

The challenges to multicultural counseling



The Challenges to Multicultural Counseling Marie E. Capizzi Professional

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Prescott College Abstract Counselors are increasingly called upon to work with diverse client populations whose needs may not be met through traditional counseling models. This paper discusses the importance of infusing multiculturalism into all aspects of the counseling process. It then describes the barriers counselors may face in delivering effective multicultural counseling and it explores the attitudes, knowledge and skills counselors need to develop for competent and ethical practice. The Challenges to Multicultural Counseling The United States is becoming an increasingly diverse country: one in three Americans is a member of a racial or ethnic minority, and approximately 12% of the U. S. population is foreign-born (U. S. Census Bureau, 2010). According to the 2010 U. S.

Census Bureau, population estimates by race include 63% Non-Hispanic Whites, 16. 3% Hispanics, 12. 6% African American, 4. 8% Asians, . 9% American Indian and Alaskan Natives, .

2% Native Hawaiian and Pacific Islanders. In addition, there is a great diversity within these broad racial categories, and distinct ethnic subgroups which have their own common heritage, values, rituals, and traditions (Gerig, 2007). The growing racial and ethnic diversity of the U. S. population is an essential consideration when providing` mental health services. Presently, it will be impossible for a counselor not to encounter client groups who differ from her in terms of race, culture, and ethnicity. In addition, there are documented disparities among racial and ethnic minorities compared to

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whites in seeking treatment, staying in treatment, and receiving good quality treatment (Fouad, 2007).

One explanation for this is that counseling is an ethnocentric activity, based on the values of the white middle classes, an approach that can alienate those from other cultures. Traditional counseling and psychotherapy have tended to pay little attention to cultural differences and this raises questions about the barriers to good treatment for racial and ethnic minorities. If we consider that culture controls our lives and defines reality for each of us, then an effective approach to counseling must recognize culture as central and fundamental. While mental health problems are similar across cultures, the appropriate helping response across cultures requires a unique counseling style. Culture-centered interventions depend on a clinician's cultural awareness and culturally sensitive treatments. Therefore, if counselors and therapists are to provide meaningful help to a culturally diverse population they must not only acquire new understandings, they must develop new culturally effective helping approaches.

Multicultural counseling challenges professionals to learn new competencies they will need to work effectively, respectfully, and ethically in a culturally diverse 21st-century society. What is Multicultural Counseling? Multicultural counseling takes place when a counselor and client are from different cultural groups. The cultural groups include the full range of social identities that influence who we are. Pederson (1991) proposed a definition which includes " ethnographic variables such as ethnicity, nationality, religion, and language; demographic variables such as age, gender, and place of residence; status variables such as social, educational and economic, and

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affiliations including both formal affiliations to family or organizations and informal affiliations to ideas and a lifestyle". Individuals experience life from the perspective of these social identities and those life experiences shape how they relate to others. According to Pederson each person has multiple identities (e. g.

being a Latino, gay man with a disability) and each identity becomes relevant at different times and places. He states that multiculturalism includes a " wide range of groups without grading, comparing or ranking them as better or worse from one another and without denying the very distinct perspectives that each group brings with it" (1991, p. 4). He argues that multiculturalism must emphasize both the way individuals are different from and similar to others. Considering these unique identities and perspectives, multiculturalism becomes generic to all counseling relationships.

Ivey et al. describe multicultural counseling as a " metatheoretical approach that recognizes that all helping methods ultimately exist within a cultural context" (1997, p. 134). They go on to say that multicultural counseling starts with an awareness of differences among and within clients and that it stresses the importance of family and cultural factors affecting the way clients view the world. In addition, they argue that multiculturalism challenges practitioners, theoreticians and researchers to rethink the meaning of counseling, and pay attention to family and cultural concerns. A comprehensive view of multicultural counseling based on a variety of readings for this paper has inspired this author to define it as the creation of

a new world where all people are welcomed, appreciated, and celebrated because of who they are.

It means acknowledging our biases and striving to overcome our limitations. It focuses on raising our awareness of our cultural assumptions about ourselves and the world. Effective multicultural counseling cannot exist if counselors are not all willing to change their minds, their hearts, and their lives. As counseling professionals we must dialogue across differences to build alliances with those who are different from us and we must not be tempted to surround ourselves in sameness. Multiculturalism as the Fourth Force in Counseling Historically, we talk of first-force psychodynamic, second-force cognitive-behavioral, and third-force existential-humanistic counseling and therapy theories. Counseling and psychotherapy really began with Freud and psychoanalysis. James Watson and, later, B. F.

Skinner challenged Freud's emphasis on the unconscious and focused on observable behavior. Carl Rogers, with his person-centered counseling, revolutionized the helping professions by focusing on the importance of nurturing a caring therapist/client relationship in the helping process. All three approaches are still alive and well in the fields of counseling and psychology along with the fourth major theoretical force that has emerged in the mental health profession over the past 40 years: the multicultural counseling worldview. During the 1960s, with the increase in political activism, affirmative action, and articulate special interest groups, the cultural biases of conventional psychology became illuminated. Counselors from minority groups began to recognize that "the practice of counseling ethnically different clients without special training was unethical" (Gerig, <https://assignbuster.com/the-challenges-to-multicultural-counseling/>

2007). Awareness of cultural differences was heightened at the American Psychological Association's Vail Conference in 1973, where it was suggested that to conduct therapy with the culturally different client without the awareness of the role of cultural differences was unethical (Korman, 1973, cited in Essandoh, 1996). In 1991, the American Psychological Association (APA) issued guidelines for providing psychological services to ethnic, linguistic, and culturally diverse populations (Essandoh, 1996).

The Association for Multicultural Counseling and Development (AMCD) also approved a document outlining the "need and rationale for a multicultural perspective in counseling" and the Professional Standards committee proposed 31 multicultural counseling competencies that would eventually become a standard for curriculum reform and training of helping professionals. Thus, there was a new emphasis on cultural diversity in the field of psychology, prompting Pedersen (1991) to suggest that "multiculturalism has gained the status of a general theory, complementing other scientific theories to explain human behavior". The fourth force idea is meaningful only when professional associations throw their weight behind it. The ethical guidelines of the American Counseling Association (ACA) and the American Mental Health Counselors Association (AMHCA) currently "require that their members not engage in any form of discriminatory behavior based on the client's age, skin color, culture, disability, ethnic group, gender, race, religion, sexual orientation, marital status, or socioeconomic status" (Gerig, 2007).

Over the past two decades the counseling profession has underscored the importance of multicultural counseling training, which has become an

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integral part of counselor education (Sue, Arredondo, & McDavis, 1992).

Accreditation bodies such as the Council for the Accreditation of Counseling and Related Educational Programs (CACREP) mandated multiculturalism as part of their graduate school training programs in counseling. Professional associations have taken the proactive stance to foster attitudinal changes on a systemic level as a profession. It is no longer possible for counselors to ignore their own cultural context or the cultural context of their clients. Individual counselors must develop multicultural competencies and apply these theories and concepts in clinical practice.

As this happens on a large scale then multicultural counseling will have the legitimacy that the first three forces had and it will truly be defined as the fourth force in counseling theory and practice. Barriers to Effective Multicultural Counseling Counseling is a process of interpersonal interaction and communication. For effective counseling to occur, the counselor and the client must be able to “ appropriately and accurately send and receive both verbal and nonverbal messages” (Sue & Sue, 1977). Although breakdowns in communication can occur between members of the same culture, the problem becomes exacerbated among people of different racial or ethnic backgrounds. This section focuses on how misunderstandings that arise from cultural variations in communication may be antagonistic to culturally different clients and jeopardize the counseling relationship.

Ethnocentric Monoculturalism (Cultural Encapsulation) The history and experiences of the culturally different have been those of oppression, discrimination, and racism. Racism is a conscious effort to boost ones own self-worth by denigrating a person of differing skin color or different cultural

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practices. Racial discrimination is generally forbidden by laws. On the other hand, Ethnocentric Monoculturalism, as defined by Gerald Wing Sue & David Sue in “ Counseling the Culturally Different”, is an unconscious belief system that can be just as detrimental to people of color, women, and other marginalized groups in society as racism. It defines a reality of values, assumptions, and practices of our society that are structured in such a manner as to give advantages to White Euro American males while disadvantaging others. Although most Americans believe in equality and fairness, the inability to deconstruct this concept allows society to continue unjust actions and arrangements toward minority groups. Ethnocentric Monoculturalism shows up in many ways in our society, one of which is in American psychology where the traditional policies and practices of the mental health delivery system reflect the predominant White middle-class culture. Gerig refers to this tendency of counselors to adhere to a notion of unyielding universal psychology that is applicable across all populations regardless of cultural background as “ cultural encapsulation” (2007, p. 167). According to Sue and Sue “ the theories of counseling and psychotherapy , the standards used to judge normal and abnormal behaviors and the actual practice of mental health practice are culture-bound and reflect a monocultural perspective of the helping professions” (1999, p. 32). Consequently they are culturally inappropriate and antagonistic to the lifestyles and values of minority groups in our society (Sue & Sue, 1999). Five aspects of this unconscious belief system can be particularly damaging to ethnic minorities. The first is a strong conscious and unconscious belief in

the superiority of one groups cultural heritage (history, values, language, traditions, arts/crafts, etc.) .

In our society the White Euro-American culture is seen as desirable and people possessing these cultural characteristics are allowed easier access to the privileges and rewards of the larger society (Sue & Sue, 1999). Hand in hand with this aspect of Ethnocentric Monoculturalism is the second belief in the inferiority of all other groups cultural heritage that extends to their customs, values, traditions and language (Sue & Sue, 1999). Culturally different individuals may be seen as “ less intelligent, uncivilized, primitive, and even pathological” (Sue & Sue, 1999). Third, the dominant group possesses the power to oppress the less powerful group by imposing their standards and beliefs upon them (Sue & Sue, 1999).

Fourth, the ethnocentric values and beliefs are manifested in the institutions of the society, such as the educational and management systems in which culturally different individuals have unequal goals, unequal status, and unequal access to goods and services (Sue & Sue, 1999). Fifth, there is an invisible veil that operates outside the level of conscious awareness. in which the majority assumes that their reality and truth are shared by everyone regardless of race, culture, ethnicity or gender. In other words, well-intentioned individuals who experience themselves as moral, decent, and fair-minded are actually perpetrating a belief system and actions that may be biased and prejudice. In this way misinformation related to culturally different groups is not acquired by free choice, but rather developed through a painful process of social conditioning in which all of us are taught to hate and fear others who are different in some way (Sue & Sue, 1999). Its not

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hard to see how these unconscious belief systems result in two divided groups of people who do not understand each other at all. The overall result is that minorities increase their vigilance and sensitivity to the thoughts and behaviors of White society, who are perceived as potential enemies until proven otherwise. Multicultural counseling may mirror these sentiments.

Minority clients may be suspicious, mistrustful and guarded in their interactions with White therapists and White therapists may have their own racist attitudes, beliefs, myths, and stereotypes about the minority clients they serve. The establishment of a working counseling relationship may be seriously delayed and/or prevented from occurring. Misapplication of Traditional Theories and Techniques As mentioned above counseling and psychotherapy are influenced by the social-cultural framework from which they arise. Individualism View of Normalcy and Pathology Functional Agnosicism Personal Happiness as a Goal of Counseling Insight and Process of Change Systemic Barriers within the Counseling Delivery System Language Barriers Mistrust The Culturally Competent Counselor References Essandoh, P. K. (1996).

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