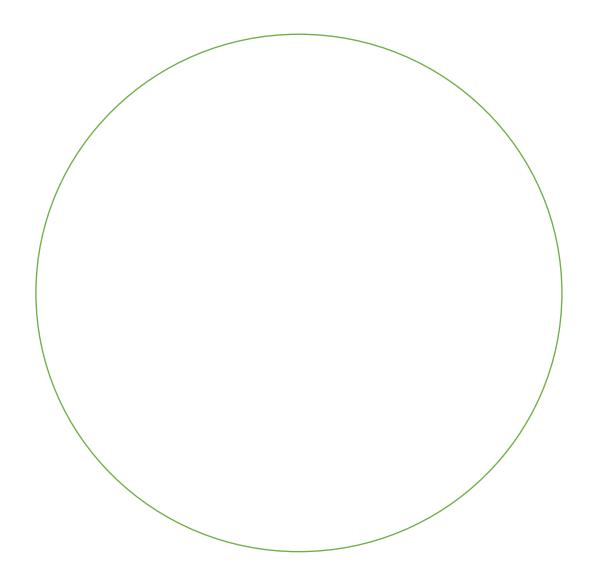
# Wheel of Power/Privilege





#### The Drawbridge

- As he left for a visit to his outlying districts, the jealous baron warned his pretty vile: "Do not leave the castle while I am gone, or I will punish you severely when I return!"
- But as the hours passed, the young baroness grew lonely, and despite her husband's warning, she decided to visit her lover, who lived in the countryside nearby. The castle was situated on an island in a wide, fast-flowing river. A drawbridge linked the island to the mainland at the narrowest point in the river. "Surely my husband will not return before me," she thought, and ordered the servant to lower the drawbridge and leave it down until she returned. After spending several pleasant hours with her lover the baroness returned to the drawbridge. Only to find it blocked by a gatemen wildly waving a long, cruel knife.
- "Do not attempt to cross this bridge, Baroness, or I will have to kill you" he cried. "The baron ordered me to do so."
- Fearing for her life, the bareness returned to her lover and asked him for help. "Our relationship is only a romantic one," he said. "I will not help." The bareness then sought out a boatman on the river, explained her plight to him and asked him to take her across the river in his boat.
- "I will do it but only if you can pay the fee of five marks."
- "But I have no money with me!" the baroness protested.
- "That is too bad. No money, no, ride," the boatmen said flatly.
- Her fear growing, the baroness ran crying to the home of a friend and, after explaining her desperate situation begged for enough money to pay the boatman his fee.
- "If you had not disobeyed your husband this would not have happened," the friend said. "I will give you no money."
- With dawn approaching and her last resource exhausted, the baroness returned to the bridge in desperation, and waited to cross to the castle, and was slain by the gateman.

#### After reading the scenario, rank the characters from 1-6.

1 = most responsible for the death of the Baroness | 6 = least responsible

	Individual Ranking	Group Ranking
Baron		
Baroness		
Gateman		
Boatman		
Friend		
Lover		

Be prepared to explain and discuss your rankings.

https://apps.apa.org/StaticContent/timeline-assets/timeline.html

https://allpsych.com/timeline/

https://psychology.okstate.edu/museum/history/

https://psychology.wikia.org/wiki/Timeline of psychology

 $\underline{https://www.learner.org/series/discovering-psychology/explorations/history-of-psychology-contemporary-foundations/}$ 

http://sites.gsu.edu/dmoore58/psychology-timeline/

#### **G1: Important Psychology Events: 19th Century**

The 19th century was when psychology was established as an empirical, accepted science. While measures would change within that 100-year span, the model of research and evaluation would begin to take shape.

- 1878: G. Stanley Hall becomes the first American to earn a Ph.D. in psychology.
- 1879: Wilhelm Wundt establishes the <u>first experimental psychology lab</u> in Leipzig, Germany dedicated to the study of the mind.
- 1883: G. Stanley Hall opens the first experimental psychology lab in the U.S. at Johns Hopkins University.
- 1885: Herman Ebbinghaus publishes his seminal "Über das Gedächtnis" ("On Memory") in which he describes learning and memory experiments he conducted on himself.
- 1886: Sigmund Freud begins offering therapy to patients in Vienna, Austria.
- 1888: <u>James McKeen Cattell</u> becomes the first professor of psychology at the University of Pennsylvania. He would later publish "Mental Tests and Measurements," marking the advent of psychological assessment.
- 1890: <u>William James</u> publishes "Principles of Psychology." Sir Francis Galton establishes correlation techniques to better understand the relationships between variables in intelligence studies.
- 1892: G. Stanley Hall forms the <u>American Psychological Association</u>(APA), enlisting 26 members in the first meeting.
- 1896: Lightner Witmer establishes the first psychology clinic in America.
- 1898: Edward Thorndike develops the Law of Effect.

# G2: Important Psychology Events: 1900 to 1950

The first half of the 20th century was dominated by two major figures: Sigmund Freud and Carl Jung. It was a time when the foundation of analysis was built, including Freud's examination of psychopathology and Jung's analytic psychology.

- 1900: Sigmund Freud publishes his landmark book, "Interpretation of Dreams."
- 1901: The British Psychological Society is established.
- 1905: Mary Whiton Calkins is elected the first woman president of the American Psychological Association. Alfred Binet introduces the intelligence test.
- 1906: <u>Ivan Pavlov</u> publishes his findings on <u>classical conditioning</u>. <u>Carl Jung</u> publishes "The Psychology of Dementia Praecox."
- 1911: Edward Thorndike publishes "Animal Intelligence," which leads to the development of the theory of operant conditioning.
- 1912: <u>Max Wertheimer</u> publishes "Experimental Studies of the Perception of Movement," which leads to the development of Gestalt psychology.
- 1913: Carl Jung begins to depart from Freudian views and develops his own theories, which he refers to as analytical psychology. <u>John B. Watson</u> publishes "Psychology as the Behaviorist Views" in which he establishes the concept of behaviorism.
- 1915: Freud publishes work on repression.
- 1920: Watson and Rosalie Rayner publish research on classical conditioning of fear with their subject, <u>Little Albert</u>.
- 1932: <u>Jean Piaget</u> becomes the foremost cognitive theorist with the publication of his work "The Moral Judgment of the Child."
- 1942: <u>Carl Rogers</u> develops the practice of <u>client-centered therapy</u>, which encourages respect and positive regard for patients.

### G3: Important Psychology Events: 1950 to 2000

The latter half of the 20th century was centered around the standardization of the diagnostic criteria of mental illness, hallmarked by the release of the <u>Diagnostic and Statistical Manual of Mental Disorders (DSM)</u> by the American Psychiatric Association. It is the foundational tool still in use today to direct diagnosis and treatment.

- 1952: The first Diagnostic and Statistical Manual of Mental Disorders is published.
- 1954: <u>Abraham Maslow</u> publishes "Motivation and Personality," describing his theory of a hierarchy of needs. He is one of the founders of humanistic psychology.
- 1958: Harry Harlow publishes "<u>The Nature of Love</u>," which describes the importance of attachment and love in rhesus monkeys.
- 1961: <u>Albert Bandura</u> conducts his now-famous <u>Bobo doll experimentin</u> which child behavior is described as a construct of observation, imitation, and modeling.
- 1963: Bandura first describes the concept of observational learning to explain aggression.
- 1974: <u>Stanley Milgram</u> publishes "Obedience to Authority," which describes the findings of his famous obedience experiments.
- 1980: The DSM-III is published.
- 1990: Noam Chomsky publishes "On the Nature, Use, and Acquisition of Language."
- 1991: Steven Pinker publishes an article introducing his theories as to how children acquire language, which he later publishes in the book "The Language Instinct."
- 1994: The DSM-IV is published.

#### **G4: Important Psychology Events: 21st Century**

With the advent of genetic science, <u>psychologists</u> are now grappling with the ways in which physiology and genetics contribute to a person's psychological being.

- 2002: Steven Pinker publishes "The Blank Slate," arguing against the concept of <u>tabula rasa</u> (the theory that the mind is a blank slate at birth). Avshalom Caspi offers the first evidence that genetics are associated with a child's response to maltreatment.<sup>3</sup> Psychologist Daniel Kahneman is awarded the Nobel Memorial Prize in Economics for his research on how people make judgments in the face of uncertainty.
- 2003: Genetic researchers finish mapping human genes, with the aim of isolating the individual chromosomes responsible for physiological and neurological conditions.<sup>4</sup>
- **2010**: Simon LeVay publishes "Gay, Straight, and the Reason Why," which argues that sexual orientation emerges from prenatal differentiation in the brain.
- 2013: The <u>DSM-5</u> is released. Among other changes, the APA removes "gender identity disorder" from the list of mental illnesses and replaces it with "gender dysphoria" to describe a person's discomfort with their assigned gender.
- **2014**: John O'Keefe, May-Britt Moser, and Edvard Moser <u>share the Nobel Prize</u> for their discovery of cells that constitute a positioning system in the brain that is key to memory and navigation.

Resources

https://www.counseling.org/Resources/Competencies/Advocacy Competencies.pdf

https://ct.counseling.org/2016/01/multicultural-and-social-justice-counseling-competencies-practical-applications-in-counseling/

https://www.counseling.org/docs/default-source/vistas/article 10.pdf?sfvrsn=1c003afc 12

https://openjournals.bsu.edu/jsacp/article/view/181/163

https://olivaespin.sdsu.edu/downloads/Psychotherapy Social Justice.pdf

https://www.apa.org/education/ce/teaching-social-justice.pdf

https://us.sagepub.com/sites/default/files/upm-assets/70428 book item 70428.pdf

https://www.apa.org/about/policy/multicultural-guidelines

www.radicalinprogress.org

# **Episode # 199: Decolonizing Practice Building with Shawna Murray-Browne**

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de-199-decolonizing-pracitce-building-shawna-

murray/id1207650846?i=1000489198831



#### \* HANDOUT



# Handout 72.1: Counseling and Advocacy Interventions

#### **DIRECTIONS**

This handout includes the six different levels of counseling and advocacy interventions that were listed in the American Counseling Association (ACA) multicultural and social justice counseling competencies. The six different levels of counseling and advocacy competencies are: intrapersonal, interpersonal, institutional, community, public policy, and international/global. Please read the full version of multicultural and social justice counseling competencies at the following link: www.counseling.org/knowledge-center/competencies in order to fully understand the different levels of counseling and advocacy interventions. You will be allowed 10 minutes to read this handout. If you need additional time, please let your instructor know. Please review more in depth two of the levels that were specifically assigned to your group.

Modified from Ratts, M. J., Singh, A. A., Nassar-McMillan, S., Butler, S. K., McCullough, J. R., & Hipolito-Delgado, C. (2015). *Multicultural and social justice counseling competencies*. Retrieved from www.counseling.org/docs/default-source/competencies/multicultural-and-social-justice-counseling-competencies. pdf?sfvrsn=20

#### IV. COUNSELING AND ADVOCACY INTERVENTIONS

"Privileged and marginalized counselors intervene with, and on behalf, of clients at the intrapersonal, interpersonal, institutional, community, public policy, and international/global levels."

a. "Intrapersonal: The individual characteristics of a person such as knowledge, attitudes, behavior, self-concept, skills, and developmental history.

Intrapersonal Interventions: Privileged and marginalized counselors address the intrapersonal processes that impact privileged and marginalized clients."

(p. 11)

b. "Interpersonal: The interpersonal processes and/or groups that provide individuals with identity and support (i.e. family, friends, and peers).

Interpersonal Interventions: Privileged and marginalized counselors address the interpersonal processes that affect privileged and marginalized clients."

(p. 12)

 "Institutional: Represents the social institutions in society such as schools, churches, community organizations.

Institutional Interventions: Privileged and marginalized counselors address inequities at the institutional level."

(p. 12)

d. "Community: The community as a whole represents the spoken and unspoken norms, values, and regulations that are embedded in society. The norms, values, and regulations of a community may either be empowering or oppressive to human growth and development.

Community Interventions: Privileged and marginalized address community norms, values, and regulations that impede on the development of individuals, groups, and communities."

(p. 13)



- "Public Policy: Public policy reflects the local, state, and federal laws and policies that regulate or influence client human growth and development.
  - Public Policy Interventions: Privileged and marginalized counselors address public policy issues that impede on client development with, and on behalf of clients."

(p. 13)

f. "International and Global Affairs: International and global concerns reflect the events, affairs, and policies that influence psychological health and well-being. International and Global Affairs Interventions: Privileged and marginalized counselors address international and global events, affairs and polices that impede on client development with, and on behalf of, clients,"

(p. 14)

# Handout 72.2: Case Presentation for Advocating for Jessica

# THE CASE OF JESSICA

#### Directions

To bring further clarity about how the advocacy competencies play an important role in counseling, please first read the following presented case carefully. Using the two different levels of counseling and advocacy interventions that were assigned to your group, please implement at least three counseling and advocacy interventions for the case. For the counseling and advocacy interventions that you implement with your group members, please indicate whether you will be acting "with" Jessica or acting "on behalf of" her. Please write your responses on the paper that your instructor passed out.

#### Case

You work at a community mental health agency as a counselor. One of your clients whose name is Jessica has been referred to you by her school counselor because her mother was very concerned about Jessica's severe depression and anxiety that she was having after her spinal cord injury due to a car accident. You have been seeing Jessica for four sessions, and it seems that you have started building a good relationship

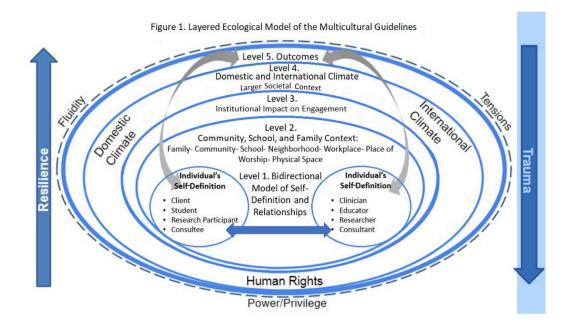
Jessica is a 15-year-old Hispanic female who was born and raised in the United States. Her family came to the United States approximately 30 years ago. She has two older brothers and two younger sisters. Last summer, Jessica was involved in a car accident with her father that resulted in her having a spinal cord injury. Jessica is still able to use her upper limbs after the accident; however, her spinal cord injury requires her to use a wheelchair. After her injury, Jessica became very depressed, and her grades went down. Jessica goes to a private high school that is affiliated with a Catholic church. She has been receiving a full scholarship to attend the private school for the last three years. The building in which she attends school is not considered accessible for students with disabilities, as it does not have power-assist doors on the restrooms or elevators. The school does not have any student with a major physical disability except Jessica, and accessibility for Jessica was not an issue before she acquired her disability. Right now, Jessica's

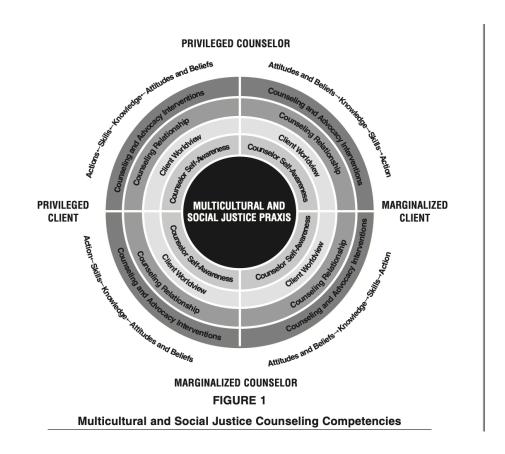


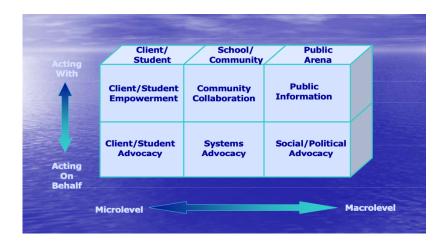
mother comes to school a few times each day to accompany her to the restroom. This requires a lot of time and energy for her mother. Jessica is also unable to attend many extracurricular activities due to the lack of somebody accompanying her. Her mother and father have begun to have a lot of fights at home during the last few months. In addition, her father was fired by his employer after he had a fight with a customer two months ago.

In the last counseling session Jessica shared the following concerns with you. "I feel like I'm a burden for everybody in the family. I think my family does not like me anymore because of my disability. I'm not as successful as I used to be and I feel depressed. My grades are very low and I do not want to study. Why should I bother to be a successful student? I cannot even go to the restroom by myself, so how can I would get a job? You know, my school is not accessible, and I cannot complain about this because my mother told me to not talk to school administrators. She said that if I talk to them about the restroom doors and the elevator, the school would no longer give me a scholarship. I do not want to go to another school because I really like my friends there. I hate my dad. You know, he almost killed me, and I have a disability just because of him. I rarely talk to him. He always yells at us at home, and he never helps my mother do anything. I do not even know why he still lives with us. It is so bad for my mother as she still loves him, but I do not understand how she could." Jessica started crying and said, "My life became a mess after this accident!" She added, "Last night, I heard my parents talking about getting divorced in Spanish. I guess they forgot that I can speak it." Jessica also talked about feeling very anxious around her parents and her teachers. She said that she does not want to go out anymore with her friends. Lastly, Jessica talked about the summer trip where she will go with her church choir to Mexico. "You know, this trip was always my dream, but I'm sure I won't be able to go because there won't be anybody who could help me. I also have no idea whether the places we will be visiting are accessible or not. I do not want to be a problem in the group."

Note: be aware that Title III of the Americans With Disabilities Act does not cover religious institutions; thus, private schools that are directly operated by religious institutions are not covered by the ADA. In other words, schools that are under this category do not have to be accessible for students with disabilities.







ADVOCACY COMPETENCIES: Lewis, Arnold, House & Toporek (2003)

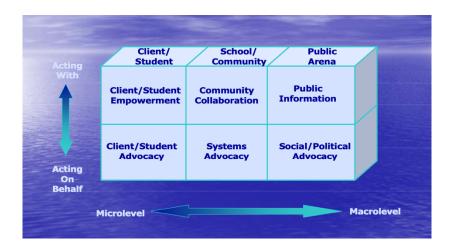
### Client/Student Empowerment

- An advocacy orientation involves not only systems change interventions but also the implementation of empowerment strategies in direct counseling.
- Advocacy-oriented counselors recognize the impact of social, political, economic, and cultural factors on human development.
- They also help their clients and students understand their own lives in context. This lays the groundwork for self-advocacy.

**Empowerment Counselor Competencies** 

In direct interventions, the counselor is able to:

- 1. Identify strengths and resources of clients and students.
- 2. Identify the social, political, economic, and cultural factors that affect the client/student.
- 3. Recognize the signs indicating that an individual's behaviors and concerns reflect responses to systemic or internalized oppression.
- 4. At an appropriate development level, help the individual identify the external barriers that affect his or her development.
- 5. Train students and clients in self-advocacy skills.
- 6. Help students and clients develop self-advocacy action plans.
- 7. Assist students and clients in carrying out action plans.



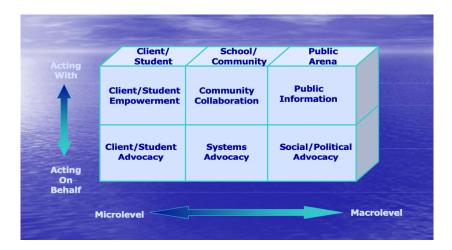
## Client/Student Advocacy

- When counselors become aware of external factors that act as barriers to an individual's development, they may choose to respond through advocacy.
- The client/student advocate role is especially significant when individuals or vulnerable groups lack access to needed services.

#### Client/Student Advocacy Counselor Competencies

In environmental interventions on behalf of clients and students, the counselor is able to:

- 8. Negotiate relevant services and education systems on behalf of clients and students.
- 9. Help clients and students gain access to needed resources.
- 10. Identify barriers to the well-being of individuals and vulnerable groups.
- 11. Develop an initial plan of action for confronting these barriers.
- 12. Identify potential allies for confronting the barriers.
- 13. Carry out the plan of action.

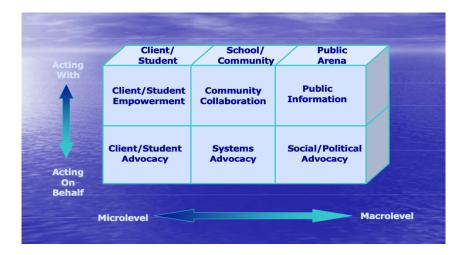


#### **Community Collaboration**

- Their ongoing work with people gives counselors a unique awareness of recurring themes. Counselors are often among the first to become aware of specific difficulties in the environment.
- Advocacy-oriented counselors often choose to respond to such challenges by alerting
  existing organizations that are already working for change and that might have an
  interest in the issue at hand.
- In these situations, the counselor's primary role is as an ally. Counselors can also be helpful to organizations by making available to them our particular skills: interpersonal relations, communications, training, and research.

#### **Community Collaboration Counselor Competencies**

- 14. Identify environmental factors that impinge upon students' and clients' development. Alert community or school groups with common concerns related to the issue.
- 15. Develop alliances with groups working for change.
- 16. Use effective listening skills to gain understanding of the group's goals.
- 17. Identify the strengths and resources that the group members bring to the process of systemic change.
- 18. Communicate recognition of and respect for these strengths and resources.
- 19. Identify and offer the skills that the counselor can bring to the collaboration.
- 20. Assess the effect of counselor's interaction with the community.



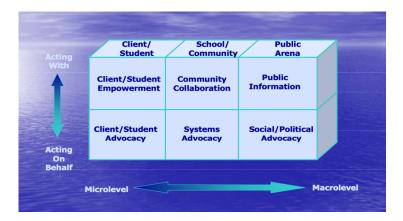
#### Systems Advocacy

- When counselors identify systemic factors that act as barriers to their students' or clients' development, they often wish that they could change the environment and prevent some of the problems that they see every day.
- Regardless of the specific target of change, the processes for altering the status quo have common qualities. Change is a process that requires vision, persistence, leadership, collaboration, systems analysis, and strong data. In many situations, a counselor is the right person to take leadership.

**Systems Advocacy Counselor Competencies** 

In exerting systems-change leadership at the school or community level, the advocacyoriented counselor is able to:

- 22. Identify environmental factors impinging on students' or clients' development
- 23. Provide and interpret data to show the urgency for change.
- 24. In collaboration with other stakeholders, develop a vision to guide change.
- 25. Analyze the sources of political power and social influence within the system.
- 26. Develop a step-by-step plan for implementing the change process.
- 27. Develop a plan for dealing with probable responses to change.
- 28. Recognize and deal with resistance.
- 29. Assess the effect of counselor's advocacy efforts on the system and constituents.



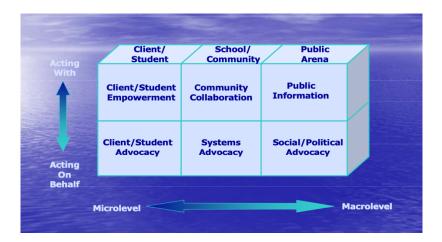
#### **Public Information**

- Across settings, specialties, and theoretical perspectives, professional counselors share knowledge of human development and expertise in communication.
- These qualities make it possible for advocacy-oriented counselors to awaken the general public to macro-systemic issues regarding human dignity

**Public Information Counselor Competencies** 

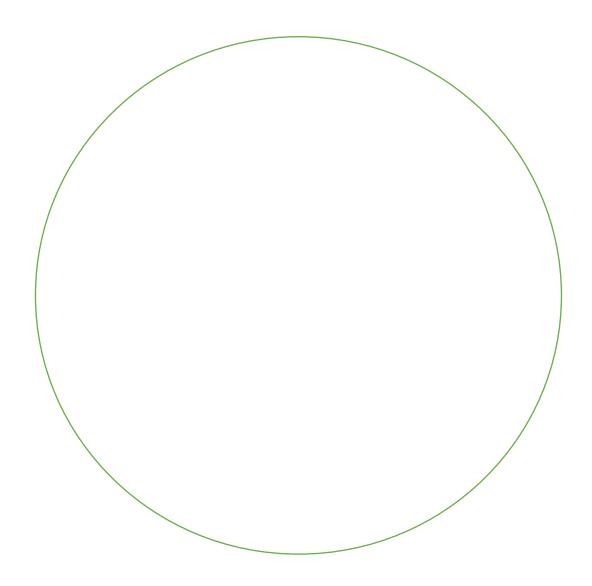
In informing the public about the role of environmental factors in human development, the advocacy- oriented counselor is able to:

- 30. Recognize the impact of oppression and other barriers to healthy development.
- 31. Identify environmental factors that are protective of healthy development.
- 32. Prepare written and multi-media materials that provide clear explanations of the role of specific environmental factors in human development.
- 33. Communicate information in ways that are ethical and appropriate for the target population.
- 34. Disseminate information through a variety of media.
- 35. Identify and collaborate with other professionals who are involved in disseminating public information.
- 36. Assess the influence of public information efforts undertaken by the counselor.



#### Social/Political Advocacy

- Counselors regularly act as change agents in the systems that affect their own students and clients most directly. This experience often leads toward the recognition that some of the concerns they have addressed affected people in a much larger arena.
- When this happens, counselors use their skills to carry out social/political advocacy.
   Social/Political Advocacy Counselor Competencies
   In influencing public policy in a large, public arena, the advocacy-oriented counselor is able to:
  - 37. Distinguish those problems that can best be resolved through social/political action
  - 38. Identify the appropriate mechanisms and avenues for addressing these problems.
  - 39. Seek out and join with potential allies.
  - 40. Support existing alliances for change.
  - 41. With allies, prepare convincing data and rationales for change.
  - 42. With allies, lobby legislators and other policy makers.
  - 43. Maintain open dialogue with communities and clients to ensure that the social/political advocacy is consistent with the initial goals.



References available upon request.

--- Suggested reading by Dr. Pirayesh is as follows:

https://www.theguardian.com/news/2021/apr/20/the-invention-of-whiteness-long-history-dangerous-idea?CMP=fb\_gu&utm\_medium=Social&utm\_source=Facebook&fbclid=IwAR2\_IK5WMANiIGN9prR\_YG5XRZtanHQb-U4G9M11RkLsTE6Kxyv67mMCsKm4#Echobox=1618915660

https://lareviewofbooks.org/article/future-no-future-depression-left-politics-mental-health/