Before You Get Started

The RESPECTFUL model of counseling and development (D'Andrea & Daniels, 1997; 2001) begins the fifth edition of *Theories of Counseling and Psychotherapy: A Multicultural Perspective*. This new counseling framework addresses the need for a comprehensive model of human diversity that has practical utility for the work of mental health professionals. This model sets the tone for the rest of the book by emphasizing the need for counselors and psychologists to manifest an extraordinarily high level of respect for the persons with whom they work.

The ten factors that comprise the RESPECTFUL counseling and development model have been selected because they affect clients' psychological development and sense of personal well-being in many important ways. It is important to realize, however, that the components contained in this model do not represent an exhaustive listing of all the factors that impact human development. The specific issues that the RESPECTFUL framework directs its attention to include a person's

R—religious/spiritual identity
E—economic class background
S—sexual identity
P—psychological maturity
E—ethnic/racial identity
C—chronological/developmental challenges
T—various forms of trauma and threats to well-being
F—family background and history
U—unique physical characteristics
L—location of residence and language differences

Not only does each of the RESPECTFUL factors influence the way people learn to view themselves and others, but each frequently affects the way clients and mental health practitioners construct meaning from the different challenges and problems that individuals present in counseling and psychotherapeutic settings. By identifying these vital dimensions and discussing them in detail throughout this book, we hope to (1) increase your knowledge of important variables that frequently influence your clients' and your own development, (2) underscore the need to think more comprehensively and holistically when working with clients from diverse groups and backgrounds, and (3) promote an increased awareness of specific counseling and psychotherapeutic interventions that are effective in addressing your clients' multidimensional nature.

The Ten Factors

In an effort to further stimulate your thinking about some of the variables that frequently influence your clients' and your own psychological development, a brief description of the various components of the RESPECTFUL counseling and development framework is presented below.

Religious/Spiritual Identity.   The first component in the RESPECTFUL model focuses on the way in which individuals personally identify with established religions or hold beliefs about extraordinary experiences that go beyond the boundaries of the strictly objective, empirically perceived world that characterizes Western, modern, psychological thought (D'Andrea & Daniels, 2001). Kelly (1995) notes that the terms *religion* and *spirituality* are grounded in an affirmation of transcendental experiences that are typically manifested in religious forms that extend beyond the boundaries of the ordinary and tangible. As used in the RESPECTFUL counseling framework, religion and spirituality generally refer to a person's belief in a reality that transcends physical nature and provides individuals with an "extraordinary" meaning of life in general and human existence in particular.

Because clients' religious/spiritual identity may play an important role in the way they construct the meaning of life experiences, it is important that counselors and psychologists take time to assess early in the helping process the degree to which this factor impacts an individual's psychological development. It is equally important that mental health practitioners take time to consider how their own religious/spiritual identity and beliefs may positively or negatively impact the work they do with clients who embrace different perspectives than their own in these areas. Issues related to religion and spirituality and their relevance for the work of mental health practitioners are discussed in greater detail in several chapters of this book.

Economic Class Background.   Numerous researchers have explained how a person's attitudes, values, worldview, and behaviors are all affected by economic class standing and background. Recognizing the influence that this aspect of clients' multidimensionality has on their development, practitioners need to be attentive to the ways in which this factor contributes to a client's identified strengths and expressed problems during counseling and psychotherapy. Because counselors and psychologists may develop inaccurate and negative views and prejudices about persons from economic backgrounds that are different from their own, it is important that mental health professionals evaluate their own class-based assumptions, biases, and stereotypes when working with individuals from diverse economic class groups. It is particularly important for counselors and psychologists to examine closely how economic factors impact the psychological health and personal well-being of poor clients and to be mindful that traditional counseling theories were developed by middle-class individuals who did not give these issues enough weight. Other points related to clients' and counselors' economic class background are presented in Chapter 2.

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Sexual Identity.   One of the most complex, though often understudied, aspects of an individual's psychological development involves the sexual identity development of persons from diverse groups and backgrounds. As used in the RESPECTFUL counseling and development model, the term *sexual identity* relates to a person's gender identity, gender roles, and sexual orientation. The term *gender identity* refers to an individual's subjective sense of what it means to be either male or female. A person's gender identity is clearly affected by the different roles men and women are expected to play within a given cultural/ethnic context.

A person's sexual identity is also influenced by sexual orientation. There are a number of ways to conceptualize this dimension of a person's sexual identity. Generally speaking, sexual orientation includes such concepts as bisexuality, heterosexuality, and homosexuality. *Bisexuality* refers to individuals who demonstrate a sexual interest in both males and females. *Heterosexuality,* in contrast, refers to individuals whose sexual interest is directed toward persons of the opposite sex. A third way of viewing this dimension of one's sexual identity involves the concept of *homosexuality,* which is a term that has been used to identify individuals whose sexual orientation involves persons of the same sex. In light of the negative stereotypes that have historically been associated with the term *homosexuality,* terms such as *gay males, gays,* and *lesbians* are considered more acceptable and respectful in describing this dimension of a person's sexual identity (D'Andrea & Daniels, 2001; in press). Recognizing the important impact that clients' and practitioners' sexual identity has in counseling and psychotherapeutic settings, this factor is discussed in detail in several places throughout this book. Particular attention is also paid in several chapters to the tremendous impact that feminist theories are having on the fields of counseling and psychology.

Psychological Maturity.   Counselors and psychologists often work with clients who share common demographic characteristics (e.g., age, gender, socioeconomic and cultural/racial backgrounds) but who appear to be very different psychologically. In these situations we might refer to one client as being "more psychologically mature" than another client who is the same age, identifies with the same cultural/racial reference group, and shares a similar sexual identity. Some descriptors that are commonly used by mental health professionals to describe "immature" clients include statements such as "He demonstrates limited impulse control in social interactions" or "She has a low capacity for self-awareness." Statements that are commonly used to describe "more mature" clients include the following: "He is able to discuss his problems with much insight"; "She is highly self-aware"; and "She has developed a much broader range of interpersonal and perspective-taking skills than many of my other clients."

Structural-developmental theories view psychological development as a process in which individuals move from simple to more complex ways of thinking about themselves and their life experiences. This movement can be traced along a set of invariant, hierarchical stages that reflect qualitatively different ways of thinking, feeling, and acting in the world (Sprinthall, Peace, & Kennington, 2001). By assessing clients' levels of psychological maturity, counselors and psychologists are

better positioned to design more effectively interventions that are tailored to meet their unique psychological strengths and needs. It is also important that counselors and psychologists take time to reflect on their own development, as the therapeutic process can easily be undermined when practitioners are matched with clients who are functioning at a higher level of psychological maturity than they are themselves. Particular attention is directed to developmental issues in counseling and therapy in Chapter 12.

Ethnic/Racial Identity. Clearly, tremendous psychological differences exist among persons who come from the same ethnic/racial group. This sort of variation is commonly referred to as "within-group" differences. Given the "within-group" variation that is notably manifested among persons from the same ethnic/racial group, it is important that counselors and psychologists develop the knowledge and skills necessary to assess accurately these important differences and respond to them in effective and respectful ways in counseling and psychotherapeutic settings. It is also very important that counselors and psychologists understand how their own ethnic/racial experiences have affected their psychological development, the way they construct meaning of the world, and the types of biases they have acquired toward others in the process.

The findings from the 2000 census underscore the transformational changes that are occurring in the ethnic/racial makeup of the United States. Mental health care practitioners who provide services to persons from diverse client populations are increasingly realizing that it is not possible to work effectively and ethically within the context of a pluralistic society without an awareness of a broad range of issues related to human diversity and group identity. The authors have taken much time and effort to integrate a broad range of ethnic/racial/cultural issues as they relate to the process of counseling and psychotherapy in all of the chapters in this book.

Chronological/Developmental Challenges. Age-related developmental changes represent what are referred to as "chronological challenges" that individuals face at different points across the life span. Mental health practitioners are familiar with many of these challenges, as they represent the characteristics we normally associate with infancy, childhood, adolescence, and adulthood. The specific changes life span researchers have noted as individuals develop from infancy through adulthood include physical growth (e.g., bodily changes and the sequencing of motor skills); the emergence of different cognitive competencies (e.g., the development of perceptual, language, learning, memory, and thinking skills); and the manifestation of a variety of psychological skills (e.g., the ability to manage one's emotions and the demonstration of more effective interpersonal competencies) that occur over time (Shaffer, 1993).

Human development researchers have greatly helped counselors and psychologists refine their thinking regarding the unique challenges individuals face at different points across the life span. Practically speaking, this knowledge enables practitioners to work more effectively with persons who face difficult chronological challenges in their lives by implementing age-appropriate intervention strategies in

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the counseling setting. This also allows practitioners to be mindful of the unique challenges they are likely to encounter when significant chronological differences exist between themselves and their clients. D'Andrea and Daniels (1997) suggest that many young practitioners are likely to encounter major challenges in terms of gaining a high level of trust, respect, and a sense of professional legitimacy when working with some clients who are much older than themselves. Chapters 2 and 3 provide information that can be helpful in dealing with some of the chronological challenges you are likely to encounter when providing counseling and psychotherapeutic services to persons of different ages.

Trauma and Other Threats to One's Well-Being. Trauma and threats to one's well-being are included in the RESPECTFUL counseling and development model to emphasize the complex ways in which stressful situations put people at risk of psychological danger and harm. Such harm typically occurs when the stressors individuals experience in their lives exceed their ability to cope with them in constructive and effective ways. An individual's personal resources (coping skills, self-esteem, social support, and the personal power derived from one's cultural group) may be overtaxed when one is subjected to ongoing environmental stressors. Individuals who experience stressors for extended periods of time are commonly referred to as being "vulnerable" or "at-risk."

Counselors and psychologists are frequently called on to work with persons in various vulnerable at-risk groups, including poor, homeless, and unemployed people; adults and children in families undergoing divorce; pregnant teenagers; individuals with HIV or AIDS; persons with cancer; and individuals who are victimized by various forms of ageism, racism, sexism, and cultural oppression. Heightened, prolonged, and historical stressors often result in more severe and adverse psychological outcomes for many persons from oppressed cultural/ethnic/racial groups in our contemporary society (Salzman, 2001).

To be effective mental health practitioners, it is important to assess accurately the different ways in which environmental stressors adversely impact clients' lives and to develop intervention strategies that help to ameliorate these problems. Counselors and psychologists who work with persons from diverse client populations need to be knowledgeable of the ways in which intergenerational trauma is sustained over time and to implement interventions that are intentionally designed to address such threats to clients' psychological health and sense of well-being. It is also important for practitioners to consider how various life stressors and traumatic events may have had a lasting impact on their own psychological development. Trauma issues are discussed in greater length in Chapters 2 and 5.

Family Background and History. The rapid cultural diversification of the United States includes an increasing number of families that are very different from the traditional notion of "family" that many counselors and psychologists have historically used as a standard for determining "normal family life" and "healthy family functioning." The different types of families (e.g., single-female-headed families, blended families, extended families, families headed by gay and lesbian parents) that

counselors and psychologists increasingly encounter in their work challenge practitioners to reassess the traditional concept of the nuclear family that has been used as a standard against which all types of other families have been compared.

Counselors and psychologists will be increasingly pressed to understand the unique strengths that clients derive from these different family systems and to implement counseling and psychotherapeutic strategies that are intentionally designed to foster the healthy development of these diverse familial units. In addition to learning about the personal strengths that individuals derive from these different types of family systems, mental health practitioners are encouraged to assess biases and assumptions that they may have developed about family life as a result of their own family history and experiences. If left unexamined, these biases and assumptions may adversely impact the counseling and therapeutic relationship with clients who come from families that are very different from the counselor's. These and other issues related to family counseling and psychotherapy are explored in greater detail in Chapter 13.

Unique Physical Characteristics. The RESPECTFUL counseling framework emphasizes the importance of being sensitive to the ways in which our society's idealized images of physical beauty negatively impact the psychological development of many persons whose physical nature does not fit the narrow view of beauty fostered by our culture. When working with clients whose unique physical characteristics may be a source of stress and dissatisfaction, it is important for counselors and psychologists to reflect on the ways in which the idealized myth of physical beauty may have led them to internalize negative views and stereotypes about persons who do not fit this view. If these internalized views go unchecked, they may lead to inaccurate assessments and misinterpretations of our clients' personal strengths.

Also, when working with women and men whose psychological development has been negatively affected by some aspect of their unique physical nature, practitioners need to be able to assist them in understanding the ways in which gender role socialization contributes to irrational thinking about their own sense of self-worth (D'Andrea & Daniels, in press). Counselors and psychologists need to be particularly sensitive to and knowledgeable about issues related to various physical disabilities when working with persons who experience these unique physical challenges in their lives. To assist these clients respectfully, practitioners are encouraged to help them identify and find ways to build on personal strengths in counseling and psychotherapy.

Location of Residence and Language Differences. The location of one's residence refers to the geographical region and setting where one resides. D'Andrea and Daniels (2001) identify five major geographical areas in the United States: the northeastern, southeastern, midwestern, southwestern, and northwestern regions. These geographical areas are distinguished by the types of persons who reside there and differ in terms of climate patterns, geological terrain, and to some degree the types of occupations and industry available to workers who reside in these areas.

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When mental health practitioners work with persons from geographical regions or residential settings that are different from their own, it is important to reflect on the possible stereotypes and biases they may have developed about such individuals and regions. This is particularly important when working with persons who use a different dialect or language in interpersonal interactions. As is the case with the other components of the RESPECTFUL counseling model, this sort of self-assessment is very important because possible stereotypes and biases that counselors and psychologists may have developed about persons whose residential background and language dialect is different from their own may lead to inaccurate assumptions and clinical interpretations within the psychotherapeutic setting. These issues are discussed more extensively in Chapter 2.

Using a Competency-Based Approach to Learning

As a mental health professional, you will be increasingly called on to provide psychological services to persons from diverse client populations. This book is designed to assist you in acquiring new competencies that will be useful in helping you work effectively and ethically with diverse clients. As you read this book, you will notice that a number of competency-building activities are included in each chapter. These competency-building activities are intentionally designed to increase your ability to work effectively and ethically within the context of a pluralistic twenty-first-century society. Because the notion of RESPECTFUL counseling and psychotherapy is central to all the information contained in the following chapters, the first competency-building activity is presented in this "Before You Get Started" section. This first activity underscores the need to think comprehensively and holistically when working with clients from diverse groups and backgrounds.

=== **Competency-Building Activity** ===

The RESPECTFUL Counseling and Development Model

We are all "multidimensional" beings. FUL model, it is vital that you be aware who have been and continue to be af- of any possible assumptions, stereofected by the various factors of the RE- types, and biases you may have about SPECTFUL counseling and development them. In turn, as you think about clients, model. For example, when you work constantly reflect on the RESPECTFUL with clients who are different from you in model and the impact that issues of diethnicity/race, sexual orientation, gen- versity may have in the here-and-now of der, or other dimensions of the RESPECT- every interview.

This activity is intentionally designed to assist you in becoming more aware of your own multidimensional nature as well as to encourage you to think about some of the generalized assumptions and biases you may have developed about persons from other groups and backgrounds. Now that you have read the RESPECTFUL counseling and devel-

opment framework, please use this framework to evaluate yourself on each of the dimensions. In the space below, write a short description of yourself as it relates to each component of this model.

Good luck on your RESPECTFUL journey toward your own integrative model of counseling and psychotherapy.

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Source: From "RESPECTFUL Counseling and Development" by Michael D'Andrea and Judy Daniels, 2001. Training materials developed in the Department of Counselor Education at the University of Hawaii, Honolulu. Reprinted by permission.

REFERENCES

D'ANDREA, M., & DANIELS, J. (1997, December). RESPECTFUL counseling: A new way of thinking about diversity counseling. *Counseling Today, 40*(6), 30, 31, 34.

D'ANDREA, M., & DANIELS, J. (2001). RESPECTFUL counseling: An integrative model for counselors. In D. Pope-Davis & H. Coleman (Eds.), *The interface of class, culture and gender in counseling* (pp. 417–66). Thousand Oaks, CA: Sage.

D'ANDREA, M., & DANIELS, J. (in press). *Multicultural counseling: Empowerment strategies for a diverse society.* Pacific Grove, CA: Brooks/Cole.

KELLY, E. W. (1995). *Spirituality and religion in counseling and psychotherapy: Diversity in theory and practice.* Alexandria, VA: American Counseling Association.

SALZMAN, M. B. (2001). Cultural trauma and recovery: Perspectives from terror management theory. *Trauma, Violence, & Abuse, 2,* 172–91.

SHAFFER, D. R. (1993). *Developmental psychology: Childhood and adolescence* (3rd ed.). Pacific Grove, CA: Brooks/Cole.

SPRINTHALL, N. A., PEACE, S. D., & KENNINGTON, P. A. D. (2001). Cognitive-developmental stage theories for counseling. In D. C. Locke, J. E. Myers, & E. L. Herr (Eds.), *The handbook of counseling* (pp. 109–30). Thousand Oaks, CA: Sage.

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