

Counseling Psychology Model Training Program Ψ

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Abstract

The counseling psychology Model Training Program (MTP) was written to reflect new developments in counseling psychology, the American Psychological Association, and the world. The updated MTP is aspirational, intended to guide the development and maintenance of counseling psychology programs. The MTP conforms to the American Psychological Association's and the Society of Counseling Psychology's standards and guidelines. A strategic task group appointed by 2015 Society president James W. Lichtenberg sought feedback from the field to assist in its formulation, and the executive boards of the Society and the Council of Counseling Psychology Training Programs approved the final version. The 2017 MTP consists of four core values (i.e., growth toward full potential, holistic and contextual, diversity and social justice, communitarian perspective) as well as 20 principles grouped into six clusters: counseling psychology identity; multiculturalism, diversity, and social justice; health service psychology; developmental, prevention, and strengths orientation; science–practice integration; and relationships within and between professional communities.

Keywords

values, identity, training, counseling psychology training

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The Model Training Program (MTP) in counseling psychology is intended to provide future and current counseling psychologists with a frame of reference for clarifying the ways in which counseling psychologists are different from psychologists trained in other specialties, and the ways in which counseling psychologists are similar to psychologists trained in other specialties. This document will help readers understand what it means to be a counseling psychologist. This meaning is rooted in our shared values and identity, and is manifest across our education, training, curriculum, and daily practice as professional psychologists.

The MTP is not a mandatory standard, nor does it carry any mechanism for enforcement. Rather, it is framed as a set of principles that suggest aspirational or exemplary facets of a counseling psychology doctoral program. The principles are meant to facilitate the systematic maintenance and development of counseling psychology programs, while allowing for flexibility in implementation to reflect a variety of program dimensions. The MTP is thus descriptive, not prescriptive.

The document first provides statements of background, need, values, compatibility, and development that form the foundation for the principles developed for the MTP. Next, the 20 specific principles, grouped in six clusters, are presented with further elaboration of each.

Background

Two previous versions of the MTP have been written. Murdock, Alcorn, Heesacker, and Stoltenberg (1998) formed the first MTP writing group, jointly appointed by the Council of Counseling Psychology Training Programs (CCPTP) and Division 17. Its purpose was to serve as a model or normative standard for counseling psychology. Murdock et al. wrote the MTP in response to the American Psychological Association Commission on Accreditation's (CoA) revision of its Guidelines and Principles (G&P) of Accreditation, in which programs were allowed to designate a training model on which to be evaluated. At the same time, the Commission for the Recognition of Specialties in Professional Psychology asked for clarification concerning the shared definition of counseling psychology. Concern also existed within the CCPTP and Division 17 that the G&P did not provide opportunities for counseling psychology programs to include training specific to the specialty. Thus, the MTP in 1998 was intended to serve as a guide to counseling psychology programs in specifying the common training components of our field so that CoA site visitors would have criteria to judge our programs. Additionally, Murdock et al. (1998) asserted that counseling psychology programs should have the freedom to go beyond the MTP to add individual program specialties and embellishments.

The second MTP writing group of Epperson, Fouad, Stoltenberg, and Murdock (2005) was also jointly appointed by the CCPTP and the Society. It was written in response to the creation of three new sets of guidelines: the “Guidelines on Multicultural Education, Training, Research, Practice, and Organizational Change for Psychologists” (APA, 2003); the “Guidelines for Psychological Practice with Lesbian, Gay, and Bisexual Clients” (APA, 2012b); and the “Guidelines for Psychological Practice with Older Adults” (APA, 2014). The structure of the CoA G&P was used to organize the 2005 MTP. The G&P consisted of Domain A (eligibility), Domain B (program philosophy, objectives, and curriculum plan), Domain C (program resources), Domain D (cultural and individual differences and diversity), Domain E (student-faculty relations), Domain F (program self-assessment and quality enhancement), Domain G (public disclosure) and Domain H (relationship with accrediting body).

The third writing of the MTP occurs 12 years after its latest predecessor. Many important developments have affected training in our specialty, prompting the need for the current revision.

Need for the MTP

The need for a new MTP is driven by several powerful currents in the river of change, to which counseling psychology, professional psychology, national policies and legislation, as well as global trends, are all tributaries. Much has happened since 2005 when the prior MTP was created.

Globally, we are increasingly interconnected, both through our economies and via our web-based, social-media embedded, and technologically advancing societies. At the same time, persistent and resistant problems of intergroup violence, poverty and inequality, and environmental degradation and depletion, remain. Counseling psychologists are called to contribute to understanding the issues and solving the problems. In both science and practice, global forces impact us. The critique of Western-based psychological research demands that we attend to training our students in emic as well as etic approaches. Practicing internationally is hampered by credentialing complexities which few have the resources to navigate.

On the domestic front, new federal policies affecting health care continue to fluctuate, although integrated health care initiatives and the need for mental health assistance for veterans and military families are prominent. Psychologists are now considered to be health service providers, and are engaged in ongoing efforts to work collaboratively with those in other health care professions. Accountability concerns in health care, including in professional psychology, have manifested in the competency movement, which has resulted in significant changes to how training is conceptualized, moving from a curricular focus

to an emphasis on behavioral outcomes. The competency movement has altered the ways in which programs formulate their goals and evaluate their students. In tandem with the competency movement, the APA CoA has phased out the old G&P, replacing them with the new “Standards of Accreditation for Health Service Psychology” (APA CoA, 2015).

Within our own specialty, counseling psychology’s emphasis on diversity and social justice has emerged with a level of clarity and vigor unsurpassed in its history, providing rich opportunities to address many of the issues of national and global concern previously noted. Another stream of influence is the growth in PsyD programs in counseling psychology, with several new programs developing and being accredited. Of further consequence, counseling psychology programs continue to navigate their unique history of largely being situated in colleges of education.

The current MTP is intended to serve as a strong yet flexible vessel, which can carry counseling psychology forward, be the waters calm or turbulent. We will continue to set sail buoyed by our values, maintaining an even keel through our joint efforts and collective wisdom.

Counseling Psychology Values

Counseling psychology has deeply rooted and long-standing values that underlie our training. Counseling psychologists attend to professional competencies as articulated by the Health Service Psychology Education Collaborative’s, “Professional Psychology in Health Care Services: A Blueprint for Education and Training” (2013), the Standards (APA CoA, 2015), and the APA “Competency Benchmarks: A Model for Understanding and Measuring Competence in Professional Psychology Across Training Levels,” as do our colleagues in clinical psychology and in school psychology (Fouad et al., 2009). Values give meaning and direction to our work; it is in how we implement those competencies, as well as the lens through which we view our work, that we most clearly manifest our values and identity. Four interlocking core values are described next.

Growth Towards Full Potential

From the earliest statements of counseling psychology definition, we have valued the humanistic ideal of self-actualization; we believe in peoples’ abilities for growth and the realization of their potential. In 1956, in an attempt to define counseling psychology, it was noted that “The counseling psychologist wants to help individuals toward overcoming obstacles to their personal growth, wherever these may be encountered, and toward achieving optimal

development of their personal resources” (APA, 1956, p. 283). Sixty years later, these words still ring true and underscore the optimism embraced by counseling psychology. In fact, our vision of actualized potential has expanded to embrace possibilities for positive change in our communities, organizations, and social structures, and we recognize that counseling psychologists can have a role in that growth as well as in the prevention of distress. In addition, counseling psychologists acknowledge that contextual factors often systematically deny persons of marginalized identities the opportunity to grow to their full potential, and we strive to remove such barriers. Counseling psychologists recognize that all growth occurs nested in multiple systems. This leads to our second core value, being holistic and contextual.

Holistic and Contextual

Counseling psychologists value a broad perspective in understanding people. From our early days in vocational work, we have long recognized that context matters. We speak of it as “person by environment interaction,” by referencing the importance of connecting clients to concrete resources, by “. . . being willing to follow the client out of the office into work with other persons and groups with whom the client has to deal” (APA, 1956, p. 284), and by recognizing structural aspects of power, privilege, and oppression that routinely influence our development. As Cooper (2009) eloquently stated, “Human beings, as human, supersede the sum of their parts. They cannot be reduced to components” (p. 120). The contextual perspective is intimately interwoven into our third core value, diversity and social justice.

Diversity and Social Justice

As the “Counseling Psychology Model Training Values Statement Addressing Diversity” (CCPTP, Association of Counseling Center Training Agencies, & Society of Counseling Psychology, 2009) unequivocally states, “Respect for diversity and for values different from one’s own is a central value of counseling psychology training programs” (p. 641). We encourage our training programs to promote respect for diversity and inclusiveness in all that we do. We are encouraged to promote training environments representing safety, trust, and respect to all members of the training community. Furthermore, trainers and trainees should acknowledge the presence of bias and prejudice in themselves as well as society, and work to guard against its oppressive effects through self-examination and critical thinking about personal values and beliefs. Assumptions should be evaluated on the basis of scientific data, standards of professional practice, and the promotion of mutual respect and

cooperation. Goals of training programs should include inclusiveness and respect for intersecting identities. Programs are directed to advocate and work for social justice to prevent societal oppression. Embracing diversity and social justice can only happen when we work together with sensitivity and openness. These qualities comprise our fourth core value: a communitarian perspective.

Communitarian Perspective

Communitarianism in professional training means instilling, promoting, and modeling a process of “collegial engagement, caring, and compassion . . . essential for the well-functioning of any community of professionals” (Johnson et al., 2014, p. 212). Johnson et al. noted that competence is not static, but “embedded in the interpersonal fabric of one’s professional life” (p. 212). Communitarian values are demonstrated by staying interconnected with others in order to honestly model work–life balance, provide checks on our own often inaccurate self-appraisals, and to further our professional development. Communitarian training environments require collegiality, vulnerability, humility, and transparency. Communitarianism complements notions of individual responsibility by acknowledging that collective support and mutual, reciprocal accountability, matter.

Compatibility

The principles of the MTP in counseling psychology are built upon, and are fully compatible with, (a) the vision and recommendations of the Blueprint (Health Service Psychology Education Collaborative, 2013), (b) the Standards (APA CoA, 2015), (c) the Society’s and the Council for Counseling Psychology Training Programs’ Counseling Psychology Competencies (Covey et al., 2013), (d) APA’s Competency Benchmarks (Fouad et al., 2009), and (e) the counseling psychology “Petition for the Recognition of a Specialty in Professional Psychology” (Lichtenberg, Resnick, & Minami, 2012).

Development of the Model Training Program

The issues noted in the Background and Need sections of this document prompted James Lichtenberg, President of the Society from August 2015 to August 2016, to create a special task group (STG) charged with drafting a new MTP. These efforts began early in the winter of 2016 with the appointment of a five-person STG. The STG members who authored this document represent different types of programs (PhD, PsyD), different program training models

(scientist–practitioner, practitioner–scholar, practitioner–scientist), and different stages of professional career development (early career professional, mid-career, later career).

In preparation for writing the current document, several sources were used to assist in capturing the current zeitgeist of our field. Among the documents utilized and cited are the most recent petition from counseling psychology to the Council on the Recognition of Specialties and Proficiencies in Professional Psychology (Lichtenberg et al., 2012), the Competency Benchmarks (Fouad et al., 2009), the 1988 and 2005 counseling psychology MTPs (Epperson et al., 2005; Murdock et al. 1988), the “Counseling Psychology Core Competencies, Essential Components, Behavioral Anchors, and Examples” (Covey et al., 2013), the “Counseling Psychology Model Training Values Addressing Diversity” (CCPTP, Association of Counseling Center Training Agencies, Society of Counseling Psychology, 2009), the Standards (APA CoA, 2015), the APA “Best Practice Guidelines on Prevention Practice, Research, and Social Advocacy for Psychologists” (Hage et al., 2007), the “Guidelines for Psychological Practice with Lesbian, Gay, and Bisexual Clients” (APA, 2012b), and the “Competencies in Professional Counseling and Related Human Services” (Scheel, Lichtenberg, Fouad, & Jackson, 2011). A number of additional background articles and APA guidelines were also consulted.

The STG met via several conference calls as well as a face-to-face meeting over the July 4th weekend in 2016 in Dallas, Texas. The STG members presented their initial ideas to interested constituencies during a 2-hr open meeting at APA in August 2016. Following input gained through the meeting, the MTP was revised, then reviewed by both the Society (January 2017) and the CCPTP (March 2017) at their midwinter meetings, revised again, and sent out for public comment to all of the Society and CCPTP members in July 2017. After incorporation of relevant additional material, the final document was vetted by both organizations during their business meetings at APA in August 2017.

MTP Principles

What follows are 20 MTP principles organized into six clusters. Principles of Cluster 1 describe training that fosters a counseling psychology identity as holistic, anchored in science, concerned with the common factors across all forms of therapy, vocationally oriented, and developed through self-reflective processes that foster awareness. Multiculturalism, diversity, and social justice are organized as cohesive and interrelated components of Cluster 2, and their spirit is suffused in all other principles. Ethical, legal, and professional standards, psychological

assessment, and supervision and consultation are found in Cluster 3, identifying components of counseling psychology training that correspond to the health service psychology framework. Developmental and preventive interventions and an emphasis on human strengths are elements of counseling psychology training in Cluster 4. These principles highlight counseling psychology's broad perspective beyond remedial services to clients. Scientific mindedness, research self-efficacy, and the reciprocal nature of practice and research are emphasized in Cluster 5 as elements of science–practice integration training. Lastly, Cluster 6 is concerned with relationships across professional communities and covers counseling psychology's role in master's level counseling training, leadership development, and collaborative and transdisciplinary partnerships.

These principles are envisioned as a broad framework that programs may use flexibly. There are many additional important specific topics and curriculum choices that every program will need to make, and the principles are not intended to be either all-inclusive or limiting.

Characteristics of a Model Counseling Psychology Doctoral Program

Cluster 1: Counseling Psychology Identity

1. Fosters a strong counseling psychology identity among its students and the program that encompasses core counseling psychology values and a scientific mindset. Counseling psychology training programs assist students in developing a counseling psychology identity. Such an identity is influenced by training and education oriented to (a) work-role preparation; (b) values supporting diversity and social justice; (c) five unifying themes of the counseling psychology specialty; (d) a strength orientation promoting health, well-being, and flourishing; and (d) a scientific mindset in which students are encouraged to integrate science with practice.

Work-role preparation in counseling psychology programs involves students in performing remedial, preventive, and educative-developmental activities. Training experiences in these three areas allow students to work as generalists across the entire spectrum of applied psychology practice in work settings that include university counseling centers, independent practice, community mental health centers, and hospitals.

Values supporting diversity and social justice advocacy are encouraged in counseling psychology training programs. Inclusion, appreciation and celebration of diversity, and willingness to advocate for those less privileged, disempowered, and marginalized importantly define what it means to be a counseling psychologist. Counseling psychologists recognize the importance of social

justice work with individual clients, and they advocate for systems-level social change. Social justice advocacy work is a common dimension of counseling psychology practicum experiences. Training materials in handbooks and on websites of counseling psychology programs often include “Counseling Psychology Model Training Values Addressing Diversity” (CCPTP et al., 2009).

Gelso, Nutt Williams, and Fretz (2014b) described five themes of counseling psychology. These are: (a) the incorporation of human strengths and optimal functioning; (b) a focus on the whole person that includes lifespan development and vocational growth; (c) a contextually derived commitment to advocacy and social justice; (d) the use of brief, educational, and preventive counseling interventions; and (e) dedication to the scientific foundations of practice.

An orientation toward human strengths and assets is woven throughout all counseling psychology training activities. Research training encourages scientific inquiries of strength-oriented constructs such as well-being, healthy lifestyles and methods of coping, and the improvement of life conditions and experiences of individuals and groups. Practice training prioritizes a psychological metaphor for human change (in contrast to a physical science metaphor) involving development of meaningful life experiences; supportive, caring relationships; beliefs in efficacy and agency; formation of approach goals (in contrast to avoidance goals); and balanced attention to the full range of affective experience (Scheel & Conoley, 2015). Counseling psychology students are encouraged to use and promote contextually driven psychological change efforts in integrated healthcare settings.

Counseling psychology students are encouraged to adopt a scientific mindset as central to being a counseling psychologist. Programs rely on graduate training in scientific methods as the most effective means of instilling such a mindset. Without an emphasis on research and its resulting production of knowledge, our specialty would risk diminishment of its professional status. Gelso and Lent (2000) suggested that students may gain experiences as scientists at each of three levels. At level one, students gain the ability to review and make use of research findings. At level two, scientific findings guide students’ professional practice. At level three, counseling psychology students actually conduct research and produce new knowledge to inform practice and policy. A goal of counseling psychology programs is to increase the efficacy, interest, and value that students place on scientific endeavors.

2. Prepares our students as generalists in the practice of psychology; emphasizes theoretically and empirically informed methods that flexibly fit with individual client contexts and benefit clients through the healing power of the common/nonspecific factors of therapy. Students in counseling psychology

are not directed to adopt a specific theoretical orientation for use in conducting therapy. Instead, they are encouraged to form an integrated theoretical model that fits best for the student, corresponds to evidence-supported therapy methods, and allows students the flexibility to work in a variety of clinical settings and with many different types of clients. Their training prepares them to work with clients identified with a variety of problems and representing developmental stages across the lifespan. Students learn that common factors (e.g., the working alliance, therapist use of empathy, goal consensus and collaboration), present in all forms of effective therapy, are essential to positive therapeutic outcomes (Wampold, 2001). Counseling psychology students gain competence in making therapeutic adjustments to treatment approaches to realize contextual fit with their clients in contrast to using a prescriptive method of matching a specific treatment to a diagnosis or problem label. Client culture is a primary consideration, and students learn that collaborating with clients in forming treatment plans is preferable over a hierarchical relationship in which therapists are in charge and dictate treatment directions to clients.

Counseling psychology students are also trained to conduct therapy based on client feedback, using systems to gather client perspectives about how treatment is progressing such as the Partners for Change Outcome Management System (Miller, Duncan, & Hubble, 2005) and the Outcome Questionnaire Psychotherapy Quality Management System (Lambert & Vermeersch, 2008). Such approaches fit well within a contextual model of psychotherapy in which treatment is adjusted to fit the client's context (Scheel & Conoley, 2012).

Therapeutic practices are prioritized in counseling psychology programs to foster healing contexts in which clients are offered new learning in the form of culturally fitting and appropriate interventions. Students strive to implement a contextual model of therapy that relies on the interaction between therapist and client resulting in the subjective construction of meaning about how therapeutic change will occur. Therapy training in counseling psychology emphasizes the importance of forming a strong therapeutic relationship comprised of the working alliance (Bordin, 1979) and the real relationship (Gelso & Carter, 1994). The real relationship involves genuineness and realism (Gelso, 2002). The alliance involves the therapist and client achieving agreement on goals and tasks, and forming an emotional bond.

Finally, counseling psychology students diligently attend to client factors that influence therapy progress such as client readiness for change, client hope and involvement, and client expectations and preferences (Scheel & Conoley, 2012). By integrating client factors into treatment, attention is given to promoting client commitment and motivation for the treatment approach that is used.

3. Educates our students to contribute to the research and practice of vocational psychology by understanding, investigating, and addressing work-related issues that impact the lives of individuals in a changing global economy. Counseling psychology students understand that work is inextricably linked to psychological health. Training and education include an examination of the critical roles of work and career development in helping people to gain healthy, happy, satisfying, and meaningful lives. An appreciation of vocational psychology is fostered within counseling psychology training. Students gain a broad and deep understanding of multiple perspectives concerning career development, career choice, and the role of work in individual lives. Perspectives toward work and career are represented through a number of theories developed by counseling psychologists. These include but are not limited to Super's (1990) developmental life-span life-space approach; Holland's (1997) theory of vocational personality and the RIASEC (realistic, investigative, artistic, social, enterprising, and conventional) configuration of occupations; Dawis and Lofquist's (1984) theory of work adjustment that informs students about the process of career counseling; Gottfredson's (2005) theory of circumscription and compromise that considers the roles of gender, prestige, and interest in career choice; Krumboltz's (1979) social learning theory of career decision-making; Lent, Brown, and Hackett's (1994) social cognitive career theory emphasizing the interaction of individuals with their environmental and social contexts; and perspectives on the relational nature of work (Blustein, Schultheiss, & Flum, 2004) that highlight the "meaning and mattering" of work in individuals' lives (Schultheiss, 2007, p. 191).

In parallel with vocational theory development, a number of assessment tools have been created by counseling psychologists to assist in working with clients who have career concerns and may need guidance in identity development and goal formation. Career assessments provide a means to work with the whole person in counseling and psychotherapy. Counseling psychology students typically gain knowledge, competence, and skill in the use of a variety of vocational assessments alone or in combination with other psychological assessments.

Training and education in counseling psychology includes the examination of the critical roles of work and career development in peoples' lives. Students learn that career and work are indicators of social justice. Counseling psychology programs teach students that the practice of vocational psychology includes helping individuals who are marginalized and disadvantaged due to gender, race, and class to live healthy and productive lives (Walsh & Savickas, 2005). Juntunen and Even (2012) explained that a task of vocational psychology is to emphasize the central role of work and career in healthy human functioning. If this is a task for vocational

psychology, it also is one for counseling psychology. Vocational psychology is an integral identifying component of counseling psychology. Students learn that vocational psychologists are counseling psychologists. Thus, counseling psychology training emphasizes the role of vocational psychology in both assisting the disadvantaged and as a means of facilitating social justice efforts.

4. Encourages students to conceptualize self and others holistically, as situated in multiple relational, sociocultural, and structural contexts interacting with intrapersonal experiences. Counseling psychology has long been aware of the person–environment interaction (APA, 1956). Over time, this simple statement has been articulated and expanded in substantially more depth. Persons are recognized as holistic entities who cannot be reduced to the sum of their parts (Cooper, 2009). Reductionist thinking is discouraged in counseling psychology, in how both psychotherapy and research are approached (Shean, 2015; Zeldow, 2009). Environments are now understood to encompass multiple, dynamic interacting components, whether conceptualized through the lens of systems theory (Capra, 1997; Gelo & Salvatore, 2016), social-ecological theory (Bronfenbrenner, 1979), or other relevant models. The indivisible interaction between individuals and their contexts—interpersonal, social, economic, political, educational, legal, medical, national, global—has been acknowledged and elaborated from a variety of perspectives. These perspectives include biopsychosocial models (Suls & Rothman, 2004), feminist perspectives (Cho, Crenshaw, & McCall, 2013), multicultural theories (Leong, 2014), critical/liberation psychologies (Prilleltensky, 2008; Watkins & Shulman, 2008), and more if we access models from other disciplines. Counseling psychology training keeps pace with the ever-expanding knowledge in the foundational sciences of psychology, allowing us to consider how intricate biological, cognitive, and affective processes impact each other and how such processes both influence and are influenced by our social world.

MTPs may assist students in understanding this complexity in self and others by encouraging self-reflection on personal development in coursework, research, and clinical domains. Communication regarding the counseling psychology value of a holistic approach can be modeled throughout training, from seminar classes on professional issues to feedback about case conceptualization in practicum supervision. Many programs use comprehensive and qualifying exams for doctoral candidacy as an opportunity for students to demonstrate how they synthesize theory, practice, and research in a holistic manner. Integrative theoretical perspectives can be brought to bear across the curriculum, with clear application to many domains such as ethics,

psychotherapy, or in the production of sophisticated research designs. The “Standards” (APA CoA, 2015), which now mandate integrative knowledge, are likely to propel further movement in this direction.

5. Encourages ongoing self-reflection to assist students in attaining self-awareness and impact of self on others. Reflective practice has become a key competency in the training of health service psychologists in general (Health Service Psychology Education Collaborative, 2013) and of counseling psychologists in particular (Covey et al., 2013). The ability to accurately assess one’s strengths and areas for growth, as well as to be open to feedback and change regarding those areas, is considered a critical component in counseling psychology training. Gaining awareness of how we may be actually influencing others—past our good intentions and personal need to see ourselves in a positive light—is valued.

Within counseling psychology training programs, engaging in sometimes difficult dialogues regarding how we see others and how they see us are encouraged, whether students engage in those dialogues with each other, between themselves and faculty members, as therapists-in-training with their clients, or in supervisory contexts on-site at practica and internship. Guidelines for such dialogues have been articulated (e.g., Jacobs et al., 2011; Sue, Lin, Torino, Capodilupo, & Rivera, 2009). Program faculty encourage students and each other to consider what we communicate to the general public about our profession, and the influence that our personal demeanor, social networking, public behavior, and language conveys when we have contact with entities external to our programs (broader university, community, media, friends, and family).

In coursework, students may be encouraged to write reflection papers that tie their personal history, attitudes, or experiences to course content. Assignments that directly engage self-examination are potentially useful. Some illustrations might be cultural self-portraits, writing about perceptions of strengths and weaknesses, and experiential exercises that surface aspects of identity that may not be well-articulated (e.g., regarding social class, see APA, 2017). In the research domain, students may be asked to examine their motivations and biases for certain topics (“research is me-search”). Borrowing from the tradition of qualitative methods, students may be asked to specifically articulate bias, expectations, and hopes about the outcomes of their studies prior to designing, conducting, executing, and analyzing them (Patton, 2015). These more personal components of research work can then be revisited in writing Discussion sections (e.g., limitations). Such reflexive research writing can be used in quantitative, qualitative, or mixed-methods work. In training for practice, self-reflection is often enhanced through individual and

group supervisory experiences, including self-reflection in case conceptualization. See McGillivray, Gurtman, Boganin, and Sheen (2015) for a review of the effectiveness of self-reflection in psychotherapy training.

Cluster 2: Multiculturalism, Diversity, and Social Justice

Commitment to *multiculturalism*, defined as respecting diverse cultures and cultural identities; to diversity; and to social justice; are central values of counseling psychology (Bieschke & Mintz, 2012; Gelso et al., 2014b). Attention to diversity is emphasized by the APA's (2010) "Ethical Principles of Psychologists and Code of Conduct," and is a required area of profession-wide competencies identified by the Standards (APA CoA, 2015). These Standards recognize "a broad definition of cultural and individual differences and diversity that includes, but is not limited to, age, disability, ethnicity, gender, gender identity, language, national origin, race, religion, culture, sexual orientation, and socioeconomic status" (APA CoA, 2015, p. 3), and respects individual and cultural diversity due to each or any intersectionality of these dimensions. To ensure that our students become multiculturally competent and social justice oriented counseling psychologists, culture- and diversity-informed training is infused into all aspects of a counseling psychology program.

6. Educates students to become effective practitioners with diverse clients, promoting healing and growth across social and cultural contexts. As a health service providing profession, counseling psychology trains students to become effective practitioners to promote healing and growth of culturally diverse communities, groups, and individuals. Model training programs recognize the necessity of this training to ensure the future professional success of our students and the sustainability of our profession. To cultivate commitment to this area of training, programs offer educational experiences to help students understand that (a) our existing counseling psychological theories and methods have not adequately addressed the issues of privilege and oppression rooted in the social and cultural contexts in which our culturally diverse clients and consumers reside; (b) such theories and methods have contributed to ethnic and racial disparities in diagnostic patterns (e.g., Blow et al., 2004), access to services (U.S. Department of Health and Human Services, 1999), and quality of service (e.g., Safran et al., 2009); (c) our existing system of care is built on a mono-cultural and ethnocentric base, which impacts how psychological health is defined and evaluated, as well as what behaviors are promoted and how interventions are delivered; and (d) counseling psychology itself is a Western cultural phenomenon that has not responded

well to the needs created by trends in immigration and globalization. Training programs ask students to challenge the current tendency of pathologizing cultural differences and to overcome the persistent neglect of various cultures and cultural groups in counseling practice.

The counseling psychology literature presents various models of multicultural training from which a training program can choose (see Sue & Sue, 2012). Most models emphasize competencies of awareness of one's own assumptions, values, and biases; understanding of worldviews of culturally diverse clients; and using appropriate intervention strategies and techniques. More recent theories also emphasize a multicultural and social justice orientation in addressing issues of oppression and privilege via counselors' own multicultural identity development (e.g., Duan & Brown, 2015). Being aware of one's own privileges and contributions to the cultural contexts of others is a condition for understanding culturally diverse people who have suffered from explicit and implicit social and cultural marginalization, as well as respecting cultural norms and worldviews that are different from those of the mainstream culture.

Designating training time in this area is key. Having a multicultural counseling course or a multicultural retreat as well as integrating a diversity focus into every training activity is important. For example, students may learn about their own cultural biases and reflect on experiences associated with their own cultural identities through concentrated course work and then be challenged to integrate their learning in conceptualizing, treating, and evaluating clients in practicum, recognizing that every client's psychological experience is rooted in their respective social contexts.

7. Educates students to become competent in conducting culturally and methodologically valid research that contributes to multicultural and clinical applications and theory development. Counseling psychology as a scientific discipline has distinctively and increasingly demonstrated a disposition for using research to advocate for "changes in social structures, availability of resources, and accessibility of opportunities for all people" (Gelso et al., 2014a, p. 129). In their research pedagogy, MTPs would, first and foremost, focus on the social and cultural responsibility of the researcher as well as the social and cultural relevance of the research. As noted by Caplan and Nelson (1973), psychological research that ignores the issues of social utility and cultural implications can produce findings that may increase social oppression. For example, focusing exclusively on the relationship between personal characteristics (vs. contextual variables) and their relationship to psychopathology in marginalized populations has resulted in "blaming the victim" even if statistical and methodological validity was present.

To prevent potential harm, research training emphasizes and provides ongoing cultivation of cultural awareness, social responsibility, and ethical obligation among students. Kohn-Wood, Nagata, Kim, and Macquoid (2017) encouraged a research focus on “promoting empowerment, accessibility, and/or knowledge for populations whose mental health needs have gone largely unmet by standard research and practice in the field” (p. 239), and the authors offered guidance for such research efforts. Students need to learn that research that exclusively focuses on the mainstream, privileged European-American culture may do harm, by omission or wrong assumption, to nondominant cultural individuals and groups. For instance, using self-esteem, independence, or happiness as indicators of mental health may negate the strengths of those who are more collectivistic in interpersonal relations.

Specifically, in teaching research methods, social relevance and the cultural validity of research should be emphasized as well as statistical or technical validity. The focus on diversity and social justice should be infused in every aspect of an empirical investigation including topic selection, research design, defining variables, referencing existing theories, operationalizing constructs, data collection and analysis, and reaching conclusions. Counseling psychology training programs intentionally teach students how to conceptualize, operationalize, and integrate multiculturalism and social justice into their research, as well as to use social and cultural validity constructs as evaluative research criteria. Cokley and Awad (2016) have delineated a number of ways to avoid the pitfalls of using traditional research methods in examining socially and culturally marginalized groups. Similarly, Kohn-Wood et al. (2017) described several innovative approaches that emphasize effectiveness and social justice in studying ethnocultural populations.

8. Educates students to show interest in, and commitment to, research and practice that considers international contexts. Our world has changed in significant ways due to the increase in immigration and globalization, and counseling psychology as a scientific discipline and health service profession faces the challenge of staying relevant in this “complex interdependent global web of economic, political, social, technical, and environmental events, forces, and changes” (Marsella, 1998, p. 1282). Serving a globalized society within the United States and international communities outside the United States is no longer a future endeavor but a current operation. Counseling psychology has not fully embraced this inevitability, although many scholars believe it is urgent that counseling psychology starts to develop “a global orientation” and “broaden its basic assumptions, methods, and practices” (Marsella, 2012, p. 455).

Preparing students to meet the challenge, training programs need to provide educational experiences to cultivate interest in, and commitment to, integrating international contexts into the science and practice of counseling psychology. Issues of diversity, multiculturalism, and social justice are relevant in international as well as domestic contexts, and it is important to recognize the inherent cultural limitations of the science and practice of counseling psychology in scholarship, training, and practice (Arnett, 2002; Marsella, 2012). Students can benefit from the understanding that counseling psychology is rooted in traditional theory and method built on Euro-American cultural bases, and intentional work is needed to prevent potential harm due to cultural misfit when working with people in and with international contexts. A global and transnational perspective in viewing and advancing counseling psychology theory and practice is becoming more and more imperative.

Programs can integrate such content in theory courses, practica, and ethics teaching. Using case examples, learning different international perspectives, and evaluating existing theories from non-U.S. angles may help students develop awareness that international cultural contexts are present everywhere in today's world, both domestically and internationally. Students also need to learn that systems of privilege and oppression exist globally and transnationally. Furthermore, students are encouraged to make scientific efforts to examine the cultural limitations of existing theories in international contexts, joining in efforts to decolonize psychological science (Adams, 2012) and to renew theory. Encouraging international engagements through cross-national collaborative research, attending international conferences, scholarly exchange programs, studying abroad, and other international experiential learning may be helpful.

9. Educates students with a commitment to social justice demonstrated through a spectrum of professional activities as counseling psychologists. Promoting social justice is at the core of counseling psychologists' professional activities (Fouad & Prince, 2011). Social justice efforts dovetail well with our specialty's focus on the well-being and growth of individuals, communities, and society. MTPs provide learning experiences to help students see social injustice wherever and whenever it is present, and to understand its victimizing impact on socially marginalized populations. It is too often that victims are seen as problems due to social injustice in our society (Kaufman, 2005). Learning to identify the cause of social ills and develop a sense of professional responsibility to pursue changing the status quo, as well as appreciating the significant resources and leadership among culturally marginalized groups, are important parts of training.

Social justice in research takes several forms. It is well established that the revision of many existing counseling theories has been overdue, and training programs may promote student research to address this problem. For example, students can consider investigating topics related to social justice, emphasize the role of social contexts in research, as well as take into account the anticipated impact of their work on culturally diverse people.

To avoid doing harm in clinical practice, all counseling practice endeavors to keep social justice at the center of the helping relationship (Duan & Brown, 2015). It is to be recognized that “individual’s experiences, including suffering or symptoms, are impacted by social inequality in oppression, privilege, and discrimination” (p. 344). Training programs are to make significant efforts to help students “shift from traditional individually-focused models” and pursue what “exemplifies a change in worldview from established psychological traditions” (Lewis, Ratts, Paladiono, & Toporek, 2011, p. 6). Adopting a social justice-based paradigm in counseling will allow effective collaboration with marginalized communities and help provide oppressed clients with corrective experiences needed to offset the negative effects of oppression and inequality.

Programs can pursue social justice training in various ways. In theory courses, students may learn how, where, and by whom our existing theories were developed and their associated biases. In practice, students learn to respect, understand, and empathize with clients who have experienced social injustice, and use interventions that do not further victimize or pathologize them, but empower them. Moreover, social advocacy for justice is an effective form of prevention and intervention at a community and/or society level. Students may be equipped with tools and skills through course work, practicum training, and positive role modeling from faculty.

Cluster 3: Core Competencies of Health Service Psychology

10. Develops counseling psychologists to demonstrate knowledge, awareness, and application of the ethical, legal, and professional standards and guidelines of psychology. Ethical, legal, and professional standards of health service psychology and counseling psychology are shaped by culture and exist within a historical context. With awareness of this context, counseling psychologists have argued that individuals must attend to the intersection of ethics and culture (Vasquez, 2010). This articulation reflects the history of the counseling psychology specialty, including a commitment to a strength-based approach, social justice and advocacy, multiculturalism (Delgado-Romero, Lau, & Shullman, 2012), and prevention (Delgado-Romero et al., 2012; Toporek, Kwan, & Williams, 2012).

Perhaps most reflective of the intersection of ethical, legal, and professional standards is the expectation of counseling psychologists to attend to their capacity, role, and obligation as change agents at individual and system levels with regard to multiculturalism (Brabeck & Brabeck, 2013). As change agents, counseling psychologists have been instrumental in the development, dissemination, and implementation of practice guidelines (e.g., “Guidelines for Psychological Practice with Transgender and Gender Nonconforming People” [APA, 2015]; “Guidelines for Psychological Practice with Older Adults” [APA, 2014]; “Guidelines for Psychological Practice with Lesbian, Gay, and Bisexual Clients” [APA 2012b]; “Guidelines for Psychological Practice with Girls and Women” [APA, 2007]; “Guidelines on Multicultural Education, Training, Research, Practice and Organizational Change for Psychologists” [APA, 2003]; “Guidelines for Assessment of and Intervention with Persons with Disabilities” [APA, 2012a]; “Professional Practice Guidelines for Integrating the Role of Work and Career Into Psychological Practice” [APA, n.d.]

With awareness that individuals differ in values, in general, counseling psychology programs, faculty members, students, and affiliates foster and promote a culture of communitarian values and ethics, moving both within and beyond the prescriptive and formulary standards of the APA Ethics Code (APA, 2010). Within the perspective of communitarian values and ethics, program faculty illustrate the interdependent nature of ethics, encouraging all members of the community to hold each other and the community mutually accountable for moral and ethical conduct (Johnson, Barnett, Elman, Forrest, & Kaslow, 2012). That interdependence is nested and interconnected at multiple levels of training (e.g., student, trainee, supervisor, larger community; Forrest, Elman, & Shen-Miller, 2008).

A model program in counseling psychology educates students to be knowledgeable and aware of ethical, legal, and professional standards. Active use of models of ethical decision-making is cultivated, and students are engaged in the in-vivo application of ethical decision-making while also examining structural, institutional, and moral components that contribute to lapses and impairment in judgment and decision-making. Counseling psychology program faculty recognize the relationship between professional ethics and personal practices, articulating that it is not possible to be an ethical professional while engaging in unethical personal conduct. Counseling psychologists facilitate the generalization of students’ ethics from the classroom to clinic, professional organizations, and their personal lives, reflecting the interconnectivity of personal and professional identities. When congruent with the values of the program, of the individual faculty, and of the student, the program actively supports social justice efforts, which may include

advocacy on behalf of the underserved, underrepresented, and marginalized individuals and communities in society, and may also include confronting and challenging systemic or institutionalized problems related to social phenomena (e.g., ableism, racism, sexism).

11. Educates students in the skills, techniques, and foundational knowledge essential to the practice of supervision and consultation as lifelong learning processes contributing to the professional development of health service psychologists. As Stoltenberg and McNeill (2010) noted, “The supervisory relationship serves as the base of all effective teaching and training” (p. 137). The activities of supervision and consultation are congruent with the values of counseling psychology, which build on strengths, use a developmental approach, and are relationally oriented. For learners, supervision and consultation reflect the multiple identities individuals have (i.e., self in context), with an understanding that the individual may be operating as a coach, advocate, supervisor, supervisee, teacher, and/or student in any given interaction in the field of health service psychology (Morgan & Sprenkle, 2007). Thus, students have training tailored to the knowledge, skills, and attitudes related to each of these identities.

Given the inconsistency in research findings regarding the efficacy of competing supervisory models, multiple perspectives on supervision are provided to students (Ladany & Inman, 2012; Stoltenberg & Pace, 2008; Westefeld, 2008). Moreover, students receive instruction in models of supervision and consultation consistent with the values of counseling psychology. In general, these models are pantheoretical and use a developmental frame. Two examples of these models that have been well-documented by counseling psychologists are Ladany, Friedlander, and Nelson’s (2005) interpersonal approach to supervision and Stoltenberg and McNeill’s (2012) integrative developmental model. Counseling psychology programs offer classroom-based training that includes didactics as well as experiential training in supervision related to provision of health services. Although the classroom-based training occurs within a specifically designated course, reflective of supervision as a distinct professional competency, educational experiences and research surrounding supervision may be infused throughout the curriculum. Counseling psychology programs often emphasize experiential learning and include the provision of supervision to less experienced students-in-training (i.e., a multilevel model of supervision), individual supervision, and group supervision. As appropriate, technology is integrated into the supervision and consultation process within the program and as part of supervised field placements in an intentional and planful manner, which reflects ethical practice (Mallen, Vogel, & Rochlen, 2005; Paulson, Casile, & Jones, 2015).

Interprofessional consultation opportunities are offered that are congruent with both the “Standards” and the spirit of counseling psychology. Thus, students are afforded opportunities to consult and collaborate with individuals who are not counseling psychologists and may not be psychologists (e.g., social workers, recreational therapists, spiritual leaders) in order to learn from, and with, individuals who have different training and experiential backgrounds. A model program supports and promotes these training opportunities in order to demonstrate the inclusive nature of counseling psychology, especially as these opportunities relate to health service psychologists.

12. Educates students to develop, implement, and conduct psychological assessment and evaluation to improve the quality, benefits, safety, and value of psychological practice and research. The specialty of counseling psychology offers a unique perspective in conducting clinical assessment, research, quality improvement and adherence, and other assessment activities in that much of the focus is on evaluation for improvement, optimal human functioning, and well-being. With attention placed on optimal human functioning, those in the specialty are attuned to the role of strengths-based approaches as a core value and advocate for the use of strengths-based and contextually finessed assessments, assessment reports, and feedback (Lopez, Edwards, Magyar-Moe, Pedrotti, & Ryder, 2003; Suzuki, Onoue, Fukui, & Ezrapour, 2012). Students and faculty members examine not only pathology or deficits, but also the strengths and values of the patient, client, or organization (see Scheel, Davis, & Henderson, 2012, for a review on the topic of assessing client strengths). Within the field of counseling psychology, individuals are viewed within their cultural context, most generally focusing on typical development while remaining attuned to the effects of the environment and culture (e.g., intersections of race and assessment, historical trends, socioeconomic status, and other contextual variables).

Although counseling psychologists focus primarily on objective personality assessment (see “Petition for the Recognition of a Specialty in Professional Psychology” [Lichtenberg et al., 2012]), they are attuned to the historical and social significance of projective measures. Training programs integrate developments in health service psychology (i.e., health-related measures), and attend to developments regarding the frequency of administering specific assessments, measures, and evaluations in professional practice (Nicholas & Stern, 2011). Additionally, counseling psychology has a unique history of practice in the field of vocational guidance and assessment (see Delgado-Romero et al., 2012, for a review of the specialty’s involvement).

Counseling psychologists educate students to be reflective and critical thinkers in the theory and administration of program evaluation and outcomes

assessment, and to engage in self-evaluation and self-reflection activities during practica and internship experiences. Programs also provide opportunities for all members of the learning community to engage in self-assessment and reflection related to knowledge, skills, and attitudes toward culture (Sue, Arredondo, & McDavis, 1992) in order to explore how these elements may influence clinical and educational practices.

Special emphasis is placed on training counseling psychologists who use scientifically grounded, culturally sensitive, well-normed assessments and evaluations from a variety of domains (e.g., personality, aptitude, vocational, interest, program evaluation, quality improvement, quality assurance, and needs assessment) in a range of relevant settings. When possible, counseling psychologists use empirically grounded assessments for self-evaluation, student evaluation, gathering data on the culture of the program, and in all aspects of service delivery to patients and clients. Students are educated about the client-related contextual variables that may influence testing procedures, scoring, and outcomes. Counseling psychologists view diagnosis as a means of engaging in the science of psychology, with individual deficits and strengths viewed in relation to the whole person (Suzuki et al., 2012). Programs may provide opportunities to engage in social justice and advocacy through the assessment of individuals, groups, and organizations by offering low-cost or no-cost services for marginalized populations, especially those constrained by financial resources given the high cost and the high need for assessment (Suzuki et al., 2012). Further opportunities for using assessment to promote well-being may emerge through confronting and challenging systemic or institutionalized oppression.

Cluster 4: Developmental, Prevention, and Strength Orientations

13. *Fosters an ongoing emphasis and focus on human assets and strengths, helping students to develop a strengths-based perspective.* Counseling psychology training promotes the view that all human beings have assets and strengths that can be identified, enhanced, and used as resources. Attention and heightened awareness of individual strengths can be preventive by stopping problems before they arise, lessening the aversive effects of existing problems, or ameliorating problems altogether. Early in the history of counseling psychology, Super (1955) forwarded a distinction between counseling and clinical psychology in which clinical psychologists were seen as attending exclusively to psychopathology whereas counseling psychologists were viewed as involved with hygiene (i.e., the science of the preservation of health). Super's view was that the focus of clinical psychologists was on what is wrong and its treatment, and counseling psychologists were interested in what is right and how to

use it as a strength. Of course, this is an oversimplification of the differences between clinical and counseling psychology, but it can be stated that counseling psychology training is oriented toward developing methods of identifying human strengths and fostering optimal human functioning through research and practice. Counseling psychologists often are involved with research that investigates correlates of well-being and methods to increase well-being. Counseling psychology training also forwards the view that culture is a strength to be celebrated, broadened, and used as a resource.

Several aspects of positive psychology have a place in the counseling psychology training model (Magyar-Moe, Owens, & Conoley, 2015). *Positive psychology* is defined as “the study of what works, what is right, and what is improving” (Sheldon & King, 2001, p. 216), and as “the scientific study of ordinary human strengths and virtues” (Sheldon & King, 2001, p. 216). Through a focus on strengths, counseling psychology training equips students to work both with psychopathology (i.e., mental illness) and to help individuals achieve higher levels of mental health and well-being. Training includes the premise that both deficits and strengths are dimensions of every person, and individuals can overcome problems and psychopathology by accessing and concentrating on their strengths and assets. Counseling psychology training provides tools to apply toward efforts to help individuals not only overcome problems but also achieve a state of flourishing. A typical intake session in a counseling psychology training clinic includes assessing client deficits and strengths as well as environmental barriers and resources.

Finally, counseling psychology training acknowledges that although success may lead to happiness, happiness can also lead to success (Lyubomirsky, King, & Diener, 2005). Therapy efforts can center on the enhancement of assets, strengths, happiness, and well-being with or without links to client problems. Emphasizing these positive aspects of clients broadens them to be more engaged in therapy and more open to new ways of addressing the problems for which they came to therapy (Fredrickson, 2001). Thus, counseling psychology training may emphasize the development of client strengths as a separate endeavor and a priority over a disease orientation in addressing client problems. By prioritizing attention to strengths, clients gain resources to address problems in their lives. Strengths may take the form of a strong therapeutic alliance, the client’s cultural identity, client abilities, exceptions to the problem, client willingness and motivation to seek therapy, or client resilience, to name only a few of the many possible areas of client strengths.

14. Educates students to be knowledgeable about, and attentive to, human development across the lifespan of human functioning. Over the past 50 years, counseling psychologists have increasingly recognized the importance

of taking a lifespan perspective (Gelso et al., 2014b). Similarly, in the archival description of our specialty, counseling psychology was clearly described as a specialty that was not limited to a specific stage of life but one that was embracing of the full range of human development (Lichtenberg, 1999). Because of this comprehensive focus, unlike other specialties, counseling psychologists develop the competencies necessary to work with clients of all ages. This could range from working with a young child who is having behavioral difficulties to an older adult nearing retirement (Lichtenberg, 1999).

The developmental perspective recognizes that trajectories of growth over time are complex and contextually situated, making each individual's pathway unique. For example, there is substantial evidence that adverse childhood experiences such as ongoing trauma and structural disadvantage, influence development over the life course (Merrick et al., 2017; Smith, Chambers, & Brantini, 2009). It is common for clients to enter therapy during developmental transitions, seeking assistance with a continuum of issues from everyday problems in adaptation to severe crisis. Counseling psychology prepares students to understand and work with this broad range of developmental concerns (e.g., Cramer, Johnson, McLaughlin, Rausch, & Conroy, 2013; De Jongh et al., 2016).

In addition to providing discipline-specific knowledge in the developmental aspects of behavior (APA CoA, 2015), counseling psychology training programs will provide students with advanced academic and clinical training experiences that will help them to learn to apply this lifespan perspective in their work as counseling psychologists. Ideally, training programs would set up practicum placements that provide students with opportunities to work with clients across the lifespan or developmental stages. Given that many settings may focus on working with a more limited age range (e.g., university counseling centers working with college-aged students), it may be that multiple practicum placements would be the most appropriate way to accomplish this goal. On the research front, students would be encouraged to consider a lifespan perspective as they consume, develop, and conduct research. For example, they might be asked to consider how a particular theory or research finding would apply to a child or an older adult.

15. Educates students in socially and culturally relevant prevention methods that limit the length and severity of distress and enhance human functioning. Prevention is a core value of counseling psychology, and it is woven into the history of the specialty, with a focus on strength-based health service psychology, a developmental perspective, as well as a remedial focus (Gelso et al., 2014b). The attention to prevention is embedded in interdisciplinary consultation, systemic intervention, sociopolitical contexts, research,

evaluation, and ethics (Romano & Hage, 2000). Prevention efforts, be they clinical, educational, or advocacy-based, can include individuals, families, groups, systems, or organizations. Prevention activities are scientifically grounded, and reflect thoughtful and intentional integration into treatment planning and interventions, with a focus on optimal functioning (Romano, Koch, & Wong, 2012). Multiple models of empirically grounded and culturally sensitive prevention exist, including theories of behaviors and attitudes (Romano & Netland, 2008), the role of social justice (Albee, 2000), and strength-based approaches (Seligman & Csikszentmihalyi, 2000). Best practice guidelines have been formulated by counseling psychologists to provide a framework for training students for prevention in practice, research, and social advocacy (Hage et al., 2007).

In order for students to engage more in prevention science activities, exposure is necessary to the field of prevention as well as opportunities to practice prevention through didactic coursework and practice experiences (Conyne, Newmeyer, Kenny, Romano, & Matthews, 2008). Within counseling psychology programs, students learn models for understanding distress and illness that are not limited to medical or disease perspectives, which have been criticized as culturally limited (Cowen & Work, 1988) and in need of an infusion of a strength-based, affirmative psychological approach (Seligman & Csikszentmihalyi, 2000). Program faculty teach students to understand prevention efforts, distress, and illness within a historical context, attentive to social and political changes that have influenced and currently influence mental health and well-being, and particularly the role of structural inequalities in both increasing risk and decreasing access to intervention (Mallinckrodt, Miles, & Levy, 2014).

Although opportunities for prevention work may result from classroom instruction, more opportunities will be found within field-based experiences. For example, Romano and Hage (2000) noted that prevention interventions have three applications: (a) primary prevention focused on changing policy or laws, involving psychoeducation or community action; (b) secondary prevention targeting the amelioration of illness, disease, or activities that promote the return to baseline or improved functioning; and (c) tertiary prevention, focusing on the management of illness, disease, or impairment. These activities may be based in university training clinics and counseling centers, hospitals, or other agencies that focus on prevention at one or more levels.

Counseling psychology programs teach students program evaluation and needs assessment methods in order to assess community, agency, and individual needs, integrating both a systemic and individual perspective in these methods. Specific risk-reduction skills and strategies related to the knowledge, attitudes, and behaviors that support well-being can be emphasized

(Romano & Hage, 2000), as well as training students to engage in policy change to promote the well-being of communities, institutions, and systems. Students may participate in field placements that allow them to apply leadership skills (see Principle 19) to promote interprofessional collaboration, consultation, and advocacy as related to prevention (Hage & Romano, 2010).

Cluster 5: Research–Practice Integration

16. Educates students as practice-informed scientists and science-informed practitioners in advancing and practicing counseling psychology in the 21st century. Throughout its history, counseling psychology has embraced and reaffirmed its commitment to the scientist–practitioner as well as the practitioner–scholar models of training. In fact, today the integration of science and practice remains a core value of counseling psychology (Gelso et al., 2014b; Vespia & Sauer, 2006). Correspondingly, the “Standards” now require doctoral programs to demonstrate how training elements include the integration of empirical evidence and practice (APA CoA, 2015). Thus, it is becoming increasingly important for training programs to continually teach students the ways in which practice is evidence based and evidence is practice informed. Early in training, students may see these activities as separate—believing that a “true” counseling psychologist must spend time in clinical practice and doing research. Over time, however, as programs provide students with integrated academic and clinical training experiences, they come to understand how science and practice continually and reciprocally inform each other.

Counseling psychology research is rigorous, relevant, and values a broad perspective—that is, there is a full appreciation of qualitative, quantitative, and mixed method designs. Students are expected to understand the heterogeneity of counseling psychology research designs—ranging from more controlled to more naturalistic studies. Students learn how these divergent methods and the findings not only advance our understanding of counseling psychology theory, research, and practice, but also connect how evidence can impact public policy, social justice, and advocacy-based work.

Throughout clinical training experiences, clinical supervisors model the various ways that practice is evidence based. Importantly, supervisors help students develop a scientific attitude toward their clinical practice. Gelso et al. (2014a) posit that this scientific mindset is fostered through critical thinking and sufficient skepticism. In clinical practice, thinking like a scientist could include continual hypothesis testing, using the literature to inform case conceptualizations or clinical decision-making, and routinely gathering outcome data. Using outcome data to inform and modify clinical practice is

one particularly potent way that students can demonstrate a scientific mindset (see Ionita, Fitzpatrick, Tomaro, Chen, & Overington, 2016, for a review of progress monitoring methods and challenges).

17. *Strives to develop scientific mindedness and research self-efficacy in students through conducive research environments.* Counseling psychology programs provide training environments that serve to help students develop a scientific mindset and promote research self-efficacy. In thinking about research training environments, Gelso, Baumann, Chui, and Savelle (2013) posited program factors that have been systematically associated with positive student outcomes over three decades (i.e., research attitudes, research self-efficacy, and research productivity). Gelso et al. (2013) indicated that, beyond modeling positive attitudes towards research and science, it is helpful for faculty to provide students with training experiences that (a) model scientific behavior, (b) reward students' scholarly behavior, (c) teach students the social and interpersonal aspects of research, and (d) assist students to understand that all research is imperfect and flawed. Using a broad and inclusive definition of science, programs help students to understand that, regardless of the setting, they need to be competent across all levels of research including (a) reviewing and applying research findings, (b) thinking scientifically about clinical practice, and (c) conducting their own research (Gelso et al., 2014a).

Departmental training clinics and university counseling centers continue to provide counseling psychology students integrative training experiences. Because routine outcome assessment is now the norm in departmental training clinics, some have suggested that departmental training clinics offer an ideal setting for the integration of science and practice (e.g., Sauer, 2006; Sauer & Huber, 2007). In these settings, outcome data are used to track clinical outcomes, inform clinical decision-making, and conduct naturalistic research. Exposing students to these and other integrative clinical settings will help them to build science-related competencies.

Cluster 6: Relationships Within and Between Professional Communities

18. *Fosters understanding that counseling psychologists value and serve in an important role in the training and development of master's programs in counseling, counseling psychology, and other related disciplines.* Students in counseling psychology programs are encouraged to become familiar with the history of the discipline and its relationship to other mental-health-related fields. Counseling psychology's roots in education and vocational assessment, as well as psychotherapy and counseling, are important predecessors to the

context of current training. The landscape of master's-level mental health practice is complex, encompassing multiple disciplines, including but not limited to social work, marriage and family therapy, education, rehabilitation, and pastoral counseling. A great deal of the research undergirding the practice of master's-level counselors across disciplines has been generated by counseling psychologists, who have taken a central role in the development of models for psychotherapy training, supervision, for working with diverse populations, and in understanding psychotherapy processes and outcomes (see Scheel & Conoley, 2012, for a review). Also of note, the present MTP may have considerable relevance to master's-level counseling psychology programs.

In particular, an understanding of the relationships between psychology, counseling psychology, and counseling is key, as these disciplines share sometimes harmonious and sometimes conflicted joint or separate trajectories in colleges of education or colleges of arts and sciences (Brady-Amoon & Keefe-Cooperman, 2017; Hanna & Bemak, 1997; Jackson & Scheel, 2012). Many doctoral students have the opportunity to supervise and train master's-level students in counseling or counseling psychology during their programs, but may be unaware of how these programs are (or are not) related. Training programs may assist students in becoming aware of the multiple constituencies who have a stake in counseling psychology and related master's programs. These constituencies include professional organizations; accrediting bodies; state licensing boards; other credentialing bodies; university colleges, departments, and programs; and, of course, students themselves. Program faculty are encouraged to provide accurate and up-to-date information regarding employment opportunities and restrictions that may be influenced by policy or regulatory changes in these constituent bodies.

Students may be guided to understand the national guild and turf issues surrounding the protection of psychology licensure at the doctoral level. The doctorate currently remains the entry-level credential for independent practice and licensure in psychology in many states, but some contest this practice, and counseling psychologists are often divided on the topic.

Counseling psychologists value an inclusive perspective on training at the master's level and generally support state and national efforts to allow a variety of master's counseling programs to be considered as legitimate. Students may be encouraged to consider that these views are not universally shared or even relevant to other applied specialties in psychology, such as clinical psychology and school psychology, and may be actively contested by some non-psychologists involved in training master's-level counselors.

19. Emphasizes students' development of a sense of responsibility, and the acquisition of skills to be multiculturally effective leaders, mentors, and advocates. Leadership and mentorship training are important

components of counseling psychology programs, but may not receive as consistent attention as other aspects of training, as evidenced by retrospective reports of diverse early career professionals (Green & Hawley, 2009; Smith et al., 2012). When good mentoring occurs, it has demonstrated several positive effects for graduate students (Chan, Yeh, & Krumboltz, 2015). In addition to providing mentees with relevant information about myriad professional tasks and roles, the personal qualities of effective mentors include competence, compassion, a willingness to be authentic and vulnerable, modeling self-care, humility, and openness to sharing one's own professional network and resources (Allen, Eby, & Lentz, 2006; Green & Hawley, 2009; Heppner, 2017; Johnson, 2002; Neville, 2014). Recent mentoring literature has a strong emphasis on diversity and recognizes the critical importance of attending to the unique needs and contexts of nonmajority individuals. Rather than a hierarchical, task-focused process in mentoring, more collectivist, relational, and feminist approaches may be preferred, and the opportunity to have safe spaces to process professional experiences of racism, sexism, heterosexism, ableism, classism, and so forth, can be key (Benishek et al., 2004; Constantine et al., 2008). Mentoring efforts may be most effective when tailored to the nuances and challenges of succeeding in what often remains a majority culture environment (Chan et al., 2015).

In terms of leadership training, there is a voluminous, interdisciplinary, and somewhat fragmented literature on leadership and leadership theory with which program faculty may wish to become familiar. Good review articles and recent attempts at integrative leadership frameworks may be particularly useful (Derue, Nahrgang, Wellman, & Humphrey, 2011; Eberly, Johnson, Hernandez, & Avolio, 2013; Kois, King, LaDuke, & Cook, 2016; Lord, Day, Zaccaro, Avolio, & Eagly, 2017). A special issue was recently published in *The Counseling Psychologist* on leadership (Fassinger, Buki, & Shullman, 2017a, 2017b). These integrative frameworks indicate that effective leadership training includes both informational and relational components, as well as opportunities for hands-on application with feedback.

Some examples of opportunities for students to practice mentoring can come through peer mentorship of younger cohort members, or through "supervision of supervision" experiences, a key mentoring context (Johnson, 2007). Program faculty can facilitate additional mentoring by staying abreast of the many opportunities in the Society, such as the Leadership Academy; and in APA, such as the Minority Fellowship Program and Congressional Fellowships. For students headed towards careers in independent practice, the APA Practice Organization and its substantial resources can be useful, as well as other national, state, or local professional organizations.

Kois et al. (2016) provided an outstanding summary of the multiple ways in which student leadership may be fostered, such as by giving students a role in admissions, leading lab teams, being student representatives to program meetings or heading up other student initiatives, and serving on university committees such as graduate student councils or campus diversity programs. The Society and other APA divisions and committees provide similar opportunities for student involvement, such as the Student Affiliates of Seventeen. Supporting these student leadership initiatives with awards, recognitions, or travel funds for leadership activities may be especially beneficial. On the advocacy front, experiences in clinical advocacy for clients, as well as activism within organization or community systems, can be empowering for both students and the constituencies they serve. Advocacy competencies developed by Toporek, Lewis, and Crethar (2009) may assist in preparation for this work.

20. Educates students to function effectively in transdisciplinary and inter-professional research and clinical practice systems. As we move into the 21st century, it is clear that students need to be able to function effectively within a wide range of interprofessional settings. Many of the “wicked problems” (Kazdin, 2011, p. 171) we face, such as interpersonal violence, environmental degradation, health and mental health disparities, and disease, reach beyond the abilities of a single discipline to solve. Such problems are complicated, evolving from multiple intersecting forces, involving numerous constituencies, and are not conducive to quick fixes. Team science is becoming the norm in attacking these multifaceted concerns (Tebes, Thai, & Matlin, 2014). According to both the Standards (APA CoA, 2015) and the Competency Benchmarks (Fouad et al., 2009), students are expected to be educated about effective ways to consult, collaborate, and communicate with individuals from other professions in service delivery and research. Students will need to become aware of the different training models, standards, and perspectives, while also maintaining a sense of counseling psychology’s unique contributions to clinical practice and research. That unique perspective means thinking more broadly than focusing only on pathology; it means bringing our understanding of human development and the psychological experiences of individuals as cultural beings to bear, emphasizing the optimization of social and environmental contexts for wellness for all, and the improvement of efforts in enhancing holistic health.

By far the most common current and projected venue for interprofessional practice is with primary care and related health professions. Several foundational documents useful in training are available here, such as APA’s (2013) “Guidelines for Psychological Practice in Health Care Delivery Systems,”

the 2013 Health Service Psychology Education Collaborative Blueprint, and McDaniel and deGruy's (2014) "An Introduction to Primary Care and Psychology." The specific interprofessional competencies and related training needed for integrated care have been exceptionally well-articulated by Beacham et al. (2017), who detailed ways in which students will need exposure to the relevant literature as well as hands-on experiences working with professionals in other disciplines. For example, having students from different disciplines all working with a standardized patient (Goldberg, Brown, Mosack, & Fletcher, 2015), or providing week-long trainings in integrated care settings with an explicit focus on collaboration, may be useful. Evaluations of programs that have implemented these types of experiences show that students respond positively to them when they involve real contact with other service providers, afford safe spaces for reflection and learning, and are well-structured by overseeing faculty or supervisors (Goldberg et al., 2015; Kauth, Shipherd, Barrera, Ortigo, & Jones, 2016). For those counseling psychologists trained in unidisciplinary settings (e.g., psychology only), creating such experiences for our students can be challenging.

However, several additional useful resources for operationalizing integrated care into counseling psychology training exist. One resource is the Interprofessional Education Collaborative (2011) "Core Competencies for Interprofessional Collaborative Practice", created jointly by the professional organizations in dentistry, medicine, public health, nursing, and pharmacy and endorsed by APA. Another is APA's Division 38 "Integrated Primary Care Curriculum" (Society for Health Psychology, 2017), whose modules are available to programs free and online. There are also dozens of examples of implementation in the literature from which programs could draw inspiration.

Regarding interdisciplinary, transdisciplinary, and translational research, opportunities abound for counseling psychologists to partner with others. In preparation for such work, counseling psychology students will benefit from training in an inclusive and flexible range of quantitative and qualitative research methods, as well as hybrid designs (Chor, Olin, & Hoagwood, 2014; Tebes et al., 2014). Program evaluation, quality assurance and/or improvement, outcomes assessments, nonlinear/dynamic systems evaluations, population health management strategies, community-based research, and critical research perspectives, are all likely to be in demand (Beacham et al., 2017; Smith et al., 2015; Teo, 2015). Counseling psychology program faculty can assist students in learning grant writing skills and in accessing funding outlets for interprofessional work (see Chor et al., 2014 for several examples of the Health Resources & Service Administration's Mental and Behavioral Health Education and Training Grants; also see the National Institutes of Health "Clinical and Translational Science Awards," 2017).

Whether in the practice or research domains, studies show that inter-professional experiences seem to work best when power hierarchies can be reduced or eliminated, when team members have a shared mental model/superordinate goal, when joint work can be approached from a position of curiosity and nonjudgment, and stereotypes about other professionals are suspended or better yet, directly discussed and processed (Smith et al., 2015; Tebes et al., 2014). Counseling psychology training, with its focus on systemic, holistic, diversity, and social justice perspectives, is well-positioned to foster such attitudes and behaviors for effective collaboration.

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References

- Adams, G. (2012). Context in person, person in context: A cultural psychology approach to social-personality psychology. In K. Deaux, & M. Snyder (Eds.), *The Oxford handbook of personality and social psychology* (pp. 182–208). New York, NY: Oxford University Press.
- Albee, G. W. (2000). Commentary on prevention and counseling psychology. *The Counseling Psychologist*, 28, 845. doi:10.1177/0011000000286006
- Allen, T. D., Eby, L. T., & Lentz, E. (2006). Mentorship behaviors and mentorship quality associated with mentorship programs: Closing the gap between research and practice. *Journal of Applied Psychology*, 91, 567–578. doi:10.1037/0021-9010.91.3.567
- American Psychological Association. (n.d.). Professional Practice Guidelines for Integrating the Role of Work and Career Into Psychological Practice. Retrieved from <http://www.apa.org/practice/guidelines/role-work-career.aspx>
- American Psychological Association. (1956). Division of Counseling Psychology, Committee on Definition. Counseling psychology as a specialty. *American Psychologist*, 11, 282–285. doi:10.1037/h0044771
- American Psychological Association. (2003). Guidelines on multicultural education, training, research, practice, and organizational change for psychologists. *American Psychologist*, 58, 377–402. doi:10.1037/0003-066x.58.5.377
- American Psychological Association. (2007). Guidelines for psychological practice with girls and women. *American Psychologist*, 62, 949–979. doi:10.1037/0003-066x.62.9.949

- American Psychological Association. (2010). Revision of Ethical Standard 3.04 of the "Ethical Principles of Psychologists and Code of Conduct" (2002, as amended 2010). *American Psychologist*, *71*, 900. doi:10.1037/amp0000102
- American Psychological Association. (2012a). Guidelines for assessment of and intervention with persons with disabilities. *American Psychologist*, *67*, 43–62. doi:10.1037/a0025892
- American Psychological Association. (2012b). Guidelines for psychological practice with lesbian, gay and bisexual clients. *American Psychologist*, *67*, 10–42. doi:10.1037/a0024659
- American Psychological Association. (2013). Guidelines for psychological practice in health care delivery systems. *American Psychologist*, *68*, 1–6. doi:10.1037/a0029890
- American Psychological Association. (2014). Guidelines for psychological practice with older adults. *American Psychologist*, *69*, 34–65. doi:10.1037/a0035063
- American Psychological Association. (2015). Guidelines for psychological practice with transgender and gender nonconforming people. *American Psychologist*, *70*, 832–864. doi:10.1037/a0039906
- American Psychological Association. (2017). Social class curricula: Classroom exercises. Retrieved from <http://www.apa.org/pi/ses/resources/publications/social-class-exercises.aspx>
- American Psychological Association Commission on Accreditation (2015). Standards of Accreditation for Healthy Service Psychology. Retrieved from <http://www.apa.org/ed/accreditation/about/policies/standards-of-accreditation.pdf>
- Arnett, J. J. (2002). The psychology of globalization. *American Psychologist*, *57*, 774–783. doi:10.1037/0003-066X.57.10.774
- Beacham, A. O., Van Sickle, K. S., Khatri, P., Ali, M. K., Reimer, D., Farber, E. W., & Kaslow, N. J. (2017). Meeting evolving workforce needs: Preparing psychologists for leadership in the patient-centered medical home. *American Psychologist*, *72*, 42–54. doi:10.1037/a0040458
- Benishek, L. A., Bieschke, K. J., Park, J., & Slattery, S. M. (2004). A multicultural feminist model of mentoring. *Journal of Multicultural Counseling and Development*, *32*, 428–442.
- Bieschke, K. J., & Mintz, L. B. (2012). Counseling psychology model training values statement addressing diversity: History, current use, and future directions. *Training and Education in Professional Psychology*, *6*, 196–203. doi:10.1037/a0030810
- Blow, F. C., Zeber, J. E., McCarthy, J. F., Valenstein, M., Gillon, L., & Bingham, C. R. (2004). Ethnicity and diagnostic patterns in veterans with psychoses. *Social Psychiatry and Psychiatric Epidemiology*, *39*, 841–851. doi:10.1007/s00127-004-0824-7
- Blustein, D. L., Schultheiss, D. E. P., & Flum, H. (2004). Toward a relational perspective of the psychology of careers and working: A social constructionist analysis. *Journal of Vocational Behavior*, *64*, 423–440. doi:10.1016/j.jvb.2003.12.008

- Bordin, E. S. (1979). The generalizability of the psychoanalytic concept of the working alliance. *Psychotherapy, 16*, 252–260. doi:10.1037/h0085885
- Brabeck, M. M., & Brabeck, K. M. (2013). Feminist and multicultural ethics in Counseling Psychology. In C. Z. Enns, & E. N. Williams (Eds.), *The Oxford handbook of feminist multicultural counseling psychology* (pp. 27–44). New York, NY: Oxford University Press. doi:10.1093/oxfordhb/9780199744220.013.0002
- Brady-Amoon, P., & Keefe-Cooperman, K. (2017). Psychology, counseling psychology, and professional counseling: Shared roots, challenges, and opportunities. *The European Journal of Counselling Psychology, 6*, 41–62. doi:10.5964/ejcop.v6i1.105
- Bronfenbrenner, U. (1979). *The ecology of human development: Experiments by nature and design*. Cambridge, MA: Harvard University Press.
- Caplan, N., & Nelson, S. D. (1973). On being useful: The nature and consequences of psychological research on social problems. *American Psychologist, 28*, 199–211. doi:10.1037/h0034433
- Capra, F. (1997). *The web of life: A new scientific understanding of living systems*. New York, NY: Doubleday.
- Chan, A. W., Yeh, C. J., & Krumboltz, J. D. (2015). Mentoring ethnic minority counseling and clinical psychology students: A multicultural, ecological, and relational model. *Journal of Counseling Psychology, 62*, 592–607. doi:10.1037/cou0000079
- Chor, K. B., Olin, S. S., & Hoagwood, K. E. (2014). Training and education in clinical psychology in the context of the Patient Protection and Affordable Care Act. *Clinical Psychology: Science & Practice, 21*, 91–105. doi:10.1111/cpsp.12068
- Cho, S., Crenshaw, K. W., & McCall, L. (2013). Toward a field of intersectionality studies: Theory, applications, and praxis. *Signs: Journal of Women in Culture & Society, 38*, 785–810. doi:10.1086/669608
- Cokley, C. O., & Awad, G. H. (2016). Conceptual and methodological issues related to multicultural research. In P. Heppner, B. Wampold, J. Owen, M. N. Thompson, & K. T. Wang. *Research design in counseling* (4th ed., pp. 189–211). Belmont, CA: Brooks/Cole Cengage Learning.
- Conyne, R. K., Newmeyer, M. D., Kenny, M., Romano, J. L., & Matthews, C. R. (2008). Two key strategies for teaching prevention: Specialized coursework and infusion. *Journal of Primary Prevention, 29*, 375–401. doi:10.1007/s10935-008-0146-8
- Constantine, M. G., Smith, L., Redington, R. M., & Owens, D. (2008). Racial microaggressions against Black counseling and counseling psychology faculty: A central challenge in the multicultural counseling movement. *Journal of Counseling & Development, 86*, 348–355. doi:10.1002/j.1556-6678.2008.tb00519.x
- Cooper, M. (2009). Welcoming the other: Actualising the humanistic ethic at the core of counseling psychology practice. *Counselling Psychology Review, 24*, 119–129.
- Council of Counseling Psychology Training Programs, Association of Counseling Center Training Agencies, Society of Counseling Psychology (2009). Counseling

- psychology model training values statement addressing diversity. *The Counseling Psychologist*, 37, 641–643. doi.org/10.1177/0011000009331930
- Covey, M., Fouad, N., Jackson, M., Juntunen, C., Sauer, E., Stabb, S., Varghese, F., & Voelkel, E. (2013). Counseling Psychology Core Competencies, Essential Components, Behavioral Anchors, and Examples. Retrieved from <http://www.ccptp.org/assets/docs/copsy%20competencies%20final2.pdf>
- Cowen, E. L., & Work, W. C. (1988). Resilient children, psychological wellness, and primary prevention. *American Journal of Community Psychology*, 16, 591–607. doi:10.1007/BF00922773
- Cramer, R. J., Johnson, S. M., McLaughlin, J., Rausch, E. M., & Conroy, M. A. (2013). Suicide risk assessment training for psychology doctoral programs: Core competencies and a framework for training. *Training and Education in Professional Psychology*, 7, 1–11. doi:10.1037/a0031836
- Dawis, R. B., & Lofquist, L. H. (1984). *A psychological theory of work adjustment*. Minneapolis, MN: University of Minnesota Press.
- De Jongh, A., Resick, P. A., Zoellner, L. A., van Minnen, A., Lee, C. W., Monson, C. M., . . . Bicanic, I. A. E. (2016). Critical analysis of the current treatment guidelines for complex PTSD in adults. *Depression and Anxiety*, 33, 359–369. doi:10.1002/da.22469
- Delgado-Romero, E. A., Lau, M. Y., & Shullman, S. L. (2012). The Society of Counseling Psychology: Historical values, themes, and patterns viewed from the American Psychological Association presidential podium. In N. A. Fouad, J. A. Carter, & L. M. Subich (Eds.), *APA handbook of counseling psychology: Theories, research, and methods* (Vol 1, pp. 3–29). doi:10.1037/13754-001
- Derue, D. D., Nahrgang, J. D., Wellman, N., & Humphrey, S. E. (2011). Trait and behavioral theories of leadership: An integration and meta-analytic test of their relative validity. *Personnel Psychology*, 64, 7–52. doi:10.1111/j.1744-6570.2010.01201.x
- Duan, C., & Brown, C. (2015). *Becoming a multiculturally competent counselor*. Thousand Oaks, CA: Sage.
- Eberly, M. B., Johnson, M. D., Hernandez, M., & Avolio, B. J. (2013). An integrative process model of leadership: Examining loci, mechanisms, and event cycles. *American Psychologist*, 68, 427–443. doi:10.1037/a0032244
- Epperson, D. L., Fouad, N. A., Stoltenberg, C. D., & Murdock, N. L. (2005, June) Model training program in counseling psychology. Unpublished manuscript. Retrieved from <http://www.ccptp.org/ccptp-model-training-program-guidelines>
- Fassinger, R. E., Buki, L. P., & Shullman, S. L. (2017a). Leadership in counseling psychology, Pt. I [Special issue]. *The Counseling Psychologist*, 45.
- Fassinger, R. E., Buki, L. P., & Shullman, S. L. (2017b). Leadership in counseling psychology, Pt. II [Special issue]. *The Counseling Psychologist*, 45.
- Forrest, L., Elman, N. S., & Shen-Miller, D. S. (2008). Psychology trainees with competence problems: From individual to ecological conceptualizations. *Training and Education in Professional Psychology*, 2, 183–192. doi:10.1037/1931-3918.2.4.183

- Fouad, N. A., Grus, C. L., Hatcher, R. L., Kaslow, N. J., Hutchings, P. S., Madson, M. B., . . . Crossman, R. E. (2009). Competency benchmarks: A model for understanding and measuring competence in professional psychology across training levels. *Training and Education in Professional Psychology, 3*(Suppl. 4), S5–S26. doi:10.1037/a0015832
- Fouad, N. A., & Prince, J. P. (2011). Social justice in counseling psychology. In E. M. Altmaier, & J. C. Hansen (Eds.) *The Oxford handbook of counseling psychology*. New York, NY: Oxford University Press. doi:10.1093/oxfordhb/9780195342314.013.0033
- Fredrickson, B. L. (2001). The role of positive emotions in positive psychology: The broaden-and-build theory of positive emotions. *American Psychologist, 56*, 218–226.
- Gelo, O. C. G., & Salvatore, S. (2016). A dynamic systems approach to psychotherapy: A meta-theoretical framework for explaining psychotherapy change processes. *Journal of Counseling Psychology, 63*, 379–395. doi:10.1037/cou0000150
- Gelso, C. J. (2002). Real relationship: The “something more” of psychotherapy. *Journal of Contemporary Psychotherapy, 32*, 35–40. doi:10.1023/A:1015531228504
- Gelso, C. J., Baumann, E. C., Chui, H. T., & Savelle, A. E. (2013). The making of a scientist–psychotherapist: The research training environment and the psychotherapist. *Psychotherapy, 50*, 139–149. doi:10.1037/a0028257
- Gelso, C. J., & Carter, J. (1994). Components of the psychotherapy relationship: Their interaction and unfolding during treatment. *Journal of Counseling Psychology, 41*, 296–306. doi:10.1037/0022-0167.41.3.296
- Gelso, C. J., & Lent, R. W. (2000). Scientific training and scholarly productivity: The person, the training environment, and their interaction. In S. D. Brown, & R. W. Lent (Eds.) *Handbook of Counseling Psychology* (3rd ed.). New York, NY: John Wiley & Sons.
- Gelso, C. J., Nutt Williams, E., & Fretz, B. R. (2014a). *Counseling Psychology* (3rd ed.). Washington, DC: American Psychological Association. doi:10.1037/14378-000
- Gelso, C. J., Nutt Williams, E., & Fretz, B. R. (2014b). An introduction to counseling psychology. In C. J. Gelso, E. Nutt Williams, & B. R. Fretz, *Counseling Psychology* (3rd ed., pp. 3–23). doi:10.1037/14378-001
- Goldberg, L. R., Brown, G. R., Mosack, V. A., & Fletcher, P. A. (2015). Student reflections following exposure to a case-based interprofessional learning experience: Preliminary findings. *Journal of Interprofessional Care, 29*, 380–382. doi:10.3109/13561820.2014.969835
- Gottfredson, L. S. (2005). Applying Gottfredson’s theory of circumscription and compromise in career guidance counseling. In D. Brown, & R. Lent (Eds.), *Career development and counseling: Putting theory and research to work* (pp. 71–100). Hoboken, NJ: Wiley.
- Green, A. G., & Hawley, G. C. (2009). Early career psychologists: Understanding, engaging, and mentoring tomorrow’s leaders. *Professional Psychology: Research and Practice, 40*, 206–212. doi:10.1037/a0012504

- Hage, S. M., & Romano, J. L. (2010). History of prevention and prevention groups: Legacy for the 21st century. *Group Dynamics: Theory, Research, and Practice, 14*, 199–210. doi:10.1037/a0020736
- Hage, S. M., Romano, J. L., Conyne, R. K., Kenny, M., Matthews, C., Schwartz, J. P., & Waldo, M. (2007). Best practice guidelines on prevention practice, research, and social advocacy for psychologists. *The Counseling Psychologist, 35*, 493–566.
- Hanna, F. J., & Bemak, F. (1997). Quest for identity in the counseling profession. *Counselor Education and Supervision, 36*, 194–206. doi:10.1002/j.1556-6978.1997.tb00386.x
- Health Service Psychology Education Collaborative. (2013). Professional psychology in health care services: A blueprint for education and training. *American Psychologist, 68*, 411–426. doi.org/10.1037/a0033265
- Heppner, P. P. (2017). Creating mentoring opportunities to promote cultural competencies and social justice. *The Counseling Psychologist, 45*, 137–157. doi:10.1177/0011000016688781
- Holland, J. L. (1997). *Making vocational choices: A theory of vocational personalities and work environments* (3rd ed.). Odessa, FL: Psychological Assessment Resources.
- Interprofessional Education Collaborative. (2011). *Core competencies for interprofessional collaborative practice: Report of an expert panel*. Washington, DC: Author.
- Ionita, G., Fitzpatrick, M., Tomaro, J., Chen, V. V., & Overington, L. (2016). Challenges of using progress monitoring measures: Insights from practicing clinicians. *Journal of Counseling Psychology, 63*, 173–182. doi:10.1037/cou0000122
- Jackson, M. A., & Scheel, M. J. (2012). Quality of master's education: A concern for counseling psychology? *The Counseling Psychologist, 41*, 669–699. doi:10.1177/0011000011434644
- Jacobs, S. C., Huprich, S. K., Grus, C. L., Cage, E. A., Elman, N. S., Forrest, L., . . . Kaslow, N. J. (2011). Trainees with professional competency problems: Preparing trainers for difficult but necessary conversations. *Training and Education in Professional Psychology, 5*, 175–184. doi:10.1037/a0024656
- Johnson, W. B. (2002). The intentional mentor: Strategies and guidelines for the practice of mentoring. *Professional Psychology: Research and Practice, 33*, 88–96. doi:10.1037//0735-7028.33.1.88
- Johnson, W. B. (2007). Transformational supervision: When supervisors mentor. *Professional Psychology: Research and Practice, 38*, 259–267. doi:10.1037/0735-7028.38.3.259
- Johnson, W. B., Barnett, J. E., Elman, N. S., Forrest, L., & Kaslow, N. J. (2012). The competent community: Toward a vital reformulation of professional ethics. *American Psychologist, 67*, 557–569. doi:10.1037/a0027206
- Johnson, W. B., Barnett, J. E., Elman, N. S., Forrest, L., Schwartz-Mette, R., & Kaslow, N. J. (2014). Preparing trainees for lifelong competence: Creating a communitarian training culture. *Training and Education in Professional Psychology, 8*, 211–220. doi:10.1037/tep0000048

- Juntunen, C. L., & Even, C. E. (2012). Theories of vocational psychology. In N. A. Fouad, J. A. Carter, & L. M. Subich (Eds.), *APA handbook of counseling psychology: Theories, research, and methods* (Vol. 1, pp. 237–266). Washington, DC: American Psychological Association. doi:10.1037/13754-009
- Kaufman, J. M. (2005). Explaining the race/ethnicity-violence relationship: Neighborhood context and social psychological processes. *Justice Quarterly*, 22, 224–251. doi:10.1080/07418820500088986
- Kauth, M. R., Shipherd, J. C., Barrera, T. L., Ortigo, K., & Jones, K. R. (2016). Trainees' perceptions of the Veterans Health Administration interprofessional psychology fellowships in lesbian, gay, bisexual, and transgender health. *Training and Education in Professional Psychology*, 10, 165–170. doi:10.1037/tep0000123
- Kazdin, A. E. (2011). Conceptualizing the challenge of reducing interpersonal violence. *Psychology of Violence*, 1, 166–187. doi:10.1037/a0022990
- Kohn-Wood, L., Nagata, D. K., Kim, J. H. J., & Macquoid, A. D. (2017). Innovative approaches: Emphasizing effectiveness and social justice for ethnocultural populations. In J. M. Casas, L. A. Suzuki, C. M. Alexander, & M. A. Jackson (Eds.) *Handbook of multicultural counseling* (4th ed., pp. 239–240). Thousand Oaks, CA: Sage.
- Kois, L., King, C., LaDuke, C., & Cook, A. (2016). Cultivating student leadership in professional psychology. *Training and Education in Professional Psychology*, 10, 29–36. doi:10.1037/tep0000100
- Krumboltz, J. D. (1979). A social learning theory of career decision making. In A. M. Mitchell, G. B. Jones, & J. D. Krumboltz (Eds.), *Social learning and career decision making* (pp. 19–49). Cranston, RI: Carrol Press.
- Ladany, N., & Inman, A. (2012). Training and supervision. In E. Altmaier, & J. Hansen (Eds.), *The Oxford handbook of counseling psychology* (pp. 179–207). New York, NY: Oxford University Press. doi:10.1093/oxfordhb/9780195342314.001.0001
- Ladany, N., Friedlander, M. L., & Nelson, M. L. (2005). *Critical events in psychotherapy supervision: An interpersonal approach*. Washington, DC: American Psychological Association. doi:10.1037/10958-000
- Lambert, M. J., & Vermeersch, D. A. (2008). Measuring and improving psychotherapy outcome in routine practice. In S. D. Brown, & R. W. Lent (Eds.), *Handbook of counseling psychology* (4th ed., pp. 233–266). Hoboken, NJ: John Wiley & Sons.
- Lent, R. W., Brown, S. D., & Hackett, G. (1994). Toward a unifying social cognitive theory of career and academic interest, choice, and performance. *Journal of Vocational Behavior*, 45, 79–122. doi:10.1006/jvbe.1994.1027
- Leong, F. T. L. (Ed.). (2014). *APA handbook of multicultural psychology*. Washington, DC: American Psychological Association.
- Lewis, J. A., Ratts, M. J., Paladino, D. A., & Toporek, R. L. (2011). Social justice counseling and advocacy: Developing new leadership roles and competencies. *Journal for Social Action in Counseling and Psychology*, 3, 5–16.

- Lichtenberg, J. W. (1999). Archival description of counseling psychology. *The Counseling Psychologist*, 27, 589–592. doi:10.1177/0011000099274006
- Lichtenberg, J. W., Resnick, J., & Minami, T. (2012). Petition for the Recognition of a Specialty in Professional Psychology [PDF file]. Retrieved from <http://www.div17.org/wp-content/uploads/2012-CRSPPP-PETITION-w-Appendix.pdf>
- Lord, R. G., Day, D. V., Zaccaro, S. J., Avolio, B. J., & Eagly, A. H. (2017). Leadership in applied psychology: Three waves of theory and research. *Journal of Applied Psychology*, 102, 434–451. doi:10.1037/apl0000089
- Lopez, S. J., Edwards, L. M., Magyar-Moe, J. L., Pedrotti, J. T., & Ryder, J. A. (2003). Fulfilling its promise: Counseling psychology's efforts to understand and promote optimal human functioning. In W. B. Walsh (Ed.), *Contemporary topics in vocational psychology. Counseling psychology and optimal human functioning* (pp. 297–307). Mahwah, NJ: Lawrence Erlbaum Associates.
- Lyubomirsky, S., King, L., & Diener, E. (2005). The benefits of frequent positive affect: Does happiness lead to success? *Psychological Bulletin*, 131, 803–855. doi:10.1037/0033-2909.131.6.803
- Magyar-Moe, J. L., Owens, R. L., & Conoley, C. W. (2015). Positive psychological interventions in counseling: What every counseling psychologist should know. *The Counseling Psychologist*, 43, 508–557. doi:10.1177/0011000015573776
- Mallen, M. J., Vogel, D. L., & Rochlen, A. B. (2005). The practical aspects of online counseling: Ethics, training, technology, and competency. *The Counseling Psychologist*, 33, 776–818. doi:10.1177/0011000005278625
- Mallinckrodt, B., Miles, J. R., & Levy, J. J. (2014). The scientist practitioner advocate model: Addressing contemporary training needs for social justice advocacy. *Training and Education in Professional Psychology*, 8, 303–311. doi:10.1037/tep0000045
- Marsella, A. J. (1998). Toward a global-community psychology: Meeting the needs of a changing world. *American Psychologist*, 53, 1282–1291. doi:10.1037/0003-066X.53.12.1282
- Marsella, A. (2012). Psychology and globalization: Understanding a complex relationship. *Journal of Social Issues*, 68, 454–472. doi:10.1111/j.1540-4560.2012.01758.x
- McDaniel, S. H., & deGruy, F. V. (2014). An introduction to primary care and psychology. *American Psychologist*, 69, 325–331. doi:10.1037/a0036222
- McGillivray, J., Gurtman, C., Boganin, C., & Sheen, J. (2015). Self-practice and self-reflection in training of psychological interventions and therapist skills development: A qualitative meta-synthesis review. *Australian Psychologist*, 50, 434–444. doi:10.1111/ap.12158
- Merrick, M. T., Ports, K. A., Ford, D. C., Afifi, T. O., Gershoff, E. T., & Grogan-Kaylor, A. (2017). Unpacking the impact of adverse childhood experiences on adult mental health. *Child Abuse & Neglect*, 69, 10–19. doi:10.1016/j.chiabu.2017.03.016
- Miller, S. D., Duncan, B. L., & Hubble, M. A. (2005). Outcome-informed clinical work. In J. C. Norcross, & M. R. Godfried (Eds.), *Handbook of psychotherapy*

- integration* (2nd ed., pp. 84–102). New York, NY: Oxford University Press. doi:10.1093/med:psych/9780195165791.003.0004
- Morgan, M. M., & Sprenkle, D. H. (2007). Toward a common-factors approach to supervision. *Journal of Marital and Family Therapy, 33*, 1–17. doi:10.1111/j.1752-0606.2007.00001.x
- Murdock, N. L., Alcorn, J., Heesacker, M., & Stoltenberg, C. (1998). Model training program in counseling psychology. *The Counseling Psychologist, 26*, 658–672. doi:10.1177/0011000098264008
- National Institutes of Health. (2017). *Clinical and Translational Science Awards (CTSA) Program*. Retrieved from <https://ncats.nih.gov/ctsa>
- Neville, H. A. (2014). Social justice mentoring: Supporting the development of future leaders for struggle, resistance, and transformation. *The Counseling Psychologist, 43*, 157–169. doi:10.1177/0011000014564252
- Nicholas, D. R., & Stern, M. (2011). Counseling psychology in clinical health psychology: The impact of specialty perspective. *Professional Psychology: Research and Practice, 42*, 331–337. doi:10.1037/a0024197
- Patton, M. Q. (2015). *Qualitative research and evaluation methods* (4th ed.). Thousand Oaks, CA: Sage.
- Paulson, L. R., Casile, W. J., & Jones, D. (2015). Tech it out: Implementing an online peer consultation network for rural mental health professionals. *Journal of Rural Mental Health, 39*, 125–136. doi:10.1037/rmh0000034
- Prilleltensky, I. (2008). The role of power in wellness, oppression, and liberation: The promise of psychopolitical validity. *Journal of Community Psychology, 36*, 116–136. doi:10.1002/jcop.20225
- Romano, J. L., & Hage, S. M. (2000). Prevention and counseling psychology: Revitalizing commitments for the 21st century. *Counseling Psychologist, 28*, 733–763. doi:10.1177/0011000000286001
- Romano, J. L., Koch, J., & Wong, Y. J. (2012). Prevention in counseling psychology: Promoting education, health, and well-being across the life cycle. In N. A. Fouad, J. A. Carter, & L. M. Subich (Eds.), *APA handbook of counseling psychology: Theories, research, and methods* (Vol 1., pp. 345–367). Washington, DC: American Psychological Association doi:10.1037/13754-013
- Romano, J. L., & Netland, J. D. (2008). The application of the theory of reasoned action and planned behavior to prevention science in Counseling Psychology. *The Counseling Psychologist, 36*, 777–806. doi:10.1177/0011000007301670
- Safran, M. A., Mays, R. A., Huang, L. N., McCuan, R., Pham, P. K., Fishter, S. K., & Trachtenberg, A. (2009). Mental health disparities. *American Journal of Public Health, 99*, 1962–1966. doi:10.2105/ajph.2009.167346
- Sauer, E. M. (2006). Living the scientist-practitioner model in a psychology training clinic. *Counseling Psychology Quarterly, 19*, 293–304. doi:10.1080/09515070600960498
- Sauer, E. M., & Huber, D. M. (2007). Implementing the Boulder Model of training in a psychology training clinic. *Journal of Contemporary Psychotherapy, 37*, 221–228. doi:10.1007/s10879-007-9057-x

- Scheel, M. J., & Conoley, C. W. (2012). Psychotherapy process and outcome research in counseling psychology. In N. A. Fouad, J. A. Carter, & L. M. Subich (Eds.), *APA handbook of counseling psychology: Theories, research, and methods* (Vol. 1, pp. 203–236). Washington, DC: American Psychological Association. doi:10.1037/13754-008
- Scheel, M. J., & Conoley, C. W. (August, 2015). *Enhancing client motivation by accessing positive emotions through positive psychology*. Symposium presented at the 123rd annual American Psychological Association convention, Toronto, Canada.
- Scheel, M. J., Davis, C. K., & Henderson, J. D. (2012). Therapist use of client strengths: A qualitative study of positive processes. *The Counseling Psychologist, 41*, 392–427. doi:10.1177/0011000012439427
- Scheel, M. J., Lichtenberg, J., Jackson, M., & Fouad, N. (2011). Competencies in professional counseling and related human services. Retrieved from https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=1&cad=rja&uact=8&ved=0ahUKEwiryr-7x-zYAhVF4WMKHabrAgYQFggpMAA&url=http%3A%2F%2Fwww.ccptp.org%2Fassets%2Fdocs%2Fm-competencies%2520grid%2520revised%2520and%2520mcac%2520domains_final_sept.%25202012.docx&usg=AOvVaw2EchGGfxWJsw4z4yfLH5Z9
- Schultheiss, D. E. P. (2007). The emergence of a relational cultural paradigm for vocational psychology. *International Journal for Educational and Vocational Guidance, 7*, 191–201. doi:10.1007/s10775-007-9123-7
- Seligman, M. E. P., & Csikszentmihalyi, M. (2000). Positive psychology. An introduction. *American Psychologist, 55*, 5–14. doi:10.1037//0003-066x.55.1.5
- Shean, G. D. (2015). Some methodological and epistemic limitations of evidence-based therapies. *Psychoanalytic Psychology, 32*, 500–516. doi:10.1037/a0035518
- Sheldon, K. M., & King, L. (2001). Why positive psychology is necessary. *American Psychologist, 56*, 216–217. doi:10.1037//0003-066x.56.3.216
- Smith, L., Chambers, D., & Brantini, L. (2009). When oppression is the pathogen: The participatory development of socially just mental health practice. *American Journal of Orthopsychiatry, 79*, 159–168. doi:10.1037/a0015353
- Smith, C. S., Gerrish, W. G., Nash, M., Fisher, A., Brotman, A., Smith, D., . . . Dreffin, M. (2015). Professional equipoise: Getting beyond dominant discourses in an interprofessional team. *Journal of Interprofessional Care, 29*, 603–609. doi:10.3109/13561820.2015.1051216
- Smith, N. G., Keller, B. K., Mollen, D., Bledsoe, M. L., Buhin, L., Edwards, L. M., . . . Yakusho, O. (2012). Voices of early career psychologists in Division 17, the Society of Counseling Psychology. *The Counseling Psychologist, 40*, 794–825. doi:10.1177/0011000011417145
- Society for Health Psychology. (2017). *Integrated primary care curriculum*. Retrieved from <https://societyforhealthpsychology.org/training/integrated-primary-care-psychology/>
- Stoltenberg, C. D., & McNeill, B. W. (2010). *IDM supervision: An integrative developmental model for supervising counselors and therapists* (3rd ed.). New York, NY: Routledge. doi:10.4324/9780203893388

- Stoltenberg, C. D., & McNeill, B. W. (2012). Supervision: Research, models, and competence. In N. A. Fouad, J. A. Carter, & L. M. Subich (Eds.), *APA handbook of counseling psychology: Theories, research, and methods* (Vol. 1, pp. 295-327). Washington, DC: American Psychological Association. doi:10.1037/13754-011
- Stoltenberg, C. D., & Pace, T. M. (2008). Science and practice in supervision: An evidence-based practice in psychology approach. In B. W. Walsh (Ed.), *Biennial review of counseling psychology* (pp. 71-95). New York, NY: Routledge.
- Sue, D. W., Arredondo, P., & McDavis, R. J. (1992). Multicultural counseling competencies and standards: A call to the profession. *Journal of Counseling and Development, 70*, 477-486. doi:10.1002/j.1556-6676.1992.tb01642.x
- Sue, D. W., Lin, A. I., Torino, G. C., Capodilupo, C. M., & Rivera, D. P. (2009). Racial microaggressions and difficult dialogues on race in the classroom. *Cultural Diversity & Ethnic Minority Psychology, 15*, 183-190. doi:10.1037/a0014191
- Sue, D. W., & Sue, D. (2012). *Counseling the culturally different: Theory and practice* (6th ed.). New York, NY: Wiley.
- Suls, J., & Rothman, A. (2004). Evolution of the biopsychosocial model: Prospects and challenges for health psychology. *Health Psychology, 32*, 119-125. doi:10.1037/0278-6133.23.2.119
- Super, D. E. (1955). Transition: From vocational guidance to counseling psychology. *Journal of Counseling Psychology, 2*, 3-9.
- Super, D. E. (1990). A life-span, life-space approach to career development. In D. Brown, & L. Brooks (Eds.), *Career choice and development: Applying contemporary theories to practice* (2nd ed., pp. 197-261). San Francisco, CA: Jossey-Bass.
- Suzuki, L. A., Onoue, M. A., Fukui, H., & Ezrapour, S. (2012). Foundations of counseling psychology: Assessment. In N. A. Fouad, J. A. Carter, & L. M. Subich (Eds.), *APA handbook of counseling psychology: Theories, research, and methods* (Vol. 1, pp. 167-199). Washington, DC: American Psychological Association. doi:10.1037/13754-007
- Tebes, J. K., Thai, N. D., & Matlin, S. L. (2014). Twenty-first century science as a relational process: From Eureka! to team science and a place for community psychology. *American Journal of Community Psychology, 53*, 475-490. doi:10.1007/s10464-014-9625-7
- Teo, T. (2015). Critical psychology: A geography of intellectual engagement and resistance. *American Psychologist, 70*, 243-254. doi:10.1037/a0038727
- Toporek, R. L., Kwan, K.-L. K., & Williams, R. A. (2012). Ethics and social justice in counseling psychology. In N. A. Fouad, J. A. Carter, & L. M. Subich (Eds.), *APA Handbook of Counseling Psychology: Practice, interventions, and applications* (Vol. 2, pp. 305-332). doi:10.1037/13755-013
- Toporek, R. L., Lewis, J. A., & Crethar, H. C. (2009). Promoting systemic change through the ACA advocacy competencies. *Journal of Counseling & Development, 87*, 260-268. doi: 10.1002/j.1556-6678.2009.tb00105.x
- U.S. Department of Health and Human Services. (1999). *Mental Health: A Report of the Surgeon General*. Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center

- for Mental Health Services, National Institutes of Health, National Institute of Mental Health.
- Vasquez, M. J. T. (2010). Ethics in multicultural counseling practice. In J. G. Ponterotro, J. M. Casas, L. A. Suzuki, & C. M. Alexander (Eds.), *Handbook of multicultural counseling* (3rd ed., pp. 127–146). Thousand Oaks, CA: Sage.
- Vespia, K. M., & Sauer, E. M. (2006). Defining characteristic or unrealistic ideal: Historical and contemporary perspectives on scientist-practitioner training in counseling psychology. *Counseling Psychology Quarterly*, *19*, 229–251. doi:10.1080/09515070600960449
- Walsh, W. B., & Savickas, M. L. (2005). Current issues and innovations in vocational psychology. In M. L. Savickas (Ed.), *Handbook of vocational psychology: Theory, research, and practice* (3rd ed., pp. 3–11). Mahwah, NJ: Erlbaum. doi:10.4324/9780203143209
- Wampold, B. E. (2001). *The great psychotherapy debate: Models, methods, and findings*. Mahwah, NJ: Erlbaum. doi:10.1002/pits.10115
- Watkins, M., & Shulman, H. (2008). *Toward psychologies of liberation*. New York, NY: Palgrave Macmillan. doi:10.1057/9780230227736
- Westefeld, J. S. (2008). Supervision of psychotherapy: Models, issues, and recommendations. *The Counseling Psychologist*, *37*, 296–316. doi:10.1177/0011000008316657
- Zeldow, P. B. (2009). In defense of clinical judgment, credentialed clinicians, and reflective practice. *Psychotherapy: Theory, Research, Practice, Training*, *46*, 1–10. doi:10.1037/a0015132

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