AUSTRALIAN COUNSELLING RESEARCH JOURNAL

Special Winter Issue
with Guest Editor
Nadine Pelling

Editorial

Volume 15, Special Winter Issue with Guest Editor Nadine Pelling

Welcome to the Winter 2021 edition of the AUSTRALIAN COUNSELLING RESEARCH JOURNAL. The following Special Issue has been in production since before the international COVID pandemic and paused during the height of the pandemic. As a result, I am pleased to finally present this special issue on International Counselling and Counselling Supervision without further delay. I hope that this international publication will foreshadow continuing transnational connections and movement as the year progresses.

This special issue is presented in two sections. This first section focuses upon counselling and counselling supervision as existing internationally in the Asia Pacific region. Manuscripts for this first section were peer reviewed under the direction of Nadine Pelling from the University of South Australia. The second section focuses upon counselling supervision areas of topical interest. Manuscripts for this second section were peer reviewed under the direction of Philip Armstrong of the Australian Counselling Association.

In the first section of this special issue, counselling and counselling supervision as existing in Canada is reviewed by Nicola Gazzola from the University of Ottawa and Kate Gignac from Acadia University. Counselling regulation, education, and representation in Malaysia is then outlined by Melati Sumari from the University of Malaya, Dini Farhanna Baharudin from the Universiti Sains Islam Malaysia, Hartini Abdul Rahman from Oregon State University, and Norfaezah Md Khalid from the University of Malaya. Janeé Steele and Tiffany Lee from Western Michigan University outline counselling and counselling supervision in the United States of America. The counselling profession in the Philippines is presented by Ma. Teresa Tuason from the University of North Florida, Margaret Alvarez from Silliman University, and Bridget Stanton from the University of North Florida. Pui Chi Tse from Hong Kong Shue Yan University explores counselling in Hong Kong. Our first section focusing on the presentation of international counselling is concluded with a qualitative exploration of the strengths, weaknesses, opportunities, and threats facing counselling in Australia as noted by a group of experienced approved Australian Counselling Association supervisors provided by Kaitlyn Platt and Nadine Pelling of the University of South Australia.

I hope that readers enjoy this broad exploration of international counselling and counselling supervision. Supervising practitioners and academics writing in this area are encouraged to contact me via Nadine.Pelling@unisa.edu.au about an upcoming publication expanding upon international counselling supervision practice and additional topical areas in counselling supervision.

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Special Issue Guest Editor

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Counselling Regulation, Education, Supervision, and Representation in Canada

Nicola Gazzola[1] and Kate Gignac[2]

Canada is a geographically large country that includes 10 provinces and three territories. In Canada mental health is regulated at the provincial level. There are currently five Canadian provinces that have regulation for the practice of counselling while the other five provinces and three territories are at varying levels of regulation. There are regulatory bodies at the provincial level with numerous professional associations at both the provincial and national levels. This article outlines the nature of counselling and psychotherapy in Canada, its development and regulation across various provinces, as well as related training opportunities leading to recognition of various professional counsellor titles. In addition to the practice of counselling and psychotherapy, we will also discuss clinical supervision and counsellor education within the Canadian context.

Keywords: *Canada, Counselling, Regulation, Education, Representation, Supervision.*

It would not be surprising that at some point during their life a person may have been referred to, or met with, a counsellor. This may have been within an educational institution, a business or employment setting, through community mental health services, or having some removed awareness of this member of the helping profession. The cautious scoping of the counsellor's office in the high school hallway, a life altering call to a helpline, sharing the career reigns while traversing a job loss, seeking an anchor during tumultuous teen angst, or thirsting for a compassionate ear amid personal troubles were perhaps moments when we stepped onto the counsellor's pathway, so they could walk alongside us and offer support and, perhaps, some solutions.

Counselling involves the use of a skillful, ethical, and meaningful therapeutic relationship to bring about emotional growth, self-acceptance, and life enhancing awareness of personal resources that foster resilience. The counsellor is set upon the task of helping people work through developmental challenges, come to terms with life's problems, find ways to enrich important relationships, build strong coping abilities to withstand crisis, open the path to insight and self-knowledge, and

disentangle emotions that fuel inner conflict. Among the many descriptions encapsulating what counsellors do, the current rendering by the Canadian Counselling and Psychotherapy Association (CCPA, 2015) succinctly captures its breadth and scope:

> Counselling is a relational process based upon the ethical use of specific professional competencies to facilitate human change. Counselling addresses wellness, relationships, personal growth, career development, mental health, and psychological illness or distress. The counselling process is characterized by the application of recognized cognitive, affective, expressive, somatic, spiritual, developmental, behavioral, learning, and systemic principles.

In Canada, and elsewhere the terms counselling and psychotherapy have traditionally been transposable as both share certain core activities (BACP, 2016; IACP, 2018; Martin, Turcotte, Matte, & Shepard, 2013). Some uphold a distinction between the two terms and the lines of difference are usually demarcated by training, professional focus, or practice setting. It is not uncommon for counselling professionals in Canada to use a number of titles such as: counselling therapist, psychotherapist, mental health therapist, clinical counsellor, career counsellor, vocational guidance counsellor, marriage and family therapist, conseiller/conseillere d'orientation, orienteur, orienteur professionnel, and psychoeducateur (CCPA, 2011). This plethora of title use has caused the collective counsellor identity to be viewed as elusive and unsettled while individual expressions of 'counsellor-ness' are a strong, daily portrayal for many (Gazzola et al., 2010; Gignac & Gazzola, 2016, p. 312). Having a clear professional identity provides those accessing mental health services with a clear understanding of the valuable role, skill set, and approach

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to psychological well-being counsellors offer.

For counsellors in Canada and other countries, knowledge and practice edges often adjoin those of other allied professions such as social work, psychiatry, and clinical psychology making it challenging to highlight the uniqueness of these helpers. A similar overlapping of edges that warrants mention within the Canadian context occurs between counselling psychology and counselling but apparent distinction rests upon academic origins (Sinacore & Ginsberg, 2015). Counsellor education is considered the home of counsellors, while counselling psychology claims roots in psychology with practitioners licensing typically as psychologists. The lines around the counsellor identity are not definitive and as a fairly new profession this will be an evolving process going forward both provincially and nationally as the social, economic, political, and global contexts unfold (Gazzola et al., 2010).

The professional identity of counsellors in Canada has been depicted as a unique amalgam of geopolitical representation, cultural heritage, and pluralistic aspirations that continue to shape the collective persona (Gazzola, 2016). Characteristics identified through a survey of Canadian counsellors by Gazzola and Smith (2007) revealed strong altruistic values, a commitment to personal excellence, the pursuit of success and perpetual growth as key features of their professional identity portrait. Examining how counselling professionals negotiate the identity work process within the Canadian context as regulatory frameworks unfold, Gignac and Gazzola (2016; 2018) found this milieu brought forth a strong sense of agency, craftsmanship in undertaking the identity lifelong project, protean efforts during periods of uncertainty, and a desire to uphold the integrity of their distinctiveness. Counsellor identity in Canada and within each province will certainly continue to evolve against the backdrop of unfolding regulatory initiatives.

The ability of counselling professionals to articulate who they are, their important contribution, the values they uphold and how they are distinct is not unique to the Canadian context. This elusive and uneven recognition subordinating the profession at times (McLaughlin & Boettcher, 2009), causing worrisome diminished relevance amid allied professions (Manthei, 1995), and exacting tireless efforts to uphold core humanistic values (Hansen, 2003) are professional identity challenges confronting counsellors around the globe. Our goal in this chapter is to articulate how counsellors are represented and become qualified professionals ready to serve the needs of clients across Canada.

Counselling Regulation in Canada

In Canada, the licensing, credentialing, and registration of counsellors is undertaken by provincial regulatory bodies (CCPA, 2013). Although several key mental health professions like social work, psychology, and psychiatry are subject to statutory regulation within each of the Canadian provinces, the counselling profession has not yet achieved the same breadth of implementation. At this time, statutory regulation systems are in place in only five of these provinces or territories (see Table 1). Counsellors outside of these provinces undertake voluntary registration with the Canadian Counselling and Psychotherapy Association (CCPA), which offers qualifying members the Canadian Certified Counsellor (CCC) designation.

Table 1
Regulatory Status of Counselling in Canada

Counselling Regulation across Canada		
Regulated	Regulation Activities Underway	Regulation Discussion Pending
Nova Scotia	Newfoundland & Labrador	Yukon
New Brunswick	Prince Edward Island	Nunavut
Quebec	Manitoba	Northwest Territories
Ontario	**Saskatchewan**	
Alberta	**British Columbia**	

The province of Nova Scotia has established title protection through the Counselling Therapist Act (2011) which restricts use of Registered Counselling Therapist (RCT) and all derivatives or abbreviations of this (CCPA, 2012). The College of Counselling Therapists (NSCCT) regulates the practice of counselling therapy and has established definitions, professional conduct codes, and oversees matters of professional misconduct or incapacity (NSCCT, 2011).

In New Brunswick, a similar approach to regulation occurred with the implementation of title protection which permits the use of Licensed Counselling Therapist by registered members. The regulatory authority overseeing this is the College of Counselling Therapists of New Brunswick (CCTNB), which received proclamation in 2017 and is working through the initial phase of this process (CCTNB, 2018). The most recent province to regulate counselling is Alberta. The Mental Health Services Protection Act received Royal Assent in December 2018 via Bill 30. The Alberta College of Counselling Therapy (ACCT), part of Alberta's Health Professions Act, was formed to provide oversight, accountability and public protection (FACT-Alberta, 2019).

With full statutory regulation (i.e., title and scope of practice) of counselling in the province of Quebec (i.e., Guidance Counsellor and Vocational Counsellor) counselling professionals are clearly identified and protected. Holding the longest and most comprehensive regulation for the profession, L'Ordre des Conseillers et Conseillieres d'Orientation du Quebec (OCCOQ, 2013) is the college responsible for safeguarding professional conduct and protection of the public. Only members of the OCCOQ are permitted to use the titles: guidance counsellor, vocational guidance counsellor, conseiller d'orientation, and conseillere d'orientation (Government of Quebec, 2013). All professions in Quebec are governed by the Office of Professions du Quebec and within their code, each is distinguished by their scope of practice while benefits are recognized in having shared reserved activities across the mental health field (Martin, Turcotte, Matte, & Shepard, 2013).

In Quebec and Ontario there is statutory regulation for psychotherapy with title protection and practice restrictions. Considered a distinct practice from counselling and spiritual counselling, those wishing to practice psychotherapy in either of these provinces are required to join a college or obtain permits through a provincial order. In Ontario this is the purview of the College of Registered Psychotherapists of Ontario (CRPO), while in Quebec the issue of permits falls under the remit of the Ordre des psychologies du Quebec (OPQ). Counsellors in Ontario, as of December 2017 are encouraged to verify with the CRPO whether activities they perform fall within the Controlled Act of Psychotherapy and therefore require registration with the regulatory college now that full proclamation has transpired (CRPO, 2017a).

In the five other provinces there are ongoing discussions and initiatives to put regulatory mechanisms in place with some

further along on this route. The Prince Edward Island Counselling Association (PEICA) applied in 2017 to the government for title protection of Registered Counselling Therapist (RCT) under the RHPA (Regulated Health Professions Act) and will be seeking regulation in the near future. The Federation of Associations for Counselling Therapists in British Columbia (FACT-BC) continues to work towards establishing regulation of the profession (CCPA, 2017). In the three territories, these discussions have not seen a similar level of commitment or progress.

Counselling Representation in Canada

Canada is the largest North American country, spanning roughly ten million square kilometers (Citizenship and Immigration Canada, 2012). Although Canada is a large territory, second only to Russia in geographical size, its population is relatively modest. Canada is a country that is just shy of 38 million people (Statistics Canada, 2020). Canada is part of the Commonwealth and a parliamentary democracy. The responsibility for lawmaking in Canada is shared among one federal, ten provincial and three territorial governments" (House of Commons, 2000). In Canada, mental health is regulated at the provincial level.

The Canadian Counselling and Psychotherapy Association (CCPA), which was formed in 1965, is the oldest national association for professionally trained counsellors and now has close to 7,000 members. Its mandate is to provide leadership and promote the counselling profession in Canada. Individuals are eligible to become a Canadian Certified Counsellor (CCC) if they hold a university degree at the graduate or doctoral level in counselling or a related field that meets the professional standards and ethics of the CCPA. A qualified professional must also become a member of the CCPA before applying for certification.

Within the national association there are sixteen chapters that focus on different areas of specialization or timely issues related to the profession (e.g., counsellor educators and supervisors chapter, creative arts, social justice, spirituality, school counsellors, Indigenous circle, and private practice). The CCPA also facilitates certification of counsellors and supervisors, offers live and online professional development courses or webinars, offers accreditation of counselling programs, and hosts an annual national conference.

Another nationally recognized, self-regulated association for counsellors is the Canadian Professional Counsellors Association (CPCA), which was founded in 1990. Individuals must meet competency-based criteria for membership as a Registered Professional Counsellor (RPC) or as Master Practitioners in Clinical Counselling (MPCC). The CPCA approves several education providers and is dedicated to promoting the professionalism of counsellors.

Pathways to Becoming a Counsellor in Canada

A great place to begin on the counsellor pathway is with a bachelor's degree as it prepares individuals for entry to a variety of counselling career choices. Whether coming to the counselling profession after a previous career or directly from an undergraduate program like psychology, education, or social work the pursuit of graduate level studies is typically required for professional practice (see Figure 1). Options for specialized

areas of counselling work such as school counselling, private practice, or family and couples work may be part of graduate study programs or obtained through ongoing professional development.

Counselling Education in Canada

Those interested in becoming counsellors in Canada must hold an undergraduate degree in education, psychology, or an equivalent to pursue graduate level studies. A master level degree in counselling, psychology, or social work is the minimum educational requirement for certification, registration, and licensing in most provinces in Canada (CCPA, 2013). School counsellors are also required to be qualified teachers in most jurisdictions. There is great variability in the standards and delivery of counsellor education in Canada precisely due to academic training being a provincial responsibility (Gazzola, 2015).

Graduate studies in counselling are traditionally situated within education faculties of universities in Canada rather than in psychology departments despite their shared historical roots (Young & Nichol, 2007). They are either referred to as counselling psychology or educational counselling programs and vary from 14 months to two years in duration. There are several universities across Canada that offer graduate level studies for those pursuing a general counselling degree or with a specialized focus (e.g., art therapy, marriage and family, psychotherapy, and spirituality) as outlined on the Canadian Counselling and Psychotherapy Association website (CCPA, 2018b) (see Table 2). Four of these universities have program accreditation from the Canadian Counselling and Psychotherapy Association (CCPA) while several other academic institutions hold accreditation with the Canadian Psychological Association (CPA) at the graduate and doctoral level for their counselling psychology programs (Gazzola, 2016).

Table 2
Graduate-Level Academic and Professional Counsellor Training Programs Across Canada

Province	University
Alberta	Athabasca University; City University; St. Stephen's College; University of Alberta; University of Calgary; University of Lethbridge
British Columbia	Adler School of Professional Psychology; City University; Gonzaga Univer Simon Fraser University; University of British Columbia; Trinity Western University; University of Northern British Columbia; University of Victoria
Manitoba	Brandon University; Université de Sainte-Boniface; University of Manitoba University of Winnipeg; Providence Theological Seminary
New Brunswick	Université de Moncton; University of New Brunswick; Yorkville University
Newfoundland	Memorial University of Newfoundland
Nova Scotia	Acadia University
Ontario	Saint Paul University; University of Western Ontario; University of Guelph; University of Ottawa; University of Toronto; Wilfred Laurier University; Ca Christian College & School of Graduate Theological Studies; Tyndale Semi
Québec	Concordia University; McGill University; Université de Laval; Université d Montréal; Université de Québec à Montréal; Université de Québec à Rimou; Université de Québec à Trois-Rivières; Université de Sherbrooke; Universit Québec en Abitibi-Temiscamingue; Université du Québec en Outaouais

| Saskatchewan | Briercrest College and Seminary; University of Regina |

* *Source:* Canadian Counselling and Psychotherapy Association (2018b)

Masters-level programs in counselling are generally offered as a Master of Counselling / Counselling Psychology (M.A. or M.C.) with a thesis requirement or the Master of Education (M.Ed.) which is a terminal degree for professional practice (CCPA, 2018b). For those entering a master's in counselling psychology program, a 4-year B.A. in psychology (honors) is necessary and the completion of pre-requisite courses in psychology (abnormal, developmental, personality), statistics, research design, and basic counselling skills. A master's in educational counselling program often does not require an honors B.A. in psychology but may call for similar pre-requisite courses upon entry (Government of Canada, 2018). Students can also complete their graduate studies in counselling through two online programs that combine online coursework with a practicum-based experience. The first is Yorkville University, which offers a Counselling Psychology (M.A.) program and the second option is the Counselling (M.C.) at Athabasca University.

The Canadian Counselling and Psychotherapy Association (CCPA) has worked steadfastly to set standards and procedures for accreditation of counselling programs in Canada. The Council on Accreditation of Counsellor Education Programs (CACEP) is the body responsible for overseeing the accreditation process, which was established in 1987 to ensure quality, consistent training. Counsellor education programs are required to achieve established standards of CACEP within their institutional setting, ensure certain program content and objectives are met, provide quality practicum experiences, adhere to student selection and advising protocols, and attend to faculty qualifications, instructional support, and self-evaluation in master's level programs (Robertson & Borgen, 2016). There are currently four universities in Canada that hold CACEP accreditation for their counselling programs (see Table 3).

Table 3
CACEP Accredited Master's Level Counselling Programs in Canada

University and Year of Accreditation
University of British Columbia
• M.A. Counselling Psychology (2006)
• M.Ed. Counselling Psychology (2006)
Acadia University
• M.Ed. in Counselling (2009)
Trinity Western University
• M.A. Counselling Psychology (2012)
University of Victoria
• M.A. Counselling Psychology, Thesis Route (2017)
• M.A. Counselling Psychology, Project Based (2017)

Counselling Supervision in Canada

Clinical supervision is an important requirement for counsellors in Canada and one which has historically been conducted by experienced clinicians with varying degrees of formal training (Johnson & Stewart, 2000). This apprenticeship approach has increasingly come under review (Peake, Nussbaum, & Tindell, 2002; Watkins, 2012) and the move toward solidifying more formal, compulsory training for supervisors has gained international momentum (Milne & James, 2002; Scott, Ingram, Vitanza, & Smith, 2000). A similar shift toward mandatory training through accredited counselling programs or at the behest of regulatory colleges overseeing the mental health professions has begun to take shape in Canada (Hunsley & Barker, 2011).

Clinical supervision is provided to counsellors-in-training as part of their degree completion and also to supervisors-in-training, often at the doctoral level while they establish supervision competency. These are the primary levels of competency formation being addressed across the mental health field within accredited programs and by professional associations (e.g., Canadian Psychological Association, Canadian Counselling and Psychotherapy Association). Both the provision of clinical oversight and training of supervisors within academic settings remains uneven, under evaluated, and emergent as core requirements across provincial jurisdictions are independently established in the Canadian context (Hadjistavropoulos, Kehler, & Hajistavropoulos, 2010).

This desire to articulate the academic training requirements during degree capture and forward into perpetuity through continuing education for clinicians has been recently evidenced in the province of Quebec. Clinicians providing counselling and psychotherapy services in Quebec following passage of Bill 21 by the National Assembly of Quebec (2009) will now be required to have completed six hours of supervision training to demonstrate competency if not obtained during post-doctoral training and ongoing mandatory continuing education. This move has set precedent for supervision to become a specialty area beyond counselling and psychotherapy practice (Gonsalvez & Milne, 2010), which in time may move Canada closer to international supervision standards. In particular, the requirement for supervision of supervision by other professional associations like the British Association of Counsellors (1996) which has shown merit in approaching protection of the public and perhaps elevating professional credibility (Wheeler & King, 2000).

This shift in the view of clinical supervision occurring well beyond the formal training periods of clinicians requires a solid grounding in research evidence to delineate competencies and build capacity to support this endeavor (DeAngelis, 2014). Preliminary steps toward this longer-term objective are evidenced by a recent move in the province of Ontario to make formal training of supervisor's mandatory. According to the College of Registered Psychotherapists of Ontario (2017b) a supervisor must possess five or more years of experience in the practice of psychotherapy and demonstrate competence as well as completing 30 hours of directed learning in clinical supervision (i.e., course work, supervised practice as a supervisor, individual/peer/group learning, or independent study). Not only are provincial regulatory bodies like the CRPO starting to establish guidelines to mandate supervisory training in lieu of lifelong requisites, there is another broader movement underway for counselling supervision in Canada.

At the national level the Canadian Counselling and Psychotherapy Association (CCPA) has established the Canadian Certified Counsellor – Supervisor (CCC-S) designation to credential professional supervision competency (CCPA,

2018a). The requirements for obtaining the CCC-S designation include:

- CCC Designation – Canadian Certified Counsellor in good standing with CCPA
- Attestation – ethical and professional conduct, commitment to CCPA Code of Ethics and Standards of Practice, possession of professional liability insurance, annual documentation of continuing education and clinical supervision requirements
- Clinical Experience – minimum of 5 years post-graduate degree clinical experience within the last 10 years [800 hours / year]
- Employment History and Supervision Training – providing documentation summaries
- Supervision Experience – evidence of provision of 20 hours minimum clinical supervision over last two years or equivalent supervisory designation from another recognized professional association
- Supervision Education – confirmation of graduate level training in supervision
- Annual Renewal – CE credits and supervision practice hours

With the aim of promoting the professional credibility of clinical supervisors, the CCPA is working to establish a recognized national credential of professional supervision and build capacity for quality professional development opportunities both online and at national conferences. Graduate-level courses in clinical supervision are offered at the introductory, intermediate, and advanced levels to support annual renewal requirements, which includes twelve hours of documented supervision work and four continuing education credits in the area of clinical supervision (CCPA, 2018a). The current movement toward establishing supervisory competencies and training requirements will undoubtedly influence not only professional development but also the unfolding identity of counsellors in Canada (Gazzola & De Stefano, 2016).

Concluding Remarks

In Canada, as in other countries around the globe, there is considerable overlap between the work of counsellors and that of other allied mental health professionals. Within counselling, there are numerous occupational titles that are used (e.g., guidance counsellor, counselling therapist, mental health counsellor, etc.). Counselling and psychotherapy are becoming increasingly regulated in Canada, a process that falls under the jurisdiction of provincial governments. The province of Quebec has the most comprehensive statutory regulation of counselling (i.e., guidance counsellor / vocational guidance counsellor) with several other provinces in various stages of statutory regulation underway. Both Quebec and Ontario currently regulate "psychotherapy," which is considered distinct to counselling in those provinces.

One of the cornerstones to counselling practice is clinical supervision. In the past supervision mainly occurred within the educational process, specifically during the master's-level counselling practica that most counselling programs require. Further, the typical supervisor has traditionally been a seasoned practitioner whose qualifications as a supervisor have been exclusively years of practice as a counsellor. This has been gradually shifting and the requirements for becoming a supervisor now include some formal training in clinical supervision in addition to a minimum number of years in the field practicing as a counsellor. In general, counselling, and to some degree supervision, is increasingly becoming regulated in Canada. Because mental health falls under the jurisdiction of the provinces, counselling regulation currently exists at varying levels across Canada and the regulatory process is a dynamic one.

Bio

Nicola Gazzola is a Professor of counselling psychology at the University of Ottawa. He is a licensed psychologist (Quebec) and has 25 years of clinical experience. His research interests are in the area of professional issues in counselling and psychotherapy and include professional identity of counselling and clinical supervision. His research team is currently investigating the therapist use-of-self in counselling and psychotherapy.

Kate Gignac earned her PhD from the University of Ottawa and is a Canadian Certified Counsellor (CCC) and a Certified Counsellor Supervisor (CCC-S). Her research centers on professional identity formation, clinical supervision, the articulation of identity work, place of values and religiosity in identity narratives, and the nexus of exogenous events with professional becoming.

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Counselling Regulation, Education, and Representation in Malaysia

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Over time, counselling in Malaysia has grown from the stage of infancy (Ng & Stevens, 2001) to pubescence (See & Ng, 2010). While its historical origin has some influences from the counselling profession in the United States (Lloyd, 1987), counselling in Malaysia has become an important mental health profession with its uniqueness and strength. Feit and Lloyd (1990) defined 'a recognized counselling profession' as comprising 'ethical standards, licensure, accreditation, specialized training, and a strong identity. This was supported by Johari (2001), who added that 'professional bodies' to the existing criteria. The purpose of this chapter is to provide a brief overview of counselling in Malaysia. It is divided into five sections beginning with the counselling regulation and legislation, followed by counselling education, description of counselling representations through associations, some explanations on the pathway to becoming counsellors in Malaysia, and finally, counselling supervision.

Keywords: *Malaysia, Counselling, Regulation, Education, Representation, Supervision.*

Counselling Regulation in Malaysia

Registration of Counsellors

Counselling in Malaysia has moved towards professionalism and prominence with the introduction of the Counsellors Act 1998 (Act 580, Act 580; Commissioner of Law Revision and Percetakan Nasional Malaysia Bhd, 2006, (Lembaga Kaunselor Malaysia, 2016; Othman, Che Din, & Sipon, 2000; See & Ng, 2010). As a result, Malaysia is regarded as one of the first countries in the South-East Asian and Australasian region to have a specific Act to regulate the profession. This Act provides an advantage over many other Asian countries because it safeguards professional standards and provides a legal and social framework for counselling in Malaysia (Glamcevski, 2008).

As an Act that applies only to Malaysian practicing counsellors regarding their practice, it aims to regulate the practice of professional counselling in Malaysia (Mohd Ishak, Amat, & Abu Bakar, 2012). The Malaysian Counsellors Advisory Council was established under the Act. It acts as an advisory body to the Minister on matters pertaining to the Act and matters referred to it by the Board.

The Board of Counsellors is seen to hold more critical functions. The Act dictates that the Board is to (1) oversee the provision of counselling services,(2) to evaluate the need for counselling services in Malaysia, (3) regulate the training of counsellors and determine the types and levels of counselling that can be made available; (4) determine the qualifications entitling a person to be registered under the Act; (5) determine the standard of counselling training programs; (6) make recommendations to the government in relation to the standard of counselling services; (7) register counsellors and make them qualified; (8) regulate chargeable fees by a registered counsellors for his services; (9) appoint members of the Board to sit on any board, committee, or body formed for any purpose affecting the counselling profession; to regulate the conduct of the counselling profession including prescribing the code of ethics for the counselling profession; and (10) to perform other activities as deemed necessary to enable it to carry out its functions effectively.

Under the Act, counselling is defined as a systematic process of helping relationships based on psychological principles performed by a registered counsellor in accordance with the counselling code of ethics to achieve a voluntary favourable holistic change, development, and adjustment of the client, such

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that the change, development, and adjustment will continue throughout the lifespan of the client' (Act 580; Commissioner of Law Revision and Percetakan Nasional Malaysia Bhd, 2006).

Based on the definition above, it can be understood that counselling can only be performed by a registered counsellor. Sub-section 22(1) of the Counsellors Act 1998 mandates that individuals must register for the practice as a counsellor in order to use the title 'registered counsellor' or to use displays on any form of devices representing that he or she is a registered counsellor. Additionally, they must also hold a valid practicing certificate issued under this Act (Sub-section 23(1). To register, a person must be a Malaysian citizen or a Malaysian permanent resident, aged 21 years and above, entitled and suitable to be registered as a counsellor, and holds qualifications as listed in the Counsellors Act 1998. Failure to do so causes one to be guilty of an offense and shall on conviction be liable to a fine not exceeding thirty thousand ringgit or imprisonment for a term not exceeding three years or both as stated in Sub-section 22(2) of Act 580.

The Malaysian Board of Counsellors also has regulations for non-Malaysian citizens and non-Malaysian permanent residents wishing to practice as counsellors in Malaysia. According to the Counsellor Act 1998, they may apply for temporary registration. The Malaysian Board of Counsellors will consider the registration of a person who is registered or licensed as a counsellor in the country where he or she ordinarily practices counselling, has counselling expertise, and physical presence in Malaysia for not less than one hundred and eighty days in a calendar year to conduct counselling services (Act 580; Commissioner of Law Revision and Percetakan Nasional Bhd, 2006).

Ethical Codes

The issue of unethical conduct of counsellors is provided in Sections 6 and 7 of the Act. A committee will hold an investigation for every complaint against any counsellors. If found guilty, the counsellor's name will be removed from the registry, suspended, or ordered to be fined, or they may also be reprimanded for the misconduct. Disciplinary authority is given exclusively to the Board, which exercises disciplinary control in respect of all such counsellors in accordance with the Act. Offensive practices (such as fraud and forgery) and their related penalties are also clearly provided in the Act.

To further strengthen the professionalism in the delivery of the counselling services, a specific code of ethics was developed, following an adaptation of the American Counseling Association (ACA) Code of Ethics (American Counseling Association, 2014) as a result of the joint effort between the Malaysian Board of Counsellors and the Malaysian Counselling Association. Hence, the Counsellors Act 1998 and the Code of Ethics (Malaysian Board of Counsellors, 2016b) provide guidelines for Malaysian counsellors to have ethical and professional practices. In many circumstances, the content in the Code of Ethics matches or complements the Act. Nevertheless, in cases where conflict arises between the two, the content of the law prevails. An example of such conflict is when the counsellor finds that his or her colleague has wrongfully practiced or claimed (in an advertisement) his expertise in the area that he is not an expert or was trained in (Mohd. Ishak et al., 2012). The code of ethics outlines the steps that the counselor needs to be taken by the counsellor, i.e., to avert and correct any unethical conduct displayed by his or her peers. It is further reinforced in

the Counsellors Act 1998 that a disciplinary punishment shall be imposed if the counsellor acts fraudulently, dishonesty, or moral turpitude.

Other than this, the functions of the Code of Ethics (Malaysian Board of Counsellors, 2016b) are to provide guidelines to assist counsellors to act professionally so that services can be provided effectively and values can be nurtured, to create principles that determine ethical behaviour and best practices, to enable the Board to clarify ethical responsibilities of counsellors registered with the Board, and to be the basis for processing complaints and inquiries on counsellors' ethics.

The Code of Ethics (Malaysian Board of Counsellors, 2016) only comprises eight sections as opposed to the ACA Code of Ethics (nine sections). Section A, B, C, and D of this code outlines the responsibilities of counsellors towards their clients, other professionals, and the community. The elements of confidentiality, privileged communication, and privacy are highlighted to help build healthy relationships and avoid ones that may impair professional judgment or increase harm to the clients (Mohd. Ishak, 2012). Section E provides details about testing and evaluation issues. This is followed by Section F on supervision, training, and teaching, which relates to the counsellor-client as well as the supervisor/educator-student relationships. Aspects of multicultural competencies are also mentioned. The code also outlines counsellors' conduct when conducting research and publishing in Section G. Finally, Section H covers standards and laws pertaining to the resolution of ethical issues. This includes adherence to five basic moral principles: autonomy, non-maleficence, beneficence, justice, and fidelity (Mat Rani et al., 2017; Mohd. Ishak et al., 2012).

As the mental health field is diverse, with counsellors and the client population varying in degrees in terms of the roles they play, the existing Code of Ethics (Malaysian Board of Counsellors, 2016b) must be broad enough in scope to accommodate application in many different situations (Mat Rani et al., 2017). Another limitation of the code is that the guidelines provided may not always be clear. Thus there is a call for a more systematic manner of decision-making. There may be a need to fall back on the court's decisions for interpretation in some circumstances.

Both the Counsellors Act 1998 and the Code of Ethics (Malaysian Board of Counsellors, 2016b) provide ample guidelines for counsellors to function effectively in the profession. However, there may be a need to update and revise the existing documents from time to time as they must adapt to changes as new issues or situations arise. For example, the ACA Code of Ethics has already included a new section on distance counselling, technology, and social media. Another example is in terms of counsellors' qualifications. Even though more institutions are providing counselling programs, they are not yet listed in the Counsellors Act 1998; and this may later cause difficulties for graduates from those programs to be registered under the Act. Hence, by keeping track of current development and revision of the existing guidelines, the counselling profession will maintain its relevance and further enhance the high standards of professionalism in the counselling profession within society.

Counselling Education in Malaysia

The Malaysian Ministry of Education has been working on producing quality graduates in guidance and counselling. At

present, counselling programs are offered by various Malaysian public and private institutions of higher education. The early development of counselling in Malaysia began in schools and public institutions of higher learning in the late 1960s. During its inception, the field of counselling in Malaysia was heavily influenced by the counselling profession in the United States (Lloyd, 1987). The first two areas of emphasis were school guidance and drug abuse prevention. University of Malaya (UM) was the first to offer a guidance and counselling major as part of its Master's in Education program in 1976, and Universiti Kebangsaan Malaysia (UKM) offered a Diploma in Psychology (Counselling), which was later changed to the Diploma in Counselling Psychology in 1979. By 1980, more Malaysian public universities began offering guidance and counsellor education programs focusing on their specializations to fulfill the Ministry of Education's goal of providing full-time school counsellors by the year 2000.

Concurrently, several Malaysian universities began by offering counselling services to their own university students to support them in navigating university life. MARA Institute of Technology was the first institution to offer counselling services to support its students, followed by the University of Malaya, Universiti Kebangsaan Malaysia, and other universities (Nasir, 2008). Currently, all public and private higher education institutions are required by the Malaysian Qualification Agency (MQA) to provide counselling services to their students, which must be performed by registered counsellors only (MQA, 2018).

Counsellor Education

The Malaysian counsellor education incorporates multiple counselling and psychological components. In Malaysia, institutions offering counselling in the undergraduate and graduate levels include: Universiti Kebangsaan Malaysia (UKM), Universiti Putra Malaysia (UPM), Universiti Pendidikan Sultan Idris (UPSI), Universiti Sains Malaysian (USM), Universiti Malaya (UM), Universiti Teknologi Malaysia (UTM), Universiti Utara Malaysia (UUM), Universiti Malaysia Sabah (UMS), Universiti Malaysia Sarawak (UNIMAS), Universiti Malaysia Terengganu (UMT), Universiti Sains Islam Malaysia (USIM), Kolej Universiti Insaniah, and HELP University College.

At present, there are ten public universities offering counselling programs at the Bachelor's level and Master's level, one public university offering a counselling program at the Bachelor's level only, three private universities offering counselling programs at the Master's level only, and ten public universities offering doctoral-level counselling programs. At the Master's level, nine public universities offer coursework-based programs, two offer a combination of coursework and research programs, and one public university is currently offering a research-based program (Malaysian Board of Counsellors, 2017). All doctoral counselling degrees are currently offered in the research-based mode except the University of Malaya who began to offer a doctoral degree in a combined research and coursework mode. However, the research and coursework combination does not intend to produce counsellors who specialize in a particular area.

Curriculum and Delivery

Overseen by the Malaysian Ministry of Education and the Malaysian Board of Counsellors, each counsellor education program incorporates four components: knowledge, skills, research and assessment, and area of specialization. Only some public higher education institutions have their own emphasized

areas of specialization (e.g., educational, management and organization, marriage and family counselling, and drug and substance use/abuse). For example, the University Putra Malaysia is known for producing school counsellors, while the Universiti Sains Islam Malaysia offers Master's in Counselling (Family Counselling or Drug Abuse) specializations. The other universities offer counselling programs that train future counsellors in any setting without an area of specialization.

Most programs are delivered on-site through lectures and clinical training (practicum and internship). Practicum training is a required program component and needs to be completed before the internship. Practicum is typically offered in-house at the program's institution for one academic semester (4 months), accruing 253 contact hours. Practicum experience may include simulations, live or recorded sessions in counselling labs, case consultation, and clinical reports through supervision by a qualified supervisor. Counselling labs are specifically developed for individuals and group experience, allowing students to perform practicum and enhance their counselling competencies and experiences.

Experiential learning is a unique learning experience offered by counselling programs in the form of counselling retreats, professional development, seminars, and professional counselling forums, social and community outreach projects, as well as client-centered programs. These programs are designed to expose and create awareness to the counselling students on current societal and mental health issues faced by Malaysians.

Internship in this field is typically carried out by an outside organization offering counselling services, lasting between 14 to 24 weeks, with 504 hours (192 direct contact hours of individual and group counselling). Students are supervised by a primary supervisor and an on-site supervisor based on recorded sessions and case studies. Their skills are evaluated based on specific areas, namely, administration, individual group counselling, and psychological assessment skills. They also have opportunities to involve rehabilitation and prevention.

Issues in Counsellor Education

The demand for counselling education continues to rise as mental health awareness increases among the Malaysian authorities and society. About four decades ago, public universities were satisfying the increasing demands for counsellors by offering quality programs and specializations aimed at responding to the current social and mental health needs of Malaysian society. However, despite numerous advances made by the Malaysian counselling profession, some challenges remain.

As the number of training programs continues to grow in the country, more counsellor educators will be needed to teach these programs. However, at present, there are no standardized educational, clinical, or research requirements to become a counsellor educator in these institutions other than the requirement to register with the Malaysian Board of Counsellors. As a result, information on the varying educators' educational and research backgrounds, teaching and pedagogical methods, and clinical skills remain unregulated. One significant implication is the difficulty in measuring the qualification of the area of specialization being offered by the counsellor educators.

In addition, there is no existing database or mechanism to track the current human resource, educators, researchers, research projects, and area of specializations of the Malaysian counselling professionals. With the increased number of research-based doctoral counselling programs, the existence

of a national counselling database with vital information on the progress of the profession will allow for cross-cultural, international research opportunities.

Counselling Representation in Malaysia

The first national professional counselling association in Malaysia was established on January 16, 1982, called the Malaysian Counselling Association (PERKAMA). Originally known as the Malaysian Counsellor Association, it was founded by a group of school counsellors, counsellor educators, and welfare officers interested in counselling (Othman & Abdullah, 2015; See, Othman, Salim, & Che Din, 2009). The name was later changed to the Malaysian International Counselling Association (PERKAMA International) in 2011 (Mohamad Hanafi & Jusoh, 2015).

The association's primary purpose is to provide a professional base for Malaysian counsellors or those in related professions in terms of professional orientation and esprit de corps (Mohd Ishak et al., 2012). Other aims of the organization include: enabling the development of the profession, encouraging learning, professionalism, and competency of counsellors, enhancing identity, harmony, and collaboration among members from various disciplines through the exchange of knowledge and experiences, as well as providing a resource of counselling professionals to help social and mental health issues in the society (Jusoh, 2015; Mohd Ishak et al., 2012).

Beginning as a small association with about 500 to 1000 members (Glamcevski, 2008; See et al., 2009), this association now has over 7000 members (Malaysian Board of Counsellors, 2016). Membership of PERKAMA International is open to those who are qualified in counselling and related fields. Those who do not have the required qualifications are accepted as associate members or student members (Mohd Ishak et al., 2012; Zambri, 2012).

PERKAMA has played a massive role in lifting the dignity of professional members of the community. Upholding the belief that professionalism among counsellors requires identification of professional norms with peers, PERKAMA had taken the initiative to formulate a code of ethics in 2008 before it was accepted and revised as the Code of Ethics by the Malaysian Board of Counsellors in 2011 (Mat Rani et al., 2017; Mohd. Ishak et al., 2012). Other roles played by PERKAMA include providing services related to social issues, implementing professional development programs to enhance the level of counsellors' competencies, expanding the scope of community service in the society, creating community counselling to meet current social needs, mobilizing all counselling practitioners to actively engage in community development professionally and becoming a prominent advocate for the Malaysian Board of Counsellors to ensure that every counselling practitioner is qualified and registered (Mohammad Hanafi & Jusoh, 2015).

The association is active in organizing conferences, seminars, and workshops to help increase Malaysian counsellors' professionalism and competencies (Mohamad Hanafi & Jusoh, 2015; Mohd Ishak et al., 2012). In other words, PERKAMA supports the life-long learning initiative as implemented by the Malaysian Board of Counsellors (Mohd. Ishak et al., 2012). The Malaysian Board of Counsellors promotes life-long learning by introducing Continuing Professional Development (CPD) points to ensure that counsellors are up-to-date with the latest development in counselling.

The association also encourages its members to be involved in research and publications. In 1984, the association published the first issue of its official journal, which covered both the theoretical and practical aspects of counselling (Glamcevski, 2008). Besides that, books, articles, and magazines such as Suara PERKAMA International and other publications have also been distributed to advance the field of counselling in Malaysia (Othman &Abdullah, 2015; Zambri, 2012). PERKAMA has also sought the accreditation of counselling services as a guideline in providing monitoring procedures on practitioners on any premise that carries out counselling services (Mohamad Hanafi & Jusoh, 2015).

Members of PERKAMA are also active in the community and consultative work in order to strengthen the counselling services and professionalism in the community (Zambri, 2012). PERKAMA members were involved in providing crisis intervention and counselling services during the MH370 and MH17 airplane tragedies and various natural disasters throughout the country and abroad (Mat Rani et al., 2017).

Previously, counsellors had only one local counselling association to enhance their professionalism through participation in activities, which is PERKAMA (Mohd. Ishak et al., 2012). However, given the rapid development and social changes in the country, new counselling associations have emerged. Among these associations include the Association of Education Counsellors Malaysia (PEKA), the Association of Syar'ie Counselling Malaysia, the Malaysian Registered Professional Counsellor Association (PAKARMALAYSIA), and the National Association of Christian Counsellors (NACC Malaysia).

Even though this growth can be seen as a positive effort among counsellors, Abu Bakar (2016) was of the view that there is a need for stakeholders such as the Malaysian Ministry of Women, Family, and Community Development, the Malaysian Board of Counsellors, and the Malaysian Public Service Department (Counselling and Psychology Division) to coordinate the associations related to counselling profession as well as the counselling activities to ensure that the services provided are well-regulated and beneficial to the society. In contrast, the authors view that having divisions organized around specific interest and practice areas such as those developed by the American Counseling Association (ACA) would better enhance counsellors' professional identity.

Pathways to Becoming a Counsellor in Malaysia

The most straightforward way to become a practicing counsellor in Malaysia is to pursue a bachelor's degree in counselling in an accredited institution, which takes four years to complete. With the qualification, a person is eligible to apply to be a registered counsellor once he or she passes the interview conducted by the Malaysian Board of Counsellors. Once registered, the person is also eligible to apply for the Certificate of Practice, which allows him or her to practice as a counsellor. A person can also be a registered counsellor by pursuing a Master's degree in any accredited institution. The primary academic qualification to pursue a Master's degree is a Bachelor's degree in any field. Some public universities have strict entrance requirements to a Master's degree level. For instance, the University of Malaya requires applicants to have at minimum a 3.0 CGPA at the Bachelor's level in any human-

related field and documented experience in the helping field. The Universiti Kebangsaan Malaysia requires applicants to have a strong background in psychology. If accepted, the person may be required to take and pass several pre-requisite psychology courses. Public universities usually have stricter requirements due to the limited places offered and the lack of training staffing.

Work Setting

Registered counsellors in Malaysia are employed in different and various fields. They are mostly available in public sectors such as schools, hospitals, rehabilitation centres, and higher education institutions. Counsellors are also available in limited private sectors, mainly because private sectors are unwilling to invest in mental health care. Some government-listed companies appoint consultants to be their counsellors who are called if the service is needed.

Other than the public and private sectors, some counsellors choose to work with non-government organizations that provide support services for free. Some religious institutions like mosques and churches also offer counselling services. However, the counselling services at these settings are usually not regulated because the job is performed voluntarily. In addition, some professional helpers are not trained counsellors, yet they claim that they are counsellors.

Supervision of Counselling in Malaysia

Supervision of Practicum

There are two stages of supervision of counselling in Malaysia. First, supervision during the practicum hours, and second, supervision of internship experience. Students taking practicum courses are advanced Bachelor's and Master's degree, students. According to the Standard and Qualification of Counsellor Training (Malaysian Board of Counsellors, 2016), only students who have completed core courses, including the Life Span, Counselling Theories of Career Development, and Group Counselling courses, are allowed to register for the practicum course. As discussed in the earlier section, the counselling profession in Malaysia is regulated by the Malaysian Board of Counsellor. The Board's responsibility is not limited to monitoring the registration of counsellors. Together with the Malaysian Qualification Agency, the Board is also responsible for monitoring the local institutions in Malaysia, which offer counseling programs. This is to ensure that the curriculum is in line with the Board's standards. During their practicum training, student counsellors are required to complete supervised practicum hours. A qualified practicum supervisor must obtain at least a Master's degree from an accredited institution, either locally or abroad, and he or she must also be registered with the Board. The supervisor can be assisted by a Registered Counsellor with a minimum qualification of a Bachelor's degree in counselling, with a valid Certificate of Practice issued by the Malaysian Board of Counsellors.

In terms of the practicum sites, the Malaysian Board of Counsellor requires the site to have the necessary facilities for clinical training. In addition, the practicum supervision is held on campus. Therefore, institutions that offer counselling programs must have counselling training facilities. The facilities provide conducive environments for individual and group counselling, audio-video equipment for supervision purposes, and support staff responsible for taking care and handling the equipment.

A supervised practicum consists of 3-credit hours, which is held for 14 weeks or a semester. During this period, the students are expected to complete 252 hours, of which 96 hours should be spent in direct contact with clients. Students accumulate their direct contacts with clients through counselling sessions. These sessions can be in the form of individual, group, couple, marriage, or family counselling.

Practicum Supervision Procedure

The Malaysian Board of Counsellors provides four aspects that a counselling program needs to follow. The four procedures are:

(1) Practicum Supervision Requirements - In order to fulfil the 252-hours of practicum, the Malaysian Board of Counsellor, in its Standard and Qualification of Counsellor Training, set six rules and requirements for the students. The six rules are: (1) Official registration in practicum course, (2) Practicum students need to conduct sessions from the beginning towards the termination, (3) Each student needs to be supervised at least three times by the practicum supervisor, (4) The practicum site must meet the Malaysian Board of Counsellor's requirement as discussed in the previous section; (5) Practicum students need to conduct a minimum of 3-sessions with each client; (6) The handling of the administration and supervision of the practicum must conform to the requirement set by the Standard and Qualification of Counsellor Training.

(2) Evaluation criteria - The practicum supervisors need to evaluate specific criteria set by the Malaysian Board of counsellors. The criteria to be supervised include: (a) A application of theory, (b) Application of counselling techniques' skills, (c) Case conceptualization, (d) Intervention plan, and (e) Compliance to ethical codes.

(3) Record keeping - All hours collected during the practicum training need to be documented. The purpose of documentation is to protect both counsellors and clients. Counsellors are responsible for keeping and managing the record and documentation of daily activities in the logbooks, treatment intervention plans, counselling session reports, standardized tests, and any other documents that are deemed necessary for counselling.

(4) Counselling-Related Activities - Lastly, the practicum supervisors are also responsible for supervising cases requiring referral, consultation, guidance activities, testing and measurement in counselling, professional growth activities, and educational psychology.

Although the Board has set standards that institutions and students need to follow, there is no specific explanation on how the 252-hours can be met. The guidelines provided in the Standard and Qualification of Counsellor Training (Malaysian Board of Counsellor, 2016) only provide general recommendations. Institutions that offer counselling programs often set their own rubric in addition to the general guidelines to ensure that their practicum students meet the requirement. For example, Universiti Malaya, which is the pioneer in counselling programs in the country, has a very rigorous procedure to meet the Board's requirements. Students are to conduct 24-hours of individual counselling, 30-hours of group counselling, and 42-hours of supervision. These three activities contribute to 96 hours of direct contact. The remaining hours are fulfilled through 36-hours of peer supervision, 20-hours of program management, 48-hours of the preparation of clients' reports, 36-hours of

administrative work, and 16-hours of counselling promotional activities (Practicum Rubric for Faculty of Education students, 2018). Judging from the hours, it can be summarized that the total supervision hours received by the practicum students are 78 hours.

In conclusion, the supervision practice during the practicum training is a tedious and challenging job. Although the course consists of only 3-credit hours, the practicum students need to accrue 252 hours in total within one particular semester. At the same time, the students undergoing practicum usually have not finished some courses. This means that they are usually registered in other courses while in practicum. The main aim of the practicum is to prepare students for internship experiences. Therefore, this period is also known as a pre-internship experience.

Supervision of internship experience

While doing practicum training on campus, students are strongly recommended to find a suitable internship site. Students are required to find internship sites by themselves. They may choose to do their internship in educational, mental health, rehabilitation, or any other settings approved by the academic supervisor. In order to maintain the supervision standards, the students are assigned, two supervisors. Firstly, the academic supervisor, and secondly, the site supervisor. Both supervisors must be registered counsellors and are registered with the Malaysian Board of Counsellors.

Students need to complete a minimum of 504-hours of internship that consists of six credits. Of 504 hours, 192 hours must consist of direct contact with clients either in individual, group, couple, or family settings. The remaining 312 hours need to be dedicated to other counselling related-activities such as administrative work, mental health promotions, and outreach Programming.

In order to ensure that interns are academically and mentally prepared for internship training, the Malaysian Board of Counsellors (2016) requires that they finish all the courses listed in the curriculum that they enrol in. This will equip the interns with all the knowledge necessary in understanding the clients, from introductory psychology courses to counselling practice. In addition, during the internship, they conduct a minimum of three counselling sessions and receive a minimum of 5-times of supervision.

Internship Supervision Guidelines

The Malaysian Board of Counsellors provides general guidelines in internship supervision. They can be divided into internship supervision requirements, internship evaluation criteria, record keeping, and counselling related-activities.

1. *Supervision Requirement.* In their guidelines, it is noted that supervision can be face to face, either in an individual or group supervision. The ratio between the supervisors and students in individual supervision is one supervisor to a maximum of five interns. Besides face-to-face supervision, the Board also recommends group supervision. An academic supervisor can supervise a maximum of ten interns in a group. Each intern must receive individual supervision or in groups at least five times during their internship training period. Since the interns are supervised by two supervisors, academic and site supervisors, both must rate, evaluate and assess the interns' work. The academic supervisor contributes a maximum of 80% marks, while the site

supervisor contributes the remaining 20%. Both supervisors supervise and evaluate their interns' competencies regarding their direct contact with clients, record keeping, and organization of counselling-related activities.

2. *Evaluation criteria.* The Malaysian Board of Counsellors lists six areas to be evaluated during the internship. Those areas are (1) Application of theory, (2) Using skills and techniques in counselling, (3) Case conceptualization, (4) Treatment intervention and planning, (5) Compliance to ethical standards, and (6) Reflection. Area 6 is the only area that is not included for practicum students.

3. *Record Keeping.* Interns are responsible for preparing documentation for each activity, direct contact, and the program they organize as proof of accumulated hours. Record keeping tasks include the preparation and maintenance of a logbook, intervention planning, counselling report, the use of test and measurement, and any related documents.

4. *Counselling-related Activities.* Supervisors play an active role in helping interns to do necessary referrals, consultations, organize guidance programs and the professional growth of the counsellors, and test and measure while increasing their exposure to psychology.

In summary, the internship experience allows the students to have life experience as professional helpers in a natural setting. The period is crucial because it allows them to polish their knowledge and skills before graduation. However, the Malaysian Board of Counsellors only provides general guidelines on the number of required supervisions each intern must receive. The rubric and specific guidelines of supervision are not mentioned in their standard. Thus, it is up to the individual supervisor to interpret the standard. There is no uniform standard that all accredited institutions can follow and refer to. This leads to a question of whether the interns receive enough supervision or otherwise. Another question is the qualification of the supervisor. The standards of counselling training only mention the minimum academic qualification of supervisors, which is a Master's degree in counselling from an accredited institution. This implies that any supervisor who graduated with a Master's degree or a Ph.D. without prior counselling experience is qualified to supervise the students as long as they are academicians. The supervisors' experience in counselling sessions is not noted in the Standard and Qualification of Counsellors' Training.

Current Trends and Future Needs

Since the enactment of the Act of Counsellor in 1998 (Act 580; Commissioner of Law Revision and Percetakan Nasional Malaysia, 2006), counselling in Malaysia has exceedingly developed and is gradually accepted as a professional field. Before the enactment, counselling is like any other helping field that is not regulated. The rapid development of counselling is evidenced by the increasing number of higher education institutions offering counselling programs and the increasing number of registered counsellors. With the increasing number of institutions that offer counselling programs and the number of registered counsellors, there is a need to look at future trends. Based on the recent report issued by the Malaysian Board of Counsellors (2018), the urban areas, particularly in the state of Selangor and the main capital city of Kuala Lumpur, recorded the highest number of registered counsellors. At the end of 2017, there were 7765 registered counsellors in Malaysia. The report also shows that 68% of the counsellors are female, and 69% are Malays.

Malaysia is a multi-racial society. Even though multicultural counselling is a compulsory course in all counselling programs offered by accredited higher education institutions, the fact remains that counselling clients from diverse backgrounds are challenging. Most Malay counsellors work in government sectors, in which the majority of the population they serve is Malay. Examples of these sectors are schools, public hospitals, government departments, rehabilitation and detention centres, and prisons. The service is provided free to people who are part of the sectors and members of the public. More counsellors from other ethnicities are needed to improve the counselling service, especially in the government sector. Higher education institutions may play a role in recruiting more students from minority groups. More outreach programs are also needed to introduce the field to the public. One of the reasons behind a large number of registered counsellors in urban areas is the awareness of the importance of mental health among the urban population, who are mostly educated. The government agencies such as the health clinic need to take the initiative to introduce the service. Currently, the government sectors that offer the service are usually located in big cities.

Another issue that needs attention is the need to introduce areas of specialization in counselling. Of all the counselling programs offered by Malaysian higher education institutions, only one offers program specialization. The Malaysian Board of Counsellors (2016c) has prepared the Standard and Qualification of Counsellor Training (with specialization). The Board suggests six specialization areas. Unfortunately, most universities choose not to offer any specialization areas due to the lack of human resources. The biggest challenge is the lack of uniform standards and qualifications for counsellor education.

The Board only requires counsellor educators to be registered with the Board and have a Master's degree from accredited institutions. Most of these educators graduated from Malaysian public universities that do not have any concentration areas. Counsellor educators in Malaysia also completed their doctoral degrees from different institutions. Some graduated from foreign universities and come from local public universities. A majority of them graduated from institutions in Commonwealth countries, which focus on research. Commonwealth countries such as the United Kingdom, Australia, and New Zealand. A small number of educators in this field graduated from American universities that offer more concentration in counselling.

The limited number of counsellor educators who receive training in certain specialization areas becomes a challenge to institutions that intend to offer specialization areas. Due to this fact, there is a need for the Malaysian Board of Counsellors to review their standards and qualifications of counsellor educators because counselling is a field that requires practical training under proper supervision. A counsellor cannot claim that he or she is a specialist in a particular area just by doing empirical research in one particular area. Counsellor educators in Malaysia focus their work on research and teaching. Thus, they need proper practical training in specialized areas if they want to teach and train counsellors who intend to be specialists.

Regarding the areas of specialization, the Malaysian Board of Counsellors may also introduce the Continuing Education (CE) program. Specialists in particular areas can handle the CE program, and they may consist of Malaysians or foreign experts. In addition, qualifications obtained from CE can be added to existing credentials to indicate the counsellors' and counsellor educators' qualifications.

Supervision after graduation is another critical issue in the field of counselling. Malaysian Board of Counsellors under the Counsellor Act 1998 only requires individuals to register with the Board. Once individuals finish their degrees, they are eligible to apply. Once registered, they can offer and perform counselling services without supervision. The Counsellor Act 1998 does not mention post-graduation supervision. This may lead to situations where inexperienced counsellors conduct counselling. Without proper supervision, there may be inexperienced counsellors who harm clients. Counsellor educators without experience in counselling may also have issues in teaching practical courses. Since there is no post-graduation supervision of counselling, some counsellor educators may never practice in a natural setting, yet they train future counsellors. Due to this limitation, it is strongly recommended that the Malaysian Board of Counsellors review the standard and qualifications of counsellor educators to improve the counsellor's education training.

Conclusion

Counselling in Malaysia has gone through many developmental stages. During the infancy stage, counselling was only available in selected educational institutions such as schools and a small number of higher education institutions. The service was performed by anybody who may have personal characteristics that make them suitable for helping others. With no act and standard to regulate the profession, anybody may call themselves counsellors and claim that they were doing counselling jobs. With the enactment of the counsellor Act in 1998 and the establishment of the Board of Counsellors, counselling has gradually been accepted and became well-known. Awareness to seek counselling services from professionals who are registered also increased. Today, counselling is the only helping field in Malaysia with an Act and Board that regulates the service and the practitioners offering the service. The Act and the Board also regulate the training of counsellors. Other fields like psychology and social work are still not regulated by any act.

Despite this positive development, there are many limitations that the authors have discussed and highlighted in this chapter. Continuous improvements are needed to ensure that the counselling profession remains a respected helping profession in the country.

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Counseling Regulation, Education, and Representation in the United States of America

Janeé Steele[1] and Tiffany Lee[2]

In the United States, counseling is defined as "a professional relationship that empowers diverse individuals, families, and groups to accomplish mental health, wellness, education, and career goals" (Kaplan et al., 2014, p. 368). The populations and settings in which this relationship occurs vary, yet, in this country, counseling at its core is a profession built on ethical and culturally relevant practices designed to promote wellness and optimal human development. As such, all licensed professional counselors in the United States must meet certain qualifications and are subjected to various levels of oversight. The sections in this chapter provide an overview of counseling regulation, education, and representation in the United States. Included in this overview is a discussion of pathways to becoming a counselor in the United States, as well as supervision requirements during and post graduate-level training. The chapter concludes with final remarks concerning the outlook of the profession, focusing on current advocacy efforts to strengthen, unify, and build consensus within counseling.

Keywords: *America, United States, Counseling, Regulation, Education, Representation, Supervision.*

Counseling Regulation in the United States

Counseling in the United States is regulated through independent state licensure laws. The first counselor licensure laws were passed in the state of Virginia in 1976, while the last counselor licensure laws were adopted 33 years later by the state of California in 2009 (Lawson, 2016). These laws establish the profession's minimum education and training standards, and define the activities counselors are permitted to engage once licensed (American Counseling Association, 2014). The typical scope of practice for a licensed counselor includes: (a) assessment, testing, and evaluation; (b) individual, family, and group counseling; (c) diagnosis and treatment planning for mental disorders; and (d) prevention, behavior modification, and guidance to individuals, families, and organizations (Michigan Counseling Association Licensure Committee, 2010). Within this scope of practice, counselors are expected to adhere to a specified code of ethics, and are subject to oversight by a state board responsible for issuing licenses, enforcing regulations, and handling ethics complaints.

Because each state regulates counselor licensure independently, credential titles vary. The most common titles include licensed professional counselor (LPC), licensed mental health counselor (LMHC), licensed clinical professional counselor (LCPC), licensed professional clinical counselor of mental health (LPCC), licensed clinical mental health counselor (LCMHC), and licensed mental health practitioner (LMHP) (American Counseling Association [ACA], n.d.). The majority of states, 30 as of December 2020, have a two-tiered licensure system that require applicants to meet certain education, examination, and supervised experience qualifications before full licensure is granted. Sixteen states have one tier, two states have three tiers, and two states have four tiers of licensure (ACA, n.d.). Once licensed, these counselors are permitted to practice independently, but may be required to complete periodic continuing education as part of the license renewal process subsequent to obtaining full licensure (ACA, n.d.).

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Counseling Education in the United States

For those individuals who wish to pursue a career in counseling, a minimum of a master's degree is required. After receiving a 4-year bachelor's degree (most often in the behavioral health field), individuals may continue their education for typically 2 to 3 more years in order to obtain a master's degree in one of the following specialty areas: (a) addiction; (b) career; (c) clinical mental health; (d) clinical rehabilitation; (e) college counseling and student affairs; (f) marriage, couple, and family; or (g) school. The main accreditation is the Council for Accreditation of Counseling and Related Educational Programs (CACREP), which was formed in 1981. The organization is independent of the American Counseling Association (ACA) but influenced by the ACA through collaborations which maintain and update the standards used to obtain accreditation. Other accrediting bodies do exist (e.g., Masters in Psychology and Counseling Accreditation Council and National Addiction Studies Accreditation Commission). However, CACREP is the primary entity that students seek due to the alignment with their professional identity and the expectation that graduating from a CACREP program will assist with state licensure requirements, as well as some national certifications. Currently, licensure in six states requires the applicant to have graduated from a CACREP accredited program. A change for the counseling field worth noting here is that some accredited training programs provide coursework online through distance learning (e.g., Capella University and Walden University). Institutions have the opportunity to obtain accreditation for fully online programs, as well as a hybrid of face-to-face meetings and online content. If students choose to enroll in a hybrid distance learning program, they may be required to travel and attend classes which can meet all day for several days in a row.

Most master's-level counseling programs are 48 to 60 credit hours (3 or 4 credits per course). Education and training can vary slightly between specializations (e.g., school counseling and clinical mental health counseling); however, content for core courses tends to be guided by the CACREP core standards, and therefore, most institutions have a similar curriculum. For instance, all students will be expected to complete coursework in group dynamics, counseling techniques, multicultural counseling, professional ethics, research methods, etc. Counselors-in-training will also complete a practicum and field internship at the end of their education experience. Some programs have the option of a thesis or capstone project as well and can be more research-focused in nature. Usually, the completion of such work would designate the difference in a master's of arts (MA) or a master's of science (MS) degree.

A doctor of philosophy (PhD) degree does not assist with advancing licensure, as full licensure is most often obtained within a few years post-master's degree. Individuals who desire advanced–level preparation in counseling and supervision complete the PhD in counselor education with the intention of teaching classes, engaging in research, and becoming a leader in the profession as a faculty member in higher education. On average, these programs require between 60 to 70 credit hours (3 or 4 credits per course) after the master's degree is completed. Students usually finish and defend their dissertation research between 3 to 5 years from initiating doctoral-level coursework.

Counseling Representation in the United States

Founded in 1952, the ACA is a not-for-profit, professional and educational organization, and is the largest association exclusively representing professional counselors in various practice settings. There are 56 chartered branches in Europe, Latin America, and the United States. The ACA has four regions, which serve members in those sections of the United States. ACA members also have the opportunity to belong to one or more of the 19 divisions that exist (e.g., Association for Multicultural Counseling and Development, International Association of Addictions and Offender Counselors, Association for Child and Adolescent Counseling). These divisions provide leadership, resources, and information unique to specialized areas and/or principles of counseling. In addition to the ACA, there are other national organizations, albeit smaller in membership numbers but are more specialized by profession, such as the American School Counselor Association and the American Association for Marriage and Family Therapists.

Pathways to Becoming a Counselor in the United States

Pathways to becoming a counselor in the United States are varied due to the profession's historical development. Counseling in America emerged early in the 20th century, primarily as part of the educational and vocational guidance movements of the era. During this time, counseling in educational settings, first instituted by Jesse B. Davis in 1907, typically consisted of weekly guidance lessons for character building and prevention, while vocational guidance, established through the work of Frank Parsons in 1908 at Boston's Vocational Bureau, focused on preparing young adults to enter the workforce (Atkinson, 2002). These forms of counseling, vocational guidance in particular, continued to grow in the country as World War I and the Great Depression created a need to match returning servicepersons and unemployed workers with jobs. The focus on vocation in counseling continued until the 1940s, when increased psychological services for returning World War II veterans became available through the government's Veterans Administration, and counseling within the general population was extended beyond career into other areas of human development through the work of Carl Rogers (Atkinson, 2002). This extension of counseling to include a focus on general psychological and developmental concerns culminated in 1963 with the passage of the Community Mental Health Act (CMHA), which sought to relocate mental health treatment out of the hospital by establishing community-based mental health centers throughout the United States (Lawson, 2016).

Until passage of the CMHA in 1963, counselors and psychologists regularly practiced in the same settings. Individuals with counseling or education degrees were even licensed as psychologists, as psychology was the only mental health profession licensed for independent practice at the time (Lawson, 2016). After passage of the CMHA, however, counselors began to be excluded from the profession through civil and criminal litigation, as well as changes that required individuals to hold psychology degrees in order to sit for the psychology exam. As a result, many counselors lost not only their jobs, but their careers as well. In response, counseling's primary professional organization, the American Personnel and Guidance Association

(now known as the American Counseling Association), sought to have counseling recognized as a profession within its own right by lobbying for counselor licensure laws in every state. This effort was successful, but spanned three decades from 1975 until 2009 when California became the last of the 50 states to adopt counselor licensure laws (Lawson, 2016).

While counseling is now legally recognized as separate and distinct from other mental health professions, its shared history with related fields continues to be reflected in the various pathways to becoming a counselor in the United States. Many states, for example, allow graduates of programs in fields related to counseling to obtain counselor licensure, provided the graduates have completed coursework in specific content areas (ACA, n.d.). Moreover, individuals licensed as counselors, psychologists, or even clinical social workers are often hired for the same positions in schools and community agencies, and are reimbursed for the same services by insurance companies when in private practice. This overlap among the professions is likely to continue given projections of future employment trends. According to the United States Department of Labor, the projected employment rate of mental health counselors (for years 2019 to 2029) is higher than many other occupations, including similar disciplines. More specifically, the rate is expected to grow 25% during that time, compared to social workers (13%) and psychologists (3%) (Bureau of Labor Statistics, 2020).

Supervision of Counseling in the United States

Supervision of counseling in the United States is required for individuals at both student and professional stages of their careers. Students enrolled in CACREP-accredited counselor education programs must complete two levels of field experience. The first level is a supervised 100-hour counseling practicum that takes place over a minimum of 10 weeks. The second level is a supervised 600-hour internship in the student's area of specialization, which is generally completed over one or two academic terms. According to the 2016 CACREP Standards, students at both levels of field experience must receive at least 1 hour per week of individual or triadic supervision by either a counselor education program faculty member, a doctoral-student supervisor who is under the supervision of a counselor education program faculty member, or a site supervisor who collaborates with a counselor education program faculty member in accordance with a supervision agreement. Site supervisors must have: (1) a minimum of a master's degree, preferably in counseling, or a related profession; (2) relevant certifications and/or licenses; (3) a minimum of 2 years of professional experience in the specialty area in which the student is enrolled; (4) knowledge of the program's expectations, requirements, and evaluation procedures for students; and (5) relevant training in counselor supervision (CACREP, 2016, p. 16). In addition to individual supervision, practicum and internship students must also participate in an average of 1.5 hours per week of group supervision throughout the practicum or internship experience. A counselor education program faculty member or a student supervisor who is under the supervision of a counselor education program faculty member must provide this form of supervision.

In order to obtain full licensure in the United States, counselors must complete a certain number of supervised post-master's degree clinical hours, as well as pass a comprehensive examination on counseling practice (American Counseling Association, 2014). Thirty-six states and the District of Columbia require between 3,000 and 3,600 hours of supervised post-master's degree experience for the highest level of licensure. These hours typically must be completed in no less than 2 years. States with more than two tiers of licensure generally require successively higher numbers of hours to obtain each level of licensure. Most states require supervision to take place face-to-face. Additionally, many states require supervisors to have specialized training in clinical supervision. This training may be obtained as part of doctoral-level counselor education, or through independent training providers. The content of clinical supervision training is focused in areas such as (a) roles and functions of clinical supervisors, (b) models of clinical supervision, (c) mental health–related professional development, (d) methods and techniques in clinical supervision, (e) supervisory relationship issues, (f) cultural issues in clinical supervision, (g) group supervision, (h) legal and ethical issues in clinical supervision, and (i) evaluation of supervisee competence and the supervision process (Center for Credentialing & Education, n.d.). Individuals who complete training in clinical supervision through an independent credentialing agency may earn certifications such as the approved clinical supervisor (ACS) credential, which is granted by an independent not-for-profit credentialing agency known as the Center for Credentialing and Education. To receive the ACS credential, counselors must: (a) have an earned master's degree or higher in a mental health field, (b) be licensed or certified as a mental health provider, (c) complete specialized training in supervision, (d) provide proof documenting at least 100 hours of supervision, (e) have at least 5 years and 4,000 hours of mental health counseling experience, and (f) develop a professional disclosure detailing supervision training and experience to be provided to all supervisees.

Concluding Remarks About Counseling in the United States

This chapter provided an overview of counseling regulation, education, and representation in the United States. As discussed, since its beginnings in the early 20th century, counseling in this country has undergone a transition from a field focused primarily on educational and vocational guidance, to a profession of independently licensed mental health practitioners with specialized knowledge of psychological and human development principles (Atkinson, 2002). While counseling licensure laws have recently been obtained in all 50 states, the field's primary professional organizations continue to engage advocacy efforts aimed at strengthening, unifying, and building consensus within the profession. One of the most visible efforts has been the 20/20: A Vision for the Future of Counseling initiative, which is led by the American Counseling Association and 30 other participating organizations. This initiative focuses on advancing the profession by addressing several key issues in counseling, including outlining specific principles for strengthening and unifying the profession (Kaplan & Gladding, 2011); building a consensus definition of counseling (Kaplan et al., 2014); and developing a consensus licensure title and scope of practice as part of a larger scale counselor license portability project (Kaplan & Kraus, 2018). While several gains have been made, leaders within the field note much more work is needed in order to achieve even greater unification across the profession,

especially as it relates increased consistency and reciprocity in licensure laws from state to state. Accordingly, counseling in the United States continues to be in a state of growth and development. Nevertheless, given successes toward a more crystallized identity within the profession, as well as continued need for licensed counselors throughout the country, the outlook for counseling in the United States looks bright well into the 21st century.

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The Counseling Profession in the Philippines

Ma. Teresa G. Tuason[1], Margaret Helen Alvarez[2], and Bridget Stanton[1]

In the following few pages, the counseling profession in the Philippines is reviewed. Regulation of counseling in the Philippines advanced drastically due to the Guidance and Counseling Act of 2004, RA 9258 (Republic Act No. 9258). Counseling education and employment opportunities in counseling in the Philippines are also presented. Similarly, counseling representation and the ways in which people can become counselors in the Philippines are outlined.

Keywords: *Philippines, Counseling, Regulation, Education, Representation, Supervision.*

Counseling Regulation in the Philippines

Counseling in the Philippines has drastically advanced due to the Guidance and Counseling Act of 2004, RA 9258 (Republic Act No. 9258), which in a short matter of time, professionalized the practice of guidance and counseling. Because of RA 9258, the Professional Regulatory Board of Guidance and Counseling (PRB) was created, and in collaboration with the Accredited Professional Organization (APO), which is the Philippine Guidance Counseling Association, Inc. (PGCA) had the mandate to formulate the rules and regulations (referred to as the Implementing Rules and Regulations or the IRR for the Guidance and Counseling Act of 2004) that govern the profession of counseling. The IRR were written, formulated, adopted, and took effect in September 2007 (House Resolution No. 2057). Prior to this time, there were no legal or statutory means by which the practice of counseling was regulated. What may have existed was a voluntary regulation of the profession, where only people who were trained in guidance and counseling, counseling education, and counseling psychology identified as counselors and practiced the profession. Before the Guidance and Counseling Act of 2004, no movement precluded anyone who claimed to have had any training in counseling whatsoever to identify and practice as a counselor, nor was there any regulation, laws, or rules to ensure adequate training and ethical practice. In essence before 2004, the guidance counselor had no professional identity (Santamaria & Watts, 2003).

Judging by the nationwide regulation and the Republic Act on the profession, counseling practice was regulated much earlier than the practice of psychology, such that the Guidance and Counseling Act became a law in 2004 (Republic Act No. 9258), while the Philippine Psychology Act (Republic Act No. 10029), regulating the practice of Psychology and creating a Professional Regulatory Board of Psychology, was approved in March 2010. The Guidance and Counseling Act of 2004 defined a Guidance Counselor as a Filipino (natural born or naturalized), one who has been registered and issued a valid Certificate of Registration and a valid Professional Identification Card, and who performs the functions of guidance and counseling. It is a monumental action that because of the Guidance and Counseling Act, no person can practice guidance and counseling and call himself or herself a counselor without a valid Certificate of Registration and a valid Professional Identification Card.

Counseling, interchangeably referred to as Guidance and Counseling, is defined as "the profession that involves the use of an integrated approach to the development of a well-functioning individual primarily by helping him/her to utilize his/her potentials to the fullest and plan his/her present and future in accordance with his/her abilities, interests, and needs" (Republic Act No. 9258). The functions of a guidance counselor identified in Republic Act 9258 are: counseling, psychological testing (personality, career, interest, mental ability, aptitude, achievement, learning and study orientation), research, placement and group processes, and teaching guidance and counseling courses, specifically those covered in the licensure examinations, and other services related to human development.

Article III of the Guidance and Counseling Act mandates that individuals register for the practice of guidance and counseling primarily through licensure examination. Individuals are eligible to take the licensing exam with these three criteria: a) citizen of the Philippines or a foreigner whose country enjoys reciprocity, b) has no convictions of any offense, c) a Bachelor's degree and a Master's degree in guidance and counseling from an institution recognized or accredited by the Commission on

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Higher Education. Passing the licensure exam means to have a weighted general average of 75% and to have no grade lower than 60% in any of the five subjects: Philosophical, Psychological, and Sociological Foundations of Guidance; Counseling Theories, Tools, and Techniques; Psychological Testing; Organization and Administration of Guidance Services; and Group Process and Program Development. Out of the individuals who took the exam, the licensure examination pass rates have ranged from a low of 41.12% in 2013 to a high of 72.2% in 2009, and an average rate of 59% in the years since 2008 to 2017 (Republic of the Philippines Regulation Commission). According to Valdez (2018), the Philippines has a shortage of registered guidance counselors, that from 2008 to 2017, there are only 3,220 in the entire nation with about half of those (1,528) passing the licensing exam, while the other half (1,692) were grandfathered by March 2009. Individuals could also register for the practice without examination (i.e., be grandfathered) within a 2-year window, by submitting credentials before the Act took effect which included: a) for those who have doctoral and masters degrees, evidence of at least three years teaching and/or counseling practice, b) for those who had passed 18 units of masters level courses in counseling, evidence of at least seven years of counseling practice, and c) for those who had completed academic requirements for a masters degree, evidence of five years of guidance and counseling experience.

Counseling Education in the Philippines

Counseling education in the Philippines can occur at the undergraduate, masters and doctoral levels. Individual programs determine their curriculum and most include applications of counseling theories and models to Philippine society and current issues through research theses and dissertations (e.g., Garabiles, 2010; Nisperos, 1994). The requirement for registering to practice guidance and counseling is a Bachelor's degree in Guidance and Counseling or other related discipline, and a Master's degree in Guidance and Counseling. It is most usually the norm that students who pursue the study of counseling at the graduate level hold a Bachelors degree in Psychology. Some Guidance and Counseling undergraduate programs do exist, but they are not many (e.g., AB in Guidance and Counseling, BSEd in Guidance and Counseling). The Bachelor's degree takes 4 years to complete and the AB/BS Psychology degree includes internship and practicum requirements as mandated by the Commission on Higher Education (CHED). The practicum is in the form of an on-the-job training and have permission to train at government or non government organizations for a mandatory 200 hours.

The Masters degree in Guidance and Counseling that is ultimately required in registering to practice as a counselor, abound in the Philippines. Across all regions of the Philippines, there are a total of 162 Master degree programs varying between Guidance and Counseling, Counseling Education, and Counseling (Commission on Higher Education, 2018). (The Masters degree that does not lead to registration as a counselor, but instead as a psychologist, is the Masters degree in Counseling Psychology. Masters programs in Psychology, which also last two years, is the minimum requirement to take the licensing exam and register as a psychologist, along with having 200 hours of supervised clinical experience or practicum/internship work [Republic Act No. 10029]). As a consensus, Masters in Guidance and Counseling programs in the Philippines take roughly two years to complete averaging 42 credits. Most of the programs require

an undergraduate degree in Psychology B.S/B.A or related field to enter and require a thesis to complete and 200 hours of practicum/internship. Similar to programs in western countries, many job placements after licensure prefer hands-on experience, although a specific number of supervised counseling hours is not a requirement for registration and licensure. Programs, therefore, design the Practicum course as a way to gain some experience in the field prior to entry, to allow some training in counseling, with close supervision of professors (Santamaria & Watts, 2003).

Although the terminal degree to register as a counselor is a Master's degree, the Philippines also has a few (less than 10) doctoral programs (e.g., EdD in Guidance and Counseling; PhD in Guidance and Counseling; PhD in Psychology and Guidance, PhD in Counseling). These programs that focus on counseling, provide advanced studies in technique and innovative intervention practices that respond to trends and relevant issues in counseling, opportunities for research and empirical work in counseling, and advocacy projects to improve Philippine society as a whole. Most doctoral programs consist of 60+ credits and require a dissertation.

Universities in the Philippines are accredited by boards that are authorized by the Commission on Higher Education (CHED). To strengthen and increase the quality of higher education, numerous accrediting agencies for both private (Association of Christian Schools and Colleges Accrediting Agency, Inc. [ACSC-AAI], the Philippine Accrediting Association of Schools, Colleges and Universities [PAASCU], and the Philippine Association of Colleges and Universities Commission on Accreditation [PACUCOA]) and public (the Accrediting Agency of Chartered Colleges and Universities of the Philippines [AACCUP] and the Association of Local Colleges and Universities Commission on Accreditation [ALCUCOA]) institutions exist to certify the levels of accredited programs (Ching, 2012). Although a requirement of registration for the practice of counseling is a Masters degree in Guidance and Counseling from an institution recognized or accredited by CHED, there is no accreditation for the specific counseling program, unlike in the U.S. (e.g., CACREP). To date, there are no accrediting boards specifically upholding the standards of guidance and counseling programs because there are no standardized policies identified by CHED. As of January 2018, regulatory guidelines and standards for graduate programs are said to be in progress by a technical committee led by CHED with identifying curriculum standards for guidance and counseling programs (Valdez, 2018). This development is due to the observation that license examination pass rates have been low. Although according to the National Economic and Development Authority (NEDA) there are 162 institutions nationwide that offer guidance and counseling courses, there are no CHED-mandated policies, standards, and guidelines for guidance and counseling programs and this may have contributed to the low pass rates (Valdez, 2018).

Opportunities for Counseling Jobs in the Philippines

Article II of the Implementing Rules and Regulations for Guidance Counselors (Professional Regulatory Board of Guidance and Counseling, 2007) describes their scope of practice as a) designated or appointed guidance counselors or counseling psychologists in educational institutions, rehabilitation centers, non-governmental organizations, community-based

agencies, hospital and other workplace, b) faculty members who teach in the counselor education program or who conduct training for guidance counselors, and c) administrators involved in the supervision and management of guidance services or programs at the basic education, tertiary level and non-formal sectors as community, hospital, church, industry and private practice. While the PGCA lobbied for the recognition of licensed guidance counselors in the academe (Professional Regulatory Board of Guidance and Counseling, 2007), it appears that many of them may be working in other contexts, yet still adding to the shortage of guidance counselors. In addition, the PGCA also lobbied with both CHED and the Department of Education to have a guidance counselor in all schools. In particular, in 2006, CHED issued a memorandum CMO No. 21 (Commission of Higher Education, 2006) entitled "Guidelines on Student Affairs and Services Program", indicating the provision of such guidance services as counseling, appraisal, follow-up, and referral—all of which licensed guidance counselors are trained for. This resulted in a need for 10,000 Registered Counselors (RGC's), but such need was not fulfilled. Being that there are only 3,220 RGC's in the entire nation, and a great breadth of job opportunities and contexts that is under Article II of the IRR (Professional Regulatory Board of Guidance and Counseling, 2007) and lobbied by the PGCA, there is a disequilibrium, where RGC's are in low supply, but the demand for them is quite high. On the other hand, another kind of disequilibrium, is also experienced among Registered Psychometricians (RPm's). Coming on the heels of the Guidance and Counseling Act of 2004 has been the Psychology Act of 2009 for the licensing of psychometricians and psychologists. The accredited professional organization, the Psychological Association of the Philippines (PAP) is lobbying for the appointment of these licensed professionals in schools. More specifically, "Psychology Practitioners in Public Service", a Special Interest Group in PAP, was created to help lobby for plantilla positions for RPm's in government (including public schools) and to elevate the status of RPsy's (i.e., higher pay) in public service (Psychological Association of the Philippines). Currently, there are about 15,000 RPm's (with just a little over a thousand registered psychologists) since the enactment of RA 10029 (Psychological Association of the Philippines). Unlike the Implementing Rules and Regulations for Guidance Counselors (Professional Regulatory Board of Guidance and Counseling, 2007), that of Registered Psychologists (RPsy) were identified in terms of job placements and opportunities, but those for RPm's were not. Plans are underway with the PAP (Psychological Association of the Philippines) in lobbying to the Civil Service Commission and to CHED about job opportunities for psychometricians, specifically to work in the academe (Psychological Association of the Philippines). In essence, RPm's could potentially fill the need for RGC's in public schools if an item were granted them to work in public or private schools or in government, however, RPm's being Bachelor's-degree-in-Psychology holders, could not work without supervision from a RPsy (Republic Act No. 10029).

Another issue that is at play here is that although RGC's are licensed to work in the academe (for testing and guidance and counseling), there is a real limitation that RGC's cannot put up a private practice, nor work in other clinical applications like testifying in court, unless they work in collaboration with a RPsy. Because of all these issues and circumstances and unintentional consequences of regulation, many seek licensure in both fields, as Registered Counselors and Registered Psychologists, so that

they have the flexibility to work where there are opportunities and where their interests lie, such as working in more clinical settings or supervising RPm's in testing and assessment. In the current state, holding a bachelors degree in Psychology, and with 15,000 other RPm's, there are no job opportunities, unless a Master's degree is pursued in either the Counseling or the Psychology route, and sit for both licensing exams and be registered in both fields.

If, however, this state of affairs continues without changes in the IRR for both fields—i.e., the disproportionate low number of guidance counselors versus the high demand and a disproportionate high number of RPm's versus the lack of regulated job opportunities currently allowed, the state of counseling as a profession and its progress may be disrupted. Moving the profession forward may necessitate the respective rules and regulations (Republic Act No. 9258 & Republic Act No. 10029) adjust to the current state of affairs (e.g., workforce available, low passing rates of licensing examinees, regulated Masters degree in counseling holders vs. Bachelors in Psychology degree holders, plantilla positions in public schools).

Counseling Representation in the Philippines

There are two sets of counseling organizations in the Philippines: one that is primarily counseling focused (e.g., PGCA, PACERS, IPCAP) and another where counseling is associated with a spiritual/religious orientation (e.g., PACC, FPCA). The main counseling organization in the Philippines is the Philippine Guidance and Counseling Association (PGCA), which is the Accredited Professional Organization of the Professional Regulation Commission (PRC)—the government agency that regulates the status of professional licensure and status of various professions in the Philippines.

Philippine Guidance and Counseling Association (PGCA). The PGCA, formerly known as the Philippine Guidance and Personnel Association (PGPA), is not only the Accredited Professional Organization of the PRC, but it has been the first to be PRC-accredited as a provider for Continuing Professional Education (CPE) (Philippine Guidance and Counseling Association, Inc., 2017). The PGCA is also a member branch of the American Counseling Association (American Counseling Association). The PGCA held its first conference at the University of the Philippines in 1965, where it was conceived by 25 original members. Since this time, the PGCA holds conventions, has expanded its chapters across multiple regions, created international affiliation with the American Personnel and Guidance Association (APGA) and publishes Guidance Journal annually (Philippine Guidance and Counseling Association, Inc., 2017). The PGCA aims to be the "premier Philippine professional organization of counselors with international recognition" (Philippine Guidance and Counseling Association, Inc., 2017). Members of the PGCA are one of three categories: Regular (licensed or non-licensed who are grandfathered in), Associate (who have not yet graduated or have no license yet) and Junior (hold a Bachelor's degree). The PGCA works to develop counselors who are professional and goal driven, and who fiercely advocate for their clients' well-being. The organization actively strives to continually improve the field of counseling in its service to the profession and the Philippine society through research, meetings, and publications (Philippine Guidance and Counseling Association, Inc., 2017).

Philippine Association for Counselor Education,

Research, and Supervision (PACERS). The organization, PACERS, was established on March 6, 1976 as a way to promote the field of counselor education. Through their shared community, PACERS links counselors to researchers with the goal of exchanging expertise. With over 30 years of collaboration, and through supervision, professional training, and research, PACERS aims to take the lead in promoting counselor education (Philippine Association for Counselor Education, Research, and Supervision). Members of PACERS are one of three categories, attesting to its academic stance: Regular/Associate (hold a masters degree in Guidance and Counseling), Affiliate (in the process of completing a master's degree) and Life (sustained involvement as a member of the Board of Directors or a standing committee, nominated by the PACERS Board). PACERS is focused on the development of professionals who will contribute to the field of counseling, who promote discussion and high standards of ethical and professional competence, and work to inspire counselors to contribute to training the next generation of counselors (Philippine Association for Counselor Education, Research, and Supervision).

Integrated Professional Counselors Association of the Philippines (IPCAP). The IPCAP was founded in 2006, in response to the Guidance and Counseling Act of 2004, to uphold the regulations outlined here. The IPCAP focuses on the development and professionalism of counselors, to increase networking, provide educational and counseling resources, and to enhance society though the competent practice of counseling. IPCAP is also an accredited provider for Continuing Professional Development (CPD) for Guidance Counselors (Integrated Professional Counselors Association of the Philippines, Inc.).

The following organizations, PACC and FPCAP, demonstrate the inherent value of faith and spirituality in Filipinos' lives (Dy-Liacco, Piedmont, Murray-Swank, Rodgerson, & Sherman, 2009), especially tapping into resources that are instrumental in counseling practice in the Philippines. What has evolved, therefore, is counseling that is rooted in the Philippine context and is therefore unique to the Philippines (Tanalega, 2004).

Philippine Association of Christian Counselors (PACC). The PACC was formed in 2000 after several different religious institutions met to create a group of Christian counselors dedicated to helping people reach emotional, relational, psychological, and spiritual wholeness while maintaining the highest standards for ethical practice in counseling. The PACC promotes the core values of authenticity, compassion, and competence. Unlike other professional organizations, the PACC does not require its members to hold specific academic degrees. Instead, prospective members must be active in the helping profession or with a fervent desire to serve through counseling in the future, abide by the PACC's code of ethics, and uphold the mission and vision of the PACC. The PACC has been approved by the Philippine Regulatory Commission Board for Guidance & Counseling as an accredited provider of CPD (Philippine Association of Christian Counselors).

Family and Pastoral Counseling Association of the Philippines (FPCAP). The FPCAP was established in 2008 by 21 founding members, an organization of pastoral and family counselors whose service is meant to serve, protect, and strengthen families. With the impetus of RA 9258, the FPCAP's mission is to dedicate itself to the development and welfare of professional practitioners who integrate counseling and spirituality. By combining psychotherapy and spirituality,

counseling members of this organization learn to promote relationship between families, God, and society. Members of FCAP are one of two categories: Regular (hold a masters or doctoral degree in Counseling, Psychology, Family/Pastoral, or Theology and whose work centers around family/pastoral counseling) and Associate (students with at least 18 credits, practitioners, diploma certificate holders, or have been working in the field of family/pastoral counseling). FPCAP values high ethical standards of pastoral counseling, promotes integrity and service-orientation as well as continuous efforts to enrich lives through ministry (Family and Pastoral Counseling Association).

Pathways to Becoming a Counselor in the Philippines

The most common way to become a practicing counselor in the Philippines is to study a Bachelor of Arts or Science in Psychology, Sociology, Theology or other related field, and then a Master's degree in Guidance Counseling, Counseling, Counseling Education, Pastoral Counseling, and so on. To practice as a counselor, after one's Masters degree, the next step is to register and be issued a valid Certificate of Registration and a valid Professional Identification Card, after having passed the licensure examination. A doctoral degree is not required to practice in the counseling profession, but a doctoral degree certainly predisposes someone to be in the leadership position of government or non-government organizations, as well as in academia or in research.

Supervision of Counseling in the Philippines

Counseling supervision is usually provided through group/course supervision provided in the Practicum or Internship courses (usually two classes) in guidance and counseling masters degrees. Students in masters degree programs usually and independently seek sites to practice counseling skills. In these placements, students gain experience in counseling practice, some are provided formal one hour weekly supervision, some receive informal and irregular supervision, and some receive none. Other than group supervision provided in their classes, supervision is not systematic nor regulated, and is dependent on the supervisor or mentor the student works with. There is, however, a lot of mentoring and training happening outside the supervision hour, especially among peers.

Concluding Remarks about Counseling in the Philippines

Much like the diverse cultures inherent in the Philippines, counseling in the Philippines has developed with various names (guidance and counseling, counseling, pastoral/family counseling), but it has unified as a discipline and the practitioner's professional identity as a counselor has strengthened through the Guidance and Counseling Act of 2004. Because of the country's history (i.e., pre-colonial Philippines, Spanish colonization, American occupation, the Marcos regime) (Roces & Roces, 1985) the roots of counseling straddle between indigenous (Enriquez, 1977) and religious/spiritual resources (Bulatao, 1992; Tanalega, 2004) and the societal problems that ensue from experiences of oppression. Competent counselors in the Philippines acknowledge the invaluable influences and

resources in counseling that necessarily include the involvement of family, spirituality and/or religiosity, and a powerful sense of hope and resilience (Tuason, Galang-Fernandez, Catipon, Dey, & Carandang, 2012).

The counseling practice in the Philippines needs to deeply respond to the protracted societal issues of widespread poverty, rampant violence and trauma, frequent natural and human-made disasters, the inevitability of overseas working, countless street children and child laborers, prevalent graft and corruption in leadership positions, political unrest and senseless and unresolved deaths, and oppressive economic inequality, to be relevant advocates for well-being, mental health, and social justice (Tuason, 2008). In the Philippines, counseling has evolved into a recognized profession that is fundamental to increasing the wellbeing of individuals and essential to a movement of healing and nation building in society.

Bio

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Strategic approaches to managing the development of the counselling profession in Hong Kong

Pui Chi TSE[1]

The counselling profession in Hong Kong has developed for nearly half a century, but it is still like a young child. The lack of government and public recognition has created a lot of difficulties. The demand for counselling is continuously increasing while its recognition as a unique profession remains low due to its generic nature and the cultural context. This paper discusses the strategic approaches appropriate for the Hong Kong Chinese culture in the development of the counselling profession. This study begins with the historical review of Hong Kong's counselling development as the ground for further examination. The related concepts in management, such as strategic thinking and planning, values, power, and training, are put forth as stimulation for thoughts and action plans for counselling leaders. Managing the strategic plans and options for successful development demands clearer attention and strategic commitments from the leaders and professionals.

Managing counselling professionalization

Professional status and identity are critical developmental issues for many professionals. Deliberately long discussions on professional identity within the counselling profession have taken place in the United States since the 1980s (Fitzgerald & Osipow, 1986; Watkins, 1983; Watkins, Lopez, Campbell, & Himmell, 1986). Promotion of a core identity as a counsellor has been the prominent challenge for decades. Professionalization is an evolutionary process for occupational groups to improve their social professional status (Pavalko, 1971) for the protection and security of professional members (Goode, 1960). The word "profession" carries esteemed and privileged connotations associated with social and occupational status (Pavalko, 1971). Professional issues, including training and education, accreditation and licensing, professional membership and identity are all crucial for the advancement (Romano, 1992; Simpson 1993).

The training of counselling professionals is a marvelously complex process. It possesses a pedagogical nature which provides counsellors platforms and/or shelters to strengthen their competitiveness and competencies by continuous refreshment of their skills and knowledge through formal training. Counselling professional development in Hong Kong is even more sophisticated because of the constraints from Eastern culture on a Western health discipline and other specific stumbling blocks in the past years.

Before moving on to the discussion of the applicability of strategic management of development in this field, I will start off the discussion with the historical development of counselling education in Hong Kong for a contextual understanding. The pace of historical change constitutes the unique rhythm of professional development. And then I will use some of the essential components of the strategic approach in counselling education to assist in the discussion of counselling education management here in Hong Kong.

Contextual understanding of counselling professional development in Hong Kong

History, culture, and changes

Hong Kong was a British colony for almost 150 years. "As many historians acknowledge, Hong Kong was not a typical colony" (Sweeting, 2007, p. 91). Hong Kong, in terms of its roots, has a deep, long-standing and well-established Chinese culture. In the early days, Hong Kong was mainly a Chinese migrant society, with most of its population coming from the South China

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region. The Chinese have their own means of sustaining and enhancing mental health. There is no concept of counselling in Chinese culture. At first, counselling was a totally imported product. Foreigners played a dominant role in the procurement of early counselling services. Up to now, the development of counselling in Hong Kong has only spanned 40-50 years.

Although the history of counselling in Hong Kong is short, the emerging profession of counselling and psychotherapy was unique in this community. In order to understand the development of counselling education in Hong Kong, a look at the historical and sociopolitical context is needed.

The Chinese still embrace collectivism while the West clings to individualism; the effects of globalization have brought forth the erosion of boundaries. The basic value orientation of two cultures is different. Western individualistic worldviews and the collectivistic Eastern worldviews clashed with each other. This laid the foundation for the difficulty in counselling education in Hong Kong. Individualism stresses individual initiatives, a greater focus on the self and emotional independence (Hofstede, 1980). It also emphasizes self-reliance and freedom of choice, rights and duties, and personal growth. In contrast, collectivism emphasizes group goals over personal goals, stresses conformity and in-group harmony, and defines the self in relation to the group (Triandis, 1995). There is no emphasis on personal growth, but only group fame. The individual is difficult to survive for one's own sake. Social pressure, such as family and peer groups, will attack a person when he or she strives for his or her own growth.

Besides, seeking help may reveal one's inadequacy and dependency (Nadler, 1990). There is a Chinese adage: "Problems within the family should not be discussed outside the family." It hurts the "Mianzi" if one's psychological problems are revealed to others. Social stigma attached to mental health service needs to be taken into consideration in Chinese culture. Mianzi literally means face in the Chinese language. Symbolically, having mianzi is the representation of one's access to power and privileges. Losing mianzi undermines one's power and social network. "Mianzi" serves the function of perceived social position and prestige within one's social network (Hwang, 1987). To talk to a stranger, a so-called counsellor, about one's own personal issues can be very threatening to a Chinese person. To gain mianzi is a common important goal among Chinese people. This is one of the major causes of the difficulties in counselling development in Chinese assimilated Hong Kong culture. If a culture does not openly accept counselling, there will be less demand in the market and counselling education thus has a poor ground to grow from.

Furthermore, Chinese people often downplay the severity of mental illness and choose to focus on the situations that generate the condition rather than the problem itself (Kleinman & Lin, 1981). It takes a very long time to cultivate the concepts of counselling among Chinese people. Culturally speaking, the efficacy of counselling and psychotherapy needed a long process of integration with Chinese traditions for local people to accept it. These cultural barriers have had an adverse effect on counselling development in the Chinese community. However, the trend of globalization could also facilitate the process of connection of this profession in the Hong Kong Chinese culture.

Huy & Mintzberg (2003) stated that there are three types of change: dramatic, systematic and organic. Dramatic change descends from the top management, systematic change is generated laterally, and organic change emerges from the grass roots. These three forces interact dynamically. "Change has no meaning unless it is juxtaposed against continuity" (Huy & Mintzberg, 2003, p.79). Changes sometimes facilitate but sometimes hinder its development. The rise of globalization, aside from the expansion of trade and investment across borders, has opened the door to cultural interchange.

Globalization is not the product of a single action, like switching on a light or starting a car engine. It is a historical process that has undoubtedly sped up enormously in the last ten years, but it is a permanent, constant transformation. (Sadler, 1993, p. 29).

Influx of Western knowledge as well as social movements has sped up the opportunity to provide counselling services for local needs.

Struggles, difficulties, and challenges

The counselling movement began as an attempt to meet society's developmental needs to resolve the widespread social discontent originating from two social uprisings and disturbances, which were spawned by the Cultural Revolution in China in 1966 and 1967 (Leung, 1999; Yu et al., 2010). These changes precipitated a series of social and political reforms instigated by the British government. The Hong Kong Government started to rely on voluntary organizations to provide related services for the community and crisis intervention. "Links between politics and education provide the bases for many of the mysteries of this period" (Sweeting 2007, p.13). The disturbances in the 1960s paved the way for expansion of social services to meet the social needs. According to Leung (1988), the first informal counselling service in Hong Kong was offered in 1967 at the Yang Memorial Social Service Center. In 1969 the Hong Kong Federation of Youth Groups started an experimental counselling programme staffed by an American trained counsellor in Hong Kong. We can say that organic change emerged from the grass roots in the community which provided fertile ground for the birth of counselling in Hong Kong. Organic change, which often proceeds as a challenge to authority, involves messy processes and tends to arise from the ranks without being formally managed (Huy & Mintzberg, 2003). However, Leung (1988) stated that at that time counselling was like an adopted child who came from a very different background trying to fit into a new family in Hong Kong. Counselling faced a lot of challenges at this earliest stage. This child had not been nurtured properly. Publicizing counselling services was major work of the early counsellors in the 1970s (Leung, 1988).

In addition, with regard to the issue of professional identity, the role of counsellor in Hong Kong had no clear demarcation from social workers, clinical psychologists, and psychotherapists. The functions of a counsellor, however, are shared by various types of helping professionals, such as teachers, clinical psychologists, educational psychologists and social workers (Goodyear, 1984). They also provide counselling services in a variety of settings. Striving for a collective identity is not an exclusive issue for Hong Kong counsellors. The counselling identity confusion acts as a great hindrance to its development as a unique profession.

Counselling education in this early stage was scattered, unsystematic and Westernized. Prior to 1971 there were no formal training programmes on counselling in Hong Kong. The first formal counselling course was offered in 1977 at master's degree level at the Chinese University. The programme was academically oriented rather than focused on professional training (Leung, 1988). The government lacked a proactive

strategy to face the changes in society and had not made any effort to assist the professional growth of counselling. Of course the government's ignorance of the professional identity was one of the major factors. The government only recognized the social work discipline and registered social workers as part of the social service system. The professional identity of counselling graduates has not been recognized by the social service agencies. They could not find jobs and even when the government or an NGO employed them, they would be allocated to the social work system and positioned as lower than social workers. This discriminatory practice indeed affected the morale and professional esteem of counsellors.

In Hong Kong, education policy is usually subsequently developed from relevant economic developments and the policy-makers' foresights are often questioned (Sweeting, 2007). Long-term planning in the field of education is devalued, and counselling education is no exception. Counselling services are time-consuming and money consuming. Counsellors spend hours and hours, listening and serving individuals, which is not economical use of resources in such a pragmatic society like Hong Kong. The provision of counselling services is regarded as very expensive. The government therefore neglected counselling education.

All the above struggles and difficulties have been significant contributors to the slow development of the counselling profession in Hong Kong.

Threats, dilemmas and opportunities

Change is a natural process in society. Crises, blows, and distress are general features of the changing world and symbolize hardship and distress. Crises and threats can sometimes be viewed in functional terms as facilitators (Rosenthal et al., 2001).

Since its return to China, Hong Kong has undergone more changes, and the confusion over the professional identity of counselling has seen no major improvement under the government's social service hierarchy. A few critical policy changes have brought benefits as well as threats to counselling development since 1997.

Social services encountered a great change when entering into the year 2000. The reform consisted of three parts: a Service Performance Monitoring System (SPMS), the Lump Sum Grant subvention policy (LSGS), and opening up service contracts to business enterprises for competitive bidding alongside non-profit organizations (NPOs) (Lee, 2005). The essential features of the LSGS for subsidizing social welfare, which became effective on 1 April 2000, are a flexible funding model based on a one-line vote, in which NPOs have the flexibility to decide their staffing structures, salary levels, and other items of expenditure. NPOs can carry over unused funds to the next financial year (Social Welfare Department, 2000). Ninety percent of the social services in Hong Kong are offered by NPOs that are largely subsidized by the government. About 346 NPOs receive 70% of their major funding from the government, with the total public funding amounting to 2.4% of the total public expenditure, or 0.5% of GDP (Lee, 2005). These government-subsidized NPOs employ many staff, including trained professionals, welfare workers and child care workers. The launching of this governmental subvention policy has brought a dramatic change to social service agencies, arousing for and against voices among service operators regarding their resources management. This alternative structural implementation of resources certainly brought chances and opportunities for counsellors. It created a lot of worries for social work training staff but rekindled hope for counselling graduates. The flexible funding model allows more freedom of choice in staffing. Counsellors thus have more chances to be employed and receive fair pay according to their competence and effort.

Prior to 2004, all counselling training programmes held by universities were master's degree level. Hong Kong Shue Yan University is the only university to offer the Honours Diploma in Counselling and Guidance since 1977. In 2004, Hong Kong Shue Yan University was successfully accredited the proficiency to provide undergraduate training in counselling psychology in Hong Kong. It was a great stride forward in the history of counselling education in Hong Kong.

Although this big leap is an indicator of the better acceptance and recognition of the need for counselling training in the community as well as the community urge for counsellors, Yu and his colleagues conducted a survey on the public's understanding of counselling in Hong Kong in 2010 which revealed that the majority of respondents had no knowledge of counselling and no interest in this service. The counselling profession has undergone slow evolvement in Hong Kong. Their research result

"confirms the tough reality that the counselling profession in Hong Kong is still in an early stage of development and faces a number of challenges. The next step is to use our findings to identify opportunities and devise strategies to remedy some of these issues." (Yu et al., 2010:48)

The increasing employment rate as counsellors in schools and agencies as reported by the graduates from the Counselling and Psychology programme is evidence that contributes to the success of accreditation. However, primary school counsellors, who are hired by tender and posts, are often awarded to the lowest bidders (Ngo & Zhao, 2016). The counsellors are critically underpaid with overloaded work. This is a total contradictory phenomenon.

Entering 2018, another sudden blow occurred in the counselling profession. This was of major concern regarding the development of the counselling profession. The Education Bureau of the Hong Kong Special Administrative Region has recently issued a memorandum to primary schools about the implementation of the "one school social worker for each school" policy (Secretary for Education of the Education Bureau, 2018), leading to the termination of the financial allowance to hire school counsellors. Only social workers are instead employed to handle the counselling cases in school. This policy has not only aroused the attention of many existing school counsellors but also social workers who anticipate a far greater workload than they are currently facing (Ngo & Zhao, 2016). The relevant policies ignore the role and opinions of the counselling industry and are not moving towards optimizing the "comprehensive student guidance service".

Positively speaking, challenges can either be viewed as burdensome and oppositional but also as opportunities. On one hand, this policy has caused a great blow to the counselling profession especially for those who are working in schools; on the other hand, this is a chance to arouse the public attention of the counselling profession. In response to this change, the Asian Professional Counselling and Psychology Association (APCPA) has initiated the gathering of scholars, counsellors, teachers, principals and school counsellors, and the leaders of social services together to hold discussions in an open forum

on "Guardian Counselling, Professionalism, and comprehensive school Counselling System". This also united counsellors together to hold press conferences and make noise in society, expressing the importance of the role of counselling services. As a result, this movement attracts more social attention. The journey of professional recognition is tough and there is still a long way to go.

Instead of feeling upset and frustrated about the development of the counselling profession, good strategic plans with proactive actions to tackle these challenges are significant.

Strategic approaches to counselling education management in Hong Kong

Management is a business concept which refers to the process of administration or the people who perform the act of management. It has its primary function of getting things done in a properly effective way. "Management" was a very bad word for voluntary nonprofit organizations (Drucker, 1990). Similar reactions are found in the education field. Management means "business" to them, but educators and social service providers did not want to treat such a meaningful mission as "education" or "social service", as "a business"; thus, most of them believed that they did not need "management". Actually, the functions of management consist of indispensable aspects such as creating policy, organizing, planning, and regulating resources and human behaviour in the organization. The economic, social change and political developments do affect counselling education, creating opportunities or constituting threats. Educational management is a field of study and practice concerned with the operation of educational organizations (Bush, 2003). Bolam (1999, p.194) defines educational management as "an executive function for carrying out agreed policy".

Strategic management is a concept about how to improve profitability and competitiveness in the business field. The original meaning of the word derives from the Greek "strategia", which is the ability to employ available resources to win a military conflict (Mitreanu, 2006). Planning, formulation and implementation of strategies are primary tasks of leaders and administrators. The concept of "strategic approach" is not new in counselling and psychotherapy fields – we have strategic approaches in treatment and intervention for difficult cases or paradoxical situations.

As revealed in the past history of the counselling development in Hong Kong, the trajectory has encountered a lot of difficulties. Lack of resources has been a cause of the slow development, matching the notion of strategy in management which implies a strong focus on competition or struggles for resources.

"Strategy is a highly complex concept and attempts to define it adequately within the compass of a sentence or two are almost certainly going to miss out some key elements" (Sadler, 1993, p.3). Hofer and Schendel (1978, p.4) delineate strategy as "the basic characteristics of the match and organization achievers with its environment". Successful management requires a clear link between aims, strategies and operations (Bush, 2003). To maximize the available community resources and cultivate new resources, strategic management may open up new horizons for counselling educators.

The notion of strategy is a means to a specific end and goal; it implies temporary success and becomes arguably inappropriate when success has to be indefinitely sustained (Mitreanu, 2006). Counselling education is the breeding ground for novices in the profession to continuously grow and serve the community. Besides, they function to create the counselling culture of sustainability. In order to achieve true sustainability, continuing education plays a significant role in the participatory processes, and forms a crucial part of the general strategy (Wong, 2003). But how to enhance the professionalism and sustainability and how to put these into practice and transformation are important topics to be considered. Ultimately, development of professionalism is a long-term strategy which runs contrary to a business. However, strategic management is to be operated differently across stages and situations. Short-term strategy may be operated simultaneously for the purpose of long-term strategy.

How can we strategically change the trend of counselling development? This is a good question. No matter how difficult it is, instead of being the "prisoner of the past" (Williamson, 1999), bound by the limitations and realities, strategic management has been recognized as the critical approach of survival in a tumultuous environment.

The rapid social and political reform in Hong Kong is a critical moment in spreading its development. The leaders in counselling education could create a portfolio of options strategically, starting with a broader vision of the counselling profession, set goals by creating meanings, and direct actions through eliminating uncertainty or ambiguity. Williamson (1999) suggested that with strategic options on the future, one will be able to reposition oneself faster than the competitors that have focused all their investments on "doing more of the same". This requires alteration of the traditional processes and inputs of new thinking about how planning and opportunism interact with each other in determining strategies. Below are five dimensions for consideration in strategic management to be discussed:

Strategy as leadership strengthening

Leadership is one of the frequently discussed and significant topics in the social sciences (Bass, 1990; Bennis, 2007). Leadership is generally agreed as a process of influencing group activities towards the achievement of goals (Khanka, 2006).

Rosenbach, Taylor, & Youndt (2012, p.2) state, "Leadership is all about getting people to work together to make things happen that might not otherwise occur or to prevent things from happening that would ordinarily take place."

Actually, a consequence of globalization is the emergence of generic or ubiquitous expectations of leaders (Brundrett, 2003). "A central element in many definitions of leadership is that there is a process of influence" (Bush, 2003, p.5).

Basically, counselling professionals are more competent in their counselling room with therapeutic practice. The scope of counselling training focus falls mainly on how to facilitate individuals to resolve their personal or interpersonal issues. The knowledge, formal qualification and skill-set are not formative on the dimensions of professional and organizational management. Counsellors' influences largely target the individual level or small group level. The inclusion of the essential element of "concept of Leadership" in the mindset of counsellor educators was prominent in the twentieth century. The competency of drawing people together to develop social strength should be another dimension of the attention of the leaders in the counselling field. This serves

significant constructions of relationships in the community and society, which are not recognized by the public and government.

A huge amount of theories, models and approaches were propounded to help leaders to understand how to achieve different goals with different leadership styles (Sajjadi, 2014). "Over the last 30 years, transformational leadership has become one of the most prominent theories of organizational behavior" (Sajjadi 2014:11). Hodgetts and Luttans (2000) point out that transformational leaders are capable of motivating their people to work together to achieve goals.

At this stage of counselling professional development in Hong Kong, the major imperatives of the leaders are to (1) share their counselling vision among counsellors, such as promoting the mental health of the community; (2) develop professional identification, including ethical, culturally-inclusive and quality-assurance practices among counsellors; (3) attract public attention and understanding of the counselling profession and its idiosyncratic nature and powerful contributions to the community's psychological health; and (4) master political practice in government and political settings as well as administrate conducive social policy for psychological welfare. These are strategically significant tasks for counselling leaders; thus, the inseparable relationship between leadership and management needs to be implemented. Planning guides action and management towards their mission. Effective strategic planning articulates goals with action to make progress successful.

Strategy as thinking and planning

Leaders are expected to be more proactive in both leading and managing resources. Cuban (1988) provides one of the clearest distinctions between leadership and management. He linked leadership to change and management to maintenance activity. How to plan? What to plan? How long should the plan be? Who are the planners? The government, or the counsellor educators? Who are the leaders among these? The counsellor educators? The processing of laying out a planning model focuses on setting objectives, external and internal analysis, strategy evaluation and operationalization and planning. Haines (1995, p.1) states, "We must become architects of the future, not defenders of the decline".

According to Tracy (2014), leaders have roles as strategists and planners, which enables their engagement in long-term vision and big picture planning. Mintzburg (1994, p.107) distinguished the difference between strategic planning and strategic thinking. He suggested that strategic planning often spoils strategic thinking, causing managers to confuse real vision with the manipulation of numbers and this confusion lies at the heart of the issue: the most successful strategies are vision, not plans. He (1994, p.107) claimed, "Strategic planning isn't strategic thinking. One is analysis, and the other is synthesis". The breaking down of a goal or set of intentions into steps, and formalizing those steps for implementation is "analysis". On the contrary, strategic thinking involves intuition and creativity, which is an integrated perspective on strategies. He also stated that sometimes strategies must be left as broad visions, not precisely articulated, so as to adapt to a changing environment.

Facing a scarcity of resources, the most central strategic question, whether using a competition or corporate strategy, has to be considered among universities, associations and other counselling education providers. For instance, an identity problem is the "twice-told" issue of the counselling field.

Counsellors have always been frustrated by not having a clear and distinct professional identity. This kind of primitive / outdated disturbing thought also discourages leaders from planning ahead. Thoughts guide direction of reaction. Strategic thinking strengthens intellectual capacity. It enhances the exploration of opportunities and future planning.

How to open new capabilities and opportunities is one major task of strategic management. To think strategically, there are two notable dimensions: first of all, whether anybody can become counsellors, such as the clergy, teachers, social workers, and peers. What does this mean for the counselling profession? From a strategic point of view, the counselling culture has already been built up all through the strata in society. Acceptance by the general public demonstrates that there is a market. This market naturally evolved from customers' needs which created the demand for counsellors. This widespread adoption to popularize the profession is a medium which counselling educators can utilize in the process of bettering the profession. In addition, instead of making alignment with medical or pathological models, we could also maximize the worthiness of the "growth model" which has always been our focus in counselling. The market for enhancing healthy "normal growth" is much greater (Gale & Austin, 2003). To enhance personal growth and a healthy relationship are parts of the eco-awareness. Using a growth model to empower deficits / pathologies are significantly beneficial to the community. Environmental consciousness is a current trend in this global age. This is a connection with the world trend. Why do we have to stick to the bitterness of having confused boundaries with other mental health professions? Counselling has many more resources and capabilities to create contributions beyond our expectations if we can think out of the box. This is strategic thinking in counselling education and what Gale & Austin (2003) called "work to create market demand".

People may argue about the gatekeeping functions of counselling educators or supervisors. To open the door to the public means the popularization, or "secularization" of the profession. It would affect its professional image in a negative way. Chandler (1962) identified four stages in the life cycles of companies and institutions. The first stage is the initial acquisition of resources, i.e. vertical integration. The second is the drive for the efficient use of these resources through a functional organizational structure. The third is another period of growth involving new product lines and/or diversification. Finally, there is a second shift in structure to a divisionalized form. This developmental approach to understanding the growth of a company clarifies the stages/circumstances of development for the counselling profession. Acquisition of resources as well as setting up of markets and channels is the very fundamental stage in an organization's development. The control of quality and enrichment through more and more education comes after people's understanding and recognition.

Client education, such as promotion of health, is a set of planned educational activities separate from clinical patient care. The primary focus of these activities includes acquisition of information, skills, beliefs and attitudes, which impact on health status, quality of life, and possibly healthcare utilization (Burckhardt, 1994, p.2, cited in Coates, V., 1999).

Strategic thinking in management of the counselling profession enables the realization of a growth model and releases us from becoming prisoners of existing constraints. We need to build new capabilities. "Real strategic change requires inventing new categories, not rearranging old ones". (Mintzburg,

1994). The radical changes have permeated every aspect of our life in the dynamic era; we have to seek new ways to unleash new perspectives.

Strategy as a value implementation process

Bush (1998, p. 328) links up leadership to values or purposes while management relates to implementation or technical issues. When we talk about strategic management in counselling development in Hong Kong, we must ask: "Why do people choose to enter into the field of counselling and not other professions?" People's decisions and choices are largely determined by values. "Planning represents a calculating style of management, not a committing style" (Mintzburg, 1994, p.109). Nowadays, commitment is not enough for counselling leaders. They need to spend time on focused strategic thinking and planning on a regular basis. It leads counselling educators to think about the meaning and value of counselling to the community.

Kluckhohn (1951, p.395) states that "a value is a conception, explicit or implicit, distinctive of an individual or characteristic of a group, of the desirable which influences the selection from available modes, means and ends of action". The spirit of the counselling profession lies in its honour of human values, and its recognition as a "deep need within human development" (Stripling, 1983, p.206). Carl Rogers' necessary and sufficient conditions, such as respect, unconditional positive regard, and empathy carried the most profound influence in the counselling movement. Rogers (1957) identified that a congruent and integrated relationship is one of the most core conditions for constructive personality change to occur. This highlights the value from the individualism.

The commitment to professional development originates from the sharing of its values. The sociologist Philip Selznick (1957, cited in Mintzburg, H., 1994) claimed that strategies take on value only as committed people infuse them with energy. It is a matter of how to communicate the mission lively. With an attempt to arouse the attention of the counselling value and its significance to modern society, Tse (2010) delineates the value of counselling in terms of the concepts of human capital. She mentions four dimensions of the counselling nature: developmental, curative, relationship enhancement and psychoeducation, which are crucial to the formation of human capital. She alerts governments and economists to pay special attention to the role of counselling in terms of human capital development. A huge amount of money is put into it each year by the government in an attempt to decrease the mental health problems in the community. These are extremely valuable to the community and organization in the twentieth century for enhancing self-understanding, facilitating problem-solving life issues, enabling human relationships and the provision of knowledge relating to psychological health. Prevention is always more strategic and cost-effective than intervention.

How do the leaders in counselling education exert influence on the community? To talk about strategic management and the facilitation of the growth of the counselling profession, we must not neglect its substance of value. The collective value of the Chinese emphasizes that an effective way to get things done is through interpersonal relationships. And it is more effective to resolve disputes through negotiation and compromise rather than confrontation. "Counselling relationship is the heart of counselling process. It supplies the vitality and the support necessary for counselling to work" (Nystul, 2003, p.54).

Counselling can also be named the "Relationship profession", to help people build intrapersonal and interpersonal relationships through professional helping relationships. Relationship building is perceived as the capacity to relate to others, which is a necessary domain in counselling. Crucially, the individual must develop the capacity to relate to the external world. How do the counselling educators and leaders cultivate a counselling culture and communicate these values of the counselling profession in Hong Kong? The art and heritage of relationships in the Chinese culture will facilitate the integration and promotion of counselling education. Multicultural compatibility is certainly an important topic in strategic management.

Understanding the cultural and sociopolitical context of the value system is essential. The strategy for implementation of counselling values somehow is the implication of the integration of the Western and Eastern cultural connotation of mental health.

Strategy as a commitment to lifelong learning

Strategy is an emergent process. People other than members of top management can trace strategies back to a range of actions and decisions. After a process of learning over time, formulation and implementation start to emerge. Strategies are found as patterns from the past, and later as plans for the future or as perspectives to guide overall behaviour. Strategies therefore are found throughout the organization. The role of leadership is to manage the process of strategic learning (Sadler, 1993).

Learning is truly a self-reinforcing, self-regenerating dynamo (Samoff, 1996). The process of learning is exhilarating and energizing. As referred to as concepts by Ellyard (1998), counsellor educators can promote a learning culture to monitor the development of the profession. Ellyard's model of learning comprises eight elements which are (1) lifelong learning; (2) learner-driven learning; (3) just-in-time learning; (4) customized learning; (5) transformative learning; (6) collaborative learning; (7) contextual learning; and (8) learning to learn. This model sheds light for counsellors in the widening of their learning horizons.

To manage the counselling profession, we need to activate learning modes in both trainers and trainees by setting up systematic planning for the acquisition of knowledge or promoting the mindset of lifelong learning. Counselling educators or supervisors act as the facilitators of the learning culture, and the provision of different learning strategies is a form of management of the qualities of the profession. Learning can be customized to the individual needs of different learners. Learning can be collaborative as a way to learn from fellow counsellors, other professionals from other disciplines, or other organizations. Learning can also be found from exposure to different contexts and situations. Transformative learning is practised through a consistent revision of the working experience or the experiences of supervisors.

With reference to the medical profession in Hong Kong, the implementation of the Hong Kong Doctors Union (HKDU) Continuing Medical Education (CME) programme, which was launched in July 2000, aimed at maintaining a credible and equitable record of GPs/FPs participation in approved quality assurance education activities. CME points can be earned from attending talks, reading articles and also doing distance-learning courses. Under this programme, each doctor has to earn a minimum of 90 CME points in a 3-year cycle before he/ she can obtain the CME certificate (HKDU, 2001).

In the counselling profession, supervision is one of the critical lifelong learning components across the professional trajectory (Falender & Shafranske, 2004). After institutional formal training has been completed, in-service training in the form of seminars and the tradition of ongoing clinical supervision is the major emphases and heritage in lifelong counselling education. Norcross, Prochaska and Farber (1993) found that clinical supervision was the second most frequently reported activity among members of the APA's Division of Psychotherapy. Meyer (1978) found that counselling skills decline after training without supervision. Usually, the reasons given for low levels of supervision relate primarily to budget constraints, high workloads of staff and supervisors, higher priorities, and lack of available supervisors (Ladany, Ellis, & Friedlander, 1999). Employers, registration boards, and professional bodies are increasingly acknowledging the importance of good supervision in contributing to the maintenance and enhancement of high-quality clinical practice. Both hours of attending counselling-related talks and seminars, and hours of supervised counselling are elements for credible adjudication for quality assurance.

Learning is a permanent process which results in opportunities, challenges, unexpected situations at work, and any previous experience being turned into a learning experience (Torokoff & Mets, 2005). Ellyard (1998, p.62) claims that a learning culture is necessary for success in the 21st century and learning is the "most powerful instrument for shaping the future". Grey (2004, p.21) said, "Yesterday's knowledge and skills are vulnerable to obsolescence, and future success requires flexibility, responsiveness and new capabilities". Fong (1997) stated that it is not ethical to practise counsellor education and supervision without updated knowledge. The first step in commitment to professional development is the recognition of areas needing growth. She stated that, ethics aside, being current and contemporary is a necessary requirement of our careers. Counsellors have to continuously focus on professional development. Facing clients from various strata, diversified problems and issues in different life stages and lifelong as well as life broad learning will equip counsellors with the tools to deal with all kinds of clients. Counsellors are challenged by a constantly changing world. Their learning needs are increasing.

Through commitment to lifelong learning practice, counsellors progressively increase their self-awareness, acquire more advanced counselling skills and techniques, and master theoretical knowledge. Learning schools can be said to be the groundwork of management. All learning is integrated into a personal and professional identity as a counsellor − a growth process that is continuous and ongoing across the counsellor's professional lifespan (Borders, 1989:9). A good foundation for the profession lies in ongoing learning attitudes.

Strategy as power administration

Power can be said to be the ability to influence. "The concept of power is as ancient and ubiquitous as any that social theory can boast" (Dahl 2007, p.201). "Everyone recognizes the need to be organized in order to plan activities, assign responsibilities, and identify a common goal to be reached. Once everything is in place, power must be used to give direction and control the process." (Seperich and McCalley, 2006, p.14).This is a central concept in social and political fields which can explain many different social phenomena (Menge, 2018).

Dahl (2007, p. 201) defines power as "a relation between people, and is expressed in simple symbolic notation". Power can be said to be "the driving energy" (Seperich and McCalley 2006, p.15) of an organization or community. The process of power execution in management is always complex. Different powers have different sources and different consequences. Social psychologists French and Raven (1959) proposed a classic study in regard to five categories of power, reflecting the different resources and influence that power holds: coercive, reward, legitimate, expert and referent power.

"Expert power" to the community is the typical "power" addressed in a profession. This means the person's power, which derives from one's skills or expertise. This type of power is specific and limited to a particular trained area. Achieving professional status has always been a significant issue in the counselling profession. Professional status and social recognition is a form of expert power. Max Weber (1968, as cited in Rosenbach, Taylor, & Youndt, 2012) delineated an influential distinction between different sources of authority. According to Weber, tradition is one of the identified sources that represents power and authority based on what has been inherited, established and practised in the past. Leaders in the counselling field mostly follow this practice. The leadership power comes mainly from the experience and expertise in the profession. However, it does not mean that people who are an authority in the counselling profession are good administrators or competent leaders.

With regard to strategic management, Sadler (1993, p.20-21) distinguishes two types of power, "micro power" and "macro power". He states,

The former relates to the exercise of power within the organization in connection with the processes of strategic management. The latter is to do with the exercise of power by the organization in its external relationships.

Within an organization, there are battles among managers and staff for resources, power, status and promotion. Externally, it may involve rational or illegitimate means to create pressure on the government over policy making or resources. Strategy formulation is shaped by organizational and political powers. Other than professional knowledge, counselling educators have to deal with many other management-related issues which require the skilful use of the earned or unearned power in the social position.

The expertise and experience of counsellors help counsellors to establish their own professionality and identity, as well as related authority within the counsellor circle. But it is also important to consider one social dimension: who has the power to recognize professional status? Professional bodies or the government? Certainly, recognition from both sides is of the same importance. Professional identity confusion will likely be found if professional bodies are not recognized or their work is ignored by the government. The leaders could utilize strategies to face these problems.

Lukes (1974), the political theorist, developed a three-dimensional model of political power as something overt, covert or latent. The government has the overt power to offer recognition to a profession but actually may not have the knowledge for credentialing the profession. They may employ a professional body and set standardized criteria for assessment and codes of ethics for professional guidelines, to offer accreditation. The most commonly noted criteria used to evaluate whether an occupation has evolved to the status of a profession include there being (1) a specialized body of knowledge and theory-driven research, (2) the establishment of a professional society or association,

(3) control of training programmes, (4) a code of ethics to guide professional behaviour and (5) standards for admitting and policing practitioners (Caplow, 1966; Glosoff, 1993). The covert power to determine the status lies in the hands of the professional body. Thus, it is very important for professional leaders to develop clear guidelines and ethics for practitioners before it can become a trustworthy profession. Professional education shares the common aim of providing membership of a professional body and indicating capability in a professional role.

However, simply by obtaining the certificates or membership of a professional body does not guarantee expertise. Gale & Austin (2003, p.3) argued,

Differences in training, specialization, professional affiliations, and credentialing have challenged professional counsellors' sense of collective identity.......Paradoxically, achieving professional status has done little to promote professional counsellors' sense of collective identity or to distinguish counsellors from other mental health professionals.

They pointed out that the achievement of professional status has led to the creation of greater diversity and less unity among persons who identify themselves as professional counsellors. One of the reasons for such diversity is counsellors' lack of confidence to secure their professionalism owing to the generic nature of this helping profession. Besides, different orientations of training, licenses and membership from different professional bodies may contribute to conflicting codes of ethics. There are two sides of the coin. More effort should be devoted to solve the potential problem in this area. The rationale for strategic management is vitally important. Firstly, thinking out of the box is a form of cognitive power, which will help us to find our way whenever we are blocked. Power devoted to strategic thinking is crucial to leaders. Counsellor leaders, as strategic leaders, need to engage in strategic thinking and planning with the big picture in mind and anticipate crises and potentials in the professional field. Secondly, counsellors' ongoing effort in the self-development of counselling competence and high-quality counselling practice will enhance the professional self-esteem as well as accumulation of expertise power. Thirdly, counsellors who join together as a union will form a strong, united voice to effect real changes in their workplaces, their profession and even the broader community. The famous Gestalt saying, "The whole is greater than the part", reminds us that what one can do, many can do better. Things will become much better than if piecemeal. Collection of power that comes from within will help us to utilize the external resources.

Conclusion

Counselling educators, in order to meet the speedy changes, progressive challenges of the world's demands, new standards and prevalent good quality service delivery, must be well prepared. In Hong Kong, the emerging counselling profession has gone through a series of difficulties. It is pragmatically expected that market demand influences the development of a profession in a situation like Hong Kong. Financial stringency in the public, education and nonprofit sectors poses constant constraints on development plans. The input of the strategic approach in education management has triggered a huge controversy owing to its loaded concepts from the business world. However, the business of being counselling educators is both complex and exposing. The counselling profession requires strategic leadership, thinking, planning, marketing and cultural

awareness of the implicit and explicit values and development skills. Success in counselling management depends on various endogenous and exogenous factors. Counsellor educators and leaders have a responsibility to promote professional growth in terms of lifelong learning and engagement in high-quality supervised professional practice. The atmosphere of changes can be transformed into more options with opportunism through strategic management. A positive attitude to strategic approaches and good use of potential power in counselling development and management is like having an important tool. Whether we can use it or not depends on how much we know about it. All the difficulties and challenges are parts of the journey along the professional evolution.

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Counselling in Australia: Counselling Supervisors' Views on the Strengths, Weaknesses, Opportunities, and Threats Facing the Profession

Kaitlyn Platt and Nadine Pelling[1]

Counselling is a developing profession in Australia without statutory regulation. In this study the strengths, weaknesses, opportunities, and threats (SWOTs) of Australian counselling are examined. Using a thematic analysis, eight verbatim transcripts of counselling supervisors individually talking about the monetary aspects and SWOTs facing counselling were analysed with semantic codes and themes identified. The professionalism and wide applicability of counselling were presented as attributes of the profession. Weaknesses encompassed financial concerns and public unfamiliarity around counselling. Opportunities to further develop the profession included Medicare coverage for and a more unified representation of counselling services. Lastly, factors threatening the profession included monetary limitations and aspects associated with being a voluntarily regulated profession. The identified SWOTs give insight into the profession and enhance public, stakeholder, client, and counsellor understanding of counselling in Australia.

Keywords: *Counselling, Supervision, SWOT, Strength, Weakness, Opportunity, Threat, Qualitative.*

Australian Counselling

Counsellors are essential in the Australian workforce as they promote public mental health and wellbeing (Armstrong, 2007; Australian Counselling Association [ACA], 2019; Psychotherapy and Counselling Federation of Australia [PACFA], 2013a; Sharpley et al., 2004). No title or practice protection currently exists for counselling in Australia because the profession is without statutory regulation (Pelling, 2015), meaning that anyone can identify and work as a counsellor (Pelling, 2005b, 2006; Pelling & Sullivan, 2006). Counselling is thus different from the applied psychology professions in Australia which are legally regulated, including the practice of counselling psychology (Brown & Corne, 2004; Di Mattia & Grant, 2016; Pelling, 2017b, 2019).

Information about counselling in Australia remains in its infancy (Pelling, 2006; Pelling & Sullivan, 2006; Pelling & Whetham, 2006). As counselling is still a developing profession in Australia (Pelling, 2009, 2015; Schofield, 2008b, 2013), it is vital to understand it's strengths, weaknesses, opportunities, and threats (SWOT) to permit future informed decision-making (Helms & Nixon, 2010; Leigh, 2009). Therefore, the aim of the present study is to articulate and overtly present the SWOTs of the Australian counselling profession.

Information will be presented in a fourfold manner, with the SWOT topic headings used throughout each section of the research product. The purpose of overtly presenting the weaknesses and threats is not to explain how to implement change, but rather highlight areas needing attention. The SWOT terms are conceptualised as follows:
- Strength: an internal enhancer that is a valuable resource or strong attribute;
- Weakness: an internal inhibitor that is a resource or attribute that hinders;
- Opportunity: an external enhancer that can be pursued to benefit; and
- Threat: an external inhibitor that constrains development (Leigh, 2009, p. 115-116).

Strengths.

There are currently two primary counselling associations that voluntarily regulate, promote, advocate, and represent counselling and counsellors in Australia: the ACA and

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PACFA (Armstrong, 2007; Lack et al., 2017; Pelling, 2005b; Schofield et al., 2006). The ACA and PACFA currently have approximately 6,000 and 3,000 members, with roughly 4,500 and 3,000 of those listed on the Australian Register of Counsellors and Psychotherapists (ARCAP), respectively (N. D. Alwis, personal communication, June 4, 2020; P. Armstrong, personal communication, June 1, 2020). ARCAP is the joint register of the ACA and PACFA. ARCAP provides the Australian public with the first online search platform to find registered, qualified, and ethically committed counsellors (ARCAP, 2020).

The professionalism of counselling is developing. The Australian counselling workforce surveys found that the majority of counsellors were registered with a counselling association and participated in regular professional development, while one in five counsellors had a university qualification (Pelling, 2005a; Pelling et al., 2007; Schofield, 2008a). The ACA and PACFA had (and have maintained) minimum qualification and professional development requirements for voluntary registration (ACA, 2020b; Pelling, 2008), which may explain such findings. These findings indicate that counsellors build their professional identity with qualities commonly seen in people working within legally regulated psychological professions (Brown & Corne, 2004; Di Mattia & Grant, 2016).

Weaknesses.

The transferability of counsellor learnt skills is unknown (Pelling, 2005a; Pelling et al., 2007; Schofield, 2008a). However, it is unlikely that each counsellor undertook counselling-specific training as there are few counselling undergraduate programs available in Australia. This is concerning as counselling involves a specific education and skill set (Pelling, 2017a).

There is a lack of diversity amongst Australian counsellors. Counsellors are predominantly female, of mature-age, Caucasian, and heterosexual (Pelling, 2005a; Pelling et al., 2007; Schofield, 2008a). Hence, male, young, multicultural, and gender and sexually diverse clientele may be underrepresented (Constantine, 2002; Lack et al., 2017). The homogeneity of Australian counsellors could obstruct underrepresented clients from engaging in counselling.

The out-of-pocket fee for a counselling session in Australia is substantial. The average price for a counselling hour in 2005 was reported by two workforce surveys as $57.60 and $80 (Pelling, 2005a; Pelling et al., 2007), while PACFA (2013b) states that the fee ranges from $60 to $150. When calculating inflation, these reported figures suggest that the fee for a counselling session in 2019 was approximately between $79.92 and $166.85 (Australian Bureau of Statistics [ABS], 2020; Reserve Bank of Australia, 2020). This reported cost of a counselling hour is higher than what the majority of respondents on an Australian public survey deemed appropriate (Sharpley, et al. 2004). The substantial fee for counselling services could certainly discourage clients from seeking counselling.

Counsellors earn lower than the average fulltime Australian worker. The ABS (2019) suggests that fulltime (nonmanagerial) Australian counsellors earn $82,368 annually, which is $8,684 less than the average fulltime Australian women worker. In contrast, the Australian counselling workforce surveys found that majority of counsellors earnt an annual gross income of $40,000 (or less) for counselling activities (Pelling, 2005a; Pelling et al., 2007), which is approximately equivalent to $56,993 (or less) in 2019 (ABS, 2020; Reserve Bank of Australia, 2020). However, the surveys did not seek the number of hours

counsellors worked weekly, which could explain such contrast between figures. Counsellor's inferior salary could be explained by the recognised gender inequality in Australian salaries, where female-dominated professions earn less than male-dominated professions (Job Outlook, 2020; Workplace Gender Equality Agency, 2020). Counsellors' below-average salary indicates that counsellors are not highly valued in Australia (in monetary terms).

Opportunities.

Opportunities are increasing as the counselling industry becomes more professionalised. There are opportunities for consensus on training standards and self-regulation models, including a unified code of ethics, professional standard, and a coherent regulating and registration system (O'Hara & O'Hara, 2015; Pelling, 2017a). There is also continuing opportunity to build counselling literature with commentary and workforce surveys. Future workforce surveys are recommended to use either a multi-mailing method (Pelling et al., 2007) or a snowballing strategy to contact a substantial number of counsellors (Lack et al., 2017). Such consensus and research would assist in strengthening and understanding the dynamics and demographics of counselling and counsellors in Australia (Pelling, 2017a; Schofield, 2013; Schofield & Roedel, 2012).

Threats.

Counsellor ineligibility to offer Medicare rebates (Services Australia, 2019) has harmed the profession (Schofield, 2013). This financial barrier has impaired public perception, accessibility to, and the affordability of counselling services (Armstrong, 2007; O'Hara & O'Hara, 2015). The lack of Medicare coverage threatens the number of people seeking counselling as well as the profession's identity.

The professionalisation of counselling in Australia is threatened by a lack of professional standardisation. The ACA and PACFA have distinct voluntary registration levels and requirements, codes of ethics, practice standards, and accreditation procedures which complicate the registration process and has introduced a credentialing dilemma (ACA, 2019a, 2020b; Pelling, 2006; Pelling & Sullivan, 2006; Pelling & Whetham, 2006; PACFA, 2013a, 2017; Richarson et al., 2009). The lack of consensus has resulted in a varied group of counsellors, ranging from counsellors without association oversight to counsellors with a Masters in Counselling (Pelling, 2005a; Pelling et al., 2007; Schofield, 2008a). Such dichotomy harms professional identity and confuses the general public, stakeholders, current as well as prospective counsellors and clients (O'Hara & O'Hara, 2015; Schofield, 2013).

From this review of the literature, it is evident that the SWOTs of the Australian counselling profession are under-researched and poorly understood. Thus, the aim of the present study is to articulate and overtly present the SWOTs of the Australian counselling profession by interviewing Australian counselling supervisors, which fulfils the identified literature gap. The research question forming the basis of the present study is: What are the SWOTs of the Australian counselling profession?

Method

Participants.

Two male and six female ACA Registered Counselling Supervisors gave consent to be recorded talking about

counselling as a profession and to have their recordings made public. The ACA Registered Supervisors had a minimum of three-years counselling experience and were members of the ACA College of Supervisors (ACA, 2019b).

Design.

A qualitative research design with a phenomenological focus was used. As a phenomenological focus was employed, the emphasis was on supervisors' subjective experience and understanding of the Australian counselling profession (Amedeo, 2012).

Braun and Clarke's (2006) six guidelines for conducting a thematic analysis were followed. Qualitative analysis began with familiarisation, followed by initial code generation, theme identification, theme review, final theme labelling, and concluded with report and literature connections. A thematic analysis was chosen as it is a common analytic method used in psychology to systematically identify, analyse, and report patterns from qualitative data (Nowell et al., 2017; Polio & Friedman, 2017). A SWOT analysis was integrated into the thematic analysis. The SWOT framework was chosen as it is a strategic, multidisciplinary tool previously used in counselling psychology (Leung et al., 2007; Yu et al., 2014) to identify internal and external constructs and inform future decision-making (Gürel & Tat, 2017; Helms & Nixon, 2010; Leigh, 2009).

Materials.

The recording studio at the University of South Australia, which houses multimedia recording facilities, was used for audio-videotaping. The NVivo 12 (Jackson & Bazeley, 2019) qualitative research computer software was used to store, access, visualise, and organise the deidentified transcripts, codes, themes, and thematic maps. The software allowed the researcher to track progress, lending transparency and efficiency to the data analysis (Hoover & Koerber, 2011; Richards, 2009).

Procedure.

Invitation to participate was sent to ACA registered counselling supervisors via email using a blind carbon copy address list to preserve privacy. Supervisors were asked to audio-videotape themselves talking about their views on the general practice, monetary aspects, and SWOTs of counselling in Australia. The eight supervisors that opted-in to the recording opportunity were sent the nine focus questions before participation, presented in Table 1.

The eight supervisors were recorded answering the focus questions during October and November 2018. Seven supervisors independently recorded in the professional recording studio at the University of South Australia, while one participant opted to audio-videotape themselves at a different location. The participants did not have contact with each other during data collection.

Ethics approval was classed exempt by the University of South Australia's Human Research Ethics Committee because video-tapping was originally part of an educational program and not research focused. The explicit content of

the recordings were transcribed verbatim in April 2020 by an independent professional transcriptionist. The transcripts were deidentified by systematically assigning identification numbers to each, where F denoted female and M denoted male. Both, the transcriptionist and researcher checked the transcripts against the original recording for accuracy; errors were fixed accordingly. One section of M1's recording was no longer available and was thus not used in the study. The nine answered focus questions form the material for the thematic analysis; transcripts ranged from 550 to 2,277 words, totalling 10,500 words. NVivo was downloaded, and the eight deidentified transcripts were imported into the software before thematic analysis began.

Table 1

The Nine Analysed Focus Questions

What are your thoughts/experience regarding counselling being covered/funded by private health insurance?
What are your thoughts/experience regarding counselling not being covered/funded by Medicare?
If you are in private practice, how do you determine what fee to charge per hour and what is your ballpark fee?
If you are employed, can you tell us your ballpark hourly paid rate?
Do you use and what do you think of a sliding scale fee where clients who have a concession card/or make little money pay less for services than a fully-employed individual?
What do you believe are the 5 main challenges/threats facing counselling as a profession in Australia?
What do you believe to be the 5 main opportunities facing counselling in Australia?
What are the 5 greatest strengths of counselling as a profession in Australia?
What are the 5 greatest weaknesses of counselling as a profession in Australia?

Data Analysis.

Following Braun and Clarke's (2006) six guidelines for conducting a thematic analysis, transcripts were analysed following an inductive approach, where semantic codes (and themes) that gave meaning to the research question were identified from the explicit data. Saturation was reached once the data did not lead to new codes that gave substance to the research question. Codes were simultaneously and thoughtfully categorised under the predefined SWOT categories; categorisation was dependent on the SWOT definitions, not the interview questions. Themes were then identified by merging and reconceptualising the codes to maximise representation of data. Table 2 presents the definitions denoted to each theme. The extracts are referenced to verbatim selections to decrease subjective distortion and increase trustworthiness (Astalin, 2013; Elo & Kyngäs, 2008).

Table 2
Definitions Denoted to the Final Themes

Theme	Definition
	Strengths
Professionalism	Counselling-specific opportunities that enhance the professionalism of the counselling profession.
Widely Available	The diversity, accessibility, and fee variability of counselling services.
	Weaknesses
Financial Concerns	Worrying monetary aspects relating to counsellor wage and client outcome.
Unfamiliarity	Lack of public understanding for the Australian counselling profession.
	Opportunities
Medicare Coverage	Eligibility for counsellors to obtain Medicare provider numbers.
Representation	Ways to increase public perception of the counselling profession.
	Threats
Monetary Limitations	Lack of financial assistance for counselling services.
Voluntary Regulation	Lack of rules, standards, and protection around who can identify and work as a counsellor in Australia.

Note. The table represents steps taken to adhere to Braun and Clarke's (2006) fifth guideline.

Findings

A total of 179 meaningful extracts, 24 codes, and eight final themes were identified across the eight transcripts, presented in Table 3. As seen in Table 3, the Widely Available strength theme had the most codes and references, while the Unfamiliarity weakness theme had the least.

Table 3
The Properties of Each Theme

Category	Theme	References	Codes	Transcript
Strength	Professionalism	25	4	7
	Widely Available	68	8	8
Weakness	Financial Concerns	11	3	8
	Unfamiliarity	7	1	4
Opportunity	Medicare Coverage	15	1	6
	Representation	17	3	4
Threat	Monetary Limitations	12	2	6
	Voluntary Regulation	24	2	6
TOTAL		179	24	-

Note. The table displays each theme and it's designated category, the number of extracts (references) and codes per theme, and the number of transcripts that mentioned the theme.

Professionalism (Strength).

Supervisors valued ACA and PACFA advocacy and lobbying efforts, with particular appreciation for the professional development, networking, and job opportunities that they introduced: "…[the] ACA and PACFA, fighting for the future of counselling is really, really good. Again, they have the conferences once a year nationally, there's things within your state that you can go to…" [F1].

The availability of counselling-specific education programs were said to enhance the profession's identity: "Counselling is getting a lot more recognition, you're starting to see a lot more things come up…within the [Universities, such as] Bachelors of Counselling [and] Masters of Counselling…" [F1]. Supervisors were grateful for the national and global training and networking opportunities: "…Support [for counsellors] is much more accessible now [thanks] to technology…" [F5]; "…there's going to be an international conference, so that's pretty amazing because there's opportunities that are globally available." [F6].

Widely Available (Strength).

Counselling in Australia was described as a client-centred, preventive, and diverse mental health service:

[Counselling] can be used for the purpose of enhancing life experiences, rather than leaving things to be the worst-case scenario. It can be used for preventative treatment where other areas will quite often prefer diagnosis first. [F4]

…[counsellors are] not little robots that get churned out, we're all very different and diverse…counsellors can be employed in a diverse range of places and a diverse range of industries. [F5]

Counselling was said to be increasingly accessibility due to the growth of online platforms and technology, while ethical challenges were highlighted: "…I think the online support roles in counselling…is a real potential for a lot of growth. …it comes with this unique set of challenges around confidentiality, privacy, etc…" [F6].

The fee for a counselling hour was higher in more affluent areas compared to rural regional and disadvantaged areas: "…counsellors charge…between $60 in rural regional areas and [low] socioeconomic areas, all the way [up] to $180 in the more affluent areas" [M1]. However, supervisors offered discounted fees through various means, including payment packages and negotiations using sliding scale structures, to unemployed clients, concession card holders, and to those in dire financial circumstances to help make counselling accessible and affordable:

I also had various packages available so if people bought a package…it would reduce [the cost] for them, because they're paying upfront for so many sessions so I reduced the amount depending on that… [F1]

…most of my clients come from very low socioeconomic areas of the community, it is an area that I have a great passion for, so I am very open to negotiating [the] fee with individual clients if they wish to have that happen. [F3]

Private health insurance coverage for counselling services in Australia encouraged clients to seek counselling due to the smaller out-of-pocket expense: "I believe [private health insurance] assists clients to seek intervention at an earlier stage and therefore afford them[selves] a better outcome" [F2]. However, counsellors must meet specific requirements to be eligible to offer private health rebates: "…you do need to be a certain level in your association depending on the fund and what they require and…you need to have some things in place" [F5].

Financial Concerns (Weakness).

Supervisors found that when they charged very little or nothing at all for counselling services there was a higher "…do not attend rate…" [F4], services became "…abused by the clients…" [F3], and clients devalued the counsellor and the service: "…I did make the mistake a few times of charging very little or nothing and the people, they didn't come, they didn't value what you were

doing and weren't doing the work…" [F1].

Supervisors reported earning $21 to $50 an hour for counselling-related employment. The hourly rate was dependent on the supervisors' experience, qualifications, and education, the type of organisation they were employed by, and the location of practice:

…as an entry level worker you're probably looking at around the $25 to $27 per hour in the not-for-profit industry and the higher end is up to about $40 to $50 per hour…depending on your experience and…what level you come in at. [F1]

…[in the Northern Territory] you always get more money than you do down in [South Australia]. …down in the eastern states and the southern states, it tends to be more of a slower process to get [a higher wage]… [M2]

Unfamiliarity (Weakness).

Four supervisors mentioned that the Australian community poorly understood counselling services: "…a lot of people really have no idea when they go to a counselling session what to expect, what the process will be…" [M2]. The lack of government recognition, public education, and standards around counselling was said to explain such unfamiliarity:

The lack of recognition [from] the Government [has caused a] lack of value for the profession by the community. …[there is a] lack of understanding within the community [around] the distinct role of counselling…because there's not enough education out there about [counselling]… [F2]

Medicare Coverage (Opportunity).

"F1" said that counselling services should be covered by Medicare as therapy contributes towards health: "I really strongly believe that we should be covered by Medicare because we are contributing [towards] a person's health, which is what [Medicare] is for."

The possibility of Medicare rebates for counselling fees was said to increase client affordability and service diversity:

…if [counsellors] were able to bulk bill…that would be an opportunity for some…there's a lot of people that…can't afford even a $25 fee a fortnight… [F1]

…if Medicare covered some of the therapy costs [counsellors] would have more money available to assist the community in other ways… [F2]

Supervisors acknowledged the ACA's extensive efforts in lobbying for Medicare coverage: "…[Medicare] has been debated and been on the forefront of…discussion for a long time and now we seem to be moving in that direction. …the ACA is lobbying hard for this…" [F5].

Representation (Opportunity).

Supervisors spoke about the importance of increasing public awareness around counselling: "…if there was more awareness out there in Australia especially around what it means to be a counsellor and how important that is in our community [would be] really good" [F1]. Recognition from the Australian Government as well as promoting ARCAP were mentioned as ways to educate the public on counselling: "…I am certain that if the Government were to recognise counselling that a lot more people would avail themselves [in] it" [F2]; "…the joint register needs to become more publicly [advertised] so that people in the community…[can find] professionals" [F3].

Strong cohesive standards and procedures were said to promote a unified front, increase professional identity, public recognition, and comfort with and respect of counselling services:

I think if we were to…have a strong standard, that would help the community understanding. [F4]

…forming a united front in the way that we deliver our services to clients [would show] that we are able to embrace the community and [it would] provide opportunities for people in the community to seek counselling more openly. [F3]

Monetary Limitations (Threat).

The lack of Medicare coverage was said to limit client accessibility to counselling services and account for the degrading of the profession:

…[counsellors] can be seen as social workers' and psychologists' poor cousin at times. This is unfortunate and I think it comes…from the fact that a lot of the funding…has gone to psychologists and social workers and they've been… given [eligibility for] Medicare rebates [which] lifts their profile. [F5]

…the lack of not having a Medicare rebate, I've found it quite…there are some clients that can only access external counsellors if they have Medicare funding. [F6]

The requirements to be eligible for Medicare provider numbers were presumed to be strict. Medicare coverage may actually initiate a higher demand for counselling services and an increased gap fee (out-of-pocket expense), consequently hindering session availability and client affordability: "…[Medicare rebates] will lift the requirements of counsellors in the industry, so to be eligible, you will need to have certain qualifications…this also mean not being as accessible and affordable to clients…" [F5].

Voluntary Regulation (Threat).

The lack of mandatory rules, standards, and title and practice protection was concerning and harmful to professional identity as counsellors vary in levels of education, qualification, and experience:

People can go out there…put up their sign and say, I'm a counsellor, come and see me – there is no regulating industry to say they have to be insured, registered, anything like that… people [who] aren't being supervised [nor] regulated…give the counselling industry a bad name… [F1]

Supervisors were disappointed that counsellors were negatively compared to psychologists and psychiatrists due to being an unregulated profession: "…the counselling industry can be unfavourably compared to…clinical [psychologist]… [counsellors are] still not…as highly regarded as psychiatrists [or] psychologists, which is a shame…" [F1].

Discussion

This study makes an important contribution to the Australian counselling literature as the first overt presentation of the profession's SWOTs. The counselling supervisors' perspectives highlight numerous factors that contribute to and detract from this developing profession.

Professionalism (Strength).

Supervisors mentioned numerous counsellor prospects that promote both professional identity and counsellor competence. This suggests that both the counselling credentialing

dilemma may be subsiding and that the profession is gradually meeting the characteristics of professional activities in Australia (Australian Council of Professions, n.d; Evetts, 2011; Pelling, 2005b, 2006; Pelling & Sullivan, 2006). These factors which promote and support counsellor proficiency in Australia show respect to the ACA and PACFA's education, credentialing, and self-regulation efforts (Armstrong, 2007; ACA, 2020a; PACFA, 2013c).

Widely Available (Strength).

Counselling was said to be a diverse and broad mental health profession. Supervisors suggested a diverse counselling workforce, while previous literature indicates counsellors are a homogeneous group (Job Outlook, 2020; Pelling, 2005a; Pelling et al., 2007; Schofield, 2008a). This suggests a possible increase in diversity since the 2005 workforce surveys. Additionally, supervisors supported the claim that counsellors provide a diversity of services to clients with various concerns (ARCAP, 2020). It could thus be said that counsellors assist in meeting the demand for mental health aids in Australia (Australian Institute of Health and Welfare, 2020).

Supervisors acknowledged the emerging use of online delivery for counselling services, noting ethical challenges associated with such delivery. Such issues have been previously highlighted, stressing the importance of counsellor competence when working through virtual platforms (ACA, n.d.; Harris & Birnbaum, 2015; Pelling, 2005a, 2009b). Relevant counselling codes of ethics need to be current and inclusive of challenges associated with online delivery to promote efficient counselling.

Regarding finances, supervisors indicated using negotiation and sliding-scale structures. The variable fee for counselling services was between $60 and $180, which is consistent with previously conducted inflation calculations (Pelling, 2005a; Pelling et al., 2007; PACFA, 2013b).

Financial Concerns (Weakness).

Supervisors noted that lower-paying clients had poorer therapy attendance and outcomes compared to their higher-paying clients. This finding adds to the literature that suggests a relationship between money and client outcome (Aubry et al., 2000; Clark & Kimberly, 2014; Jensen & Lowry, 2012; Myers, 2008; Ward & McCollum, 2005). A fee-setting guide for counsellors could potentially minimise these risks and maximise client outcome.

Supervisors pay rates ranged from $21 to $50 an hour with an employer. Such variability may be explained as counsellors who have advanced education and qualification levels would most probably be paid a higher rate than the contrary. This variability and pay rate minimum may be concerning for those desiring financial stability and security.

Unfamiliarity (Weakness).

Supervisors believed that the Australian public had unrealistic expectations and a limited understanding of counselling services, which has been widely documented in the literature (Jorm, 2009; Jorm et al., 2006; Rickwood et al., 2014). However, a self-report public survey conflictingly found that Australians essentially understood the counsellor role (Sharpley et al., 2004), suggesting that there may be other contributing factors impeding on clients understanding of services (Rickwood et al., 2014). Nonetheless, such gaps in knowledge likely inhibit Australians from seeking counselling, thus strategies to counter this unfamiliarity are vital.

Medicare Coverage (Opportunity).

Supervisors support the expansion of Medicare coverage to counselling services. The findings complement previous statements that suggest Medicare funding would promote public perception, the profession's development, minimise financial barriers, and reverse the hindering effects that have been noted since the introduction of Medicare rebates for other recognised helping professions (Armstrong, 2007; O'Hara & O'Hara, 2015; Schofield, 2013)

Representation (Opportunity).

Supervisors mentioned that strong standards, a unified front, and increased education and awareness were necessary to improve public perception of counselling. A way said to achieve this was through the promotion of ARCAP, with the literature additionally suggesting agreed-upon registration levels and requirements (O'Hara & O'Hara, 2015; Pelling, 2005b, 2006, 2017a; Pelling & Sullivan, 2006; Schofield, 2013). Implementation of these strategies would likely minimise confusion, promote unity, and support public engagement in counselling.

Monetary Limitations (Threat).

The lack of Medicare coverage was said to hinder the profession's development, public perception, and client accessibility, which was also stated by O'Hara and O'Hara (2015). Even though it was found that counsellors adjust fees to meet client needs, some clients still cannot afford counselling, which is especially detrimental as the demand for mental health services rises (Australian Institute of Health and Welfare, 2020; ARCAP, 2020). Interestingly, supervisors were concerned that eligibility for Medicare provider numbers would introduce new threats which executives should consider. Additionally, limited funding and employment opportunities would probably be unsettling for those desiring to establish a successful counselling career (Schofield, 2013).

Voluntary Regulation (Threat).

Supervisors acknowledged that anybody could work and identify as a counsellor due to the lack of rules, legal regulation, and title protection. As 'counsellor' is not a protected title by the National Law, public perception and professional identity have been impaired (O'Hara & O'Hara, 2015). This specific difference between counsellors and psychologists (a nationally protected title) may explain statements regarding the poor regard for counsellors.

Implications.

The identified SWOTs give insight into the current state of the Australian counselling profession and guide the way for the continual development of counselling in Australia. The supervisors' perspectives have important practical implications for the future of counselling in Australia, which mainly relate to the ACA and PACFA. The counselling associations can utilise the SWOTs to strategically plan ways to counter negative factors and continue reinforcing positive factors, ensuring that future decisions are informed and proactive.

Strengths, Limitations, and Future Directions.

Relationships between participants' subjective opinions and their demographics, counselling experience, or expertise could not be made because the archival data did not obtain such information. It is hence recommended that future SWOT analyses conduct a mixed-methods study to explore possible relationships.

While the opportunities and threats provide useful information, suggestions to counter these are beyond the scope of the study. It is acknowledged that gaining title protection and eligibility for counsellors to obtain Medicare provider numbers is a lengthy process. It is thus suggested that the implementation of such significant changes should be considered over-time.

The sample may be biased as participants were each registered with the ACA. Nevertheless, supervisors had first-hand experience from working within and communicating with others involved in the Australian counselling workforce, demonstrating that they were indeed knowledgeable about the logistics and development of counselling in Australia. The recording process also promoted self-expression and individual, authentic, and rich responses of participant subjective experiences by utilising open-ended focus questions and by having the supervisors present information independently.

The identified SWOTs provide a baseline for future research to build upon. Future research is specifically recommended to further investigate public perceptions of counselling and fee setting structures in Australia. Future SWOT analysis should be conducted from various viewpoints, for example, by collecting data through client feedback (Miller et al., 2010), which would enable comparisons to be made and evidently facilitate prioritised decision-making.

Conclusion

This study documents the contextual development of the counselling profession in Australia. The eight identified themes supply rich and informative information on strong counselling attributes, highlighting the need for standardisation, improved representation, and Medicare coverage for counselling services. The implications of this study are valuable as the SWOTs supply feedback to the primary counselling associations to guide future informed decision-making.

Acknowledgements

Bio

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