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Introduction to the Special Issue

Michael Jones, Stacey Diane Arañez Litam, Latoya Haynes-Thoby

This special issue of *The Professional Counselor (TPC)* honors the NBCC Foundation's 2024 Bridging the Gap Symposium: Eliminating Mental Health Disparities. The theme for the symposium emphasized the need for a shift from simply acknowledging disparities to actively working toward equitable mental health care for historically underserved populations. The symposium provided a space for counselors, educators, and advocates to engage in discussions on how to dismantle systemic barriers that disproportionately affect Black, Indigenous, and people of color (BIPOC); lesbian, gay, bisexual, transgender, queer, intersex, asexual, and other sexual identities (LGBTQIA+) individuals; and other marginalized groups. The selected articles in this issue reflect this ongoing effort by offering research, critical perspectives, and strategies for fostering more inclusive counseling practices.

The articles in this issue address the complexities of eliminating mental health disparities by examining issues related to mental health care access, strengthening cultural competence, and the importance of integrating social justice frameworks into counseling practice. Each article brings a unique perspective, yet they collectively emphasize the need for action to challenge outdated models and create meaningful change. The contributions in this issue reinforce the responsibility of mental health professionals to engage in advocacy, ensure culturally responsive care, and elevate the voices of those who have historically been excluded from mainstream mental health discourse.

The first article, "The Power of Decolonizing Research Practices," by Pham, Perry-Wilson, Holmes, Schroeder, Reyes, and Pollok, focuses on the role of decolonized research methodologies in advancing mental health equity. Traditional research practices have historically marginalized non-White communities by reinforcing Eurocentric perspectives and deficit-based narratives. This article highlights the use of photovoice methodology to amplify the experiences of queer womxn of color (QWoC), shifting the focus from pathology to resilience and community-driven healing. The authors argue that by engaging in decolonized research approaches, scholars and practitioners can challenge oppressive structures within academia and mental health care. The article serves as a call to action for counselors and researchers to adopt ethical, culturally affirming scholarship that prioritizes community engagement and self-determination.

"Applying the Multicultural and Social Justice Counseling Competencies to Eating Disorder Treatment," by Labarta, Demezier, and Vazquez, challenges the widely held misconception that eating disorders primarily affect White, affluent individuals. This stereotype has contributed to treatment models that often overlook the diverse racial, socioeconomic, and gender identities of those experiencing eating disorders. The authors apply the Multicultural and Social Justice Counseling Competencies (MSJCC) to demonstrate how counselors can challenge biases and implement culturally affirming interventions to address disparities in eating disorder diagnosis and treatment. Through case vignettes, the article illustrates practical applications for creating more inclusive approaches to care and highlights the responsibility of counselors, educators, and supervisors to actively engage in advocacy efforts that promote equitable treatment for all individuals affected by eating disorders.

In the third article, “Operationalizing Microaffirmations for Queer and Transgender People of Color,” Paul, Isadore, Ravi, Lewis, Qisti, Hietpas, Hermanson, and Su examine the role of microaffirmations in reducing the mental health disparities experienced by queer and transgender people of color (QTPOC). Discrimination and systemic oppression continue to impact QTPOC individuals at higher rates, contributing to increased mental health concerns such as depression, anxiety, and suicidal ideation. This article explores how microaffirmations—small but meaningful acts of validation and support—can serve as protective factors, fostering a greater sense of belonging and emotional well-being. The study offers practical guidance for integrating affirming practices into counseling settings at both the individual and systemic levels. By emphasizing the importance of intentional, identity-affirming interactions, this article underscores how counselors can create safer and more inclusive spaces for QTPOC clients.

“You Good, Bruh?": An Exploration of Socially Constructed Barriers to Counseling for Millennial Black Men,” by Cofield, highlights the ongoing challenges Black men face when seeking mental health support. Although there has been a growing awareness of the mental health issues faced within the Black community, millennial Black men remain one of the most underserved groups in counseling. Using critical race theory (CRT), Black critical theory (BlackCrit), and Black masculinity theory, this study identifies three major barriers to counseling engagement: Black masculine fragility, racial distrust, and invisibility. The findings reveal how cultural norms surrounding masculinity, experiences of racial trauma, and systemic biases within mental health services deter Black men from seeking counseling. The article calls for a shift in the field of mental health to better engage and retain Black male clients by implementing culturally responsive strategies, promoting representation, and addressing the deep-rooted historical and societal factors that contribute to counseling avoidance.

The final article, “Shifting Paradigms: Exploring Multicultural Approaches to Psychedelic-Assisted Therapy in Counseling,” by Prioleau and Panjwani, examines the emergence of psychedelic-assisted therapy (PAT) through a multicultural and social justice lens. Although PAT has gained recognition as a promising intervention for various mental health concerns, BIPOC communities remain largely underrepresented in research and clinical practice. The article critiques the Eurocentric framing of psychedelics in Western medicine and highlights the longstanding history of plant medicine within Indigenous healing traditions. By acknowledging the systemic barriers that prevent equitable access to PAT, the authors explore ways to integrate cultural competence, ethical frameworks, and advocacy into psychedelic therapy training and implementation. The article also discusses issues such as cultural appropriation, disparities in research participation, and the need for more inclusive clinical approaches that respect traditional healing practices.

Together, these articles reflect a collective effort to eliminate mental health disparities by addressing critical issues related to access, representation, and culturally responsive care. Each contribution challenges traditional paradigms and offers actionable steps for creating more inclusive and equitable mental health services. The theme of eliminating mental health disparities is not just an abstract ideal; it is a necessary call to action that requires sustained commitment from the counseling profession.

As counselors, counselor educators, and researchers, we must move beyond awareness and take intentional steps toward dismantling systemic barriers that prevent marginalized communities from receiving the mental health support they need. This means integrating social justice frameworks into clinical practice, expanding research methodologies to center diverse perspectives, and advocating for policies that promote accessibility and inclusivity in mental health care. It also requires a willingness to engage in critical self-reflection, challenge biases, and amplify the voices of those who have been historically excluded from conversations about mental health.

As you engage with this special issue, we encourage you to consider how these perspectives can inform your work. How can you integrate the insights from these articles into your own practice, teaching, or advocacy efforts? What steps can you take to ensure that your work actively contributes to the elimination of mental health disparities rather than simply acknowledging their existence? Our hope is that this collection of articles serves as both an educational resource and an inspiration for continued action toward equity in mental health counseling.

Read full article and references:

Jones, M., Litam, S. D. A., & Haynes-Thoby, L. (2025). Bridging the gap: Advancing equity in mental health counseling; Introduction to the special issue. *The Professional Counselor*, 15(1), 1–3.
doi: [10.15241/jm.15.1.1](https://doi.org/10.15241/jm.15.1.1)

The Power of Decolonizing Research Practices

Jessi Pham, Tiffany Perry-Wilson, Kevlyn Holmes, Grace Schroeder, Ana Reyes, Michelle Pollok

Traditional research in the counseling field has historically perpetuated oppressive structures and included methodologies that reinforce power imbalances. Mental health research can harm marginalized communities by pathologizing anything that strays from White, Eurocentric standards. Similarly, researchers have noted that most of the existing literature on lesbian, gay, bisexual, trans, and queer (LGBTQ) and Black, Indigenous, and people of color (BIPOC) individuals tends to focus on the pain and trauma of discrimination and oppression. This emphasis risks inadvertently positioning research participants in the *wounded subject position*—reducing LGBTQ and BIPOC communities to their experiences of marginalization and reinforcing dominant narratives. A more nuanced and liberatory research approach should consider the broader, more complex experiences of these communities and explore diverse, affirming, and decolonial perspectives that move beyond deficit-based narratives.

Comparatively, decolonized research and liberatory research practices aim to center the voices and experiences of marginalized communities, fostering empowerment and healing. A decolonized research approach may include many practices and values, such as critical reflexivity, dialogue, and catalytic validity. One example of critical reflexivity is writing a positionality statement—this involves critical reflection on the various domains of our lives in which we have or lack privilege. Further examples of decolonial practices in research include advocacy, power sharing, and rituals.

As an example of decolonized research in action, we brought and discussed a photovoice exhibit to be presented at the 2024 NBCC Foundation Bridging the Gap Symposium, which sought to share the healing experiences of nine queer womxn of color (QWoC). Photovoice is a research methodology that utilizes visual images to showcase the strengths and concerns of marginalized communities. Photovoice invites marginalized groups to articulate their perspectives through photography, fostering autonomy and enabling self-advocacy in the research process.

Our presentation at the 2024 Bridging the Gap Symposium, titled “Through Our Lens: Exhibiting Decolonized Research and Clinical Practice in Action,” was created as a means to bring our photovoice exhibit to the Symposium while allowing attendees to explore the healing practices of QWoC inside and outside of counseling from a decolonial perspective. By encouraging attendees to explore the experiences of QWoC in our exhibit, we hoped to shed light on how taking a decolonized and liberatory approach to research fosters healing and empowerment for BIPOC researchers and co-researchers.

Implementing decolonial practices in research can be challenging because of existing structures and systems that perpetuate colonized, oppressive, and racist ideologies. This process involves de-centering the self and stepping away from traditional pedagogical approaches, allowing counselor educators and researchers to build self-awareness through critical reflexivity. Critical reflexivity is a collaborative practice that involves internal work by counselor educators and participation from students and colleagues. For instance, some authors have noted that providing mentorship and supervision to incoming and current counselor educators assists in fostering a collaborative approach to critical reflexivity or critical consciousness.

As counselor educators and researchers, we must continually question how our identities and positionalities influence our work and strive to create inclusive, validating, and supportive environments for all. By approaching education and research with humility and openness to learning without assuming expertise, we mitigate harm to the communities we serve and honor the holistic experiences of traditionally under-researched intersections.

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Read full article and references:

Pham, J., Perry-Wilson, T., Holmes, K., Schroeder, G., Reyes, A., & Pollok, M. (2025). The power of decolonizing research practices. *The Professional Counselor*, 15(1), 4–16. doi: [10.15241/jp.15.1.4](https://doi.org/10.15241/jp.15.1.4)

Applying the Multicultural and Social Justice Counseling Competencies to Eating Disorder Treatment

Adriana C. Labarta, Danna Demezier, Alyssa A. Vazquez

Eating disorders (EDs) are serious mental health concerns that impact diverse communities across the lifespan. Widespread biases and assumptions about EDs have long persisted that affect the provision of culturally responsive and inclusive treatment. For example, the belief that EDs primarily impact thin, White, cisgender women can perpetuate treatment barriers for marginalized groups, further limiting these communities and raising concerns regarding how multicultural and social justice issues are addressed in ED treatment. As a result, scholars, mental health professionals, and clients have called for culturally responsive ED treatment that expands access to services for diverse communities and attends to various cultural identity factors, such as race and ethnicity, sexual orientation, gender identity, socioeconomic status and food insecurity, ability status, body size, and religion and spirituality.

In this article, we propose the application of the Multicultural and Social Justice Counseling Competencies (MSJCC; Ratts et al., 2016) to the treatment of EDs. The MSJCC provide a strong framework to infuse multicultural and social justice into counseling, acknowledging the roles of power, privilege, and oppression as they relate to mental health concerns like EDs. Using brief case vignettes of diverse clients presenting with eating concerns, we illustrate how the MSJCC framework can guide treatment by deepening counselors' understanding of EDs as multicultural and social justice issues. Furthermore, we discuss the importance of advocacy interventions beyond the counseling room to enhance awareness of and education on EDs across diverse populations.

Lastly, we explore implications for counseling and counselor education, addressing the critical role of practitioners, educators, and supervisors in bridging the gaps that impact marginalized groups with EDs by promoting inclusion in treatment settings, adopting culturally responsive teaching approaches, and encouraging counseling students and trainees to engage in ongoing self-reflection and education. We conclude by suggesting future research directions to further develop ED scholarship using frameworks like the MSJCC to illuminate the needs of underserved populations and advocate for continued change in the ED treatment field.

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Read full article and references:

Labarta, A. C., Demezier, D., & Vazquez, A. A. (2025). Applying the Multicultural and Social Justice Counseling Competencies to eating disorder treatment. *The Professional Counselor*, 15(1), 17–31.
doi: [10.15241/acl.15.1.17](https://doi.org/10.15241/acl.15.1.17)







Operationalizing Microaffirmations for Queer and Transgender People of Color

Zori A. Paul, Kyesha M. Isadore, Nishi Ravi, Kayla D. Lewis, Dewi Qisti, Alex Hietpas, Bergen Hermanson, Yuji Su

Microaffirmations can be intentional or unintentional small verbal or nonverbal forms of communication that signal support, encouragement, or validation toward those with marginalized identities such as race, ethnicity, sexual identity, or gender identity. Microaffirmations are also believed to provide some protective buffer against discrimination experienced by individuals due to the stigma around their marginalized identity. There are four types of microaffirmations: microrecognitions, microprotections, microtransformations, and microvalidations. Microrecognitions are verbal or nonverbal communications that involve the recipient feeling acknowledged or included. One example of a microrecognition would be a store displaying a Pride flag or sticker at their entrance. Microprotections offer marginalized recipients a sense of being shielded from discrimination or stigma, such as non-LGBTQ+ individuals standing up for LGBTQ+ individuals in environments where they lack power and are marginalized. Microtransformations communicate and foster a deep sense of belonging and capability for the marginalized individuals and their communities, such as advocating for policies that are affirming for LGBTQ+ people. Lastly, microvalidations affirm a marginalized person's thoughts, feelings, and behaviors as accepted or valued. Examples of microvalidations include safe spaces specifically designed for queer and trans people of color (QTPOC) to interact and build community together.

Despite what is known about microaffirmations when it comes to racial identity, sexual identity, and gender identity, respectively, there is still more to learn when it comes to microaffirmations toward people with multiple intersecting marginalized identities such as those with racial-ethnic identities and marginalized sexual and/or gender identities. The purpose of this study was to 1) explore how QTPOC participants describe and understand microaffirmations and 2) investigate the specific types of microaffirmations in relation to the mental health and well-being of QTPOC.

We used a qualitative method, interpretive phenomenological analysis, to analyze interviews of QTPOC participants and their experiences of microaffirmations. Participants (N = 14) self-identified as people of color and reported their sexual identities (i.e., queer, bisexual, asexual, demisexual, and gay/lesbian) as well as their gender identities (i.e., cisgender man, cisgender woman, and nonbinary/gender expansive). We report five superordinate themes of participants' experiences of microaffirmations: influence of identity development, safety with others, envisioning policy changes, representation, and internalization of perceived worth. Our participants described that not only had they experienced microaffirmations as QTPOC and found them helpful, but they also expressed the potential greater impact that microaffirmations have when they come from close relationships compared to when they are from strangers or organizations, especially when those close relations also identify as QTPOC.

Implications for counselors both in and out of the session room are discussed. They include recognizing various stages of identity development unique to QTPOC clients, establishing safe and affirming environments for these clients, and being aware of potential negative impacts of microaffirmations when not used carefully. Other implications from the study's findings include the importance of counselors educating themselves on current LGBTQIA+ legislation and advocating for affirming policies that would benefit QTPOC.

Read full article and references:

Paul, Z. A., Isadore, K. M., Ravi, N., Lewis, K. D., Qisti, D., Hietpas, A., Hermanson, B., & Su, Y. (2025). Operationalizing microaffirmations for queer and transgender people of color. *The Professional Counselor*, 15(1), 32–51. doi: [10.15241/zap.15.1.32](https://doi.org/10.15241/zap.15.1.32)

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“You Good, Bruh?”

An Exploration of Socially Constructed Barriers to Counseling for Millennial Black Men

Demetrius Cofield

Mental health advocacy and awareness among Black millennials has increased significantly in recent years, yet millennial Black men are still less likely to seek counseling compared to Black women and men of other races. Even though researchers have published about the need to understand why Black men do not seek counseling, there still is not a lot of counseling research about Black men and counseling, especially millennial Black men. Race and masculinity have been identified as barriers preventing Black men from seeking counseling, but there remains more to understand about how these social constructs impact their decisions. Because of the clear need for more research about Black men and counseling engagement, I sought to answer the following questions: 1) What are the socially constructed barriers to counseling for millennial Black men? and 2) How do anti-Black racism and Black masculinity influence millennial Black men’s decisions to seek counseling? This critical phenomenological study was guided by an integrated theoretical framework of concepts from critical race theory (CRT), Black critical theory (BlackCrit), and Black masculinity.

For this study, I interviewed 16 millennial Black men who had at least considered going to counseling, even if they have never been. Through individual interviews, participants discussed what they believed were barriers and factors that influenced their decisions to either seek counseling or not. A critical analysis of the interviews revealed three primary themes: Black masculine fragility, racial distrust, and invisibility. The findings indicate the significant negative influence of anti-Black racism and Black masculinity on millennial Black men’s decisions to seek counseling. Participants noted being socialized to believe that Black men are protectors and providers who are not meant to seek help or show emotions. All participants also discussed the significance of race and their belief that White counselors could not be trusted or would not understand the experiences that were impacting their mental health. Finally, participants reported they did not have a clear understanding of how to go about seeking counseling and that there was a need for more visible Black counselors and Black men who had positive experiences with counseling.

The findings of this study encourage counselors and mental health advocates to be more intentional with advocacy efforts geared toward millennial Black men. Results indicated that millennial Black men need to be provided with more information about ways to find Black counselors, such as online directories, as well as a better understanding of how affordable counseling can be. Counselors and mental health professionals should also find ways to encourage more Black men to share their positive experiences with counseling. These findings also indicate the need to find ways to encourage more Black people to go into counselor education to increase the number of Black counselors in the profession. Also, based on feedback from participants who had gone to counseling, it is important to improve clinical practice and education to equip counselors to provide more culturally appropriate techniques when working with Black men.

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Read full article and references:

Cofield, D. (2025). “You good, bruh?”: An exploration of socially constructed barriers to counseling for millennial Black men. *The Professional Counselor*, 15(1), 52–67. doi: [10.15241/dc.15.1.52](https://doi.org/10.15241/dc.15.1.52)





Shifting Paradigms

Exploring Multicultural Approaches to Psychedelic-Assisted Therapy in Counseling

Brittany L. Prioleau, Shama Panjwani



Psychedelic-assisted therapy (PAT) continues to gain recognition as an emerging approach to addressing complex mental health challenges, such as PTSD, depression, and anxiety. As such, there is a growing need to examine its accessibility and applicability across diverse populations. This article highlights the urgent need for culturally sensitive and equitable practices within PAT, particularly those that honor the contributions of Indigenous and other communities of color while addressing potential barriers to access for historically disenfranchised groups.

We emphasize the need for inclusive frameworks that address potential barriers to access while fostering trust and cultural relevance. To address these challenges, we propose actionable strategies for integrating multicultural perspectives into PAT practices. One key strategy is the implementation of tailored psychoeducation, which provides clients with culturally relevant information about psychedelics and their use in non-Western healing traditions. This approach not only helps dispel stigma and misconceptions but also empowers participants to make informed decisions about their care. For disenfranchised communities, psychoeducation can also address common obstacles to care, such as fears related to systemic inequities or misunderstandings about the therapeutic process.

Another central focus is the importance of looking to the future and potentially incorporating multicultural PAT training into counselor education. Future professional counselors must be equipped to recognize and honor the cultural contexts of psychedelics while using culturally appropriate approaches to build trust with clients from diverse backgrounds. This includes teaching counselors how to adapt communication styles to validate clients' experiences. By diversifying training, counseling programs can ensure that practitioners are better prepared to meet the needs of diverse populations.

Additionally, we underscore the importance of engaging with disenfranchised groups to co-create ethical and culturally attuned PAT practices. For example, forming advisory boards composed of community leaders and cultural experts can ensure that protocols are developed with input from the communities that they aim to serve. This approach respects cultural traditions and mitigates the risk of cultural appropriation while fostering mutual trust and understanding.

We conclude with a call to action for counselors, researchers, and policymakers to embrace a more inclusive and multicultural approach to PAT. This includes increasing diversity in clinical trials, addressing systemic barriers to access, and ensuring that the voices of Indigenous and historically marginalized communities are included in the development of any new therapeutic protocols. By prioritizing multicultural competence, advocacy, and community engagement, the counseling profession has the opportunity to leverage PAT as a transformative tool for advancing mental health equity for all.

Read full article and references:

Prioleau, B. L., & Panjwani, S. (2025). Shifting paradigms: Exploring multicultural approaches to psychedelic-assisted therapy in counseling. *The Professional Counselor*, 15(1), 68–80. doi: [10.15241/blp.15.1.68](https://doi.org/10.15241/blp.15.1.68)

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