZ AND DR. CITLALI MOLINA

Study Title: Advocacy for Undocumented High School Students’ Postsecondary Access

THANK YOU TO OUR AWARDS COMMITTEE

AWARDS COMMITTEE CO-CHAIRS

Camilia A. Pulgar, Ph.D.
Maia Niguel Hoskin, Ph.D.

AWARDS COMMITTEE MEMBERS

Chantrelle D. Varnado-Johnson, Ph.D.
Joseph H. Campbell, III, Ed.D., NCC
Melissa Carmona, M.S., LCMHC, NCC
Laura Rendon Finnell, M.S.
Amirah Nelson, Ph.D.
Association for Multicultural Counseling Development

Congratulations our newly elected leaders!!

Welcome Dr. Ann Shillingford
President-Elect 2023-2024,
President 2024-2025!

Association for Multicultural Counseling Development

Congratulations our newly elected leaders!!

President-Elect 2023-2024
Dr. Ann Shillingford

Graduate Student Representative 2023-2024
Melissa Carmona

VP Latinx Concerns 2023-2026
Dr. Camila A. Pulgar

VP Women’s Concerns 2023-2026
Dr. Ashlei Petion

CO-VPs Native-American Concerns 2023-2026
Roni K. White
Dr. Nicola Meade

VP International Concerns 2023-2026
Dr. Sachin Jain

VP Multiracial/Multiethnic & Transracial Adoptee Concerns 2023-2026
Dr. Regina Finan

South Region Representative 2023-2026
Dr. Kristy Christopher-Holloway

Western Region Representative 2023-2026
Dr. Desa Daniel
Sravya Gummaluri (she/her), LAC (NJ), NCC, is a Counseling Ph.D. Candidate at The George Washington University. Sravya received her master’s in clinical Mental Health Counseling at Rider University. She is a current 2022–2023 NBCC Doctoral Minority Fellow. Sravya is also a current NARACES Emerging Leader and 2023–2024 CSI LFI Fellow as part of the Chi Sigma Iota Leadership Fellowship and Internship program. Sravya is committed to instilling anti-oppression and anti-racism in all the spaces she enters in the counseling profession and as an individual. Her professional interests center on anti-oppressive counselor education, supervision, leadership, and advocacy for BIPOC and migrant communities in navigating sociopolitical and sociocultural stressors to promote overall wellness.

AMCD Writers’ Consortium Updates

Greetings! I am Sravya Gummaluri, and I was newly appointed as the Writers’ Consortium Chair. I am grateful to be part of AMCD. In this role, I hope to help create community for diverse writers, and I am interested in hearing what might be helpful for you. Please feel free to reach out to me @ gsravya@gwmail.gwu.edu with any thoughts or questions!

Writers’ Consortium had an empowering webinar recently on February 9th! Thank you to all those who attended Writers’ Consortium Webinar: “Writing for Publication: A Discussion with JMCD Editor”, Dr. Adkison-Johnson, Ph.D., NCC.

A special thank you to guest speaker and JMCD, Editor in Chief, Dr. Adkison-Johnson for offering her valuable insight to webinar attendees on February 9th at the webinar, and thank you to all who attended the webinar. We created a shared space of empowerment and community for writing and publication in counseling. A special thank you to Dr. Angela Coker, and Dr. Kent Butler in their support of this event!

Bi-Weekly Writing Spaces for Counseling Graduate Students

Join Writers’ Consortium for bi-weekly writing spaces every other Friday at 11:00am–12:30 pm EST. The aim of these writing spaces is to serve as a space of community, inspiration and support for counseling graduate students in their writing.

Please see the flier for more information, a zoom link and writing space meeting dates.
AMCD WOMEN'S CONCERNS GROUP

CELEBRATIONS & UPCOMING EVENTS

The Women's Concern Group values connection and collaboration and we want to celebrate the great things our members are doing. Please see a few celebrations below. If you have something to celebrate please share by emailing Dr. Armstrong at norealfarmstrong@gmail.com. We will also have time to share successes at our upcoming WCG meeting.

CELEBRATIONS

- Olivia Fadul was appointed by Mayor Keller to serve on Albuquerque's Americans with Disabilities Act Advisory Council for a three year term. She was also recently selected and will work with ARCA to develop counseling competency developing guidelines for supervising counseling trainees with disabilities. Olivia is a Licensed Professional Clinical Counselor in New Mexico, Nevada, and Alabama and a CES doctoral student at the University of New Mexico.
- Dr. Ashlei R. Petion became fully licensed as an LPC in the state of Georgia. She is currently working as an Assistant Professor in the Department of Counseling at Nova Southeastern University.
- Dr. Noreal Armstrong received the Don C. Locke Multicultural and Social Justice Award at the 2023 North Carolina Counseling Conference in Durham, NC. She is the CEO and Executive Director of the non-profit organization, A Therapist Like Me.

UPCOMING EVENTS

March 3, 2023: Join the Women Concerns Group from 12:30p-3p EST for a Women's Mini Writing Workshop!

This workshop will provide tips for writing during or over breaks. There will be the quiet, music, chat, and research support break out rooms as well. You will have a three hour block to learn, collaborate or simply work on upcoming writing projects.

Objectives:
- Providing a space for uninterrupted writing
- Cultivating scholarly writing habits
- Strengthening writing productivity

Overview:
- Writing Tips Presentation and Q/A (30 minutes)
- Creating a Plan for Writing Productivity Presentation and Action (30 minutes)
- Uninterrupted Writing Space (110 minutes)
- Check-in and Reflection (10 minutes)

Visit AMCD on ACA Connect or Facebook to register!

March 30, 2023: Join the Women's Concerns and Native American Concerns Group for an engaging book discussion on missing and murder indigenous women. We will meet at ACA to discuss thoughts, feelings, and action steps after reading from one of two books.

- Forever Loved: Exploring the hidden crisis of missing and murdered women and girls in Canada by Jennifer Brant and D Memee L. Harvard
- Decolonizing Trauma Work: Indigenous stories and strategies by Renee Linklater

SAVE THE DATE::
APRIL 14TH - GRADUATE STUDENT FOCUSED MINI WOMEN'S WORKSHOP!!
MORE DETAILS TO COME.

AMCD VP for Women’s Concerns:
Noréal F. Armstrong, Ph.D., LCMHCS, LPCS (TX), NCC, LCDC (TX)
Greetings! The North Atlantic region of the American Counseling and Association (ACA) and Association for Multicultural Counseling and Development (AMCD), a division of the ACA, represents counseling professionals and students who live and practice in the following jurisdictions, states, and territories – Connecticut, Delaware, Maine, Massachusetts, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island, Vermont, District of Columbia, Puerto Rico, Virgin Islands, and Europe. Among many of the ACA and AMCD members who reside and serve in the region, our region would like to share and highlight the work by Resheena Bowen and Dr. Felecia Pullen in the section below.

**RASHEENA BOWEN**

My name is Rasheena Bowen. I have been an ACA member for two years as a student. I have gained my Bachelor’s degree in criminal justice and Master’s degree in strategic and organizational leadership from Neumann University in Pennsylvania. I am currently a clinical mental health counseling student at Capella University. I learned that it is my duty to enhance my cognitive skills to support my community. It has been apparent that my calling is to assist those in need. I just recently published my first book titled “The Counselor’s Counselor: The Story of Flame”, and its purpose is to educate and support those victimized by trauma and abuse. It also assists professionals in obtaining self-awareness while incorporating exclusive counseling techniques.

**DR. FELECIA PULLEN**

Dr. Felecia Pullen specializes in program and policy development for the fields of substance use disorders, teen misuse prevention, non-medical models of harm reduction, and recovery supports. Much of her focus is on the design and implementation of community-based initiatives. Through multi-tiered approaches, she believes we can prevent the onset of use, reduce overdoses resulting from misuse, increase the attainment of recovery capital, and promote healthier communities. In addition, Dr. Pullen founded and is the President & CEO of Let’s Talk SAFETY, Inc., a not-for-profit which includes: SAFE in Harlem, a SAMHSA-funded teen-led substance misuse prevention coalition; The PILLARS, Manhattan’s first OASAS-funded Recovery Community & Outreach Center; and the SAFETY Net, a teen-designed Clubhouse in Harlem. Each division offers holistic, complementary and alternative approaches to recovery, for individuals and family members who are loving someone in active use. Dr. P.’s advocacy and activism has been recognized nationally and throughout the city of New York & State. She has delivered numerous workshops in Culturally Responsive Recovery at SAMHSA’s National Leadership Forum; has twice been appointed by former NYC Mayor Bill DeBlasio to the City’s Municipal Drug Strategy Council; currently sits on the FOR-NY Recovery Community Steering Committee, and has produced several substance misuse awareness campaigns for the State. Through the strength of her partnerships with NYPD, The NYC Dept of Health & Mental Hygiene, Colleges and Universities, public and private healthcare systems, and political figures she has delivered programs and services free of charge to over 20,000 individuals.

AMCD North Atlantic Region Representative: Yoon Suh Moh, Ph.D., LPC (DC, PA), NCC, CRC, BC-TMH, BCN
Neurobiology of Stress-Informed Counseling: Healing and Prevention Practices for the Helping Professions

Recognizing that we are constantly exposed to stressors in our day-to-day lives, Neurobiology of Stress-Informed Counseling: Healing and Prevention Practices for the Helping Professions introduces readers to a variety of ways of conceptualizing stress that are supported by anecdotal and empirical evidence. It invites readers to explore scenarios in which both positive and negative stress can influence human function, as well as practices that can help alleviate the harmful effect of stress on human development and health. The book emphasizes the significance of preventative actions and practices that may curtail the sources of negative stress at varying levels, equipping helping professionals with strategies and knowledge that can help them assist their clients. It describes culturally responsive approaches to actions and practices for healing and prevention and also underscores the importance of self-care and wellness.

Opening chapters present the neurobiology of a stress-informed approach to health-related actions and frameworks and perspectives that highlight the importance of healing from and prevention of human suffering. Additional chapters examine the connection between human suffering and its effects on human development, human health, and disease. Readers are challenged to apply their knowledge of healing and preventative actions at various levels, from micro to macro and within the helping professions.

Dr. Nicola Meade, co-VP of Native American Concerns, is the proud recipient of a $2000 NASA grant (yes the space people) for her work with the psychological costs of motherhood. The grant in relation to the category Human Exploration and Operations, which focuses on International Space Station operations, development of commercial spaceflight capabilities and human exploration beyond low-Earth orbit, includes psychology (you can see more information here: NASA Overview | NASA). The title of the study is Women’s Cost for Motherhood Expectations in the Workplace, and although in early stages intends to create a measure that will capture the factors and intensity of a woman’s distress in being psychically distant from her children due to her work.
The Webster Institute of Clinical Scholarship, in partnership with the Department of Professional Counseling, will launch a 5-month Professional Development Series focusing on Race-Based Trauma. The goal of these workshops is to facilitate discussions on race and trauma, and to provide culturally responsive strategies to practitioners and counselors-in-training (CT) to work effectively with clients who have experienced racial trauma.

**Target Audience:** Counselors, Marriage and Family Therapists, Social Workers, Psychologists, and other Mental Health Professionals. These workshops may be of interest to members of the general public. Participants will be able to earn CEUs. Each month, we will focus on an aspect of Racial Trauma.

Participants may join one or any of the sessions regardless of whether they have attended preceding sessions. This Professional Development Series will culminate in the WICS Summer Symposium that is scheduled for June 10th, 2023. Save the date and be on the lookout for additional information.

All sessions are free. Please register for each session at the link below. After registering, you will receive a confirmation email containing information about joining the meeting.

**CLICK HERE TO REGISTER**

**Session 1: Jan. 18, 12–1 p.m. CST**
*Understanding Race-Based Trauma Stress (PAST)*
This session will address social determinants of race-based trauma, including sociocultural factors. Participants will also learn updates on the diagnosis and assessment of racial trauma.

**Session 2: Feb. 15, 12–1 p.m. CST**
*Imprints of Racial Trauma on the Body and the Brain (PAST)*
There is ample evidence in the literature on the toxicity of racism. This session will focus on the neurobiological impact of race-based traumatic stress on individuals’ and communities’ health.

**Session 3: March 22, 12–1 p.m. CST**
*Racial Trauma Healing and Resilience*
This session will explore mitigating factors for experiencing race-based stress and best practices that foster racial trauma healing.

**Session 4: April 19, 2023**
*Racial Trauma and Supervision*
Clinical learning environments often constitute a microcosm of the larger society that can enable systems of inequality and oppression to persist. Clinical supervisors are responsible for creating safe learning environments for CT to develop into global citizens who are culturally competent to serve diverse populations. This presentation will explore how systems of oppression may present in clinical supervision and their impact on the CT and clients.

**Session 5: May 17, 2023**
*Racial Trauma and Mental Health Professionals*
Similar to other helping professionals, mental health professionals are often at high risk of experiencing vicarious trauma. As such, it is imperative that they learn effective coping strategies to minimize the risks of being retraumatized.

**Save the Date!: June 10, 2023 Summer Symposium**
The WICS Summer Symposium provides an opportunity for scholars to come together to present their research, expertise and experiences in the field of health and mental health care for the high-need communities in the St. Louis metro area. The symposium will provide CEU opportunity for site supervisors, faculty, local counseling professionals and other HRSA-BHWET grantees.
MESSAGING AND DOMESTIC VIOLENCE IN THE LATINX COMMUNITY

BY: PAMELA FULLERTON

Since the Covid-19 pandemic, the criminal justice and mental health community have seen a disturbing spike (upwards of 30%) in domestic violence or intimate partner violence cases (Council on Criminal Justice, 2021; Mendie et al., 2022; Substance Abuse and Mental Health Services Administration, 2021).

We know domestic violence and intimate partner violence exist in the Latinx/Hispanic community, and the rates are about the same as their White counterparts. We also know, highlighted from the devastating effects of Covid-19, that the Latinx community has less access to both physical and mental health care and these same issues exacerbate the domestic violence problems in our community. Furthermore, Latina women are earning far less than they deserve, about $.57 for each dollar paid to White, non-Hispanic men according to the National Women’s Law Center (Tucker, 2021). Having fewer financial resources limit someone’s ability to leave a dangerous situation. Add the complications associated with immigration status and calling the cops or reaching out for help may not be an option either if someone is afraid the recourse may be deportation for them or their perpetrator.

However, I wanted to discuss a topic not so well-known, the messages being sent to the Latinx community about domestic and intimate partner violence. A recent study by Alvarez-Hernandez et al. (2021) analyzed the messages being sent through Spanish-speaking media about domestic violence during this pandemic. As mental health professionals, we recognize the power of words and are very careful with the words we use when speaking with our clients about their concerns. Saying the wrong thing can lead to a client ending counseling and never returning. I want to make sure that if you are trying to help yourself, you know that you have the capacity to do so and you do not have to do it alone. If you are trying to help someone else, I want to make sure that you know what to say and what not to say so that you stay an ally and support system for your loved one.

The study (Alvarez-Hernandez et al., 2021) found Spanish-speaking media to convey about 11 messages to their audience. Some messages are great like services are available. Yes, we want people to know that resources to support individuals in dangerous situations are available and free (see below). However, other messages being sent like leave the situation or it is your responsibility to change your circumstances are extremely harmful. Yes, of course we do not want someone to stay in an abusive relationship and yes, we want people to feel empowered to protect themselves and take action. However, sending these messages when someone is not prepared to leave is more detrimental. Practitioners know the most dangerous time for individuals in abusive relationships is when they decide to leave. Pushing for someone to leave without proper care and consideration may put someone in more danger. We also must not send the message to people in abusive relationships that they are responsible for any of these problems. They are NOT the issue, nor do they have any responsibility to take when it comes to the abuse. Individuals in abusive relationships are surviving the best way they know how, and that surviving is probably taking most of their energy and efforts.

The message I want to send (and teach allies to send) is that abuse of any kind (physical, sexual, emotional/psychological, financial, spiritual) does not have to last forever. Each person deserves love, kindness, and support. Mental health practitioners must be aware of the harmful and inaccurate messages being sent by media and find ways to combat these messages to their clients and the wider public. It is equally important that we practitioners do not send any harmful messages to our clients and add to their angst and painful situations.

REFERENCES ON PAGE 27

Pamela Fullerton, M.A.,
M.Ed., LCPC, CCTP, C-DBT, CCATP, NCC;
Governors State University
PROTECTING SOVEREIGNTY IS PROMOTING WELLNESS

BY: RONI K. WHITE

Here in the 21st Century in the modern era of civilizations on Earth and the negative psychological, physical, and spiritual effects of 15th Century colonization are pervasive around the globe. Indigenous nations around the world have been traumatized by the actions, disregard, and destruction resulting from colonization. This perpetual state of survival, resistance, and fight for sovereignty has lasting psychological and spiritual effects. Currently in 2023 there is evidence of tortured lived experiences from the overt, covert, and seemingly subtle colonized practices. Indigenous nations are suffering and fighting back in places like Nigeria, the United States, Tanzania, and Canada.

How are you broaching the effects of colonization with clients or students?

On January 27, 2023, 11,300 residents from Ogale, Nigeria filed individual claims, along with organizations, and people from Bille, Nigeria totaling 13,650 lawsuits against Shell Oil Company. The reason for these lawsuits is the oil company has destroyed the Niger Delta and refuses to clean it up. Shell has produced statements to avoid accountability. How distressing the thought that a company with $30 Billion in profits from 2022 is insistent on curating excuses to remain blameless and will not spend the estimated $1 Billion to begin cleanup of the Niger Delta. The neglect and threat of the courts ruling in favor of Shell can create a sense of invisibility, powerlessness, and hopelessness. What strategies can you utilize to broach the effects this crisis is having on individuals you serve?

READ MORE:
- https://theintercept.com/2023/02/01/shell-oil-niger-delta-nigeria-lawsuit/
- https://www.theguardian.com/world/2011/oct/03/shell-oil-paid-nigerian-military
- https://www.theeastafrican.co.ke/tea/rest-of-africa/shell-to-pay-euro15m-over-nigeria-oil-spills-4064980
- CEO of Shell video reaction in article: https://www.cnbc.com/2023/02/02/over-13000-nigerians-take-shell-to-court-over-devastating-oil-spills.html

Cherokee Nation’s new plans is a demonstration of sovereignty and justice. The road to finding a pathway to justice through suing the pharmaceutical companies and with the settlement money received paving a way forward creates healing. Cherokee Nation is building a treatment facility for substance abuse that will be no cost to Cherokee citizens. The treatment facility will honor culture and promote connection. In addition to the treatment facility funds will be used to providing financial assistance for Cherokee citizens pursuing mental, behavioral, and medical health degrees.

READ MORE:

“Kasserian Ingera.” “…And how are the children?”, This powerful and insightful Maasai greeting displays the thoughtfulness and care of a community. Sadly, there are devastating occurrences in Tanzania near the Kenyan border negatively affecting the Maasai way of life and sovereignty. There is a concerted effort to force the Maasai off their lands to advance tourism and gaming as well as a claim to meet global conservation goals. Colonialism has lasting effects long after the colonist leave. Samuel Nangiria fighting against the Tanzanian government for the deplorable acts against the Maasai states, “The colonial government initiated it and the independent government inherited and carried it forward." (Lee, J., Feb. 15, 2023, Indian Country Today).

(continued on the next page...)
PROTECTING SOVEREIGNTY...
(CONT.)

The Ngorongoro district of Tanzania contains some of the Maasai’s ancestral land. This forced eviction is creating devastating psychological and spiritual affects let alone the physical toll of harassment and injury. The disruption to their way of life, culture, community, and sense of belonging has been traumatizing.

How can you create healing space for those negatively impacted from these traumatic events?

**READ MORE:**

- [https://www.hrw.org/news/2023/02/02/tanzanias-eviction-maasai-pastoralists-continues](https://www.hrw.org/news/2023/02/02/tanzanias-eviction-maasai-pastoralists-continues)

“A nation is not conquered until the hearts of its women are on the ground. Then it is done, no matter how brave its warriors or strong its weapons.” –Cheyenne proverb (Lavell–Harvard, D.M., and Brant, J.). This very chilling quote, from a book the Women’s Concerns and Native American Concerns groups of AMCD are presenting for a counseling book discussion during the ACA conference in Toronto, captures the immense distress Native communities in the US and Canada are experiencing. The lack of investigation and attention to the horrific injustice creates negative psychological effects for those missing and their relatives. From the time Turtle Island was invaded the colonizers have destroyed communities, devasted lands, oppressed people, massacred nations, and practiced genocide to advance their agendas.

What strategies do you use to address the consequences of colonization that create historical, collective, generational, and personal trauma?

Sovereignty is the experience of self-governance and authority of self. We guide in counseling for individuals to have self-awareness, self-control, and protections of self. The idea of wellness is to care for one’s spiritual, physical, psychological, and emotional being. It is imperative for a healthier human experience to honor sovereignty.

**AMCD Native American Concerns and Womens Concerns groups are:**

**Hosting a counseling book discussion on the trauma and distress of murdered and missing indigenous women:**

Gather with us during ACA conference in Toronto, CA, on Thursday, 3/30/23 for this imperative discourse.

The books are: *Forever Loved: Exposing the hidden Crisis of Missing and Murdered Indigenous Women and Girls in Canada* by D. Memee Lavell-Harvard and Jennifer Brant; and *Decolonizing Trauma Work* by Renee Linklater.

Roni K. White, NCC, LCPC, Co-VP Native American Concerns Group
THE HIGHLIGHTS OF A SOCIAL MEDIA PROFILE OF A BLACK ALLY'S EXPERIENCE IN 2020

BY: FRANCESCA BRUTLEY, SHEEDRA FUTRELL, & TIFFANY BROOKS

In 2020 a protest began in a suburban town where a Confederate statue stands, where a faith-based university has grown around three sides of the statue. The research team conducted an autoethnography about one demonstrator's experience participating in a grassroots movement to move the statue. The research team consists of Dr. Tiffany Brooks, Dr. Quentin Hunter, Dr. Kristy Holloway, Franchesca Brutley, Junwei Jia, Sheedra Futrell, and Veronica Singleton. During this time, we utilized the participant's Facebook as a way for her to record her experiences at the protest. Her Facebook was filled with memes, quotes, art recommendations, and video journals processing her experiences.

In this article, we want to highlight the images that struck our research team while analyzing her social media over that year. The first image outlines the amount of posts that she utilized the hashtag #AntiRacist or #RaisingAntiracists.

Downtown Cleveland, TN is the home of a Confederate statue created by an organization in 1910 based on racism. The statue stands in a roundabout where demonstrators, including Tiffany, witnessed the continued injustices of the black community in 2020. Protestors of having the statue remain stated this was a symbol of heritage and culture. Supporters of having the statue moved were reminded constantly of the history and present oppression, racism, and slavery of African Americans. A petition was created through Change.org, a platform to increase awareness and bring change to current social issues. Tiffany shared the link to the petition on her Facebook in 2020. 3 years later, the statue remains.

On Facebook, Tiffany consistently shares other activists' educational materials as a way to advocate and teach others about antiracism. One of the Black activists she follows owns a tour company in Nashville that teaches folks about black history. One of the pivotal moments she shared during 2020 centered upon white allies making mistakes and how they could respond when called out or in for these mistakes. In 2020, Tiffany tried to prioritize doing more and saying more to those around her, which centered upon antiracist principles. Inevitably, she made mistakes during the process, and she shared about one of those moments in one of her video journals.

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Tiffany often utilized Facebook posts as a way to process her thoughts, emotions and experiences of herself and her reactions to others during this whirlwind of activity. Another moment that stood out to the research team was when Tiffany posted this blog post as she reflected upon her own struggles with racism and privilege. The post expounds on the necessity of ‘open hearts and listening to cries of pain’ as a litmus test for if one is part of the ‘solution’ or the ‘problem’. This post serves as an example of one of the many ways that Tiffany aimed to elicit intriguing thoughts and conversations from her followers on issues of racism, privilege and discrimination during this time of social unrest. The autoethnography highlighted her desire to utilize her social media to help advocate and educate those in her circle. The research team aims to continue this work to have a better understanding of Black allies to help in the development of Black allies.
BODY IMAGE ISSUES IN ASIAN AMERICAN MEN

By: DIPIKA DAGA

Asians are the fastest growing and second largest minority group in the United States, comprising approximately 19.9 million people (U.S. Census Bureau, 2021). This article focuses on Asians from the origins of East, South East, and South Asia living in the United States. Asian American Men (AAM) are clubbed together into a monolith despite the cultural and ethnic differences that exist within the group due to lack of research on specific groups (Lee & Lu, 2011). The West was not widely exposed to the East in the past due to legacies of white hostility, race riots, and anti-Asian sentiment prompted by the discriminatory immigration policies (Lu, 2010). The easiest way to generalize the people from the East due to lack of exposure was to build fictional characters of an extreme (Paner, 2018). This eventually led to a unique marginalization within the hierarchy of hegemonic masculinity amongst AAM in the United States.

Many Asians are plagued with the model minority stereotype that portrays them as paragons of excellence that other minoritized groups are expected to emulate for traits such as intelligence, overachieving, and technologically savvy (Chao et al., 2013). This stereotype divides Asian Americans from other minority groups. Given media portrayals as short, small-penised, hairless body wimps lacking Eurocentric aesthetics, they receive minimal positive body imagery (Lu & Wong, 2013). A study on OKCupid found that AAM were seen as the least attractive and most undesirable racial group (Kleinman, 2017). For example, a romantic comedy film “Love Hard” shows the struggles AAM face in online dating.

Research has shown that AAM have higher body image concerns compared to their Black and White counterparts (Kelly et al., 2015). For some AAM, this pressure results in eating disorders that are consistent with compulsive exercise, unhealthy weight control methods, and unhealthy eating to achieve a Eurocentric muscular body type. However, biologically, AAM have a smaller build and less muscular physique compared to Eurocentric beauty standards, leading to deeply ingrained dissatisfaction with the body and resulting in severe mental health conditions (Cheng et al., 2016). Suicide is reported as the second leading cause of death for Asian Americans between the ages of 15–34, which is also the age group that developmentally has the highest body image concerns and might have some correlation between them (Hijioka, 2012; Papalia & Martorell, 2021).

Counselors can approach AAM who struggle with body image issues by increasing their critical consciousness about internalized racism and challenging societal messages they have received about masculinity through cognitive behavioral techniques (SAMHSA, 2017). Using indigenous modalities like healing circles, storytelling, and art can be beneficial in creating an embodied experience for unlearning internalized messages and reshaping their self-concept (Iwamasa, 2012). Mindfulness based strategies like progressive muscle relaxation to increase self-awareness of triggers associated with body image can be useful in regulating unhelpful emotions and behaviors. Providing psychosocial tools like thought record, body positivity psychoeducation, and journaling strategies can be beneficial in enhancing the mental well-being of AAM (Alleva et al., 2015).

REFERENCES ON PAGE 27 & 28
Discourse capturing the voices and lived experiences of Black women navigating body image dissatisfaction (BID), disordered eating behaviors (DEB), and eating disorders (ED) is limited. Furthermore, research situating the unique experiences of Black women in order to develop evidence-based frameworks for counselors and counselor educators are underdeveloped. Curriculum covering EDs and body image within most counseling programs is minimal, making it impossible for programs to adequately train counselors on the multicultural considerations of BIPOC communities navigating eating disorders, body image concerns, and related disordered eating behaviors. ED are serious, complex, and often fatal illnesses that are associated with concerns in people's eating behaviors and related thoughts and emotions. (NIMH; The Emily Program). According to the National Eating Disorder Association (NEDA), body image can be described as one's personal perception and feelings of their physical appearance, body composition, as well as internalized cultural and societal messages, beliefs, memories, and assumptions individuals associate with their body, and how they exist in their body. Negative body image has the potential to motivate DEB and can serve as a precursor to the development of an ED(s).

A contributor to the Huffington Post wrote an article discussing Disordered Eating’s Deadliest Myth: “The longer we believe only skinny, white, affluent girls suffer from eating disorders, the more we isolate an entire community of not-skinny, not-white, not-rich, not-so-young, decidedly-not-female human beings, who suffer, not only with the soul-sucking burden that is an eating disorder, but with the belief they can't possibly "have" what's killing them” (Licorish, 2014). The truth is EDs affect people of all sexual orientations, genders, ages, body sizes and abilities, races, ethnicities, cultures, religions, and socioeconomic statuses, but BIPOC and LGBTQIA2S+ individuals' experiences with BID and ED are often overlooked.

Historically, ED research captured the voices of white women, partially due to a widely held belief that minoritized racial/ethnic groups are less likely to experience EDs (Lin et al., 2021). The research produced from a homogenous sample of white women influenced the majority of ED assessments, screening tools, and diagnostic criteria (Rodgers et al., 2018). With societal ideals largely based on idealized depictions of white women's physical features as the standard of beauty, scholars have called for body image research that extends beyond body type and weight to better examine the experiences of Black women (Gautier, 2021). A consequence of Black women being left out of research, clinicians have been less likely to assess and detect eating disorders in minority groups regardless of ED symptoms, making this population more vulnerable to living with undiagnosed and untreated disorders (Lin et al., 2021). It is vital for counselors and counselor educators working with Black women to a) adopt a critical holistic wellness lens to examine the varying contextual factors that contribute to the development and onset of BID, DEB, and ED, b) understand the impact of racism, sexism, and oppression in the development and perpetuation of BID, DEB, and ED, and c) suspend personal bias and societal myths about the Black body image.

REFERENCES ON PAGE 28
MOMENTS OF EXCELLENCE IN COUNSELING: LEARNING WHAT WORKS FOR RELATIONSHIP BUILDING AND INCREASED EFFECTIVENESS

A major cornerstone of counseling and psychotherapy is the therapist–client relationship. The therapeutic relationship makes substantial and consistent contributions to counseling and psychotherapy outcome independent of the specific type of treatment. Yet, most research focuses on the effects of specific interventions (empirically supported treatments) and to a lesser degree the factors that contribute to establish an effective working relationship with the client (empirically supported relationships). Thus, developing a system to learn what works to establish a positive relationship with clients and how to tailor the therapy to client’s characteristics, culture, and preferences became our goal.

In early 2020, along with 31 current and former graduate students at Penn State, we attempted to fill this gap in counselor training by developing an immersive and interactive video series called "Moments of Excellence in Counseling" for Mindscape Commons, the world’s first and largest database of virtual reality (VR) and interactive video content for teaching and learning in the field of mental health. We developed the Moments of Excellence team and together we created videos to address evidence-based, relationship-building techniques critical to improving therapeutic outcomes with clients. The team also developed a series called "Vignettes for Skill Building with Clients" to help students with case conceptualization, agenda setting, and treatment options. The goals of this innovative virtual program were (a) to present a diverse group of practitioners and practitioners-in-training demonstrating specific skills; (b) provide empirically supported relationship building skills for improving the therapeutic relationship; (c) offer effective means of adapting the therapeutic relationship to the individual client; and (d) deliver these goals within an interactive format, using immersive technology.

Mindscape Commons was recently honored with two major annual awards: "Innovation in Publishing," given by the Association of Learned and Professional Society Publishers (ALPSP), and "Best Interface" from the Charleston Advisor. The impetus for developing the videos series originated from several factors. While universities have been investing in VR technology for a while, much of the existing technology has centered on gaming. There is a distinct lack of educational content, particularly in mental health education. In addition, a growing body of research confirms that immersive experiences help students develop empathy and practice clinical skills in a safe learning environment.

The Moments of Excellence role-play therapy sessions were filmed in 180-degree immersive video, which gives students the opportunity to master skills in the moment. The videos are short (12–15 minutes) and interactive. Viewers are asked to engage and interact with the immersive video content in order to identify the client’s issue, predict the best pathway forward, and anticipate the client’s response.

The videos are accessible on multiple platforms, on a phone, tablet, or laptop while the immersive experience can be enhanced by using a Google cardboard with cell phone, or an Oculus device. The purpose of this program was to facilitate the teaching of research-supported relationship building skills in counselor education programs. In addition, the video demonstrations were intended to foster a dialogue on culturally sensitive ways to adapt treatments and build rapport with diverse clients.

BY: CARLOS ZALAQUETT, ASHLEY DIAZ, & ELIZABETH ROBEY

Dr. Carlos Zalaquett, The Pennsylvania State University
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THE SILENT EPIDEMIC OF MEN’S MENTAL HEALTH

BY: STEPHANIE JOHNSON

No one knows what people are going through unless we ask them ourselves. Men seem less relevant when it comes to emotions and discussions of feelings and thoughts. According to the American Foundation for Suicide Prevention, men account for 80% of all suicides (AFSP, 2019). Why do we teach boys from a young age to hold it all in and never show weakness? Why is there more funding for women’s mental health than men’s, when statistically men need mental health services more? This harmful line of thinking should be carefully examined and changed.

The old saying, “Boys will be boys,” is often correct. However, excusing warning signs, or writing them off as just being boys, is a dangerous practice. It seems that boys are not afraid to tell us how they feel, with the majority willing to communicate directly with us. The issue is in how society reacts to those feelings. Brushing them off or telling a young boy to “toughen up” frequently will eventually make the child feel like they can no longer express themselves. A child’s emotions not being taken seriously may often lead to an adult with the impression that their feelings and thoughts are invalid, not worth considering, or unimportant. This may cause men to adopt the lifestyle of just “powering through” their problems and never actually taking the time to deal with them.

Many males find themselves facing challenges when it comes to looking after their mental health. It is reported by the National Institute of Mental Health that men are reluctant to seek help for mental health concerns and treatments (Cohut, 2022). Symptoms of depression in males can be physiological, such as a racing heart, digestive issues, or headaches. Males may be more likely to see their doctor about physical symptoms than emotional symptoms (Cohut, 2022). How can we develop a male-centered treatment style? An important issue that affects service delivery for men is help-seeking.

If a man actually comes to recognize a problem and acknowledges the need for help, will he look for it? Often, the answer is no. Although asking for help is difficult for many people, it is well documented that men tend to be reluctant to seek help in various contexts, including help for mental health concerns (Johnson et al., 2012). The first step in addressing mental health issues, researchers say, is expanding general awareness and education around the topic itself (Ladouceur, 2011). We need to disable the masculinities of mental health care and promote diverse and healthy male alternatives.

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Stephanie Johnson, M.Ed., LPCA;
Lindsey Wilson College
I want to first start by sharing that this is an opinion editorial born from my lived experiences and recent engagement into the lives and treatment of others. This year, the Women’s Concern Group has been intentional about collaborating with the Native American Concerns Group to increase awareness of the missing and murder indigenous women in this and other countries. I recently watched Murder in Big Horn, a three part documentary on Showtime about the indigenous girls and women that have gone missing or murder in rural Montana. While watching I was filled with rage, sadness, disappointment, and heartbreakness about not only the tragedy, but the additional pain of nothing being done. The series is gripping and holds up a mirror to what is happening, the lack of support from the Bureau of Indian Affairs and surrounding county law enforcement, and the painful truth of how a people lost their identity and therefore may enact some of these injustices upon each other.

As I sat there engrossed and in disbelief of how little was being done and how little has been taught or shared about the true treatment of indigenous people; especially indigenous women in this country, I couldn’t help but think about how colonialism, white supremacy, and racism has infected and bled through the lives of people of color in this country and how long-lasting the detriment has been. Much of the documentary highlighted different cases and how at first, for years, it was the unspoken experience for indigenous girls and women in Big Horn County. Then, little by little people off the reservation started to pay attention and people were starting to speak up and speak out. However, on the reservation, there was still this cloud of silence and secrecy surrounding the facts of the investigations for some of the victims. So often, too much has gone unspoken.

It was in that moment I thought about the “un” of the lives of the global majority in this country and realized that we as the human race can’t fully move into the acceptance and implementation of diversity, equity, and inclusion until we first accept and address the ‘un’ that has preceded and often precludes movement forward, toward a more ‘in’clusive society.

From a hermeneutic phenomenological perspective, the essence of the lived experiences, in my opinion, of those enduring colonialism, white supremacy, and racism is a fight against eradication through the use of being UNprotected (African American), UNdocumented (Latin/Hispanic), UNseen (AAPI), UNspoken (Native), UNaccepted (LGBTQIA+) and UNaccommodated (People with Disabilities).

There is a commonly used quote (author unknown) that says “When you have been accustomed to privilege, equality feels like oppression.” For us to be welcomed ‘In’ to where we are protected, documented, seen, spoken, accepted, and accommodated for who we are and not who hate, power, and ignorance painted us to be; a serious, UNcomfortable, Unprecedented, and UNencumbered conversation is required by those with political power, with privilege and capital, and those who have benefited from being included in the majority. I want to end this think piece by challenging those reading this article to ponder and imagine how different this world could be if we worked to bring everyone IN to safety, IN to connection, IN to view, IN to be heard, IN to acceptance and INcluded. What work are you ready to begin?
FOSTERING ANTIRACIST CLINICIANS WITH RELATIONAL RESILIENCE

BY: SADE SMITH REID & PATRICE LEOPOLD

Relational resilience is an essential tenet that is derived from relational-cultural therapy (RCT). RCT suggests that individuals and relationships can foster growth through interdependence as opposed to independence (Jordan, 2017). This encourages the collective growth of the supervisor and supervisee. In addition, this suggests that a supervisee, or counselor-in-training, can use a parallel process to foster growth in their relationship and rapport with their client. Moreover, RCT encourages cultural exploration of supervisor-supervisee as an essential component of growth. Such as the characteristics between each person, relational images, and power versus oppressed identities (Duffey et al., 2016). With this understanding, the supervisor and supervisee can further explore their own intersectionality, or “interactions among our privileged and oppressed identities” (Mirkin & Geib, 2013, p. 33; Crenshaw, 1989).

In addition, such awareness is crucial for the supervisor and supervisee for optimum shared understanding during case conceptualization. Likewise, having this awareness can equip supervisors and counselors in training on how to be resilient in the face of relationship ruptures or disconnects.

Furthermore, having effective cultural responsiveness or humility can foster antiracist decisions. Antiracism choices require ongoing self-awareness and self-reflection as we move through life (National Museum of African American History & Culture, n.d.). Therefore, ongoing training on culturally informed care, such as this article, will help mitigate the awareness gap and provide the supervisor and supervisee with the tools necessary to continuously be culturally conscious and operate in cultural humility and foster antiracism. Moreover, it will provide important considerations including creating safe spaces, learning relational resilience, and identifying and readjusting biases that interfere with cultural humility.

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As the counseling profession and our clients become increasingly diverse, it is imperative that our education, knowledge, and skills meet this growth with a culturally sensitive, decolonized lens. Part two of this series concerning the experiences and needs of graduate students from marginalized and oppressed communities in society will briefly address two of the gaps identified by counseling students in the conversation surrounding decolonization, and a few steps that we believe helpful.

Expanding Counselor Education Curriculum

Broadening counselor education curriculum by offering more courses and content addressing social justice advocacy and anti-oppression in counseling is a desire identified by both masters and doctoral counseling students who are members of marginalized communities. Students have expressed the need to expand counseling curriculum beyond the single multicultural counseling course, as this course itself only scratches the surface of issues such as power, privilege, and oppression, issues also noted as essential to address in counselor training in extant literature (Haskins & Singh, 2015). Multicultural counseling courses appear to minimally cover key theoretical considerations related to social justice and intersectionality that are a base for ongoing multicultural competency development, and also lack a focus on specific interventions for social justice advocacy (Pieterse et al., 2009, as cited in Killian & Floren, 2020). Additionally, a single course on social and cultural diversity primarily geared toward multicultural training for White students (Seward, 2014), does not encompass and capture the needs, experiences, and voices of diverse counseling students and marginalized communities.

In looking at counselor education courses, it is imperative to implement a more comprehensive discussion of critical theory, such as critical race theory, DisCrit, intersectionality, theory, queer theory, and feminist theory, into counseling curriculum. This is supported by the CACREP 2016 Standards in Section 2, “Professional Counselor Identity” under “Counseling Curriculum”, where it is stated that it is necessary to incorporate “theories and models of multicultural counseling, cultural identity development, and social justice and advocacy” (CACREP, 2016, p. 10). Sharma and Hipolito-Delgado (2021) propose a counseling course centered on critical theories to be a more timely reflection of the current sociopolitical context, and to also promote critical consciousness and anti-racism in counseling curriculum and practice. Discussion of critical theories may allow for a more comprehensive understanding of how both counseling and non-counseling systems; oppressive structures and institutions; and sociopolitical stressors, laws, and policies (i.e. immigration policies, anti-trans bills, hate crimes, police brutality, gun violence, and global catastrophes) can have detrimental impacts on individuals and communities at the margins in society. In these conversations, encouraging students to outline action steps based on these critical theories to confront the dominant discourse can be a tool of empowerment for clients, students, and communities impacted by these issues.

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Decolonization of Research

Another gap in the expressed desire for anti-oppressive practice and pedagogy in the counseling field shows up in the push to ground education in strictly evidence-based and empirical research. This is not a critique of the importance and validity of evidenced-based practices, but rather a call to examine the incongruence between adherence to only evidenced-based and empirical knowledge and the goal of decolonization. In an exploration of evidence-based recommendations in medicine, Tonelli (1998) writes that “the concept of ‘evidence-based’ is predicated on giving ‘general priority’ to ‘knowledge derived from clinical research’” (Tonelli, 1998, as cited in Goldman & Shih, 2011, p. 26). This theme is present across various health service professions, counseling included. Arredondo et al. (2020) highlight the prevalence of convenience, normative sampling in our field “with many research participants [still] coming from White, Western European, English-speaking and often Christian backgrounds,” emphasizing that centering curricula on solely evidenced-based research is inherently exclusionary. Though strides have been made in representative research, service access, and diversification, the field’s reliance on the written word (Okun, 2021) contributes to upholding tenants of White supremacy. In an update to her groundbreaking work on the characteristics of White supremacy culture, Okun (2021) describes “worship of the written word [as something that] includes erasure of the wide range of ways we communicate with each other and all living things” (p. 17). This phenomenon, in conjunction with a confrontation on who has access to participate and publish empirically supported and evidenced-based findings highlights the need to broaden what can be considered factual, citable, and credible in the field.

Conclusion

The decolonization of counselor education and supervision has been a prominent topic when discussing anti-oppression, multiculturalism, and social justice in the counseling profession; however, there remains a gap in detailing what this might actually look like, and initiatives to engage in this work at times fall short. We hope this brief acknowledgment of the need for expanded, decolonized multicultural curricula and reframing our understanding of credible research provides a moment for reflection and further discussion on how to support the counseling field in lifting and supporting underserved voices and communities.

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BODY IMAGE ISSUES IN ASIAN AMERICAN MEN

ADDITONAL REFERENCES

BODY IMAGE ISSUES IN ASIAN AMERICAN MEN (CONT.)


THE VOICES OF BLACK WOMEN...BODY IMAGE, DISORDERED EATING BEHAVIORS, AND EATING DISORDERS

ADDITIONAL REFERENCES

FOSTERING ANTIRACIST CLINICIANS WITH RELATIONAL RESILIENCE


UNDERSTANDING THE EXPERIENCES OF GRADUATE COUNSELING STUDENTS WITH MARGINALIZED IDENTITIES - PART 2


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