

Chapter 6

Dialectical Gatekeeping in Counselor Education

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EXECUTIVE SUMMARY

This chapter introduces counselor educators and supervisors to an approach to gatekeeping based on the theoretical principles and practices of dialectical behavior therapy (DBT). DBT offers opportunities to conceptualize impasses from a variety of perspectives, balancing scrutiny and validation for each. Because some counselors-in-training may have trauma histories, a DBT-informed approach may facilitate mutual understanding of students' trauma responses and their functions while still holding students accountable for problems in professional behavior. Readers will be able to modify clinical principles for use in educational and supervision settings. A fictitious case study illustrates how these principles might inform working with students in situations in which their marginalized identities and trauma responses might not be fully understood by all involved.

INTRODUCTION

Students are doing the best they can – and they need to do better, try harder, and be more motivated to grow and improve (Freeman et al., 2019). As counselor educators, who among us can look back on our own development in our master's degree programs without seeing both of these truths reflected back at us? Counselors-in-training beam with enviable levels of hope, optimism, and enthusiasm for improving the lives of others by skillfully using their very selves in relationship to those who are suffering emotionally (Barnett, 2007; He et al., 2024). However, while neces-

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sary, optimism, enthusiasm, and good intentions are not sufficient for becoming competent and ethical counselors. Counselors-in-training may exhibit problems with professional responsibility, competence, maturity, and integrity, all of which must be comprehensively assessed and addressed (Brown, 2013). Therefore, while counselors-in-training may be doing the best they can, they need to make their best better. The Council for Accreditation of Counseling and Related Educational Program (CACREP) requires that counselor educators must facilitate that development in our students (CACREP, 2024). This becomes challenging when students show signs of mental or emotional impairment or problems with receptivity to supervisory feedback (Brown-Rice & Furr, 2016).

When counselor educators have concerns about a student's fitness for the profession, they often face ethical and pedagogical dilemmas with no straightforward solutions (DeCino et al., 2022). The stakes are even higher when the student has a history of unprocessed trauma (Parker et al., 2022). Counselor educators might find it helpful to conceptualize these as dialectical dilemmas and approach them as a dialectical behavior therapy (DBT) team might approach therapy-interfering behavior in clients or team-interfering behavior in clinicians. In this chapter, I will provide a brief background of DBT with a focus on dialectics, present a selection of DBT principles, and offer examples of how DBT principles might be applied or modified in a counselor education setting. I will use a fictitious case study to illustrate stakeholders' perspectives and potential actions.

Caveat Regarding DBT-Informed Practice in Counselor Education

I first wish to make it clear that my choice to approach gatekeeping in counselor education from a DBT perspective does not necessarily imply that students who raise concerns from their faculty have personality disorders or any other kind of mental or emotional disorder. Instead, as many of my former clients have noted, DBT offers numerous helpful frameworks and skills for addressing complex problems, making it applicable in various situations, regardless of whether anyone involved has a diagnosable mental or emotional disorder. At no point in working with counselors-in-training is it appropriate or ethical for faculty or supervisors to assign diagnostic labels to students or treat them in a manner that pathologizes or stigmatizes them (Rust et al., 2013).

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