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## Mental Health Counselor: Is This Career For You?

by Bekah Myroup

(English 1102)

**Y**ou're in high school, or perhaps your first year of college. You're overwhelmed with college brochures, tuition costs, and class registration. On top of all that, your friends and family keep asking you what your major will be, and you have no clue! You do know, however, that you want to work with people to help them solve their problems or understand themselves better. If you're interested in a "helping profession," but don't really know if you're cut out for it, take a look at the following questions.

Are you:

- an empathetic listener?
- a person that friends are comfortable coming to for advice or to share their problems?
- interested in psychology and why people do the things they do?
- willing to work hard in school and pursue a master's degree?
- motivated when you see someone overcome a difficult life problem?

If you answered yes to at least a few of the questions, I may have the ideal career for you: Mental Health Counseling. While the name may sound a bit daunting, it is just a fancy title for those who help a wide variety of people deal with or overcome difficulties in their lives or careers. If this interests you, read on as we explore this profession more in depth. We'll look at what a mental health counselor (or MHC) does, how much they earn, the types of people they work with, the education requirements, some current issues in the field, and how your personal beliefs can be incorporated into your counseling.

### **Job Description, Work Environment, and Wages**

Let's begin our exploration by looking at the necessary characteristics, work environment, salary, and job outlook of a mental health counselor.

According to the United States Bureau of Labor Statistics, the job of a mental health counselor (or MHC) can be described as working "with individuals, families, and groups to address and treat mental and emotional disorders...such as depression, anxiety, addiction and substance abuse, suicidal impulses, stress, trauma, low self-esteem, and grief" (United States). In addition, this type of counselor may give advice on jobs and careers, and be involved in community projects ("Mental Health Counselors"). MHCs must be good listeners and critical thinkers to diagnose their clients' problems, express themselves clearly, and be sensitive to their clients' difficulties. They are able to remain calm and in control when resolving conflicts, as well as having the flexibility to work in a wide variety of environments, such as a private office, a large-group meeting area, or even their own home. In addition to these skills, MHCs must exhibit self control, stress tolerance, integrity, and sensitivity towards their clients. These characteristics will make the MHC appear professional, and foster a relationship of trust between them and their client.

Additionally, as a MHC it is imperative for you to deal with your own problems effectively. Some people are extremely skilled at helping others overcome difficulty, but when it comes to their private lives, they are a mess. If your own problems are weighing you down and preoccupying a lot of your time, you will not be able to show genuine concern for others or assist them. When MHCs understand themselves and handle personal problems calmly and successfully, they can more effectively help others to change behavior or deal with problems, declare the authors of *Careers in*

*Mental Health: A Guide to Helping Occupations* (Schmolling, Burger, and Youkeles). However, don't get me wrong; you don't have to be perfect for this career. If you have dealt well with baggage in your past, you can relate to your clients and give them personal examples as encouragement.

If this type of work sounds like it will fit your personality, then I have even more good news for you. The projected growth of this occupation is extremely high, at least 20%, and from 2008 to 2018, 50,100 additional MHCs will be needed, according to O\*NET OnLine, a database which contains detailed information on a wide variety of careers ("Mental Health Counselors"). The Bureau of Labor Statistics calculated that in 2008, approximately 113,300 mental health counselors were practicing, and their median wage was \$36,810 per year, depending on the facilities in which they were employed, with those working in the local government earning the most (United States). The job prospects in this field are extremely promising, especially for students just beginning their degrees or those already in graduate school. If this trend continues and you work to the best of your ability in school and your internships, you can be nearly certain of obtaining a job as a mental health counselor.

### **Who Are Your Clients?**

Once you've been hired or started your own counseling practice, you will start receiving clients. Each client will be unique, and will come to you with their own set of problems. Depending on what type of facility you work in, whether community or private, you may be counseling individual clients, families, or a large group of people. These people could be dealing with "family, parenting, and marital problems; suicide; stress management; problems with self-esteem; and issues associated with aging and mental and emotional health" ("Mental Health Counselors"). In addition, you may work with substance abusers, domestic violence offenders, or addicts seeking to stop their destructive habits.

According to Paul Schmolling (clinical psychologist), William Burger (social psychologist), and Merrill Youkeles (social worker), the authors of *Careers in Mental Health: A Guide to Helping Occupations*, some clients are willing to admit their problem and actively seek to cope with it or overcome it. However, other clients may come to counseling only because they are forced to or know they should, and they may be unwilling to change their ways. In this situation, the first thing a counselor must recognize is this insincerity. They must learn "to be blunt and to confront the addict with his or her immaturity" (65). For example, counselors must address the addict's problem directly and suggest practical ways for the addict to change.

You must also remember that you are working with people, and, since no two people are exactly alike, you will have to tailor your treatments to each individual client. A therapist or counselor's goal is help others deal with their problems successfully, so you should not rush to diagnose a client's issue or use the currently popular solution as a quick-fix for their problems. Dr. Howard Rosenthal, a professor in St. Louis's Community College Human Services department, states that it is important to individualize methods and be flexible to use different treatments based on what the individual client needs, even if this means resorting to small talk to get an uninterested client talking about their problem. This may sound like a challenge, but as you gain experience throughout college and graduate school, you will become more confident and competent to identify what an individual client needs. As your clients are able to see their progress and become motivated to continue working hard to overcome or deal effectively with their problems, you, too, will be motivated and encouraged.

### **Education Requirements and Licensing**

At this point, you may be excited and saying to yourself, "Ok, this career sounds amazing! I'm ready to start counseling *now!*" However, as with all worthwhile things, a career in mental health counseling requires hard work and many years of school. The U.S. Bureau of Labor Statistics

outlines the education requirements for mental health counseling, which include obtaining at least a master's degree in counseling, involving 48-60 hours of study and a certain amount of "supervised clinical experience." Licensure is usually required, depending on a counselor's specialty and the state they wish to practice in. This process can demand at least 3,000 hours or 2 years of supervised experience (after receiving a master's degree), attending continuing-education classes each year, upholding the profession's standards, and passing the state exam. However, some states allow counselors to take the test from the National Board for Certified Counselors, instead of the state test.

If you're anything like me, you just went from excited to overwhelmed. Spending at least six years in college and two years gaining experience is a huge commitment of your time, money, and energy. If this occupation is something you're passionate about, though, it is a small price to pay to do what you love for the rest of your life.

Some simple steps to take now would be to talk to your guidance counselor and start looking for colleges that you like which offer undergraduate degrees in counseling, psychology, or social work (these all provide a good base for a master's degree as a MHC). If your school offers introductory classes in sociology, psychology, or anthropology, work them into your schedule to give yourself a taste of this field of study ("Mental Health Counselors"). Perhaps you can spend a day shadowing a person who works as a counselor or in a related profession, or find an internship with a business or non-profit organization. If you are seriously considering becoming a MHC, keep your eyes open for and actively seek opportunities for you to learn more and gain experience.

### **Current Issues**

Like any profession, Mental Health Counseling has its own share of controversies and issues. The emergence of new counseling theories over the years has sparked conflict, and they are continually being tested by professionals in this field. We will look at two competing theories: solution-focused counseling and problem-focused counseling. Additionally, the growth of multiculturalism in our society has created a need for counselors to better understand what different cultures value and believe. To understand where this profession is currently at, it is important for us to briefly explore these two issues.

Due to the postmodern world that we live in, and which places a great deal of focus on an individual's worth and achievements, two theories are currently at odds: problem-focused counseling and solution-focused counseling. In an article from the *Journal of Mental Health Counseling*, Jeremy M. Linton compares these two methods of treatment for people struggling with substance abuse (SA) or addiction: solution-focused counseling and problem-focused counseling. Problem-focused counseling or PFC, Linton states, believes that SA is a problem that clients will deal with their whole life and that they have no power to conquer. It is only when they admit their denial of their problem that they can work toward abstinence. This is commonly known as the "disease model," since addiction is seen as an incurable disease that clients can never fully recover from. Once a client reaches abstinence, they must strive to curb their problem every day. This problem-focused counseling seeks to find a client's deficits and fix their problems.

Believing that PFC places too much emphasis on a person's problem and their struggle to overcome it, Linton argues for solution-focused counseling (SFC). This approach, stemming from a postmodernist worldview because of its focus on individuality and relativity of treatment, emphasizes a client's personal interpretation of their problem and their ability to solve it. Unlike the disease model, solution-focused counselors state "that an understanding of the problem is not necessary in order to change it and that the problem and its solution may not even be related" (Linton 300). Linton cites studies in his article which have determined that this type of counseling has been effective for domestic violence offenders, as well as clients who are unwilling to receive treatment. While the method of treatment in problem-focused counseling is the acknowledgment of denial, mental health counselors (MHCs) who use the solution-focused approach use three types of questions

to treat their clients. These questions help the client to identify their coping skills, their goals for once counseling is finished, and how they can start acting now to conquer their problem. Some examples of questions that a counselor might ask his or her client during a counseling session are, "How would you act if you didn't have this problem?" "How confident are you that you can overcome this problem?," or "During the times when your problem does not occur, how are you behaving differently?" SFC focuses on the positive aspects of a client's life and their strength and desire to overcome their SA or addiction problem.

Though Linton states some advantages of using SFC, such as its flexibility, focus on the motivation of the client, and emphasis on a client's desire to change, he also identifies some of SFC's difficulties. He writes that "[c]ritics often assert that the approach appears too simple and is, therefore, ineffectual" (307). While it does appear to be successful, Linton acknowledges that solution-focused counseling does need continued research to prove its effectiveness. Additional difficulties include the fact that the theory has yet to deal with "physiological aspects of SA and addiction," as well as the difficulty stemming from the public's view of the solution-focused theory. He recognizes that the SFC approach may not work for every client, but states it can be tailored for almost anyone.

Linton's article is a good example of how changes in counseling are reflecting our changing society. American society is very self-centered, geared toward an individual's happiness and success. Many people no longer believe in absolute values or truths; therefore, they interpret the world through their own experiences or beliefs. For this very reason, counselors now must focus on their clients as individuals, and help him or her to achieve mental wholeness according to his or her relative idea of true health.

This leads us to the second issue which is causing conflicts in counseling today: multiculturalism. Just as changed perceptions of the world cause difficulty in counseling, so do cultural heritages. Because of immigration, the United States has become even more diverse, and groups that once made up a small fraction of our population are growing. Counselors now work with people who not only have a wide variety of problems, but also those who come from vastly different cultural backgrounds. Additionally, "There is a consensus among scholars that people develop ideas and beliefs about illness and disease from different aspects of culture such as religion, spirituality, family relationships, social roles, language, and values" (Santiago-Rivera, Arredondo, and Gallardo-Cooper 47). Two of the largest minority groups in the U.S. are African Americans and Hispanics. Both groups come from a distinct culture, and, therefore, a mental health counselor must understand their backgrounds, what they value, and what they believe about illness.

According to the authors of *Counseling Persons of African Descent: Raising the Bar of Practitioner Competence*, many of whom are professors who hold doctorate degrees in psychology, "African descent people have a history with a mental health system in which they have been underserved, misdiagnosed, inappropriately classified, and treated with differential methods when compared to their White counterparts" (Ajei, et al. 9). Because of this fact, counselors must try to better identify and understand their clients' past. Many African religions believe that world and everything in it have come from one source, and that all living things contain a spirit from this life force. Taking this into account, practical advice for counselors would be to form "genuine connections" with African clients, to stress the client's "positive aspects," pay attention to body language, and helping them identify their fears so they can understand themselves better (104-105). For true healing to be possible, many people of African descent believe that there must be an "interconnected equilibrium between the body and soul..." (62). To effectively counsel African Americans, it is imperative to recognize their belief in the spirituality of human beings and the importance they place on the character of strength.

Just as African Americans have their own set of cultural beliefs and values, so do Latinos. In the book *Counseling Latinos and la familia: A Practical Guide*, the authors, who are all either

practicing psychologists or counselors, state that a very integral part of the Latino culture is the value of “*familismo*, a preference for maintaining a close connection to family” (Santiago-Rivera, Arredondo, and Gallardo-Cooper 42). A child's biological parents, as well as *los compadres* (their godparents), play a crucial role in the development of their children, and emphasize the necessity of good social skills. Therefore, a counselor should utilize the already-strong family relationships in the Latino culture to help their Latino clients. The family is basically a built-in support network, so *los padres* (the parents) and *los compadres* (the godparents) can encourage and assist a family member going through counseling. Similar to the African American culture, many Latinos hold very strong spiritual beliefs. These beliefs may influence them to see a “faith healer,” rather than undergoing more traditional treatments.

Additionally, there are distinct gender roles in the Latino world. “*Marianismo*” refers to women, suggesting that “they must be pure, long-suffering, nurturing, and pious,” and “[*m*]achismo” refers to a man's responsibility to provide for, protect, and defend his family” (qtd. in Santiago-Rivera, Arredondo, and Gallardo-Cooper 49). These rigid roles could potentially cause problems for Latino couples, especially if one partner is deviating from the traditional expectations. Consider the following practical example:

Carmen and Luis were *LatiNegros* (Latinos who consider themselves to have African roots) who had been married for 12 years. Carmen requested marital counseling to address her doubts about Luis's commitment in their relationship and possible infidelity. She complained that at social gatherings, he often ignored her, which made her feel hurt and alone. . . .The counselor recognized the cultural value of *respecto* (respect), and gender role socialization conflicts as important and set the goal of helping the couple develop more adaptive skills. (88-89)

It turned out that Carmen also sensed disapproval from Luis's family, and was very stressed with taking care of their three children, two of whom had disabilities. Luis felt that Carmen was compromising his leadership role in public, and wanted more respect. As a result of counseling,

Luis praised his wife for the outstanding job she did as a mother and wife and described his family role as one of a provider and disciplinarian. Carmen recognized that she expected Luis to be more involved in parenting as her father had been. . . . Luis also recognized his public need for authority and the importance of being more attentive to Carmen in social gatherings. (90)

By addressing cultural expectations, the counselor was able to help Carmen and Luis understand the root of their problem and what they each desired or needed out of their relationship. A counselor must be attentive to the cultural needs of his or her clients, and be open to using many different treatment methods.

### **Mental Health Counseling and Christianity**

The way that someone's cultural heritage or religious beliefs impact how they view themselves and the world has always interested me. So many worldviews exist in our culture today, and, as we saw in the controversies previously discussed, these worldviews influence counseling theories and techniques. I personally hold a Christian worldview, which means that I believe there is one true God, that the bad things we do separate us from God, and that only through Jesus Christ's death can our relationship with God be restored. After studying different religions, I have come to the conclusion that Christianity is true, and I am whole-heartedly surrendered to following God. Because of my convictions, I would not be able to counsel people without addressing their spiritual

health, in addition to their mental or physical health.

Christianity holds that all human beings are inherently bad, and because of this fact, are separated from a holy God who can't tolerate sin. Since I believe that only God can bring about true healing, unless a person is in a right relationship with God, they can never be fully healed. Yes, they may overcome depression or an addiction, but they will struggle to do it within their own power. However, if they believe in God, He will give them His strength to work through their difficulties and they do not have to rely just on themselves. This does not mean that Christians will not have problems; rather, they can depend on an all-powerful God. As Peter Gomes says in his article, *Storm Center: When Bad Things Happen*, "The God of all comfort is the one who supplies what we most lack when we most need it....God gives us sufficient capacity that when we are knocked down we are not knocked out" (10).

You may be wondering how I would incorporate my beliefs during a counseling session. Well, if I was counseling a person with a substance abuse problem, for example, not only would I use traditional treatment options, but I would also stress the fact that they are not alone in their fight—they can rely on the strength God gives them to overcome their problem. Additionally, they are accountable to God for how they live their life; whether they persevere through treatment even when it's extremely difficult, or whether they let their SA problem conquer them. I believe that the promise of true healing in God—both spiritual and mental—and the promise of His guidance can serve as motivation for those struggling with life problems.

If you chose to incorporate a religious worldview into your counseling, you are most likely to find a job in a private counseling practice that also embraces your beliefs. You also have the option to start your own practice, or even work with a missions organization that will enable you to perhaps work overseas and use your counseling as a ministry. I personally feel that God is calling me to work overseas and use my occupation to help others, as well as share with them the good news of God's love. Wherever you decide to practice counseling, I hope that you will invest yourself into your work and find motivation from those who you are able to help.

### **Practical Advice**

Though many books exist that offer advice for people entering helping occupations, one that I have found helpful is *Before You See Your First Client*, by Howard Rosenthal. Rosenthal provides practical advice for counselors, human service workers, and therapists based on his own experience working in the human service field. He discusses a wide variety of topics, such as salaries, insurance, referrals, person-centered counseling, confrontation, and tailoring techniques for individual clients. While salaries in the counseling field are by no means large, he recommends being assertive in asking for a wage that you think your credentials entitle you. Once you are a licensed, practicing MHC, it is crucial to seek client referrals from numerous sources to guarantee a steady influx of clients over the next few years, and sometimes it is necessary to partner with psychiatrists in order to have a healthy practice. Rosenthal reminds students or current human service workers about the importance of holding fast to ethical and legal practices when interacting with their clients.

If you would like to read about actual accounts of a person working in this field, I would highly recommend Rosenthal's book. However, no books (or even first-hand accounts of counseling) can completely prepare you for a career as a MHC. Make the most of your time in school to gain experience, and seek out internships or other opportunities so that once you graduate with your master's degree, you can be confident that you have worked your hardest to prepare. Yes, you will face your own set of difficulties along the road, but remember that, as Rosenthal says, "This is a challenging field with rich emotional rewards" (155). If you are passionate about your work, none of the set-backs or hardships will be enough to discourage you.

### Closing Words

I hope that our exploration of the mental health counseling profession has helped you even a little bit on your career search. As you now know, mental health counselors work with a diverse group of people to help them cope with and overcome life problems, such as depression, addiction, family conflicts, or stress. Because of this fact, MHCs must be good at resolving conflict, exhibiting patience, and listening attentively. This rapidly growing profession, though requiring a great deal of education and experience, is never boring, as new theories and controversies are constantly emerging, seeking to better meet the needs of clients. If you have strong religious convictions that you want to incorporate into your counseling methods, you have a great deal of freedom to do so because of the wide variety of facilities in which you can work as a counselor. If mental health counseling interests you, I'd encourage you to find more resources, whether books, articles, or an actual counselor, to help you learn more. Whatever profession you decide to pursue, even if it is not mental health counseling, I hope that you invest your whole self in to it, and that it will both fulfill and motivate you.

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