



Counselors For Social Justice

July Newsletter

CSJ works to promote social justice by confronting oppressive systems of power and privilege that affect professional counselors and their clients.

WELCOME FROM OUR INCOMING PRESIDENT:

This is an unprecedented time in our history, when the hearts and minds of the nation are open to hear the experiences of oppression voiced by our Black, Brown, and Native brothers and sisters. These calls for societal and institutional deconstruction and re-visioning are important to echo in our work as collective Counselors for Social Justice. During this past spring, current President Lauren Shure has elevated our efforts as an organization to inspire ACA and our sister



divisions to issue declarative statements of commitment to Black Lives Matter, and our CSJ committee chairs and members have donated many hours to attend to the grief of our Black colleagues and to discuss action plans. We cannot thank them enough for what they give.

As the incoming president for 2020-2021, I want to ensure that the progress we have made is not lost to the next headline, the next hashtag. I want us all to continue the efforts that have begun at the local, state, and national levels to examine violent and militarized policing practices, health disparities, racial trauma, and political and economic deprivation. The social justice efforts seen during the COVID Spring of 2020 should not be allowed to vanish, and with our collective efforts, we will begin to see the fruits of those labors.

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I invite all members to renew your commitment to social justice. Take part in our webinars, contribute to the newsletter, volunteer to serve on a CSJ committee, or recruit colleagues to join the effort of CSJ. Mentor someone in social justice, talk about social justice with clients and coworkers, read about social justice in action. Do your own racial work, educating yourself on the issues of communities who do not look like you or live like you. Commit to being the best human you can be in the coming year, and **TOGETHER, WE RISE**.

Colette T. Dollarhide, President 2020-2021

Welcome to the Edition

By: Darius Green, CSJ Newsletter Co-editor

Welcome to the summer edition of the Counselors for Social Justice newsletter! A lot has certainly occurred in the world since the release of our last publication. The coronavirus pandemic has resulted in a global crisis that has impacted many of us personally and professionally. We have also witnessed a display of racism towards people of Asian descent and another spark in attention to undue police violence towards Black and African American people. Here, I'm defining undue police violence as an officer's use of any form of force that is perceived as excessive and unwarranted to any given situation. Recent racism raises concern for the potential of race-based traumatic stress.

Counselors are called to act in support of marginalized communities. Our 2014 *Code of Ethics* set the standards to which we aspire towards while our *Multicultural and Social Justice Counseling Competencies* provides a framework for meeting those aspirations. As a division that sees itself as the moral conscience of the American Counseling Association (ACA), it is imperative that we be present, engaged, and persistent in advocating on these issues. Furthermore, it is important that, as a profession, we move beyond joining the performance of issuing public statements that condemn racism. Our advocacy must be systemic and ongoing. I have personally challenged myself to be an actively engaged by presenting a recent webinar with CSJ, helping craft a statement with ACA, preparing presentations and lectures on race-based trauma and

police violence, and planning clinical and scholarly work related to police violence. I share this to shine light on various ways in which we can move beyond words of solidarity.



While not planned, all submissions included in this edition address topics related to race and racism. It is my hope that the authors of each piece offer new insight that we are able to cultivate as we continue pushing for social change. I have also included a couple of suggested articles that cover recent events as well:

“Take your kung-flu back to Wuhan”: Counseling Asians, Asian Americans, and Pacific Islanders with race-based trauma related to COVID-19 by Dr. Stacey D. Litam in *The Professional Counselor*.

<https://doi:10.15241/sdal.10.2.144>

The trauma lens of police violence against racial and ethnic minorities by Dr. Thema Bryant-Davis and colleagues in the *Journal of Social Issues*.

<https://doi.org/10.1111/josi.12251>

What do the AMCD multicultural and social justice counseling competencies mean in the context of black lives matter? by Drs. Ahmad R. Washington and Malik S. Henfield in the *Journal of Multicultural Counseling and Development*.

<https://doi.org/10.1002/jmcd.12138>

Brief Introduction to Racial Battle Fatigue

By: Sabri Dogan, Angela Calderon, Brooks Collins-Gaines, Gayle Garcia, Fawn Gordon, Diane Parr and Delila Owens

Imagine being asked to leave a local coffee shop because your very presence causes discomfort for others. Imagine having your colleagues disregard your well-expressed view only to accept the same perspective from your White counterparts. Imagine seeing a police car behind you and being afraid for

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your life. Imagine being pulled over by police because you “fit the description” of a suspect.

Eventually, you realize these uncomfortable experiences are occurring because you are a visible person of color.

Racism does not discriminate who will experience it because if you meet the criteria of being a visible person of color, you are eligible.



These and other experiences have been defined as “brief and commonplace daily verbal, behavioral and environmental indignities, whether intentional or unintentional, that communicate hostile, derogatory or negative racial slights and insults that potentially have harmful or unpleasant psychological impact on the target or person or group” or microaggressions (Sue, et al. 2019 p.237). Racial microaggressions are specific to racial groups and are often experienced in academic spaces, neighborhoods, athletic realms and workplaces. They are coined “micro” because they often occur at the individual level (person to person); however, they also occur systematically. These daily racial microaggressions cause psychological distress, also known as racial battle fatigue (RBF).

William A. Smith of the University of Utah presented a framework for RBF that was based on sociological, psychological, historical, and health contexts that examine the outcomes and fight against racism-related microaggressions (Franklin, Smith, & Hung 2014; Smith, 2004). The term was initially coined to describe the race-related stress of Black men attending college. RBF is defined as the psychological, physiological, and behavioral reactions to the racism-related stressors that are associated with minority group membership (Smith, 2004). The primary assumption of the conceptual framework of RBF is that institutions are dominated and run by the views of White persons and Whiteness, which creates ongoing subtle and explicit types of racial microaggressions for people of color (Franklin, 2016).

In discussing the concept of RBF, Chancellor (2019) contends that exposure to racial microaggressions are directly related to stress responses that include, but are not limited to, the following symptoms:

irritability, sudden changes in mood, anger, worry, anxiety, fear, hopelessness, headaches, clenched jaws, indigestion, high blood pressure, fatigue, loss of appetite, increase in substance use, poor job or school performance, and changes in family relationships. The effects of these racial attacks are felt individually, culturally, and systemically. According to Smith (2004), psychological responses to RBF include frustration, rage, and resentment. The physiological reactions to this stress include headaches, a pounding heart, and high blood pressure. Lastly, behavioral responses include but not limited to stereotype threat, impatience, and poor school performance.

Racial battle fatigue is the damaging cumulative effects of racial microaggressions (Franklin, 2014) or, as Sue (2010) put it, the “everyday verbal, nonverbal, and environmental slights, snubs, or insults, whether intentional or unintentional, that communicate hostile, derogatory, or negative messages to target persons based solely upon their marginalized group membership” (p. 3). Numerous African Americans inevitably experience RBF that has a direct adverse effect on their psychological and physiological health outcomes (Smith, Hung, & Franklin, 2012).

When subtle or overt practices of racism are present, most people of color spend their time attempting to understand the act. For example, they may wonder if the incident was driven by a racist motive and ponder how they should respond to the act (Smith, Allen, & Danley, 2007). When people of color redirect their energy to overcome the negative impact of events of institutional and/or individual racism, they drain their psychological and physiological resources “needed in other important, creative, and productive areas of life” (Smith, 2012, p. 40).

When frequent racial microaggressions and racism deplete a person of color’s psychological and physiological energy, RBF occurs. Yes, racially motivated interactions are exhausting and harmful to those who experience them daily. A study done by Smith, Hung, and Franklin (2011) found that mundane, extreme, environmental stress (MEES) increases with higher educational attainment. For African-American male college graduates, both racial microaggressions and societal problems contribute to 40% of mundane stress. Furthermore, Smith, Allen and Danley (2007) assert that RBF is “the result of constant physiological, psychological, cultural and emotional coping with racial microaggressions in less than ideal and racially hostile or unsupportive environments”. Lastly, Smith, Mustaffa, Jones, Curry,

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and Allen (2016) assert that RBF is experienced by simply being a part of a racially oppressed group. Therefore, RBF can also be transferred intergenerationally through storytelling, socialization, and coping processes.

Social justice is a call to action (Sue & Sue, 2019). Counselors must not only be aware of systemic oppression, but actively fight to acknowledge and address it. Visible people of color cannot escape the negative perspectives held towards them. Daily racial microaggressions will have adversarial effects on a person's mental and physical health. Not every person who encounters racial microaggressions is able to articulate the effects. The oppression can be internalized if there is no one to process it with. Therefore, it is crucial that caregivers or counselors address racial socialization and microaggressions with children and adolescents. If not, People of Color risk internalized oppression during their youth.

People of color have found ways to cope with microaggressions and racism. Processing, self-care, confrontation, and creating counter spaces are a few coping strategies that have been used to validate their experiences. Counselors must also take an active role in addressing racism and systemic oppression.

We offer the following recommendations for exploring racial microaggressions and racial battle fatigue with people of color:

1. It is important that counselors do their own self-examination and understand their areas of growth.
2. Counselors must be willing to listen to their client's frame of reference from a non-defensive stance.
3. Counselors must be mindful of cultural racism since it has historically been manifested in institutions and policies in the United States.
4. Experiential learning is the best teacher. Counselors cannot understand someone's frame of reference by reading scholarly literature. We must be willing to attend cultural events, community forums, and social movement meetings to get a better understanding of our clients' frame of reference.
5. Counselors "do no harm". Unintentional harm will be caused without working through our unresolved baggage.

Some individuals will never understand what it is like to be marginalized because of the color of their skin

and the attribution of meaning placed on it. However, we must be mindful of race and the psychological effects of racism. It is especially important to process what is being said and seen in the media with children and adolescents as we seek to guard against internalized oppression.

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Culturally Competent Conversations for School Counselors: Sharpening Our Multicultural and Social Justice Skills

By: Shekila Melchior, Ph. D., Tamara Tribitt, Ph. D.

After a long year away, we are back with our third installment of Culturally Competent Conversations for School Counselors! As a reminder, our intention for the series is to foster reflection and conversation surrounding cultural competency in school counselors by applying specifics from the Multicultural and Social Justice Counselor Competencies (MSJCC; Ratts et al., 2015) and the Social Justice Competencies (Constantine et al, 2007). In our first article, we discussed the importance of counselor self-awareness. In the second, we highlighted the knowledge component of the MSJCC and Social Justice Competencies. In this article, we will be examining strategies school counselors can use to apply new levels of awareness and the knowledge gained through constant exploration as “multicultural and social justice–informed attitudes, beliefs, and knowledge provide the background for counselors to develop cultural and change-fostering, skill-based interventions” (Ratts et al., 2015, p. 37). As always, we have an interactive component at the end of this article if you are interested in sharing your experiences.

When we were discussing and planning this newsletter submission, the 99th anniversary of the Black Wall Street Race Massacre that took place in Tulsa, OK May 31, 1921 through June 1, 1921 had just occurred. We noticed how the white supremacy that led to hundreds of lives lost and left an entire community decimated in the span of approximately sixteen hours is identifiable in our school systems today.

The Greenwood District of Tulsa, Oklahoma was

known to be a thriving business and residential area for Black Americans in the early 1900’s. Despite the racist culture of the US, Black Americans in Tulsa created a prosperous community as landowners and entrepreneurs (Johnson, 1998). Segregated from the White south side of Tulsa by the railroad, residents of Greenwood reinvested in their community which led to “a level of [Black] economic success and self-determination that had never existed before in the United States” (Luckerson, 2018, para. 14). The main thoroughfare in the flourishing Greenwood District, Greenwood Avenue, has become known as the Black Wall Street of America (Johnson, 1998; Larsen, 1997).

Despite the thriving environment, community members were not insulated from racism and racial violence. Sarah Page, a young White woman, accused Dick Rowland, a young Black man, of assault while riding an elevator. Rowland was arrested on May 31, 1921 but charges were dropped after Page recanted her report and corroborated Rowland’s account of the interaction (Johnson, 1998). However, that day’s issue of the *Tulsa Tribune* included a report of the incident and the reporter insinuated Page had been raped by Rowland. “Accusations of impropriety toward [White] women were common against [Black] men during [this] period and often led to executions” (Luckerson, 2018, para. 18). Rumors that a White lynch mob was forming began to circulate so the sheriff called the *Tulsa Star*, Tulsa’s African American newspaper, warning of a possible attack on Rowland (Ellisworth, 1982; Johnson, 1998). Later that night, a group of Black Americans traveled to the Tulsa courthouse to find a large group of White people waiting in front of the courthouse. An altercation occurred and a gun was fired (Ellisworth, 1982; Johnson, 1998; Messer & Bell, 2010; Messer, Beaman, & Bell, 2013).

The first shot led to a barrage of gunfire. As the Black residents fled to their homes, the growing mob of White people followed and brought the war to Greenwood. They continued killing Black citizens and began setting fires throughout the district.

Numerous members of the White mob were deputized
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and armed by local law enforcement (Johnson, 1998). Other members of the mob looted shops and homes to find weapons and ammunition, including a roving machine gun they mounted on the back of a truck. Planes were used to drop fire accelerant and kerosene bombs on Greenwood's homes, businesses, churches, schools, and hospitals (Johnson, 1998). The mob prevented fire fighters from extinguishing the fires (Johnson, 1998; Messer, Beaman, & Bell, 2013), and as a result, all 35 blocks that made up the "economically successful Black community of Tulsa was completely destroyed and razed to the ground" (Messer & Bell, 2010, p. 853). Everything was lost and an entire community was devastated. The number of Black lives lost is estimated in the hundreds and continues to be highly contested due to witnesses reporting "unidentified [Black] bodies stacked onto trucks and dumped into unmarked graves" (Lukerson, 2008, para. 22).

After the traumatic massacre, the subordination of Black people continued; people were placed in internment camps and were required to have a White person vouch for them in order to leave the camp (Johnson, 1998; Lukerson, 2008). Insurance companies denied claims submitted by the citizens of Greenwood for the loss of property and the courts found the Black residents who came to the courthouse to protect Rowland were at fault for Greenwood's destruction (Johnson, 1998; Lukerson, 2008). No White people were held accountable for their actions

in this act of genocide.

The white supremacy that existed for hundreds of years precipitating this heinous event in American history continues today as demonstrated by the repeated acts of racial violence against Black people at the hands of Whites. Because they are a microcosm within US society, we can also see the same dynamics play out in our school systems as evidenced by the enduring racial disparities and incidents of racial violence perpetuated by anti-blackness (Kohli, Pizzaro, & Nevárez, 2017). As we know, advocacy is a major component of the school counselor's role and it is clear that taking action to combat the deeply embedded racism in our schools is imperative. But how do we translate this knowledge and awareness into action?

According to Ratts et al. (2016), multicultural and social justice competent counselors rely on a variety of skills one can utilize to take action against injustices. The skills can be applied across all the domains outlined in the MSJCC (counselor self-awareness, client worldview, the counseling relationship, and counseling and advocacy interventions), but we will be focusing on counselor self-awareness, client worldview, and the counseling relationship for the purposes of this article.

<i>Name of Skill</i>	<i>Culturally competent school counselors can use this skill to:</i>
Reflective and critical thinking skills	1) Gain insight into their assumptions, values, beliefs, and biases as members of minoritized and privileged groups. 2) Gain insight into the values, beliefs, and biases of privileged and minoritized counselees.
Comprehension skills	1) Explain how their social group identities and how minoritized and privileged group statuses influence their worldviews and experiences. 2) Explain how minoritized and privileged identities and statuses influence counselees' worldviews and life experiences.
Skills to apply knowledge	1) Apply knowledge of themselves in personal and professional settings. 2) To apply their knowledge of minoritized and privileged counselees' experiences into the counseling relationship.

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Analytical skills	1) Compare and contrast their minoritized and privileged group statuses and experiences to those of other individuals. 2) Interpret how minoritized and privileged counselees' experiences are connected to presenting problems.
Evaluation and assessment skills	1) Evaluate and assess the degree to which their minoritized and privileged group statuses may influence their personal and professional experiences. 2) Evaluate and assess the degree to which stereotypes, prejudice, discrimination, power, privilege, and oppression influence the worldviews and life experiences of minoritized and privileged counselees.
Cross-cultural communication skills	1) Discuss with counselees how stereotypes, prejudice, discrimination, power, privilege, and oppression influence the counseling relationship. 2) overtly examine power, privilege, and oppression and their influence on the counseling relationship with minoritized and privileged counselees.

Adapted from "Multicultural and Social Justice Counseling Competencies: Guidelines for the Counseling Profession" by M. J. Ratts, A. A. Singh, S. Nassar-McMillan, S. K. Butler, and J. R. McCullough, 2016, *Journal of Multicultural Counseling and Development*, 44(1), 28-48.

In reviewing these skills and their purposes, one can see that counselor self-awareness, culturally-specific knowledge, and utilizing specific skills are inseparable. One cannot truly gain self-awareness and knowledge without reflective and critical thinking skills. To further illustrate the relationship between self-awareness, knowledge, and skills, let's imagine a school counselor saw a sign posted by a student that said "All Lives Matter." The school counselor might reflect on: What does this sign mean to the school counselor based on their privileged and/or minoritized identities (an example of reflective and critical thinking skills and comprehension skills)? How does their experience of the sign compare to others who have similar and different identities (an example of comprehension skills, evaluate and assessment skills, and analytical skills)? Can the school counselor express their experience of the sign to the student or others (an example of reflective and critical thinking skills and cross-cultural communication skills)? Is it safe to do so based on their social locations due to stereotypes, prejudice, discrimination, power, privilege, and oppression (an example of reflective

and critical thinking skills, comprehension skills, evaluate and assessment skills, and analytical skills)? In order to answer these questions that reflect the various skills utilized by culturally competent school counselors, the school counselor must have some degree of self-awareness and understanding of power and oppression in our society.

So, fellow CSJ members, what are your growth edges as they relate to racial injustices? What skills will help you combat the white supremacy that exists in our schools that leads to racist violence like the horrific tragedy in Greenwood District of Tulsa, OK? Please join the conversation by posting your answers according to the instructions found in the grey box below. Once we have developed these skills and are competent to utilize them, we can take appropriate action steps. And that is the focus of our fourth, and last, article in the Culturally Competent Conversations for School Counselors series. Stay tuned to the next CSJ newsletter for our discussion of action according to the MSJCC (Ratts et al., 2016) and Social Justice Competencies (Constantine et al, 2007).

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Culturally Competent Conversations

Active Participation

For this installment we will be using Padlet to engage in conversation. This will allow you to post using a variety of modalities. It will also allow everyone to see others' posts and gives us an opportunity to build community!

Reflection Question:

What skills will help you combat the white supremacy that exists in our schools as you advocate for racial equity? And what do you need in order to continue sharpening the skills needed to engage in action?

Padlet Instructions:

1. Click this link [JOIN THE CONVERSATION](#)
2. Use the plus sign in the bottom left corner
3. Choose how you want to add your post. You have an array of choices (written, video, image, etc.).
4. Click outside your text box and it will automatically post.
5. All posts are automatically anonymous. If you want to share your identity, please be sure to add your name to the post.

Revisit the link at a later time to see what others have posted!

Note: Please see the following resources for more information on the Black Wall Street Race Massacre.

- [“Black Wall Street: The African American Haven That Burned and Then Rose From the Ashes”](#) by Victor Luckerson
- *Black Wall Street: From Riot to Renaissance in Tulsa's Historic Greenwood District* by Hannibal B. Johnson



Shekila Melchior & Tamara Tribitt

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Introducing a Clinical Hate Response Model for Professional Counselors

By: Dr. Alexia DeLeon and Dr. Justin D. Henderson

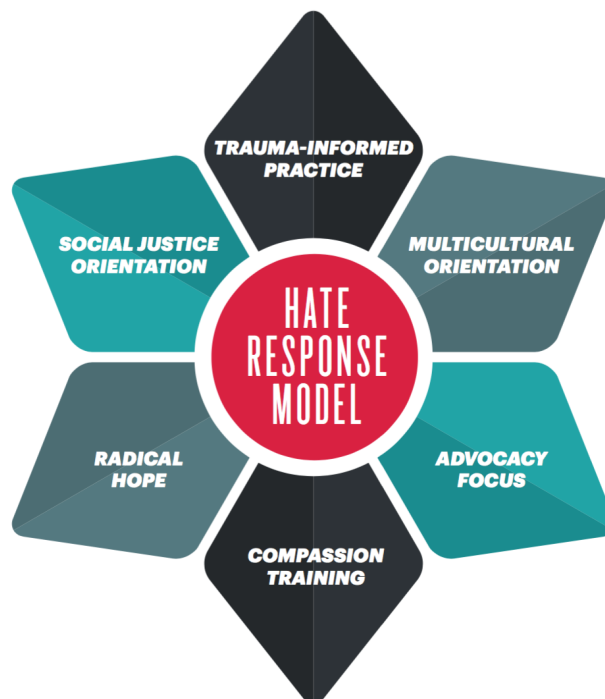
According to the Center for the Study of Hate and Extremism at California State University (2019), rates of hate incidents across the U.S. have been some of the highest in a decade. Even in the midst of a global pandemic, many communities are still actively targeted by White Supremacists, xenophobes, anti-LGBTQ groups, among others, who refuse to tolerate and welcome diversity. While we know that these incidents, fueled by hatred and bias, can have lasting impacts on someone's mental health (McDevitt et al., 2001), we still lack professional training in how to assess for and respond to someone who has been the target of hate. This is a brief introduction to one community's efforts to disrupt and resist hate through the development of a Clinical Hate Response Model.

The Clinical Hate Response Model was developed by the authors, in collaboration with community organizations representing different marginalized communities, in response to a recent hate incident that occurred within their community. Several members of the community merged their efforts (through the Portland United Against Hate initiative and grant) to develop a hate tracking tool and a clinical hate response model used to train mental health

counselors. The Clinical Hate Response Model teaches counselors how to screen, assess, and provide services to clients who have been the target of hate. The model is composed of six key dimensions, briefly introduced below, that we believe counselors can incorporate in their work when responding to those who have been targets of hate.

Compassion

We begin with orienting to a place of compassion when responding to hate incidents. We define compassion as the sensitivity to the suffering of self and others, with a deep commitment to relieving and preventing it (Gilbert, 2009). We start here because oftentimes the aftermath of experiencing a hate incident can include a wide range of responses, such as feelings of hopelessness, powerlessness, depression, anxiety, threat activation, shame, overwhelm and more. We want our clients to know that while we may not fully understand their experience, we are orienting to a place of compassion as we sit with them in the aftermath of experiencing a hate incident. We also believe it



is important to extend this compassion inward to ourselves in responding to the aftermath of hate incidents as we may be experiencing similar feelings and responses due to the nature of hate incidents. For example, when our own identities intersect with our client's identities, we as counselors may also be targets of hate. By working from a space of compassion, both client and counselor can benefit in this collective healing space.

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Trauma-Informed Practice

The second dimension of the Clinical Hate Response Model is trauma-informed practice. “Trauma informed care embraces a perspective that highlights adaptation over symptoms and resilience over pathology” (Elliot et al., 2005, p. 467). We pulled from SAMHSA’s Trauma and Justice Strategic Initiative (2014) for this module, highlighting their Ten Principles of Trauma-Informed Practice. We also shed light on historical and vicarious trauma, as well as resilience and vicarious resilience throughout this dimension. It is important to keep in mind that if we are able to experience vicarious trauma, we must also have the ability to experience vicarious resilience as witnesses and participants in trauma survivors’ own recovery processes (Hernandez-Wolfe, Killian, Engstrom & Gansei, 2015).

Multicultural Orientation

When responding to someone who has been the target of a hate incident, it is important to consider working from a multicultural orientation for many reasons. In this dimension, we invite counselors to consider their own cultural self-awareness and biases and how these might be limited to one’s own culture. We encourage working from a cultural humility framework and taking cultural opportunities to initiate the exploration of clients’ cultural identities and values (Hook et al., 2018). When we are aware of our own culture and its limitations as counselors, we can then focus on creating cultural connections with our clients based on their cultural values and identities. This helps to build trust in the therapeutic relationship for marginalized communities that lack access to counseling services and may experience mistrust due to historical trauma caused by helping professions.

Social Justice Orientation

This dimension covers recognizing oppression at all levels. It focuses special attention on White supremacy as a system, as well as how this system benefits those from the dominant, White culture, while actively oppressing those from non-White cultures. We cover Young’s (2010) five categories of oppression in this dimension: exploitation, marginalization, powerlessness, cultural imperialism and violence. This helps counselors situate the problem, effects, and solutions to hate within a larger sociocultural context that is maintained through the dynamics of oppression. We invite counselors to a call to action in creating social change in advocacy efforts to benefit our clients and help them reach their

optimum health.

Advocacy Focused Interventions

For this dimension, we use ACA’s Advocacy Model (Ratts, Torporek & Lewis, 2010), as a guide for helping counselors understand our role as advocates when called to advocate with and for clients. We discuss different advocacy interventions at the micro, meso and macro levels--stressing the importance of considering macro-systemic contexts and how they impact our clients beyond the therapeutic context. At the microlevel, we center interventions on the individual client, such as holding space and allowing them to tell their story that is liberating for them and allows them to take their power back. The mesolevel interventions help to bridge connections between larger systemic factors and influences and the microlevel of a client’s lived experience, such as partnering with community agencies and organizations on shared projects. This helps in building social support and solidarity while simultaneously creating relational and community healing. Interventions at the macrolevel focus on intervening with large systems and institutions that impact and affect entire communities. For example, we believe counselors possess the communication and relational skills needed to raise public awareness around ongoing social injustices, such as hate incidents. When communities partner together to combat social injustices present in hate incidents, they are able to collectively heal and make meaningful progress in disrupting continued hate.

Radical Hope

The last dimension of the model centers on how to sustain our engagement on the issues of hate, inequality, and social justice when we are all traveling on, in Dr. Martin Luther King’s words, the long moral arc that bends towards justice. Radical hope emphasizes ways counselors can stay connected, active, and courageous during the challenges of hate response and community engagement.

The Clinical Hate Response model has been used to help train professional counselors in how to respond to and assess for those targeted by hate. We have also used this model to train community members who are interested in supporting marginalized communities, which are often the targets of hate. Our hope is that training professional counselors with this model will help integrate traditional counseling practices with social change/reformer/advocacy roles.

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Internalized Oppression

By: Sabri Dogan, Angela Calderon, Brooks Collins-Gaines, Gayle Garcia, Fawn Gordon, Delila Owens, and Dianne Parr

Studies have demonstrated the negative impact of racism on mental health, including an increased risk of depression, heightened anxious states, and psychological distress (Paradies 2006; Soto, Dawson-Andoh, & BeLue, 2011; Paradies et al., 2015). Furthermore, ethnic/racial discrimination posed a threat to the development of physical health concerns in adults including diabetes and cardiovascular disease (Brody, Chen, Miller, Kogan & Beach, 2013; Pachter & Coll, 2009). In youth, behavioral consequences emerged including increased substance use, sexual behavior, and lower success in school (Stock, Gibbons, Walsh, & Gerrad, 2011; Dotterer, McHale, & Crouter, 2009). Thus, experiencing racism and assimilating into a white supremacist system may put individuals experiencing oppression at risk for internalizing racism (Asanti, 1996; Taylor, 1990; Taylor & Gundy 1996; Butler et al., 2002; Hipolito-Delgado, 2010).

Internalized racism has been defined as

"...the situation that occurs in a racist system when a racial group oppressed by racism supports the supremacy and dominance of the dominating group by maintaining or participating in the set of attitudes, behaviors, social structures and ideologies that undergird the dominating group's power" (Bivens, 1995, p. 2).

The rise in hate groups, hate crimes, and more verbalized hate rhetoric towards minorities continues to create tension across the United States (The Southern Poverty Law Center, 2019). In August 2019, the American Association of Pediatric Medicine stated, "Racism is a social determinant of health that has a profound impact on the health status of children, adolescents, emerging adults, and their families." (Trent, Dooley, Douge, 2019, p. 1) While children and adolescents may not directly follow traditional media sources, overt and damaging racist messages

are now part of their daily school, social, and online life (Costello, Dillard, Shuster, & Delacroix, 2019). Adolescence is linked to the development of racial identity, part of that initial formation of a sense of self.

There is a risk of racial minorities displaying trauma symptoms (Pieterse, Todd, Neville & Carter, 2011) as well as depression, anxiety and psychological distress (Paradies 2006; Soto, Dawson-Andoh, & BeLue, 2011; Chae, Powell, Nuru-Jeter, Smith,-Bynum, Seaton, Forman, Turpin & Seller, 2017). In youth, the behavioral impact may include substance use, risky sexual behavior, and lower rates of success in school (Stock et al., 2011; Dotterer, McHale, & Crouter, 2009). Furthermore, the effects of racism during this crucial time of development can greatly impact children's mental health and one of the most potentially damaging threats is internalized racism (Trent, Dooley, & Doug, 2019).

Racial Identity Development

The development of a coherent and stable sense of self is one of the key aspects in adolescence (Erikson, 1950). The process of identity development is shaped by many factors such as "individual characteristics, family dynamics, historical factors, and social and political contexts" (Tatum 2010). Race, class, gender, sexual orientation, religion, age, and disability status are considered separate yet collaboratively dimensions of identity that work together to create what makes a whole person (Ratts & Pedersen, 2014). Ratts and Pedersen (2014), highlight how developmental identity dimensions are influenced by the dynamics of power, privilege and oppression. Furthermore, Ratts and Pedersen's model of group identity dimensions provides the opportunity to broaden the counselors' lenses and awareness of those who come from marginalized communities. This model aids in understanding how the current dehumanizing narrative (Sargent, 2018) could be affecting adolescent's identity development. Counselors' unawareness and/or limited skills to explore and address issues of injustice in clinical practice may continue to perpetuate a culture of

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silence (Ratts, & Pedersen, 2014).

Identity and Mental Health

A positive identity will support the mental and physical well-being of an individual. Racism and oppression disturb positive identity development, which in turns negatively affects the mental health of people of color. In a study conducted on ninety five Black men examining identity, implicit bias, and depression, the researchers discovered that Black men with the highest risk for depressive symptoms also had stronger implicit anti-black bias and they perceived low racial discrimination (Chae et al., 2017). For instance, Helms (1995) proposed that in order to progress in one's own racial identity development, the negative attitudes one holds about their group identity must be resolved.

A meta-analysis review on perceived racism and mental health suggested that the psychological response look similar to trauma responses (Pieterse, Todd, Neville, & Carter, 2011). Depression, anxiety, somatization, and sleep issues were symptoms reported by minority individuals when they have experienced racist situations (Pieterse, et al., 2011). These symptoms are all symptoms of a trauma disorder (American Psychiatric Association, 2013). In an article by Hardy (2013), the author addressed the wounds that youth of color experienced because of racial trauma. Learning about wounds that some youth experience and the implications from these incidences will help counselors work with youth and support healing. Combatting negative messages that could have been adapted and maintained through media, practices, and policies will help to diminish the impact (Shellae Versey et al., 2019).

Hidden Internal Dialogue

Internalized devaluation occurs when children believe that they are not worthy or are bad (Hardy, 2013). Children who experience racial discrimination may believe that it was their fault that they experienced the racial discrimination. *Assaulted sense of self* is a culmination of the negative messages that black youth experience, which makes it difficult for them to form a realistic and true representation of self (Hardy, 2013). *Internalized voicelessness* is the lack of ability to advocate and defend against the negative messages that society projects on black youth (Hardy, 2013). *Internalized voicelessness* both causes and is caused by internalized devaluation and assaulted sense of self. The next wound is *rage*, which is an emotional response from the previously explained wounds

(Hardy, 2013). *Rage* is complex because it is built up over time and may be the result of suppressed emotions, which are being felt because of racial discrimination (Hardy, 2013). These wounds are caused by people of color believing and internalizing the negative rhetoric that the majority culture perpetuates.

Social justice in Action

The American Counseling Association's Advocacy Competencies describe six domains of advocacy: empowerment, client advocacy, community collaboration, systems advocacy, collective action, and social/political advocacy (Ratts, Toporek, Lewis, 2010). The psychosocial influence of racism speaks to the importance of finding strategies that promote equity, buffer against such outcomes, and work towards dismantling the system that promotes racist rhetoric. Park and colleagues (2018) found that social support and ethnic exploration/commitment mitigated the influence of discrimination in adolescents. Scholars Pernice-Duca and Owens (2010), found that in adolescents of color with mothers who promoted racial pride aided in buffering negative effects of racism. This speaks to the need to provide a space for adolescents to feel supported and valued for who they are, while enabling them to explore how they are being impacted by the messages from the larger society.

Social justice advocacy must extend beyond our office walls. It is important for counselors to take a leadership role in the community and in the profession. Advocacy efforts must be the result of the needs in the community. A leadership style that is conducive to highlighting the community voices is servant leadership (Greenleaf, 2002; Sendjaya, Sarros, & Santora, 2008). In this style of leadership, the leader serves the community based on the expressed need. Servant leaders are authentic, show humility, integrity, accountability, security, and vulnerability through their service and treat everyone as equal partners (Greenleaf, 2002; Sendjaya, et al., 2008). Servant leadership gives counselors a beneficial perspective on how to engage in social justice and advocacy work in all communities.

"Definitions belong to the definers, not the defined"-

Toni Morrison

(Continued on next page)



Delila Owens

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Dear Black People and Non-Black People Alike,

By: Sam Steen, CSJ Newsletter Co-editor

I continue to grieve about the plight of Black folks in our society. The pain is deep and it's persistent.

I cannot find any solace and so I continue to persevere on what I can do.

The murders, public humiliation, shame, powerlessness, and deceit that is replayed, retweeted, researched, reinforced, reexamined, and reported on my Black people reignites my despair.

I receive little tangible evidence that my very own life, and what it represents, even matters.

Today I cannot even look myself in the eyes because I want to hide from the lies that have been sown into

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every aspect of my existence.

I abhor the reality that my experience in this country is in the hands of illegitimate White police officers and I cannot escape their sadistic grip despite any accolade that is hidden by my Black skin.

So, I struggle to trust anything I say or do will bear any fruit because every system in this country has an agenda that is not my own and does not benefit us all.

Yet, I wake up each morning asking a sovereign God for help as I stumble around a myriad of spaces in a gaze looking for redemption. I'll keep praying until I see the light here on earth and I will not give up hope.

Let me be clear All Lives Do Not Matter until All Black Lives Matter too. In this moment I'm inspired and compelled to exclaim that Black Lives Have Not Mattered – the evidence is clear and continues to grow.

But I am tired of trying to convince myself or others that I even matter and there's only one thing I know that I can do. Love is an action word and I want to use it as an acrostic to illustrate a small step I'll take in this moment. Today I shed **Light** and remain **Optimistic** by being **Victorious** in my efforts to **Enrich** the lives of my, Beautiful, Black, Brown, Worthy, Valuable, Resilient, Strong, Intelligent, and Gracious Race.

Below are a few of the Black people who were violently murdered by police. This list is not complete. This list changes unbeknownst to us all.



My people deserve not to be forgotten or disregarded. I take this opportunity to pause and call these names aloud:

Rayshard Brooks, George Floyd, Ahmaud Arbery, Breonna Taylor, Tamir Rice, Eric Garner, Sandra Bland, Michael Brown, Miriam Carey, Freddie Gray, Trayvon Martin, Tanisha Anderson, Keith Lamont Scott, Alton Sterling, Philando Castile, Yvette Smith, Terence Crutcher, Walter Scott, Oscar Grant, Laquan McDonald, Samuel Dubose, me?, you?, your children?, your nephew?, my neighbor?, my father?, your sister in law?

Will you join me in continuing to fight for justice in every space that you find yourself so that we can get beyond just mattering?

CSJ Board Spotlight

Edil Torres Rivera is a professor and director of Latinx Studies at the Wichita State University. He possesses a Ph.D. in Counseling Psychology with a concentration in multicultural counseling from the University of Connecticut, Storrs. His research interests are multicultural counseling, group work, chaos theory, liberation psychology, technology, supervision, multicultural counseling, prisons, and gang-related behavior. Since 1995, Dr. Torres has presented papers at national and international conferences such as the American Counseling Association (ACA), the Association for Counseling Education and Supervision (ACES), the Association for Specialists in Group Work (ASGW), the American Educational Research Association (AERA), and the



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Interamerican Society of Psychology (SIP). His invited presentations include workshops in North Carolina, Washington, and New Hampshire and Keynote Speaker at the Puerto Rican Counseling Association. He is the recipient of the Best Group Research Article of the Year Award (March 2000), the Ohana Award (March 2004), and the Samuel H. Johnson Distinguished Service Award (March 2005). He is also a fellow for the Association for Specialists in Group Work and the American Counseling Association.

Of all the helping professions, why did you decide to become a professional counselor?

Counseling seems to be a more approachable profession compared to other helping professions (psychology, social work, etc.). Additionally, at the time of starting my doctoral studies, the concentration on multicultural counseling was not as popular as it is now, nor was the idea of a “counselor education” doctoral degree.

Psychologist Isaac Prilleltensky asserted that “The helping professions have a long history of perpetuating oppression with the most caring of attitudes.” What is your reaction to this comment?

I agree with the assertion, especially with respect to those who claim to be “culturally” and “social justice” minded. Counselors who believe that their views represent the “truth” are both oppressive and dangerous. Many realities and personal experiences can co-exist, without one version having to be better or worse than another. As helpers, we must keep ourselves in check and be open to experiencing other realities and truths which can be uncomfortable. Most people are strong, but relationships are often fragile.

What does it mean to adopt a social justice lens in clinical practice?

For me, it means that I am willing to look at the process of counseling as a combination of historical and ethno-political stances that include how the client and myself construct our realities and how we understand and accept knowledge. Being a counselor who uses social justice as the basis for practice means that I use a liberatory approach that begins with an important understanding: *I must first liberate myself from society’s restrictive views of reality and truth.*

I must also be able to recognize the complexity and richness of differences, and accept individual experiences of oppression.

What current issues do you think are particularly salient to professional counselors and their clients?

The biggest problem is the lack of acceptance for differences and the inability to tolerate the discomfort of having difficult conversations. Also, a lack of understanding of others—racism, homonegativity, sexism, etc.—is problematic. We are back to the days of intolerance and rigid beliefs.

What social justice advocates or organizations do you think are doing particularly important work in 2020?

Psychologists for Social Responsibility:

<https://psysr.net/>

National Coalition for Dialogue & Deliberation:

<http://ncdd.org/>

Critical Psychology:

<https://sites.google.com/view/criticalpsychology/home>

<https://www.facebook.com/groups/OccuPsy/>

National Latinx Psychology Association:

<https://www.nlpa.ws/>

CSJ's Professional Development Webinar Series:

Join us for our upcoming webinars this summer! See the flyer on the next page for details!

We are beginning to define the dates/times/topics for our Fall Series (September-December). Information on the Summer series is available on the website: <https://www.counseling-csj.org/webinar-series.html>, through ACA Connect and our social media platforms. We offer CEs for each webinar when participants register, participate for the full time, and complete a brief survey at the end of the webinar.

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**Counseling for Black Lives: Advocacy for
Addressing Undue Police Violence**

June 25, 2020 at 6PM EST

Presented by Dr. Darius Green

#ProtectingTransYouth

July 23, 2020 at 7PM EST

Presented by Dr. Lauren Shure

Social Justice in Schools

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Presented by Dr. Colette Dollarhide



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	Submission Deadline	Publication Date
Summer	6/1	7/1
Fall	9/1	10/1
Winter	12/1	1/1
Spring	3/1	4/1

- **Subject matter/topics:** All content should be relevant to social justice issues that impact professional counselors and/or their clients. If you'd like to run a topic by CSJ, please email newsletter co-editors Darius Green and Sam Steen at greenda@jmu.edu and ssteen@gmu.edu.
- **Word count:** There is no hard and fast rule, but most articles tend to be somewhere between 750 and 1,000 words.
- **Style:** Please use APA style and use in-text citations and references when appropriate.
- **Voice:** Some CSJ articles are more academic in nature, while others are more reflective. The voice of your article should be unique to you, and largely be determined by the purpose of your piece (e.g., providing information, persuasion, telling a personal story, etc.). However, please do avoid extremely casual language.
- **Photos:** Photos are strongly encouraged! Whenever possible, please submit a high-res images so that they can be printed without becoming blurry/pixelated. Please note that most images pulled off of a website are NOT high-res. If no photos are provided with a submission, the co-editors will most likely select one or more royalty-free images to accompany your piece.
- **Bio:** Please include a short bio (two to three sentences should be fine) along with your submission. Possible information to include: education, licensure, current work setting, research interests. Feel free to submit a head shot along with your bio!
- **Deadlines:** CSJ releases quarterly newsletters and accepts submissions on a rolling basis. If you are interested in submitting an article for our NEXT issue, please contact co-editors Darius Green & Sam Steen.