THE HISTORICAL DEVELOPMENT OF PROFESSIONAL COUNSELING AND AN OVERVIEW OF VOCATIONAL STANDARDS IN THE UNITED STATES

Ümüt ARSLAN
Asst. Prof. Dr., Izmir Democracy University, umut.arslan@idu.edu.tr
ORCID Number: 0000-0002-3611-9607

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ABSTRACT
The American counseling field has reached most credentials, which are expected from a profession. The current standards in the United States provide safe counseling environment for clients and protect counselors’ rights. Understanding the developments and key points of historical procedures could help international researchers to contribute the developments in their country. Furthermore, several countries have traced the American counseling professional pathway to establish their counseling fields. In the U.S., counseling professionals mostly began their efforts in the American Counseling Association (ACA), and developed independent accreditation, certification, and licensure processes within new organizations. Thus, developments counseling in the United States parallel ACA’s history. The aim of this study is to help international counselors, counselor educators, and counseling by benefiting of developments in the United States. For this purpose, this study introduces historical steps and the current structure and standards of (a) ACA, (b) accreditation in counselor education, (c) licensure and certification of counseling professionals, and (d) ethical codes in the United States.

Keywords: Counseling, United States, vocational standards.

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INTRODUCTION

Counseling is developing in many countries. Those countries following developments from western countries, especially the United States by sending students and professors to study, inviting professors for a speech, translating textbooks, and following professional journals (Hohenshil, Amundson, & Niles, 2013). The reason of following the developments in the United States is that American counseling has attained most of the credentials that are expected of a professional discipline: (a) requiring knowledge and research from professionals, (b) building professional organizations, (c) governing trainings, (d) establishing ethics codes, and (e) creating standards for entering and staying in the profession (Glosoff, 2013). Of course, this did not just happen. These standards were established step-by-step, but also with American researchers’ foresight which led to current counseling standards. Clearly, several areas need development (Mascari & Webber, 2013; Saunders, Barros-Bailey, Chapman, & Nunez, 2009), but the current standards in the United States provide a safe counseling environment for clients, and protect counselors’ rights (Glosoff, 2013). Understanding the developments and key points of historical procedures could help international researchers to make the developments in their country faster.

This article reviews developments in the American counseling field and describe current counseling structure and standards in the United States. The main purpose of this article is to show how historical developments have created current counseling standards and structure in the United States, and how these developments can be beneficial for other countries in which counseling is developing.

The History of American Professional Counseling and the American Counseling Association

Counseling has been developing as a professional field in the United States for more than a century (Neukrug, 2011). Frank Parsons, known as the father of vocational guidance, wrote about individual counseling plans and opened a vocational center at the beginning of the 20th century in Boston (Glosoff, 2013). Due to the influence of his vocational work and research, the National Vocational Guidance Association (NVGA) was established, focusing on career counseling (Glosoff, 2013). Economic (the Great Depression), educational (developments in psychology), and social (World War I) changes contributed to developments in the counseling field (Glosoff, 2013).

The American Personnel and Guidance Association (APGA) was established by four independent associations, including the NVGA, in 1952 (ACA, 2016a). The name was changed to the American Association for Counseling and Development (AACD) in 1983 (ACA, 2016a). Finally, the name became the American Counseling Association (ACA) in 1992 (ACA, 2016a).

The current mission of the ACA is: “The mission of the American Counseling Association is to enhance the quality of life in society by promoting the development of professional counselors, advancing the counseling profession, and using the profession and practice of counseling to promote respect for human dignity and diversity” (ACA, 2016b, para. 1). ACA is an organization that encourages the development of mental health and other counseling
professionals in the United States and other countries with 19 divisions, 56 branches, and four regional associations (ACA, 2016a; Glosoff, 2013). ACA provides educational opportunities, such as publishing books and journals and organizing conferences and workshops (Glosoff, 2013).

Beginning in 1999, individual division members are no longer required to also belong to ACA (Glosoff, 2013). After this decision, some divisions such as the American Mental Health Counseling Association (AMHCA) and the American School Counseling Association (ASCA), the two largest divisions, decided to collect their own membership fees and become independent not-for-profit organizations (Glosoff, 2013; AMHCA, 2012). AMHCA had made several previous attempts to be an independent organization because AMHCA and ACA (formerly APGA, then AAD) had a different agenda, with AMHCA primarily focused on mental health counseling (Colangelo, 2009). For similar reasons, ASCA became an independent organization to focus on school counseling (ASCA, 2013). These two associations have also published their own codes of ethics (AMHCA, 2010; ASCA, 2010).

**Accreditation in Counselor Education**

Basically, “Accreditation implies the setting of minimal standards which training programs must meet” (CACREP, 2016a, para. 1). ACA and the Association for Counselor Education and Supervision (ACES), a division of ACA, began preparing counseling standards in the 1960s (Glosoff, 2013). They subsequently published guides and standards for counseling programs (Glosoff, 2013). The purpose of establishing the Council of Rehabilitation Education (CORE) and Council for Accreditation of Counseling and Related Educational Programs (CACREP) was to improve standards in counselor education (Glosoff, 2013). Currently, CORE creates standards for rehabilitation counseling education programs (Benshoff, Robertson, Davis, & Koch, 2008), and CACREP creates standards for counseling education programs (Glosoff, 2013). Both organizations have attempted to combine their counseling standards nationwide in the last 30 years but have not yet accomplished this (Mascari & Webber, 2013).

**Council of Rehabilitation Education (CORE)**

CORE represents the policy-making organization for rehabilitation counseling (Shaw & Kuehn, 2009). CORE published its original professional standards in 1980-81, followed by four revisions in 1987-88, 1996-97, 2003-04, and the most recent published in 2010 (CORE, 2016; Shaw & Kuehn, 2009; Benshoff et al., 2008). CORE embodies eleven organizations, including the Commission on Rehabilitation Counselor Certification (CRCC), American Rehabilitation Counseling Association (ARCA), as well as public representatives (Glosoff, 2013).

Shaw and Kuehn (2009) explained the procedure of CORE accreditation:

> The CORE Commission on Standards and Accreditation (hereafter referred to as the CORE Commission) reviews the self-study, the site visit report, and the preliminary report and makes recommendations to CORE on each program’s final report and accreditation status, length of accreditation, conditions (required changes) and recommendations (suggested, but not required changes). CORE then makes the final accreditation decisions and issues the final report for each program reviewed (p. 69).
Council for Accreditation of Counseling & Related Educational Programs (CACREP)

ACES established CACREP under ACA with other divisional support as an autonomous entity in 1982 (Mascari & Webber, 2013; Glosoff, 2013). Since then, CACREP has published national standards for counselor education programs (Mascari & Webber, 2013). In fact, ACES created the first standards for counselor education in 1973; they were called the “Standards for Entry Preparation of Counselors and Other Personnel-Service Specialists.” After the Council for Higher Education Accreditation (CHEA) recognized CACREP (Kaplan & Gladding, 2011), these standards became the CACREP Accreditation Standards and have been revised regularly by CACREP (Bobby, 2013).

Mascari and Webber (2013) discussed CACREP as an entity that provided for standardization of accreditation nationwide. They noted that CACREP and CORE discussed the possibility of combining their accreditations. CACREP and CORE would like (a) their new accreditation standards to mesh with the National Counselor Examination for Licensure and Certification (NCE), and (b) graduation from CACREP and CORE accredited programs to be added to licensure requirements by state licensure boards (Mascari & Webber, 2013).

As a result of this teamwork, many states require graduating from a CACREP or CORE accredited program or a program with equivalent content, for licensure (Kaplan & Gladding, 2011; ACA, 2010). Recently, some state licensure boards started a process of adopting licensure requirements that include graduation from a CACREP accredited institution (Kaplan & Gladding, 2011). Nevertheless, cooperation between CORE and CACREP slowed when CACREP decided to require programs to hire only faculty who have counselor education doctoral degrees after 2013 (Shaw & Kuehn, 2009; Bobby, 2013). CORE thought that decision could very negatively affect rehabilitation counseling programs (Shaw & Kuehn, 2009). Thirty-one counseling organizations, including CACREP, engaged in a project titled 20/20: A Vision for the Future of Counseling (ACA, 2016d). One purpose of the project was to encourage licensure boards to force graduation from a CACREP-accredited program as a license requirement (Kaplan & Gladding, 2011).

Currently, CACREP accredits 598 counseling programs at the master’s level (CACREP, 2016b) in six areas: addictions; career; clinical mental health; marriage, couples, and family; school; and student affairs and college counseling (CACREP, 2016c; Bobby, 2013). There are also 63 CACREP-accredited doctoral level counselor education and supervision programs (CACREP, 2016b). The purpose of CACREP-accredited doctoral programs is to prepare faculty, supervisors, researchers, and practitioners in the counseling field (CACREP, 2009; Kaplan & Gladding, 2011).

Licensure and Certification for Counseling Professionals

While Shimberg (1981) describes licensure as “a process by which an agency of government grants permission to an individual to engage in a given occupation upon judging that the applicant has attained the minimal degree of competence required to ensure that the public's health, safety, and welfare will be reasonably well protected”
Forrest and Stone (1991) describe certification as “a non-statutory process by which a governmental body, agency, or association officially grants permission for an individual to use a title adopted by a profession, providing the individual has met certain predetermined professional qualifications (p. 13). As counseling in the United States has become professionalized, licensure has become a necessity for professional and ethical practice (NBCC, 2016a; ACA, 2016c). Certification is an additional significant professional qualification (NBCC, 2016a; ACA, 2016c). This is the main difference between licensure and certification. For instance, a certificate, that highlights particular professional qualifications, is a voluntary addition to licensure that some practitioners obtain (NBCC, 2016a; ACA, 2016c). However, a state license (e.g. LPC, LCPC, etc.) is mandatory to work as a professional counselor (NBCC, 2016a).

Certification

Certification is defined in the CACREP Standards (2009) as “the process by which an agency or association grants recognition to a person who has met predetermined qualifications specified by that agency or association” (p. 59). Although they are not the only ones, the National Board of Certified Counselors (NBCC) and CRCC are the two biggest and most significant organizations that offer certification for professional counselors (Bobby, 2013; Leahy & Holt, 1993).

National Board of Certified Counselors (NBCC)

ACA founded NBCC in 1982 (Bobby, 2013) to define and manage certification procedures in professional counseling (Milsom & Akos, 2007). NBCC offers the National Counseling Certification (NCC), which is the best-known national certification in the United States (Milsom & Akos, 2007). The National Counselor Examination (NCE) is mandatory to obtain the NCC (Milsom & Akos, 2007). The goals of NBCC are to create and organize a nationwide certification system for mental health professionals who voluntarily obtain high criteria for counseling and encourage them to continue to hold those criteria (NBCC, 2016b; NBCC, 2016c).

The Commission Rehabilitation Counselor Certification (CRCC)

Leahy and Holt (1993) summarized the history of the CRCC through 1993. Discussions about credentialing in counseling encouraged ARCA and the National Rehabilitation Counseling Association (NRCA) to work together. They organized a committee of 12; this committee drafted the first certification structure for rehabilitation counselors in 1971. They then established the CRCC in 1974. The CRCC became an independent organization after the National Commission on Health Certifying Agencies (NCHCA) wrote regulations in 1977. CRCC has integrated other councils and organizations into their body and represented them in the decision process. CRCC also created a counseling review examination in 1976. After 1990, CRCC also began collaborating with CORE to increase the consistency between CORE-accredited programs and the CRCC examination (Leahy & Holy, 1993).

Saunders, Barros-Bailey, Chapman, and Nunez (2009) summarized the developments in Rehabilitation Counselor Certification after 1993. CRCC is still one of the most vital credentialing organizations in counseling. Currently,
the CRCC Commission has 17 members from the public, representatives of CRCC, and representatives of other associations and organizations including CORE. For licensing, CORE and CRCC continue their collaborative work. They have worked together since 2008 to ensure that state licensure boards recognize CRCC’s examinations and CORE’s accredited programs (Saunders et al., 2009).

Licensure

CACREP (2009) defines licensure as “the process by which a state agency or government grants permission to a person to engage in a given profession and to use the designated title of that profession after the applicant has attained the minimal degree of competency necessary to ensure that public health, safety, and welfare are reasonably well protected” (p. 60). Although state license boards collaborate with certification and accreditation organizations (Mascari & Webber, 2013), each state licensure board requires different education, examination processes, practice standards, and other skills from professional counseling candidates (ACA, 2016c).

Ethical Codes of Professional Counseling Field and Associations

ACA created an Ethical Practices Committee in 1953 to develop a code of ethics (Walden, Herlihy, & Ashton, 2003). The first version of the ethical code was published in 1959. Since then, based on developments in mental health, clients’ needs, and American culture, it has been updated several times (Walden et al., 2003). The ACA Ethics Committee first published an Ethical Standards Casebook in 1965, and they have updated it, along with updated codes of ethics, periodically since then (Walden et al., 2003). The committee also provides books and guides, participates in educational media programming, conferences, and workshops to help inform professionals counselors and counselors-in-training (Walden et al., 2003). The ACA Ethics Committee published Policies and Procedures for Processing Complaints of Ethical Violations in 1997 (Walden et al., 2003). They are also responsible for evaluating violations of their members’ ethical standards. These violations are summarized every year in their annual reports (Walden et al., 2003). Counseling ethical codes also reflect the history or evolution of the counseling field (Mabe & Rollin, 1986; Herlihy & Remley Jr., 1995). Although ethical codes always fall short of ideal, they are a vital part of the counseling field (Mabe & Rollin, 1986). Through time, professional counselors have moved from self-oversight to oversight by federal, state, and local governments, licensure boards, and specific agencies (Mabe & Rollin, 1986).

In addition to the ACA code of ethics (ACA, 2014), other counseling associations such as AMHCA and ASCA have published their own ethical codes (Glosoff, 2013; AMHCA, 2010; ASCA, 2010); therefore, ethical standards have developed a complex structure (Remley Jr. & Huey, 2002). An example in Remley Jr. and Huey’s (2002) article states “a school counselor who is a member of the ASCA, and the ACA, who is certified by the NBCC, and who is licensed by his or her state counseling licensure board has agreed to abide by four separate sets of ethical standards” (p. 3). Despite this potential confusion, effectively, creators of the various codes of ethics have tried to maintain consistency-reduced variances among the different codes (Remley Jr. & Huey, 2002).
ASCA established a code of ethics for professional counseling in school settings (Remley Jr. & Huey, 2002). Particularly school counselors, educators, and supervisors are the main target of these codes (ASCA, 2010). The intention is to define the responsibilities of these professionals in order to maintain high standards in school counseling settings (ASCA, 2010). The idea of creating codes of ethics for mental health counselors was mentioned in the 1980s during the AMHCA certification efforts (Colangelo, 2009). The latest revised AMHCA code of ethics was published in 2010 (AMHCA, 2010).

Ethical Codes of Certification Boards

In addition to professional associations, certification boards such as NBCC and CRCC have also created ethical codes for professional counselors. NBCC published an ethical code for National Certified Counselors to define their expectation of counselors (NBCC, 2012) and to guide them in significant practice issues (Baez & Guilbert, 1998). Additionally, CRCC established the first ethical codes for rehabilitation counselors along with NRCA and ARCA (Kirk & la Forge, 1995). CRCC’s latest revision was in 2009 (CRCC, 2009).

Current ACA Code of Ethics

In 2014, ACA announced the latest version of their code of ethics. This new version contains a preamble, a purpose, and nine content sections (ACA, 2014). The preamble section introduces ACA as a professional organization, articulates central values of the counseling field, and identifies principles of ethical behavior such as autonomy, non-maleficence, beneficence, justice, fidelity, and veracity (ACA, 2014). The aim of the preamble section is to provide clarifying context for the ethical codes and show the public the values of the counseling profession (Herlihy & Corey, 2015; ACA, 2016e). The purpose section of the ethical codes includes six core goals (ACA, 2014). In the context of the ACA ethical codes, each of the nine sections (the counseling relationship, confidentiality, professional obligations, relationships with colleagues in the field, evaluation, assessment, and data interpretation, supervision, training, and education, research and publication, virtual counseling, technology, and social media, ethical issues) covers counselors’ ethical responsibilities in a different area in the counseling field (ACA, 2014).

Concluding Comments: Why is American Counseling History and Current Status Important for Other Countries

Counseling history of the United States shows that qualified counselor educators and researchers are the main actors of establishing accreditations, credentials, and associations for professional identity (Glosoff, 2013). As a result of their influences on the American counseling field, most of the credential requirements of counseling have been reached. The requirements of accreditation, certification and licensure for qualified counselors also help prevent counselors from committing further ethical violations. The history and current situation of those terms in the United States are complex and sophisticated. Associations, councils, and other organizations also work both individually and collectively in order to improve the standards of counseling (Glosoff, 2013; Neukrug, 2011).
On the other hand, counseling is a profession that has been developing all over the world (Hohenshil, Amundson, & Niles, 2013). Some counseling approaches from different countries were established and advanced by following American counseling models (Moodley, Gielen, Uwe, & Wu, 2013), even though the meaning of counseling can differ among countries (Hohenshil et al, 2013; Moodley et al., 2013). American counseling system influences other countries’ counseling strongly. Research and practicum numbers in American counseling field inarguable much higher than other countries.

Of course, without understanding cultural dynamics and backgrounds, simply duplicating western counseling methods in some countries could be counterproductive (Hohenshil et al., 2013; Moodley et al., 2013), and American counseling structure also related to with domestic associations, constitutions, health policy, democracy, and especially culture. However, counseling developments in the United States could still lead other countries, which are willing to develop the level of their counseling standards. Some countries realized that they could create their own professional counseling approaches through developments that came from external sources (Shepherd, 2015). Some of these, such as China, Turkey and India have begun to create their own counseling identities (Hohenshil et al., 2013; Moodley et al., 2013). Consequently, understanding the historical development steps of American professional counseling could help other countries to develop and maintain their professional counseling fields.

REFERENCES


