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International Perspectives on Counseling

An Introduction to *TPC* Global

J. Richelle Joe, Editor, *The Professional Counselor*

The World Health Organization estimates that globally 1 in 8 people is living with a mental health condition, with anxiety and depressive disorders among the most common conditions. Multiple contextual factors affect mental health, including natural disasters, pandemics, armed conflicts, genocide, political unrest, gender-based violence, and legislation targeting vulnerable populations. Counselors and counseling researchers require research and scholarship that extend beyond the United States in order to strengthen the evidence base for the work that they do and to improve mental health globally.

As the official journal of the National Board for Certified Counselors, Inc. and Affiliates (NBCC), *The Professional Counselor* (*TPC*) exists for just this reason. The journal aims to inform the counseling profession and enhance mental health worldwide through rigorous scholarship published in an open-access format. Although the accessibility of the journal allows its contents to travel across borders, the prevalence of global scholarship published in the journal has been low historically. A 2021 meta-study of the publication trends of *TPC* reported that only 3.4% of lead authors published in the first 9 years of the journal lived outside of the United States. This finding presented an opportunity for *TPC* to intentionally engage international scholars and support global scholarship in accordance with NBCC's priority of global capacity building. Through NBCC's global virtual conference, the editorial team of *TPC* has shared its expertise with an international counseling audience, presenting about quantitative and qualitative methodology, scholarly writing and publishing, and ethical considerations for research outside of the United States. In this issue of *TPC*, I am proud to introduce a new initiative that will extend the journal's engagement and support of global mental health research and scholarship: *TPC* Global.

TPC Global is a special section of the journal where we will elevate international counseling scholarship to expand the knowledge base on mental health, wellness, and culturally grounded approaches to care. Rather than a single special issue focused on international scholarship, *TPC* Global will be a recurring designated section of the journal. This will establish global scholarship as a priority of the journal and ensure the longevity of our commitment to publishing such scholarship.

The articles we hope to publish in *TPC* Global can move the counseling profession toward global connectivity and strengthen counselors' understanding of and response to the social and political determinants of health within the various contexts that they work. We look forward to publishing empirical and conceptual pieces that address country- or region-specific mental health needs, apply indigenous and decolonial healing frameworks to counseling practice outside of the United States, and critique the application of traditional theoretical frameworks in global contexts. Collectively this scholarship can better equip the counseling workforce to advance mental health globally.

Read full article and references:

Joe, J. R. (2026). International perspectives on counseling: An introduction to *TPC* Global. *The Professional Counselor*, *16*(3), 151–152. doi: 10.15241/rj.16.3.151





This article highlights the emotional, social, and practical challenges faced by people living with HIV/AIDS (PLWHA) in rural Uganda. Although advances in treatment have improved health outcomes for many individuals, HIV/AIDS remains one of the most stigmatized health conditions worldwide, creating barriers to support, treatment, and overall well-being. Rates of mental health issues among PLWHA are high when compared to the general population. Additionally, those experiencing mental health issues have an increased risk of acquiring HIV/AIDS.

The purpose of this qualitative transcendental phenomenological study was to describe the lived experiences of PLWHA in rural Uganda. All participants met the following inclusion criteria: adult participants between the ages of 18 and 45 who had been diagnosed with HIV/AIDS in rural Uganda. Through in-depth semi-structured phenomenological interviews, we identified three major themes and related subthemes: (a) existential threat post–HIV/AIDS diagnosis, which included fears related to the diagnosis, concerns about stigma and discrimination, and social isolation, mental health strain, and decreased adherence to ART; (b) resources relative to HIV/AIDS diagnosis, which included limited access to resources and support services, limited access to healthcare facilities and reliable transportation, and mental health services that are not widely integrated into community health systems; and (c) support from families and friends post–HIV/AIDS diagnosis, which included relationships with family and friends, other sources of support, and extended family networks and communal living.

Findings reveal participants' struggle with fears related to their diagnosis, limited access to resources and support services, and stigma and discrimination. PLWHA experience higher rates of external and internal stigma in rural areas than in urban areas, which can affect all domains of individuals' lives. For instance, PLWHA in Uganda and Kenya deferred marriage and childbearing, distanced themselves from friends and family members, and avoided seeking treatment because of internalized stigma. Additionally, stigmatization and disease progression of HIV/AIDS have contributed to psycho-emotional disturbances, job losses, poverty, dependence on others, and concerns about strain on or disruption of relationships and families.

In much of rural Uganda, communities are dispersed across villages, with limited access to healthcare facilities and reliable transportation. Daily life is heavily influenced by subsistence farming, extended family networks, and communal living, which shape how health services are perceived and accessed. Mental health services are not widely integrated into community health systems, and discussions of mental illness often carry cultural stigma. Many avoid HIV testing and mental health counseling services because of fears of confidentiality breaches, social stigma, and discrimination associated with being HIV positive. Further, people often rely on traditional healers or faith-based approaches before seeking biomedical or psychological care, which further complicates the uptake of evidence-based interventions.

At the same time, relationships with family and friends, as well as other sources of support, played an important role in how participants navigated life after diagnosis. The article calls for greater attention to the mental health needs of PLWHA in rural communities and emphasizes the need to expand culturally responsive counseling services, community support, and counselor training to better serve this population.

Godfrey Ddungu, PhD, NCC, ACS, LCPC, ASDCS, is an assistant professor at California State University Fresno. Corinne W. Bridges, EdD, NCC, BC-TMH, LPCC, is an associate professor at Walden University. Cynthia A. Briggs, PhD, NCC, LCMHC(NC), is an associate professor at Walden University. Correspondence may be addressed to Godfrey Ddungu, Department of Counselor Education and Rehabilitation, Kremen School of Education and Human Development, California State University Fresno, 5005 N Maple Ave MS ED1, 455, Fresno, CA 93740, goddungu@mail.fresnostate.edu.

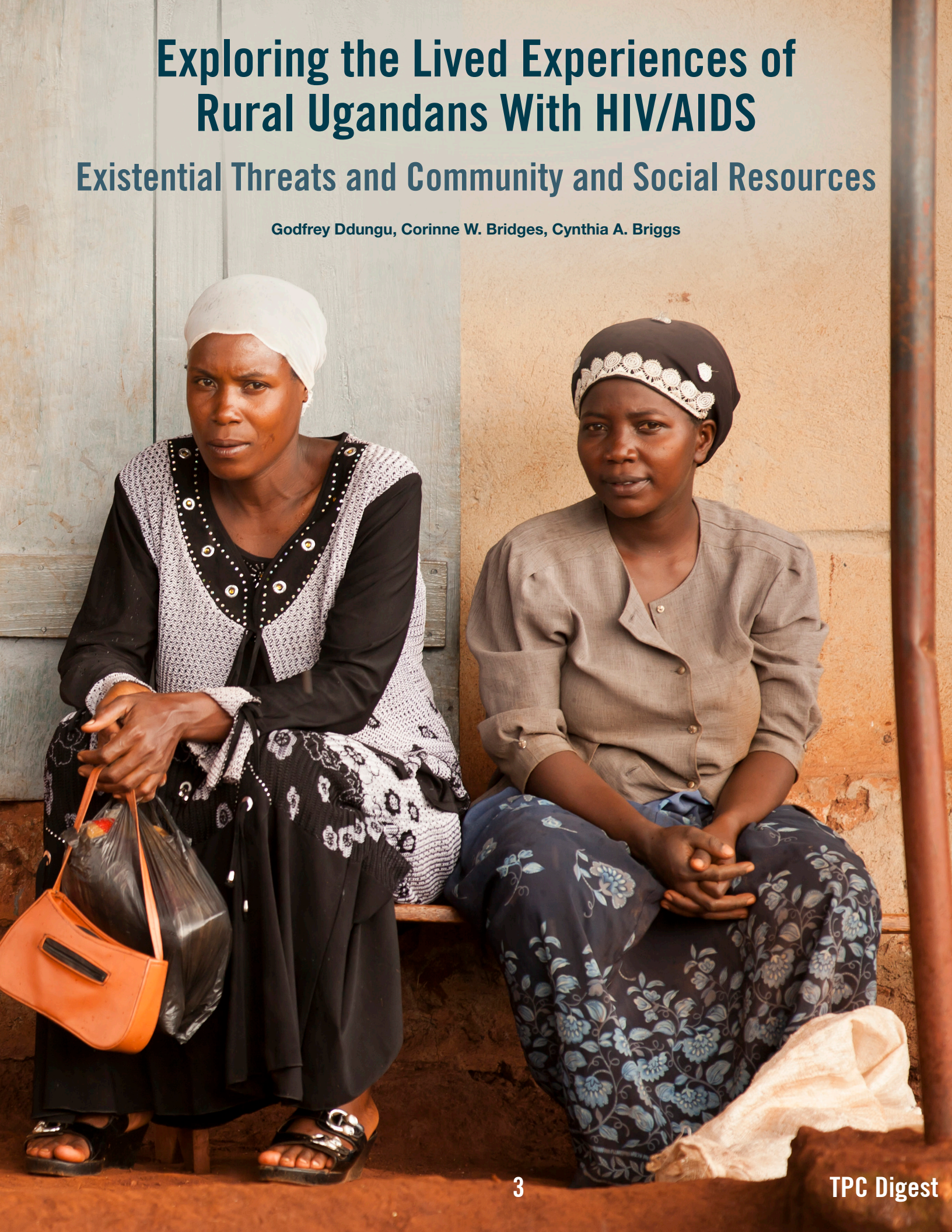
Read full article and references:

Ddungu, G., Bridges, C. W., & Briggs, C. A. (2026). Exploring the lived experiences of rural Ugandans with HIV/AIDS: Existential threats and community and social resources. *The Professional Counselor*, *16*(3), 153–170. doi: 10.15241/gd.16.3.153

Exploring the Lived Experiences of Rural Ugandans With HIV/AIDS

Existential Threats and Community and Social Resources

Godfrey Ddungu, Corinne W. Bridges, Cynthia A. Briggs





Lifetime Achievement in Counseling Series

An Interview With Christian J. Dean

Marcus Adams, Joshua D. Smith, Neal D. Gray

This is the 11th interview in the ongoing Lifetime Achievement in Counseling Series. The purpose of this series is to highlight influential figures in the profession of counseling and counselor education and their contributions to the profession. We hope that readers will utilize this series to better examine the state of the counseling profession and be encouraged to reflect on the current and future challenges presented by the interviewees.

The 11th interviewee in this series is Christian J. Dean, PhD, NCC, LPC-S, LMFT-S, who is a professor in the Clinical Mental Health Counseling program at Divine Mercy University. He was previously a professor at the University of the Cumberlands. He is licensed as a professional counselor/board-approved supervisor (LPC-S) and a marriage and family therapist/board-approved supervisor (LMFT-S) in Louisiana, where he practices at Counseling for Growth, LLC.

Dr. Dean is a 28+-year member of the military (Army National Guard and Army Reserve), currently holds the rank of colonel, and is a veteran of Operation Iraqi Freedom. He is a National Certified Counselor (NCC) and participated as a collaborative investigator for the DSM-5 Field Trials in Routine Clinical Practice Settings. He works with Spanish-speaking clients, service members, veterans, and a wide variety of other client populations. Dr. Dean is an EMDR-trained therapist and integrates cognitive behavioral therapy in his clinical work. Dr. Dean has presented and published on the use of metaphors in counseling and counselor education, counseling couples, understanding military systems and dynamics, differential diagnosing and processes, and ethical considerations in counseling and marriage and family therapy. He is the author of *Ladders and Shovels: How to Climb Out of Emotional Holes and Stop Digging Them* and the coeditor of *Metaphors in Counselor Education and Supervision* as well as *Metaphors and Therapy: Enhancing Clinical Supervision and Education*.

In this interview, Dr. Dean shares his experiences in the armed forces that have shaped his professional counseling career, considerations for counseling military service members and their families, and advice on making connections between the different stages of one's life in service to others.

Marcus Adams is a graduate student at Lenoir-Rhyne University. Joshua D. Smith, PhD, NCC, LCMHC, is an associate professor at the University of Mount Olive. Neal D. Gray, PhD, LCMHC-S, is a professor at Lenoir-Rhyne University.

Read full article and references:

Adams, M., Smith, J. D., & Gray, N. D. (2026). Lifetime achievement in counseling series: An interview with Christian J. Dean. *The Professional Counselor*, *16*(3), 171–178. doi: 10.15241/ma.16.3.171



Examining the Roles of Social–Emotional Skills and Career Exploration Among College Students

Aydanur Aydin, Arpita Ghosh

Choosing a career is one of the most important developmental tasks for college students. During their time in higher education, students are expected to learn about themselves, select academic majors, explore career options, and prepare for the transition into the workforce. Although colleges and universities often provide career counseling and career planning resources, many students struggle with career exploration because of uncertainty, stress, or difficulty understanding their own interests and goals. While previous research has focused primarily on career-related variables such as career decision-making self-efficacy, vocational identity, and personality traits, there has been limited attention to the role of specific social–emotional skills in supporting career exploration.

This study examined whether the three social–emotional skills of self-awareness, emotion regulation, and assertiveness were associated with career exploration among 241 undergraduate students at a large, Midwestern university. The study was guided by the Social and Emotional Learning (SEL) framework, which emphasizes the development of competencies that support academic, career, and life success. Findings from regression analyses suggested that students with higher levels of self-awareness and emotion regulation also reported greater engagement in career exploration. When all three social–emotional skills were examined together, self-awareness and emotion regulation significantly predicted career exploration, while assertiveness was not a significant predictor.



These findings suggest that career exploration involves more than simply providing students with occupational information or helping them choose majors. Students may also benefit from developing greater awareness of their own interests, values, emotions, and personal strengths while learning strategies to manage the emotional challenges that accompany career decision-making. Career exploration often requires students to tolerate uncertainty, cope with fear of making the wrong decision, navigate rejection during internships or job searches, and remain engaged despite setbacks. Students who can effectively regulate their emotions and better understand themselves may be better prepared to navigate these challenges.

These findings have several implications for professional counselors, career counselors, and counseling psychologists working with college students. Career counselors may consider assessing self-awareness and emotion regulation early in the counseling process to identify potential barriers to career exploration. Individual counseling, group counseling, and psychoeducational programs may incorporate activities such as values clarification, strengths identification, guided self-reflection, emotional awareness, and cognitive reframing to help students engage more confidently in career exploration. Although assertiveness was not a significant predictor in this study, interpersonal communication skills remain important when students seek mentoring, networking opportunities, and career-related support.

This study contributes to the growing literature on career development by highlighting the importance of social–emotional skills in career exploration. Rather than focusing exclusively on career information and decision-making strategies, career counselors can also support students by helping them develop the emotional and self-reflective skills needed to successfully navigate career development during college and beyond.

Aydanur Aydin, MSc, is a doctoral student in Counseling Psychology at the University of Kansas. Arpita Ghosh, PhD, is an associate professor in the Department of Educational Psychology in the Counseling Psychology program at the University of Kansas. Correspondence may be addressed to Aydanur Aydin, Joseph R. Pearson Hall, Rm 221, 1122 West Campus Rd., Lawrence, KS 66045-3101, ayda@ku.edu.

Read full article and references:

Aydin, A., & Ghosh, A. (2026). Examining the roles of social–emotional skills and career exploration among college students. *The Professional Counselor*, *16*(3), 179–193. doi: 10.15241/aa.16.3.179



Addressing IPV in Muslim Communities

The Case for Faith-Informed and Culturally Relevant Interventions

Tamara Makki, Nadiya Boyce, Sejal M. Barden

Intimate partner violence (IPV) affects individuals and families across cultural, racial, and religious backgrounds, yet survivors do not experience abuse or make decisions about seeking help in isolation from their communities and identities. For Muslim survivors, religion, family relationships, cultural expectations, community stigma, and experiences with larger social systems can all influence whether abuse is recognized, disclosed, or addressed. Despite these complexities, many approaches to IPV have been developed within Western frameworks that may not fully reflect the cultural and religious realities of Muslim communities.

This article examines the need for culturally relevant and faith-informed approaches to addressing IPV in Muslim communities. Muslim communities are diverse, and there is no single "Muslim experience" of IPV. However, research has identified several factors that may influence responses to abuse. Concerns about family reputation, pressure to preserve a marriage, stigma surrounding divorce, and beliefs that family problems should remain private can make disclosure difficult. Survivors may also fear being judged by their communities or encountering discrimination and Islamophobia when seeking assistance outside of their families. At the same time, Islamic faith and Muslim communities can be important sources of strength, connection, meaning, and support. Religious teachings may provide survivors with language for understanding dignity, safety, and healthy relationships. Faith leaders, family members, friends, and other trusted community members may also be among the first people approached when someone experiences abuse. This makes it especially important that community members have accurate knowledge about IPV and are prepared to respond in supportive ways.

The article draws attention to three areas that may be particularly important for community-based intervention: increasing knowledge about IPV, reducing stigma toward survivors, and strengthening community members' willingness to intervene when they recognize abuse. Greater knowledge can help people distinguish IPV from ordinary relationship conflict and recognize behaviors that may otherwise be minimized or normalized. Reducing stigma can create environments in which survivors feel more safe disclosing their experiences. Increasing willingness to intervene can help community members move beyond recognizing abuse to offering support and/or connecting survivors with resources. Faith-informed and culturally relevant IPV interventions can build upon these strengths while challenging beliefs or community practices that contribute to silence around abuse. Rather than asking Muslim survivors to separate their religious and cultural identities from help-seeking, interventions can recognize these identities as meaningful parts of their lives.

Ultimately, addressing IPV in Muslim communities requires more than translating existing programs or assuming that one intervention will work for every population. Counselors, advocates, researchers, faith leaders, and community organizations should collaborate with Muslim communities to develop approaches that are culturally responsive, grounded in accurate understandings of Islam, and attentive to survivors' lived experiences. Doing so can help create communities in which IPV is recognized, survivors are supported rather than stigmatized, and responsibility for addressing abuse is shared rather than placed solely on those experiencing it.

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Read full article and references:

Makki, T., Boyce, N., & Barden, S. M. (2026). Addressing IPV in Muslim communities: The case for faith-informed and culturally relevant interventions. *The Professional Counselor*, *16*(3), 194–207. doi: 10.15241/tm.16.3.194

Cuenta Tu Historia

Cinematherapy as a Culturally Sensitive Intervention for Intergenerational Trauma in Hispanic/Latine Communities

Rommel Johnson, Gabriela Rangel

Stories can pass pain from one generation to the next, but they can also help families heal. Hispanic/Latine clients may carry the effects of migration, discrimination, family loss, violence, silence, and sacrifice, even if they did not directly experience the events. These inherited burdens can manifest as guilt, shame, anxiety, depression, difficulty setting boundaries, or uncertainty about identity and belonging. Intergenerational trauma refers to how unresolved suffering can affect descendants through family relationships, learned behaviors, shared stories, and biological stress responses. At the same time, many Hispanic/Latine communities have strong traditions of storytelling, family connection, faith, and resilience. This article explores how counselors can build on those strengths through cinematherapy—the purposeful use of movies in counseling.

Movies can offer clients a safer way to approach painful experiences. Instead of starting with direct questions about their own families, clients can first discuss a character, relationship, conflict, or turning point on screen. This distance may reduce shame and make difficult feelings easier to name. Films can also show new ways to cope, communicate, ask for help, and change harmful family patterns. This article explains that movies may be useful because they offer symbols that spark insight; characters who model behavior; stories that can be rewritten; and clear examples of how thoughts, feelings, and actions influence one another.

Cinematherapy should be carefully planned rather than used as a casual movie assignment. Counselors should first assess the client's symptoms, trauma triggers, ability to manage strong emotions, cultural background, family roles, language preferences, strengths, and treatment goals. The counselor should preview the movie; explain why it was selected; anticipate possible emotional reactions; and make it clear that the client may pause, skip scenes, or stop watching. Viewing prompts, journaling, grounding exercises, and a plan for responding to distress can help keep the experience focused and safe.

After the movie, counselors should begin by asking about the client's emotional and physical reactions, then move into meaning and personal connections. Questions can explore what felt familiar, which character stood out, what the family avoided discussing, and how pain or responsibility moved across generations. The final step is to connect insight to practical change, such as naming emotions, practicing self-compassion, setting loving boundaries, improving communication, or taking a small action that supports well-being.

The article illustrates this process with Maria, a 23-year-old Mexican American college student experiencing depression, guilt, and a strong sense of responsibility for her mother's suffering. The movie *Encanto* is selected because its themes of family loyalty, silence, inherited trauma, belonging, and pressure to be useful reflect key aspects of Maria's experience. Through guided discussion, Maria can separate loving her family from taking responsibility for its pain and begin to develop a sense of worth beyond her caretaker role.

Cinematherapy is not a standalone treatment, and no movie captures every Hispanic/Latine experience. However, when used with cultural humility, informed consent, careful assessment, and follow-up, film can become a meaningful bridge to emotional expression, new family stories, healthier relationships, and hope.

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Read full article and references:

Johnson, R., & Rangel, G. (2026). *Cuenta tu historia*: Cinematherapy as a culturally sensitive intervention for intergenerational trauma in Hispanic/Latine communities. *The Professional Counselor*, *16*(3), 208–223. doi: 10.15241/rj.16.3.208

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