A Brief Orientation to

COUNSELING

Professional Identity, History, and Standards



Edward S. Neukrug



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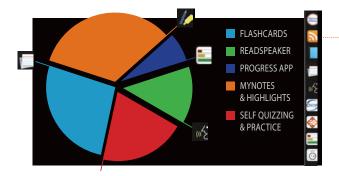
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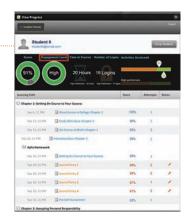
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SECOND EDITION

A Brief Orientation to

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Professional Identity, History, and Standards



Edward S. Neukrug

Old Dominion University



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Preface

Welcome to the second edition of *A Brief Orientation to Counseling: Professional Identity, History, and Standards.* The purpose of this book is to highlight those aspects of counseling that are most important in developing a counseling perspective and in building an affiliation with the field. The book has three sections, the first of which focuses on professional identity, the second of which looks at history and trends, and the last of which examines standards in the profession. An afterword provides information on applying to graduate school and on applying for a job. Let's take a quick look at these sections and the afterword and describe some of the special features of the book.

Section I: Professional Identity of the Counselor

Chapter 1: What Is Counseling and Who Is the Counselor? begins by offering a historical perspective on the words *guidance*, *counseling*, and *psychotherapy* and describes the difference between these three words. After acknowledging that some counselors do all three, the chapter moves on to offer a recent definition of *counseling* that was recently developed through a collaboration of 30 counseling associations. Next in the chapter, we discuss different types of counselors while noting their respective types of accreditation, credentialing, and professional associations. We briefly do the same for a number of related non-counseling mental health professionals so that you are familiar with those individuals with whom you will likely work.

Chapter 2: Professional Associations in Counseling and Related Fields examines the importance of professional associations and then describes, in a fair amount of detail, the American Counseling Association (ACA) as well as its 20 divisions, 56 branches, and 5 professional partnerships. In addition, specific membership benefits are relayed. As in Chapter 1, we offer information about our non-counseling professional colleagues by providing a brief overview of a number of professorial associations for non-counseling mental health professionals. These include the American Art Therapy Association (AATA), the American Association of Marriage and Family Therapy (AAMFT), the American Association of Pastoral Counselors (AAPC), the American Psychiatric Association (APA), the American Psychiatric Nurses Association (APNA), the American Psychological Association (APA), the National Association of Social Workers (NASW), the National Organization of Human Services (NOHS), and the National Rehabilitation Counseling Association (NRCA).

The last chapter in this section, *Chapter 3: Characteristics of the Effective Counselor*, examines a number of qualities that are embraced by effective counselors. We begin this chapter by offering a quick review of some of the research that has examined the effectiveness of counseling. Then we suggest there are nine factors that collectively work toward increasing counselor effectiveness, including six that jointly describe the working alliance—empathy, acceptance, genuineness, embracing a wellness perspective, cultural

competence, and the "it factor"—and three that together are related to the counselor's ability to deliver his or her theoretical approach: belief in one's theory, competence, and cognitive complexity.

Section II: History and Current Trends in the Counseling Profession

The first chapter of this section, *Chapter 4: Predecessors to the Counseling Profession: From Antiquity to Early Social Work, Psychology, and Psychiatry,* begins by identifying and discussing antecedents to the development of the mental health professions. The rest of the chapter gives a relatively brief history of social work, of psychology, and of psychiatry. In particular, how the early beginnings of these fields impacted the counseling profession is discussed. A summary table is provided at the end of the chapter to highlight points and help you remember salient events.

Chapter 5: The History of the Counseling Profession focuses solely on the 100-year history of counseling. The chapter takes us through the early history of vocational guidance and the impact testing and early methods of psychotherapy had on counseling. It then moves on to cover the emergence, diversification, and proliferation of the field during the second half of the twentieth century. In addition, new issues that have arisen within the past 20 years that will likely impact the counseling profession in the future are discussed. As in *Chapter 4*, a summary table is provided at the end of the chapter to highlight points and help you remember salient events.

Because the past is intimately connected with the future, the last chapter in this section is *Chapter 6: Current Issues and Future Trends in the Counseling Profession*. Here, we highlight a number of new approaches to counseling that are being emphasized today; the impact that technology is having and will have on counseling; new trends in health management, such as counselor inclusion within health care management, the use of medications, and the recent publication of the new diagnostic and statistical manual; changes in standards, such as the development of a new ethics code, new accreditation standards, international standards, changes in credentialing, and the adoption of multicultural counseling competencies and advocacy competencies; and recent professional issues such as division expansion and division autonomy, the 20/20 vision statement, and globalization.

Section III: Standards in the Counseling Profession

We begin this section with *Chapter 7: Accreditation in Counseling and Related Fields.* We start by describing the history of the Council for Accreditation of Counseling and Related Educational Professions (CACREP), and then discuss the many benefits of accreditation. We then offer an overview of the CACREP standards that includes a quick look at the master's- and doctoral-level standards. Next, we very briefly mention a new accreditation in counseling, the master's in psychology and counseling accreditation (MPCAC), and conclude with a brief description of accrediting bodies in related mental health fields.

Chapter 8: Credentialing in Counseling and Related Fields begins with a history of credentialing in counseling and related fields. We then discuss the benefits of credentialing

and distinguish three types of credentialing: registration, certification, and licensing. We next describe, in some depth, different kinds of counselor licensure and certification and how credentialing can serve as a unifying force for the counseling profession. The chapter concludes with a brief overview of credentialing in related mental health professions and a short discussion of the importance of lobbying for credentialing and other counseling-related concerns.

Chapter 9: Ethics in Counseling begins by defining values and morality and discussing their relationship to the law. We then go on to discuss the development of and need for ethical codes. After describing the ACA code in some detail, we next identify ethical "hot spots" and describe four models of ethical decision-making: problem solving, moral, social constructionist, and developmental. How to report ethical violations is discussed next, followed by legal issues related to ethical violations, understanding the difference between civil and criminal liability, the role of ethical codes in lawsuits, the importance of malpractice insurance, and using best practices to avoid malpractice suits.

The last chapter of this section is Chapter 10: Culturally Competent Helping: Multicultural Counseling and Social Justice Work. This chapter first defines multi-cultural counseling and social justice work and then goes on to offer some reasons why counseling is not working for many individuals from nondominant groups. After offering definitions for a number of common terms related to multicultural counseling and social justice work, we go on to describe three conceptual models to help us understand ourselves and our clients: the RESPECTFUL acronym, the tripartite model, and developmental models of cultural/racial identity. The chapter concludes with a description of the Multicultural Counseling Competencies and the Advocacy Competencies and how multicultural counseling and social justice work are considered the fourth and fifth forces in the history of the counseling profession.

Afterword: Applying to Graduate School and Finding a Job

At some point, most students who read this book will be applying to graduate school and/or applying for a job in the counseling profession. The afterword was developed to make this process easier. In the afterword you will find items to consider when choosing a graduate program and/or finding a job, some pointers to remember in the application process, how to develop your résumé and portfolio, specific resources to help you find a graduate program or a job, and how to deal with being chosen by or being denied entrance to your favorite school or your dream job.

Activities to Enhance Learning

You will find a number of items throughout the book that will add to the learning process. For instance, on a number of occasions I refer students to websites to gain additional information or to do a quick exercise to enhance your learning (e.g., to obtain your positivity ratio). I also offer a list of websites of professional associations in Appendix A. In addition, a number of tables can be found throughout the text that highlight points and enhance learning, such as the definitions Meyers and Sweeney use in their 5-factor Indivisible Self wellness inventory, which students can use to assess their wellness levels, or a table that shows the diverse nature of the United States. In addition, I have reflection exercises peppered throughout the book. These exercises allow you to consider a salient point more fully, such as when I ask you to think about what you might do if faced with a client who was suicidal or homicidal. In a similar vein, I have included activities throughout the book to highlight points. Finally, at the end of each chapter of this edition you will find a case study relative to each chapter's content.

Changes to This Edition

Although the order of the chapters and the main thrust of the chapters remain the same, there have been considerable changes in this edition. In addition to updating chapter content and references, I've added new material throughout the text. For instance, this book includes information about the Julea Ward case, which impacted how counselors work with clients who have different values; offers information about the stand ACA has taken against referring to counselors who practice sexual orientation change efforts (conversion or reparative therapy); and presents the Tarasoff case that speaks about how to handle counseling relationships where there is "foreseeable harm." I also updated the information about the ACA ethics code, as the 2014 version has now been developed. Similarly, information about CACREP was updated to reflect the new, 2016 standards. New statistics and information about credentialing was added, such as information about the board-certified coach (BCC) and the approved clinical supervisor (ACS). Each chapter had added to it a case study for students to reflect upon, and new activities and reflection exercises were peppered throughout. Also, this book now has a glossary of all of the major terms that are highlighted in the text. Although there were many additions to this text, the book maintains its core identity: to offer a brief review of the professional identity, history, and standards of the counseling profession in a manner that is interesting and sometimes even fun. Enjoy!

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Helping Professions Learning Center

Designed to help bridge the gap between coursework and practice, the Helping Professions Learning Center (HPLC) offers a centralized online resource that allows students to build their skills and gain even more confidence and familiarity with the principles that govern the life of the helping professional. The interactive site consists of the following learning components: video activities organized by curriculum area and accompanied by critical thinking questions; ethics-, diversity-, and theory-based case studies; flashcards and practice quizzes; a professional development center; and a research and writing center.

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Although there is just one author of this book, the team that goes into developing it is many. First, there are a number of individuals from Cengage Learning that help. Julie Martinez, Product Manager, is particularly supportive of me and also has given me ideas for new directions the book should take. Sean Cronin, Associate Content Developer, has been consistently helpful with a wide variety of matters and always available for discussion about the nature and purpose of the text. Thanks Sean! Others from Cengage which have helped get this edition of the book published include Margaux Cameron, Associate Marketing Manager; Stephen Lagos, Product Assistant; Erika Mugavin, IP Project Manager; Judy Inouye, Manufacturing Planner; and Ruth Sakata Corely, Senior Content Project Manager. In addition, Kailash Rawat, Associate Program Manager at Lumina Datamatics, along with Jill, the Copy Editor, were particularly helpful and responsive to me and worked closely with me in the revision of this text. Thanks Kailash and Jill.

A good text has thorough reviewers who can point out problems and suggest revisions. In this case, we had a number of faculty who helped with this lastest revision, including Aimee Adams—Lehigh University, Alan Basham—Eastern Washington University, Nancy Forth—University of Central Missouri, Johanna Garrison—WITC-Superior, Jonathan Lent—Marshall University, Cheryl Neale-McFall—West Chester University, Rebecca Rudd—Eastern Washington University, and Tiffany Stewart—Midwestern State University.

Final Thoughts

This book is streamlined and covers the most essential elements needed to help you build your professional identity and to assist you on your journey to becoming a professional counselor. It is filled with critical information that is known by only a chosen few—those who become counselors! The knowledge in this book makes us special and gives us a sense of purpose. Throughout the book you will find short exercises and some vignettes to highlight points. These are meant to be interesting, fun, and placed in the text to expand your knowledge base. My hope is that by the time you finish this book, you will be a changed person in the sense that you will have crossed over into the world of the counselor and have a new and important professional identity and affiliation.



OF THE COUNSELOR

his first section of the text describes the professional identity of the counselor. Although professional identity can be described in multiple ways, in these chapters we zero in on the kinds of degrees obtained and specialty areas focused upon by counselors, define the word counseling, highlight the purposes of professional associations, identify the professional associations of counselors, list credentials of counselors, and note the kinds of accreditation processes in the counseling field. In addition, to contrast the counselor with other professionals in the mental health field, we briefly identify related mental health professions and list their types of credentials and accreditation processes. Finally, to gain a perspective on the qualities that most counselors view as critical to a successful counseling relationship, we delineate nine personal and professional characteristics that lead toward counselor effectiveness.



What Is Counseling and Who Is the Counselor?

CHAPTER

LEARNING OBJECTIVES

- Define counseling and distinguish it from guidance and from psychotherapy.
- Examine similarities and differences between counselors and related mental health professionals on a variety of attributes, including education, accreditation, credentialing, and more.
- Identify and describe the different types of counselors, including school counselors; clinical mental health counselors; marriage, couple, and family counselors; addiction counselors; career counselors;

college counselors and student affairs professionals; clinical rehabilitation counselors; and pastoral counselors.

- Identify and describe related mental health professionals, including social workers, psychologists, psychiatrists, psychoanalysts, psychiatric-mental health nurses, creative and expressive therapists, human service professionals, and psychotherapists.
- Provide an overview of the various types of counselors and related mental health professionals discussed in the chapter.

... counseling has proven to be a difficult concept to explain. The public's lack of clarity is due, in part, to the proliferation of modern-day services that have adopted the counselor label. They range from credit counselors to investment counselors, and from camp counselors to retirement counselors. Although their services share the common ingredient of verbal communication and possibly the intention to be helpful, those services have little in common with ... [psychological counseling].

(*Hackney & Cormier*, 2013, p. 2)

ow come when I tell people I am a counselor, they often seem to look at me sideways—as if they are asking me to repeat what I said? Maybe it's because they are ill-informed about counselors, or maybe it's because there are so many different types of counselors (e.g., school, mental health, rehabilitation, college, and

so forth). Perhaps it's because some people view the word counselor generically a word that encompasses a number of mental health professionals such as psychologists, social workers, or human service professionals. Whatever the reason, I know that as a counselor my identity is unique and different from those of other related professionals. This chapter will help us define counseling, describe who the counselor is, and distinguish counselors from related mental health professionals.

Defining Counseling

When I hear the word **counseling***, I think of the following: "facilitative, here-and-now, short-term, change, problem-solving, being heard, and awareness." Distinguish this from the word **psychotherapy**, which I associate with "deep, dark, secretive, sexual, unconscious, pain, hidden, long-term, and reconstructive." And lastly, the word guidance makes me think of "advice-giving, direction, on-the-surface, advocacy, and support." However, not all people make similar distinctions. In fact, over the years some have suggested counseling could be anything from a problem-solving, directive, and rational approach to helping "normal" people—an approach that is distinguishable from psychotherapy (Williamson, 1950, 1958); to a process that is similar to but less intensive than psychotherapy (Nugent & Jones, 2009); to an approach that suggests there is no essential difference between the two (Corey, 2013; Neukrug, 2015).

Some confusion in distinguishing counseling from guidance and psychotherapy rests in the related history of the three words. The word guidance first appeared around the 1600s and was defined as "the process of guiding an individual." Early guidance work involved individuals acting as moral compasses and giving advice. This definition continued into the twentieth century when vocational guidance counselors used the word to describe the act of "guiding" an individual into a profession and offering suggestions for life skills. Meanwhile, with the development of psychoanalysis near the end of the nineteenth century came the word psychotherapy. Derived from the Greek words psyche, which means spirit or soul, and therapeutikos, which means caring for another, psychotherapy literally translates to "caring for the soul" (Kleinke, 1994).

During the early part of the twentieth century, vocational guidance counselors became increasingly dissatisfied with the word guidance and its heavy emphasis on advice giving and morality. Consequently, the word counseling was adopted to indicate that vocational counselors, like their distant cousins the psychoanalysts who practiced psychotherapy, also dealt with social and emotional issues and were not strictly advice givers. As mental health workers became more prevalent during the mid-1900s, they too adopted the word *counseling*, rather than use the word *guidance* with its moralistic implications, or *psychotherapy*, which was increasingly associated with psychoanalysis. Tyler (1969) noted that "those who participated in the mental health movement and had no connection with vocational guidance used the word counseling to refer to what others were calling [psycho]therapy ..." (p. 12).

Today, most lay people, many counseling students, and a fair number of counselor educators view some counselors and related mental health professionals as practicing what traditionally have been called guidance activities, others as conducting counseling, and still others as doing psychotherapy (see Figure 1.1). And perhaps they are right. For example, many school counselors probably use techniques that place them on the

^{*}Words in bold are listed at the end of every chapter and are defined in the glossary.

FIGURE 1.1 Guidance, Counseling, and Psychotherapy Continuum					
	Guidance	Counseling	Psychotherapy		
Short-term				Long-term	
Modifying behavior				Personality reconstruction	
Surface issues				Deep-seated issues	
Here and now				There and then	
Preventive				Restorative	
Conscious				Unconscious	
Helper-centered				Helpee-centered	
Normal developmental				Psychopathology oriented	
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left of the continuum in Figure 1.1, while a fair number of clinical mental health counselors likely use skills that place them on the right side of the figure. Where do you think rehabilitation counselors, college counselors, pastoral counselors, and addiction counselors might fall? And what about social workers and counseling and clinical psychologists? Where do you think they fall?

Despite the fact that different kinds of counselors sometimes practice in different ways, their training is remarkably similar. In fact, it has always been argued that a person with a master's degree in counseling is primarily a **counselor** and secondarily a school counselor, clinical mental health counselor, college counselor, or other type of counseling specialist (Shallcross, 2013). Thus, in an effort to unify the many counseling specialty areas, 29 counseling organizations endorsed a broad-based definition of counseling that most counselors could embrace:

Counseling is a professional relationship that empowers diverse individuals, families, and groups to accomplish mental health, wellness, education, and career goals. (Kaplan, Tarvydas, & Gladding, 2014, p. 366)

This definition places us under one umbrella—where we all are counselors, practicing counseling, and empowering our clients to accomplish their "mental health, wellness, education, and career goals." Now that we have defined the word *counseling*, this chapter will start us on our journey of examining the counseling profession, distinguishing counseling specialty areas from one another, and differentiating the counseling profession from related mental health professions (see Activity 1.1).

Activity 1.1 Defining Counseling

Are you satisfied with the definition above? Come up with your own definition of *counseling*. Consider doing the same for the words *guidance* and *psychotherapy*.

LO2

Counselors and Related Mental Health Professionals[†]

Although we tend to find a fair amount of overlap in the ways that various mental health professionals learn their skills, there also exist huge differences (Kottler & Shepard, 2015; Neukrug, 2016; Urofosky, 2013). This section of the chapter will first describe the kinds of degrees, credentials, and professional associations associated with counselors, including school counselors; clinical mental health counselors; marriage, couple, and family counselors; addiction counselors; college counselors and student affairs professionals; rehabilitation counselors; and pastoral counselors. Then we will offer brief descriptions of related mental health professionals including social workers, psychologists (clinical, counseling, and school), psychiatrists, psychoanalysts, psychiatric-mental health nurses, creative and expressive therapists, human service professionals, and psychotherapists. Table 1.1, which compares counselors and related mental health professions, will conclude the chapter.

Chapter 2 will go on to further describe the professional identities of counselors and related professionals by describing their professional associations. In Chapter 2, we will pay particular attention to the **American Counseling Association (ACA)** and its divisions, all of which represent the major counseling associations to which counselors belong. Prior to moving on in this chapter, you might want to complete Activity 1.2.

Activity 1.2 Comparing Mental Health Professionals

Prior to reading this section, compare school counselors; clinical mental health counselors; college counselors and student affairs professionals; addiction counselors; career counselors; rehabilitation counselors; and marriage, couple, and family counselors on each of the criteria below. When you have finished, do the same with related mental health professions (e.g., psychologists, social workers, psychotherapists, psychiatrists, and so forth). Based on your responses, discuss your current level of knowledge of these professions.

	Education	Accreditation	Credentials	Professional Associations	Amount Earned
Type of Counselor					



Counselors

In the past, the word **counselor** referred to any mental health professional who practiced counseling (Chaplin, 1975). However, today, counselors are generally seen as those who hold a master's degree in counseling. Today, we find a wide variety of counselors, such as school counselors, college counselors, mental health counselors, counselors in private practice, pastoral counselors, rehabilitation counselors, counselors in business and industry, and more. The counselor's training is broad and includes expertise in individual, group, and family counseling; administering and interpreting educational and psychological assessments; offering career counseling; administering grants and conducting research; consulting on a broad range of educational and psychological matters; supervising others; and presenting developmentally appropriate psychoeducational activities

[†]See Appendix A for a list of professional associations and their web addresses.

for individuals of all ages. Although not all counselors have in-depth expertise in psychopathology, they all have knowledge of mental disorders and know when to refer individuals who might need more in-depth treatment.

Today, counselors tend to have had coursework in common areas defined by the **Council for Accreditation of Counseling and Related Educational Programs (CACREP**, 2014a), the program accreditation body for most counseling programs. Although not all programs are CACREP accredited, most follow their guidelines. These include knowledge in the following eight content areas (for more details, see Chapter 7):

- 1. Professional counseling orientation and ethical practice
- 2. Social and cultural diversity
- 3. Human growth and development
- 4. Career development
- 5. Counseling and helping relationship
- 6. Group counseling and group work
- Assessment and testing
- 8. Research and program evaluation

In addition to the eight content areas, a counselor has taken coursework in a counseling specialty area, such as clinical mental health counseling, school counseling, college counseling and student affairs, and others. Such classes usually include content in the history, roles and functions, and knowledge and skills of that specialty area. Finally, all counselors have had the opportunity to practice their acquired skills and knowledge at field placements, such as a practicum or internship.

Master's level counseling programs accredited by CACREP include programs in school counseling; clinical mental health counseling; marriage, couple, and family counseling; addiction counseling; career counseling; and college counseling and student affairs. Currently, CACREP requires 60 credit semester hours for clinical mental health counseling; marriage, couple, and family counseling, and addiction counseling. The other programs currently require a minimum of 48 semester credit hours. However, beginning July of 2020, all master's level programs will require a minimum of 60 semester credit hours

In addition, to the above programs, there is a 48-credit **rehabilitation counseling** program accreditation that is administered through the **Council on Rehabilitation Education (CORE)**, as well as a new, 60-credit **clinical rehabilitation counseling** accreditation process that is jointly administered by CORE and CACREP. CORE and CACREP recently signed a planned merger agreement, and in July of 2017, CACREP will administer all of the rehabilitation counseling programs (CACREP, 2014b, n.d.a).

A master's level counselor can become a National Certified Counselor (NCC) by passing the National Counselor Exam (NCE) offered by the National Board for Certified Counselors (NBCC) (NBCC, 2015a). Students who are matriculated in CACREP-accredited programs can take the exam prior to graduating, and become certified upon passing the exam and graduating from their program, while others have to obtain post-master's clinical experience (NBCC, 2015a, 2015b). NBCC also offers subspecialty certifications as a Certified Clinical Mental Health Counselor (CCMHC), National Certified School Counselor (NCSC), and Master Addictions Counselor (MAC). In addition, today all 50 states, Guam, Puerto Rico, and the District of Columbia have established licensing laws that allow a counselor who has a master's degree, additional training, and supervision to practice as a Licensed Professional Counselor (LPC) (some states use a

different, but similar term) (ACA, 2011; 2015a). Whereas certification is generally seen as mastery of a content area, licensure allows counselors to practice independently and obtain **third-party reimbursement** for their practice. (An in-depth discussion of credentialing can be found in Chapter 8.) The American Counseling Association (ACA), and its 20 divisions, focus on a variety of counseling concerns and are the major professional associations for counselors (see Chapter 2).

The following describes the most common types of master's level counselors, including school counselors; clinical mental health counselors; marriage, couple, and family counselors; addiction counselors; career counselors; college counselors and student affairs professionals; rehabilitation counselors; and pastoral counselors.

School Counselors. School counselors have received their master's degrees in counseling with a specialty in school counseling. Some states credential school counselors on the elementary, middle, and secondary levels, while other states offer credentialing that covers kindergarten through 12th grade (K–12). The professional association for school counselors is the American School Counselor Association (ASCA), which is a division of ACA, although one can become a member of ASCA without joining ACA. In recent years, the ASCA National Model has been used as a model for the training of school counselors (ASCA, 2012). In addition, over the past few decades, there has been a push by professional training programs, professional associations, and many in the field to replace the term guidance counselor with school counselor, as the latter term is seen as de-emphasizing the guidance activities of the school counselor (Baker & Gerler, 2008).

School counselors are certified or licensed by their state boards of education, usually directly after having graduated from a state-approved school counseling program. If they so choose, school counselors can also become National Certified Counselors (NCCs), National Certified School Counselors (NCSCs), certification as a school counselor by the National Board for Professional Teaching Standards (NBPTS), and, in most states, with additional coursework and supervision, Licensed Professional Counselors (LPCs) (ASCA, 2015; NBCC, 2015b). Other certifications are also available if the school counselor chooses to specialize (e.g., addiction counseling, etc.).

Clinical Mental Health Counselors (Agency Counselors). Clinical mental health counselors are individuals who have obtained their degrees in clinical mental health counseling, or a closely related degree in counseling (e.g., agency counseling). Those who obtain a degree in clinical mental health counseling, or related degrees, are generally trained to conduct counseling for those who are struggling with life problems, emotional issues, or mental health disorders. They are usually found working in a wide variety of agencies or, in private practice, conducting counseling and psychotherapy.

The clinical mental health counselors' professional association is the American Mental Health Counselors Association (AMHCA), which is a division of ACA, although one can now be a member of AMHCA without joining ACA. If they so choose, clinical mental health counselors can become NCCs and LPCs. Other certifications are also available if the clinical mental health counselor chooses to specialize (e.g., Certified Clinical Mental Health Counselor [CCMHC], Master Addictions Counselor [MAC], and more) (NBCC, 2015b).

Marriage, Couple, and Family Counselors. Marriage, couple, and family counselors are specifically trained to work with couples and with families and can be found in a vast array of agency settings and in private practice. These counselors tend to have specialty coursework in systems dynamics, couples counseling, family therapy,