Leadership and Advocacy: A Personal Philosophy

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Abstract

Leadership and advocacy are foundational components in establishing professional counseling as a relevant mental health discipline that meets the needs of different populations. Counselor credentialing organizations specify standards for the development of leadership and advocacy in graduate programs, particularly at the doctoral level. This paper provides a personal philosophy of leadership and advocacy for an emerging counselor educator. It includes a brief overview of the current literature on leadership and advocacy, and outlines the theories of leadership and model of advocacy to which the writer subscribes. The paper concludes with reflections from the writer regarding goals and intentions in implementing and developing his leadership and advocacy counselor identity.
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*Good leaders must first become good servants.*

– Robert K. Greenleaf

**Leadership and Advocacy: Review of the Literature**

In the vast field of mental health, counseling uniquely stands as a profession founded on wellness (Sweeney, 2012) embodying a holistic approach in both theory and practice by incorporating body, mind, and spirit. In 2010 the American Counseling Association finalized the definition of counseling as “a professional relationship that empowers diverse individuals, families, and groups to accomplish mental health, wellness, education, and career goals” (Kaplan, Tarvydas, & Gladding, 2014, p. 368). Our counselor identity is grounded in the roles and responsibilities we carry out as educators, researchers, supervisors, and administrators, i.e., leaders and advocates, outlined in the American Counseling Association *Code of Ethics* (2014).

The establishment of counseling organizations including the Council for Accreditation of Counseling and Related Educational Programs (CACREP, 2015), the National Board of Certified Counselors, Inc. (NBCC), and state licensing boards has allow for professional counselors to be licensed (Sweeney, 2012), a significant achievement in recognizing counselors as leaders and advocates in mental health. Today the mixing of disciplines and credentials in the field of counseling has resulted in a major struggle for the profession, i.e., the development of a unified professional identity (Spurgeon, 2012). Our counselor identity is what inspired leaders in the field of counseling to advocate for our profession, “legitimizing counseling as a profession on par with other helping professions such as psychology and social work” (Bobby, 2015, p. 8). If we as counselors do not identify ourselves as counselors with pride when engaging with others, then the profession of counseling would not exist (Bobby, 2015).
Leadership and advocacy knowledge and skills were recognized as a core component in counselor training in the national preparation standards of CACREP (2009). CACREP instituted standards for counselor education programs seeking accreditation, stating that new counseling faculty hired from 2013 and onwards are expected to have their terminal/doctoral degree in counselor education. This major shift referenced the importance of preparing future counseling professional leaders and advocates to teach, counsel, research, and supervise in counselor education (Sweeney, 2012), which significantly influences the establishment of a strong counselor professional identity (Spurgeon, 2012). Advocacy through effective leadership is important not only for the longevity of our counseling profession, but for the individuals, communities, societies, and nations we seek to serve (Sweeney, 2012).

Based on a review of the literature in the area of counselor leadership research few scholarly articles, mostly qualitative in design, address counselor leadership development (Lincicome, 2015). However, research supports that leadership is a set of traits that can be learned (Osteen, Owen, Komives, Mainella, & Longerbeam, 2005). According to Lewis (2012), researchers in the field of counseling have adopted various theories of leadership including trait theories that utilize the Big Five personality constructs to predict leadership. Behavioral theories focus on initiating structure, i.e., organizational tasks, and considerations, i.e., relational tasks. Contingency theories are condition and style dependent. Leader-Member Exchange Theory values employee satisfaction and performance; and the charismatic, transactional, and transformational leadership theories focus on inspiring followers through words and actions (Lewis, 2012).

The field of counseling has also adopted various models for professional advocacy (Chang, 2012). One such model is the Chi Sigma Iota’s six advocacy themes that were identified
during the 1998 Counselor Advocacy Leadership Conferences I and II. Eriksen’s (1997, 1999) model focuses on participant observation and interviewing key informants; and the three-tier model of advocacy focuses on counselor biases, activities that impact clients, and community collaboration. While the TRAINER model integrates social and professional advocacy in the training of new advocates/leaders (Chang, 2012). Currently, university counseling programs have been focused on developing student leaders “in order to provoke the awakening of one’s talents to be able to develop a versatile and heuristic leader: [the manager, educator, and motivator leader]” (Barreto, 2012, p. 231). Therefore, counseling programs are developing a culture of leadership that includes faculty-modeling leadership, instruction of leadership skills, mentoring programs, and facilitating opportunities for students to participate in leadership roles (Meany-Walen, Carnes-Holt, Minton, Casey, Purswell, & Pronchenko-Jain, 2013).

*The first responsibility of a leader is to define reality.*

*The last is to say thank you. In between, the leader is a servant.*

– Max De Pree

**Personal Philosophy of Leadership and Advocacy**

As an emerging leader and advocate, my personal leadership model draws on aspects of the Charismatic, Transactional, and Transformational leadership models. A charismatic leader is one who inspires others through both words and actions (Lewis, 2012). Personally, I hope inspiration will involve creating a vision that is clearly articulated to individuals I serve with the aim of improving the status quo. Inspiration will also include healthy risk taking to ensure that my created visions are realized through self-sacrifice, and taking personal and financial risks. I am also deeply committed to being sensitive to and responsive of the needs, emotions, and wants of those I serve, i.e., being self-aware, dutifully seeking on maximizing the abilities of
individuals. Finally, I hope to aspire towards novelty, i.e., bringing fresh and welcomed ideas and decisions to the table that are both realistic and practical (Conger & Kanungo, 1998).

Drawing from the transactional leadership model, the focus is on initiating structure, while the focus of the transformational leadership model is one that values consideration, support, and participation of all parties (Lewis, 2012). I believe that both of these qualities are also necessary components for me to be an effective leader and advocate. Specifically, I hope to be capable to operate and interact with other individuals and organizations in a professional manner based on contingent reward. I believe it is important for me to be an active leader and advocate who is willing to identify when individuals, groups, and organizations are deviating from established best practices (regulations, standards of care) and take necessary corrective action, and/or having the capacity to intervene when established best practices are not met.

As a transformational leader, I hope to use my positions as a counselor educator, researcher, counselor, and supervisor to instill pride in the counseling profession, and actively partner with students, clients, organizations, and marginalized groups, and gain their respect and trust based on my actions. I desire to set high but realistic expectations for myself, and those I seek to serve, and help my students, supervisees, and clients focus their efforts in realizing those expectations. I will seek to encourage and promote intellectual conversations that focus on being rational, while carefully engaging in finding solutions to challenges. Finally, I will strive to interact with each individual (student, supervisee, client, research participant, colleague, employee, business partner, stranger) in a personable, respectful, and loving manner (Robbins & Judge, 2010).

In relation to developing my advocacy philosophy, I will draw on the TRAINER model by Hof, Dinsmore, Barber, Suhr, and Scofield (2009) with the aim of “promoting professional
identity, increasing the public image of counseling, developing interprofessional/intraprofessional collaboration, and promoting legislative/policy initiatives” (Lewis, 2012, p. 100). By utilizing this advocacy model, I hope to conduct needs assessments to identify client populations in need of services; and respond to those populations with the help of ally groups. I will articulate the content and logistics for meeting the needs of client populations by partnering with others who share my vision and are willing to serve these populations. I hope to implement plans to meet the needs of client populations while formally evaluating and making adaptations to meet emerging needs. My focus will be networking with ally individuals, groups, and organizations that are collectively meeting the needs of client populations, and collaborate with these parties to generate advocacy plans and initiatives. I will evaluate the process of meeting the needs of client populations by requesting feedback from all involved, i.e., helpers and members of the client populations who receive our services. Finally, I will engage in reviewing the entire process to assess if the interventions initiated to meet the identified client populations met the professional advocacy goals, before determining what steps to take next (Chang, 2012).

Nobody cares how much you know, until they know how much you care.

– Theodore Roosevelt

**Personal Action Plan**

According Cashwell and Barrio Minton (2012), counselor educators engage in leadership and advocacy through the process of “servanthood,” i.e., serving some cause beyond oneself in which he/she believes. This includes offering one’s self, experiences, and wisdom to one’s students, supervisees, clients, research participants, colleagues, employees, business partners, and strangers. As an emerging leader and advocate and aspiring counselor educator/faculty member, I believe that there are a number of ways to achieve the leadership and advocacy
initiatives set out in my personal philosophy. I earnestly desire to further develop my leadership and advocacy style and simultaneously assist others by promoting mentorship activities. This might involve partnering with expert faculty/colleagues and learning how to formulate, apply, and present at state, regional, and national conferences. I can also take on the role of an advisor to doctoral and masters students supporting them in presenting at graduate student conferences, and encouraging their leadership and advocacy development as emerging leaders in the field. I can also encourage faculty and students to engage in leadership and advocacy initiatives by collaborating in research projects studying, developing, and/or building on clinical best practices to meet the mental health needs of specific populations.

By working from a servant-leader perspective and integrating leadership qualities from the charismatic, transactional, and transformational theories, I can work on goals that include being actively involved in my CSI chapter to further develop leadership and advocacy counselor identity for students and myself. Another goal might be partnering with community resources that allow students, faculty, and/or counselors to engage with members in the community and help meet/serve various mental health needs.

**Conclusion**

As I begin to formulate my role as a leader and advocate in the field of counseling, I am valuing the process of being involved in the roles of serving others: students, clients, peers, faculty, and marginalized populations. I hope to inspire those I work with to become actively involved in counselor leadership and advocacy, being structured and firm when necessary, while being supportive, encouraging, and personable at all times. My desire is to become better equipped at modeling counselor leadership and advocacy to others, continuing the experiential learning process that I am experiencing through meaningful mentors.
References


