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1. Distinguishing Cultural Competency from Cultural Humility: An All-inclusive Approach to Human Services

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Abstract

The National Organization for Human Services (NOHS) ethical standards, as well as other human service organizations' ethical standards, supports cultural competency as the practitioner's professional responsibility to self, clients, the field and broader society. "Cultural humility" is a phrase that challenges human service professionals to approach competence as learners and not experts of a client's culture. Culture humility also enables practitioners to self-evaluate and self-critique cognitive processes and bias as related to working with diverse populations. The purpose of this conference presentation was to draw awareness to the term cultural humility as related to cultural competency. The presentation provided practical applications for human service professionals and engaged participants in discussion that fostered collegiality and critical thinking about cultural competency and cultural humility in human service education and practice.

Cultural Competency

The NOHS ethical standards surrounding cultural competency are the foundation for human service practice. The NOHS preamble states that the human services profession arose from meeting human needs around social justice issues during the 1960s (National Organization of Human Services [NOHS], 2015). During a crucial time in the United States history, human service educators and practitioners galvanized to create a profession that advocated for fair and equal treatment of clients from diverse backgrounds.

Human service educators use the phrase "cultural competence" to describe a measure of facility working with diverse clients. The NOHS ethical standards preamble affirms that human service professionals have a mandate to put into practice the ethical standards of cultural competency. The preamble states, "the fundamental values of the human service profession include respecting the dignity and welfare of all people; promoting self-determination; honoring cultural diversity; advocating for social justice; and acting with integrity, honesty, genuineness and objectivity" (NOHS, 2015).

Literature

A brief review of the extant literature provided information on how cultural competency applies to human service practice. Danso's (2016) critical analysis of cultural competency described it as an ethical imperative that is demonstrated by the ability to implement knowledge with awareness in practice. As practitioners, it is important to widen our worldview about diversity in culture by

moving beyond knowledge to action in human service practice. In situating awareness into practice, human service practitioners strengthen the professional helping relationship with diverse clients, families, and communities.

Interdisciplinary & Historical Aspects

The literature reviewed also summarized how cultural competency evolved over time in the field of medicine, nursing, psychology, and social work. In medicine, cultural competency was rooted in medical anthropology, where researchers assert that a client's illness may be rooted in cultural beliefs. It is imperative that human service professionals consider a client's cultural beliefs, without ethnocentrism. Cultural competency in nursing addressed social inequalities. In the profession of psychology, cultural competency had its beginnings in the ethical standards of mental health practice. These additions from the fields of nursing and psychology contribute valuable guidance when considering social inequalities and utilizing ethical standards in practice with clients from diverse backgrounds. The field of medicine, nursing, psychology, and social work consider cultural competence a professional mandate where practitioners must move beyond the acquisition of knowledge and into practice (Fisher-Born, et.al, 2015). Interdisciplinary contributions shaped the further development of cultural competency standards.

Council for Standards in Human Service Education (CSHSE)

The Council for Standards in Human Service Education (CSHSE) also recognizes the importance of cultural competence for accredited human service programs. Historically, CSHSE integrated cultural competency throughout its standards. These standards required human service programs to infuse evidence of the practice of cultural competence in program characteristics and curriculum. In 2018, CSHSE made cultural competency an independent standard where human service programs are now required to "foster the development of culturally competent professionals through program characteristics, curriculum and fieldwork" (CSHSE, 2019). Specifically, Standard 8 requires human service programs to demonstrate how cultural competence is included in program policies, procedures and practices; provide proof of how faculty and staff participate in cultural competency training, and how cultural competence integrates into a program's curriculum. The addition of competency 8 was an indicator of the increased value of cultural competence, and the importance of its explication in human service programs. In essence, accredited human service programs must now explicitly demonstrate how cultural competence integrates with program characteristics and curriculum.

National Association of Social Workers (NASW)

The National Association of Social Workers (NASW) also emphasizes the importance of cultural competency. The NASW Standards for Cultural Competency provide a comprehensive definition as:

the process by which individuals and systems respond respectfully and effectively to people of all cultures, languages, classes, race, ethnic backgrounds, religions, spiritual traditions, immigration status, and other diversity factors in a manner that recognizes, affirms, and values the worth of individuals, families, and communities and protects and preserves the dignity of each (NASW, 2015, p. 13).

These standards imply that cultural competency is a process that requires helping professionals to engage in ongoing involved action.

National Organization for Human Services (NOHS) Ethical Standards

The National Organization for Human Services Ethical Standards (NOHS, 2015) address cultural competency across several standards. These standards describe the importance of honoring diversity and increasing competence as related to diverse populations. The standards focus on separate elements of cultural competency but their strength lies in a unified practice application. Reviewing specific NOHS standards related to cultural competency demonstrates their interrelationships. The following discussion identifies relationships between several standards and reveals the complexity in practical implementation of the standards.

Standard 1, 7, and 34.

Standard 1- Human service professionals recognize and build on client and community strengths.

Standard 7- Human service professionals ensure that their bias and values are not imposed on clients.

Standard 34 - Human service professionals are aware of their own cultural backgrounds, beliefs, values, and biases. They recognize the potential impact of their backgrounds on their relationships with others and work diligently to provide culturally competent service to all of their clients.

(NOHS, 2015)

Standard 1 states practitioners consider a strengths perspective when working with diverse clients. **Standard 7** requires practitioners not impose their values, and biases on clients. **Standard 34** directs practitioners to apply **Standard 7** through self-awareness and self-examination of one's own values and bias. To practice **Standard 34**, practitioners reflect on questions about their own ethnic culture and social class upbringing, and explore how early socialization experiences influence their current human service practice with clients from diverse backgrounds.

Standard 10, 11, 34.

> **Standard 10**- Human service professionals provide services without discrimination or preference in regards to age, ethnicity, culture, race, ability, gender, language preference, religion, sexual orientation, socioeconomic status, nationality, or other historically oppressed groups.

> **Standard 11**- Human service professionals are knowledgeable about their cultures and communities within which they practice. They are aware of multiculturalism in society and its impact on the community as well as individuals within the community. They respect the cultures and beliefs of individuals and groups.

> **Standard 34** - Human service professionals are aware of their own cultural backgrounds, beliefs, values, and biases. They recognize the potential impact of their backgrounds on their relationships with others and work diligently to provide culturally competent service to all of their clients.

(NOHS, 2015)

Standards 7 and 34 provide the practitioner additional insight and awareness when practicing **Standard 10 and 11**. In particular, **Standards 10 and 11** alert practitioners to be mindful of unintentionally providing services (or not providing services) with preference or discrimination. For example, the practitioner may ask: "Do I prefer or choose to work with a client who looks more like me, or is from the same ethnic or cultural background as myself? What biases, beliefs, and values from my past have remained unexamined?" Responses to these questions can offer practitioners insight into blind spots about diverse client populations that may not have been evident through training alone.

Standard 14, 16, 34.

> **Standard 14**- Human service professionals are aware of social and political issues that differentially affect clients from diverse backgrounds.

> **Standard 16** - Human service professionals advocate for social justice and seek to eliminate oppression. They raise awareness of underserved population in their communities and with the legislative system.

> **Standard 34** - Human service professionals are aware of their own cultural backgrounds, beliefs, values, and biases. They recognize the potential impact of their backgrounds on their relationships with others and work diligently to provide culturally competent service to all of their clients.

(NOHS, 2015)

Further, **Standards 14 and 16** provide an opportunity to practice cultural competence at the mezzo (group) and macro (community) level, through awareness of how social and political issues affect diverse clients, and by taking actions to advocate against oppression and to raise awareness politically. Advocacy can include, but is not limited to, being informed about current issues that impact diverse populations; communicating concerns about legislation with local, state and federal legislators; participating in rallies and political action groups that advocate for the elimination of oppression and raise awareness about social justice issues. Advocacy not only includes participation, but also providing financial support to professional organizations that champion social justice. The utilization of **Standards 14 and 16** occur in practice when applying **Standard 34**; when practitioners regularly exercise self-awareness through reflection about their own cultural backgrounds, beliefs, values, and biases.

The practice of ethical standards for cultural competency are not a "once and done" event, but an ongoing process of self-reflection and self-correction. The practice of ethical standards is interrelated and cannot be separated. Practitioners do not have the option to choose the ethical standards that offer the least resistance. The ethical standards related to cultural competency are a call to action, a call to advocate for social justice. In reviewing the NOHS, CSHSE, and NASW standards for culture competency it seems clear that cultural competency has less to do with training than with the actions of the practitioner. The inclusive standards as related to cultural competency offer a solid foundation in human service education and practice.

Cultural Competency Critiques

Despite the foundational role of cultural competency in human service practice, it has not been without criticism. The criticisms range from questioning its relevance and ability to address structural problems of oppression, injustice, and racism, to accusations of being tokenistic and lacking critical analysis and rigor. Danso (2016) charged that cultural competency lacked a theoretical foundation, that it was incongruent with social work core values, and it was "fragmented and has been watered down for different uses" (p.7), at best. The criticism that cultural competency lacks a theoretical foundation is valid, and the concept would benefit from theory development.

The criticism that cultural competency is incongruent with social work core values led to a review of the NASW ethical principles. We identified six core values of service, social justice, dignity, worth of the person, integrity, and the importance of human relationships (NASW, 2017). However, the literature review found limited evidence that these six ethical principles were incongruent with cultural competency as a social work core value. Indeed, these core values seemed to work in tandem to support cultural competency in social work practice.

Practitioners have been criticized for framing their comfort level with clients from different backgrounds as self-awareness, and therefore cultural competency. An additional criticism was that practitioners gained knowledge about a client's culture while leaving social justice out of the diversity and competency discussion (Fisher-Borne et.al, 2015). The argument that practitioners framed their comfort level with diverse clients as a signal of competence could be viewed as a problem. NOHS Standard 34 addresses this issue. When implemented, NOHS Standard 34 describes human service professionals focusing on their own beliefs, values, and biases about

diverse clients through critical self- reflection instead of focusing on gaining knowledge about clients from diverse backgrounds.

Two additional critiques of cultural competency were that it reduces knowledge about ethnic groups to a set of characteristics that falsely led workers to believe that they were experts about culturally diverse clients and families. Additionally, critics argued cultural competence violated the ethical principal of client self-determination when workers advocate on behalf of clients from backgrounds that were different from their own (Ortega & Coulborn-Faller, 2011). The argument could be made that reducing knowledge about clients from diverse backgrounds to a set of characteristics could lead to stereotyping at best, and ethnocentrism at worst. An additional debate about workers making assumptions about cultural competence based on knowledge about an ethnic group could be valid if human service workers were basing cultural competency on knowledge alone.

Although cultural competency has been prized by human service professionals, and training in cultural awareness was viewed to reflect professionalism, the challenge for practitioners has been to move beyond knowledge and toward increasing evidenced based practice. Ultimately, the conceptualization of cultural competency became a problem when practitioners implied that competency was a skill that one would develop, become proficient in, and even master and become an expert.

The NOHS, CSHSE, and NASW Standards make the case that cultural competency is about ethical standards in action, which has very little to do with increased knowledge about clients from diverse backgrounds. Although cultural competency has made significant advancement in the profession of human services, and the ethical standards provide a firm foundation for professional practice, the criticisms of cultural competency paved the way for cultural humility as an alternative approach to professional practice with clients and communities from diverse backgrounds.

Cultural Humility

Cultural humility is a concept that has gained traction in the past two decades. It is a response to criticisms about cultural competency in human service education and practice not meeting the professional development needs of the practitioner thus, creating a disservice to clients. Cultural humility was first coined by Tervalon and Murray-Garcia (1998) to help train physicians to practice culturally sensitive health care. The central tenets of cultural humility included active self-reflection on attitudes, beliefs and practices related to others and personal critique and growth. Cultural humility challenges practitioners to be mindful that we are all members of multiple cultures and interlocking identities that are continuously influenced by various factors such as racial and ethnic identity, gender, age, family composition, socioeconomic status, living situation, level of education, and life experiences. Cultural humility also provides a distinctive approach to exploring, understanding, and appreciating the differences among us (Yancu & Farmer, 2017). Cultural humility had its beginnings in healthcare, however, has since been adapted and adopted into other helping professions including human services.

Literature

"Cultural humility" is a concept that challenges human service professionals to approach competence as learners, and not experts, of a client's culture. In a brief review of the extant literature, cultural humility has been defined as a process, a tool for training, an "other" oriented approach that is less deterministic and less authoritative in human service practice. Cultural humility promotes respect, focusing not only on the client but also on the practitioner. It views learning as a lifelong process, striving to make transparent any practitioner bias (Yeager and Bauer-Wu, 2014). Hook, Davis, Owen, Worthington, and Utsey (2013) conceptualized cultural humility as the "ability to maintain an interpersonal stance that is other oriented (or open to the other) in relation to aspects of cultural identity that are most important to the [person]" (p.2). This view of cultural humility is similar to the NOHS Standard 34 challenging human service professionals to take an interpersonal stance of looking within at their own cultural backgrounds bias, beliefs, and values about difference.

Danso (2016), in a critical reflection of diversity concepts, lists cultural humility as a "tool" for training physicians in the delivery of culturally appropriate healthcare provision" (p. 12). Describing cultural humility as a tool suggests that it is a method, or practice and not an end result. Cultural humility is also viewed as a process which suggests that it is ongoing, continuous and perpetual in nature (Fisher-born et.al, 2015; Yancu and Farmer, 2017; Yeager & Bauer-Wu, 2013). The perspective of cultural humility as a process aligns with cultural competency in the practice of self-reflection and learning. Yeager & Bauer-Wu (2013) assert that cultural competency and cultural humility cannot be collapsed into a class or a continuing education offering, rather both constructs must be implemented as an ongoing process. Cultural humility as orientation for multicultural clinicians suggests that due to the traumatic effects of racism, microaggression, intergenerational trauma and the pressures to assimilate to White culture make it difficult for therapists of color to practice cultural humility in the way that it is currently discussed in the literature (Moon and Sandage, 2019). The presenter is aware that as a woman of color she is challenged to explore the questions raised about the difficulty of practicing cultural humility in light of the historical context of the traumatic experiences of people of color in the United States. The practice of cultural humility and cultural competence by human service practitioners of color calls for more empirical research to explore this phenomenon further.

In essence, culturally humility is similar to the NOHS ethical standards in Standard 34 in that human service professionals are aware of their own cultural backgrounds, beliefs, values, and bias, and they recognize the potential impact of their background on their relationships with others and work diligently to provide culturally competent services to all clients (NOHS, 2015). Cultural Humility suggests that practitioners can advance Standard 34 through the actions of ongoing self-awareness, self-reflection and action.

Cultural Humility Criticisms

Cultural humility has been met with criticisms that suggest it has no theoretical framework, and has limited empirical data that supports its efficacy. Also, there is the argument that cultural humility provides no added value to cultural competency in human service practice, and that cultural humility is simply a "remix" of cultural competency (Danso, 2016). The criticisms of

cultural humility are valid in that there is limited empirical research, and the authors who coined the term cultural humility, provide conceptual research that has not been updated since its inception in 1998 (Tervalon, Murray-Garcia, 1998). The lack of a solid theoretical framework or current empirical research about cultural humility suggests the need for additional empirical research on this concept and its application to cultural competency.

During preparation for this presentation, the initial view was that cultural humility replace cultural competency in human service practice. However, in further discussion and exploration of cultural humility and the practice of cultural competency it has become evident that cultural humility is not designed to replace cultural competency, but to compliment cultural competency through further informing human service practice. This change in practice involves more intentional engagement in self-reflection, while identifying and breaking down barriers of power differentials between the social worker [human service professional] and the client (NASW, 2015). Intentional engagement in mezzo and macro level human service practice as related to advocacy and social justice is an additional way to practice cultural competency through culture humility.

Practical Applications

The presentation included a brief discussion of experiential methods practitioners can begin to utilize to strengthen cultural competency through intentional integration of cultural humility in human service practice. The practice of ongoing collaboration with clients from diverse background where the practitioner takes the stance of learner about themselves first, and about clients second, not making assumptions about culture (Ortega and Coulborn-Faller, 2011). In addition, cultural competency can be applied as cultural humility through integrating critical thinking questions into human service program assessments, and in institutional strategic planning. Critical thinking questions about cultural humility can be used to support human service students in self-assessment, and utilized to help students transform their field placement experiences with clients from diverse backgrounds (Fisher-Born, et.al, 2014). Lastly, practitioners can implement cultural competency through cultural humility through Standard 34 self-reflection through reflective journaling. Reflective journaling is a way to develop critical thinking, self-understanding and to self-assess relationships with clients from diverse backgrounds (Mastel-Smith, and Yarbrough, 2017; Schuessler, Wilder and Byrd, 2012).

In conclusion, the National Organization for Human Service Ethical Standards (NOHS, 2015), describes the importance of honoring diversity, and increasing competence as related to diverse populations. The NOHS standards call for human service professionals to cultivate self-awareness of their cultural background and biases as a foundation that influences inclusivity and acceptance of other cultures. These attitudes and actions in practice easily lead to cultural humility as a part of cultural competency.

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2. Fair and Affordable Housing and the Role of Housing Choice in Creating Inclusive Communities

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Abstract

Human service practitioners are charged with ensuring inclusivity within the communities that we serve. This focus on inclusivity is perhaps no more evident than in the struggle for fair and affordable housing throughout the United States. Housing throughout the US is characterized by a lack of affordable, fair and accessible housing, segregated communities and schools, and a lack of diverse housing options targeting a broad base of community members. This presentation provided an analysis of housing market trends, in New York and nationwide. It also discussed the impact that the lack of affordable housing has on low-income and other marginalized communities. Finally, we discussed best practices related to affordable housing inclusivity nationwide.

Introduction

Human service practitioners are tasked with increasing inclusivity in the communities we serve. A simple definition of "inclusive" reads: "including everyone, especially, allowing and accommodating people who have historically been excluded (as because of their race, gender, sexuality, or ability) (Merriam-Webster, 2020). The need for inclusivity is perhaps no more clear than in housing demographics, which directly impacts the extent to which communities throughout the US are representative of diverse populations with regard to socioeconomic status, race, ethnicity and various housing needs. With regard to housing inclusivity, fair and affordable housing initiatives create mechanisms in otherwise segregated housing markets that can facilitate the increased availability of housing options for diverse populations. Long Island, New York, the easternmost region of New York State, offers a case study regarding the impact that housing inclusivity – or the lack thereof – can have on a region.

Long Island, New York, is one of the wealthiest suburban regions in the United States (Long Island Index, 2018). The region boasts some of the best schools in the nation, beautiful beaches and recreational facilities, is located close to numerous large cities and is home to a myriad of employment and entertainment options for our residents and visitors. The darker side of this affluence however, is that Long Island is also one of the most racially and ethnically segregated regions in the country (Gross, 2018). This segregation is no more apparent than in its housing stock and amenities, or their absence, that accompany housing location.

St. Joseph's College, located in Brooklyn, NY, and on Long Island, NY, spans the entirety of the Long Island region. The college is embedded in the local community and is committed to addressing regional needs as they arise. Part of this commitment is demonstrated through our Center for Community Solutions and the Institutes that exist within the Center. One such institute, the Institute for Attainable Homes, has spent years establishing a core group of

stakeholders, collaborating with a variety of communities throughout Long Island, and collecting and disseminating data regarding fair and affordable housing needs throughout the region. The Institute's webpage (www.sjcny.org/iah) maintains a current database of fair and affordable housing data and research, both specific to Long Island and nationwide, and is a clearinghouse of information regarding housing issues both locally and nationally. St. Joseph's College's possesses a depth of knowledge about affordable housing and the Long Island region, which is not matched in other venues. Given our expertise, as well as Long Island's unique position as a relatively affluent and segregated community, we are in a unique position to examine our region with regard to the impact fair affordable housing, or its absence, can have on inclusivity within a community.

Problem Statement

Long Island remains one of the most expensive and racially segregated suburban regions in the United States (Gross, 2018). Long Island is the southeastern most portion of New York state and has become a popular alternative to living in the more urban setting of New York City or in surrounding states. Long Island experienced growth when people left New York to seek the quieter, "bedroom" communities of the suburbs.

The history of Long Island is one of exclusionary development. Highways and much of the infrastructure was designed to limit access by lower income residents of New York City (Gross, 2018; Long Island Index, 2018Powell, 2007). This pattern of classism within development throughout New York state is well documented (Gotham, 2007) and has shaped the landscape of Long Island into the 21st century.

Despite all of this, there is no shortage of housing on Long Island (Long Island Index, 2018). What Long Island lacks is a diverse housing stock, characterized by housing options that work for people throughout their lifespans. A diverse housing stock incorporates housing that meets the needs of young professionals, young families, single adults, families as they grow and senior citizens seeking to age in place (Moore, 2016). Each of these groups brings unique contributions to a community and its economy and have distinct, although sometimes overlapping, housing needs. Unfortunately, the overwhelming majority of Long Island's housing stock consists of aging single-family homes in need of ongoing maintenance and which are often beyond the affordability threshold for many Long Islanders (Long Island Index, 2018).

Long Island's housing crisis impacts very specific populations within our region as it relates to unique housing needs. Options beyond the standard single family home are extremely rare and multifamily, affordable and accessible options are exceedingly difficult to locate (Regional Plan Association, 2013). Despite the dire shortage of these types of housing, fair, affordable, accessible, multifamily and rental housing are among the most difficult to develop in the region (Regional Plan Association, 2013). Even "affordable housing" development largely targets homeownership initiatives, leaving out Long Islanders who are seeking multifamily and rental housing options.

The high cost of housing is a characteristic of the Northeast, but Long Island lags behind even our peers in the region with regard to affordable, multifamily and rental housing development

(Center for Popular Democracy, 2015). The neighboring suburbs of Westchester County, NY, and northern New Jersey (just north and south of New York City) both offer affordable and multifamily housing development that exceeds development on Long Island (Center for Popular Democracy, 2015). This lack of diverse housing options has a significant negative impact on the region and limits Long Island's ability to attract a broad array of residents and businesses. Without diversifying our housing stock to meet these needs into the 21st century, Long Island will not be able to increase our inclusivity as a region.

The impact of this lack of diverse housing options is far reaching. Diversifying the housing stock on Long Island will allow for more integration of our communities with regard to a variety of socioeconomic factors and will prepare Long Island to continue to be a destination for businesses and residents into the next generation. Currently, Long Island is experiencing a brain drain as employers and young people seek more affordable and vibrant regions in which to establish themselves. Over time, this will result in economic degradation and Long Island will become a less desirable place to live. In order to remain a desirable destination for the next generation of Long Islanders, we will need to create more inclusive communities that will be welcoming to a variety of people.

On the other hand, the importance of diverse housing stock in establishing inclusivity is well documented in the literature and will result in an improved quality of life for all Long Islanders (Choi, et. al., 2019; Gross, 2018; Center for Popular Democracy, 2015). Addressing the problem and issues surrounding a lack of fair and affordable housing in Long Island is the focus of the following discussion.

Definitions
Affordable Housing

Understanding the importance of fair and affordable housing begins with identifying a shared definition of both. For the purpose of this discussion, the reader should note several generally accepted definitions related to fair and affordable housing. The most widely acknowledged definition of affordable housing is related to regional "Area Median Income" (AMI) as defined by the federal Department of Housing and Urban Development (HUD). Affordable housing by this definition is defined by varying percentages of the AMI for a region (United States Housing and Urban Development, 2012). The reader should note that Long Island has one of the highest AMIs in the nation.

HUD updates AMIs annually and to reflect the changing economic condition of a region. Notably, affordability with regard to housing development can vary by municipality with housing being considered affordable even when targeting households up 120-150% of the local AMI. In essence, these units will benefit from the various subsidies and tax credits that affordable housing development qualifies for, but will target households that earn up to 50% more than the area median income. The implications regarding inclusivity, and specifically creating more inclusive communities for diverse populations are far reaching.
Another concept that is useful in understanding affordability relates to the percentage of household income that is dedicated to housing costs. According to HUD, housing is affordable if residents spend no more than 30% of their total gross income on housing related expenses

(rent/mortgage, utilities, insurance, upkeep, taxes). Spending more than 30% of household income on housing is considered a housing cost burden. On Long Island, a significant number of households – both homeowners and renters – are housing cost burdened, but this burden falls disproportionately on renters, people of color and low-income households (Center for Popular Democracy, 2015). Housing cost burden has significant implications on inclusivity because households experiencing the cost burden are overwhelmingly focused on maintaining their tenuous grasp on their housing, and are excluded from many communities.

Fair Housing

In addition to the role affordable housing plays in creating inclusive communities, fair housing laws protect people from discrimination based on a variety of factors. The federal Fair Housing Act is a piece of civil rights legislation enacted in 1968 designed to protect people from discrimination in home buying and renting based on a variety of factors, including race, color, national origin, religion, sex familial status or disability (United States Department of Housing and Urban Development, 2019). Many states and localities have also established their own fair housing laws, but the federal guidelines remain the most comprehensive laws designed to prevent housing discrimination at the federal level.

Despite federal fair housing laws, a recent study on Long Island revealed a continued widespread practice of housing discrimination throughout the region (Choi, et. al., 2019). This three year study illuminated a widespread practice of housing discrimination by realtors against a variety of underrepresented groups in the region. This study illuminated what many advocates and human service professionals already suspected: the segregation evident throughout Long Island is intentional and, therefore, preventable.

Fair and Affordable Housing and Inclusivity

As previously stated, Long Island is currently experiencing a fair and affordable housing crisis and this crisis is having a significant impact on the inclusivity of many of our communities. In an effort to combat lack of inclusivity, human service professionals will do well to consider a variety of factors that impact our communities. The effort to create inclusive communities, and the impact the fair and affordable housing can have on this effort, will necessitate advocacy and legislative components, and it will need to occur at both local and regional levels.

Barriers to Inclusivity

"Otherness"

Several themes surrounding the understanding of affordable housing development seem to exacerbate exclusionary housing practices and community development. In particular, messaging around affordable housing initiatives lead community members to interpret affordable housing as something that benefits others, and not themselves or their immediate family and community. As discussed previously, affordable housing targets a diverse array of households and not simply "low-income" or otherwise cost-burdened households. Shifting the messaging to more accurately portray the beneficiaries of affordable housing and supporting these messages with community

education strategies may help to increase the receptivity of community members to affordable housing initiatives.

Property Values

Concerns around property values also contribute to the reluctance of communities to embrace affordable housing and more general inclusivity in their communities. In fact, data indicates that diversifying housing stock, including affordable, rental and multifamily housing development, has a positive impact on a region with regard to property values, as well as other factors that impact inclusivity (Center for Popular Democracy, 2015). The reader should note that the development of multifamily housing, both ownership and rental units, can offset the tax burden of all of the properties in the region (Moore, 2016). Further, multifamily housing units have not been shown to create a burden on school districts and have, in fact, alleviated some of the tax burden that is so common on Long Island (Center for Popular Democracy, 2015). For all of these reasons, the importance of a diverse housing stock to increasing property values cannot be understated. As Long Island continues to experience a brain drain of young professionals and difficulty retaining business citizens would do well to recognize the importance of having a vibrant community to offer employers and employees alike. It should be noted that recent research (Moore, 2016) has indicated that both young professionals and senior citizens have identified establishing transit oriented, pedestrian friendly and vibrant downtowns as priorities when choosing housing. Despite being in very different phases of life, these two groups of Long Islanders are experiencing parallel needs. Addressing these needs will not only facilitate the creation of more inclusive communities, but will also diversify our housing stock for future generations.

Way of Life

Long Islanders also pride themselves on a distinct way of life. This way of life is primarily characterized by single family homes, easy access to amenities such as excellent schools, access to parks and beaches, and close proximity to New York City. Any proposed changes to housing stock are met with resistance and concern about the current way of life. Fear about living in an urban environment, decreased access to natural resources, school overcrowding (though many have had to close due to underutilization) and other issues seem to mask a larger fear surrounding class concerns.

Class Conflict

Class concerns characterize much of the affordable and fair housing discussion on Long Island. Clearly, concerns over class can impose barriers to inclusivity, so it is worth noting and deconstructing these concerns. Despite accurate marketing of affordable housing proposals, community members often misconstrue these projects as benefitting households other than those currently living in the community. These individuals are – intentionally or inadvertently – creating class conflict around who is expected to benefit from affordable and fair housing on Long Island. Individuals not familiar with the demographics of Long Island, or with eligibility for affordable housing projects that strongly favors working and middle income households, frequently argue that "those people" from other regions will be taking housing away from Long

Islanders. In reality, affordable housing overwhelmingly goes to current residents of Long Island. It should be noted that it is rare that a household moves to our region given the difficulty associated with our high housing costs, lack of available housing options, and limited employment opportunities (Long Island Index, 2018). This focus on "those people" is likely familiar to the human service practitioner and is perhaps the most challenging component to creating inclusive communities with regard to fair and affordable housing.

This paper has discussed misinformation, class conflict and even resistance to change, but it is especially challenging to address the underlying issues surrounding racism that characterize the affordable housing discussion on Long Island. As previously noted, not only is Long Island one of the most racially segregated communities in the nation, but its infrastructure has exclusionary aspects affecting continued future separation. As such, affordable and fair housing discussions must include a discussion of race in order to be effective at increasing inclusivity in this regard.

Community Responses to Increase Inclusivity

Resistance to affordable and fair housing is not unique to Long Island. The author proposes that the history of exclusionary housing practices and individuals acting in detrimental self-interest are components of U.S. history, but are not intractable. In fact, recent research has clearly and repeatedly indicated that Long Islanders want more affordable housing, more multifamily units and more rental housing (Long Island Index, 2018). In addition, people consistently indicate a desire for more walkable downtowns, preservation of open spaces and communities that plan for the next generation of Long Islanders. These expressed desires provide a path forward for increasing inclusivity on Long Island and starting with housing priorities. Human service professionals can play an important role in these initiatives.

Although Long Islanders approve of affordable housing, they often react in what they believe to be their best interest by opposing these projects when they are proposed in their neighborhoods. In part, this phenomenon seems to occur when individual core beliefs conflict with the realities of proposed housing developments. Further, it seems evident that individual beliefs about "otherness" significantly impact our ability to support projects that we do not believe will benefit ourselves directly.

Affordable housing development provides the human service professional with the opportunity to facilitate more inclusive communities because of human service professionals' visibility as community leaders and advocates. We are well positioned to engage our communities and to elicit feedback regarding housing needs, reactions to and perceptions of new housing developments. Considering this, we can capitalize on those needs to mobilize communities, correct inaccurate information, and provide accurate information regarding affordable housing and proposed developments.

Perhaps most importantly, human service professionals are well positioned to identify on the inherent bias, classism, and racism that underlies much of the affordable housing discussion on Long Island. Although these discussions are difficult considering the already charged dialogue surrounding affordable housing, Long Island cannot move into the future – a more inclusive future – without addressing these issues directly.

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3. All-Inclusive Work for Human Services Professionals: The Impact of Career Stress on Client Suicide Risk

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Abstract

Human services students and professionals may be lacking important information on career stress and its connection with suicide risk. Career stress can impact a variety of factors in a client's life. Suicide risk factors may be connected to career stress, and understanding this relationship is an important component of competence. This paper outlines relevant information for human services students and professionals on the connection between suicide risk and career stress, as well as important career factors to consider when assessing suicide risk. Recommendations for training and practice are also discussed.

Human services students and professionals may be lacking important information on career stress and the connection with suicide risk. Symptoms of career stress have many relevant similarities to suicide risk factors (Center for Disease Control [CDC], 2019; Fowler et al., 2018). This paper will outline relevant information for human services students and professionals on the connection between suicide risk and career stress, as well as important career factors to consider when assessing suicide risk.

Suicide

Suicide rates vary by state, but nationally it is the 11th leading cause of death, with an overall rate of 13 per 100,000 deaths (National Institute of Mental Health [NIMH], 2017). Individuals who experience suicidality and attempt or complete suicide have often exhibited some form of help-seeking behavior (Barnes, Ikeda, & Kresnow, 2011; Meyer, Teylan, & Schwartz, 2014). When examining specifically working age populations, the suicide rate is 17.3 per 100,000 deaths (NIMH, 2017). Additionally, for those aged 35 to 54 years old, suicide is the fourth leading cause of death, and the 8th leading cause of death for those aged 55 to 64 years old (CDC, 2019).

According to the World Health Organization (WHO) (2014, p. 31) suicide risk factors can occur at several levels including:

- **Individual level**
  Examples: previous suicide attempt, mental health diagnosis, harmful alcohol use, job or financial stress, hopelessness, chronic pain, family history of suicide, and genetic/biological factors

- **Relationship level**
  Examples: sense of isolation, lack of social support, relationship struggles

- **Community level**
  Examples: disaster, war, stressors of acculturation and dislocation, discrimination, and trauma or abuse

- **Societal level**
  Examples: exclusion to means, inappropriate media reporting, and stigma associated with help-seeking behavior

- **Health systems level**
  Examples: barriers to accessing healthcare

Human services professionals interact with clients at each of these levels, and career often impacts these levels, as well. When working with a client experiencing suicidality, human services professionals should include career stress in their assessment of risk factor components.

Career Stress

Work is a central organizing feature of life. Whether or not an individual is employed, work surrounds a client's existence. If a client is employed, work and personal concerns often present together, making it difficult to differentiate symptoms and treatment. For human services professionals, clients may present with symptoms that are related to career stress though the practitioner may not always be directly assessing it as such. The impact of work on a client's mental well-being is significant and may possibly be a primary factor to consider when a human services professional works with a client (Guindon & Giordano, 2012).

Mental Health & Career Stress

Multiple mental health diagnoses could be related or contribute to career stress. It is often difficult to know if a mental health condition contributes to work stress or if work stress exacerbates symptoms of a diagnosis. When human services professionals are working with clients with specific diagnoses, it may be valuable to assess for career stress and its presentation. In the following paragraphs, discussed are considerations for specific diagnoses.

Links may exist between **social anxiety disorder** and career stress. *The Diagnostic and Statistical Manual of Mental Disorders* (DSM-5) (American Psychiatric Association, 2013) provides diagnosis criteria for social anxiety disorder including fears surrounding possible scrutiny by others, social interactions, observation by others, and performing in front of others (APA, 2013). Each of these criterion of social anxiety disorder are often components found in a work setting and may have an impact on a client's mental health (Nordahl & Wells, 2017).

In addition to social anxiety disorder, various **mood disorder** diagnoses (e.g. bipolar II disorder, persistent depressive disorder, panic disorder) have criterion that may interact with career stress. For example, major depressive disorder includes symptoms such as feelings of worthlessness,

diminished ability to concentrate, and depressed mood, among others (APA, 2013). Many other diagnoses have symptoms (e.g. depressed mood, anxiousness, inability to concentrate) that could manifest as work stress and/or a symptom of a mental health condition.

Individuals with **post-traumatic stress disorder** (PTSD) are especially vulnerable to work stress. Those diagnosed with PTSD may have symptoms such as intrusive thoughts, emotional distress, trauma-related thoughts, irritability, heightened startled reaction, and difficulty functioning, among others (APA 2013). If an individual has these symptoms, it may have an impact on performance or retention at work (Biddle, Elliott, Creamer, Forbes, & Devilly, 2001).

Though these disorders are by no means an exhaustive list of the different mental health diagnoses that could possibly have an impact on an individual in the work setting, it is a list to begin to conversation of specific symptoms. The symptoms presented in these diagnoses could signify that the human services professional explore further assessment of work-related issues.

On-the-Job Stressors

For clients that are employed in some capacity (e.g. full-time, part-time, unpaid, or paid labor), on-the job stressors can be a cause of work stress. Specific on-the job stressors discussed that are of concern for clients include crisis incidents, workplace factors, workplace fear, and unemployment.

Crisis incidents may seem like an obvious workplace stressor, but this can have a significant impact on not only the individual(s) experiencing the crisis, but those around them being exposed to the crisis as well (Bendersky Sacks, Clements, & Fay-Hillier, 2001). If a client witnessed a crisis incident at work, it can be difficult to continue functioning in and out of the workplace. However, as Skogstad et al. (2013) stated, while most everyone experiences post-traumatic stress reactions after being exposed to trauma, the good news is that, "most stress reactions will diminish within days, weeks, or a few months without any intervention" (p. 175).

The relationships between fellow coworkers, customers, organizational rules and procedures, and other components of **workplace dynamics** can be a source of strength or stress for a client. Kersh (2017) explored women's experience in higher education and found that negative workplace factors directly impacted participants' personal lives and increased workplace stress. If the client is experiencing workplace stress, low morale in their workplace setting may be a domain to assess for human services professionals. Low morale in the workplace can lead to negative feelings of the workplace and burnout (Judd, Dorozenko, & Breen, 2016).

If an individual experiences an unstable workplace, it can bring **feelings of fear** that permeate their life. Gibaldi and Cusack (2019) examined workplace fear and developed specific categories of fear that participants identified. These categories included vulnerability, feeling trapped, job insecurity, lack of safety, social and ego consequences, and fear-related stress management coping skills. These components of workplace fear suggest areas of assessment for human services professionals.

Finally, an individual undergoing temporary or permanent **unemployment** can have various adverse experiences that affect their mental health (Nordt, Warnke, Seifritz, & Jawohl, 2015; Norström & Grönqvist, 2015). Sumner and Gallagher (2017) noted that unemployment can cause stress in the form of, "financial limitation, stigma, reduced social connectedness and social support; and social identity disadvantage by harming self-perception, as well as the absence of self-esteem increases associated with a working like" (p. 289). These stress factors can severely impact an individual's mental health and is an important consideration for human services professionals.

Reactions to Career Stress

Individuals respond to career stress in varied ways and might experience symptoms that are behavioral, physical, cognitive, social, or existential in nature. The following are examples in each of these categories:

- Behavioral- Lack of sleep, angry outbursts
- Physical- Teeth grinding, headaches, stomach issues
- Cognitive- Apathy, depressed mood, nightmares
- Social- Substance use, isolation, difficulty maintaining relationships
- Existential- Anxiety about the future, hopelessness

Each category has a multitude of factors that may be helpful for human service professionals to consider when assessing career stress factors. It may be that organizing symptoms into categories may assist in the assessment process.

Career Stress and Suicide Risk Factors

Bridging career stress and suicide risk is not a stretch when examining the risk factors of suicide along with the career stress factors discussed previously. The Center for Disease Control (2019) listed the following risk factors for suicide:

- Family history of suicide
- Family history of child maltreatment
- Previous suicide attempt(s)
- History of mental disorders, particularly clinical depression
- History of alcohol and substance abuse
- Feelings of hopelessness
- Impulsive or aggressive tendencies
- Cultural and religious beliefs (e.g., belief that suicide is noble resolution of a personal dilemma)
- Local epidemics of suicide
- Isolation, a feeling of being cut off from other people
- Barriers to accessing mental health treatment
- Loss (relational, social, work, or financial)
- Physical illness

- Easy access to lethal methods
- Unwillingness to seek help because of the stigma attached to mental health and substance abuse disorders or to suicidal thoughts

Upon reviewing these risk factors, it is evident that many are similar to the impact of career stress discussed previously. Specifically, a history of mental disorders, a history of alcohol and substance abuse, feelings of hopelessness, impulsive or aggressive tendencies, isolation, loss, and easy access to lethal methods have all been discussed as possible career stress components. While these have a direct connection, the remaining risk factors also have ties to career stress. For example, Tsutsumi et al. (2007) examined the role played by lack of control on workplace stress in a sample of Japanese men. Lack of control in the workplace was a predictor for suicide attempts. Fowler et al. (2018) examined career stress factors that contributed to suicide risk and found positive relationships between suicide risk, career stress, and the following: relationship problems, problematic substance use, financial problems, physical health issues, crisis within a two-week period, loss of housing, and legal issues.

Occupations have also been investigated in relation to rates of those who attempt or complete suicide. Peterson et al. (2018) examined occupations of those who died by suicide. For men, the three highest career clusters were: (1) construction and extraction; (2) unpaid, and (3) transportation and material moving. For women, the three highest career clusters were: (1) unpaid, (2) office and administrative support, and (3) healthcare practitioners and technical occupations.

Like any contributing risk factor, assessment is vital in order to understand the severity of suicide risk with a client. Human services professionals are in the unique place of being on the front lines of risk assessment. A vital step in being competent professionals includes understanding and evaluating the potential role of career stress in suicide risk.

Recommendations

As with any component of competency for human services professionals and trainees, training, practice, and continuing education are essential. In general, there is a greater need for more training that infuses career stress factors into suicide prevention and assessment training in human services programs and on-the-job training. Increased agency protocols on requirements when assessing suicide risk are needed and could include more in-depth training and more consistent training across work settings.

Accordingly, specific training in suicide risk factors should be introduced early in human services education and infused throughout the curriculum. Additionally, increased training specific to career stress is needed, and it could be helpful to discuss career stress for the client as well as career stress at the human services professional level. Specifically, discussions, readings, and role-plays around the topic of career stress and its impact on mental health and suicide risk of the client would be beneficial.

Conclusion

Human services students and human services professionals will inevitably work with clients experiencing career stress. Practitioners have a duty to be competent in their work, with the ethical standards stating that "professionals know the limit and scope of their professional knowledge and offer services only within their knowledge, skill, base, and scope of practice" (National Organization of Human Services, 2015, p. 6). Given the severity of suicide rates in the United States and the inevitability of career stress in a highly employed population, it is imperative that our human services professionals are competent in this area of their practice.

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4. We All Grieve: An International Approach to Grieving Styles and Long-Term Wellness

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Abstract

Self-harm and suicide with intent to harm self-and/or others are on the rise in an increasingly diverse, global society. Human services professionals answer the call to provide grief support both initially and long term. Unfortunately, many training programs do not provide adequate wellness and death education. This paper reviews an adaptive approach to grief counseling. Allowances for one's own culture and grieving styles are included in this multifaceted approach. Additionally, recommendations follow for a wellness-based lifestyle as a long-term approach to alleviate effects of trauma, grief, and related mental health challenges.

On October 1, 2017, a mass shooting devastated the Las Vegas community. As one of the largest tourist destinations in the world, the impact was worldwide as individuals sought mental health services to deal with issues of grief and trauma. Unfortunately, there are an increasing number of mass grief-related incidents resulting from harm to self and/or others around the world. Additionally, suicide is one of the top 10 reasons for death in the United States (NIMH, 2017). Individuals affected by the loss of a loved one due to harm to self-and/or others may seek out services to help them process their own feelings, thoughts, and actions. Human services programs need personal wellness and death education to be a standard part of their curriculum and training. This paper will review an internationally relevant approach to grief counseling. Allowances for one's own culture and grieving styles are included in this multifaceted approach. Additionally, discussed are two recommendations for a wellness lifestyle as long-term approaches to dealing with grief and related mental health challenges.

Grieving Style Affected by Culture

Take a moment and think about the last major grief event that you experienced. How did you grieve? Did you allow others into your process? What is important to you when you grieve? Death and loss are unifying experiences that everyone will face. Yet, how we handle loss can vary greatly (Gire, 2014). In fact, how we grieve can be impacted by how we observe others express loss within our family system, primary culture, and dominant society. What is deemed as an appropriate expression of grief (open expression of emotion, silently grieving, time allotted to grieve) is as expansive as our observable world.

As a new decade approaches, our society is becoming more global. Individuals have access internationally through education, travel, the internet, and living in increasingly diverse communities. People now increasingly develop their own individual cultural perspectives. One's individual culture is influenced further by perceptions of their gender, ethnicity, spirituality, and personhood. Thus, an individual's grief process can be affected by their previous experiences with grief, their personality, and their individual culture. The Ethical Standards for Human

Services (National Organization for Human Services [NOHS], 2015) outline recommendations for cultural sensitivity and awareness and assisting clients in their communities. Helping professionals are encouraged to first understand their own values and beliefs about grief and loss training, be purposefully driven from an international perspective, and learn how to explore cultural messages that a client may have regarding grief to help the professional understand the client's lens.

Adaptive Grieving Styles

Reflect on how you handle loss. Do you tend to try to sit with your emotions, allowing them to well up within you as needed? Do you try to keep yourself busy? Do you use your cognition to explain the situation to yourself? Do you use a combination of these methods? Death research has determined there is a vast array of mental, physical, emotional, and spiritual reactions to grief (Stroebe, 2018). Finding an approach that will provide helping professionals with a framework to help a variety of clients dealing with grief related issues needs to allow for wide variation. Doka and Martin (2010) suggested that multiple factors, including gender, personality, and culture help shape an individual's grieving style. They present the Adaptive Grieving Styles, a theoretical framework that is flexible and can support the individual where they are rather than expecting the individual to "fit" into a framework. Adaptive Grieving Styles fall along a continuum from intuitive (affective) responses to instrumental (cognitive behavioral) responses.

- **Intuitive** grievers are more likely to express grief through their affect and may have visibly heightened emotional responses. Helpful grief and loss counseling allows the individual a safe space to focus on or facilitate expression of their grief through either individual or group therapy.

- At the other end of the spectrum, **instrumental** style grievers tend to focus on a more problem-solving approach. Clients tend to respond more to cognitive and behavioral treatment. Helping clients find ways to "act" and strategize may be beneficial to their overall well-being.

- The most prevalent adaptive grieving style is between, or a **blending of intuitive and instrumental** styles. Clients may need a combination of emotional, mental, and physical techniques throughout their process to match the client's unique needs.

Wellness Approaches

Take a moment and reflect on how you approach wellness in your everyday life. Do you take time to slow down? Are you working hard at helping others, but not taking time for your own welfare? How does your overall sense of well-being affect your family, friends, clients, and community? Within communities are individuals who often struggle with overall wellness leading to greater sensitivity to trauma, loss, and thoughts of harm to self or others. Community wellbeing is an essential cornerstone of the human services profession and referenced in the Preamble to the Ethical Standards for Human Services Professionals (NOHS, 2015). Human services professionals also need to attend to their own compassion fatigue, self-care and wellness for personal and professional wellbeing (Seppala, Simon-Thomas, Brown, Worline, Cameron, &

Doty, 2017). A brief overview of two frameworks are provided to help professionals slow down and address both client and professional wellness. The two frameworks are The Indivisible Self Model of Wellness (Myers & Sweeney, 2004) and Slow Counseling (Astramovich & Hoskins, 2012).

The Indivisible Self

Based on Alfred Adler's Individual Psychology, and his premise that individuals are more than a sum of their parts, The Indivisible Self Model of Wellness (Myers & Sweeney, 2004) is an evidence-based wellness model that encourages the helping professional to look at the client holistically (the "indivisible self"). Five factors make up the whole self, including: Essential Self, Social Self, Creative Self, Physical Self, and Coping Self. Within each of the five factors, Myers and Sweeney further examine sub-components of each "self":

> **Essential Self**: cultural identity, gender identity, spirituality and self-care
> **Social Self**: love and friendship along a continuum
> **Creative Self**: emotions, thoughts, control, positive humors, and work
> **Physical Self**: nutrition and exercise
> **Coping Self**: Self-worth, realistic beliefs vs irrational beliefs, stress management, and leisure (Myers & Sweeney, 2004)

Assisting individuals to see their "selves" may help identify where a person excels or is deficient and needs to improve to become fully functional. For example, an adult male immigrant from Malaysia is struggling through survivor guilt after a family member commits suicide. The individual thinks he is taking care of himself compared to the social norms in his Western community, but still experiences sleeplessness, lethargy, and angst. After assessing his "selves," the individual recognizes that the dominant culture does not allow for long-term grieving, especially for males, and instead expects the individual to simply get back to work after three personal days. These findings are highlighted when assessing the Essential Self, which includes a focus on cultural and gender identity. Assessing the five, second-order factors can take place through talk therapy or using an assessment tool. After assessment, follow up with the individual with psychoeducation, talk therapy, counseling, and/or treatment planning can be beneficial.

Slow Counseling

Influenced by the "Slow Movement," Astramovich and Hoskins (2012) proposed Slow Counseling as a method to promote wellness in the current fast-paced climate. With stress, anxiety, trauma, and harm to self and others continually rising, human services professionals aid clients dealing with multiple pressures. Slow Counseling is an approach to manage long-term grief and related mental health challenges by encouraging individuals to decelerate, become mindful, and become present in the moment. Astramovich and Hoskins (2012) outlined the basic tenets of Slow Counseling:

- Slow Counseling is philosophically aligned with Humanistic and Transpersonal counseling approaches and is focused on enhancing client wellness and optimal

functioning in all areas of living. Optimal human development is viewed holistically as occurring within the multiple cultural and sociopolitical systems in which people live.

- Slow Counseling views interpersonal struggles and mental health issues as rooted in the complex interactions between biological and environmental stressors. Of particular importance are the client's views of time and time urgency as these are considered to be major contributors to stress-induced physical and mental illnesses.

- Slow Counseling emphasizes the nurturing and development of a strong therapeutic alliance between the counselor and client as a critical component of a successful counseling process. The development of such a relationship requires ample time and cannot be accelerated. The therapeutic space created in counseling allows clients to decelerate and learn to focus on the present moment, where insight and clarity can foster growth.

- Slow Counseling helps clients assess and strengthen their ability to manage the demands of living in a fast-paced world. For many clients, time urgency or "not having enough time" has become a way of being. As a result, they may report experiencing anxiety, depression, and other significant mental, physical, and interpersonal concerns. Slow counselors help clients address time urgency by encouraging them to slow down and focus on living mindfully. Clients who frequently dwell on the past events or who worry and excessively plan for the future may be unable to function optimally in the present.

- Slow Counseling recognizes the influence of today's technology as a potential contributor to time urgency and stress. Therefore, the Slow counselor helps clients assess how technology may be utilized in a balanced and healthy manner.

- Slow Counseling encourages clients to focus on the quality of activities and relationships in their lives, rather than the quantity. Clients may need to evaluate and prioritize how they use their time and learn to take on fewer obligations and responsibilities.

- Slow Counseling values the use of techniques that support a slow lifestyle, many of which may be found in traditional practices from diverse cultures. For example, mindfulness, meditation, and yoga may help clients to slow down their pace and create more balance in their lives. (Astramovich & Hoskins, 2012, pp. 58-59).

Conclusion

The Ethical Standards for Human Services Professionals adopted in 2015 (NOHS, 2015) states that the profession was created to address human needs and problems. If the profession is to continue to grow and serve with intention, we need to review current issues of our communities, students, and professionals. Given the likelihood that the 21st century human services professional will interact with more global citizens than ever before who are affected by higher rates of trauma, suicide, and loss, authors recommend human services professionals participate in wellness oriented training as well as death education. A second recommendation is to include

death education and wellness into human services curriculum. An integrated approach across curriculum rather than stand-alone courses in grief or wellness may be more beneficial. Finally, Gleason, Wood, & Teng (2019) discovered the need to implement additional wellness related language and research in the human services body of research and literature. This could extend to the human services professional ethics and mission. By starting with professional standards, the profession can influence the need for training, programmatic curriculum, and long-term wellness practices.

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5. Council for Standards in Human Services Education (CSHSE) Accreditation Updates: The Accreditation Process, the Cultural Competence Standard, and the Revised Master's Standards

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Abstract

Human services program accreditation is a means to demonstrate program and curriculum quality, accountability, and transparency. The Council for Standards in Human Services Education (CSHSE) promotes the accreditation of human services programs at three degree levels, associate, baccalaureate, and master's, to assure best practices in human service education through evidence-based standards and a peer-review accreditation process. The purpose of this conference presentation was to provide information to human service program educators who are new to the accreditation process and to update educators who currently work within accredited human service programs. The benefits of human service program accreditation are discussed by reviewing the CSHSE mission and the Council for Higher Education Accreditation (CHEA) principles. In addition, an overview of the new Standard 8, Cultural Competence, which impacts policies, procedures, and curriculum, and an overview of the newly reviewed master's degree standards ensued.

History of Accreditation

Historically, the development of the standards for human service programs demonstrated a commitment to external review and academic quality. In 1976, the Southern Regional Education Board initiated a survey of human services programs through a grant from the National Institute for Mental Health. The collected data was reviewed and gave rise to the National Standards for Human Services Education and Training Programs. The standards were developed to establish program and curriculum principles and allow for uniqueness and diversity among programs.

In 1979, the Council for Standards in Human Services Education (CSHSE) was established to direct programs towards program and educational effectiveness. Since that time, CSHSE has regularly reviewed and revised the standards to promote the quality, consistency, and relevance of human services education across the United States. To ensure effective organizational structure, CSHSE sought and achieved recognition from the Council for Higher Education Accreditation (CHEA) (Council for Standards in Human Services Education [CSHSE], 2019b). CHEA recognition requires standards of the accreditation process to address three areas:

promotion of academic quality and advancement of student achievement; demonstration of public accountability for performance and transparency; and sustaining an effective accreditation and organizational structure.

In 2014, CHEA recognized CSHSE. This recognition offered confidence to CSHSE members that the CSHSE accreditation policies and procedures promoted academic quality, student achievement, public accountability for performance and transparency, and effective organizational structure. In December 2019, CSHSE submitted the recognition Interim Report to CHEA for review. The report highlighted the CSHSE organizational accomplishments during the 2014-2019 interim period: reviewed and revised the associate, baccalaureate, and master's degree level Standards; reviewed and revised the CSHSE Board Manual, Member Handbook: Self-Study and Accreditation Guidelines, and Self-Study Reader Handbook; redesigned the CSHSE webpage, and reviewed and revised the strategic plan.

Accreditation Decisions

The Council for Standards in Human Service Education (CSHSE) Accreditation is committed to improving human services education with evidence-based standards and a peer review process. Accreditation is a process that values external review, academic quality, and accountability. The Council for Higher Education Accreditation (CHEA) defines accreditation in the United States as "a collegial process of self-review and peer review for improvement of academic quality and public accountability of institutions and programs" (Council for Higher Education Accreditation [CHEA], 2019). The CSHSE accreditation process is designed to assist postsecondary human service programs in self-study evaluation and continual improvement, and to produce new and creative approaches to the preparation of human service practitioners at all degree levels (CSHSE, 2020a). CSHSE accreditation means that a program demonstrates best practices in human education, offers quality program and curriculum according to national evidence-based standards, and has successfully completed a peer review process. The CSHSE accreditation is voluntary, and accredited programs must maintain membership, provide program and curriculum assessment, and comply with the program and curriculum standards. As of this writing, the CSHSE has 50 accredited programs across the United States.

The CSHSE encourages human service programs to seek accreditation and recognizes that the program accreditation process may seem daunting. When considering accreditation it might be helpful for a program to ask the following questions:

- Does my program value quality academics?
- Does my program value meeting expectations?
- Does my program value external review?

If the answer is yes to any or all of these questions, then pursuing program accreditation is an invaluable process.

Process of Program Accreditation

To begin the process of program accreditation, a program must become a member of the CSHSE and apply for initial accreditation. The CSHSE policy offers a two-year period (after submitting

the application) to submit the self-study for an initial accreditation. A program can decide whether to submit the initial application and fee to begin the two-year preparation period or begin the self-study writing process before submitting initial accreditation application and fee. This latter option offers potential applicants the extra time needed to address curriculum and program changes that require additional time for institutional review and approval.

Self-Study Process

Curriculum Review

In either option, the best place to begin the self-study process is to complete a curriculum review. The CSHSE uses a curriculum matrix, which is a curriculum map, designed as a graphic index to help programs, self-study readers, and site visitors to identify where standards are met within the program's curriculum. By using the appropriate degree level matrix, a program can evaluate the knowledge, theory, and skills learning objectives in the program curriculum and identify any standard compliance gaps that may need to be addressed before submitting the self-study.

Program Evaluation

The next step in preparing the self-study is to evaluate a program's organization, policies, and procedures according to the ten CSHSE program standards. The program should identify any policies and procedures that may need to be created or revised to strengthen the philosophy, vision, mission, and organization of your program. This process may also take extra time for institutional review and approval of new policies and procedures.

Reaccreditation

An accreditation cycle covers a five-year period. A self-study and matrix is required at the initial accreditation and for every five-year reaccreditation cycle thereafter. The CSHSE reaccreditation preparation timeline for accredited programs from the submission of the application to the final board review and decision is about six months. A site visit is required for the initial accreditation and every ten years after the initial accreditation. The self-study submitted during the cycle between site visits is known as the Interim Report and Review; the first one required five years after the initial accreditation.

Accreditation Resources

The CSHSE website provides resources to help programs with the accreditation process. The website now provides improved navigation to general accreditation information; access when using mobile devices; direct public access to member program and contact information; access to accredited program's student achievement outcomes and accreditation decisions, and a member log-in webpage that offers access to the CSHSE publications, monographs, and self-study writing resources. Membership applications and fees can now be completed and submitted online.

The CSHSE relies on a strong volunteer base of human service professionals who are dedicated to promoting the quality of human service education through a quality peer review process. Board officers, board members-at-large, and self-study readers are all volunteers. The

CSHSE does contract with a management company to assist with membership, financial, and website activities.

The board officers and board members-at-large are committed to keeping the accreditation degree program and curriculum standards relevant to the current needs of the human service education and profession. The board meets three times a year, February, June, and October, to review and make decisions on program accreditations. The board is also committed to keeping the CSHSE membership actively involved in maintaining a proactive organization by strategically envisioning the future of human service education. The CSHSE program members are recruited to serve on the board or as self-study readers (CSHSE, 2019b).

The CSHSE program accreditation is a time commitment. However, the outcomes of receiving accreditation are beneficial to the strength and quality of education for students, the public, and employers. Accreditation offers students and the public confidence that the educational program has been determined satisfactory. It helps programs meet a threshold of quality program and curriculum expectations. Accreditation serves employers who are seeking employees with education held to accepted professional standards (CHEA, 2010).

Associate & Baccalaureate Review

During the 2017-2018 fiscal year, the CSHSE board members began a review of the associate and baccalaureate degree level program standards. Discussions were held on the relevancy of the standards, the need for an intentional cultural competency standard, and clarity of context. In January 2018, CSHSE surveyed all members to collect feedback on proposed revisions. Member feedback was reviewed at the June 2018 board meeting and the standards for the associate and baccalaureate degrees were written in final format and approved. The standards added specifications for online instruction; multiple site programs; a new program Standard 8, Cultural Competency; relevancy for the Administrative Standard of the baccalaureate degree, and rewording to reduce redundancy and improve clarity. The newly revised standards became effective on July 1, 2018.

Online Aspects

In light of increased use of online modality, programs who offer 50% or more of human services courses in a hybrid or online modality must now provide a narrative and documentation that assures compliance. Verification assures that:

- online students enrolled in the program or course(s) are: "who they say they are"
- learning outcomes/objectives exist for both face-to-face and hybrid/online delivery
- the program provides adequate technical training and support for students and faculty

It is very important that curriculum standards provide evidence of online assessments which are appropriate and adequate for knowledge, theory, and skills development objectives. Lastly, the standards allow that fieldwork supervision visits by program faculty can now be completed using appropriate video-based technology.

Site Location

In addition to online/hybrid program requirements, program standards were also reviewed for clarity of context. The CSHSE defined a multisite program to bring clarity to the application fee and site visit proves. A site is now defined as a location where the student can complete the entire human services program curriculum (CSHSE, 2019b). A multisite program must describe the physical location and any unique characteristics of each site, identify the faculty, directors, and staff of each site, describe the student population of each site, identify the evidence of formal policies and procedures which assure continuity and quality control of program and curriculum standards across all sites. Current costs and fees include:

- Maintain yearly membership fee: $500 plus $50 for each additional site
- Accreditation application with $500 application fee plus $50 for each additional site
- Site visit (initial and then every ten years): $2000 per site visitor, typically two site visitors (CSHSE, 2019b).

Administrative Content

To ensure that the curriculum standards reflect the current employment demands of each degree level, the CSHSE revised Standard 18, Administrative for the Baccalaureate Degree, to create relevance with the current job market (U.S. Bureau of Labor Statistics, 2019). Standard 18 now requires a program to provide knowledge, theory, and skills in the administrative aspects of the human service delivery system. The administrative aspects of human service delivery system include principles of leadership and management; human resources and volunteer management; grant writing, fundraising, and other funding sources; legal, ethical, regulatory issues and risk management; and budget and financial management.

Standard 8 Cultural Competence

During the 2014-15 academic year, the CSHSE began exploring and researching the topic of cultural competence and the importance of creating a stand-alone standard for this area. At that time, the CSHSE had several standards addressing diversity within a specific context, which served to target cultural competence in human service education.

Given the complexities of the larger political, economic, and sociological dynamics we continue to face with an ever-growing awareness of diversity, the time was right for the CSHSE to fully address cultural competence. Other professions such as social work, counseling, and psychology had made cultural competence a specific and overt standard (H. Gates, personal communication, September 9, 2019)

The CSHSE had already infused cultural competence in its curriculum standards as follows:

- **Standard 12f**: Emphasis on context and the role of diversity (including, but not limited to ethnicity, cultural, gender, sexual orientation, learning styles, ability, and socio-economic status) in determining and meeting human service needs and cultural competence within the program and curriculum standards

  Standard 18d: The worth and uniqueness of the individual including culture, ethnicity, race, class, gender, religion, ability, sexual orientation, and other expressions of diversity

Cultural Competence Subcommittee

During the 2016-2017 academic year a cultural competence subcommittee was formed with the charge to further explore this construct. The subcommittee created the following goals:

- Craft a cultural competence statement in General Program Characteristics (overall programming, faculty aspect)
- Craft a stand-alone standard on cultural competence in the Curriculum

- Craft statements to be infused throughout the curriculum standards on cultural competence.

The subcommittee reported the challenge of distilling cultural competence into a single standard that fit the existing national standards. Because all standards were grouped under **I General Program Characteristics**, or **II Curriculum.** The subcommittee identified the need to address cultural competence throughout both headings, so deciding where to place the new standard became problematic. The subcommittee made the following recommendations:

- Locate the new, singular cultural competence standard under **I. General Program Characteristics**

- Rewrite the "context" narrative following **II. Curriculum** to include cultural competence as a core value

- **II. Curriculum Standards 1-20/21** will reflect cultural competence as appropriate (H. Gates, personal communication, September 9, 2019)

In July, 2018 the CSHSE board approved the statement and new standard about cultural competence as follows:

H. Cultural Competence Statement: *Context: To ensure the program is effective in producing competent professionals who possess a high level of self-awareness, knowledge, and skills in the complexities of multiculturalism. This encompasses the individual, family and group level as well as agency/organizational, community and globally.*

Standard 8: **The program shall foster the development of culturally competent professionals through program characteristics, curriculum, and field work.**

Standard 8a- Demonstrate how the program:

   1. Includes cultural competence in program policies, procedures, and practices.
   2. Includes cultural competence training for faculty and staff

Standard 8b- Demonstrate how the curriculum integrates cultural competence:

   1. Includes but is not limited to student self-awareness of own culture, biases, prejudice, and belief systems and stereotyping.

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2. Includes the curriculum supports the development of awareness, knowledge, and skills of diversity and culture.

As a part of compliance with Standard 8, a program is required to provide a clear, detailed, concise, and descriptive narrative, which includes a reference to the name and location of any document (e.g., attachments/appendices) that support and verify statements made in the narrative. These documents may include but are not limited to links to a program's institutional webpages, surveys, syllabi, textbook citations (within syllabi), assignments, manuals, handbooks; job descriptions, copies of certificates etc., (the offices of Diversity and Inclusion and Students Access/Student Disabilities Office may be potential resources) (CSHSE, 2019b).

Revised Master's Degree Standards

After the 2018 revised associate and baccalaureate degree standards were approved, CSHSE began researching the relevancy of the master's degree standards. The review demonstrated three gaps in the 2010 Master's Standards:

- a defined uniqueness that differentiated a human services master's program from the clinical counseling and psychology master programs

- limited empirical and evidence-based research in human services education

- relevant education alignment to the current job market for community managers as identified by the U.S. Department of Labor (U.S. Bureau of Labor Statistics, 2019).

The CSHSE Board reviewed the committee's findings, discussed the identified needs, and surveyed the CSHSE members on proposed changes for a master's degree in human services. Final approval of the master's standards took effect July 2019.

The July 2019 Master Degree Standards were designed to intentionally develop students' capacity to interpret, analyze, synthesize, and communicate knowledge, and to develop those skills needed to effectively practice and advance the profession.

All three degree levels now have the same ten program standards:

- institutional requirements and primary program objectives
- philosophical base of programs
- community assessment
- program evaluation
- policies and procedures for admitting, retaining, and dismissing students
- credentials of human services faculty
- personnel roles, responsibilities, and evaluation
- cultural competence
- program support
- evaluation of transfer credits.

To redirect the focus of the master's degree level in human services education, the curriculum standards were significantly revised. The career focus draws attention to human service positions that contribute to positive change across a wide range of direct care and administrative roles within an organization. Curricula must now provide:

- scholarly and professional activities
- advance the student substantially above the baccalaureate degree curriculum standards
- provide professional practice through creative application of knowledge, theory, and skills
- student demonstration in understanding subject matter through bibliographical resources, theory, practice, and scholarly research.

More specifically, curricular standards address the following areas:

- historical perspectives and emerging trends
- human systems
- human service delivery systems
- disciplined inquiry and information literacy
- program planning and evaluation
- administrative leadership, legal and ethical practice
- culminating experiences

Moreover, programs must comply with Standard 20, Culminating Experience, which is a learning experience within a human services delivery organization. The culminating experience involves experiential learning that integrates the knowledge, theory, skills, and professional behaviors concurrently taught in the classroom. CSHSE requires the learning experience to demonstrate competency in translating theory into practice: fieldwork experiences, a thesis, or action research, all of which must include a professional reflection process. (CSHSE, 2019b).

The Council remains committed to improving the quality, consistency, and relevance of human service education programs and assuring best practices in human service education through evidence-based standards and a peer-review accreditation process. Its vision is to promote excellence in human service education providing quality assurance, and to support standards of performance and practice through the accreditation process. (CSHSE, 2019a)

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6. You Can't Pour from an Empty Cup: Confronting the Language Used to Justify Self-Care

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Abstract

Wellness and self-care practices are often topics discussed at professional conferences within the human services field. Human services textbooks and research address topics such as burnout and compassion fatigue as risks within the field. Despite this, the National Organization for Human Services (NOHS) Code of Ethics does not mention the terms "wellness," "self-care," or "burnout" anywhere in the document. This manuscript discusses wellness within textbooks, research, and ethical standards in the human services profession. There is a review of ethical standards from several related fields. Finally, there is a brief description of common themes during the discussion portion of the presentation.

Introduction

This paper explores the language often used in mental health professions, including human services, to justify self-care for practitioners. Presented is research establishing the importance of wellness to mental health professionals. Next, the authors discuss perspectives about wellness and/or self-care in the human services literature. Exploration of ethical guidelines for human services and several related fields follows. Finally, discussion concludes with possible future directions in human services and the potential to change professional conversation on self-care and wellness.

The Significance of Wellness in Mental Health Professions

The mental health field, as a whole, has been concerned about the repercussions of lack of self-care and/or wellness for decades (Cherniss, 1980; Freudenberger, 1974; Pines & Maslach, 1978; Ratliff, 1988). Herbert Freudenberger, a psychologist who studied fatigue and exhaustion in a variety of professions, is thought to have coined the term "burnout" to describe the phenomenon (Martin, 1999). Since then, researchers have developed a large body of research on burnout and related issues, such as compassion fatigue and secondary traumatization (Newell & MacNeil, 2010).

Puig, et al. (2012) suggested that lack of wellness leads to burnout, which can result in poorer client care. Further, individuals working within helping professions are at increased risk of burnout and secondary trauma (Hricova & Lovasova, 2019). The helping field also has significant stressors for individuals, such as large caseloads, lack of professional and/or personal supports, and difficult or high-need clientele (Lawson, 2007). These factors often make it

difficult for human services professionals to find wellness in their day-to-day lives, thus increasing the risk of burnout.

Wellness and wellness practices may well be the opposite of burnout and also its antidote. Wellness has been defined as, "a way of life oriented toward optimal health and well-being, in which body, mind, and spirit are integrated by the individual to live life more fully within the human and natural community" (Myers, Sweeney, and Witmer, 2000, p. 252). Wellness practices, such as the use of leisure activities in an effort to relax away from work, have been reported to reduce stress levels at work for individuals thus safeguarding against burnout (Kramen-Kahn & Hansen, 1998; Lawson, 2007; Stevanovic & Rupert, 2004). These practices are so important to practitioners that Neukrug (2017) listed wellness as one of the eight characteristics of an effective human services professional.

Wellness and burnout are often topics at conferences, such as the National Organization of Human Services (NOHS), and mentioned in professional literature, such as the *Journal of Human Services* (Gleason, Wood, & Teng, 2019). Multiple textbooks used in human services education discuss the importance of wellness and the danger of burnout (Martin, 2018; Neukrug, 2017; Woodside & McClam, 2019). Despite this, the terms "wellness" and "burnout" do not occur in the Ethical Standards for Human Services Professionals (National Organization of Human Services [NOHS], 2015).

Wellness Literature In and Around Human Services

As mentioned earlier, the topics of wellness and self-care are often seen at conferences, within educational textbooks, and throughout research literature in the human services profession. As a quick example, the 2019 NOHS Conference contained four presentations with the term "wellness" or "self-care" in the title (including the presentation presented by the first author of this conference proceeding). Wellness and self-care are clearly important to the professionals in this field. In this section, we will discuss more in-depth what the educational textbooks in our field say about wellness and/or self-care, as well as what research in the *Journal of Human Services,* the flagship journal for the human services profession, tells us about these topics.

Wellness in Educational Textbooks in Human Services

For this presentation, the research team reviewed three textbooks that are intended for use in introductory courses for human services (Martin, 2018; Neukrug, 2017; Woodside & McClam, 2019). All three of these textbooks mention wellness in some capacity as an important component for human services professionals to understand as part of their training. The Ethical Standards for Human Services Professionals, Standard 30, states, "Human service professionals promote the continuing development of their profession. They encourage membership in professional associations, support research endeavors, foster educational advancement, advocate for appropriate legislative actions, and participate in other related professional activities." (NOHS, 2015). We believe that this shows the importance of education to the field of human services and thus chose to investigate what a foundational course may or may not say about the topics of wellness and/or self-care.

As mentioned previously, Neukrug (2017) listed wellness as one of the eight characteristics of an effective human services professional. Further, Neukrug mentioned wellness throughout the textbook multiple times. The author brings up wellness in chapter one of the textbook and reflects back to the topic of wellness frequently throughout the text. Neukrug offers multiple activities encouraging students to look deeply at their own wellness practices. A brief summary of the Indivisible Self Model of Wellness (Myers & Sweeney, 2008) is introduced in one of the activities. The author states, "All helpers need to attend to their own wellness if they are to be effective" (Neukrug, 2017, p. 14). The risk of burnout and compassion fatigue is also mentioned throughout the textbook, along with the benefits of a wellness perspective.

Martin (2018) mentioned wellness promotion for clients as part of the Affordable Care Act of 2013. Strategies related to wellness and self-care are discussed in chapter four of the textbook in regard to setting up healthy boundaries with clients. In the epilogue, a large section is dedicated to the importance of self-care in relation to future trends in the human services profession. The author affirms, "As wonderful as this career is, it is also wrought with stress, crises, and significant burnout potential if human service providers aren't proactive in their self-care" (Martin, 2018, p. 379). The author goes on to explain briefly the emerging field of research around self-care.

Woodside and McClam (2019) discussed wellness in the context of client care, but not in regard to the human services practitioner themselves. The Five-Factor Wellness Inventory (Myers & Sweeney, 2005) explains the context of using a wellness model when working with a client. The authors stated, "The indivisible self represents a wellness model helpful to understanding clients" (Woodside & McClam, 2019, p. 202). Self-care is mentioned a handful of times, but only in relation to increasing client self-care strategies. Burnout and related issues are discussed, but wellness is not identified as a solution.

Wellness in Research in Human Services

On the 40th anniversary of the *Journal of Human Services* (*JHS*), Gleason, Wood, and Teng (2019) published a content analysis in an effort to explore what *JHS* published in relation to wellness related topics. There were 38 issues of *JHS*, containing 339 total articles, used in this study. A word search was used to identify any articles containing the terms, "wellness," "self-care," "burnout," "compassion fatigue," and "vicarious traumatization." The word search itself identified 53 articles with at least one of these terms. All 53 articles were analyzed to determine if the themes of wellness and/or burnout were central to the articles or simply casual mentions. It was determined that only ten of the 53 articles actually developed wellness and/or burnout as a central focus. Then, all ten articles were coded for themes and analyzed.

Of the ten articles with a central focus on wellness and/or burnout, three were research-based, meaning that the publication contained new research conducted for the article itself. Five of the articles were conceptual pieces and the last two were book reviews. The authors concluded that there was evidence of the need for more research-based articles focusing on wellness in *JHS*. The authors stated, "Due in part to a lack of attention in the professional literature, human services professionals may not be adequately integrating wellness/self-care as a key element of professional identity" (Gleason, et al., 2019, p. 70).

Wellness in Professional Organization Literature

The research team for this presentation wanted to see what was said in The Ethical Standards for Human Services Professionals (NOHS, 2015) as it related to wellness. It was found that the document does not include the terms, "wellness," "self-care," or "burnout" anywhere. In order to compare the NOHS ethical standards to other professions, the research team then gathered ethical standards documents of professional organizations that are closely related to the human services field to analyze them for wellness related material. In addition to the NOHS ethical standards, the researchers reviewed the ethical standards from the following professional organizations: American Counseling Association (ACA), National Association of Social Workers (NASW), American Association for Marriage and Family Therapy (AAMFT), American School Counselor Association (ASCA), American Art Therapy Association (AART), American Dance Therapy Association (ADTA), Association for Play Therapy (APT), American Psychiatric Nurses Association (APNA), American Music Therapy Association (AMTA), and American Association of Pastoral Counselors (AAPC).

The research team discovered that this is not an uncommon situation when it comes to ethical standards for the mental health field; most of these documents do not contain the terms, "wellness," "self-care," or "burnout." This made the work more challenging, so the research team set out to find codes that we believed were the most linked to wellness practices. We discovered that often when professionals of these organizations (including NOHS) were encouraged in some form of wellness, it would be immediately justified as a method for ensuring the best care for clients. Only two organizations (AMTA and AAPC) included wellness language that did not have any stipulations attached.

First, let us explore what our own professional organization (NOHS) says in regard to wellness. The Ethical Standards for Human Services Professionals contains a section called Responsibility to Self and it is made up of three standards. Of the three standards, we felt that only Standard 35 applied to wellness. Standard 34 focused on self-awareness in regard to cultural background, beliefs, values, and biases. Standard 36 centered on lifelong learning as an important commitment. Standard 35, on the other hand, states,

> Human service professionals strive to develop and maintain healthy personal growth to ensure that they are capable of giving optimal services to clients. When they find that they are physically, emotionally, psychologically, or otherwise not able to offer such services, they identify alternative services for clients." (NOHS, 2015).

The research team noticed that while NOHS encourages members to, "develop and maintain healthy personal growth," it is followed up directly with, "to ensure they are capable of giving optimal services to clients." While the research team felt that ensuring proper care to clients is of course vital to the responsibilities of a human services professional, we wondered when it had to be tied so explicitly to wellness practices. Was wellness for the sake of wellness not enough?

We noticed this trend throughout most of the ethical codes we explored. Then we explored the AMTA and the AAPC codes in relation to wellness, and we noticed that there was no stipulation. AMTA, Principle 2, states the following:

> …In addition, it is important for music therapists to extend compassion to themselves when confronted with their own human limitations. To operationalize this principle, the music therapist will: …
> 2.7. practice self-kindness and mindfulness and extend compassion to self if faced with feelings of inadequacy or failure." (AMTA, 2019).

Notice that there are no stipulations tied to this directive. It is not in service of someone else other than the music therapist professional.

AAPC's code of ethics states, "As members of AAPC we recognize our responsibility to: "6. Manage our personal lives in a healthful fashion and to seek appropriate assistance for our own personal problems or conflicts." (AAPC, n.d.). Again, there is no condition that this is done for the benefit of anyone other than the pastoral counselor.

The research team felt that it was necessary to highlight these two ethical standards as evidence that a call to wellness does not need to have stipulations tied to them. It is our belief that human services professionals may find such an ethical standard inspirational rather than obligatory. Ethical standards that uphold wellness for the sake of wellness may help human services practitioners satisfy the profession's expectations of wellness practices by allowing the practitioner to truly put themselves first in terms of wellness. A more open ethical guideline around this topic may also be motivating for human services students as they prepare to enter the field.

Discussion

This presentation contained a lively discussion with participants on the role of educators and NOHS on the promotion of wellness and/or self-care, which can be difficult to convey in a conference proceeding. The research team identified multiple themes and topics that were discussed at length during this presentation. Some brief thoughts and ideas regarding them are presented below.

Ethical Standards Do Not Reflect our Values on Wellness

Participants who attended the presentation claimed that they were surprised that the NOHS Code of Ethics did not contain the terms, "wellness," "self-care," or "burnout," especially since it is an often discussed topic at professional conferences and within human services literature. As part of the discussion, we reviewed Standard 35 in the Code of Ethics. Participants appreciated that it mentioned, "healthy personal growth," (NOHS, 2015) as a goal for human services professionals, but many reported feeling disappointed that it did not go further to inspire wellness behaviors. Many individuals in the presentation reported that wellness had been a common theme in several of the presentations they had attended thus far, and surprise that this value was not represented more fully in our professional standards.

Client Care is Vitally Important, as is Boundaries

Multiple ethical codes from various mental health professional organizations were presented to participants during the session. The vast majority had language which reflected that wellness is for the primary purpose of client care. Many participants during this presentation discussed how client care is an absolutely critical part of our profession, but that the language represented in Standard 35, "Human service professionals strive to develop and maintain healthy personal growth to ensure that they are capable of giving optimal services to clients…" could have a negative effects on human services professionals that were working with difficult clientele. If clients are particularly resistant to professional help, the response for human services professionals is often to sacrifice more time or personal resources to help that client. Healthy boundaries and the understanding that you are providing optimal care while still maintaining your own personal well-being is a difficult balance for many human services professionals. Participants largely wished for language that was more supportive of their personal wellness in the NOHS Code of Ethics.

Whose Responsibility is Wellness?

While in the midst of the discussion, a participant brought up an intriguing question about for whom the NOHS Code of Ethics were written. The participant pointed out that if the Code were written for only human services ***professionals*** to read in order to observe, than the language could and should be changed for Standard 35. However, the participant countered, that if the Code is written for ***clients*** to understand our responsibilities and their own protection, then the language in Standard 35 is appropriate. Participants seemed to agree with this point and we discussed how the Code serves both of these purposes. One attendee proposed adding a new standard that more aptly reflected the wellness needs of human services professionals while maintaining Standard 35 of the Code.

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Implications and Future Directions

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The presenters for this session were pleasantly surprised by how passionate and well received the session was from the participants. It was clear that there was a desire for this conversation and more like it to take place. The research team intends to continue to examine how wellness is discussed and viewed within the ethical standards, research literature, and educational textbooks of the human services profession. Although wellness is often discussed during conferences or in human services education, it is the research team's belief that our ethical standards should come to reflect this central value more meaningfully. It is the position of the research team that wellness research should continue and grow in outlets such as the *Journal of Human Services* and discussions about wellness be given more precedence in educational textbooks for human services students.

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Conclusion

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Wellness continues to be recognized as an important focus for practitioners in the mental health fields, and especially in human services. Throughout this manuscript, references to wellness and related topics were seen in educational textbooks, research literature, and the ethical standards

within human services. Burnout, compassion fatigue, and vicarious traumatization are common risks in the human services field that can lead to poor client care or high staff turnover. While wellness and self-care practices are often cited as a protective measure against these ailments, there is still work to be done.

This research functioned as an exploratory study into what different areas of the human services profession said about wellness. It led us to discover what other related fields were saying as well. Within the ethical standards of related arenas, we found standards that were on par with what NOHS had laid out, standards that made very little indication of wellness, and standards that made powerful statements around wellness for their professions. It is the sincere hope of this research team that our presentation and this manuscript raise awareness of the need to heighten the bar for wellness practices in the human services profession. We believe that by making our standards more inspirational in nature and by indicating the importance of wellness by name, current and future generations of human services professionals will be encouraged and hold strong to their need for wellness.

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7. Increasing Inclusivity in Human Service Education: Student Feedback on Experiences in Land-Based and Online Programs

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Abstract

The human services profession is characterized by our focus on inclusivity with regard to the people and communities that we serve. To be effective, our educational opportunities must reflect the importance of inclusivity to our profession. This research illuminates the first person experiences of human service alumni with regard to the focus on inclusivity while they were enrolled in human service programs This paper examines focus group data collected from recent graduates of online and land based human service programs and focuses on themes related to human service student experiences regarding inclusivity in the classroom, ideas for program improvements and increasing inclusivity in human service programs. Suggestions for improving student centered programming will be discussed at length.

Introduction

Inclusivity is a central tenet of the human service profession and, as such, is an integral component of our educational experience. As the importance of inclusivity in the field of human services continues to increase, human service educators must ensure that we incorporate this focus into our classroom experiences. This study examines the experiences of human service alumni with regard to inclusivity in their human service classes and makes suggestions for facilitating inclusivity in future programming.

This study builds on previous research (i.e., Durovich and Poland, 2019) examining the experiences of human students with regard to their classroom experiences in both land based and online classes. The author invited recent human service alumni to participate in a series of focus groups designed to elicit their feedback regarding their classroom experiences in the program. Participants were alumni of both graduate and undergraduate human service programs and took classes in either land based or online formats or a combination of both delivery methods. The author examined transcripts of student feedback to determine patterns in responses as related to inclusivity and also increasing an emphasis on inclusivity in the future in the various program formats. In essence, did faculty create an inclusive environment for their students, regardless of course delivery modality? What did the faculty do well and what can they improve upon in the future?

Both the undergraduate and graduate human service programs under discussion attract predominantly nontraditional students, including first generation college students, adults, professional students, and those balancing a variety of personal and professional commitments. These program demographics are consistent between the land based and online versions of the programs. Given the varied student population needs, classes are offered in a variety of formats,

including land based, online, and hybrid options. The land based course options are primarily offered in the evenings and on the weekends to accommodate the needs of adult students. As such, our alumni are quite diverse with regard to a variety of demographic factors and professional experience.

In an effort to obtain a broad expanse of student experiences, the author invited all alumni for which we had contact information and offered multiple dates to accommodate alumni schedules. Focus groups were scheduled throughout the fall of 2019 and the spring of 2020. This paper reflects the results of the first of these focus groups that was held in the fall of 2019.

This research illuminates the first person accounts of alumni from a small but diverse human service program and identifies themes related to inclusivity in the classroom. The author also discusses variations between online and land based student experiences regarding inclusivity and the impact that the various modalities may have in ensuring an inclusive classroom environment. This paper concludes with suggestions for future improvements in programming to increase inclusivity within the program.

Literature Review

Human service professionals overwhelmingly share a commitment to more inclusive human service practice, based upon a belief in the inherent worth and dignity of all people. As the clients and communities we serve become increasingly diverse, so too must our commitment to ensuring inclusive practice at all levels of human service provision. Our educational systems serve as the first opportunity for human service professionals to witness and participate in inclusive professional settings designed to be welcoming to diverse people, perspectives and experiences. This research examines the experiences of human service students with regard to the issue of inclusivity in the classroom and considers the function of course delivery modality in contributing to this inclusivity.

This study builds upon previous research by Durovich and Poland (2019), which examined data about student experiences in an undergraduate human services program. Earlier studies considered quantitative data related to human service student experiences as it pertained to satisfaction and performance in land based and online courses. That research identified a series of factors that were important to students regarding their overall experiences in in their classes as a function of course modality (Durovich & Poland, 2019). The research further indicated that students seemed to have parallel experiences in land based and online courses, a result that is indicated throughout the literature (Helms, 2014; Russell, 1999). It became clear that the level of inclusivity could significantly impact student experience and performance and merited further examination. The current study builds on those findings by seeking first person accounts of human service experiences specific to inclusivity within the same human service programs.

Extensive research indicates no significant difference between land based and online education, despite frequently expressed concerns about the quality of online education by oversight entities, employers and faculty (Russell, 1999). Since these early findings, researchers have continued to limited differences between land based and online education (Helms, 2014). Further, student performance as measured by grades remains consistent between land based and online courses

(Cavanaugh & Jacquemin, 2015). Given these consistencies between land based and online education, this research will examine the specific experiences of human service students with issues surrounding inclusivity in the human service classroom in an effort to determine how inclusivity is integrated into the various modalities and to determine if there are differences in the experience of inclusivity in land based and online courses.

Previous research indicates that several factors have a significant impact on student course experiences and retention (James, et. al., 2016; Johnson & Palmer, 2015;). These factors include instructor availability, class exercises, the pace of the course and course materials and assignments (Cole, et. al., 2014; Cheng & Chau, 2016; Garrison & Cleveland-Innes, 2004; Newhouse & Cerniak, 2016;). Faculty presence and authenticity is consistently identified as an important factor regarding student satisfaction and performance (Hoey, 2017). This study examines, within the framework of human service education, the extent to which inclusivity contributes to student satisfaction and success.

Methodology

This is a qualitative study of human service program alumni regarding their experiences with inclusivity in their classes throughout the human service program. Alumni were recruited from a list of undergraduate human service and graduate human service leadership program alumni and self-selected to participate in the focus group. Focus group participants represented graduates of both undergraduate and graduate programs, as well as both land based and online program options, over the preceding five years. This study received IRB approval during the summer of 2019.

The focus group was held on campus at a mutually agreed upon time for all participants and lasted approximately 90 minutes. The meeting was not audio recorded although extensive notes were taken by the facilitator and a designated note taker. Notes from the focus group were immediately transcribed for later analysis. The author examined qualitative data collected during the focus group to elicit information related to student experiences regarding inclusivity in their coursework. All identifying information was removed prior to analysis. Data analyzed included responses to the following prompts and queries:

- Reasons alumni chose their course of study and modality
- Importance of the instructor to student experience, regardless of land based or online
- What were some of the most rewarding activities in the classes with regard to inclusivity
- What materials were most beneficial with regard to fostering inclusivity
- Other factors that were important to study participants

Findings

Program demographic remained constant from previous research conducted within the program. As shown below, there is a significantly higher percentage of women in online courses but no significant difference in race or ethnicity between land-based and online courses (Durovich & Poland, 2019).
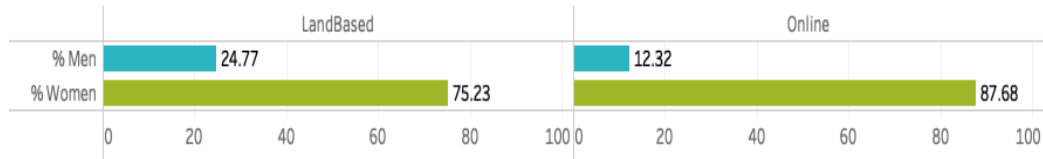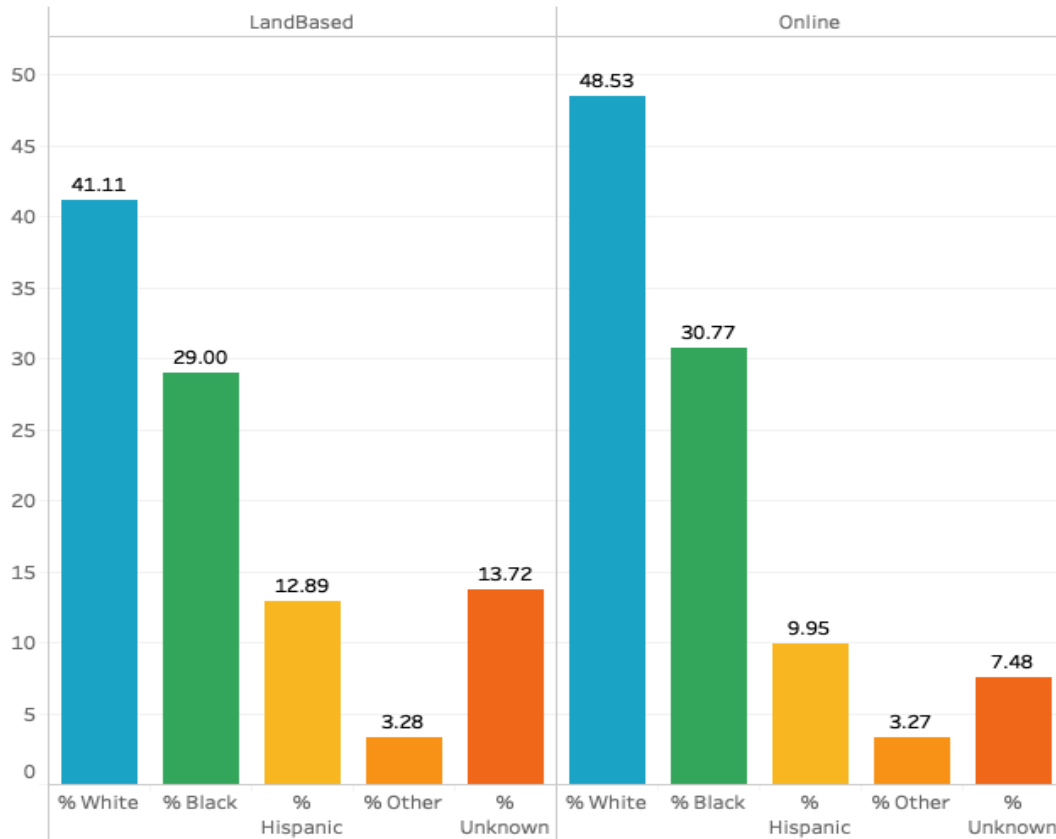
Table 1: Gender

Table 2: Race & Ethnicity

With regard to inclusivity, focus group participants were quite animated and excited to talk about their experiences. In general, their comments focused on the following areas:

- Instructor presence, responsiveness and professional expertise
- Comfort with and use of technology in the classroom or online
- Clarity of purpose when engaging in difficult topics
- Challenging assignments and connection to the workplace

Instructor Presence

Study participants devoted a significant amount of time to discussing the importance of instructor presence in their courses as it related to creating an environment which fostered inclusivity and openness. Focus group participants discussed that instructor presence was the foundation for establishing the trust necessary to truly develop an inclusive environment. In several instances, participants referenced instructors' training as social workers or agency administrators as strengths which allowed them to effectively manage classroom discussions and conflict in a manner such that all parties felt heard and valued. Failing to establish this trust with students left what appeared to be lasting negative feelings about the course and the instructor's ability to establish an inclusive environment.

For participants who took online classes, the lack of instructor presence was also important. They felt strongly that instructors need to participate in online discussions and other activities, particularly those which related directly to sensitive topics. Participants that felt that their online instructors were not actively working to establish an inclusive environment online had very negative comments about those courses.

Technology

Study participants felt that technology had a significant impact on their experiences in the program. For those who took online classes for ease of scheduling or out of necessity, they reported the greatest dissatisfaction with the use of technology and ensuing inability to fully engage in the course. In those instances, study participants felt strongly that the course was not particularly inclusive, but they also seemed to realize that that may have been a function of their discomfort with the technology. In instances where instructors struggled with the use of technology, the participants struggled with establishing rapport in the course, and ultimately felt that the ineffective use of technology was an impediment to establishing an inclusive environment.

Clarity of Purpose

Study participants felt strongly that clarity of purpose was an important factor in a truly inclusive course. Participants reported being willing to engage in challenging topics related to inclusivity both in their classes and in their professional roles but that they became frustrated at a lack of clarity. Interestingly, they struggled with ambiguity in their courses and while they generally reported a high level of comfort engaging in challenging topics, they expected strong leadership from their instructors when managing these exchanges.
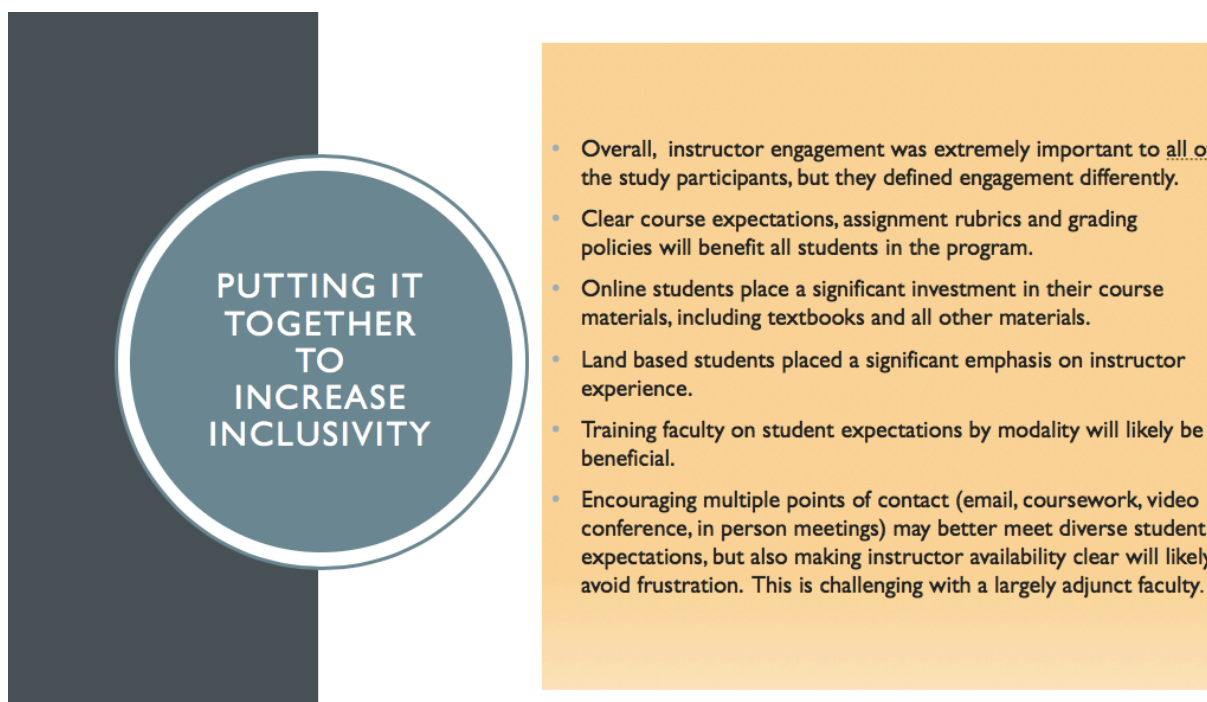
Assignments

Respondents reported that some of their most challenging assignments, which they initially expressed frustration over, ultimately translated most directly to their professional lives. They reported using the specific competencies utilized in these assignments to foster inclusivity (among other skills) into their work places. This experience was limited to the study

participants that had completed a graduate degree in human services and were able to most directly apply what they learned in the work place.

Implications & Future Directions

The findings of this study are relevant for the future of the programs under study and provide several opportunities for growth within the program. These results also provide the opportunity to more effectively tailor course design and instructional methods to specific modalities. As demonstrated throughout the research, the study participants also identified variations in their experiences with inclusivity between online and land based programming options, which provide additional opportunities for improvement within the programs.

PUTTING IT TOGETHER TO INCREASE INCLUSIVITY

- Overall, instructor engagement was extremely important to all of the study participants, but they defined engagement differently.

- Clear course expectations, assignment rubrics and grading policies will benefit all students in the program.

- Online students place a significant investment in their course materials, including textbooks and all other materials.

- Land based students placed a significant emphasis on instructor experience.

- Training faculty on student expectations by modality will likely be beneficial.

- Encouraging multiple points of contact (email, coursework, video conference, in person meetings) may better meet diverse student expectations, but also making instructor availability clear will likely avoid frustration. This is challenging with a largely adjunct faculty.

Study participants clearly place a significant emphasis on instructor involvement, especially when addressing challenging topics, establishing inclusivity in the course and in online classes. These findings support extensive previous research that speaks to the importance of instructor presence in online courses (Cole, et. al., 2014; Garrison & Cleveland-Innes, 2004; Kuo, et. al., 2014; Tichavsky, 2015). The results provide the program with clear direction as it relates to faculty development, specifically around establishing a welcoming and inclusive classroom environment for online students.

Data analysis revealed alumni that were largely satisfied with their experiences in the human services programs. Regardless of modality, engagement, consistency, responsiveness, contemporary materials and technology that were relevant to student career choices and feeling "heard" by their instructors all contributed to the students' feelings of being part of an inclusive environment. Future research will focus on eliciting input from additional alumni in future focus groups and incorporating the suggestions discussed herein into the program. Additional faculty training, increasing resource allocations with regard to adjunct recruitment and training and

developing resources specific to teaching modality all will likely serve to support St. Joseph's College in creating a more inclusive environment for our students.

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8. Finding Your Career in Human Services

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Abstract

This paper serves as a starting point for human services career exploration for students and people working in other fields who might be considering a career in human services. It highlights options for career exploration including on-campus and online resources for career exploration, values clarification, interests and skills, Holland Code determination, application materials, interview practice, and general considerations for members of diverse groups and those with legal issues.

Introduction

This paper provides strategies and tools for human services students who are just beginning to think about their careers, advanced students embarking on a job search, and professionals wanting to change jobs or shift their career emphasis. In addition to pointers and resources, it includes considerations for people who may be non-traditional students, members of diverse groups, or have had legal issues.

What each of us wants to do in our careers differs, and the strengths and differences we bring to our job search vary as well. This paper focuses on the intersection of human services professionals and the work itself, fostering a better person-work fit so that we are more ideally situated to provide services to our clients and communities.

Start with Yourself

Spend some time thinking and talking about yourself. If you are a human services student, you might have taken a class that includes professional self-exploration activities. Students and graduates can also ask supervisors and colleagues for feedback, in addition to asking yourself general questions. Some examples include the following:

- How would I answer the question "Who are you?" in a professional context?
- What are my most important values?
- What are my skills?
- What types of work have I enjoyed or not enjoyed?
- Are there types or work I would like to do, or populations I want to work with; that I would prefer not to work with?
- What work settings appeal to me?

Do you have group memberships or identities that might affect your choices? For example, are you an older student, a parent, a professional nearing retirement, LGBTQI-identified, a person with physical challenges, or a person of color, and do these identities and group memberships

influence what you want to do, where you want to be, or how well you think different jobs and career paths will fit for you?

Local Resources: Your Career Center

Many community colleges, universities, and state employment offices have career centers where you may be eligible to use services. Depending on the setting and your relationship to it, these services may include:

- In-person counseling and assistance from a career specialist

- Career/vocational testing and self-exploration activities, including values clarification,   identifying preferences, and skills assessment

- Access to profiles of people whose career profiles are similar to yours and who love their work

- Help using local or regional job databases

- Career fairs and employer recruitment visits, including appointments with recruiters

- Additional services and opportunities, such as local employment databases or local government hiring projections

Career centers may also provide scholarship information, including funding opportunities intended to support members of diverse groups, veterans, parents, people with complex or difficult past and current life circumstances, non-traditional students, people who have had felony convictions, local applicants, and others. Career centers typically provide resources on resume or curriculum vitae (CV) writing, and cover letter writing. They may offer templates, individual and group help or feedback, or workshops.

Career centers may also provide handouts or workshops on interviewing skills, dressing for success, and phone or online interviews. They may have materials or be able to consult with you about ways to talk about specific issues, such as having been out of the workforce for several years, limitations on your availability, or when to raise questions about ability accommodations. Even if you have already graduated, you may be eligible for some Career Center resources—it does not hurt to ask!

Online resources: O*NET Online

O*NET Online is a wonderful online resource for career exploration. It can help you identify important aspects of your professional self and it provides descriptions, explanations, and links to start your search. It is a great starting point for getting an overview of career development, as well as learning about resources and jobs you may not know much about. O*NET Online can be

useful for anyone, but may be an especially good tool for people without access to a career center or who live in a rural area.

Try these steps to begin using O*NET:

- Start with your Work Values at https://www.onetonline.org/explore/workvalues/
  Then use the Interest Profiler at https://www.mynextmove.org/explore/ip
  Continue with the Advanced Search to do a skills search at
  https://www.onetonline.org/skills/
- Look through the site to find resources for veterans, Spanish-speakers, and other specific job applicants.
- Jump to the Bureau of Labor Statistics's Occupational Outlook Handbook (OOH) at https://www.bls.gov/ooh/ to see U.S. job clusters and descriptions .

At OOH, try the Healthcare and Personal Care and Service clusters to start your search, though you may find that your human services dream job is not in those categories.

The Holland ("RIASEC") Code

O*NET and the Occupational Outlook Handbook (OOH) use the Holland Code (also called the "RIASEC" code which is an acronym that arises from the first letters of the vocational clusters) to narrow your job search and match you with professions that appear to be a good fit for you. Many career and job-matching resources use your Holland Code to develop a preliminary list of job types that may be a good match for you. If you are thinking about entering a human services educational or training program, looking at jobs in human services, or narrowing down related graduate degrees, you may also find it helpful to learn your Holland Code. For example, "RIASEC" stands for the following personality-vocation clusters:

Realistic – Investigative – Artistic – Social – Enterprising - Conventional

A common test to discern one's Holland code is the Self-Directed Search (SDS). A career counselor may administer this instrument or other free or low-cost tools and review the results with you. After completing one of the Holland-related instruments, your results will include a 6-letter code that shows your career preferences in order of degree of importance. For example, an art therapist who does not like the financial aspects of their business might have a code that starts with A(rtistic) and ends with E(nterprising).

You can use O*NET's Interest Profiler at https://www.mynextmove.org/explore/ip to learn your Holland Code. You may be able to guess your code, or you may enjoy using the University of Missouri's Career Interests Game at https://career.missouri.edu/career-interest-game to get started. Of course, a career counselor will be able to provide you with more information and integrate your code with other testing and topics, but these can be a good place to start.

If you are a veteran, someone who is making a career change, or someone who does not have a lot of work experience, here is an important tip: Answer Holland Code questions based on one of

your leisure interests or hobbies rather than your previous jobs or your ideas about what might be a good fit. Thinking about your hobby or an activity you enjoy will generate a list of jobs that use skills that you find pleasurable.

Resumes, Cover Letters, and Interviews

As noted above, your career center or local workforce office may offer workshops on writing resumes, CVs, and cover letters, as well as interview practice sessions or coaching. In addition, online and print resources for preparing your materials and interviewing include:

- Hloom: https://www.hloom.com
- CV to Resume Conversion Guide: https://ocs.yale.edu/sites/default/files/files/CV%20to%20ResumeWorkshopfinal.pdf
- Workbloom Human Services Resume (actually a CV, but still interesting to review): https://workbloom.com/resume/sample/human-services.aspx

Talk with a career counselor and use resources specifically geared to human services (such as Kerewsky, 2019) since the standards for this field may differ from those of another profession (for example, your human services resume might be longer than one page). Always proofread your materials and have another skilled person do so as well!
Groom your online presence: update your LinkedIn profile, hide your Facebook information, and search for your name in case you need to clean something up (or be ready to explain it). Use several different search engines and use a library computer as well in case these strategies bring up different results.

People with Legal Issues

A felony conviction or other legal difficulties will not keep you out of the human services field, but may limit some of your options. Be sure to disclose convictions as required by your academic program, a potential employer, a background questionnaire, or a certifying/licensing body, since not disclosing may have serious legal or program-related consequences. Be prepared to document and explain what happened and the steps you have taken to prevent it from happening again. If it is possible to expunge any charges, look into doing so. Your school may offer free legal aid to students.

Some jobs (and graduate programs or certifying/licensing bodies) will exclude people with felonies, or with particular convictions, while others will not. Read job announcements, applications, and other notices carefully.

Stepping Stones

It is likely that your first few jobs will not be your dream job. Think about jobs or types of work that can serve as stepping stones to your ideal position, either as prerequisite training, working in a related area (for example, with parents when what you really want to do is work with children). It is also important to identify work that would *not* be acceptable to you, whether because of the

skills used, hours, accessibility, pay, or other factors, including your personal preferences (DiMarco, 1997).

Shifting to a Human Services Career

Some people had careers in other fields or discovered human services as the result of broader exposure to the world of work, life circumstances, or chance. Sharing stories with other people making this change can be helpful. For example, Niki, in Kerewsky (2019), described her strategy, even though she did not yet have a specific plan within the human services field:

> I decided I didn't want to spend my life doing clerical work and that if I wanted to change it, I needed to go back to school. With a lot of help and support and encouragement, I enrolled in a community college transfer degree program. This time, I was going to college because I wanted to—not because my parents were forcing me. This time, as I signed the FAFSA application as an independent adult, I realized that I was now financially responsible for my success or failure. Both of those factors were great motivators. I still wasn't sure exactly what I wanted to do, but it didn't really matter yet because I had a lot of clean up I had to do on my general requirements before I was going to be making any declarations of majors. But this time I had a plan. (Kerewsky, 2019)

If you are a human services major, taking a human services class, or working in the field, ask other people to describe their career trajectories. Listen for ideas and resources that might help you as well.

Print Resources for Career Exploration

Many books are available for guiding your deeper career exploration. The classic *What Color is Your Parachute?* (Bolles, 2018) is updated annually. For human services-specific career exploration in much greater depth, look at *Finding Your Career in Human Services* (Kerewsky, 2019). Ask your career center if they have copies of these books, as well as other print or online resources you can use.

Additional Websites for Career Exploration

Consolidated Sites

These sites include a variety of career exploration tools. Some of the materials they offer are valid and reliable career exploration instruments, while others are inventories or questions to enhance and extend your thinking. Some good starting points are as follows:

- The Balance Careers: https://www.thebalancecareers.com/free-career-aptitude-tests-2059813
- The Muse Editor: The 11 Best Career Quizzes to Help You Find Your Dream Job. https://www.themuse.com/advice/the-11-best-career-quizzes-to-help-you-find-your-dream-job

- MyPlan.com: https://www.myplan.com

Test-Specific Sites

These sites focus on a particular test. Some are free (such as the Big Five), while others charge a fee. If a test interests you, ask a career counselor whether the fee is lower if you take the test through a career center. These tests are just examples:

- Assessment.com: MAPP™ Career Assessment Test.
  https://www.assessment.com/AboutMAPP
- CAS Career Assessment Site: The FIRO-B® Test.
  https://careerassessmentsite.com/tests/firo-business-firo-b-tests/about-the-firo-b/
  OutOfService: The Big Five Project Personality Test:
  https://www.outofservice.com/bigfive/
- PAR: Self-Directed Search. http://www.self-directed-search.com/
- Truity: The Big Five Personality Test: https://www.truity.com/test/big-five-personality-test

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9. Professional Development Planning for Human Service Students

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Abstract

Intentionally creating a mechanism for teaching and developing professionalism in the Human Services field is both important to the success of any student as they develop their career, and required by the accrediting body for Human Service education (CSHSE). Trident Technical College developed a specific process to support students as they self-assessed their own professional development. Through the process of self-assessment the students were able to learn what professionalism is and how to develop this quality in themselves. The process is embedded in specific courses but is reinforced through the two year program leading to the AAS in Human Services.

Introduction

Developing and supporting students in becoming professionals is one of the primary tasks within the human services program at Trident Technical College. The Council for Standards in Human Service Education requires that any program that is approved for accreditation in human services addresses how the program assesses and evaluates students' fitness for the profession (Standard 5d.)

Trident Technical College's Associate of Applied Science (AAS) in Human Service Program has developed a process that runs from the student's first semester through to their final semester. This process takes a dynamic approach to examining and developing a student's sense of professional identity, professional competence, and understanding of what it means to be a human service professional. In addition, it guides students through a sequence of activities that leads to the development of an individualized and detailed Professional Development Plan (PDP). When complete, the PDP contains specific goals, objectives, and measurements that assess the student's progress toward meeting the established criteria around being a professional in the field of human services.

Process

Each student is required to complete a course entitled Personal and Professional Development 1 (HUS 102) during their first semester. The course itself is designed to provide students with the opportunity to gain a greater awareness of "self" through activities such as values clarification work, reflective writings, and developmental analysis. The aim of this work is to help the student understand how attitudes, values, self-care, and beliefs impact both their personal and professional lives.

In order to achieve the outcomes for this course we ask the students to develop a Professional Development Plan (PDP). This plan takes the student through a series of self-assessment activities, and requires the student to consider the following:

- What is their professional orientation to working with clients (Neukrug, 2017)

- The characteristics are necessary to be an effective helper (Neukrug, 2017)

It goes on to ask the student to:

- Consider others' opinions of you. Choose people who you trust and respect, not people who will provide you with answers that you want to hear. Be open and seriously consider what they are telling you.

- Gain self-awareness and reflect on what you have learned through this process; write down your reflections.

Part 1: Self-Assessment Worksheet

Self-Assessment Worksheet (Part 1 PDP)

Complete the following Self-Assessment Worksheet:

1. From what I have learned about the human services Field, what interests me the most? Now consider my current skills, strengths, and characteristics that will assist me in pursuing that those interests?

2. What is important to me at work and in my profession? Consider the values that guide the type of work I want to do? Consider the ethical standards that guide the profession, do they align with my values? Consider the amount of autonomy that I want to have and need to feel fulfilled?

3. What are things that must be present in the next professional/human service position I accept? Consider hours, level of challenge, support, and size of the organization, focus or mission of the organization?

4. How much experience and knowledge do I need to test how far along I am in my development of the my possession of the "Characteristics of the Effective Human Service Professional"

Part 2: Professional Standards Assessment

Part 2 of the process asks students to complete a Professional Standards Assessment. This is a document adopted from the work of Paulson and Rinks (2017). It is a self-assessment focused on basic "work behaviors" and completed by the student. Students are familiar with this survey from their Introduction to Human Services courses and accompanying explanations. The goal is to establish the basic criteria of acceptable behavior for professionals in a work setting.

Professional Standards

Below is an evaluation of your "professional skills and competence". Rate yourself using the scale outlined below, (Be honest with yourself)

1) Unsatisfactory   2) Poor   3) Acceptable   4) Good   5) Exceptional

In the column label #PG, put the appropriate number, and comment on each area. Total up your score and write in some summary and conclusions.

Standard	Technical Standard	#PG	Comment
1. Being consistently present for clients, employers, peers	Show up to **class**, field placement, appointments consistently; **show up on time and stay the entire time**, and if not able to be present or stay the entire time **staying in communication and collaboration with professors** or field instructors		
2. Listening to and being present with clients and employers	**Pay attention during lectures, meetings and trainings (even, and especially when difficult); participate in class activities and exercises**; refrain from texting and other non-academic use of technology during class or field placement		
3. Ability to follow directions and complete work duties	**Complete coursework** (during class) and duties at field placement as assigned, when assigned and **by due date** (even, and especially when those might change), if not finishing work early, and asking if unclear of requirements by communicating and collaborating with professors and field instructors		
4. Ability to accept direction and feedback from supervisors	**Be willing to accept corrective feedback and constructive criticism from professors and field instructors**		
5. Ability to collaborate with colleagues	**Interact and work with classmates, professors,** and colleagues in class and/or at field placements in a productive and respectable manner		

6. Ability to clearly and effectively communicate	**Clearly and effectively communicates** in written work, oral presentations, and in electronic messages to professors or field instructors		
7. Appropriate boundaries	**What to disclose, and not to disclose, either during class** or with clients during field placements, as well as the rationale for sharing or not sharing		
8. Ethical behavior	Not cheating on tests or assignments, not violating agency policies at placements. Being honest and taking responsibility for your own actions. Adhering to NOHS Ethical Standards		
9. Wellness	The ability to use self-awareness and appropriate coping mechanisms to manage your own wellness, and stressful situations in a healthy way that arise in the completion of a Human services Professionals day to day responsibilities		

Your Total Score is:

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Summary and Conclusions:

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Adapted from Paulson, J., & Rinks, B. (2017). Would You Hire You? Personal Collection of J. Paulson and B. Rinks, University of Southern Indiana, Evansville, IN.

Part 3: Self-Assessment Worksheet

During the next phase the students complete a self-assessment worksheet thatasks them the following questions:

- From what I have learned about the human services field, what interests me the most? Consider my current skills, strengths, and characteristics that will assist me in pursuing that those interests.

- What is important to me at work and in my profession? Consider the values that guide the type of work I want to do. Consider the ethical standards that guide the profession, do they align with my values. Consider the amount of autonomy that I want to have and need to feel fulfilled.

- What are things that must be present in the next professional/human service position I accept? Consider hours, level of challenge, support, and size of the organization, focus or mission of the organization.

- How much experience and knowledge do I need to test how far along I am in my development the "Characteristics of the Effective Human Service Professional"?

Students discuss these topics and questions during the course of the semester. Students submit assignments with answers to these questions, and receive comments and feedback from the instructor. The instructor's goal is to work with the student to make certain they are digging deep enough into these self-reflective assignments and answering the questions in a meaningful way. Students are challenged in this process to move toward deeper reflection, as becoming a professional takes insight and the ability to examine your own skills, behaviors, values, and motives.

The instructor consistently connects the importance of self-awareness with the NOHS Ethics Standards. Examples of this pairing are evident when the instructor examines Standards such as:

STANDARD 7 *Human service professionals ensure that their values or biases are not imposed upon their clients.*

The class will engage in conversations focused upon the idea that a professional must be aware of their biases in order not to impose them on a client.

STANDARD 10 Human service professionals provide services without discrimination or preference in regards to age, ethnicity, culture, race, ability, gender, language preference, religion, sexual orientation, socioeconomic status, nationality, or other historically oppressed groups.

STANDARD 11 Human service professionals are knowledgeable about their cultures and communities within which they practice. They are aware of multiculturalism in society and its impact on the community as well as individuals within the community. They respect the cultures and beliefs of individuals and groups.

Self-awareness, therefore, entails gaining insight into one's identity and how it is positioned in society. Thus, better understanding of one's own ethnic and racial identity helps to build self-awareness, which may enable culturally competent practice (Richardson & Molinaro, 1996)

This process design helps students understand their values, where those values come from, and how they impact their thinking and biases. It also reinforces the idea that self-understanding involves a continual "unpeeling of the onion," layer by layer, as a continual process, and one that allows for ongoing self-renewal.

Part 4: Skills & Knowledge Review

The next step in the assessment process for the students requires that they review a listing of the skills/knowledge required for human services professionals. These skills include:

- Detailed note taking
- Organizational skills
- Understanding human psychology
- Knowledge of human development
- Knowledge of interventions
- A developed sense of empathy
- Exceptional professional boundary setting
- Ability to facilitate groups
- Critical thinking skills
- Active listening skills
- Strong verbal skills
- Public speaking skills
- Written communication skills
- Cultural competency
- Understanding your biases
- Ability to assess individuals and situations
- Problem solving skills
- Understanding human relationships
- Knowledge of social structures
- Ability to work well under pressure

Students are required to complete a self-assessment by rating themselves using a 1-5 scale in each of these areas, and writing a summary of their findings. Students submit the review and receive feedback from the instructor. The assessment is returned to the students with any pertinent comments and feedback for review.

Part 5: Worldview & Values

The students are then required to examine their worldview and values. Students are informed that:

> Understanding your values and your worldview is important as you develop a professional plan, as there should be some congruence between your values and the values of the human service profession. Examine the ethics statement from the National Organization of Human Services (NOHS, 2015). From the Trident Technical College

> PDP (Kashdan, 2018), students receive a list of values to consider with the following question:

From your review of the NOHS Ethical Standards, and from your own consideration of your personal values and/or worldview, do you see any areas of conflict or dissonance?

Part 6: Summary Statement

Once they have completed all of these steps, the student is required to submit a summary statement. The instructions for the summary statement are as follows:

After considering your work in all of the areas reviewed in this document, write a summary statement of your choosing. Discuss what you have learned, think, or considered through this exercise. This is a personal statement. It is important that you take the time to be introspective and honest as you consider all this information.

Part 7: Goal Development

The final step in this process is goal development. Students are now required to develop goals and objectives based upon the process of completing the steps outlined above.

Students are instructed to look at goals in three categories:

1. Skills
2. Knowledge
3. Personal professional attributes

Students then create goals, objectives, examine barriers to achieving those goals, and develop strategies for overcoming barriers and achieving the goals and objectives set. In addition, they develop tracking mechanisms and methods of measuring progress on their goals.

Feedback

All of this is reviewed by the instructor. This teacher provides feedback and students respond by making adjustments, corrections, and improvements to the goals they developed in the class.

Once the PDP is completed, students are required to retain a personal copy, as this document will be reviewed in two specific classes during the remainder of their time in the program. The program also maintains a copy of the PDP.

Follow-up

As students progress through the program, they will all be required to complete a course entitled Orientation to Human Services. This course prepares students for their internship. As part of this course, students revisit their PDP and review with the instructor the progress they have made toward the goals they established in HUS 102 (Professional and Personal Development class). This is the first formal opportunity the instructor has to review and provide feedback on the students' progress toward their stated goals and their readiness to enter the fieldwork site.

As with any plan, there is a strong focus on student progress toward stated goals and objectives. This is also an opportunity to complete a formal review and make adjustments to the student's PDP.

It should be noted that at this point students have completed a number of key skills-based courses, and had the opportunity to practice and fine-tune the basic skills of group facilitation, interviewing, and case management. Students have also completed a course that focuses on diversity in human services.

Student progress is assessed and the instructor makes a determination regarding their readiness for the internship sequence. It is within this sequence where we believe the student can actively apply the learning and professional development they have completed in the classroom.

The student's final semester in the program, in concert with the second semester of their internship, includes HUS 270 Personal and Professional Development 2. This class serves as a capstone experience for the student. In this course, students evaluate the goals they developed back in their first semester, the adjustments made in the Orientation to Human Services course, and examine the growth and progress they have made toward becoming a human service professional. Students then develop a new set of goals focused on the next step in their professional development, leaving the program with a targeted plan as to what comes next in their professional lives.

Discussion

Trident Technical College believes that preparing a student to enter the human services profession requires students to develop specific skills and to develop a sense of professional identity and professional behaviors. In order to achieve this outcome, the program has specific courses and a specific sequence. This sequence walks the students through a process where they examine the characteristics of a professional in the human service field and develop a set of goals to achieve that outcome as they graduate. The program includes points of formal review and has students evaluate their progress and make adjustments. The program design intends to keep students focused on the meaning and complexity of becoming a professional, and assist them as they develop and grow into human service professionals.

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10. Providing Urban Community College Human Services Students Opportunities for Engaging in Self-Care: Utilizing Art Experientials and Ecotherapy Based Activities

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Abstract

Providing experiences and support for students to develop self-care techniques is an essential component of human services undergraduate education programs (CSHSE, 2019, Standard 19.d). Offering students opportunities to participate in art experientials and ecotherapy-based activities may assist in the development of these techniques. To investigate the benefits of these types of experiences, an eco-art workshop and an animal-assisted therapy workshop was offered at an urban community college in New York City. Based on preliminary findings, the student-reported benefits of participating in these experiences were grouped into three themes: (1) general satisfaction with experience, (2) opportunity for self-expression, and (3) awareness of stress-reduction (Kras, 2019). Continued research is needed to further evaluate the benefits of these type of experiences for supporting students as they develop self-care techniques.

Background

Human services programs have the responsibility of providing experiences and support for their students to develop self-care techniques (CSHSE, 2019, Standard 19.d). Helping students develop effective self-care techniques is essential as they prepare for careers in helping fields (Newcomb, Burton, & Edwards, 2017). Self-care "enhances well-being and involves purposeful and continuous efforts that are undertaken to ensure that all dimensions of the self receive the attention that is needed to make the person fit to assist others" (Moore, Bledsoe, Perry, & Robinson, 2011, p.545). Helping students develop these techniques can be done through a variety of teaching methodologies such as class discussions, journaling, case studies, and reflective exercises. Incorporating art experientials and ecotherapy-based experiences into human services programs may also assist in supporting students as they develop effective self-care techniques.

Art Experientials

Art therapy is an "integrative mental health and human services profession that enriches the lives of individuals, families, and communities through active art-making, creative process, applied psychological theory, and human experience within a psychotherapeutic relationship" (American Art Therapy Association, 2018). There are many noted benefits of art therapy, including stress reduction and increased well-being (Abbott, Shanahan, & Neufeld, 2013, Martin, et. al, 2018). Art making has been utilized in a social work program to address self-awareness (Bartkeviciene, 2014, Mulder & Dull, 2014) and in a human services program to encourage student engagement (Lashewicz, Mcgrath, & Smyth, 2014). Art making can be incorporated into a human services program to address self-care needs in various capacities such as visual journaling, vision boards,

in-class stress reduction exercises, and art making workshops. For example, a licensed art therapist from The Art Therapy Project, a non-profit mental health organization located in New York City, has presented to my human services fieldwork students and led them through two art directives focusing on self-care and professional identity. After spending time on art making, students spent time reflecting on both topics both verbally and non-verbally and discussed how art making can be utilized as a self-care technique. While art experientials may provide opportunities for students to develop self-care strategies, ecotherapy-based experiences may also assist in this endeavor.

Ecotherapy-Based Experiences

There are a variety of ecotherapy-based experiences such as horticultural therapy (gardening), animal-assisted therapy, physical exercise in a natural environment (hiking, beach yoga), and nature meditation. Ecotherapy-based experiences have been shown to provide multiple benefits such as increased overall well-being (Calkins, Szmerekovsky, & Biddle, 2007, Howell, Dopko, Passmore, & Buro, 2011) and improved mental and physical health (Bolen, 2012, Korpela & Kinnunen, 2011). The benefits of these types of experiences have been documented for all populations including children (Louv, 2008), adolescents (Berto, 2007), and the elderly (Carman, 2011). Ecotherapy-based experiences are provided in schools, colleges, hospitals, substance abuse treatment centers, hospice centers, and nursing homes. Learning about the benefits and the variety of this type of experience may encourage students to seek out similar opportunities as part of their self-care routine. The following is an example of an initial exploration into the benefits of these types of experiences for human services students.

Pilot Study Results

Human services students at an urban community college in New York City participated in two experiential opportunities, an eco-art workshop and an animal-assisted therapy workshop (Kras, 2019). A total of 19 students participated in these two ecotherapy-based activities. Nine students (n=9) participated in the eco-art workshop and ten (n=10) in an animal-assisted therapy workshop. No students participated in both workshops. Researchers did not collect demographic information for this pilot study, but participants were generally representative of the college's overall population. The population is primarily traditional age college students (ages 18-22), from Hispanic and Black/African-American ethnic backgrounds, from low-income households, and residents of the five boroughs of New York City.

Eco-Art Workshop

The goals of the ninety-minute eco-art workshop were for students to learn about the two emerging fields of eco-therapy and art therapy and for them to gain the experience of creating and reflecting on their own eco-artwork (Kras, 2019). After an overview of the fields of art therapy and ecotherapy, students were given the directive: *Create a visual representation of yourself using the provided art materials*. The students were provided art materials including feathers, seashells, glue, paint, leaves, pastels, sticks, nature magazines, twine, markers, and colored paper. Students worked independently to create their piece of art with a title. Afterwards they had the opportunity to share their artwork verbally with the workshop participants.

Animal-Assisted Therapy Workshop

The second ecotherapy-based activity was a 60-minute interactive workshop presented by a New York City organization that provides animal-assisted therapy in city healthcare facilities, libraries, and schools (Kras, 2019). Personal stories and experiences were shared by the presenters about clients they have worked with and the benefits they have witnessed. Some students were called on to participate in three role-playing activities with the therapy dogs so all participants could gain insight into what happens during an animal-assisted therapy session. At the end of the workshop, all participants had the opportunity to openly interact with the four therapy dogs by holding, petting, brushing, or playing with them.

Results

Two questionnaires with open-ended questions were developed by the author based on the goals of the workshops and distributed at the end of each session (Kras, 2019). Student responses from both questionnaires were collected and underwent thematic analysis (Castleberry & Nolen, 2018). Based on these preliminary findings, the responses can be grouped into three themes: (1) general satisfaction with experience, (2) opportunity for self-expression, and (3) awareness of stress-reduction (Kras, 2019).

Student feedback from the eco-art responses within the *general satisfaction with experience* theme includes reported benefits of participating in the activity such as having fun, meeting new people, or learning something new (Kras, 2019). Responses under the *opportunity for self-expression* theme demonstrated the participant's personal connection to reflection on the experience. Responses in the *awareness of stress reduction* category demonstrated a participant feeling less stress or more calm or peaceful. The overall positive responses that were received from this pilot study suggest human services students found these experiences to be beneficial and support the need for further exploration with similar types of experiences that provide human services students opportunities for learning self-care techniques is needed.

Conclusion

Learning effective self-care techniques is important for human services students while in school and once they enter the field. It is the responsibility of human services faculty and staff to encourage and support students to learn and utilize self-care techniques. Incorporating art experientials and ecotherapy-based activities into a human services program may be a way to support students as they explore self-care techniques that are beneficial to them.

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