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Globalization and Counseling: Professional Issues for Counselors

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Scholars have examined globalization for many years in terms of its impact on individuals, but it remains a concept not often discussed in the counseling literature. As counseling transforms from a Western-based practice to a global phenomenon, it is important to understand professional counseling within an international and multicultural context. In this article, the ways in which the process of globalization are currently impacting the field of counseling, implications and future research directions are examined. Global mental health and wellness, culture, and access and structural limitations are also presented.

Keywords: globalization, international, multicultural, counselor education, professional counseling

As our world becomes increasingly connected economically, politically, technologically, and culturally, counseling is transforming from a Western-based practice to a global phenomenon. The globalization of counseling has placed the field on the cusp of growth and innovation. Such changes involve not only a willingness to adapt and perhaps redefine current counseling theories, but to hold our most basic assumptions regarding the nature of human change so loosely that we are willing to let counseling develop and evolve indigenously in international communities. Accordingly, this article highlights the impact of globalization on the field of counseling, with particular attention given to the spread of Western-based counseling practices to the international community. In order to do so, we begin by defining globalization and considering the progression of multicultural counseling toward a more global vision. We then examine the ways in which the process of globalization is currently impacting the field of counseling. Lastly, the implications for counseling as an increasingly global phenomenon and future research directions are considered.

Globalization

Globalization can be referred to the “McDonaldization” or “Westernization” of the world. These terms imply that globalism entails an invasion of Western capitalism into undeveloped nations and suggests the idea that the world is becoming homogeneous. Modern scholars of globalization (Featherstone, 1996; Tomlinson, 1999), however, point out that such oversimplifications only describe one aspect of globalism, and note that globalization is better defined by a series of interactions between nations than by a unidirectional Western conquest. Accordingly, we define globalization in this article as a continual process of interaction and integration among national economies, societies and cultures (Rothenberg, 2003).

There is a dynamic interplay between both global and local economies, politics, technologies and cultures in which local communities do not passively give way to outside influences, but rather actively react to the process by absorbing, assimilating, and/or resisting the worldviews, products and politics introduced by the West (Featherstone, 1996). This global-local relationship transforms the local lived experiences of the individuals and has increasing global consequences (Tomlinson, 1999).

Scholars in the counseling field have already increased their understanding of the process by which individuals in minority groups adapt to dominate cultural norms. Traditionally, it was assumed that acculturation was a one-dimensional process in which individuals demonstrated increasing adherence to the dominant culture and a lessening of adherence to the minority orientation. More recently, scholars understand this process to be multidimensional, involving both

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acculturation and enculturation (Kim & Abreu, 2001).

Similar to modern theories of globalization, counselors are increasingly aware of the dynamic interplay that exists between dominant and individual culture. In this manner, as the counseling profession is introduced and developed in international communities, not only will local communities and individuals living in those communities be transformed, but the practice of traditional, Western counseling may be fundamentally redefined as locals actively react and adapt to the practice. Individual views and experiences of globalization are contingent upon social location and personal experiences (Featherstone 1996; Tomlinson, 1999). In considering the globalization of counseling, the application of this assumption implies that each local community and individual assigns personal meaning and reacts differently to the experience of counseling. As a result, counseling and the implementation of counseling services in non-U.S. cultures differs significantly from country to country and community to community, with each model being a valid and effective method of helping individuals within a given social context.

Cultural Diversity and Counseling Beyond U.S. Borders

For nearly half a century, the field of counseling has gained improved awareness and understanding of the cultural differences that exist within the U.S. Counselors have specifically focused on understanding the cultural dynamics that occur on a micro level, between the counselor and an individual client or small group of clients, in order to improve the provision of services in the U.S. As counselors became increasingly alert to and accepting of the cultural similarities and differences between racial/ethnic groups, Pedersen (1991) heralded multiculturalism as counseling's "fourth force" (p. 93), as it became a "hot" topic in the profession.

In recent years the field has begun to expand counseling beyond U.S. borders to a world that is increasingly interconnected and interdependent. This "fifth force" in counseling has been gaining speed over the past decade as many countries throughout the world express an interest in promoting the mental health of their citizens (Hohenshil, 2010). Efforts to assist the development of counseling internationally have been facilitated through the work and leadership of the U.S. counseling profession. One such effort includes the creation of NBCC International (NBCC-I), a division of the National Board for Certified Counselors (NBCC). NBCC-I was created in 2003 to promote the counseling profession on a global scale (NBCC-I, 2012). According to the NBCC website, the organization looks to "spread the availability of competent, reliable professional services to any part of the world that indicates an interest in acquiring them, . . .with utmost care and respect for the social, cultural, political, and economic realities of the various areas where [they] are invited" (Clawson, 2011, para. 2).

The winter 2010 issue of *The Journal of Counseling and Development* (JCD) highlighted the globalization of counseling in a special section devoted to describing development and future of counseling in eight countries (China, Botswana, Lebanon, Malaysia, Romania, Italy, Mexico, and Denmark). For the majority of countries detailed in the special section, counseling began through the need for career guidance in public school systems. Some countries had witnessed the expansion of counseling services into local communities (See & Ng, 2010; Stockton, Nitza, & Bhusumane, 2010), while others indicated the need to extend affordable counseling services beyond educational settings (Ayyash-Abdo, Alamuddin, & Mukallid, 2010). Most countries experienced a shortage of quality counselor training programs as the need for practicing counselors grew more quickly than the development of training programs. Regarding the future of counseling in these countries, most expressed that the need for counseling services would continue to grow, but expressed the need for systematic, quality counselor training programs as well as the development of national counseling associations, counselor training standards, and a credentialing mechanism (Ayyash-Abdo, Alamuddin, Mukallid, Remley, Bacchini, & Krieg, 2010; See & Ng, 2010; Stockton, Nitza, & Bhusumane, 2010).

The efforts of the counseling profession regarding multicultural competence provides the field with a solid foundation for the implementation of counseling on a global scale; however, counselors must remain alert to the broader implications that stem from promoting counseling to diverse individuals on a macro level. While the current literature acknowledges what countries need in order to incorporate counseling, it remains important to consider the impact of globalization and how the counseling profession may need to adapt to meet the needs of the local communities. The application of U.S. counseling theories and techniques, multicultural counseling included, is doubtfully sufficient to ensure the efficacy of international counseling. Instead, counselors will have to move beyond a national multicultural perspective toward a global vision for the field.

Impact of Globalization on Counseling

Heppner (1997) suggested that counseling “can play an important role in building a global village that helps people improve their well-being, alleviate distress and maladjustment, resolve crises, modify maladaptive environments, and increase their ability to live more highly functioning lives” (p.7). While we recognized the importance of considering cross-cultural understanding as counselors take on an international role, we must continuously ask who will define *more highly functioning*. Leung (2003) acknowledged the ethnocentric bias of Euro-American assumptions inherent in traditional counseling theories. For example, regarding attachment theory, You and Malley-Morrison (2000) confirmed the traditional definition of healthy attachment did not transfer to Asian cultures. The researchers found Korean students to score higher on the preoccupied attachment compared to American students. With an ethnocentric view, counselors might mistakenly believe they should promote the “higher functioning” secure attachment style; however, in Asian collectivistic cultures where there is greater value placed on others than the self, attachment styles present differently due to different interpretations and meanings associated with parent-child interactions (Rothbaum, Rosen, Ujie, & Uchida, 2002; You & Malley-Morrison, 2000).

It also is important to understand how globalization can impact the counseling field at the macro level as well as at the micro level where individuals are affected in ways that are relevant to counselors. In the following section, we examine three ways in which globalization may have an impact on the counseling field and on the people living in international communities. First, we will explore how globalization impacts the transfer of Western values transnationally; which in turn influences the local cultures’ ideas and experiences of mental health and wellness. Second, we will consider the commoditization of the helping relationship and how it translates internationally. Finally, through the globalization lens, we consider the issues with access and the structural limitations of international counseling.

Global Mental Health and Wellness

Early studies suggested that mental health services which were rooted in White middle-class value systems led to the misdiagnosis of racial/ethnic minorities (Adebimpe, 1981; Mukherjee, Shukla, & Woodle, 1983), decreased quality of care for racial/ethnic minorities (Ridley, 1989; Sattler, 1977; Sue 1977), and higher rates of premature termination among racial/ethnic minority clients (Ridley, 1989; Romero, 1985; Sue 1977; Yamamoto, James, Bloombaum, & Hattem, 1976). Given these documented dangers of ethnocentrism within U.S. borders, and because the local is transformed by the global in the process of globalization (Tomlinson, 1999), it is important to examine how the Western ideas of mental health and illness impact local-international communities.

There are several ways in which the local is transformed by the global regarding the mental health and wellness of individuals in international communities. First, the spread of Western notions of mental health can change how symptoms are conceptualized and manifested in local-international communities. Watters (2010) examined how the U.S.’s influence over the rest of the world does not simply impact the economic realms of individuals’ lives, but he also explored how the mental illness landscape of the world is changing as well to reflect Western ideas. For example, he interviewed Dr. Sing Lee, a Chinese eating disorder researcher, who explained that prior to the early 1990’s the local version of anorexia nervosa in Hong Kong presented differently in clients than those from the Western version. He called the local version nonfat phobic anorexia because the girls who exhibited the symptom of restricted eating did not also express the symptom of fear of being overweight, like the Western version of the disorder required. However, between 1998 and 2007 there was a significant increase in the number of cases that conformed to the traditionally Western fat phobic version of the disorder compared to the previous decade (Lee, Ng, Kwok, & Fung, 2010). The authors stated that their findings indicated “that the clinical presentation of eating disorders in Hong Kong has gradually conformed to the frequency of occurrence of eating disorders as found in Western communities” (p. 313).

Scholars have attributed this trend to the influence of the West. Watters (2010) suggested media coverage of Western mental health clinicians’ perspectives of the diagnostic symptoms of anorexia, which included the fear of gaining weight may have contributed to the shift in the presentation of symptoms. Watters suggested interviews with experts could have introduced an idea of a mental illness that was not present before, providing a new culturally acceptable symptom for psychological disturbances to be expressed by young women and girls in China. Pike and Borovoy (2004) similarly

noted the correlation between the rise in eating disorders in Japan with the growing social changes brought on by industrialization in post-World War II times. While the authors questioned the impact of the Western ideals of beauty on women in Japan, they also considered the explanation to be more complex than Japanese women wholly internalizing Western ideals. The authors assumed Japanese women have their own internal conflicts and tensions, which are only complicated by the West's influence.

Laungani (2004) noted that through globalization, the West's value systems spread to diverse cultures, creating a more homogenized world. Not only do these Western ideas of diagnosis have the potential to create altered expression of symptoms in a local community, the very presence of the Western values in the economic and social spheres can create new tensions for individuals to resolve. For example, several scholars have noted how the value of individualism has been introduced into some aspects of the Japanese and Chinese, creating dual roles of individuality and community for people in those cultures and internal conflict in how to resolve the dual roles (Duan & Wang, 2000; Iwasaki, 2005). Iwasaki stated: "Today's Japanese mental health problems reflect the confusion among Japanese individuals who live in an unstable period between enduring interdependent cultural values and emerging Western values of independence" (p. 129). Chen (2009) developed a counseling theory to address these interpersonal and psychological disturbances that occur in individuals in Taiwan. As individuals struggle to resolve the traditional versus the modern, Chen suggested that counselors could help clients to adjust how they resolve the conflict based on the type of situation they are in at the moment. He also suggested that incorporating the culture's value on family can be helpful to resolve marital conflict by asking the most authoritative member in the family to serve the role of mediator to resolve the discord.

Finally, there are certain aspects involved in the globalization process itself, such as increased mobility, which also can affect the types of problems individuals in the local community may present in counseling. As economic forces shift the demand of labor to different global environments, the rate of adult migration continues to grow in countries with limited local employment options (Pottinger, Stair, & Brown, 2008). This migration of one or both parents can affect both those members who migrate and those family members who are left behind, creating special needs. Pottinger et al. (2008) noted that this migratory separation is common in the Caribbean, and children often need attention from counselors to help adjust to the loss of their parents. They also recommended counselors take a psycho-educational role when helping Caribbean families affected by this situation.

The global transmission of Western ideas of mental health can change the way international communities conceptualize and experience their own mental health, and the transmission of Western values into a culture can create internal psychological conflict. The economic forces of globalization can require families to be separated across continents, creating shifts in roles and adjustment issues for children. Understanding how the specific ways in which globalization impacts mental health conceptualizations and those individuals and families receiving these services is vitally important in order to better create international models of mental health counseling services.

Commoditization of a Relationship

The value of individualism is not the only Western concept spreading throughout the globe that will have an impact on the counseling field. Capitalism also is the driving economic force of globalization, which creates an inherent dichotomy of public and private spheres (Acker, 2004). Feminist scholars have criticized how the global economy devalues this private and informal sector and overvalues production and profit (Acker, 2004; Mies, 1994). It is important to consider how this factor influences the counseling field and individuals receiving counseling internationally.

Counseling at its very nature is an intimate exchange—sharing "secrets" behind closed doors, helping with problems of life's most private topics of love, sex, loss and death. It is a core philosophical counseling value that the "relationship" is the vital aspect of the process. Through this relationship counselors hope to help clients grow, heal, fulfill potential, learn to cope or make other positive changes. For many cultures the idea of discussing these topics outside of the family is counterintuitive since these intimate exchanges are traditionally addressed in the relationships of the family and the private sphere of their lives. However, counselors do not only suggest people should bring these problems out of the bedroom and other private spaces, they also ask that clients pay to do so. In the U.S. this inherently private connection has been transformed into a public commodity. Sue and Sue (2003) noted that "mental health practice has been described

as a White middle-class activity that often fails to recognize the economic implications in the delivery of mental health services” (p. 97).

While the counseling relationship can be very powerful and a catalyst for change, the authors are aware of and respect the counterintuitive aspects of the commoditization of this relationship. In line with the Western capitalistic framework it makes sense to charge for the services and time provided, and seems natural to translate these intimate exchanges into intimate economies. However, as the authors re-examine this phenomenon under the lens of globalization, they believe counselors should be wary of this aspect as the counseling profession develops in communities where capitalism is not the dominant world view and where the private sector of the home and family are more valued. Not only could these economic exchanges affect how the counseling relationship is viewed and experienced, but also how counseling is accessed. In the following section we will further address the access and structural limitations of counseling.

Access and Structural Limitations

Scholars have reported the fact that individuals from culturally diverse backgrounds are not as likely to seek counseling and that when counseling is used, these clients tend to terminate more rapidly (Atkinson, 2004; Sue & Sue, 2003). Atkinson outlined many reasons for the under-utilization of services and discussed cultural mistrust, social stigma associated with mental illness or counseling seeking behavior, the counseling process all together, and limited access (Atkinson, 2004). Counselors are increasingly aware of how inequity, discrimination and oppression adversely affect the lives of clients, and how these injustices can be systemically perpetuated by well-meaning individuals in privileged groups (Arredondo & Perez, 2003; Crethar, Torres-Rivera, & Nash, 2008). Many social justice and advocacy efforts continue to fight on the local, state, and federal level for services to be more accessible for all. Atkinson (2004) reported that many low-income ethnic minorities must rely on public and nonprofit mental health services since they often do not have insurance that covers these types of services.

Structural barriers such as transportation, hours of operation, and child care, as well as emotional barriers such as fears about being judged, also can create limitations for people with fewer resources to access counseling (Anderson et al., 2006). Toporek (2009) noted that there is a history of inadequate service for marginalized populations and “oppression, discrimination, inequitable policies, and lack of access and resources create environmental barriers that permeate mental health and well-being” (p.12). By ignoring these structural barriers and avoiding advocating for change in these greater systemic arenas, counselors end up colluding with the oppressive system (Toporek).

Given that these limitations are present in the U.S., the concepts of access and affordability are extremely important when discussing counseling in international spaces as well. We caution that services offered without issues of access taken into account may leave those people with the greatest need without services. If counseling is structurally established internationally with a similar economic model, and if there is limited structural support for public sponsored programs, then we risk providing services only to those with the most means. As advocacy efforts are attended to in the U.S., counselors will need to attend to similar systemic barriers internationally as well, by addressing social and socio-economic factors that may create limitations.

While considering these structural limitations for clients, it also will be important to consider how counselors are paid for their services if counseling is to grow as a profession in international communities. While the U.S. relies on private pay, insurance, governmental and private nonprofit agencies, and sliding scales, for countries that do not have a managed care system, counselors may need to advocate for their role to be added as an official job position in their vocational system.

Implications for the Counseling Field

Given the potential impact globalization can have on the counseling field and the international communities counselors will serve, an expansion of the multicultural competencies that include an international or more global perspective of counseling is needed (Chung, 2005). Sue and Sue (2003) encouraged counselors to broaden their understanding of multicultural counseling methods of treatment to include informal or natural systems of support, alternative healing

methods, and culturally specific systems of helping. Sue and Sue suggested “we should actively try to find out why they may work better than Western forms of counseling and psychotherapy” (p. 44). In order for counselors to understand natural forms of helping in countries where formal “counseling” may not be available, speaking to and gathering information from individuals from other countries is imperative.

Chung (2005) addressed a more global perspective of counseling and stated that being multiculturally competent is an essential starting point for being an effective counselor on a global or international scale. Chung (2005) discussed that counselors need to keep current of cultural issues that are not Western-based and acknowledged that counselors need to be more aware of the impacts of globalization.

Training Counselors

Paredes et al. (2008) suggested that counselor education programs admit more international students in order to train them as counselors who will in turn take their information back to their countries of origin and provide services to individuals, start programs and service initiatives and educate others. However, the way in which we train counselors, whether international or not, should include global perspectives and the ways in which globalization impacts individuals and communities. Courses that examine the role of privilege and oppression should not only examine how these issues impact people within U.S. borders, but the interconnection of global systems as well. The social justice lens should be widened to include perspectives on global advocacy, including awareness of how choices people make in the U.S. impacts other individuals across the world.

International counselor education programs also need to be addressed. The need for adequate graduate training programs in counseling is great. The number of schools around the world that formally teach counseling is quickly growing (Low, 2009). One potential way to meet the need for trained service providers would be to create a tiered system of training. Hinkle and Henderson (2007) have developed a curriculum through NBCC-I for a Mental Health Facilitator program that sends trainers to international communities where there are little to no mental health services to train local people on the basic helping skills and how to recognize mental health issues (McGrath, 2009; NBCC, n.d.).

For formal counseling programs throughout the world, regulation is important to implement to ensure adequate training. Stair (2010), who presented at the American Counselor Association’s (ACA) national conference on the topic of counseling in Jamaica, discussed how there were no regulations or accreditation requirements for counselor training programs in her home country. She outlined that this void of a regulating body left clients unprotected from pseudo-professionals claiming to be counselors without holding credentials. The leaders of the Jamaica Association for Guidance Counsellors and Education (JAGCE) asked NBCC-I to partner with the counseling organization in order to work toward developing such credentials and ethical standards (W. Schweiger, personal communication, May 4, 2012). Their collaboration is especially geared toward the school counselors in Jamaica. Stair indicated that as counselor education programs develop internationally, it is vital to meet the mental health needs of a more globally connected population while considering the culture and space in which they will be educating and serving. For example, she specifically addressed how the issue of boundaries and dual relationships should be considered differently in Jamaica considering the collectivistic culture and the small spaces of the country. Schweiger stated that in order to be sensitive to cultural differences, U.S. counselors who collaborate with JAGCE leaders should ask questions about what they need so that decisions can be made as to what the standards will be specifically for Jamaica, rather than Western counselors telling Jamaica what they should be.

Future Research Directions

A meta-analysis of a top counseling journal revealed a dearth of article submissions on international or global topics (Crockett, Byrd, Erford, & Hays, 2010). Given how the process of globalization can impact the incorporation of counseling into a new cultural community, the need to add international voices in the field is clear. Paredes et al. (2008) suggested that international students may be a valuable resource to gain these perspectives for counselor education programs. Research is needed that assesses current helping methods of the country and structural barriers, as well as specific models or theories that may be best adapted to the values of the culture. International perspectives also could

reveal potential stigmas, misunderstandings, or reservations that individuals in any culture may have about counseling. It would be important to highlight any discrepancies between the counseling philosophy and the culture that may prevent individuals from utilizing the services.

Conclusion

As the process of globalization has impacted the world economically, politically, culturally, and socially, it is important to maintain the global perspective when examining the counseling field as well. Ng and Noonan (2012) suggested several areas to which counselors should attend when considering the internationalization of counseling. They noted that international collaborations across fields, agencies, and countries regarding training and services should be equal partnerships. Given this guideline, when countries seek consultation from outside counselors, these foreign counselors should learn what systems are currently in place in that country as far as national counseling organizations or other non-governmental organizations (NGOs) that are currently providing services for the country's citizens. These organizations can provide insight into the mental health issues of most concern in their country as well as be potential places for counseling service delivery. Another example of this type of collaboration would be international internships or training opportunities. As a specific example, one of the authors participated in an institute for which 12 counselors were invited to Bhutan through NBCC-I in order to collaborate with schools, a psychiatric hospital, a women's center, university counseling centers, and substance abuse service providers. During this collaboration, the U.S. counselors shared information on mental health issues such as substance abuse and domestic violence, counseling skills, and counseling programs, yet the decisions on how specifically to implement programs in their culture remains in the hands of the Bhutanese counseling leaders. The counselors also spent time learning the government's mental health provider system and other NGO's that were interested in collaborating on how to provide counseling services. Starting Fall 2012, counselors from the U.S. will return for a semester at a time to continue this partnership.

Ng and Noonan (2012) also recommended the theoretical foundation of counseling should have a global framework that accounts for culture and is broadened to avoid implementing "culture-specific mental health intervention models" (p. 11). As scholars have become more mindful of our Western-based practices and how they have a potential global impact, the authors believe counselors have the responsibility to not only be flexible enough to challenge personal assumptions, but maintain a willingness to learn and adapt from their international neighbors. As counselors also become more aware of the structural impact of marginalized populations and call out for a social justice and advocacy perspective, they have the obligation to widen their lens to include not only the systems of our community, but the connected world as a whole.

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