Toward a Unified Vision of Professional Counselling Identity: A preliminary Australian perspective

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Abstract

Although Australian professional counselling services are well-established, a unified vision of what defines professional counselling identity in Australia remains elusively absent. Self-regulation within the Australian counselling profession contributes greatly to the strong development of professional training, ethics, and practice principles, yet a clear understanding of what constitutes professional counselling identity remains undefined. This paper proposes that, in order to develop awareness of what comprises professional counselling identity in Australia, the views of Australian counselling professionals are necessary. This paper offers a preliminary investigation of Australian professional counsellors’ views of what defines professional counselling identity.

Introduction

As a relatively new, internationally recognised field (Nassar-McMillian & Niles, 2010), professional counselling is firmly established, yet quantifying it by definition continues to be an elusive academic challenge (O’Hara, 2015; Ponton & Duba, 2009; Reiner, Dobmeier, & Hernández, 2013; Woo, Henfield, & Choi, 2004; Spurgeon, 2012). While many descriptions abound, each being contextually valid, a universal definition seems to defy unanimous agreement (Prosek & Hurt, 2014; Reiner et al., 2013; Woo et al., 2004). The absence of an over-arching international identity hinders the professions capacity to achieve clarity around the role of counsellors, professional unity, parity with other professions, and to establish a clear future (Calley & Hawley, 2008; Reiner et al., 2013; Woo et al., 2004). According to Woo et al. (2004), “The … survival of the counselling profession depends on counselling’s quest for establishing a clear, common professional identity” (p. 13; Myers, Sweeney, & White, 2002; Prosek & Hurt, 2014). Similarly, Reiner et al. stated that “the likelihood of the counselling profession achieving equal recognition as a mental health discipline … [depends] on its ability to clearly articulate [its] professional identity …” (2013, p. 174).
The history of licensure within the counselling profession originates in the United States of America (U.S.A.) when, from the early 1970s onwards, licencing progressively occurred (Gladding, 2014; O’Hara & O’Hara, 2015). While Malaysia, China, and Canada legally require registration of professional counsellors, Australia and the United Kingdom are among countries where mandatory regulation through external registering bodies is not required (Australian Institute of Professional Counsellors Institute In Brief, 2012; Mulhauser, 2016; Pelling & Sullivan, 2006). However, voluntary membership with the (self-regulating) Australian Counselling Association (ACA), and the Psychotherapy and Counselling Federation of Australia (PACFA), provides Australian professional counsellors with registration (ACA, 2016a; ACA, 2016b; PACFA, 2016b).

America, Canada, South Africa, New Zealand, and Singapore have begun researching professional counselling to establish a unified professional identity so that counselling may flourish as a profession (Calley & Hawley, 2008; Gale & Austin, 2003; Gladding & Newsome, 2004; McLaughlin & Boettcher, 2009; Myers, Sweeney & White, 2002; Rodgers, 2012). Without it, the profession’s internal fragmentation will continue to impact upon professional advancement and recognition (Rainer et al., 2013; Calley & Hawley, 2015).

Gazzola and Smith (2007) identified that inappropriate reliance on counsellors by the public and allied health professionals for treatment of mental health concerns impedes counsellor efficiency, profitability, and emotional sense of being respected. Using the Professional Identity and Engagement Scale (PIES) and the Professional Identity and Values Scale (PIVS), Prosek and Hurt (2014) found that as counsellors’ sense of professional identity develops with increasing experience over time, and shifts from being more externally derived to more internally-perceived, lack of positive professional experience is detrimental to the development of professional counselling identity (Prosek & Hurt, 2014).

The 2010 American Counselling Associations (A.C.A.) “20/20: A Vision for the Future” Conference in Pittsburgh, Pennsylvania was a reaction to criticism that the counselling professions in-definity impacts upon associated professional activity (Kaplan & Gladding, 2011). The conference proposed that counselling define itself as a professional entity distinct from but working with other mental health professions (A.C.A. 2016; Kaplan & Gladding, 2011; Kaplan, Tarvydas, & Gladding, 2014). With the overarching theme being Promoting Unity While Affirming Diversity, its
definition that counselling is “… a professional relationship that empowers diverse individuals, families, and groups to accomplish mental health, wellness, education, and career goals” was endorsed by 29 major counselling organisations (Kaplan & Gladding, 2011, p. 366). Of seven areas identified as being in critical need of attention, “strengthening identity” most-directly relates to initial discussions regarding what constitutes professional identity (Prosek & Hurt, 2014).

Australia recently entered discussions regarding the need to define professional counselling identity. Viewing it to be comprised of an external context (professionalization through, for example, self-regulation, accredited training and practice principles, etc.), a collective context (collective professional identity - how professional counselling is perceived and how practitioners are perceived to be acting as professional counsellors), and an individual context (individual counselling identity - how counselling professionals perceive themselves within the field), the authors of this study propose that further research will assist the development of an over-arching professional identity (Alves & Gazzola, 2013). Additionally, they propose that developing professional identity based on professionalization (O’Hara & O’Hara, 2015; Pelling & Sullivan, 2006) potentially distorts the creative essence of true professional counselling identity (Alves & Gazzola, 2011; 2013). These views are empirically supported by Prosek and Hurt (2014, p. 284), who found that “… 97% of respondents defined counsellors in universal terms rather than by their identified specialty areas”, and is further supported by Alves and Gazzola (2007; 2013), and Mellin et al. (2011), who reported that counsellors find their individual professional identity mainly through their personal work values, skills, and knowledge (Calley & Hawley, 2008; Ronnestad & Skovholt, 2003). Alves and Gazzola (2013) further found that counsellors viewed their professional identity was intrinsically enmeshed with their personal self.

In compliance with contemporary commercial requirements, Australian professional counselling training and practice are standardised through accreditation standards, ethical standards, and pathways for credentialing counsellors (ACA, 2016a; Psychotherapy and Counselling Federation of Australia, 2016a). These help to form national standards which contribute to professional and statutory accountability while allowing for individual authenticity in the personal counselling experience (Pelling & Sullivan, 2006). For example, the University of the Sunshine Coasts Undergraduate and Masters counselling pathways are fully accredited with the Australian...
Counselling Association and the Psychotherapy and Counselling Federation of Australia (University of the Sunshine Coast (USC), 2016a), with eligibility for enrolment in supervision requiring application for and receipt of a current Blue Card (Queensland Government Blue Card Services, 2016) and in some circumstances, passing a Police Check (USC, 2016a.). Course accreditation with the Australian Counselling Association (ACA) and the Psychotherapy and Counselling Federation of Australia (PACFA) enable eligibility for membership with PACFA, ACA, and the Queensland Counsellor Association (QCA) (USC, 2016a). The ACA specifies that courses of study meeting its accreditation standards are those being primarily focused on “… Counselling, not Social Work, Welfare, Psychology etc” (ACA, 2016a.). Registration through membership with self-regulating bodies PACFA and/or ACA requires that counsellors are able to perform significant, in depth therapeutic work with clients using various therapeutic approaches using skills that have been taught and assessed beyond the realms of theory (ACA, 2016a; 2016b).

A major issue plaguing efforts to define counselling as a field in its own right is its professional proximity to psychology (Hanna & Bemak, 1997; Skovholt, Rønnestad, & Jennings, 1997). Many counselling concepts are empirically grounded in psychological theories, yet their core scopes of practice differ. While counselling assists all aspects of mental health at different levels, it utilises different frameworks and therefore different skill-sets (largely non-clinical, and non-diagnostic and without psychometric testing) to that of psychology (Ivey, D'Andrea, & Ivey, 2011; Nassar-McMillan & Niles, 2010; PACFA, 2016a). Counselling research is often precursory to further detailed scientific investigation (McLeod, 2011), being generally qualitative and typically non-statistical or less-statistical than psychological research, which relies upon quantitative, statistical outcomes in order to increase research validity (Australian Psychological Association (APA), 2016).

While the contextually shared use of the terms ‘counselling’ and ‘psychotherapy’ contributes to confusion within the mental health industry and among the public (O’Hara & O’Hara, 2015), this papers authors suggest that the detail in the work styles varies between the two fields to the extent that the terms need not be a misleading source of confusion, any more than other fields with shared theoretical bases. While over-lapping skills between counselling and psychology professions perceivably diminishes counselling’s credibility and stature (O’Hara, 2015), this study’s authors
suggest that theoretical connections do not realistically over-write one profession by the other any more than sub-sectors of other healthcare areas such as those between paramedics, nursing, and medicine. Additionally, overlapping skill-bases may be more-a-result of professional transience transferring skills across from one professional area to another during times of job change (e.g. from counselling to psychology, and vice-versa). In terms of criteria requisites for recognition as a field in its own right, counselling meets most, but lacking a definitive identity is detrimental to this achievement (Hanna & Bemak, 1997).

This exploratory Australian study aims to investigate counselling practitioners’ perception of individual professional counselling identity, with a view that as experience develops and deepens personal identity, counsellors increasingly grow into their role and contribute to collective and external counselling identity. It is hoped that the findings are able to contribute to further Australian research that will assist in the development of an international professional counselling identity.

Research aims

This study aimed to:

- Explore Australian counsellors’ perspectives of their professional counselling identity (how practitioners identify within themselves as practicing professional counsellors, including how this self-perception increases with experience).
- Explore Australian counsellors’ perspective of the industry’s collective professional identity (how professional counselling is perceived externally, how practitioners are perceived to be acting as professional counsellors, and how counselling is positioned in the health field and in relation to professions which appear to offer similar services, such as social work and psychology).

Method

Research Design

A combination of brain-storming within focus groups, and approximately 20 on-paper survey questions was used. The focus group participants completed both tasks.

Participants
Participants (N=30) were professional Counsellors attending the 2014 Australian Counselling Conference. The rest of the participants were counsellors who completed the online survey but were unable to attend the focus groups.

Procedure

At the conference, a short presentation was given on the concept of professional development, informing participants of what had been completed in other countries. Participants were then grouped into six (6) focus groups comprised of approximately five (5) participants each. Participants discussed what they saw as the components that together contributed to a sense of professional counselling identity. Answers were written onto large sheets of paper, using texta pens. In addition to their collated response another 20 participants received a paper-based survey (Appendix A), with the same questions posed to those at the Conference and they emailed their responses to this study’s main author, Dr. Ann Moir-Bussy, for compilation.

The survey questions were designed to draw out the respondents’ perceptions of:

- core values, characteristics and influences contributing to sense of a professional counsellor identity
- development of professional identity in practice over time
- what is needed for the counselling profession to achieve national professional recognition, and
- how to describe the counselling profession and how it relates to social work and psychology.

Results

Individual/Internalised Identity

Respondents spoke of a congruence between their sense of self and their identification as a professional counsellor. Personal characteristics listed as congruent with being a counsellor were:

- genuineness, honesty, authenticity, transparency, sincerity
- compassion, a caring nature, kindness, warmth
- curiosity, openness, humility, non-judgemental regard
- attentiveness, patience, a good listener
- empathy, understanding, encouraging, supportive
• confidence, resilience, courage
• respect, clear boundaries, self-awareness, integrity
• personal maturity, self-reflective practice
• sense of humour

_I feel that my core values and characteristic is my rapport that I have with people, good communication, empathy to understand how people are feeling or understand, their emotions in different situations. I feel that my witty sense humour supports break the ice in different situations._

_Ability to respect and adhere to boundaries, confidentiality and unconditional positive regard towards individuals. Also ensure the integrity of professional relationships._

Respondents described their interactions with clients as being characterised by “_a genuine positive regard for all people_”, “_listening with openness_” and experiencing a sense of “_gratitude, sacredness_”.

Several spoke of experiencing their occupation as a counsellor as a calling:

_I feel a sense of being home, home within myself and in the profession that I have chosen. The dictionary defines home as a) a place of origin and b) a goal or destination. Both are relevant in this case, as I searched for meaning, identity and self._

Self-reflection is a task for the client and a core activity for the professional counsellor, and so having self-reflective tendencies was seen as a strength.

_I am naturally reflective, this is another way of how I learn and grow. I continuously evaluate what I have done well and what I can do better next time. If something doesn’t work, I like to think about it and ask myself why and then actively seek ways of improvement. I accept when I am not sure of something and have the courage to seek help from supervisors, colleagues, research etc._
This imperative toward personal improvement sits naturally with placing a high priority on ongoing professional development and the delivery of professional services, indeed, with identification of self as “professional”.

As a professional counsellor, to the Counselling profession as a whole and to my past, present and future clients, I continually work towards offering the best service and support that I am able. Without this, there is no service, no support, and possibly no hope. I do not want this, therefore I constantly strive to be the best I can in this domain – this influences my thoughts, attitudes and behaviour. ‘Counselling’ or ‘the Counsellor’ is who I am, it's who I want to be, I don’t believe there can be any bigger influence.

I am committed to partaking in activities for my own continuous professional and personal development, developing good practice and moral qualities as a therapeutic practitioner including, empathy, sincerity, integrity, resilience, respect, humility, competence, fairness, wisdom and courage.

I work very hard to offer a safe, empathic, professional and ethical service.

I believe as human beings we never reach a point at which we can say we know everything and so I never stop learning. I have a hunger for growth and knowledge… I actively seek new and various learning experiences via any means I can, e.g. workshops, supervision, webinars, DVDs, reading, peer support - counselling and psychology colleagues, networking events, volunteering etc.

Other spoke of self-identification as “professional”

My professional identity is influenced by a belief in the value of the work I do.

I pride myself on my professionalism. Before training as a counsellor I saw different counsellors for my own therapy. I learnt early on what I liked in a counsellor and I replicated this in my own business. I treat people how I want to be treated.

Constant professionalism in every aspect of my business. From first contact be it email, text or phone call a constant professional reply. This includes a logo, letterhead, and caring empathy when people call. Booking system and pricing is consistent, prompt and efficient.
Consistent professionalism in my appearance, neat, tidy dress sense. Environment is private, clean, tidy and professional in furniture and layout.

Ethical approach to life as well as my personal and professional interactions and endeavours.

Respect: I have worked hard to gain the respect of my clients and fellow professionals. I am also respectful of my client’s rights, giving them dignity and acceptance of varying cultures, age, gender, religion and life experiences without prejudice.

The influence of counselling theories themselves in identifying one’s ability to change and how these might be shared with clients…

The concept of neural plasticity.

All of the counselling theories have influenced me in one way or another:

- Psychodynamic theories remind me that there are dynamics which have not yet surfaced from my unconscious, so it is imperative to foster self-awareness and an openness to explore my motivations in what I think, feel and do; to ensure effectiveness and ethics, both personally and professionally.

- Phenomenological theories remind me of my free will and drive to self-actualize. Counsellor characteristics and attitudes in these theories lay the foundation for my professional identity (unconditional positive regard, genuineness, empathy, openness etc.).

- Behavioural theories remind me of how my behaviour may have been shaped

- Cognitive-Behavioural theories are significant to me and highlight that I am a choice-making being and that I can redirect my direction and consequences by changing my thoughts and actions. These CBT/RT theories are pivotal in my life as well (personally and professionally).

The respondents unanimously acknowledged the growth of their personal identification as a professional counsellor over time, generally attributable to:
interacting with their peers and supervisors – undertaking professional development activities such as getting feedback and advice from supervisors and mentors, from ongoing professional training and networking, and sharing and developing understandings with peers

- in practice with their clients – from their experience counselling clients, and from participation in workplaces and interacting with practitioners in related fields

- connecting with themselves – as an outcome of personal reflective practice.

Almost all respondents noted ongoing professional development – attending workshop and further training, undertaking supervision and gaining feedback – as significant in their developing sense of professional identity. The sense of being supported feeds a hunger for extending their understanding.

*I take a great deal of wisdom from those who have been in the industry for many years and learn from these professionals in any way that I can.*

*... professional development and supervision ... have both increased my self-belief and confidence in my abilities.*

Supervision provides more than imparted wisdom; supervision is also seeing as providing a safe and supportive space which allows for openness and for gaining validation for shared experience. Through this grows a sense of connection to a community of ongoing learners.

*Having supervision that challenges and supports me, and being able to say “I don’t know what I’m doing here”. With the passage of time and having an accountability partner, I have grown in my confidence in utilizing my life experiences in sharing psycho-education about life transitions.*

*Recognising that there is no magic that other counsellors have, that I somehow missed out on – we are all on the way.*

The sense of being professionally accountable within the counselling community builds a stronger sense of professional effectiveness, as do interactions with professionals in related fields:

*Professional interactions with other professionals, whether they are psychologists, counsellors/ psychotherapists, mental health nurses, psychiatrists or social workers; this*
leads to insights into other approaches, discussions regarding professional development, and the feeling that my professional opinions are valued.

In practice as a professional counsellor and in relationship with clients, their sense of themselves in the role of counsellor develops, “… in depth and breadth, moving from principles and concepts into live embodied dimensions”. Respondents spoke of growing in their ability to encounter the client in their own space; of developing observation skills that better enable them to hear and support the client’s own path; of learning to trust the process and the client’s capacity to find their way forward. There is a growing maturity in embracing the practicalities of their own role in the interaction, of gaining a more realistic and practical sense of personal agency regarding the possibilities and constraints on their ability to help clients make changes, of engaging more deeply in self- and other-care through setting boundaries, of understanding the implications of duty of care. And also of a developing sense of their own presence in the process, of their role as “the happy person in the room”, of “healthy” and “unhealthy” somatic transferences.

I think one of the major changes is that I now see a counsellor as one who is a good listener. I find myself listening more to clients these days and speaking less. Earlier on I believe I spoke more and listened less. I believe that I realized along the way that if you don’t listen and have a sense of what are person really needs you may be unhelpful, taking them in a direction that is not appropriate or helpful.

Truly understanding the use of self within the therapeutic space and across professional boundaries and accept the responsibility of this positioning.

It is impossible to separate the person from the counsellor - it's the same package (which is good and bad but it is the way it is I guess). I am much more confident in the role now than when I started at the age of 18. I'm glad I started off with such wonderful dreams regarding my ability and view of the world. Life experiences, counselling experiences, heartbreak, knowledge, time - life in general, I am a different person to the little novice who wanted to change the world.

That I have the tertiary skills, ability and knowledge to work with at risk people so they do not get lost has given me confidence and strength to put myself in situations and work environments where I can reach the most exposed people.
This vision extends into the future as well as into the past, as respondents spoke of a sense of journey, of seeing themselves as participating in a “never-ending learning experience”, of being flexible and open to change in that “there is something new to learn every day”, of having a willingness to “disregard old values that no longer serve”.

*I see my professional identity as a journey. I have moved through different phases and yet there are still experiences and interactions that will inevitably change my current sense of identity.*

*Change needs to occur progressing from novice to advanced counsellor otherwise knowledge and practice becomes arrogant, unbalanced and ill informed. I have always focused on making professional supervision and professional development a key part of my professional practice to ensure that I have not become narrow and biased in my thinking and behaviour.*

**Collective Identity**

The respondents in this study revealed a shared understanding of the relationship between the concept of collective identity, the core philosophy of counselling, and the methodological approach of counselling – how the counsellor perceives and engages with the client. Respondents unanimously reported the view that the counselling service/practice is client-centred and client-directed, individualized, strengths-based, empowering for the individual, supporting client self-determination, and coming from the understanding that: Through support and guidance most people can resolve the issues that they are facing.

*I work holistically and uphold my client's autonomy to be self-directing.*

The philosophy of “do no harm” reportedly guides counsellors to approach clients with respect, dignity and fairness.

*The value that I think contributes most significantly to my professional identity is ‘do no harm’. If I keep this in mind, I will always have the best interests of the client in mind.*

*It informs a professional approach that gives due consideration to working with clear boundaries, a strong ethical grounding and ethical practice frameworks, confidentiality, accountability, and respect for client autonomy.*
Professional counselling acknowledges and embraces diversity of cultural and personal experience where-in clients are viewed without judgement or bias, as individuals. The counselling profession draws on a diversity of modalities and approaches to meet each individual in their own space:

Respecting and being accepting of personal experiences and diversity (cultural, gender and economic to name a few) and being non-judgemental of individuals.

Delivering services that are tailored to an individual and their needs, while maintaining a flexible and holistic approach.

Having the freedom to not have to impose particular treatment models on a client.

Having the freedom to have non-directed conversations.

Counselling is not a sub-set of skills.

The relationship with the client is seen as being based on compassion, acceptance, respect, rapport, empathy, active/effective listening, non-judgmental and non-labelling, clear boundaries, confidentiality, and providing a safe environment for the client.

Treating all individuals with respect, dignity and equality (and fairness).

Unconditional positive regard for clients: They do not have to earn my respect, they have this, irrespective of anything they think, say or do.

Everyone is important. Everyone deserves to feel loved and respected.

More than this, it is about providing a sense of safety for the client:

A major part of this concept is being able to take judgment out of any situation.

By allowing each client to speak openly and honestly in a session will help them to feel safe. As a professional, I believe it is my duty to ensure that I provide a safe environment both physically and emotionally for all clients.
Counsellors acknowledge being an active component in the client relationship and experience:

*Being honest with myself and clients about my strengths and my limitations in my counselling practices*

Membership

Many respondents viewed their membership with a representative professional organisation as indicative of their commitment to professionalism and of a certain level of professional conduct, as evidenced by:

- self-identification as a member of a professional community with agreed standards and a shared philosophy of practice
- ongoing commitment to professional development via further training and supervision/mentoring
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- ongoing commitment to professional development via further training and supervision/mentoring
- commitment continuous improvement through self-reflective practice
- recognition of a certain level of training/study
- ethical practice as evidenced by acknowledgement of a code of ethics
- engagement with an organisation that advocates on behalf of its members to advance the profession in the eyes of the general community, the profession itself, other health professions, and government regulatory bodies.
- access to learning resources, training, professional networking and mentoring/supervision.
- holding Professional Indemnity Insurance covering malpractice as well as professional, public and products liability.
- holding a current blue-card for working with children, young people and
vulnerable adults.

Being a member of ACA gives me recognition for my qualification ... professional development opportunities and work experiences. I am required to have a certain number of hours of professional development, as well as certain number of hours of supervision from an accredited supervisor. I have access to various learning resources and an opportunity to learn from workshops, seminars, latest research etc. In supervision I learn from the experience of others who have been there before me. Supervision also gives me another pair of eyes to double check if there is something I can do better or whether I need to see things from an angle I might not have considered or whether I am already doing well and on the right track.

Membership of a representative professional organisation also brings a sense of identifying with group of practitioners who have shared goals and ethics, a group that acts to establish a publically recognisable reputation and credibility for the counselling profession.

Belonging – being a member of ACA means I belong to a group of people who are in the caring profession and have similar goals to me – to contribute to the wellness of others.

Externally-Related Identity

Counsellors, social workers and psychologists are seen as having a similar overall goal, which is to improve the quality of life and enhance the wellbeing of individuals, families, couples, groups and communities. Counselling is perceived both in terms of its own strengths, and also in terms of how it articulates with these other two helping professions.

Counselling is generally defined in terms of:

- focusing on wellness and a return to wellness, on mental and emotional wellbeing
- being grounded in acknowledgement of client autonomy; viewing the client’s goals as paramount
- being non-diagnostic (and non-labelling); non-judgemental, accepting of the wholeness of the client
• supporting the client toward long term sustained change (rather than short-term intervention) with the goal of empowering the client
• drawing on a diversity of therapeutic approaches, a range of modalities.

Survey respondents expressed this as:

... seeking to place the person in their wholeness at the centre of the process
... working with people to enable them to identify their own solution and identify strategies to resolve or come to a point of acceptance of their situation
... working with client/s in the here and now, engaging in a way which empowers the client/s to address their issues.
... assisting clients in exploring options to [experience] healthier lives and relationships.
... a therapy designed to listen with no judgement in a safe environment... giving the client the ability to recognise their problems and the skills to make the necessary changes for an improved quality of life.
... a heart-centred approach to listening that offers practical assistance with change – similar to that of psychology without the labelling.

The counsellor views the client as the expert in the room. The counsellor’s role is to listen carefully, to provide a space in which the client can see their path forward. As such, counsellors “are not problem solvers”. The counsellor’s role is collaborative, the intention being to build a “therapeutic alliance” with the client. The quality of the working relationship is important in setting the atmosphere for the client to own their understandings, conclusions and path forward.

I believe Counsellors focus on client’s concerns and difficulties and [this] includes understanding people’s patterns of thoughts, behaviours [and] feelings and the ways in which these may be problematic in their lives. Studying counselling involves learning how to assist people to develop understanding about themselves and to make changes in their lives.

Just as we are seeking to define the professional identity of counsellors free of misconceptions, it must be noted that social work and psychology are also subject to misperceptions. Such misperceptions may well be present in some of the following responses.
Practitioners in all three fields are seen to:

...use similar counselling theories, therapies and techniques to help clients clarify and explore issues they may be struggling with, [to] develop strategies and increase self-awareness.

Counselling is seen as focusing primarily on prevention, whereas social work and psychology are seen as being more oriented toward intervention. Clients seeking assistance in the early stages of distress or concern can avoid problems escalating to the point where the services of psychologists and/or social workers are needed to address more serious mental health, welfare or safety issues. A recovery framework informs counselling, a perspective that all people can become well, “whatever well means to them”.

Additionally, counselling is seen as being less constrained by a particular framework for practice, enabling counsellors to draw on a range of modalities in meeting the client in their particular space.

I view [Social Workers and Psychologists] as being somewhat 'bound' within the system to a much larger degree than Counsellors. They have an agenda or 'a box to tick' and must fulfil this criteria as part of their role. Counsellors do not have this nor do they function at this level. [Counsellors] focus holistically on the person/people in front of them.

While the discipline of Social Work promotes social development and change, human rights and the empowerment and liberation of people, social workers are generally seen as being tasked with the practical aspects of “connecting people to services, networks”, engaging with clients with the purpose of maximising their interactions within the complex of social systems. A key point of connection and cooperation between counsellors and social workers lies in referring clients in need of social support to social workers.

Social workers provide a greater degree of hands-on case-work than counsellors or psychologists, for instance sourcing services that provide food packages or accommodation for people in need. Counsellors and psychologists tend to provide referrals to services with social work support that can help the client with receiving the services that meet their physical needs (e.g. food, accommodation, financial aid).
Whereas social workers focus on connecting clients with a supportive system, psychology and counselling share a focus on the individual. Of course, many social workers incorporate counselling training into their practice.

Psychology is seen as being more of a scientific and analytical discipline than counselling, with the psychology approach being clinical and process-oriented. Psychology trains practitioners to view clients via a pathology perspective, whereas counselling takes a holistic view of the client.

*Psychology is a science interested in understanding human nature, behaviour and the brain.*

*Psychologists vary in their focus of study such as research, neuro-psychology, clinical, experimental, sports, psycho-educational assessment, and so on.*

*Psychologists tend to use more written assessments of client self-reports, whereas counsellors listen to the words and images clients use to enable them to be more solution-focussed.*

*... counselling professionals do not scientifically study behaviour and its causes.*

*Rather, the counsellor may implement strategies to assist in addressing problematic behaviours.*

*Psychologists study human behaviour and emotion, with practical and research skills that can be applied to a wide variety of fields that include health, education and management.*

Psychology training does not necessarily specifically encompass counselling skills, even though the intent is still to help people have more functional experiences in life.

*Psychologists train to be psychologists. The skills of counselling may or may not have been a focus in the psychologist’s training.*

Counsellors work with both clinical and sub-clinical populations, but unlike psychologists, counsellors do not diagnose – or label. Counsellors have the option of referring a client on to a psychologist or other medical professionals for diagnosis where this appears to offer benefits for their situation.
Clinical psychologists help with the diagnosis (something a Counsellor does not do) and treatment of mental illnesses across the lifespan. Most psychologists also help mentally healthy people to find ways of functioning better.

Discussion - Where to from here?

Individual Professional Counselling Identity

This study’s results indicate that factors associated with individual identity and collective identity feature strongly in Australian professional counsellors’ perception of what constitutes professional counselling identity, with factors associated with individual identity being most strongly associated. This is supported by Canadian findings that individual identity is perceivably stronger than collective identity (Alves & Gazzola, 2013). While factors associated with professionalization also appear to be important, this study did not identify them as integral to professional counselling identity per se.

A direct relationship between participants personal ‘self’ and their individual professional identity exists, being inter-related, inseparable, and apparently the prime focus of professional counselling identity. The professional self reportedly results from integration between personal self, training, practical experience, and development of knowledge, over time. Professional counselling is a united journey of both self-growth and professional growth.

This study identified congruence between the sense of self and individual professional counselling identity to be greatly important to individual counselling identity. The capacity for expressing personal self comfortably into and as part of the work domain was directly related to participant’s personal need to be genuinely interested, caring, empathic, respectful, and non-judgemental towards clients. If perceived individual counselling identity is a process that develops from being externally derived during professional infancy to being increasingly internally derived over time as experience broadens and deepens professional ability and congruence, then this finding is supported in those of Prosek & Hurt (2014), who identified that personal counselling identity deepens with experience over time.
Identifying as a professional is very important across all participants, with ongoing personal development/improvement, self-reflecting, and membership/registration being integral.

**Collective Identity**

Collective identity involved being perceived as fair, honest, and focused on developing self-directed client autonomy, and is reportedly significant towards strong professional counselling identity development.

Participants viewed the client relationship as based on compassion, and respect, and being non-judgemental, non-labelling, multi-culturally aware, and safe for the client. Outcomes of brainstorming discussions relating to collective identity resembled those for individual identity, indicating that how the counselling professional views the profession is reflected in the way they present their services to clients, so inevitably it is anticipated that the client’s perception of the profession is congruent with the professions views of its collective identity.

**External Identity**

This study found that while professionalization was associated with the greater definition of professional counselling, it was not considered an integral ingredient of professional counselling identity. Instead, professional counsellors’ individual professional identity and collective factors were main contributors to their sense of professional counselling identity.

While issues related to professionalization are connected with matters regarding external registration, voluntary membership-based registration with PACFA and/or the ACA were considered to represent participants’ commitment to their professional capability and conduct. In this context, membership/registration is an expression of individual and collective professional counselling identity.
In order to move forward with the information gathered in this study and identify how it can assist the Australian counselling profession to advance, a range of proposals have been developed:

- Define the *counselling professional identity* more closely within the counselling community using increased surveying and discussion of practitioners’, educators, and students, and also identifying an end-point at which the goal may be considered ‘reached’. It is important to recognise at what point ‘we’re done’ – what’s the aiming-point, what’s the end-point, how will conclusions be drawn, decisions made, and position established?

- Building credibility for the profession and increasingly developing effectiveness in counselling through further supportive evidence-based, quantitative and qualitative research. This will provide substance to the image of Counselling as a profession. More research needs to be conducted on areas such as “do clients return?” and “What outcomes do clients experience?” This will also assist the profession internally, enabling the focus to transcend self-justification to become a focus on the strengths of counselling.

- National accreditation, and professional level expression of job title, via:
  
  - having the membership of a peak representative body;
  - a minimum tertiary education and training level requirement;
  - firm commitment to a standard code of ethics;
  - meeting requirements for ongoing professional development/training;
  - meeting requirements for ongoing supervision

- Enhancing the positioning of the profession via:
  
  - Advocacy with government bodies/agencies by the peak representative body/ies;
  - Formulating and establishing a position in the team approach within the health profession;
  - Gaining mental health care plan access;
  - Marketing professional counselling as a profession in its own right – raising its profile through educational marketing which would serve to position counselling as a profession in its own right, in the minds of the community, health professionals, government and regulatory agencies, and within the broader counselling profession.
As long as anyone can open a counselling practice without a recognised level of certification, the profession will continue to be subject to distrust.

Counselling is such a blurred word – ‘everyone is a counsellor’. Funding bodies are not definitive as to what ‘counselling’ is as part of service delivery and what qualifications are required. National recognition requires clarification of what counselling is and what qualifications are required to claim the position of ‘counsellor’. Although not the best definers, these are the standards that the health and general community use as a yardstick to consistency of service and practice. This may require registration with a respected national body.

The mentality and the stigma around counselling needs to shift, and a lot of money is needed in advertising to begin making this happen so that counselling is similar to having a personal trainer. It’s not something to shy away from.

- Compulsory registration with a peak national body that is proactive and lobbying on behalf of the profession, raising its profile, establishing a professional public image (and contributing to social policy) would send a clear message that a Counsellor has achieved a substantial level of initial and ongoing training, and that the Counsellor has committed to adhere to a publicised Code of Conduct. This would put counselling on par with other professions (e.g. social workers, teachers, psychologists, nurses) and gain it due credibility and raise its profile.

- Clarifying and defining just what it means to be a Counsellor – role and function of a Counsellor, the skill set, the outcome objectives, the underlying philosophical structure – will help with positioning the profession both in the minds of the general community as well as in relation to other health professionals, enabling a team approach to client care.

... We need Government on board to begin seeing counselling as a preventive for mental health issues and something that is very important

- Establishing both an overarching standard as well as recognition of the diversity of specialisations and approaches taken within the field.
Media campaigns and other educational approaches will develop a public image of professional Counsellors as having recognised qualifications and an ongoing commitment to professional development, assist in building acceptance, and positioning Counselling in relation to other healing professions.

!I think that people need to be aware of the difference between mental health professionals. Each group of professionals have their own unique strengths and can offer different things to different people.

This knowledge conveys

An appreciation of the multidisciplinary skills set possessed by some counsellors now that we are edging away from the medical model and moving towards a more holistic, recovery oriented approach to the quality of life and enhancement of the wellbeing of individuals.

The perceptions given by Australian counselling professionals identified that individual and collective professional identity feature more strongly towards professional identity. However, Australia’s soundly established criteria for the attainment and maintenance of professional standards and registration/regulation factored as important in the maintenance of a strong sense of professional identity.

The findings of this study present a baseline of information upon which a larger, more representative survey of Australian professional counsellors (registered with Australia’s peak professional counselling bodies) is able to be developed.

With this in mind, the intention of future studies should be to build on this study and address identified gaps relating to other papers, following this structure:

i) Collective identity

- Level of training expected (absent from this study)
- Ongoing professional development/workshops
- Supervision
- Membership of representative body / code of ethics
- Agreement on counselling

ii) Personal identity

- Alignment of personal characteristics with the character of a professional counsellor
- Professional behaviour

In the American and Canadian contexts, there appears to be a delineation of counsellors from other mental health professionals, by defining themselves as practitioners with a “developmental, prevention, and wellness orientation toward helping”. This may indicate that

- there is a lack of unity within the profession, and
- the unique professional identity of counsellors remains over-diversified.

Limitations

This study was limited by the small number of participants surveyed. Intended as an initial, explorative research project, it is anticipated that larger studies will follow.

Conclusion

This study was borne out of awareness that, despite the “20/20 Vision for the Future of Counselling Profession” conference principle that a shared, common professional identity is critical for counsellors, the international counselling profession is no-closer to achieving this aim. The over-arching aim of this study was to contribute to the quest to identify an international professional counselling identity by contributing a starting-point for an Australian perspective of professional counselling. It is anticipated that the limited pool of Australian research on this topic will increase to further develop knowledge of what defines the field of professional counselling.

Three major areas (individual- and collective- professional counselling identity, and external factors) appear to embody the over-arching concept of what constitutes professional counselling. This study’s research suggests that professional counselling identity is more directly derived from individual and collective factors, while external identification appear to be more associated with
professionalization which, in the view of this study’s authors, is a sub-category of both individual and collective counselling identity, and whose infrastructure is associated with administrative/social worker considerations. These findings suggest that in developing an Australian and indeed an international definition of professional counselling identity, individual attention to the three key areas may contribute to an overall sense of belonging to a stable profession.

Further research regarding Australian professional counselling identity is necessary, and may benefit from being assisted by Australian registered professional counselling bodies. This would be in line with similar self-investigations undertaken by other nations. Developing government initiatives supporting improved professional counselling service provision to the Australian community will benefit the greater development of an Australian professional counselling identity, and will also assist in the development of the international definition of professional counselling.
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