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Psychology, Counseling Psychology, and Professional Counseling: Shared Roots, Challenges, and Opportunities

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Abstract

Psychology, counseling psychology, and professional counseling are at a crossroad. The growing movement to establish professional counseling as a distinct profession, based on an increasingly narrow definition of professional identity, is particularly relevant to counseling psychologists and professional counselors and has implications for the broader field of psychology. A brief systematic historical analysis of these professional specialties in the U.S. provides the context to examine current challenges, including proposed restriction of master’s level training, licensure or other authorization to practice, and employment to graduates of programs accredited by the Council for the Accreditation of Counseling and Related Educational Programs (CACREP). These restrictions reduce services to the public and threaten the viability of counseling psychology and professional counseling in the U.S. These challenges also have significant implications for counseling psychologists in Europe and internationally given similar efforts. Going beyond a call to action, the article concludes with recommendations for counseling psychologists and allied professionals to address shared challenges, maximize shared opportunities, and foster enhanced intra- and inter-professional collaboration and cooperation.

Keywords: counseling psychology, professional counseling, history, training, accreditation, license, employment

Psychology, counseling psychology and professional counseling are at a crossroad. The growing international movement to establish professional counseling as a distinct profession, separate from counseling psychology and psychology as a whole, is inconsistent with the historical foundation, shared values, and roots of all three specialty areas.

A brief systematic review of the history of all three professions in the U.S. with links to Europe and beyond, provides a context to examine shared roots, goals, training, and practice. This examination then provides a springboard to consider current controversies and challenges, including actions by some counselors and counseling organizations to further separate themselves from psychology, including counseling psychology. To illustrate, the movement to restrict master’s training, licensure or other government authorization to practice, and employment to those sanctioned by one counselor education accrediting body, the Council for the Accreditation of Counseling and Related Educational Programs (CACREP), threatens the viability of counseling psychology (Jackson & Scheel, 2013) and professional counseling (Brady-Amoon, 2012; Hansen, 2012) in the U.S. and internationally.

Threats to counseling psychology and counseling are, by extension, impediments to the realization of recent calls for public access to a full-range of preventive, culturally-informed mental health services (see, for example, Na-
Having a full range of services is consistent with the professions’ shared values (British Association for Counselling and Psychotherapy; BACP, 2013; British Psychological Society; BPS, 2015; European Association for Counselling; EAC, 2015; Society for Counselling Psychology; SCP, 2009). At the same time, these and other commonalities, considered more fully later in this article, are fundamental to addressing current challenges to professional identity and practice in an international environment that increasingly favors a homogenized clinical model (Goldstein, 2010; International Association of Applied Psychology; IAAP, n.d.).

Counseling psychology, which is historically and currently at the intersection of psychology and professional counseling (Moore & Rae, 2009; Strawbridge & Woolfe, 2010), is well positioned to bridge gaps between and among allied professions. Moreover, the professions are strengthened and services to the public enhanced when counseling psychology and counseling, which provide a critically important alternative to dominant models in psychology and health care, work together to assure their shared philosophy and approaches remain vibrant.

Nonetheless, supporters of the movement to restrict counselor licensure and, by extension, employment to people who earned master’s degrees in counseling from programs accredited by CACREP and its international affiliates contend that psychology and counseling are distinct professions (Mascari & Webber, 2013; Urofsky, Bobby, & Ritchie, 2013). Some cite U.S. psychologists’ initial opposition to licensure for master’s level counselors and efforts to expand counselors’ scope of practice as the rationale for their position. Others neglect or minimize the shared history and philosophical roots of psychology and, in particular, counseling psychology and professional counseling. Still other CACREP-only advocates argue history doesn’t matter; that it’s more important to focus on the future of professional counseling, a future that in their view does not include psychology, including counseling psychology.

However, there is much to be learned from a systematic review of history. Despite this, the Chair of the American Psychological Association’s (APA) Society for the History of Psychology recently reported that few doctoral psychology programs in the U.S. offer coursework on the history of psychology (J. T. Lamiell, personal communication, January 26, 2016). Although most U.S. professional psychology training programs, defined as clinical, counseling, and school psychology, and counselor education programs require instruction in the history of the specific discipline, few consider all three.

Similarly, although history is not included in training guidelines posted by the European Federation of Psychologists’ Associations (EFPA, 2015), it is recommended or required for training in some European jurisdictions. For example, the BPS (2015) accreditation standards for clinical psychology doctoral programs and the EAC (2015) training standards require study of the history of their specific discipline or profession. Similarly, yet somewhat distinct, BPS standards for the accreditation of counselling psychology doctoral programs list an expectation that graduates will “understand the spiritual and cultural traditions relevant to counselling psychology” (p. 19), which includes a pluralistic and interdisciplinary mindset.

We submit that better understanding of the history of our own as well as allied professions is fundamental to enhanced intra- and inter-professional collaboration and collaboration. We offer a U.S.-based perspective with European implications and invite dialogue with colleagues with different national and geographic professional histories and perspectives.

As such, the purpose of this long-term project has been to: 1. systematically review the history of psychology, counseling psychology, and professional counseling in the U.S. to provide a context to examine shared roots,
goals, training, and practice with implications for European counseling psychologists; 2. examine current controversies and challenges, including promotion of CACREP as the sole route to licensure and employment in the U.S. and the international implications of similar efforts; and 3. recommend action to promote counseling psychology values and with that, shared opportunities.

**Method**

To address these broad questions in accordance with recommendations for systematic reviews (Moher, Liberati, Tetzlaff, & Altman, 2009), we developed a plan and began gathering data more than five years ago. Following this plan, we organized the manuscript to parallel key areas, i.e., history, professional organizations, accreditation of training programs, licensure, and professional identity, moving from the broadest field, psychology, to counseling psychology as a doctoral level specialty area, and then to professional counseling as a master’s level specialty. An analysis of current controversies and opportunities then follows.

Our systematic review of the literature included a thorough examination of primary peer-reviewed and other well-regarded sources (e.g., U.S. National Center for Education Statistics; NCES) in each area: psychology, counseling psychology, and professional counseling, to assure relevance and to build upon and extend current knowledge. We have welcomed and incorporated formal and informal feedback on sources, methodology, and results by sharing draft manuscripts and presenting earlier versions of this work at professional conferences in all three areas. To our knowledge, this is the first systematic review of the association between and among the three clearly interrelated specialty areas.

**Results**

**Shared Roots**

**Psychology**

The broad-based field of psychology is generally considered to have roots in Western European philosophy. Freud’s (1903/1958) introduction of psychoanalysis in 1896 and, more broadly, the talking cure (Rizzuto, 2008) set the stage for the practice of counseling and psychotherapy. Notwithstanding Freud’s contributions, Wundt is generally considered the father of modern psychology for having established the foundational principles of the then-new field of psychology and its first laboratory (Benjamin, 1997).

Behaviorism emerged in this scientific milieu and is now recognized as the second theoretical tradition or force influencing psychology and counseling after psychoanalysis (Ivey, D’Andrea, & Ivey, 2011). Behaviorism, often presented in conjunction with cognitive theory and research, remains a major influence in present-day psychology and related fields (Benjamin, 1997).

In the 1940s, the influx of psychoanalytically-trained immigrants and refugees from Europe and an emerging recognition of the needs of veterans contributed to a renewed interest in psychoanalytic practice in the U.S. (Hornstein, 1992). Psychoanalysis, behaviorism, and “an optimistic outlook about the possibility of change” (Hornstein, 1992, p. 520) were soon considered aspects of mainstream psychology in the U.S.
Humanism, which built upon this optimistic outlook, became more prominent during the 1950s. It is now considered the third theoretical force in psychology and counseling (Ivey et al., 2011). Like its antecedents, humanism built upon and extended prior theory, the science of psychology, and related fields (Rogers, 1951). For example, Rogers, who was trained as a psychologist, emphasized people’s inherent strengths and popularized the use of the word counseling. He referred to this approach first as client-centered and later as person-centered counseling. Gestalt, another humanistic approach, contributed to the understanding of people in the context of their environment.

Although some early psychologists have been justly criticized for supporting racist and other damaging approaches (Chesler, 1972; Guthrie, 2003), psychology also has a long history of using empirically based principles and research to promote human welfare. For example, Mamie and Kenneth Clark’s work was instrumental in the now-famous 1954 U.S. Brown vs. Board of Education Supreme Court decision that declared racially-segregated schools unconstitutional. This type of work, in conjunction with the social movements of the 1960s and 70s, inspired and promoted multiculturalism as the fourth force in psychology and counseling (Pedersen, 1990).

Psychology is a dynamic field characterized by interactive developments and divergent approaches to theory, science, and practice. Moreover, psychology developed in parallel with, and sometimes in response to, broader social trends and influences. In the sections that follow, we turn our attention to the historical development of the APA, and the training, accreditation, licensure, and professional identity of professional psychologists in the U.S.

The American Psychological Association — The APA, which was established in 1892 and recognized at the 1st International Congress of Psychology in 1889 (Rosenzweig, Holtzman, Sabourin, & Belanger, 2000), is the primary professional association for psychologists in the U.S. Although the inaugural APA bylaws called for the advancement of psychology as a science (Benjamin, 1997), when APA was reorganized in 1945 in the wake of WW II, its new bylaws contained an expanded objectives statement adding language addressing psychology “as a profession, and as a means of promoting human welfare” (Benjamin, 1997, p. 607).

Shortly thereafter, the APA and the U.S. Veterans Administration (VA) established training programs for clinical and counseling psychologists. To counteract psychiatrists’ objections to what they perceived as psychologists’ incursion into their area of specialization (Hays-Thomas & Lowe, 2000), APA agreed to work towards the establishment of the doctoral degree as the standard for entry-level practice in professional psychology. Today, doctoral level training with supervised practical experience is considered fundamental to professional psychology in the U.S. (Benjamin, 1997; Munley, Duncan, McDonnell, & Sauer, 2004).

Currently, APA has more than 50 interest area divisions and defines psychology as a "diverse discipline, founded in science, but with nearly boundless applications in everyday life... Psychologists study both normal and abnormal functioning and treat patients with mental and emotional problems. They also study and encourage behaviors that build wellness and emotional resilience" (APA, 2012). However, APA is not the only generalized professional organization for psychologists in the U.S. The Association for Psychological Science (APS; formerly known as the American Psychological Society) was founded in 1988 “to advance scientific psychology and its representation as a science on the national level” (APS, 2013, para. 1).

Training — Psychology is one of the most popular undergraduate majors in the U.S. today (NCES, 2011). Approximately 20% of bachelor’s degree recipients with a major in psychology enroll in a graduate master’s or doctoral program in psychology or closely allied field, including counseling (APA, 2009). To put that in more concrete terms, the U.S. National Center for Education Statistics (NCES; 2011) reports the conferral of 23,752 master’s
degrees in psychology, of which almost a third (31.28%, 7,429) were in counseling psychology (NCES, 2011). In comparison, 5,540 doctoral degrees in psychology were awarded that same year, of which 2,197 (40%) were identified as clinical psychology and 362 (6.5%) as counseling psychology (NCES, 2011).

The number of doctoral degrees is particularly important as the 1949 APA-sponsored Boulder conference formally established a doctoral degree as the minimum requirement for independent practice and professional licensure in psychology in the U.S. (Fretz & Mills, 1980; Munley et al., 2004; Rehm & DeMers, 2006). This conference also adopted the scientist-practitioner training or Boulder model, which places equal weight on scientific research and practice and generally culminates in a PhD degree (Munley et al., 2004). The scientist-practitioner model was, until recently, the most commonly employed model for doctoral training in professional psychology (Rehm & DeMers, 2006). Subsequently, the 1973 Vail conference set the stage for the increasingly popular scholar-practitioner model (Sheridan, Matarazzo, & Nelson, 1995). Today, the majority of clinical psychology graduates in the U.S. earn a Psy.D. upon completion of a professionally-oriented doctoral training program that emphasizes practice and practice-informed scholarship (APA, 2009).

**Accreditation** — The APA established accreditation standards for doctoral level training of professional psychologists, i.e., those preparing for professional practice, in 1946. Debates about the focus of training, e.g., science vs. practice, and the degree to which externally imposed criteria counteract faculty governance and innovation (Sheridan et al., 1995) contributed to the development of flexible accreditation policies and procedures that encourage program faculty to demonstrate how they are meeting their own goals (Altmairer, 2003). Consistent with this, professional psychology programs in the U.S. established competency-based evaluation of doctoral programs' and candidates' progress more than 25 years ago (Altmairer, 2003; Kenkel & Peterson, 2010), spearheading a movement that has influenced the profession as a whole (Fouad et al., 2009; Fuertes, Spokane, & Holloway, 2013).

Debates within psychology also contributed to the formation of another doctoral level accrediting body: The Psychological Clinical Science Accreditation System (PCSAS). PCSAS, formed in 2007 by the Academy of Psychological Clinical Science, serves to provide an alternate means of accreditation for U.S. Ph.D. programs in psychology that are primarily focused on scientific research and empirically-based treatments (McFall, 2012).

In addition to doctoral and post-doctoral accreditation, APA offers published guidelines and resources for undergraduate psychology training and high school psychology classes. However the APA has neglected, and at points actively opposed, the recognition and accreditation of master’s level training (Fretz & Mills, 1980; Hays-Thomas & Lowe, 2000). To meet the demand for master’s level accreditation in the U.S., faculty affiliated with master’s programs in psychology formed the independent Masters in Psychology Accrediting Council (MPAC) in 1995. MPAC developed voluntary standards and an accreditation process for master’s programs in psychology (Hays-Thompson & Lowe, 2000). In 2009, counselors and counselor educators asked MPAC to create an option for the accreditation of master’s programs in counseling. That option, the Masters in Counseling Committee (MCAC) was added in 2010, with an overall re-organization into the Masters in Psychology and Counseling Accreditation Council (MPCAC, 2017).

**Licensure** — The purpose of professional licensing, known as registration in the U.K., is to protect the public. In the U.S., licensing laws for professional psychologists were adopted on a state by state basis between 1945 and 1977 (Rehm & DeMers, 2006). Each state sets and monitors its own standards and qualifications so despite state-
to-state similarities, a psychologist licensed in one state is not necessarily qualified to practice in another. Master’s level practitioners and people with doctorates in allied fields, including Counselor Education and Supervision (CES), were often eligible for psychology licenses through the 1980s. However, paralleling the expansion of psychologists’ roles and functions, that option was soon closed to new applicants.

Today, a doctoral degree in clinical, counseling, or school psychology (or re-specialization in one of these applied or professional psychological specialties) and a passing score on the Examination for Practice in Professional Psychology (EPPP) are required for licensure for independent practice of psychology in 48 of the 50 U.S. States. Vermont and West Virginia alone permit licensure for full independent practice of master’s level psychologists.

**International licensure, individual accreditation, and registration** — There are significant variations in psychologists’ training across Europe (Filippopoulos, 2009), including qualifications for practice and the agency or organization that authorizes such practice. For example, the BPS accredits training programs and practitioners in professional psychology, including counseling psychology, in the U.K. Graduation from an accredited program or successful completion of an approved alternate route is necessary to attain chartered status. In addition, due to recent legislation, training programs and professionals are also required to meet the requirements of the Health and Social Care Professional Council (HCPC), a national general social service agency, to qualify for registration and, therefore, work as a practitioner psychologist (Martin, 2015). The requirement for HCPC registration and oversight continues to engender controversy, particularly within counseling psychology (Goldstein, 2010).

Since 2005, new applicants for chartered status as a practitioner psychologist in the UK are required to have earned a professional doctoral degree, the foundations of which are similar to those of U.S. training programs (Martin, 2010). Practicing psychologists in Germany are required to have attained 3 years of advanced training following the master’s degree equivalent. French and Italian requirements also include training beyond the Master’s equivalent level (Helmes & Pachana, 2005).

In 2010, the EFPA developed unified educational standards and established qualifications for the EuroPsy certificate. EuroPsy is a general voluntary registration system to promote professional mobility within the European Union. EuroPsy offers several options for specialization certificates, but not one for counseling psychology (EuroPsy, n.d.). The goals for EuroPsy appear to be similar to those of the Association of State and Provincial Psychology Board’s (ASPPB) Certificate of Professional Qualification (CPQ), another voluntary registry for experienced professionals designed, in this case, to facilitate professional mobility through licensure portability to participating states in the U.S.

**Counseling Psychology**

Counseling psychology is a specialty area within psychology that shares much of the tradition and history of the larger profession, and is most closely related to professional counseling. Counseling psychology in the U.S. traces its roots, and foundation, to the vocational psychology movement (e.g. Parsons, 1909), advances in education, and the rise of humanism, particularly Rogers’ person-centered counseling (Munley et al., 2004). What we now know as counseling psychology was referred to as *counseling* and even *professional counseling* in the U.S. before the 1950’s (Munley et al., 2004). Counseling psychologists in the U.S. have traditionally focused on normal human development, prevention and early intervention, strength-based, person-environment interactions, career development, and more recently, multicultural and social justice perspectives (Fuertes et al., 2013; Goodyear et al.,...
Furthermore, counseling psychology also has a long-standing tradition of respecting individual differences and a focus on supervision and consultation (Fuertes et al., 2013).

Counseling psychologists were initially focused on research, practice, and training with a particular emphasis on educational and career counseling (Carter & Davis, 2001). The unique perspective of their specialty area was regularly affirmed while new roles and diversity within the field were simultaneously embraced (Fuertes et al., 2013; Munley et al., 2004). This paralleled the social, political, and economic movements of the late 20th and early 21st centuries. For example, counseling psychologists have and continue to be at the forefront of the multicultural movement in the U.S.

Although there is some evidence that suggests the historical differences between counseling psychology and other professional psychology specialty areas have diminished (Goodyear et al., 2008), counseling psychologists in the U.S. often continue to be distinguished from their clinical counterparts by their commitment to developmental, vocational (SCP, 2009), feminist, and multicultural perspectives (Ogunfowora & Drapeau, 2008). As such, counseling psychology remains a small, yet distinct and vibrant specialty, within the broader profession of psychology.

The American Psychological Association/Society for Counseling Psychology — The Society of Counseling Psychology (SCP) was established in 1946 as a charter division of the re-organized APA (Carter & Davis, 2001). SCP, also known as APA Division 17, was originally called the Division of Personnel and Guidance Psychologists (Heppner, Casas, Carter, & Stone, 2000) and immediately thereafter renamed the Division of Counseling and Guidance (Munley et al., 2004). The interests of U.S. counseling psychologists in the broader professional context are reflected in two SCP-sponsored journals, the Journal of Counseling Psychology, founded in 1955, and The Counseling Psychologist, established in 1969 (Scheel et al., 2011).

Training — Consistent with the broader field of professional psychology, training in counseling psychology is focused on the doctoral level. In the U.S., with the exception of three scholar-practitioner programs, counseling psychology doctoral programs are organized according to the scientist-practitioner model, emphasizing research as well as supervised practice experience (Fuertes et al., 2013). Counseling psychology is a small specialty area within the larger field of psychology as illustrated by the fact that doctoral recipients have represented less than 8% of U.S. doctoral degree recipients in psychology annually for the last 20 years (NCES, 1995, 2005, 2011). In addition, as most counseling psychologists in the U.S. earn a master’s degree in counseling prior to or at the early part of their doctoral studies, counseling psychology can be considered an extension or expansion of professional counseling (Jackson & Scheel, 2013).

Accreditation — U.S. based counseling psychology doctoral programs generally seek accreditation by APA. Counseling psychologists have traditionally served as faculty and supervisors for master’s level counseling programs, which APA does not accredit. More than 80% of counseling psychology doctoral training programs are associated with master’s programs in counseling. One third of these are accredited by CACREP (Jackson & Scheel, 2013), 10% are accredited by MPCAC (MPCAC, 2015), and more than half are unaffiliated with any program-level accreditor.

Licensure — As noted in the section on licensure in psychology, a doctoral degree in counseling psychology is one option, along with clinical and school psychology, for U.S. licensure as a psychologist.
Links with international and European counseling psychology — Notwithstanding its foundations in psychology, the development of counseling psychology in Europe is more recent than in the U.S. For example, a little more than twenty years ago in 1994, counseling psychology in the UK gained divisional status within the BPS (Strawbridge & Woolfe, 2010, p. 3). Relative to other psychological specialties in the U.K., counseling psychology is a small division, with an estimated membership of 3,000, the majority of whom are female (Goodyear et al., 2016), which is similar to membership in its U.S. counterpart, the SCP. However, unlike BPS, there are an estimated 7,000 U.S. counseling psychologists who are not members of SCP, which is a voluntary membership organization.

Definitions of counseling psychology also vary. In a review of international counseling psychology celebrating the inauguration of the IAAP Division of Counselling Psychology, Savickas (2007) concluded that “counseling psychology concentrates on the daily life adjustment issues faced by reasonably well-adjusted people, particularly as they cope with career transitions and personal development” (pp. 183-184). The current IAAP definition adds that the specialty is focused on human development and adjustment in educational and work contexts and prevention (IAAP, n.d.).

Building on the foregoing, BPS (2015) defines counseling psychology as inherently humanistic and reflexive, pluralistic, and interdisciplinary. Going beyond U.S. training models, BPS strives to integrate the “the identities of the reflective and scientist-practitioner” (p. 16). In so doing, BPS is also clear that they espouse a broad definition of evidence. Furthermore, although career or vocational psychology is not referenced, BPS (2015) calls upon counseling psychologists to engage in “meaningful interpersonal relationships and commonly valued social activities such as education, work, and leisure” (p. 17).

The foundations of psychologists’ training in the UK and US are similar – as are the challenges to counseling psychologists to infuse or add on counseling psychology-specific training elements (APA, Commission on Accreditation, 2015) such as humanistic (Strawbridge & Woolfe, 2010) and reflexive practice (Martin, 2010). In addition, the results of a recent international survey of counseling psychologists found the majority of U.K. counseling psychologists with a doctoral degree have earned a practice doctorate while the majority of US counseling psychologists hold a PhD. In contrast with U.S. licensing for psychologists, which is general, psychologists in the U.K. are eligible to qualify for BPS chartered status and HCPC registration in a number of specialty areas, including counseling psychology.

Professional Counseling

Professional counseling and counseling psychology share the same roots (Romano & Kachgal, 2004). Both claim to have continued Frank Parsons’ legacy of strength-based career and educational assessment and intervention (Remley & Herlihy, 2010). Like counseling psychology, professional counseling also traces its roots to the theory, science, and practice of psychology (ACA, 1997), and Rogers’ person-centered approach (Neukrug, 2012). In fact, Neukrug’s (2012) historical timeline of U.S. counseling includes key events in both psychology and counseling psychology.

The American Counseling Association — The American Counseling Association (ACA) was established in 1952 with the merger of four allied organizations to form the American Personnel and Guidance Association (APGA). The close association and collaboration between APGA and APA is illustrated by the fact that the first APGA headquarters were in a building owned by APA (Heppner et al., 2000) and that counseling psychologists
were among the founders of ACA (Pope, 2006). In 1983, APGA became known as the American Association for Counseling and Development (AACD) and, in 1992, the association took its current name: The American Counseling Association (ACA).

The flagship journal of the association is the Journal of Counseling & Development, first published in 1952. However, in recognition of the organizational publications that preceded it, the first issue was numbered Volume XXXI (Ginter, 2002). APGA's first policy statement on the role and preparation of counselors in the U.S. was published in 1963. In 1997, ACA defined professional counseling as “the application of mental health, psychological, or human development principles,” thus demonstrating that counseling built upon psychological principles (ACA, 1997). In 2010, the American Counseling Association adopted the following definition: “Counseling is a professional relationship that empowers diverse individuals, families, and groups to accomplish mental health, wellness, education, and career goals” (ACA, 2010, para 2).

Like APA, ACA “is a confederation of relatively autonomous counseling organizations reflecting a wide range of professional interests” (Heppner et al., 2000, p. 23). There are 20 ACA divisions, including Counselors for Social Justice (CSJ) and the American School Counselor Association (ASCA) that did not endorse the definition above, and myriad specialty designations (e.g. National Certified Counselor, NCC) for counselors. ACA’s 20/20 process, described more fully in Kaplan and Gladding (2011), was the most recent effort to unify and strengthen the profession.

Training — The majority of U.S. counseling programs are at the master’s level. NCES (1995, 2005, 2011) reports the conferral of 13,500 master’s degrees in counseling in 2011 and an 18% increase in the annual number of counseling master’s degrees awarded over the last 20 years. In contrast, NCES reported 372 CES doctoral degree recipients for 1995, 331 for 2005, and 306 for 2011, showing a slow, steady decrease in annual degree conferrals during this same time frame. At present, roughly equivalent numbers of doctoral degrees are awarded in CES and Counseling Psychology annually. To put this in context, recall that counseling psychology degrees have consistently represented approximately 8% of the total number of doctoral degrees in psychology conferred annually in the U.S. (NCES, 1995, 2005, 2011).

Given the large number of master’s degree students, it is understandable that faculty qualifications are an important issue. Faculty in master’s counseling programs have traditionally been trained in a wide range of professional areas, particularly counseling psychology (Belkin, 1984; Jackson & Scheel, 2013). Both counseling psychology and CES doctoral training are steeped in the history and foundations of counseling, advanced practice, supervision, and research. Despite these similarities, the 2009 and 2016 CACREP standards, which require new core faculty in programs accredited by CACREP to have earned a doctorate in CES, are said to have “established the doctoral degree in counselor education as the terminal degree for counselor educators and scholars in the counseling profession” (Adkison-Bradley, 2013, p. 48).

Accreditation — CACREP, founded in 1981, was until recently the only option for the accreditation of counselor education programs in the U.S. outside of rehabilitation counseling (Remley & Herlihy, 2010). CACREP currently offers accreditation options in nine master’s level counseling specialty areas as well as doctoral programs in CES subsequent to its recent merger with the Council on Rehabilitation Education (CORE; CACREP, 2017). In addition to its curricular contributions, CACREP deserves credit for establishing a high standard for full-time to adjunct faculty, one that with a broader definition of core faculty, unaffiliated programs would be wise to emulate. However,
since 2009, programs that have or aspire to accreditation by CACREP are required to limit new core faculty hires to persons with doctoral degrees in CES.

Since 2002, CACREP has accredited one-third to one-half of U.S. master’s programs in counseling (Remley & Herlihy, 2010) including those affiliated with doctoral programs in counseling psychology (Jackson & Scheel, 2013). The International Registry of Counselor Education Programs (IRCEP) is a subsidiary program of CACREP that promotes core standards and procedures in international counseling “regardless of culture, country, region, work setting, or educational system” (IRCEP, 2015).

As described earlier, concurrent with the formation of the Masters in Counseling Accrediting Committee (MCAC) in 2010, the newly re-organized and renamed Masters in Psychology and Counseling Accreditation Council (MPCAC) became another option for the accreditation of master’s programs in psychology and counseling. MPCAC standards emphasize diversity, social justice, scientific, and other competency-based assessments. Furthermore, MPCAC offers options for counseling programs that value an interprofessional approach to counseling including an interdisciplinary core faculty (Jackson & Scheel, 2013; MPCAC, 2017).

Licensure — Following the adoption of licensure laws for psychologists (1946-1977), counselor licensure laws were adopted on a state by state basis, beginning with Virginia in 1977 (Fretz & Mills, 1980) and concluding with California in 2010. Today, there is significant state-to-state variance in counselor licensure requirements and titles (ACA, 2012) as well as among counselor specialty, e.g. school counselor certification, requirements (ASCA, 2012). To support licensure portability, that is the ability of a person licensed in one U.S. state to qualify to for licensure to work in another, and address the variations in titles, ACA’s 20/20 process, which resulted in the 2010 definition of counseling, resolved to promote Licensed Professional Counselor (LPC) as the single professional title for counselor licensure and work towards licensure portability, but did not result in an agreement on educational standards (Kaplan & Gladding, 2011).

Concurrent with the adoption of U.S. counselor licensing laws, the definition of counseling and ACA’s recommended scope of practice for counselors expanded from its early vocational/educational/preventative roots in ACA’s first model licensing act in 1990 (Bloom et al., 1990) to include diagnosis, treatment of psychopathology, and use of psychological assessment instruments in an update published only five years later (Glosoff, Benshoff, Hosie, & Maki, 1995). As such, it appears that what has been referred to as psychologists’ and others’ “challenges to the scope of practice of counseling” (Remley & Herlihy, 2010, pp. 48-50) in testing, diagnosis and treatment of emotional disorders, and third-party reimbursement may, instead, be a response to this relatively recent and fast expansion of counselors’ scope of practice.

Counselor licensure candidates in the U.S. are generally required to complete a master’s degree, post-graduate supervised experience, and pass the National Counselor Examination (NCE) or an equivalent national examination. The NCE is a multiple choice examination administered by the National Board for Certified Counselors (NBCC) to assess examinees’ knowledge in eight domains or areas that parallel the content domains of the EPPP. Although people with CES doctorates most often qualify for licensure – and independent practice – as master’s level counselors, the as yet unresolved deliberations about the possibility of recognizing an advanced level of practice (Glosoff et al., 1995) within counseling continue.

Links with international and European counseling and psychotherapy — Counselors and psychotherapists in Europe face similar challenges. Moreover, there is great diversity in the training and preparation of counselors.
and psychotherapists across Europe. Neither profession was included in the directive that resulted in EuroPsy. Several organizations, including the EAC (2015), are working to establish minimum standards for counselor training and practice throughout Europe. EAC is also dedicated to promoting counseling as a separate profession in Europe. Similarly, the European Association for Psychotherapy (EAP), which claims more than 20 national associations as organizational members representing more than 120,000 psychotherapists, recently established a European Certificate of Psychotherapy, which appears to parallel the goals of EuroPsy.

Professional counseling, like psychology and counseling psychology, is a dynamic, evolving profession. This review shows that the history, underlying principles, and goals of all three specialty areas are more alike than different. In the sections that follow, we expand upon the shared roots and discuss collective challenges as well as opportunities for cooperation and collaboration.

Shared Roots Summary

Professional psychology, counseling psychology, and professional counseling have shared historical roots. This is particularly true for counseling psychology and counseling, both of which emphasize wellness, prevention, early intervention, strength-based approaches, and multicultural perspectives. Moreover, counseling psychology and professional counseling focus on developmental/contextual perspectives including education and work contexts. All three specialties have also adopted similar guidelines for practice, including, for example, multicultural and social justice advocacy competencies.

There is also considerable overlap between U.S. psychologists’ and counselors’ training, program accreditation, and requirements for licensure. All three specialty areas emphasize theory, science, and ethical and effective practice. There are also parallels among psychologists and counseling psychologists’ training and practice in the U.S., U.K., and throughout Europe. A review of requirements for counselors and psychotherapists in Europe shows similar historical and philosophical roots but greater variability in training, for example years and types of schooling, and requirements for practice. This is not necessarily a negative despite calls for standardization, including those by U.S. based-counselor only organizations that will be discussed more fully later.

There is also a great deal of similarity among APA (2002), ACA (2014), BPS (2015), and EAC (2015) ethical standards and, indeed, ethical standards across the helping professions in general. The results of our content analysis of the EPPP and NCE show they assess knowledge in very similar content domains. Moreover, the impact of the U.S. VA on both psychology and counseling cannot be ignored, as the standards developed by the VA have and continue to influence both professions (Hays-Thomas & Lowe, 2000; Mascari & Webber, 2013).

Currently, psychology in the U.S., U.K., and much of Europe are considered established professions, with core identities, professional training, and ethical standards. Similarly, counseling psychology, one of the original APA divisions, appears to have arrived at a level of professional maturity in the U.S. (Heppner et al., 2000; SCP, 2009), in the U.K. (Strawbridge & Woolfe, 2010) and much of Europe. In contrast, leaders in U.S. professional counseling as recently as 2010 were describing themselves as “just beginning to establish themselves professionally [and] often express confusion about their professional identity” (Remley & Herlihy, 2010, p. 24).

Challenges and Opportunities

Psychologists’ and APA’s opposition to master’s level and, at times, doctoral level counselors’ licensure contributed to resentment towards psychologists in the U.S. (Calley & Hawley, 2008) and a vacuum in training, accreditation,
and licensure at the master’s level. This vacuum was filled by professional counselors affiliated with ACA and affiliated organizations, some of whom advocate for a singular professional identity, contending that professional counseling is – and should be – completely separate from psychology and other allied professions. This trend is occurring in the U.S., Europe, and other international venues. If unaddressed, the CACREP-only movement in the U.S. can be viewed as a preview of more things to come internationally.

Misinformation contributes to this position. For example, two long-time leaders in U.S. professional counseling, Remley and Herlihy (2010), claim that counseling is a distinct profession by stating that proactive and strength-based approaches are unique to professional counseling. As another example, Mellin, Hunt, and Nichols’ (2011) qualitative research found that professional counselors endorsed “a developmental, prevention, and wellness orientation towards helping” (p. 140) but mischaracterized psychologists’ and social workers’ orientation and roles. We agree with Mellin et al.’s (2011) suggestion that counselor educators include more accurate information about allied fields in training and promote multi-disciplinary course enrollments as a way of helping counseling students learn more about professional counseling and allied specialties. It also appears that inattention to the shared history and philosophy contributed to the current movement to distinguish professional counseling from its sister professions.

Furthermore, the CACREP standards (2009, 2016), which require instruction in an increasingly narrow definition of counselor identity and new core faculty to hold a doctorate in CES “preferably from a CACREP-accredited program” (p. 6), are heralded as a way to distinguish counselors from psychologists and strengthen the professional identity of counselors. Although this restriction is similar to the APA’s self-study requirement that core faculty in doctoral psychology programs have the training necessary to support the goals of the doctoral program, APA requirements do not require core faculty to have earned a specific degree or give preference to faculty from programs accredited by a particular accrediting body (APA, 2014). BPS (2015) standards for the accreditation of counseling psychology training programs take this one step further, clearly stating the value of interdisciplinary faculty and supervisors. Restricted faculty requirements may enhance one definition of professional identity, but are in opposition to the historical, broader definition of professional counselor identity (Gazzola, De Stefano, Audet, & Theriault, 2011).

Requiring professionals to adopt one singular identity conflicts with the possibility of recognizing and celebrating multiple or intersecting professional identities, which are associated with positive outcomes (Brady-Amoon, 2012; Ponterotto, Casas, Suzuki, & Alexander, 2010). Indeed, the unintended consequences of an involuntary singular professional identity include the potential insularity and stagnation of the greater profession (Brady-Amoon, 2012; Hansen, 2009, 2012).

Services to the public would be unnecessarily reduced if the CACREP (2016) standards become a requirement rather than an option for licensure, school counseling certification, and/or employment. It is likely that otherwise qualified counselors would find it more difficult to become licensed in another jurisdiction and face reduced employment opportunities. Many excellent training programs would be forced to submit to CACREP guidelines or close, as new core faculty in master’s programs in counseling would be restricted to persons with doctorates in CES. It would also be difficult, if not impossible, for master’s programs in counseling to share faculty or courses with programs and trainees in allied fields, including doctoral programs in counseling psychology, and would reduce the influence of counselors and counseling psychologists on training and practice in allied disciplines (Jackson & Scheel, 2013). This is relevant to psychologists, counseling psychologists, and professional counselors, as well
as the general public. There is no evidence to support the position held by CACREP only advocates that further separation, specialization, and restrictive training, accreditation, and licensing standards for master's level professional counselors would result in more effective or ethical practitioners.

Despite claims to that effect, our systematic review, which extends Hollis' (1997) well-respected study, found that with the exception of a few isolated studies (e.g., Adams, 2006), there is no empirical evidence to support the position that graduates of CACREP programs are more ethical and effective than graduates of similar unaffiliated programs. Even the highly touted US Institute of Medicine review (IOM, 2010) that resulted in the recommendation to grant independent practice rights to counselors who graduated from a clinical mental health program accredited by CACREP found no evidence to support the claim that CACREP graduates are better prepared than their counterparts who graduated from unaffiliated programs.

Notwithstanding the above, efforts to require graduation from a program accredited by CACREP for counselor licensure have increased (Mascari & Webber, 2013; Urofsky et al., 2013), and so have challenges to those attempts. In one successful challenge, a broad coalition of counselors and counselor educators, including counseling psychologists, successfully worked to reverse the 2009 New Jersey licensing regulations that would have made New Jersey the first and only U.S. state to restrict initial counselor licensure to persons who graduated from a program accredited by CACREP. Our experience of that successful endeavor, which is beyond the scope of the present article, differs significantly from Mascari and Webber's (2013) and Urofsky et al.'s (2013) perspective and extends Palmer's (2013) narrative and call to counseling psychologists' action. Most significantly, this was an intentional effort to preserve academic freedom. Coalition members argued that accreditation is, and ought to be a voluntary process. They also noted the significant difference between voluntary program-level accreditation and mandatory, to qualify for licensure and employment - program-level accreditation. The concerns were, and continue to be, about the potential impact of CACREP’s singular definition of professional identity including faculty and curricular guidelines that some, but not all, choose.

International Implications

The Journal of Counseling & Development recently published a series of articles on the history, current status, and projected future of counseling in a broad range of international settings. For the most part, these articles portray counseling as an emerging field, often with counseling psychology and psychology. At the same time, many authors in this series called for increased standardization of training, separation from psychology and related fields, and professional identity development in accordance with CACREP definitions.

This does not appear to be a spontaneous response. CACREP and NBCC have been working internationally under the auspices of the International Registry for Counsellor Education Programs (IRCEP) and NBCC-International (NBCC-I) to promote their definition of counseling, separate from counseling psychology and psychology, as well as educational, certification, and licensing requirements (Stanard, 2013). Similarly, the International Network for Quality Assurance Agencies in Higher Education (INQAAHE, 2013), for which Carol Bobby, CEO of CACREP and IRCEP, serves as President, works to establish and promote international higher education standards. However, the inter-relationships among professional fields and the still-to-be addressed challenge of developing culturally congruent counseling in diverse international settings (see Duan et al., 2011) present both opportunities and challenges, especially in areas in which counseling psychology, and psychology as a whole, are emerging. Thus, it is important for counseling psychologists and other interested professionals to carefully monitor and when applicable, counter, efforts to separate international counseling and psychology. Further separation and standard-
ization of one view of a profession is inconsistent with the shared roots and interdisciplinary foundations of counseling and psychology, particularly counseling psychology, in an international context. To illustrate, counseling psychology in the U.K. is uniquely positioned between and embraces the full continuum between psychology’s emphasis on science and counseling’s emphasis on reflective practice (Strawbridge & Woolfe, 2010).

Internationally, counseling psychology is uniquely positioned between psychology and counseling. However, in the U.S., as in the U.K. and indeed much of the world (IAAP, n.d.), counseling psychology is more aligned with psychology than counseling. Individually and collectively, counseling psychologists have benefited from the resources and power of psychology. For example, although counseling psychology is not yet recognized as a specialty, European counseling psychologists are eligible for the general EuroPsy certification while counselors and psychotherapists are not. However, a significant challenge of alignment with a more numerous and powerful profession is the risk of absorption and losing counseling psychology’s distinct identity.

Nonetheless, counseling psychologists in the U.K. promote a professional ethic that honors the individual and promotes a broad definition of evidence to inform ethical and effective practice (BPS, 2015). It therefore follows many reject the commodification of the profession inherent in the imposition of narrowly defined evidence-based treatments, including rigid application of manualized approaches. Similarly, they argue that restrictions or preference for any one theoretical orientation unnecessarily restricts training and practice so counseling psychology trainees are expected to demonstrate proficiency in at least two theoretical frameworks. Consistent with this, a restricted faculty base is also inconsistent with the philosophy of counseling psychology in the U.K. (BPS, 2015).

Similarly, it is incumbent upon faculty and practitioners to consider human needs and economic resources, including sources of and regulations for use of those funds, in conjunction with in developing and implementing prevention and intervention strategies. Economic access is an often overlooked facet of diversity. We, therefore, suggest training programs intentionally incorporate professional history and social justice advocacy that extends beyond the curriculum (Brady-Amoon, Makhija, Dixit, & Dator, 2012). Furthermore, we call upon professionals and professional organizations to consider proposals to require additional training in the context of expected outcomes, including reasonably expected salaries.

**Discussion**

More than fifteen years ago, Heppner et al. (2000) stated that “a challenge for the future is how the various organizations within the counseling profession will respond to both internal and external forces that may affect their future development and interrelationships” (p. 38). Despite distinctions, psychology, counseling psychology, and professional counseling are more alike than different. Moreover, counseling psychologists are uniquely positioned to bridge the gaps between psychology and professional counseling. We can and must do so at the individual, group, e.g., professional association, and systems level to counter the growing movement that seeks to narrow the definition of counseling, to exclude counseling psychologists and restrict training, licensure, and employment to graduates of master’s and doctoral programs accredited by CACREP and its international equivalents, thereby depriving otherwise qualified candidates of options for training and employment.

What can you do? At the individual level, it is important for concerned professionals and professionals in training to educate themselves and others about this growing threat regarding the ever increasing divide, and the opportunities inherent in true intra- and interprofessional collaboration and cooperation. We encourage colleagues in
Europe and other international locations to monitor the work of IRCEP and related organizations as well as requirements for training and registration/licensure in your jurisdiction. For those in the U.S., we recommend networking with colleagues working to counter the growing CACREP-only movement, such as Concerned Counselors (www.concernedcounselors.org), the Alliance for Professional Counselors (www.apccounseloralliance.org), and Counselors for Social Justice, the only ACA division to date to have taken a strong position in favor of diversity and inclusion in counseling, and related organizations. It is also critically important for practicing professionals and professionals in training, to monitor and influence licensing and school counselor certification requirements and employment criteria to prevent and, when necessary, reverse CACREP-only legislation and regulations. At the organizational level, counseling psychologists and allied psychologists can advocate for their organizations to partner with others working to promote inclusion in counseling psychology and allied professions. We need open, honest dialogue about many topics of concern, starting with the growing rift within professional counseling and between professional counseling and psychology, including counseling psychology.

**Conclusion**

Psychology, counseling psychology, and professional counseling have shared roots. There is significant overlap in the history, philosophy, education, and training of all three specialty areas. In addition, research in psychology and counseling psychology forms the foundation for education and practice in all three areas. As such, despite the “narcissism of small differences” (Freud, 1930, para. 4), those who practice counseling professionally, psychologists, counseling psychologists, professional counselors, and others, have much in common.

At the same time, there are differences between psychologists, including counseling psychologists, and professional counselors. Psychologists have achieved an advanced level of education and training, including supervised experience, which far exceeds that of master’s level counselors. There are also important differences between doctoral training in professional psychology and counselor education and supervision (CES). To illustrate, doctoral students in professional psychology in the U.S. must complete coursework in the biological, cognitive, affective, and social foundations of psychology, as well as a culminating one year full-time supervised clinical experience. In contrast, CES doctoral training emphasizes educational philosophy and practice and generally requires 600 hours of supervised experience beyond the master’s degree (CACREP, 2009). An expanded definition of counselor education and professional counselor identity would allow for diversity in faculty and enhance training in professional counseling including specialty areas. In addition, the movement towards integrated and interdisciplinary care offers psychologists, counseling psychologists, and professional counselors an opportunity to work together to affirm shared values, principles, and practices.

The time has come for counseling psychologists and professional counselors to re-affirm our shared professional roots and work together with mutual respect. More specifically, we recommend united action to: 1. reaffirm the shared history, philosophy, and goals of allied fields at local, national, and international levels; 2. reflect and engage in reflexivity concerning our individual and collective role in rifts between allied professions and take appropriate action to foster reconciliation; 3. actively promote and role-model inter-disciplinary/inter-professional collaboration and cooperation at the individual, group, and organizational level; 4. monitor and, when applicable, advocate for accreditation and licensure/supervision regulations that respect shared history/philosophy and levels/types of education; and 5. respect and reaffirm the voluntary nature of accreditation and the purpose of licensing and registration.
In conclusion, psychology is a diverse discipline with multiple, often overlapping, specialty areas, including counseling psychology. The specialties of counseling psychology and professional counseling are characterized by specialized training in prevention, early intervention, and a focus on normal life transitions. Moreover, as this brief systematic review and analysis of the historical roots of three allied mental health specialties shows, counseling psychologists are uniquely positioned to bring extreme separatists from both psychology and counseling together.

Psychology as a profession has matured to a point at which it is unified in its diversity. Science-oriented behaviorists co-exist with humanistic educators. Classically-trained psychoanalysts work with those who practice rational emotive behavior therapy. Counseling psychologists, positioned in the intersection of the Venn diagram of psychology, counseling psychology, and professional counseling, have an important role to play in resolving current controversies. We call upon counseling psychologists, psychologists, and professional counselors to use their training and skills to facilitate interprofessional dialogue, healing, and catalyze future collaboration and cooperation. Nothing less than the future of the “the talking cure” and the unique perspectives of counseling psychologists are at stake.

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