

Lifetime Achievement in Counseling Series

An Interview With Mona Robinson



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Each year TPC presents an interview with a seminal figure in counseling as part of its Lifetime Achievement in Counseling series. This year I am honored to introduce Dr. Mona Robinson. She identifies as a counselor with expertise in rehabilitation counseling, is among the distinguished faculty at Ohio University, and is an internationally recognized scholar. I am grateful to Dr. Joshua Smith and Dr. Neal Gray, who continue to bring the contributions and wisdom of leaders in the profession to TPC readers. Here they present a view to Dr. Robinson's accomplishments throughout her career, along with her reflections on the CACREP and CORE merger and the evolution of the profession. — Amie A. Manis, Editor

Mona Robinson, PhD, LPCC-S, LSW, CRC, is a professor at Ohio University and Program Coordinator for both their Counselor Education Program and their Human Services Program. She is the Immediate Past Chair of the Department of Counseling and Higher Education. She holds a BS in psychology, an MA in rehabilitation counseling, and a PhD in rehabilitation services (Rehabilitation Counselor Education) from The Ohio State University. Dr. Robinson is a certified rehabilitation counselor, a licensed professional clinical counselor supervisor, and a licensed social worker.



Prior to her employment at Ohio University, Dr. Robinson served as a counselor and administrator of vocational rehabilitation counseling and employment services to clients with severe mental illness and other barriers to employment. Additionally, she served as a consultant and adjunct professor at Wilberforce University. Her areas of expertise include psychiatric rehabilitation, disability advocacy, multicultural counseling, ethics, and dual diagnosis.

Dr. Robinson serves as the institute director for study abroad programs held in Italy and Botswana. She is currently 1st Vice President for the National Council on Rehabilitation Education, Accessibility Coordinator for the Association for Multicultural Counseling and Development 2019 Summit, and a member of their 2019 Day of Service Committee. She has served as Past President of the National Association of Multicultural Rehabilitation Concerns, Ohio Rehabilitation Association, and Ohio Rehabilitation Counseling Association. She is a past board member of the National Rehabilitation Association and the Ohio Counseling Association Executive Council, and a Past President and Past Secretary of the Central Ohio Counseling Association.

In addition to her extensive professional service, she is also a current member of numerous professional organizations, including but not limited to the American Counseling Association, American Rehabilitation Counseling Association, Association for Multicultural Counseling and Development, National Rehabilitation Counseling Association, Ohio Rehabilitation Association, and Ohio Rehabilitation Counseling Association. She is on the editorial boards of the *Journal of Applied Rehabilitation Counseling* and the *International Journal of Applied Guidance and Counseling*, a Vocational Expert for the Social Security Administration Office of Hearing Operations, and a Site Team Chair for the Council for Accreditation of Counseling and Related Educational Programs (CACREP).

Dr. Robinson's awards and honors include the 2008 and 2014 Ohio University College of Education Distinguished Faculty Graduate Teaching Award; the 2009 Sylvia Walker Multicultural Education Award; and the 2010 Visiting Scholar to South Korea Award, through which she taught global communication at the Kyungpook National University. She was a presenter at the 2012 International Conference on Education in Honolulu, Hawaii, and a speaker at the 2017 4th Biennial Bhutan International Counseling Conference held in Thimphu, Bhutan. Dr. Robinson has been the recipient of the 2014 Ohio University College of Education Distinguished Faculty Outstanding Outreach Award, the 2016 and 2017 Ohio University Faculty Newsmakers Award, the 2017 Virgie Winston-Smith Lifetime Achievement Award, and a 2018 National Association of Multicultural Rehabilitation Concerns Fellow Award. Dr. Robinson was an invited speaker at the University of Botswana in 2017 and 2019 for the Ultimate Motivational Speaker Competition. Lastly, she was the keynote speaker for the Seminar on Guidance and Counseling Conference held in Yogyakarta, Indonesia, in October 2019.

In this interview, Dr. Robinson shares insights on growth and change within the counseling profession, her experience as a woman of color in counselor education, and her outlook on the future development of the profession.

1. As a rehabilitation counselor educator, how has the merger between the Council on Rehabilitation Education (CORE) and CACREP impacted your role and the counseling profession?

For me personally, I am pleased to see the merger finally come to fruition. In the past, I worked as a vocational rehabilitation counselor and a licensed professional clinical counselor, so I certainly see the value of both specialty areas. I view myself as a counselor with a specialty area in clinical rehabilitation counseling. I am fortunate to work in a program that has historically integrated clinical mental health counseling, rehabilitation counseling, and school counseling at the master's level. Holding accreditation with both CORE and CACREP meant we had to go through the accreditation process twice. However, since the merger occurred, we now have one accreditation cycle and our students can obtain credentialing under CACREP for both clinical mental health and rehabilitation counseling.

With respect to the counseling profession, I continue to be involved in discussions regarding the merger, including the revisions to the 2023 CACREP standards, particularly as they relate to clinical rehabilitation counseling. For the purpose of clarification, I think it is noteworthy to mention that rehabilitation counselors receive the same general training as clinical mental health counselors with the exception of diagnosis and treatment of mental and emotional disorders. Traditional rehabilitation counselor training focuses on vocational rehabilitation, specifically as it relates to assisting people with physical and mental disabilities in obtaining meaningful employment and/or independent living opportunities that improve their quality of life. Clinical rehabilitation counselor training would continue to focus on vocational rehabilitation with the inclusion of a clinical mental health counselor curriculum that focuses on treating mental and emotional disorders that lead to licensure as a professional clinical counselor as well as certification as a certified rehabilitation counselor.

Over the years, I presented at national conferences regarding the advantages and disadvantages of the merger. One of the main points of contention in the field of rehabilitation counseling centers around the lack of coursework necessary to treat and diagnose mental and emotional disabilities, including completing an internship in a setting that treats and diagnoses mental and emotional conditions. I firmly believe that the counseling profession as a whole will benefit from the merger with the infusion of clinical rehabilitation standards. This is a first step toward standardization so that all counseling

programs can offer the same educational requirements that lead to licensure. Having a standardized counseling program will aid licensure portability as well as serve as a precursor to a national license for counselors. Counseling students reap the benefits of being taught by counselor educators with multiple specialty areas. Rehabilitation counselor educators play a pivotal role in teaching students knowledge from their specialty areas in addition to the clinical mental health competencies.

2. What are the benefits and challenges associated with that merger, and where do you see rehabilitation counseling going in the future?

Students in rehabilitation counseling programs will benefit from a more well-rounded education that gives them an opportunity to work with people with physical, mental, and emotional disabilities. Having this additional knowledge will prepare students to work in integrated medical and behavioral settings. Counselor educators who teach from a holistic approach allow students an opportunity to gain skills that will assist them in achieving better outcomes for their clients. In addition to the obvious time considerations, one accreditation cycle for all programs instead of two has positive financial implications for students and institutions alike. Some of the challenges associated with the merger include concerns that rehabilitation counselor educators may need to take additional counseling coursework to become eligible for licensure as a professional clinical counselor. Currently, rehabilitation counseling professionals who teach in rehabilitation counselor programs come from varying backgrounds, including vocational rehabilitation counselors (public and private sector), rehabilitation specialists, physical therapists, and occupational therapists; while beneficial to rehabilitation counseling, they may not be eligible to become licensed as professional clinical counselors without taking additional courses or obtaining another degree. Additionally, there are concerns about rehabilitation counselors losing their professional identity. Therefore, adopting a curriculum that focuses on vocational rehabilitation learning outcomes while infusing clinical mental health learning outcomes will aid in alleviating these fears. Long term, a reunification of the rehabilitation counseling professions (i.e., rehabilitation counselor educators, vocational rehabilitation counselors, rehabilitation specialists, physical therapists, and occupational therapists) will need to happen, as splintering of the profession occurred well before the CORE and CACREP merger process began. It is my hope that the merger will bring about changes in counseling that are beneficial for all counseling professionals.

3. What do you consider to be your major contribution to the development of the counseling profession and why?

Increasing faculty diversity as well as student diversity has been a cornerstone of my contribution to the development of the counseling profession. I have been intentional about recruiting AND retaining diverse students and faculty worldwide. The counseling profession has historically been predominantly White. However, the clients that present for counseling continue to come from increasingly diverse backgrounds. Hence, recruitment and retention of African American students and faculty are essential in the 21st century to meet the needs of diverse client populations. Therefore, I will continue to present and publish on the topic of diversity and the need to be responsive to all aspects of diversity. Undertaking my mission to speak about the necessity to respect diversity not only in conversation but also through action is an endeavor that I will continue to pursue.

Another contribution of mine is mentorship. When working in academia, one of the most valuable resources faculty members can acquire is a mentor. Personal relationships and support systems are important factors for a successful career. I believe that participation in formal and informal networks

and mentoring relationships is critical in the persistence of African American female faculty in the academy. Mentors provide support, guidance, information, and advice to their mentees who may be struggling with career advancement. A mentor can serve as a support system for a faculty member by providing protection, coaching, and even validation for them through acceptance, friendship, and role modeling.

I believe in the importance of mentoring counselors, students, and faculty. While recruitment is important, retention efforts are even more crucial. I have spent countless hours focusing on the recruitment and retention of African American students and faculty. Additionally, I enjoy speaking locally, nationally, and internationally about issues that affect people of color, including those with varying disabilities. While licensed professional clinical counselors are trained to work with people with mental and emotional conditions, they often lack knowledge to effectively assist people with physical disabilities. I have been fortunate to fill the gap by providing trainings in this area.

4. What three challenges to the counseling profession as it exists today concern you most?

Despite the fact that counseling has been a helping profession for decades, it still lags behind social work and psychology in terms of recognition as a profession. If the counseling profession aspires to obtain the same status as other helping professions such as social work and psychology, we must utilize our specialty areas as one cohesive profession. Social workers have done this successfully for decades through being known by the profession first, and then by their specialty areas. For example, someone may seek out a medical social worker that works in a hospital setting. In essence, the setting determines the specialty area of the social worker; counseling should consider adopting the same process. Counselor training is frequently viewed as not being on par with psychology. Therefore, adopting a standardized curriculum for training counselors will aid in eradicating this myth.

Another challenge is the lack of access to billing for Medicare on the part of counselors. Part of the reason for this disparity is that counselors are not viewed as having the appropriate training to serve as professional helpers similar to social workers and psychologists. While the need for trained professionals continues to increase, counseling has not been embraced by the mainstream. Efforts are underway to achieve parity that will allow counselors to bill Medicare—to date, this has not happened. Again, adopting a standardized curriculum will increase the likelihood of counselors serving as vendors for Medicare.

A third area of concern is the looming financial crisis that many institutions of higher learning face. Declining enrollments and increasing tuition costs make recruiting and retaining quality students and faculty a challenge. More attention should be given to offering alternatives to traditional classroom settings as a way to reach more students. Developing and implementing a curriculum that appeals to a broader audience is one way to attract diverse faculty and students. Institutions that offer welcoming environments and appreciate differences will be at the forefront of any future growth.

5. What needs to change in the counseling profession for these three concerns to be successfully resolved?

I think it will be important for the counseling profession to take the time to respect diversity in all forms, not only in language but also in action. More unification is necessary between disciplines. Embracing an approach that demonstrates that we are ALL counselors first will be an important first step toward unification of the profession. Professional conferences should be inclusive of all specialty

areas when offering sessions. Counselors should take the time to learn about other specialties. We show ourselves as a much stronger profession if we train counselors who can provide services to a diverse population, and that includes meeting the needs of people with disabilities.

With respect to billing parity, counselors should band together to advocate for Medicare. Standing as one unified profession will allow our voices to be heard on a broader scale. Finally, offering a diverse curriculum that meets the needs of underrepresented and underserved populations will aid in increasing enrollment in institutions of higher learning.

6. As a woman of color, what has been your experience in counselor education? What advice would you give to others from your experience?

I am thankful for my position and experiences as a counselor educator. I have had many experiences that most counselors do not get to have, and for that I am eternally grateful. I have had the opportunity to travel all over the country and abroad. My entire career as a counselor educator has consisted of working at a predominately White institution (PWI). I believe my training at a Research I PWI contributed to my gaining access to my position. I was fortunate to have mentors who advocated on my behalf and helped open doors that probably would not have been opened otherwise. I worked my way up from an assistant professor to a professor over a 10-year period. I served as the first African American department chair in the College of Education. Throughout my tenure, I actively recruited diverse students and faculty to the university. I had to work harder to prove I was as qualified as the dominant culture. I've had decisions challenged as well as faced harassment simply because of the color of my skin. At the end of the day, I've learned to do my best and not worry about it. The advice I would give to others based upon my experiences is to be the best you can be and do not let anyone make you feel that you are less—know your self-worth. I always share these words with my mentees: “We have to be better.” Last but not least, self-care!

7. If you were advising current counseling leaders, what advice would you give them about moving the counseling profession forward?

Unity makes strength. If we stand together as a profession, we will remain relevant. Advocate for the profession as a whole. Be knowledgeable about Medicare and other issues that affect our profession. Be a part of advocacy efforts that benefit all counselors. Be open-minded to being a counselor first with varying specialty areas. Listen to the concerns of the members of our professional counseling organizations, and finally, recruit students—they are our future!

This concludes the fifth interview for the annual Lifetime Achievement in Counseling Series. TPC is grateful to Joshua D. Smith, PhD, NCC, and Neal D. Gray, PhD, for providing this interview. Joshua D. Smith is a counselor at the Center for Emotional Health in Concord, North Carolina. Neal D. Gray is a professor and Chair of the School of Counseling and Human Services at Lenoir-Rhyne University. Correspondence can be emailed to Joshua Smith at jsmit643@uncc.edu.