Integrating Vicarious Resilience into Counselor Education Programs

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Integrating Vicarious Resilience into Counselor Education Programs

Abstract
To support the retention of counselors in the field, suggestions influenced by a deficit lens caution and affirm the importance of preventative wellness to counselors while highlighting the impact related to the lack of attentiveness towards counselors' well-being such as impairment, vicarious trauma, compassion fatigue and burnout. The construct of vicarious resilience is a transformative lens of care (Hernandez-Wolfe, 2018). For counselors, this lens includes substantial benefits towards the counselor's wellbeing when collaborating with empathy and care to reframe initial thinking surrounding the therapeutic relationship. This article consists of a conceptual framework for integrating vicarious resilience into counselor education as a culturally responsive construct by addressing (a) empirical and conceptual literature related to vicarious resilience from varied fields including mental health and education; (b) dimensions of vicarious resilience to promote operational awareness of the construct; (c) sentipensante as an andragogical framework for implementing vicarious resilience into counselor education; (d) and strategies for implementing vicarious resilience into curriculum with sentipensante as an andragogical lens and framework.

Keywords
vicarious resilience, sentipensante, counselor education, counseling

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The advantages of conducting counseling from the counselor’s perspective are limited in research. Though, continued investigation of perceived advantages and satisfaction regarding counseling with the client’s perspective increase that aim to improve counseling services provided (Feltham, 2002). In contrast, studies regarding vicarious trauma, impairment, burnout and compassion fatigue comprise a deficit lens when considering potential harm faced by mental health clinicians while working with clients (Branson, 2019; Figley, 2002; Gladding & Newsome, 2010; Hernández et al., 2007, 2010; Quitangon, 2019; Watkins, 1983) as related to the counseling profession through the formation of the therapeutic relationship or working alliance (Sommers-Flanagan & Sommers-Flanagan, 2018). Literature surrounding vicarious trauma indicate the harmful effects of conducting counseling and disadvantages of an ongoing and inevitably empathic relationship especially when considering clients impacted by trauma (Branson, 2019; McCann & Pearlman, 1990). Symptoms of vicarious trauma consists of physical, mental, and emotional detriments that impact mental health clinicians’ well-being and further result in the decline of quality surrounding services provided such as cognitive inability to discuss instances of trauma in sessions, sudden alterations in worldviews and social isolation (Aparicio et al., 2013; Branson, 2019).

Consequently, counselors receive encouragement to foster self-care and wellness as a strategy for continuation in work preventatively against impairment (Gladding & Newsome, 2010) further emphasizing the idea that counselors may not be able to substantially benefit from their work with clients. The construct of vicarious resilience provides a counterargument against counselors not receiving benefits from working with clients. Engstrom et al. (2008) defined vicarious resilience as occurring when mental health clinician’s work with clients substantially impacts their own lives through inspiring effort towards self-improvement.
Research related to vicarious resilience included the perceptions of mental health clinicians with clients impacted by traumatic circumstances of political torture, sexual abuse, and interpersonal trauma (Edelkott et al., 2016; Engstrom et al., 2008; Gangsei, 2004; Hernández, 2002; Hernández et al., 2007; Hernández-Wolfe et al., 2015; Pack, 2014; Silveira & Boyer, 2015). Through the development of close and empathic relationships with clients, studies included an emphasis towards a greater likelihood for vicarious resilience to occur (Hernández-Wolfe, 2018; Killian et al., 2017). Other research contained the construct of vicarious resilience’s application to other systems including romantic relationships with members impacted by childhood sexual abuse (Francis Laughlin & Rusca, 2020). Hernández-Wolfe et al. (2015) later implicated that vicarious resilience has the potential to improve the endurance and longevity of mental health clinicians to continue their work with clients impacted by traumatic circumstances.

In alignment with vicarious resilience, sentipensante is a framework focusing on the ability of relationships to foster growth and learning among students (Rendón, 2014). Furthermore, sentipensante is a recommended andragogical framework for teaching in counselor education to implement vicarious resilience as a culturally responsive construct through the emphasis of community and a safe environment for students to share in vulnerability (Rendón, 2014). The sentipensante classroom comprises empathy expected similarly in session among the counselor and client that promotes connection and humility (Mearns & Thorne, 1988). The cultivation of “intellectual, social and spiritual development” includes the expectation of the sentipensante framework (Rendón, 2014, p.66) which relates to varied dimensions of vicarious resilience. Further parallel among the counseling session and sentipensante classroom includes Rendón (2014) who acknowledges the educator as a
learner emphasizing mutual learning and growth in the classroom. Healing of students within the sentipensante classroom results from the educator’s ability to foster safety and security through their own wholeness and openness towards lifelong learning (Rendón, 2014).

The idea of integrating the construct of vicarious resilience within counselor education aligns with counselor’s ethical requirements to remain competent through continued learning as noted by the American Counseling Association (ACA) Code of Ethics (2014, Section C.2.f). Research related to vicarious resilience parallels ACA’s ethical requirements, resulting in mental health clinicians recognizing increased self-awareness (Edelkott et al., 2016; Hernández, 2018; Killian et al., 2017) along with other elements related to growth such as perception towards power, privilege, and oppression (Hernández-Wolfe et al., 2015; Killian et al., 2017). Recommendations in the training of counselors include emphasis of the counselor’s ability to pursue personal and professional growth to provide the best care to clients in session (Mearns & Thorne, 1988). Gladding and Newsome (2010) recommended tending to boundary setting, continuing growth of self-awareness, practicing self-care and prioritizing humor.

Correspondingly, the Council for Accreditation of Counseling and Related Educational Programs (CACREP) standards requires curriculum to include strategies surrounding implementing personal and professional evaluation (2015, Section 2.F.1.k) along with strategies for self-care (2015, Section 2.F.1.l). Implementing the construct of vicarious resilience within the counselor education classroom would allow budding counselors to recognize its occurrence and promote efforts to both sustain and retain counselors for long-term employment while increasing the presence of the construct in the counselor education field through teaching and modeling. To further expand upon research of vicarious resilience
in counselor education while combining literature from related mental health fields not limited to counseling, social work, psychiatry and psychology, this paper consists of a conceptual framework for integrating vicarious resilience into counselor education as a culturally responsive construct by addressing the following: (a) empirical and conceptual literature related to vicarious resilience from varied fields including mental health and education; (b) dimensions of vicarious resilience to promote operational awareness of the construct; (c) sentipensante as an andragogical framework for implementing vicarious resilience into counselor education; (d) and strategies for implementing vicarious resilience into curriculum with sentipensante as an andragogical lens and framework.

**Empirical and Conceptual Literature on Vicarious Resilience**

Hernández-Wolfe (2018) presented the construct of vicarious resilience after working in Columbia with refugees and activists in Columbia where mental health clinicians benefited from working with clients through their own self-improvement (Hernández, 2002). Additionally, Hernández et al. (2007) witnessed therapeutic dynamics among mental health clinicians and survivors of traumatic circumstances including violence and kidnapping while Gangsei (2004) worked with survivors of torture. Hernández-Wolfe (2018) later formalized that vicarious resilience resulted from responses with mental health clinicians revealing aspects of inspiration and strength drawn from their work with clients who experienced traumatic conditions. Information from mental health clinicians foreshadowed that working with trauma survivors might have a positive effect allowing a transformative experience (Hernández-Wolfe, 2018)

Further research included Hernández et al. (2007) exploring the perceptions of mental health clinicians who worked with clients impacted by political persecution including violent
and torturous acts. This study incorporated a grounded and phenomenological approach with participants to gather their perceptions of their work with clients (Hernández et al., 2007). One participant mentioned that their work with clients caused them to believe that they could recover from similar traumatic experiences (Hernández et al., 2007). Another participant mentioned that their work with a client influenced them to create their own clinical therapy model and that they would use the model to work with future clients (Hernández et al., 2007).

A general theme emerging from mental health clinicians’ perceptions was an increased sense to persist and reassess their own challenges (Hernández et al., 2007). Hernández et al. (2007) asserted that vicarious resilience is a complex construct with potential to contribute to the inspiration for mental health clinicians to further grow internally as participants mentioned effects related to their own emotions, behaviors, and attitudes.

Participants from a study conducted by Engstrom et al. (2008) emphasized similar effects related to internal growth in mentioning that their perspectives of life changed because of their work with clients who survived experiences of torture. Life altering perspectives related to participants acknowledging that they possessed freedom and varied privileges (Engstrom et al., 2008). Interactions with clients fostered strengthened coping with circumstances faced by participants in their own lives (Engstrom et al., 2008). Researchers distinguished the construct of vicarious resilience among similar constructs of posttraumatic growth and empathic responses (Engstrom et al., 2008). Engstrom et al. (2008) resultantly bolstered the healing effects found in the perceptions of mental health clinicians working with torture survivors to further emphasize vicarious resilience as an impactful construct.

Acevedo and Hernández-Wolfe (2014) highlighted the impact of vicarious resilience in a qualitative study of the middle school environment where students faced circumstances of
location displacement and other aspects of hardship. Teachers provided their perceptions of working with students that comprised themes surrounding an overall increase of self-awareness (Acevedo & Hernández-Wolfe, 2014). These themes included gained awareness of advocacy, compassion fatigue and the impact of trauma, cultural diversity related to race and gender, shifts in their interpersonal relationships, recognition of their own challenges, restructuring of their understanding of their own issues and the acceptance of external perspectives (Acevedo & Hernández-Wolfe, 2014). In addition, participants mentioned instances related to increased creativity when working with students who reacted in the classroom with aggression through working to create a soothing and calm environment for learning (Acevedo & Hernández-Wolfe, 2014). Other participants described circumstances where they gained courage to leave an abusive marriage and others mentioned their families noticing a change in their parenting (Acevedo & Hernández-Wolfe, 2014). Acevedo and Hernández-Wolfe (2014) later contrasted the differences among teachers and mental health clinicians but highlighted the impactful results from the relationship formed between teachers and students that included teachers being able to further develop their internal awareness.

Francis Laughlin and Rusca (2020) examined vicarious resilience when approaching work with romantic relationships involving members who survived childhood sexual abuse. The conceptual article highlighted vicarious resilience as a construct related to the mental health clinician and client dynamic and further asserted that it could be applied to working with romantic relationships (Francis Laughlin & Rusca, 2020). Related to working with romantic relations, the construct of vicarious resilience paralleled a positive feedback loop where the conjunction of narrative therapy would allow stories of resilience to inspire one another (Francis Laughlin & Rusca, 2020). Further acknowledgement of vicarious resilience included
recognizing that individuals who experienced trauma could also build resilience in hearing another’s account of resilience (Hernández et al., 2007) and the usefulness in applying vicarious resilience to other systems (Francis Laughlin & Rusca, 2020).

Aspects of vicarious trauma and intersectionality further illustrated the usefulness of vicarious resilience when Hernández-Wolfe et al. (2015) qualitatively examined the construct while gaining perceptions of mental health clinicians working with survivors of torture. The study included the exploration of intersectionality and aspects of power related to privilege and oppression where participants gained awareness of circumstances related to race and their culture (Hernández-Wolfe et al., 2015). For instance, one participant mentioned gaining awareness that their skin color showcased a privilege and becoming aware of their intersects related to their native language (Hernández-Wolfe et al., 2015). Another participant discussed an increase of awareness towards the need for social change and recognizing equity occurring during their work with clients and causing them to formalize their advocate identity (Hernández-Wolfe et al., 2015). Recommendations included focusing on the strengths of mental health clinicians and their clients which emphasized the need to foster and increase attention towards the benefits of mutual growth (Hernández-Wolfe et al., 2015).

Relatedly, Silveira and Boyer (2015) highlighted the emphasis of mutual growth when working with children and explored vicarious resilience within counselors working with child and youth clients impacted by interpersonal trauma. Participants mentioned an increase when considering hope and positivity, inspiration and further development of their personal and professional challenges and strengths (Silveira & Boyer, 2015). Moreover, counselors revealed making an effort to embody related client’s goals in their own personal relationships (Silveira & Boyer, 2015). Silveira and Boyer (2015) further observed participants having an
increased positive view of their lives after gaining understanding of vicarious resilience. Participants acknowledged increased confidence from a rewarding aspect from working with clients that aided in highlighting their strengths (Silveira & Boyer, 2015). This impact of vicarious resilience further related to the development of endurance and retention of mental health clinicians especially to be considered for budding counselors within the counselor education field (Hernández-Wolfe et al., 2015).

Hernández et al. (2010) formulated a plan discussing and differentiating among various constructs including vicarious resilience, posttraumatic growth, resilience, reciprocity, vicarious trauma, and compassion fatigue. They asserted that the plan would provide support for mental health clinicians involved in working with clients impacted by trauma (Hernández et al., 2010). They provided definitions of vicarious trauma and compassion fatigue while noting the criteria to include ongoing relationships with empathy (Hernández et al., 2010). They further differentiated among vicarious trauma and compassion fatigue by specifying that vicarious trauma occurred due to the inevitable ongoing exposure to traumatic stories in sessions (Hernández et al., 2010). They also noted that compassion fatigue included the personal life and professional exposure of individuals when considering their proximity to traumatic stories and the mental health clinician’s own traumatic history along with their inability to partake in self-care (Figley, 2002; Hernández et al., 2010). Researchers also highlighted the construct of “altruism born of suffering” defined as survivors of traumatic circumstances later developing into activists to support others impacted by trauma (Hernández et al., 2010, p. 71). An important aspect of “altruism born of suffering” relates to survivors healing from their own circumstances (Hernández et al., 2010, p.71). Hernández et al. (2010) later asserted that in distinguishing and defining the varied constructs that there was a need
for vicarious resilience as means of countering the negative constructs such as vicarious trauma and compassion fatigue.

Killian et al. (2017) developed an instrument to evaluate the presence of vicarious resilience within mental health clinician working with clients impacted by trauma. The instrument’s formation included three hypotheses related to having significant correlation with similar constructs of posttraumatic growth and compassion satisfaction along with a negative correlation with compassion fatigue or variations of burnout (Killian et al., 2017). Results supported the three hypotheses for both convergent and discriminant validity while the Cronbach’s alpha reliability of the instrument was .92 (Killian et al., 2017). One hundred-ninety mental health clinicians who worked with clients impacted by trauma completed the instrument electronically (Killian et al., 2017). Seven factors emerged from the implementation of an exploratory factor analysis and were later coined as dimensions of vicarious resilience (Hernández-Wolfe, 2018; Killian et al., 2017).

Dimensions of Vicarious Resilience

Seven resulting dimensions of vicarious resilience operationalized varied aspects of the construct (Hernández-Wolfe, 2018; Killian et al., 2017). These dimensions may provide support towards assessing indicators of vicarious resilience in counseling professionals to include counselors-in-trainings, counselors, and counselor educators. The usage of dimensions promotes further awareness of vicarious resilience in counseling professionals to open to the likelihood of its occurrence as Blakemore and Firth (2003) stated that awareness promotes action. There is great potential that counselors experienced vicarious resilience before the creation of the construct but lacked awareness in its existence as Blakemore and Firth (2003) mentioned that actions can occur without awareness.
Changes in Life Goals and Perspectives

Clients impacted by trauma experienced posttraumatic growth allowing a positive development after traumatic circumstances (Hernández et al., 2007; Hernández-Wolfe, 2018). Hernández-Wolfe (2018) identified clients impacted by trauma fostering posttraumatic growth through creating healthier habits in life, growing in compassion and prioritizing relationships with loved ones. Mental health clinicians discussed experiencing vicarious posttraumatic growth from the therapeutic relationship due to empathy for their client’s circumstances (Hernández et al., 2007; Hernández-Wolfe, 2018). This vicarious posttraumatic growth resulted in mental health clinicians altering their own perspective towards their lives and goals (Acevedo & Hernández-Wolfe, 2014; Edelkott et al., 2016; Engstrom et al, 2008; Hernández et al., 2007; Hernández-Wolfe, 2018; Killian et al., 2017; Pack, 2014).

Client-Inspired Hope

Multiple studies examined the perceptions of mental health clinicians with clients impacted by varied trauma and resulted in an increased sense of hope (Hernández et al., 2007; Hernández-Wolfe, 2018; Killian et al., 2017). Mental health clinicians’ sense of hope varied among participants but highlighted that their work with clients was meaningful and possible when considering success in session (Hernández et al., 2007; Pack, 2014; Silveira & Boyer, 2015). Relatedly, another instance related to resulting hope included mental health clinicians acknowledging that their clients possessed strengths and the ability to relate with others despite traumatic circumstances (Silveira & Boyer, 2015). A sense of hope included further establishing the effect of vicarious resilience on mental health clinicians’ ability to continue their work with clients impacted by trauma (Hernández et al., 2007; Hernández-Wolfe, 2018).

Increased Recognition of the Client’s Spirituality as a Therapeutic Resource
Killian et al. (2017) recognized a connection among spirituality and emotions from the perceptions of mental health clinicians on the formalizing of vicarious resilience. Many mental health clinicians mentioned finding it necessary to discuss spirituality with clients and recognizing spirituality as a relevant source for coping (Hernández et al., 2007; Hernández-Wolfe, 2018; Killian et al., 2017). Mental health clinicians further mentioned becoming learners themselves of spirituality and creating an openness towards topics of religion and spirituality (Hernández et al., 2007). Thus, mental health clinicians began to consider more areas of culture for healing and further impacted their own awareness of coping related to their own challenges because of increasing their recognition of the client’s spirituality as a therapeutic resource allowed (Edelkott et al., 2016; Hernández et al., 2007).

**Increased Self-Awareness and Self-Care Practices**

Edelkott et al. (2016) highlighted mental health clinicians working with trauma survivors changing their perception about their own self-care. For example, mental health clinicians working with trauma survivors examined their ability to set boundaries among their professional and personal lives especially with a professional instance related to being able to mindfully leave their work and detach (Edelkott et al., 2016). Another instance included a mental health clinician mentioning a newfound ability in assessing the intentions behind their actions when implementing care for their clients (Edelkott et al., 2016). Other instances included improvement within relationships or parenting dynamics (Silveira & Boyer, 2015). Hernández-Wolfe (2018) further asserted the need for mental health clinicians to maintain balance among their professional and personal lives by tending to health circumstances related to sleep, monitoring amount of client assignments and their anxious or depressive responses.

**Increased Consciousness about Power Relative to Social Location**
Hernández-Wolfe et al. (2015) found perceptions of mental health clinicians to gain awareness in variations of power to include privilege and oppression along with exploration of intersectionality highlighting gained awareness in their ability to possess both privilege and oppression. They further discussed gained awareness related to power and social location motivating mental health clinicians to advocate and promote social change (Hernández-Wolfe et al., 2015). Killian et al. (2017) reported mental health clinicians administered the Vicarious Resilience Scale during their study aligning with responses related to increased consciousness as well as power and social location. Hernández-Wolfe (2018) acknowledged that attending to intersectionality of both clients and mental health clinicians affirmed vicarious resilience development. Implications related to increased consciousness about power and social location advocated for higher sensitivity towards cultural awareness to explore this aspect of vicarious resilience in future studies (Killian et al., 2017).

**Increased Capacity for Resourcefulness**

An increased capacity for resourcefulness included mental health clinicians recognizing their own endurance and resilience to handle life’s challenges while witnessing their clients work through difficulties (Hernández-Wolfe, 2018). Optimism regarding mental health clinicians’ attitudes resulted in further empathy and regard for their clients which vicariously occurred in their own lives (Hernández-Wolfe, 2018). Hernández-Wolfe et al. (2015) reported mental health clinicians having a higher regard for their work with clients and gaining awareness towards their own professional and personal resources allowing for greater self-efficacy. Other related aspects of resourcefulness highlighted mental health clinicians recognizing the value of community in colleagues and loved ones (Pack, 2014).

**An Increased Capacity for Attentiveness to the Patients’ Narratives of Trauma**
Killian et al. (2017) discovered that when mental health clinicians prioritized client’s improvement and resilience in session, there was an increase in their ability to focus and remain present during clients’ traumatic stories. Relatedly, Edelkott et al. (2016) observed mental health clinicians having an increased sense of patience when working with clients and a decrease in needing control in session. Mental health clinicians further described not needing to be in control occurring in their personal lives and an increased sense of freedom and peace (Edelkott et al., 2016). Edelkott et al. (2016) also bolstered mental health clinicians reassessing their role in session and understanding importance in allowing clients to lead and direct the content in session.

Sentipensante as an Andragogical Framework for Implementation of Vicarious Resilience

Rendón (2014) proposed sentipensante as a pedagogical framework encouraging internal development of students. Fostering internal development of students is a concept related to the andragogical expectations of counselors to foster empathy for working with clients (Sadler-Gerhardt & Stevenson, 2012). Educators are challenged to facilitate the development of both intellectual skills and personal growth related to spiritual and social growth (Allison, 2010; Ramirez, 2011; Rendón, 2014). Varied dimensions of vicarious resilience correspond with developing intellectually, spiritually, and socially (Hernández-Wolfe, 2018; Killian et al., 2017). The classroom environment requires a centering on relationships and community (Rendón, 2014). Relationship and community-centered environments relate closely to the expectation of the counselor to form a strong relationship or therapeutic alliance with clients (Sadler-Gerhardt & Stevenson, 2012).
To foster the relationship and community centered environment, the educator’s role in the classroom expanded to encompass identifying as an “artist, activist/social change agent, teacher/learner, healer/liberator, and humanitarian” (Rendón, 2014, p. 138). The responsibilities of the artist included promoting creativity and deep thinking (Rendón, 2014). The activist/social change agent’s role surrounded social justice endeavors and the humanitarian’s role included inspiring service in students (Rendón, 2014). Connectedly, Acevedo & Hernández-Wolfe (2014) recognized teachers working with students impacted by trauma gaining consciousness towards advocacy efforts. Ratts et al. (2016) similarly advocated for counselors to seek opportunities for social justice in working with clients. The healer/liberator’s role included allowing students to restore areas wounded from their past circumstances (Rendón, 2014). The teacher/learner’s role contrasted the identity of the educator to not only teach, but to also learn from their engagement with students (Rendón, 2014). The multiple roles exist as a collective of identities further emphasizing the need for flexibility and versatility that connects with the roles of an integrative counselor (Sommers-Flanagan & Sommers-Flanagan, 2018).

Rendón (2014) argued for a need to transcend the norms of education requiring openness and flexibility to use the sentipensante approach. Outside of the norms of education, sentipensante advocates for students to gain awareness towards “personal growth, humanitarianism, and social change” (Rendón, 2014, p. 141). The three goals of sentipensante included disconnecting from learning that does not include promoting wholeness, developing individuals who are experienced with various areas of knowledge and perspectives along with encouraging collaboration and partnership among one another (Rendón, 2014). The Multicultural and Social Justice Counseling Competencies similarly encompass the intent for
counselors to gain awareness of themselves when considering attitudes, beliefs, knowledge, skills, and actions (Ratts et al., 2016). Yalom and Leszcz (2005) also embodied similar goals when considering group counseling practices in seeking to promote cohesion and social development of members through illuminating here-and-now experiences towards outside occurrences.

**Strategies for Implementing Vicarious Resilience in Counselor Education**

The following strategies are proposed for integrating vicarious resilience into counselor education after discussion and operationalizing the construct with students. Strategies recommended will be aligned with sentipensante and dimensions of vicarious resilience to further corroborate the importance of its integration into counselor education. Strategies proposed will also surround the promotion of the relationship centered classroom environment (Rendón, 2014) due to the concept’s synonymy to vicarious resilience.

**Modeling**

Discussions surrounding the counselor educator’s experiences of vicarious resilience would illuminate the parallel process of the counselor educator as a learner (Rendón, 2014). Modeling through discussions of experiences of vicarious resilience is analogous with Rendón’s (2014) perspective regarding the educator’s identity to include being a learner; the counselor educator would emphasize their ability to learn from their own professional accounts of working with clients while inspiring hope in students as noted by the related dimension of “client-inspired hope” (Hernández -Wolfe, 2018; Killian et al., 2017). This would also relate to the importance of a multi-human curriculum within the sentipensante framework where students gain awareness in education without limitation to literary texts but explore projects contributing to social change and advocacy (Rendón, 2014). Instances where
counselor educators learn from students within the classroom through projects surrounding students’ clinical or advocacy focus would also serve as opportunity to illuminate the experience of vicarious resilience as Francis Laughlin and Rusca (2020) advocated for the construct to be applied to other systems outside of clinical work.

**Reflective Assignments on Related Prior Experiences**

Relatedly, Francis Laughlin and Rusca (2020) argued that vicarious resilience had potential to apply to other systems, therefore allowing students the opportunity to reflect on past potential experiences related to vicarious resilience would promote further recognition and understanding of the construct. Reflecting on related prior experiences would allow students to shift their thinking of client sessions to critically think towards how their interactions with clients could positively transform themselves both professionally and personally. It would also model a related dimension of vicarious resilience when considering attentiveness to narratives of trauma (Killian et al., 2017). Rendón (2014) encourages the development of students to think creatively and critically while within the educator’s role of an artist. The counselor educator may also align with the role of the healer within sentipensante in being able to open to students’ well-being and reduce students’ perspective of limitations of sharing in class (Rendón, 2014). Students’ ability to share would allow for assessing their internal growth and to gauge student’s status in relation to the construct as supported by Rendón (2014). Additionally, this would provide insight to their meaning making of the educational material covered.

**Pair Collaboration**

Opportunities allowing students to work together in pairs would simulate the counselor-client dynamic and further simulate the occurrence of vicarious resilience. For
instance, utilizing the *Think, Pair, Share* method from Lyman (1981) where students think about a prompt, partner with another student, and share their thoughts of the prompt would promote opportunity for vicarious resilience to occur especially in the inclusion of stories detailing resilience. The thinking prompts when utilizing the *Think, Pair, Share* could include case studies detailing growth in clients impacted by trauma or reflective thinking related to their own past experiences with vicarious resilience. Counselor educators would align with Rendón (2014) in creating an environment prioritizing relationships and community to promote learning and would illuminate the therapeutic alliance simulating the counselor-client dynamic. It would also relate to the dimensions of vicarious resilience surrounding increasing self-awareness and resourcefulness in learning more about their own thinking while also gaining understanding through collegial support (Hernández-Wolfe, 2018; Killian et al., 2017).

**Group Advocacy Activities**

Rendón (2014) asserted the need for a community within the classroom environment and emphasized the healing capabilities for students when considering fostering a safe space for student interactions. To foster a safe space for students Rendón (2014) advocated for a classroom environment open to emotions with sensitivity and attentiveness towards providing support to students. Group activities with advocacy objectives would allow students to brainstorm ways to provide aid to varied clinical populations while allowing students to collaborate and gain awareness of the resourcefulness of their peers. Advocacy related activities parallel with the goal of sentipensante for students to “learn to recognize social inequities and take action against them” (Rendón, 2014, p. 142) which would connect with the dimension of vicarious resilience related to power and social location (Hernández-Wolfe,
This increased awareness of resources would align with a dimension of vicarious resilience and allow students to increase their self-efficacy (Hernández-Wolfe, 2018).

**Conclusion**

The American Counseling Association (ACA) Code of Ethics (2014) outline the responsibilities of counselors as promoting the development of clients’ well-being while focusing on clients’ care to foster considerate rapport and connection. Through the implementation of positive skill usage across theoretical orientations with person-centered underpinnings, counselors utilize empathy and unconditional positive regard along with complementary interventions to promote best care for clients’ well-being (Mearns & Thorne, 1988; Sommers-Flanagan & Sommers-Flanagan, 2018). In contrast, counselors promote preventative care of the profession while bolstering the negative impact of lacking in attentiveness towards counselor well-being with deficit literature related to impairment, vicarious trauma, compassion fatigue and burnout (Gladding & Newsome, 2010; Hernández et al., 2010; Quitangon, 2019; Watkins, 1983). The implementation of vicarious resilience as a culturally responsive construct in counselor education might alleviate this incongruence to allow for a transformative experience to reframe the perceived impact of the therapeutic relationship between the counselor and client. Consideration of the dimensions of vicarious resilience would increase the benefits related to professional counseling identity and expand the capacity of counselors to remain in the profession. Therefore, counselors will be able to continue nurturing therapeutic relationships with clients while recognizing aspects of their own improvement through the integration of vicarious resilience that promotes the impact of
mutual growth formed in alliances (Hernández-Wolfe, 2018; Sommers-Flanagan & Sommers-Flanagan, 2018).

References


