# 3

# Social Justice as the Fifth Force: Theories and Concepts

*Everyone has the right to work, to just and favourable conditions of work and to protection for himself and his family (and) an existence worthy of human dignity. . . . Everyone has the right to a standard of living adequate for the health and well being of himself and his family, including food, clothing, housing and medical care. (U.N. Universal Declaration of Human Rights, 1948)*

*The smart way to keep people passive and obedient is to strictly limit the spectrum of acceptable opinion, but allow very lively debate within that spectrum—even encourage the more critical and dissident views. That gives people the sense that there's free thinking going on, while all the time the presuppositions of the system are being reinforced by the limits put on the range of the debate. (Chomsky, 1998)*

## WARM UP EXERCISE

1. *When you were a high school student, did you ever observe a social injustice? Do you remember what you thought and felt? Did you do anything? Why or why not?*

2. *Do you believe you have power in any part of your life? If so, how do you use this power? What does this feel like?*

3. *Are there social injustices that you wish you could change? If so, what are they?*

4. *Civil rights leaders; outspoken critics of war, slavery, and oppression; leaders of the women's movement; advocates for the poor and disenfranchised; activists promoting same sex marriages; environmental activists; and so many others have taken major steps that frequently placed themselves in danger and at high levels of risk. To what degree would you "step out" and place yourself at risk to fight for a social justice issue you believed in?*

The issues of social justice and human rights draw people from different professions and different walks of life. These concerns transcend socioeconomic boundaries, race, ethnicity, culture, religion, age, and gender. Many people who enter the mental health profession do so based on apprehensions about a variety of social justice issues, such as racism, sexism, poverty, discrimination, and interpersonal violence. The concept of "social justice" is not found in the dictionary. However, there is a definition for the term *justice* in Merriam-Webster's online dictionary that includes the following:

> The maintenance or administration of what is just . . . the administration of the law . . . the establishment or determination of rights according to the rules of law or equity . . . the quality of being just, impartial, or fair . . . the principle or ideal of just dealing or right action. (http://www.merriam-webster.com/dictionary/justice)

It is clear from the definition that the concept of *justice* is most frequently associated with the legal system, with an underlying assumption that justice equates to equal rights, access, and fair treatment.

Based on the definition of *justice,* the concept of *social justice* refers to a just society and expands beyond the legal interpretation of justice and the law. Rather, the concept of social justice, when considered within the context of counseling and psychotherapy, is based on the idea that society gives individuals and groups fair treatment and an equal share of benefits, resources, and opportunities. Striving for justice remains a continuing struggle, since not all individuals or groups receive the same justice, opportunities, or rights in similar situations. This chapter will examine the concept of social justice within the context of the mental health field, with an aim to provide clarity regarding the concept itself and the importance and relevance of social justice and human rights in the work we do as psychologists and professional counselors.

## WHAT IS SOCIAL JUSTICE?

When we consider "social" justice in the mental health field, we are examining a broader perspective than is covered by the more narrowly defined legal aspect of justice. Social injustice incorporates social issues that involve the individual, the family, the community, the wider society, and even the international community. It refers to unfair treatment or inequities that have resulted from racism, sexism, socioeconomics, sexual orientation, religion, ableism, and other "isms," all of which affect quality of life. Social justice constitutes the right to fairness and equity (Bell, 1997).

Social injustices may be experienced in a variety of different ways, ranging from personal affronts to broader kinds of violations that are institutionally based. A social injustice may be a clear and overt inequity—such as denial of entry to a private club based on race, gender, or religion, or a hate crime directed at the person—such as the word *JAP* recently seen by the authors scratched onto the hood of a parked car. Other forms of social injustice may manifest more covertly, such as institutional unwritten policies that prevent people of color and/or women from advancing to senior positions, or discrimination that results in lower pay raises for people who are gay or lesbian or are physically challenged. Table 3.1 provides some examples of the inequalities and unfair treatment of specific groups.

As these examples show, social inequities may arise when there is a lack of acceptance and tolerance for differences, such as intolerance for differences in race, ethnic and cultural group, religion, language barriers, socioeconomic status, disabilities, age, gender, and sexual orientation. These intolerances may lead to discrimination, biases, prejudice, unfair treatment, and, at times, interpersonal violence. Subsequently, social justice is determined by social conditions, and by definition it includes concepts of justice, fairness, and righteousness. In effect, social justice is a response to social conditions that produce inequalities in how people in any given society

**Table 3.1**   Examples of Inequalities and Unfair Treatment of Specific Groups

**Growing Discrimination Among Pregnant Workers**

Even though birth rates are declining, more and more women are saying that they have been discriminated against at work because they are pregnant. This issue has become one of the fastest growing types of discrimination addressed by the Equal Employment Opportunity Commission. The range of jobs in which it is experienced is quite large, from entry level employment to positions that are higher up.

Lawyers believe that in many situations, employers do not realize they are discriminating, but pregnant women have been fired, denied promotions, and pushed to terminate their pregnancies. Employment lawyers also mention that smaller organizations have a fear that women will go on maternity leave during an important time, or that many women will leave at once, leaving behind extra work for their coworkers. One woman was fired a week after telling her manager she was pregnant, because the manager felt she would not be able to drive, which was part of her job. Another woman was laid off shortly after her maternity leave.

The rise in discrimination is important, since women make up more than half of the total work force, and their share in it is expected to grow even more. This type of discrimination also has the potential to cost companies money if the women against whom they discriminate press charges. Pregnancy discrimination has become more prevalent, because of the challenges of the current economy, because more pregnant women are staying at work longer into their pregnancies, and because of stereotypes about pregnant women.

*Source:* Armour (2005).

**Transgender Person, Duanna Johnson, Murdered in Memphis, TN**

Duanna Johnson was found shot to death in the street in North Memphis, Tennessee. A witness heard a gun fire and saw three people fleeing the scene, but the police do not have any suspects. A lawyer, Murray Wells, confirmed that Johnson was his client, saying that she was often in the neighborhood where she was killed. Murray also stated that Johnson was trying to move back to her hometown of Chicago, because she could not afford to live in Memphis any longer. Her apartment did not have electricity, and Murray was helping her buy a bus ticket back to Chicago.

Just months before her death, Johnson was arrested on prostitution charges. She stated that one police officer beat her while another one held her down after making derogatory comments about her sexuality. The beating was videotaped, and the two officers were fired from the police department.

*Source:* Margetts (2008).

**Teenage Boys Not Responsible for the Death of Immigrant, Luis Ramirez**

Two teenage boys were found not guilty of the death of Mexican immigrant, Luis Ramirez. Ramirez died of blunt force to the head, but defendants Derrick Donchak, 19, and Brandon Piekarksy, 17, were acquitted of all charges except for simple assault. The jury that acquitted them was made up of six white women and six white men.

Lawyers for Donchak and Piekarksy put the blame on other teens who were involved in the confrontation with Ramirez and also made Ramirez out to be the aggressor. The night Ramirez died, the group of teens had been drinking and provoked Ramirez and his friend with racial comments, according to the prosecutors. The argument ended with Ramirez dying in the hospital two days after the encounter.

A spokeswoman for the Mexican-American Legal Defense and Education Fund stated that this case sends the dangerous message that a person of a different national origin is less valuable in our society. It also sends the message that people can brutally beat other people to death and get away with it.

*Source:* Grinberg (2009).

gain access and rights to advantages and disadvantages (Miller, 1999). King Davis (1996) nicely summarizes social justice, stating that social justice is

> a basic value and desired goal in democratic societies and includes equitable and fair access to societal institutions, laws, resources [and] opportunities, without arbitrary limitations based on observed, or interpretation of, differences in age, color, culture, physical or mental disability, education, gender, income, language, national origin, race, religion or sexual orientation. (p. 1)

One way to understand social justice is to examine social injustices. To illustrate social injustices, we have chosen a recent example from the U.S. media related to a police arrest. An arrest was made of two faculty members on a major campus in the Southwest region of the United States for an alleged robbery. Two African American faculty members were walking across campus after leaving their offices. Police had reports of two African American men robbing a facility on campus, and the police were searching for the culprits. They stopped the two faculty members for questioning about the robbery. The subsequent denial of involvement and strong responses by the two faculty members led to the police increasing their use of physical force and the ultimate arrest of the two "suspects." After more extensive investigation, the two faculty members were released when it became clear that they did not commit the robbery.

A question that was raised was, what if the robbers had been White? Would the arresting officers have responded differently to the suspects' protestations of innocence and assertions that they were faculty members at the university? Would they have let such suspects go rather than making an arrest and conducting an interrogation? Interestingly, the authors of this book are familiar with a story to this effect, where two male colleagues, both White, were walking across campus at another university. Police approached them and confronted them about a robbery that had just occurred. The colleagues vehemently denied any involvement in the robbery, told police about their positions as professors, and were quickly judged innocent by the officers.

These were two similar situations with two different races that had two different outcomes. This story is multiplied by the thousands with the effects of differences in race, ethnicity, gender, sexual orientation, social class, disabilities, age, and so forth, and it is substantiated by research: There are biases and prejudices so that people, based on who they are, do not always receive equal treatment (Adams et al., 2000).

To further illustrate the robbery situation noted above, let's say one African American man and one White American man were taken into custody regarding the robbery. It may appear that both men were subjected to the same legal process. However, the type of legal process may differ in several ways. For example, the treatment they receive from the initial contact with law enforcement (e.g., how they are questioned, taken into custody, etc.), the type of legal representation they receive, the type of sentencing they receive (if found guilty) or the penalty given may be totally different according to their race or ethnicity. (See Table 3.2 for more information regarding minorities on death row.) Researchers (e.g., Harris, 2002; Mauer, 1999; Miller, 1996; Walker, Delone, & Cassia, 2003) have found that African Americans tend to receive

**Table 3.2** Percentages of Minorities on Death Row as of 2003

| Jurisdiction | Percentage |
|---|---|
| U.S. military | 86% |
| Colorado | 80% |
| U.S. government | 77% |
| Louisiana | 72% |
| Pennsylvania | 70% |

*Source:* American Civil Liberties Union (2003).

more negative and prejudicial treatment from law enforcement and the legal system than White Americans. For example, Sommers and Ellsworth (2001) found that White jurors are more susceptible to making prejudiced decisions regarding Black accusers. In fact, in 82% of the death penalty sentencing reviewed by the U.S. General Accounting Office (1990), the victim's race was found to influence the likelihood of the perpetrator being charged with capital murder or receiving the death penalty. That is, those who murdered Whites were found more likely to be sentenced to death than those who murdered African Americans.

## Relationship Between Power and Social Justice

The concept of social justice has an interesting relationship with power. People in positions of power can perpetuate social injustices, intentionally or unintentionally, if they are intolerant, hold prejudicial beliefs, harbor a desire to maintain the status quo, or lack awareness or understanding about racial, ethnic, and cultural differences. They can maintain their power, positions, and wealth by both consciously and unconsciously, and intentionally or unintentionally, treating designated groups of people unfairly.

At times, people in positions of power and privilege may disregard those who are less powerful. This may be due to ignorance, lack of awareness, or simply not being concerned about the lives of people who are powerless. These types of actions frequently contribute to a continuation of unfair treatment and inequity in services, resulting in continued oppression and personal behaviors and decisions that support and cultivate discrimination and unequal institutional policies and practices. The perpetuation of the power differential is underscored by the fact that many of those in power have the information, knowledge, and skills to access resources and peers who have the ability to influence policies and funding priorities that could promote greater equity, equal opportunities, and fairness.

There is great potential to access support toward change, equality, equal treatment, and similar resources for all people.

A good example of this is the inequity in wealth and power in the United States. Only a small group, the top 10% of the U.S. population, receives nearly 50% of all the income earned in the United States (Saez, 2009). The same type of power base can be seen when we examine representation in positions of power; in modern-day America, people of color and women are still grossly underrepresented in Congress and as CEOs. Women make up 51% of the U.S. population. In Congress, however, in 2009, 83% of members of the House of Representatives and Senate were male (Center for American Women and Politics, 2009). Breaking these figures down by race shows that 77% of members of Congress are White, with 76% in the House and 81% in the Senate ("The United States Congress," 2009). Currently, only 25 women head Fortune 1000 companies—this represents only 2.5% of all Fortune 1000 CEOs (Catalyst, 2011), and 23% of college presidents at private institutions are women (American Council on Education, 2007). Similarly, in 2008, women made up 46.7% of all law students but only 34.4% of all lawyers and 18.7% of all partners (Catalyst, 2009). On the global level, the top 400 income earners in the United States make as much in a year as the entire population of the 20 poorest countries in Africa—over 300 million people (Project Censored, 2005). Imbalances such as these continue to promote an unequal distribution of power and have the strong potential to both maintain and promote social injustices and human rights violations.

## THEORIES OF SOCIAL JUSTICE IN PSYCHOLOGY AND COUNSELING

Given the numerous examples of social justice, Lee and Walz (1998) concluded that it is psychotherapists' and counselors' moral responsibility to address significant social, cultural, and economic challenges that may have a negative impact

on the psychosocial well-being and development of clients. We would concur, suggesting that mental health professionals and counselors have an ethical and moral obligation to work toward social justice and address larger social problems within the therapeutic context. This requires that the mental health professional be able to understand the relationship between their clients' cognitive and affective functioning and their behaviors and interactions within their larger world milieu.

What this means for psychologists and counselors is that the larger environmental issues that negatively impact a client's life, the broader systemic factors that influence a client's psychological health, and the effect of institutions such as schools or the workplace must all be viewed within the larger perspective of psychological well-being. When working toward social justice and human rights, these ecological variables provide a broad, deep context that shapes and contributes to an individual's mental health. Within a social justice model, these variables play a key role in the therapeutic interventions of helping professionals.

Humphreys (1996) argued that psychologists can effectively provide more in-depth, sustained benefit to society through the betterment of social institutions and changes in social policy rather than through psychotherapy. Vera and Speight (2003) purport that counseling psychology is uniquely positioned to shift gears toward social justice work, given an emphasis on personal strengths and resilience and on psychoeducational practices, interactions, and dynamics within the larger ecological context, fostering a generally broader, more holistic view of people. We would concur, and we suggest that client problems are frequently reactions and responses to deep-seated issues rooted in the social, cultural, political, and economic world of the client. Hence it is important that we as psychologists and counselors look at the larger or macro picture.
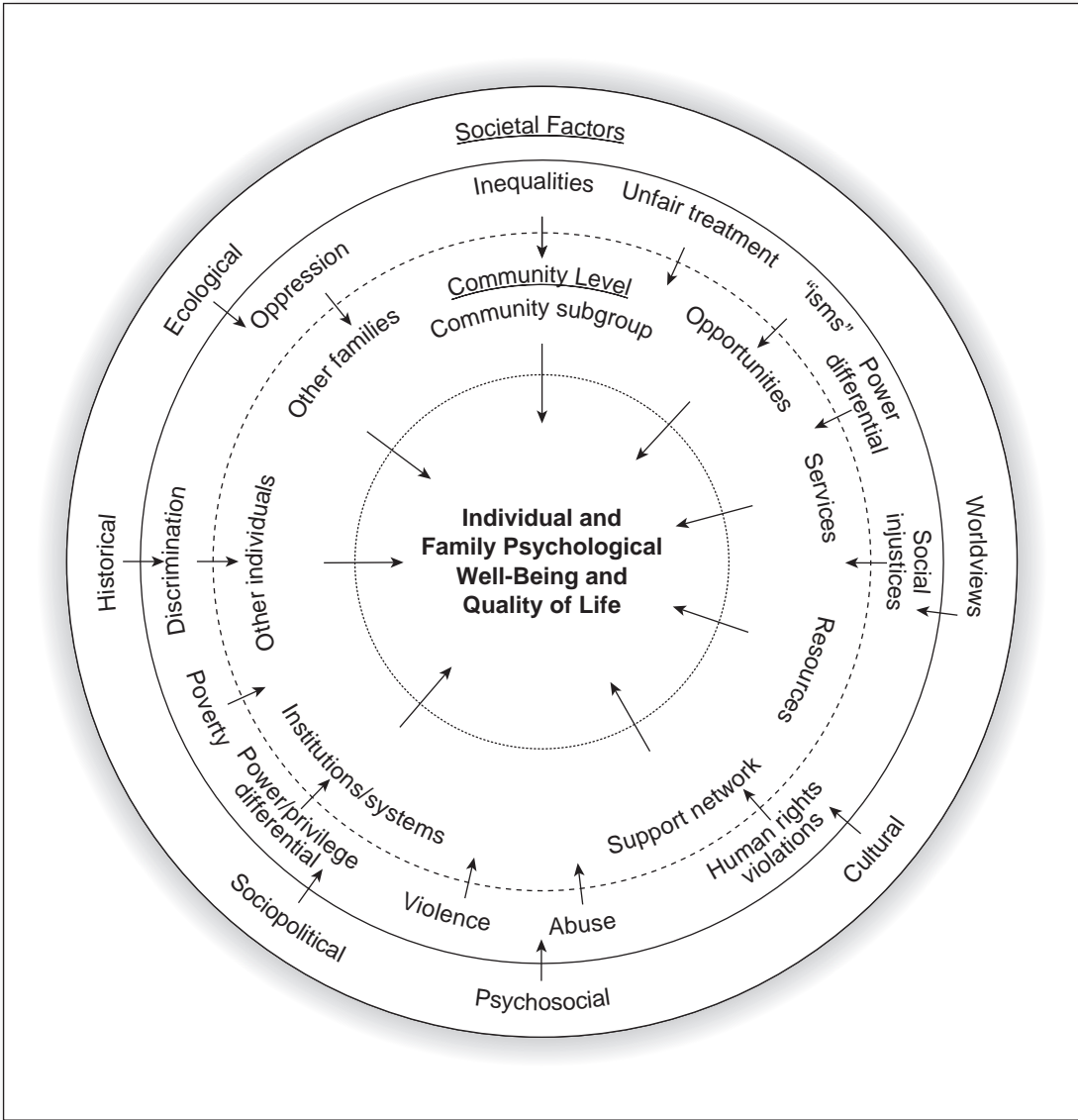
Figure 3.1 illustrates the influence and impact of societal and environmental factors on individuals and their families and communities. As the figure demonstrates, individuals and their families do not live in isolation, and what affects society may also influence them directly or indirectly. For example, being discriminated against due to religious differences may be experienced on multiple levels, from an individualized situation of being verbally or physically abused to a broader social situation in the community, where there may be experiences of harassment, differential treatment in the workplace or school, stereotypical views from the media, unfair treatment in the health and legal systems, a difference in the quality of services, and so on. Each of these situations impacts the individual's psychological well-being and quality of life.

Reducing the problem to simply an intrapsychic or isolated personal issue without consideration of the larger systemic issues may be in one sense "band-aiding" a presenting problem. This results in a short-term solution at the expense of addressing deeper-rooted social issues, subsequently running the risk of insidiously perpetuating the circumstances that created the problem in the first place. For example, when a client came to me (Fred) to discuss his frustration and anger about being poor, it was unacceptable to only help him come to terms with his feelings about living in poverty. Taking a deeper look at the social and economic circumstances that contributed to this client being poor and continuing to be poor, I worked not only with the presenting feelings but also helped the client employ strategies to get himself out of poverty, to assist his family in breaking the cycle of poverty, and to facilitate skills that would promote successful ways to become an advocate for himself and his family to change his situation. I took this tack in psychotherapy rather than simply helping the client come to terms with his feelings of frustration and anger about being poor.

Examples like this are endless, (see Table 3.3) and we would agree with our colleagues and strongly assert that it is our moral, social, and

**Figure 3.1**   Macro Approach to Social Justice and Human Rights

Societal Factors

Inequalities   Unfair treatment

Community Level
Community subgroup

Ecological   Oppression   Other families   Opportunities   "isms"   Power differential

Historical   Discrimination   Other individuals

**Individual and Family Psychological Well-Being and Quality of Life**

Services   Social injustices   Worldviews

Resources

Poverty   Power/privilege differential   Institutions/systems

Support network   Human rights violations   Cultural

Sociopolitical   Violence   Abuse

Psychosocial

ethical responsibility to more directly address these issues in a proactive manner, rather than ignore larger contextual issues that affect our clients' psychological well-being. To fully understand and appreciate how the field has moved from an individual perspective to larger social justice issues, an overview of the historical perspective of social justice is discussed below.

| **Table 3.3** U.S. Poverty Statistics, 2009 |
|---|

- The official poverty rate in 2009 was 14.3%, up from 13.2% in 2008.
- In 2009, 43.6 million people lived in poverty, up 3.8 million from 2008.
- Poverty rates remained unchanged for Asians (12.5%) and increased for Hispanics (25.3%), non-Hispanic Whites (9.4%), and Blacks (25.8%).
- For children under 18 years old, the percentage in poverty increased from 19.0% in 2008 to 20.7% in 2009. The poverty rate for children under 18 remained higher than that of 18-to-64-year olds (12.9%) and that of people aged 65 and over (8.9%).

*Source:* U.S. Census Bureau (2010).

## Historical Perspective

Although the issue of social justice is not a new concept in the field of psychology and counseling, it has taken professionals in the field a long time to recognize this concept in training and practice. The concept of social action was identified in the writings of Frank Parsons and then later Carl Rogers, who both advocated that the profession respond to social injustices at individual and societal levels (Hartung & Blustein, 2002; McWhirter, 1998). During the same time period, Clifford Beers was advocating for more humane treatment of individuals with mental illness (Tenety & Kiselica, 2000). Early feminist and multicultural scholars criticized the absence of approaches to oppression and inequities in traditional psychological work (Espin, 1994; Sparks & Park, 2000; Sue & Sue, 2008).

In the 1960s there was a strong movement in the United States toward civil rights and against the Vietnam War. These political movements raised the social and political consciousness of many people, including psychologists and counselors. As a result, ethnicity- and race-specific associations were developed in the 1960s and 1970s that responded to erroneous, so-called scientific hypotheses about the intellectual inferiority of Blacks (Jensen, 1969), and the cultural deprivation of minorities (Arredondo & Perez, 2003; Riessman, 1962). See Chapter 2 for more in-depth discussion of this issue.

In May 1971, the *Personnel and Guidance Journal* published a special issue entitled "Counseling and the Social Revolution" edited by Michael Lewis, Judith Lewis, and Edward Dworkin. The aim of the special issue was to highlight social injustices in the counseling profession. It raised questions regarding the psychology and counseling profession's role and suggested that psychotherapists and counselors must not assume a passive role by simply understanding the concerns without becoming active participants in the movement of social change. Other journals have since published special issues focusing on social justice, including *The Counseling Psychologist* with the May 2003 edition, "*Social Justice and Multicultural Competence in Counseling Psychology*," and the November 2004 issue, "*Integrating Psychology and Social Justice: A Training Model.*" More recently the *Journal on Counseling and Development* has published a special issue entitled "*Multiculturalism as a Fourth Force in Counseling: Reviewing our Progress and Charting Our Future*" (D'Andrea, Foster, & Pedersen, 2008). As we discussed in Chapter 2, multicultural counseling and the multicultural competencies provided a foundation from which to address social justice issues. To better understand the foundations of social justice work in psychology and counseling, we will provide a brief summary of its history.

In 1981, the president of Division 17 of the American Psychological Association (APA), counseling psychologist Allen Ivey, commissioned Derald Wing Sue to chair a committee to develop the multicultural competencies. Even though the report was eventually published (Sue et al., 1982), as mentioned in Chapter 2, it was 20 years before the Executive Committee endorsed the multicultural counseling competencies (Arredondo et al., 1996; Sue, Arredondo, & McDavis, 1992). Also, it was not until 2002 that the APA Council of

Representatives unanimously endorsed the multi-cultural competencies (Arredondo & Perez, 2003). In 1987, the American Association for Counseling and Development published a significant position paper on human rights that called for counselors to be advocates for social change (American Association for Counseling and Development, 1987). However, the American Counseling Association (ACA) did not endorse the competencies until March 2003 (ACA, 2003).

## Philosophical Tenets of Social Justice for Mental Health Professionals and Counselors

The philosophy behind social justice is founded on the precepts of liberty and equality that can be traced back to John Locke's libertarian justice model, which emphasized the connection between merit and liberty (Hartnett, 2001; Nozick, 1974; Stevens & Wood, 1992). In Locke's model, it was the responsibility of individuals to make their own decisions and determine their own lives, which is consistent with capitalism, where the premise is that all individuals have an equal opportunity and freedom to determine their own lives and outcomes. A major criticism of Locke's premise was that the idea that everyone had an opportunity was more important than any inequitable outcomes, so that, for example, if social class, racial, or gender inequities became evident, they would not be a problem as long as individuals had opportunities to change the inequalities.

Others have challenged and expanded upon Locke's assertions. Rousseau argued that the freedom of choice should not create unequal opportunities in a society and become institutionalized as status quo (Rawls, 1971). He claimed that government should play a major role in preventing social inequalities even while supporting freedom of choice. The communitarian approach to social justice highlights the process by which power, privilege, and oppression become forces (Young, 1990), emphasizing that there is a need to transform the interplay and progression of dynamics that leads to inequalities rather than address the outcome itself or actual inequalities. Liberation psychology proposes that the field prioritize what has to happen in the future rather than the discrimination and oppression of the past (Martin-Baro, 1994). In contrast, distributive justice (Prilleltensky, 1997) describes the importance of working within the larger sociopolitical context rather than emphasizing the individual as the means to overcome injustices, requiring equality and fairness as an essential component that will foster cultural diversity.

## Relationship Between Multicultural Competencies and Social Justice

As previously discussed in Chapter 2, recent decades have generated significant increases in the literature on multicultural counseling and multicultural counseling competencies. The multicultural counseling competencies provide guidelines for psychologists, counselors, and social workers to be culturally responsive and effective with clients from different racial, ethnic, and cultural backgrounds. We would assert that if helping professionals are committed to multicultural counseling competencies, then there is a natural link to also being committed to social justice. As Derald Wing Sue and his colleagues (1998) stated, "Multiculturalism is about social justice, cultural democracy, and equity" (p. 5). Others (e.g., D'Andrea & Daniels, 1999; Helms & Cook, 1999; Lee & Walz, 1998; Parham & McDavis, 1987; Ridley, Mendoza, & Kanitz, 1994; Thompson & Neville, 1999; Toporek & Reza, 2001) have agreed and advocated for social justice in the mental health field.

To expand on the discussion about the multicultural competencies in Chapter 2, this section will highlight the relationship between multicultural competencies and social justice. In Chapter 2 we discussed the development and the

importance of multicultural counseling competencies to provide a foundation for examining social justice and human rights as it relates to multiculturalism in counseling and psychology. It is important to note that the multicultural counseling competencies have been criticized for not fully integrating issues of social justice (Vera & Speight, 2003). It has been argued that although the idea of social justice has been incorporated into the competencies, and the commitment to social justice is evident, the competencies provide minimal attention to operationalizing the work toward social justice. We would suggest that multicultural counseling competencies and social justice/human rights go hand in hand, so that a clearer understanding of a pathway to integrate and operationalize the two is critical.

Arredondo (1999) explored ways in which the multicultural counseling competencies addressed oppression and racism by identifying such issues as privilege, values, stereotyping, and oppression as key to personal awareness, to knowledge of the effect of sociopolitical influences on self-concept and identity, and to understanding institutional obstacles and diagnostic cultural biases as impediments to social justice. Thus, not only do we as professionals need to be aware of, understand, and acknowledge our personal and clients' cultural backgrounds, value systems, beliefs, prejudices, biases, and privileges, but we must also have the knowledge and skills regarding individual, group, family, community, and system levels of interaction to work toward social justice and human rights and be proactive as social change agents. We concur with Arredondo in our belief that the multicultural counseling competencies have clearly established a foundation for social justice and human rights and truly are the core of ongoing and future work in the integration of mental health with social justice and human rights.

One caution is that we do not fool ourselves as we move forward into the social justice arena. As well-meaning, well-trained, and well-intentioned counselors and psychotherapists, we may have

knowledge and awareness of—and in some cases even skills in—multicultural counseling, yet lack a deeper understanding of how this awareness, information, and skill fit into doing social justice and human rights work. Given the requirements of the Council for Accreditation of Counseling and Related Educational Programs (CACREP) and of the APA for training in multiculturalism, and the adoption of the multicultural counseling competencies by APA and ACA, we would assume that accredited and licensed counselors and psychologists have a basic awareness and knowledge of the multicultural counseling competencies, and hopefully a basic level of skill as well.

Even so, many colleagues' awareness, knowledge, and abilities do not extend to a comprehensive understanding of the profound historical, socioeconomic, political, and ecological issues that impact and drive the need for effective implementation of the multicultural counseling competencies. Furthermore, if there is an understanding of how social justice issues impact our clients, their families, and their communities, there is a lack of knowledge of how to actually do social justice work. As the editors of the Journal for Social Action Counseling and Psychology (Tod Sloan and Rebecca Toporek) have stated, "Our colleagues need more concrete examples of what social change work looks like and of how one might go about reflecting systematically on that" (personal communication, November 7, 2008).

For example, training for some of us may not have included an in-depth, rigorous examination of our own cultural background, privileges, prejudices, and biases; such an examination would contribute to effective multicultural and social justice work. A result of this may be an inadvertent contribution to maintaining the status quo that perpetuates oppression and discrimination, particularly of people who have a history of marginalization and being oppressed (Martin-Baro, 1994; Prilleltensky, 1997). The complexity of these multiple factors that influence our lives and experiences and the subsequent interaction with people who have been or

are oppressed and disenfranchised, combined with the multifaceted intersection of these variables in the world of counseling and psychotherapy, would lead us to say that an essential aspect of training in multicultural counseling is learning how to integrate multicultural competency training and skill development with social justice and human rights work. In fact, leaders in the multicultural movement have established an institute (National Institute of Multicultural Competencies [NIMC]) to assist training programs in addressing multicultural and social justices in their curriculum, teaching, training, and research.

In summary, given the unequal distribution of resources and the historical, sociopolitical, cultural, and ecological factors involved in discrimination and oppression, counselors and psychotherapists can no longer focus only on the intrapsychic dynamics of the client. Traditionally, psychotherapists and counselors have focused solely on individuals and have been apolitical (Brown, 1997), with psychologists supporting this position by arguing that there is a need to focus on the individual in order to understand family and social behavior that promotes injustices (Martin-Baro, 1994; Prilleltensky, 1997). I (Fred) saw an example of this with a client who was experiencing racial discrimination at her employment site. The client was in a work situation where there were subtle and negative comments made to her and others based on their racial backgrounds. For me to work with her by focusing only on intrapsychic issues and helping her adjust to a hostile and oppressive environment would be to assist her with fitting into and adapting to a racist environment. It was my belief that to address this issue in psychotherapy as the client's problem would unconsciously be sanctioning the racism she found in her work environment, and implicitly communicating to her that it was, in fact, her problem. To move beyond the traditional individual framework, I worked with the client on becoming her own advocate for changing the environment and

helped her not only to deal with personal feelings and reactions to the situation, but to assume a role with her colleagues and develop proactive strategies to change the discriminatory and hostile environment.

As this example shows, the interplay between the client's own individual problems and the larger social, political, historical, economic, and ecological world are keys in social justice work. Traditional psychology and counseling have ignored and disregarded the community's and society's overt and covert contributions to the experiences and behavior of clients and families, placing the blame on the individual (Ryan, 1971). Multicultural counseling competencies have clearly set the stage for professionals to "open their eyes" and examine presenting problems, behaviors, and responses not only from the individual's point of view, but also from the macro, ecological, and contextual viewpoints. Thus, in undertaking an analysis of clients' behaviors and their presenting problems, it is critical to include *all* variables, such as the interaction of the family, community, historical, and political perspectives as well as the surrounding ecosystem. These are all important elements that contribute to clients' lives and influence our assessment and intervention strategies.

Social justice is at the very core of multicultural counseling competencies, making it essential that professionals have both the ability to perceive accurately ecological factors that influence clients, and the skills to challenge and address systemic barriers that impede the client's growth, development, quality of life, and psychological well-being (Constantine, Hage, & Kindaichi, 2007; Fondacaro & Weinberg, 2002; Hage, 2003; Prilleltensky & Prilleltensky, 2003; Vera & Speight, 2003). Social justice can be seen as evolving from the civil rights movement, the feminist movement, and the war on poverty, and it is rooted in distributive justice and fair distribution of societal resources (Fondacaro & Weinberg, 2002), so that advantages and disadvantages are equally distributed to individuals or groups in society (Miller, 1999).

The multicultural counseling competencies have similar roots and therefore embrace societal issues and concerns for equity, equal access, and fairness.
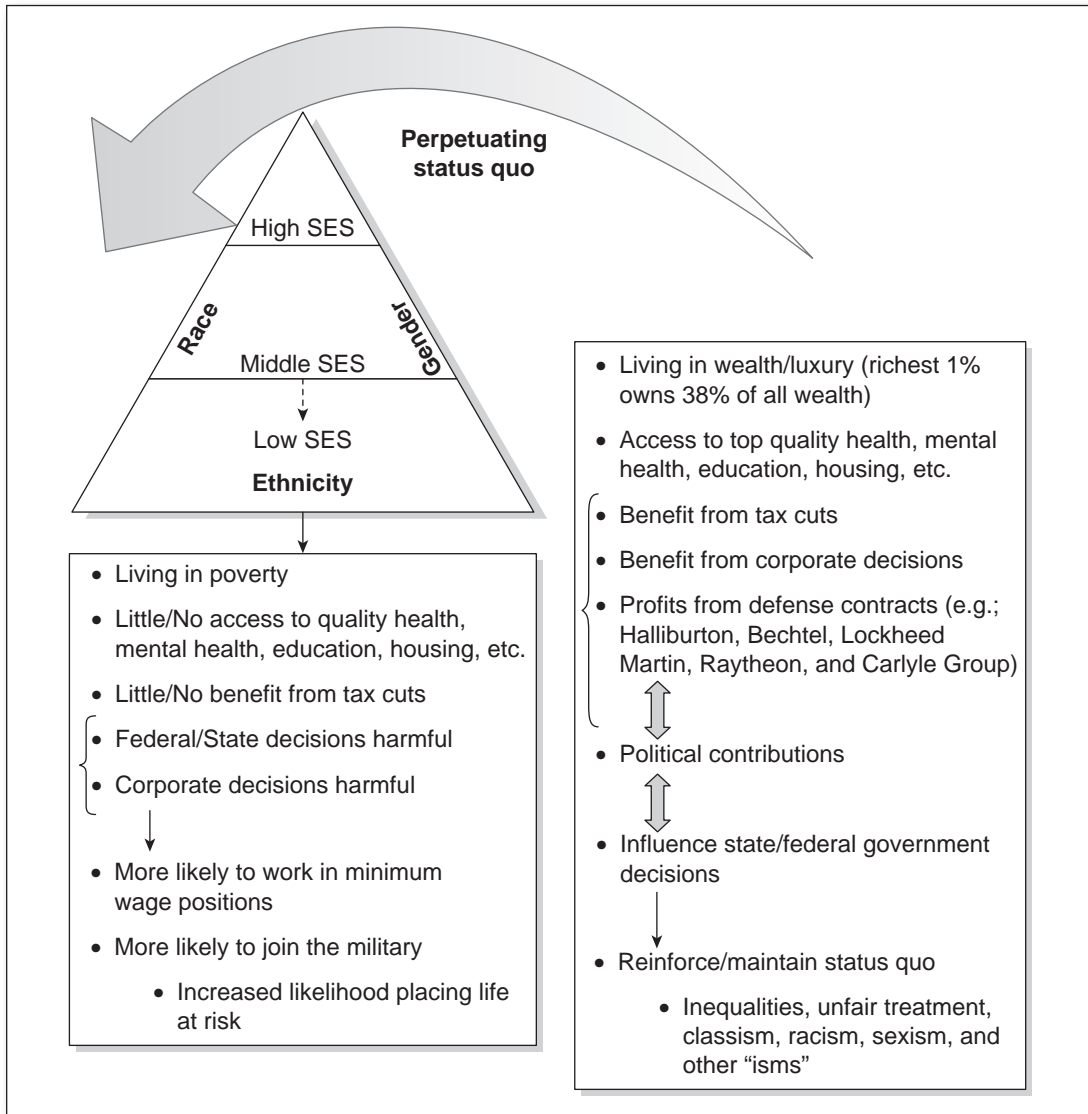
## GOALS FOR SOCIAL JUSTICE WORK

The goal of social justice work is to eliminate unfair treatment, inequities, and injustices in order to create a society where *all* members—regardless of their race, ethnicity, culture, sexual orientation, gender, religion, socioeconomic status, disability, age, or other distinguishing characteristic—are on the same playing field. This requires that *all* people, not just a privileged few, receive an equal distribution of resources, are psychologically and physically safe and secure (Bell, 1997), and have equal access to available resources. Examples of unequal distribution of resources in the United States and globally have been presented.

Economic injustices lead to multiple social injustices. The 10% of the individuals and their related institutional bodies that have the majority of wealth and power in the United States have substantially greater control of what happens within the society compared to the 90% majority of the population who have significantly less wealth and power. The gap between those who have (the rich) and those who do not have (the poor) wealth, resources, and power is widening and is now bigger than it has been since the 1930s (Wolff, 2003). In fact, the middle class in the United States is shrinking, and its former members are joining the ranks of the poor (Dugas, 2003; NOW, 2004). According to the U.S. Census Bureau (2010) 1 in 7 (14.3%—44 million) Americans and 1 in 5 (21%—15.5 million) children are living in poverty. The number of Americans who do not have health insurance is growing (Krieger, 2003), increasing 15.6% in 2004 (Connolly & Witte, 2004) and has now soared to 50.7 million in 2010 according to the U.S. Census Bureau (2010).

The economic decline is particularly acute for the more subordinate, oppressed, or marginalized groups who have less voice or power and greater needs. To illustrate this point, as of 2002, the median net worth of White American households was $88,651, 11 times greater than that of Latina/o families ($7,932) and 14 times greater than that of African American families (Witte & Henderson, 2004). Therefore, ethnic families are far less likely to own their own homes. The home ownership rate for Whites is 74%, while it is 47% for the latter two groups. More than a quarter of African American and Latina/o households own no assets beyond a car (Goldenberg, 2004). Thus, the 10% who have the greatest wealth and power also inherently carry more privilege in a society that allows them to wield their position to establish policies that can enhance or limit opportunities and access to resources for disenfranchised groups of people. Examples of this can be seen with millions of citizens in the United States who have limited health care and mental health care, diminished social services, inadequate housing, lower-quality education in poorer urban and rural school districts, fewer employment opportunities, restricted political representation, unfair judicial treatment, fewer legal rights, and generally reduced human rights.

Those in power not only have more say about immediate issues as noted above, but they also have a significant impact on the future of others and may use their status and wealth to contribute to maintaining directives that are beneficial to those with wealth and power (see Figure 3.2). For example, the wealthiest 10% contribute to political campaigns and influence who will gain access to political control and power. This in turn contributes to financial decisions that may or may not benefit disenfranchised groups and may have deleterious effects on human services such as mental health services, which in turn impacts our work as counselors and psychologists.

**Figure 3.2** Classism in the United States: The Intersection of Race/Ethnicity, Gender, and Class

**Perpetuating status quo**

Race

Gender

High SES

Middle SES

Low SES

**Ethnicity**

- Living in poverty
- Little/No access to quality health, mental health, education, housing, etc.
- Little/No benefit from tax cuts
- Federal/State decisions harmful
- Corporate decisions harmful
- More likely to work in minimum wage positions
- More likely to join the military
  - Increased likelihood placing life at risk

- Living in wealth/luxury (richest 1% owns 38% of all wealth)
- Access to top quality health, mental health, education, housing, etc.
- Benefit from tax cuts
- Benefit from corporate decisions
- Profits from defense contracts (e.g.; Halliburton, Bechtel, Lockheed Martin, Raytheon, and Carlyle Group)
- Political contributions
- Influence state/federal government decisions
- Reinforce/maintain status quo
  - Inequalities, unfair treatment, classism, racism, sexism, and other "isms"

## MODELS IN SOCIAL JUSTICE

To address larger social issues, a number of theories of social justice have been proposed. Collaborative models of change have been driven by system and feminist theories, which have helped redefine power relationships. In turn, restructuring power redefines the dynamics within the therapeutic encounter, so that the therapist-client relationship changes, particularly

as one strives for social equity. It has also been argued that counseling and psychotherapy must include a belief in and commitment to social obligation, which countermands the dynamic of mental health services directly or indirectly cultivating oppressive and unequal power relationships within the therapeutic relationship. Prilleltensky (1997) speaks about the redistribution of power as a communitarian justice model. Others have strongly promoted combating racism (e.g., Carter, 2007; D'Andrea & Daniels, 1999; Helms & Cook, 1999; Sue et al., 2007), and sexism (e.g., Apfelbaum, 1999) in counseling and psychology. Lewis, Lewis, Daniels, and D'Andrea (1998) presented a model to more effectively work with issues of oppression that incorporated consulting, advocacy, education, and being an agent of change in public policy.

An example of this type of social justice work would be to rally mental health proponents to vote for legislation that would provide better funding for a women's shelter. Similarly, Atkinson, Thompson, and Grant (1993) developed a multicultural model to more effectively deal with oppression that expands the counselor's role to embrace being a change agent, advocate, advisor, and consultant. All the above models have a common theme, regardless of their approach, in that they strive to effectively deal with inequalities and unfair treatment through changing the role of the mental health professional in a way that goes beyond traditional counseling and psychotherapy.

In this book, we are proposing a model that synthesizes other models of social change and our own work in social justice and human rights. The model directly targets social justice and human rights and is called the Multi-Phase Model of Psychotherapy, Counseling Human Rights, and Social Justice (MPM). This model is more fully discussed in Chapter 5 and presents a definitive outline for how we as mental health professionals can change from our traditional roles to more effectively and proactively respond to social injustices and potential human rights violations. The model includes various levels that incorporate social justice and human rights interventions at micro, meso, and macro levels in an effort to more clearly define how one does social justice and human rights work in the mental health field. This next step forward to more formally incorporate social justice and human rights into our work is particularly important; Helms (2003) criticized the multicultural counseling literature for focusing primarily on integrating social justice principles at the micro level while ignoring the larger systemic levels. The MPM emphasizes the interplay between micro, meso, and macro levels and subsequently addresses historical, social, political, personal, familial, economic, and community issues that impact the individual and the larger society.

## SOCIAL JUSTICE AND ETHICS

Traditionally in the United States, ethical standards for counseling and psychology are established according to legal precepts that guide moral behavior. But many unethical behaviors are subtle and less available to legal interpretation. In the United States, professional codes of ethics have been established for both counseling and psychology that are aimed at ensuring and protecting clients' rights. One criticism of these ethical codes has been that they are idealistic and too general (Remley, 1985). The ethical standards have also been criticized for being too legalistic, accentuating linear thinking, being too objective at the expense of interplay between subjective and objective linkages, maintaining an emphasis on protection rather than growth, sustaining the status quo rather than focusing on change, and leaning too heavily on legal sanctions (Rowley & MacDonald, 2001). The criticisms lead toward a mentality of *fear in working,* whereby professionals live in fear of being sued and therefore are afraid to take important risks that may be therapeutically beneficial to their clients. Of interest is that the ethical standards generally do not address social justice or human rights issues but rather refer to overarching legal implications and the law

about the "do's and don'ts" in the practice of counseling and psychotherapy.

One fascinating example of defining ethics from a very different standpoint is the *Ethical Framework for Good Practice in Counselling and Psychotherapy* of the British Association for Counselling & Psychotherapy (BACP, 2002). This document presents a national code of ethics from the standpoint of considering values, principles, and personal moral qualities that are more closely aligned with respect for human rights and human dignity, rather than from the standpoint of punishment, consequences for unethical behaviors, and the law. Some of the key concepts of the BACP ethical framework include ensuring the integrity of practitioner-client relationships, fostering a sense of self that is meaningful to the person(s) concerned, enhancing the quality of relationships between people, appreciating the variety of human experience and culture, and striving for the fair and adequate provision of counseling and psychotherapy services. The BACP ethical principles of counseling and psychotherapy go on to list things such as fidelity, client autonomy, a commitment to avoiding harm to the client, and justice and fair treatment for all clients. Finally the ethical framework cites personal moral qualities such as empathy, sincerity, integrity, competence, fairness, and wisdom as part of its framework. The approach is in dramatic contrast to the legalistic perspective taken by similar guiding ethical codes in the United States and other countries, where there is an emphasis on right and wrong behaviors and subsequent punishment for violations.

Although we appreciate the need for and importance of a legalistic approach, given the emphasis in the United States on litigation, we are concerned that the U.S. ethical codes do not address the "human aspects" of mental health services in a proactive and positive manner. When I (Fred) served seven years on a state licensure board for professional counselors, I was party to reviews of all the professional violations for counselors in the state. It was striking that there were no guidelines that promoted healthy client-counselor relationships such as

those in the UK, but rather strict laws that guided ethics and professional behavior. Consequently the professionals knew when they did something wrong, but they did not have guidelines for a more positive approach to their work that would provide a framework for promoting the healthier and more positive psychological well-being of their clients. Our comments in this section about ethical guidelines present a different way of thinking about what we normally take for granted—in this case ethical codes—and suggest that we could theoretically incorporate other perspectives that move more toward a social justice and human rights paradigm.

## United Nations Universal Declaration of Human Rights

It is appropriate at this point to mention the Universal Declaration of Human Rights, although international human rights and social justice issues will be discussed in Chapter 15. Although the U.N. may seem far removed from the work you may do in your local community, region, or even nationally, its broad international perspective has implications for our work as counselors and psychotherapists. The thread that connects the Universal Declaration of Human Rights to psychology and counseling, particularly when we assume a position of incorporating social justice into our work, is the fundamental theme of equality, human rights, and social justice for all people. Inherent in both the Universal Declaration of Human Rights and the practice of psychotherapy and counseling is an individual or group's basic needs and rights to food and nutrition, accessible housing, education, medical care, the opportunity to vote and participate in the democratic process, the right to a safe and productive life free of discrimination and oppression, and opportunities to exercise free choice and free speech.

Since the mental health profession does not have documents that provide guidelines and precepts to follow with regard to human rights,

the Universal Declaration of Human Rights offers interesting and appropriate guiding principles that can help define our work. The helping profession's fundamental aim is similar to that of the declaration in ensuring first and foremost that individuals or groups have a right to meet their basic needs that is underscored by physical and psychological safety and protection. Once this fundamental baseline of human rights is achieved, then individuals can move on to address more complex levels or stages of development, fostering optimal personal, cultural, and social growth and development and psychological well-being.

Similar to the focus of the U.N. declaration, the focus of the mental health professional should be proactive or purposeful to prevent and intervene in situations that create inequities and injustices for individuals and groups of people. Thus, in the absence of an existing human rights document for the United States, the Universal Declaration of Human Rights provides a framework from which mental health professionals can address issues of injustice and equality and promote the social, psychological, physical, and spiritual health of individuals, families, communities, and organizations. This relates to cultivating diversity and acceptance of all individuals despite their socioeconomic status, age, disability, gender, ethnicity, sexual orientation, or racial background, and is imperative in ensuring maximum growth and the development of potential for individuals and marginalized groups of people.

For example, mental health professionals and counselors can assist individuals to access their right to education, their right to social services, their right to due process of the law, or their right to accessible housing. In any of these areas, individuals have the right to equal opportunities to achieve success, to grow, and to access services despite their gender, ethnicity, socioeconomic background, living conditions, religious beliefs, sexual orientation, political beliefs, and so forth.

In summary, while the U.N.'s Universal Declaration of Human Rights and the fields of psychology and counseling are vastly different, there are distinctive parallels and overlaps between the two. The declaration provides a much needed guideline regarding social justice and mental health that is thus far absent in the mental health field in the United States. The declaration has the potential to help us think differently about our role as mental health professionals, striving for equality for all and the opportunity for optimal growth and development within a safe environment. (The Universal Declaration of Human Rights is appended in its entirety to the end of this chapter.)

## SOCIAL JUSTICE: A FIFTH FORCE

Traditional psychology and counseling training has focused on theories and skills, with little attention to other variables that are related to psychotherapy and counseling process and outcome. The primary purpose of psychotherapy and counseling is to promote an individual's well-being and mental health. Given the challenges of daily life, globalization, changes, and transitions, it is clear that for mental health professionals and counselors to be truly effective, they need to move beyond their traditional role of providing psychotherapy and counseling. What may appear to be effective during psychotherapy and counseling is limited, since it is easily erased once clients leave counseling sessions and interact with the real world outside of therapy.

As we always tell our graduate students in training and the counselors and psychologists that we supervise, "Much of the real work happens outside of therapy." It is important that we find out how the benefits of the hard work and countless hours we spend with clients in actual psychotherapy can be sustained once they leave us. How do we help clients to maintain their progress, and not have the change and hard work they are doing be undermined by compelling circumstances once they are back in their families, workplaces, schools, and communities? This is particularly important given that traditional helping paradigms have

focused on individual psychotherapy regardless of the therapist's theoretical orientation (e.g., cognitive, behavioral, humanistic) toward changing the individual's behavior, thoughts, and/or feelings. The social justice model framework suggests that, with the emphasis on changing *only* the individual, we, as mental health professionals, have neglected to look beyond the individual to the other important and highly influential factors in clients' lives.

One reason for the overemphasis on individuals in psychology and counseling may be the underlying assumption that individuals maintain full and ultimate control over their lives and subsequently their environment. But unfortunately not everyone starts on an equal playing field, and some people have many rights and privileges, while other people have minimal or sometimes no rights or privileges (see Table 3.4). This can be seen where laws forbid gay or lesbian individuals to marry, where there is a paucity of educational resources and licensed teachers in urban poor public schools as compared to schools in richer suburban communities, or where large numbers of American citizens do not have access to health care and mental health care insurance in order to receive the support they desperately need.

These types of injustices require larger systemic changes in order to affect *all* individuals from diverse cultural, racial, and ethnic backgrounds. Such change requires mental health professionals to go beyond their traditional role of changing only the individual, and to understand and advocate for equality and justice in the larger society, hence changing systems (Pedersen, 1987). It has been argued that by providing traditional services, mental health professionals are "being hand-maidens of the status quo" and are therefore unintentionally helping "to perpetuate various forms of oppression in our society" (D'Andrea, 2002, p. 4), a role of which they are probably unaware.

Awareness regarding multiculturalism has been heightened during the past decade so that most counseling and psychology training programs have a multicultural component. However, the extent and depth to which multiculturalism and diversity are addressed varies from program to program (Pieterse, Evans, Risner-Butner, Collins, & Mason, 2008). Regardless, multiculturalism and diversity in the mental health field have been important concepts during the late 20th century and are now important in the 21st century, as the demographics in the United States become

**Table 3.4**   Discrimination Against Same-Sex Couples

**Fairness and Equality for All**

Nancy Gill, who had been employed with the U.S. Postal Service for 21 years, was not able to insure her spouse under her health plan. Randell Lewis-Kendell was denied a Social Security payment when his spouse of 30 years passed away. Keith Toney could not change his last name on his passport after he got married. They were all married to same-sex partners in the state of Massachusetts and still live in the state, but they are unable to receive spousal benefits under the Defense of Marriage Act (DOMA). This act states that in order to receive these benefits, the marriage must be between a man and a woman. These three couples, along with twelve other couples, sued the federal government, arguing that DOMA denies them equal protection under the law. These couples are not arguing that they should be allowed to get married. They are already married in the state of Massachusetts and should therefore receive the benefits and full rights of marriage. President Obama is opposing DOMA, but this lawsuit brings up questions about the fairness of denying benefits to same-sex couples, married or not.

*Source: "The Benefits of Fairness"* (2009).

increasingly diverse, and inequities become more marked and identified by marginalized populations.

The multicultural competencies (Sue et al., 1998) provide core components for us as psychologists and counselors to use to become more culturally responsive. Although awareness of ourselves and our clients is an essential ingredient of being culturally responsive, it is important that, along with understanding, acknowledging, accepting, and appreciating cultural differences, we go the next step and become proactive in addressing issues of equity, "isms," oppression, discrimination, power differentials, and institutionalized oppression. The focus is therefore not on changing the individual (Pedersen, 1987), but changing systems and policies on multiple levels. All of this leads us to take on somewhat different roles than our training and/or typical protocols have defined, as we redefine ourselves within a social justice paradigm that emphasizes being proactive in changing systems and establishing a more equitable distribution of power and resources so that all people can live with the same rights, dignity, safety, and resources (Goodman, 2001).

As a result of the above, a new professional affiliate group, Counselors for Social Justice (CSJ), was established in the American Counseling Association (ACA). CSJ recognized that for the counseling profession to remain a viable and relevant part of the mental health care system in the 21st century, it must move beyond the traditional helping paradigm and adopt a new role that includes not only counseling individuals, groups, and families, but also being proactive in advocacy and social change. Thus, CSJ promotes embracing and endorsing a new perspective by acknowledging cultural oppression—such as heterosexism, racism, sexism, ageism, and ableism, and by providing culturally sensitive counseling while working toward eradicating these types of oppression in the wider society. Furthermore, CSJ embraces multicultural, feminist, postmodern, constructivist, and gay/lesbian/transgender theories rather than traditional counseling theories, since these nontraditional theories more

adequately address issues of oppression and injustice (D'Andrea, 2002).

Twenty-five years ago, the group Psychologists for Social Responsibility (PsySR) was created. PsySR is an independent, nonprofit organization that applies psychological knowledge and skills to build cultures of peace with justice. The membership consists of psychologists, students, and other social justice advocates in the United States and around the world. The goal of PsySR is to develop and promote resources for creative, nonviolent, participatory approaches to the most pressing social issues of our time (http://psysr.org).

Multicultural counseling has been identified as the fourth force in counseling and psychology (Pedersen, 1991). Given the strength and importance of acting on social issues, social justice in our opinion is definitely the fifth force in counseling and psychology as suggested by others (Pack-Brown, Tequilla, & Seymour, 2008; Ratts, D'Andrea, & Arredondo, 2004). This would relate to social justice charting new territory and focusing on social issues within society. Although multicultural competencies and the multicultural movement address many of the issues related to social justice and human rights, the specific emphasis on social inequities and social change is not their primary focus; thus we would suggest expanding the multicultural movement to a fifth force, social justice and human rights.

## The Role of Social Justice Counselors

To truly address social injustices in the 21st century, we as counselors and psychotherapists must move beyond our traditional roles of individual counseling that historically have neglected social problems. It is important that our work incorporates the promotion of change through advocacy for clients and their families and communities, and that it involves taking risks and challenging injustices at organizational, institutional, and societal levels. We must move beyond

the role of remediation particularly, as D. W. Sue (1995) pointed out, when counselors and psychotherapists are often working with clients who are victims of oppressive policies that fail to achieve equality. This requires graduate programs to do more effective training of students regarding (a) organizational change and systems skills, (b) strategies to access systems, (c) different ways of practicing our trade as mental health professionals, (d) new models of supervision that go beyond traditional individual therapeutic precepts, and (e) associated research to substantiate evidence-based mental health and social justice outcomes.

In this new role, it is important that psychotherapists and counselors view clients from more of an ecological viewpoint. To omit environmental influences on clients' lives and their experiences of oppression and discrimination, and to emphasize solely their intrapsychic issues, would be ineffective in addressing social justice and human rights issues and would essentially maintain and reinforce the status quo (Prilleltensky, 1997). We have one cautionary note, though, about determining the influences on our clients' lives and the aspects of inequity, unfairness, discrimination, or oppression that have affected them: We must ensure that we consult and clarify with clients what these issues are before we make judgments and decisions about how to empower them, and about what issues are important for them within the social justice and human rights areas.

Ironically, we have noticed that there is a great deal of discussion and agreement about empowering clients, while the professional makes all the decisions regarding the problem, diagnosis, treatment, and follow-up. True therapeutic partnerships are an integral part of social justice and mental health work, so that one must avoid hiding behind the *cloak of professionalism*. Full participation of the client in the process of counseling or psychotherapy is fundamental to social justice and human rights work, whereby the professional is an active, highly engaged participant in the change process and partners with an equally active and highly engaged client or group of clients.

This was highlighted over 30 years ago in Freire's (1973) work, when he posed the question of whether or not the client is best prepared "to understand the significance of an oppressive society? And who suffer the effects of oppression more than the oppressed?" (p. 22). A more recent example was given in two articles we wrote outlining a process of empowerment for African American high school girls through the Empowerment Groups for Academic Success (EGAS) approach (Bemak, 2005; Bemak, Chung, & Siroskey-Sabdo, 2005). In these articles, we described true empowerment that went beyond rhetoric. Another way to talk about empowerment is to look at helping professionals who truly understand and address issues of social justice as people doing so *with* their clients rather than *for* their clients.

For mental health professionals and counselors to ignore the rich wealth of knowledge that clients bring to the mental health encounter creates a power differential and reliance on the professional for expertise. This "banking concept" that was coined by Freire (1973) implies that clients are helpless and passive recipients who are reliant on the counselor or psychotherapist to "deposit" information and help change the client's world when there is a need for systemic intervention. The banking concept generates unhealthy dynamics between therapists and clients and more insidiously reinforces a traditional status quo, maintaining clients as dependent without equal power, and professionals in a position of control over clients' lives.

If we are to be successful in promoting social change aiming toward greater justice and rights, then it is essential that we develop alliances with people who are marginalized and oppressed (Nelson, Prilleltensky, & MacGillivary, 2001). An example can be seen in an African American female client who comes to us wanting to improve her life as a parent and wife, but feels disempowered in her relationship with her husband and her supervisor at work. The social justice work with this client would be to foster her own power

within and outside of the therapeutic relationship so that she feels increasingly comfortable to assert herself with the therapist as well as with those in the world around her. Thus, the dynamics are consistent—the client is powerful within and outside of therapy.

A new role for counselors and psychotherapists would also emphasize other types of responses that go beyond traditional psychotherapy and counseling, such as advocacy, the development of prevention and intervention programs, outreach programs, the promotion of social action in partnership with clients and their families and communities, and so on. These new roles would be as important as the traditional role and not in any way be secondary or of less importance. This is consistent with Sue's (1995) contention that engaging in proactive and preventative approaches is essential to address historical and current oppression.

We would concur and suggest that individual counseling and psychotherapy may offer only a superficial "band-aid" that neither heals the client nor addresses the deeper social and political problems facing clients, that maintains a professional passivity, and that often focuses on remediation. In fact, Prilleltensky (1997) has called therapeutic remediation reprehensible, while Albee (2000) has strongly criticized remedial treatment that doesn't change social conditions. Taking the example of the female client above, to ignore her oppression as a Black woman and simply discuss how she might feel better with her husband and supervisor at work would not touch the deeper issues related to being a woman, to being African American, and to the interaction between race and gender and feelings of powerlessness. We would assert that her ability to advocate for herself and receive our support in undertaking self-advocacy is critical in the therapeutic relationship. Developing strategies that help her to prevent the feelings of helplessness in the future, and to change the dynamics of her relationships with her family members and supervisor, should be regarded as equally important as and not mutually exclusive to psychotherapy and counseling (Vera & Speight, 2003). This will be further

discussed in Chapter 5 on the Multi-Phase Model of Psychotherapy, Counseling, Human Rights, and Social Justice (MPM).

## Characteristics of a Social Justice Worker

Mental health professionals and counselors are in an ideal role to take on social justice work. We have been trained in counseling to sharpen communication and listening skills to more effectively work with our clients, their families, and community concerns. In addition, we also understand group dynamics and group process as well as system dynamics. However, additional qualities are needed for social justice and human rights work. Chapter 10 presents the characteristics of a social justice leader. Below is a discussion of the unique characteristics of social justice workers.

## Counselors and Psychologists as Political and Social Activists

As we have discussed, we as counselors and psychologists have a responsibility to address the social issues that affect our clientele. To simply ignore the social problems and the political decisions and priorities that provide a context for those social ills is to contribute to many of the problems that bring our clients to us in the first place. Domestic violence, lead poisoning, substance abuse, racial discrimination, sexual harassment, environmental health concerns, poverty, and so forth, all lead to individual, family, and community mental health problems. For example, ignoring political decisions about policies and funding allocations means that we are treating the symptoms and not the source.

There are endless examples of such issues that are relevant for counselors and psychologists. Defining a county budget for education defines the quality and priority of what is funded for a school district. Funding has implications for

afterschool programs, which in turn have ramifications for the opportunities that are available for students in the afternoons and weekends. Districts with more activities, and more diverse activities, reach more children, who then do not have idle and unproductive time after school and on weekends. This has been demonstrated with chess programs, school-organized community volunteer programs, weekend and midnight basketball games, and so forth.

Another example is the recent controversy about torture. To stipulate that as professionals, counselors and psychologists should not weigh in regarding their opinions and should take a neutral stance, is to play a part in allowing and sanctioning the use of mental health trained professionals to engage in the practice of torture.

A third example relates to budgeting. If we as counselors and psychologists do not share our beliefs and opinions about mental health needs with legislators, we are excluded from the discussion about funding allocations. Instead, it is critical that we provide feedback and input to our county, state, and national elected officials and to our professional associations, rather than just passively assume that these decisions are made without input. We are in a unique position to see patterns and trends of social problems, and we have the potential to contribute to the discourse and direction of our local and national society. It is important for us to be active, take a stand, and have our voices heard about these types of political and funding situations in order to address the social problems that underscore many mental health issues.

## DISCUSSION QUESTIONS

1. Think about what social justice means to you. How would you describe social justice? After reading this chapter, has your definition of social justice changed?

2. Think of a social justice issue that you would like to address as a psychologist or counselor. What would be the first step that you would take to address this issue?

3. Approach someone in your family and one of your friends, and ask them what they believe about social justice.

   a. Do they have similar or different definitions of social justice?

   b. Do they have different definitions than you have?

4. Find a local newspaper, and locate an article that you believe describes an injustice for an individual or a larger group of people.

   a. Is the injustice clearly understood by those who are affected by this issue or not?

   b. What do you imagine would be the role of a mental health professional in this situation?

5. When you read some of the statistics in this chapter about imbalances in income, salaries, access to health care, education, and so forth,

   a. How do these statistics impact you?

   b. Are any of these statistics new to you?

6. Your client is Mrs. Fox. She is a 72-year-old African American woman. Her family doctor referred her to the community agency you work for. Mrs. Fox seems to be forgetting things; she is very sad, irritable, and "bored." It seems Mrs. Fox has been having arguments with her relatives more frequently, and she does not feel she is useful anymore. Mrs. Fox used to help to take care of her grandchildren, but she started to get sick and forget important things, and she got very impatient. Her family doctor prescribes ibuprofen for her complaints. Her insurance does not cover any type of psychological assessment, and her family seems to struggle financially. Her doctor thinks she might be developing some sort of dementia or depression.

   a. Can you identify some of the social injustices in this case? List them.

   b. What are some of those injustices that are institutional or part of the system? Are some of them based on race, age, or gender?

   c. What is your ethical and moral role as counselor/psychologist?

7. The chapter discusses how the multicultural counseling competencies have set the stage for professionals to "open their eyes" to face the real problems from a systemic and ecological perspective.

a. How is social justice "opening your eyes" to human rights?

b. What are some of those prejudices and barriers you still need to work on?

c. How will this new information help you to challenge the status quo of today's systems?

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# United Nations Universal Declaration of Human Rights

December 10, 1948 –Universal Declaration of Human Rights
The United Nations

### Article 1.

All human beings are born free and equal in dignity and rights. They are endowed with reason and conscience and should act towards one another in a spirit of brotherhood.

### Article 2.

Everyone is entitled to all the rights and freedoms set forth in this Declaration, without distinction of any kind, such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status. Furthermore, no distinction shall be made on the basis of the political, jurisdictional or international status of the country or territory to which a person belongs, whether it be independent, trust, non-self-governing or under any other limitation of sovereignty.

### Article 3.

Everyone has the right to life, liberty and security of person.

### Article 4.

No one shall be held in slavery or servitude; slavery and the slave trade shall be prohibited in all their forms.

### Article 5.

No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment.

### Article 6.

Everyone has the right to recognition everywhere as a person before the law.

### Article 7.

All are equal before the law and are entitled without any discrimination to equal protection of the law. All are entitled to equal protection against any discrimination in violation of this Declaration and against any incitement to such discrimination.

### Article 8.

Everyone has the right to an effective remedy by the competent national tribunals for acts violating the fundamental rights granted him by the constitution or by law.

### Article 9.

No one shall be subjected to arbitrary arrest, detention or exile.

### Article 10.

Everyone is entitled in full equality to a fair and public hearing by an independent and impartial tribunal, in the determination of his rights and obligations and of any criminal charge against him.

### Article 11.

(1) Everyone charged with a penal offence has the right to be presumed innocent until proved guilty according to law in a public trial at which he has had all the guarantees necessary for his defense.

(2) No one shall be held guilty of any penal offence on account of any act or omission which did not constitute a penal offence, under national or international law, at the time when it was committed. Nor shall a heavier penalty be imposed than the one that was applicable at the time the penal offence was committed.

*Article 12.*

No one shall be subjected to arbitrary interference with his privacy, family, home or correspondence, nor to attacks upon his honour and reputation Everyone has the right to the protection of the law against such interference or attacks.

*Article 13.*

(1) Everyone has the right to freedom of movement and residence within the borders of each state.

(2) Everyone has the right to leave any country, including his own, and to return to his country.

*Article 14.*

(1) Everyone has the right to seek and to enjoy in other countries asylum from persecution.

(2) This right may not be invoked in the case of prosecutions genuinely arising from non-political crimes or from acts contrary to the purposes and principles of the United Nations.

*Article 15.*

(1) Everyone has the right to a nationality.

(2) No one shall be arbitrarily deprived of his nationality nor denied the right to change his nationality.

*Article 16.*

(1) Men and women of full age, without any limitation due to race, nationality or religion, have the right to marry and to found a family. They are entitled to equal rights as to marriage, during marriage and at its dissolution.

(2) Marriage shall be entered into only with the free and full consent of the intending spouses.

(3) The family is the natural and fundamental group unit of society and is entitled to protection by society and the State.

*Article 17.*

(1) Everyone has the right to own property alone as well as in association with others.

(2) No one shall be arbitrarily deprived of his property.

*Article 18.*

Everyone has the right to freedom of thought, conscience and religion; this right includes freedom to change his religion or belief, and freedom, either alone or in community with others and in public or private, to manifest his religion or belief in teaching, practice, worship and observance.

*Article 19.*

Everyone has the right to freedom of opinion and expression; this right includes freedom to hold opinions without interference and to seek, receive and impart information and ideas through any media and regardless of frontiers.

*Article 20.*

(1) Everyone has the right to freedom of peaceful assembly and association.

(2) No one may be compelled to belong to an association.

*Article 21.*

(1) Everyone has the right to take part in the government of his country, directly or through freely chosen representatives.

(2) Everyone has the right to equal access to public service in his country.

(3) The will of the people shall be the basis of the authority of government; this shall be expressed in periodic and genuine elections which shall be by universal and equal suffrage and shall be held by secret vote or by equivalent free voting procedures.

*Article 22.*

Everyone, as a member of society, has the right to social security and is entitled to realization, through national effort and international co-operation and in accordance with the organization and resources of each State, of the economic, social and cultural rights indispensable for his dignity and the free development of his personality.

### Article 23.

(1) Everyone has the right to work, to free choice of employment, to just and favourable conditions of work and to protection against unemployment.

(2) Everyone, without any discrimination, has the right to equal pay for equal work.

(3) Everyone who works has the right to just and favourable remuneration ensuring for himself and his family an existence worthy of human dignity, and supplemented, if necessary, by other means of social protection.

(4) Everyone has the right to form and to join trade unions for the protection of his interests.

### Article 24.

Everyone has the right to rest and leisure, including reasonable limitation of working hours and periodic holidays with pay.

### Article 25.

(1) Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control.

(2) Motherhood and childhood are entitled to special care and assistance. All children, whether born in or out of wedlock, shall enjoy the same social protection.

### Article 26.

(1) Everyone has the right to education. Education shall be free, at least in the elementary and fundamental stages. Elementary education shall be compulsory. Technical and professional education shall be made generally available and higher education shall be equally accessible to all on the basis of merit.

(2) Education shall be directed to the full development of the human personality and to the strengthening of respect for human rights and fundamental freedoms. It shall promote understanding, tolerance and friendship among all nations, racial or religious groups, and shall further the activities of the United Nations for the maintenance of peace.

(3) Parents have a prior right to choose the kind of education that shall be given to their children.

### Article 27.

(1) Everyone has the right freely to participate in the cultural life of the community, to enjoy the arts and to share in scientific advancement and its benefits.

(2) Everyone has the right to the protection of the moral and material interests resulting from any scientific, literary or artistic production of which he is the author.

### Article 28.

Everyone is entitled to a social and international order in which the rights and freedoms set forth in this Declaration can be fully realized.

### Article 29.

(1) Everyone has duties to the community in which alone the free and full development of his personality is possible.

(2) In the exercise of his rights and freedoms, everyone shall be subject only to such limitations as are determined by law solely for the purpose of securing due recognition and respect for the rights and freedoms of others and of meeting the just requirements of morality, public order and the general welfare in a democratic society.

(3) These rights and freedoms may in no case be exercised contrary to the purposes and principles of the United Nations.

### Article 30.

Nothing in this Declaration may be interpreted as implying for any State, group or person any right to engage in any activity or to perform any act aimed at the destruction of any of the rights and freedoms set forth herein.

*Source:* Retrieved from http://www.un.org/en/documents/udhr/index.shtml