

The United States is experiencing an increase in multicultural diversity and counseling ethical codes and training standards have responded to the need for multicultural training, competence, supervision, and practice (American Counseling Association [ACA], 2014, Standard A.2.c., B.1.a., F.2.b., 6.b., 11.c.; American Mental Health Counselors Association [AMHCA], 2010, Standard A.I. a; C.1.a., g., l., C. 7.a.; Council for Accreditation of Counseling and Related Educational Programs [CACREP], 2009, Clinical Mental Health Counseling Standards C.1., D.2., E. 1., 3). The country is also experiencing an increase in multilingual diversity. From 1980 to 2007, the percentage of non-English speakers residing in the country grew 140% while, during the same period the overall U.S. population grew by only 34%. In addition, 55.4 million individuals, or 20% of the overall U.S. population, reported that they speak a language other than English at home. The majority of the individuals speaking a language other than English at home reported speaking English “well” or “very well.” However, approximately 14 million of them reported speaking English “not well” or “not at all” (Shin & Kominski, 2010). This rise in non-English speakers in the United States, particularly those with limited English proficiency (LEP), has created a greater need for bilingual counseling services, especially considering the fact that non English-speakers, particularly Latinos and Asian Americans with LEP, have lower odds of receiving mental health services than do their monolingual, English-speaking counterparts (Sentell, Shumway, & Snowden, 2007).

Although there are relatively few mental health counselors with adequate linguistic skills to serve the LEP population, those who are bilingual and potentially capable of providing these services to LEP clients are often reticent to do so, possibly because they lack training in providing counseling services in languages other than English (Biever et al., 2002; Verdinelli & Biever, 2009). These data underscore the need for counseling programs that attend to the training and supervision of bilingual mental health counseling students—students who have the foundational linguistic abilities to provide counseling services to this growing LEP population. Literature pertaining to bilingual counseling and the supervision of bilingual mental health counselors and counseling students is sorely needed; however, it is sparse at best (Fuertes, 2004). A few studies have been completed that shed light on bilingual practicing counselors’ perceptions of their provision of services in two languages as well as their sense of preparation and training to provide counseling in a language other than English (Castaño, Biever, González & Anderson, 2007; Verdinelli & Biever, 2009). A review of this literature follows.

### **Review of Literature**

Although offering counseling services in a client’s native or preferred language has been highlighted in the literature as important and an ethical mandate (Santiago-Rivera, Altarriba, Gonzalez-Miller, Poll, & Cragun, 2009), little research has touched upon the training of helping professionals as well as their perspectives and experiences of providing services in a non-dominant language. To fill this gap, Castaño et al. (2007) surveyed 127 practicing bilingual psychologists to assess their self-perceived level of second-language proficiency (conversational, reading, and writing), their concerns associated with their second-language proficiency, how they learned the second language, and the training they had received to provide psychotherapy in a second language. Participants were also asked to describe how they personally prepared to provide services in a second language and their suggestions for improving bilingual therapy training. Concerning self-perceived language proficiency, results revealed that many of the participants (52%) were concerned with their second-language vocabulary, as well as their

ability to express psychological concepts in session (58%). Concerning bilingual training, a slight majority of participants indicated that they received no formal training regarding psychotherapy in a second language. Those who did receive training reported receiving bilingual supervision (39% of participants), attending workshops related to bilingual counseling (28% of participants), and taking courses specific to the provision of bilingual counseling (16% of participants). Respondents considered courses associated with bilingual therapy, such as bilingual assessment methods courses, cultural courses, and bilingual psychotherapy skills and techniques courses, as the most useful. They also highlighted the importance of bilingual supervision in the training of bilingual therapists—in particular, with supervisors who are bilingual and knowledgeable of pertinent cultural issues. Concerning informal training, Castaño et al. (2007) reported that participants utilized the popular media, books, journals, and immersion experiences to enhance their second-language proficiency. With respect to professional growth, participants reported seeking consultation from Spanish-speaking colleagues and professionals.

Verdinelli and Biever (2009) conducted in-depth telephone interviews with 13 Spanish-English and English-Spanish bilingual practitioners to better understand their experiences in providing counseling in a second language. All of the participants indicated that they had not received formal training, such as courses or bilingual supervision, related to psychotherapy in a second language. Instead, they reported learning “to provide services to Spanish-speaking clients through trial and error or by studying and researching the subject on their own” (Verdinelli & Biever, 2009, p. 236). This is similar to results reported by Biever et al. (2002) and Rivas, Delgado-Romero and Ozambela (2005), in which participants reported self- training and limited bilingual supervision opportunities. Also, similar to Biever et al. (2002), participants in Verdinelli and Biever’s (2009) study indicated that formal training, such as content courses and clinical supervision specific to bilingual services, would be helpful. Particular challenges of bilingual services reported by participants included translating their thoughts from their dominant language to their second language, using technical vocabulary, and understanding language variations between Spanish-speaking clients (e.g., differences in accent, vocabulary; Verdinelli & Biever, 2009).

Although these studies have shed light on bilingual practicing therapists’ perceptions of counseling in two languages as well as their sense of preparation and training to provide counseling services in a language other than English, each of these studies limited their participation to practicing psychologists. Thus, no studies were found that analyzed the experiences of bilingual mental health counselors or, more specifically, the future generation of counselors (i.e., current bilingual mental health counseling students) regarding their experiences with and perspectives pertaining to providing counseling in a second language. The purpose of the current study, therefore, was to fill this gap. In particular, we aimed to understand qualitatively these students’ experiences in providing counseling in a second language, steps they took to enhance their language and professional proficiency related to counseling in a second language, their experiences with supervision, as well as their suggestions for improving bilingual counseling training, supervision, and practice.

## **Method**

### **Phenomenology**

Phenomenology, a constructivist approach to qualitative research, values participants’ lived experience and asserts that multiple realities of an experience exist (Hays & Wood, 2011).

A phenomenological approach to data collection and analysis was selected as it allowed the researchers to understand in-depth, the lived experience of the phenomenon (Patton, 2002). We wanted to understand the lived experiences of practicum students who were practicing bilingual counseling. The intention of a phenomenological study is to “understand the individual and collective internal experience for a phenomenon of interest and how participants intentionally and consciously think about their experience” (Hays & Wood, 2011, p. 291).

### Participants and Study Procedures

Participants were recruited through a targeted email to all mental health counseling students at one southwest university enrolled in a practicum course during the 2009-2010 academic year. The intent was to hear the voices of the participants rather than to generalize the findings. Therefore, the only criterion for initial inclusion in the study was having had experience with bilingual counseling during their practicum or internship. All interviews were audio recorded for the purpose of transcription and analysis. Purposeful sampling was used to identify practicum and internship students who self-identified as practicing bilingual counseling at their clinical site. Specifically, potential participants were informed that they would be agreeing to be interviewed for approximately 60 minutes. The six participants ranged from 25-54 (mean = 35) years in age and included five females and one male. Four of the participants self-identified as Hispanic, one as Lebanese, and one as White. Polkinghorne (1989) recommends a sample size of 5-25 participants for phenomenological inquiry. The recruitment of additional participants ceased once saturation of themes became evident. Table 1 contains detailed information about each participant. Participants' real names, as well as any identifying information, have been changed in order to protect their confidentiality.

*Table 1: Participant Demographic Characteristics*

Participant	Age	Sex	Ethnicity	Primary Language Spoken	Secondary Language Spoken
1	54	F	Hispanic	English	Spanish
2	26	F	Lebanese (Arab American)	English	Arabic
3	50	F	Hispanic	Spanish	English
4	28	F	White	English	Spanish
5	27	M	Hispanic	English	Spanish
6	25	F	Hispanic	English	Spanish

### Data Collection

Individual interviews were utilized as the method of data collection. All participants were interviewed using a semi-structured interview process and were asked the same grand research question: “What have been your experiences with bilingual counseling?” Sample sub-questions included: “What have been your experiences with language mixing and switching?” “What is your understanding of clients’ language and culture?” And “can you discuss your self-awareness of language and culture; particularly in the counseling relationship?”

Demographic data were also collected. Data triangulation allows data to be collected from many sources, and/or by many investigators (Shank, 2002) and support for the findings is strengthened, increasing trustworthiness and credibility of findings (Patton, 2002). In the current study, one investigator was used to collect data, and two investigators assisted with data analysis, thus using investigator triangulation (Patton, 2002). None of the investigators served as supervisors or instructors for any of the participants.

### **Research Lens**

The research lens that we brought to the current study included a curiosity regarding how practicum students experience bilingual counseling. The lead author was a tenure-track assistant professor and she had experience teaching supervision and practicum courses as well as supervising students who were counseling in their second language. The second author was a tenure-track assistant professor, bilingual in English and Spanish, with previous experience counseling and providing supervision in his second language. The third author was a doctoral student, who was bilingual in English and Spanish, and had experience both counseling and supervising counseling students in her second language. All of these experiences led to the initiation of this study.

### **Data Analysis**

As the researchers approached the data, they used the "“phenomenological epoche” (Wertz, 2005, p.172), also known as bracketing procedures, (i.e., checking in with self and the other researchers) to attempt to separate their potential researcher bias from the participants' lived experiences. Data analysis was completed according to procedures consistent with Creswell's (2007) recommendations. Transcripts were generated from audio recordings and each was reviewed individually prior to making any initial meaning units out of the data in an effort to more fully understand what was said by each participant (Wertz, 2005). In organizing the data, statements from the interviews were organized into initial themes. The researchers were able to begin to discuss the deeper relationships emerging and create clusters of meaning. Then, we begin both textural and structural analysis of these themes (Creswell, 2007). These included the participants' expressions of what was experienced (e.g., bilingual counseling; textural description) as well as how bilingual counseling was experienced (structural description). The researchers' goal was to leave behind their experiences of the phenomenon and attempt to understand the participants' unique experiences (Wertz, 2005). Member checks were completed with the participants to gauge their perspectives on the analyses and themes and to further demonstrate trustworthiness of the results.

## **Results**

Each of the six participants' journey to practicing bilingual counseling during their practicum was different; however, there were similarities among their experiences as noted in the following emerging themes: *Un-intentionality: Initial Thoughts and Feelings, Challenges, Connections, and Barriers to Conducting Bilingual Counseling.*

Each of the six participants' experiences with learning their second language was unique. For example, Participant One was an elective bilingual (i.e., non-heritage language speaker) who had two years of college-level study in her second language; whereas, Participant Four studied her second language in college and then taught it at the high school level for three years.

However, although she had a degree in Spanish and a large amount of Spanish teaching experience, Participant Four doubted her ability to do counseling in the language. For Participant Three, English was her second language. She came to the U.S. from Mexico and reported that she was forced to learn the English language when she began to work here. She explains, "I didn't accept this culture as my culture, but I was able to speak English because I understand it was important for my survival."

Participants' Two, Five, and Six were circumstantially bilingual; they all learned their second language from their parents rather than through formal education. Each reported that having a second language tied them with their family and their culture. For Participant Five, the actual practice of the Spanish language, as well as knowing the culture of Mexico was important as the following quote illustrates:

I don't just know Spanish, I'm aware of the cultural things in Mexico, and I also go to a church which is Spanish-speaking, so basically, when they read the Bible, and when they sing the hymns, it's all in Spanish. And basically that's how I learned how to read, because of my church, how to read Spanish, and you kind of learn how to write it, and with my mother and her side of the family I just had to think I was able to practice it. I'd go to Mexico, for religious retreats at least once a year. So I kind of interact in Spanish for several weeks at the time.

Participant Six reported that her parents were from Mexico, however, "they wanted us to go straight into English. I don't think they saw the values of maybe having both languages. What I consider now I think there is a great advantage when you have both languages."

### **Un-Intentionality: Initial Thoughts and Feelings**

All of the participants shared that the opportunity to work with non-English speakers was presented after they had committed to complete their practicum or internship experience at their respective sites in the community. They explained that in addition to the nervousness of being in the counseling role for the first time, they also had to deal with the anxiety of having to do counseling in another language. Some of the factors that contributed to these feelings included having obtained clinical training only in English and the fear of not understanding or not connecting to the client due to a language barrier. According to one participant:

I didn't know that I would be doing bilingual counseling...before my internship, but I think it really helped me as a counselor to sensitive to their issues, and I hope that this would be and something that would advocate more training for bilinguals to prepare. Because I had no idea that was going to be my role, but I'm OK, I'm embracing, and trying as hard as I can to get through the struggle areas, still struggle in some areas, but at the same time I had some many successes, and I understand that there's such a need (Participant 3).

Participant Two also expressed that she did not enter her practicum with the intention of counseling in her second language:

Initially, I didn't want to tell anyone I spoke Arabic because my Arabic, is my second language, and I really don't know it very well. I'm not comfortable speaking it, but as soon as they would come in, I could tell when they were asking the lady, you know there at the site, and I just took over, I was like, you know, they needed help.

Another one of the participants summarized:

I was a little bit nervous, not only was it the first time I was in a counseling practicum role when I was actually the counselor I was also doing it in another language, which was double-scary (Participant Four).

Although most of the participants did not actively seek out bilingual counseling experiences, once they realized there was a need, they were able to use their language skills. However, as students, most also expressed a fear about not getting to practice their counseling skills in English. This quote from Participant One summarizes this issue:

What's been worrying me, the majority of my clients are Spanish speaking... I need more time, more contact and I know that next semester I can ask for two or three English speaking clients and I can work with them. That's the only part that I see negative, that is limited to the Spanish speaking. I think I need the English too.

## Challenges

Since the participants unintentionally found themselves doing counseling in their second language, they described some challenges they experienced. These challenges were organized into two themes, *Rehearsal* and *Language and Cultural Variations*.

**Rehearsal.** Counselors-in-training speaking a second language often employed informal resources of double-checking their language skills (classmates, family members, or friends). Some resorted to mock counseling sessions to practice counseling sessions in a second language. Most of their backgrounds included learning a second language in their home environment (except for the counselor born in Mexico for whom English was her second language). Thus, they reported a need to build a counseling vocabulary in their second language. Often, they described using their parents as resources. Most of the participants reported some type of rehearsal or practice of their bilingual counseling skills including role-plays with bilingual peers, supervisors, and family members.

In the beginning, before I was a counselor I tried to go through the terminology and to do mock interviews with my husband or somebody else to see if I could use the terminology in Spanish.

Interviewer: Can you give me an example of what type of terminology you used with your husband? What was something you were concerned about?

Mostly, the cliché words, "how you feel about it," open-ended questions, to avoid the why, and things like that, it was like, one of the things I wanted was the word "empower," I didn't know how to use it in Spanish. There is not a translation in Spanish, in the way we use it. There are small words that don't fit like that, that are important words, and there's another way to do it, you need to paraphrase, explain it (Participant Three).

Participant Six reported calling her mother on the way to her practicum site to ask her about the translation of a specific word:

I would call my mom, on my way to the center, "Mom, how do you say *monitor* in Spanish? I thought I heard it but I'm not sure" and then she'd tell me and I'd say it, and I'll be OK, I know exactly where is that, "And how do you say *goal* in Spanish?" And it could be simple words like that and I was just I was taken back, I was kind of upset with myself, thinking, "Jeez, that's not very fluent of me!" But then I've started thinking, it's because I don't speak that, I haven't used that vocabulary with my mom.

In addition to rehearsing their language skills with others, including practicing specific words and counseling terminology, participants also reported rehearsing, or engaging in the process of translating, from one language to another in their minds. Participant Six reported that shifting back and forth from English to Spanish was one of the most challenging tasks, she explained:

That was difficult because I have to shift from English to Spanish, and I had moments when I had to deep breathe, cause I was about to speak in Spanish and then I had to shift Spanish to English. So it was a process for me, it was definitely like a process, and I think understanding it [inaudible] good, I'm already thinking in my head I'm gonna ask this, so sometimes it interferes completely to listening to the client. Yeah, I had to process it, think it, process it in Spanish and say it.

### **Language and cultural variations.**

All of the participants found differences in language depending on the client's country of origin, or background, and highlighted the need to adapt to understand or be understood. According to Participant Two, "The Arabic in Iraq is very different from Lebanon. By the time we were able to figure out our language, we could speak to each other." Participant Three reported having a similar experience with her clients:

I do see a couple of clients who are from Costa Rica and Spanish is different for people from Cuba, people from Mexico, people from the U.S. who speak Spanish only and Puerto Rico. I also see a couple of Spanish speaking clients, but they are from the Philippines.

To further illustrate, Participant Five explains:

Spanish is not just a one... one-origin language. If you think about it, actually, here is the number one language, but they have so many different types. Like I have one client who's from Nicaragua and he has different phrases that I would have put differently, but it's like different terms. Like the term that I was thinking of, "it's a lot of weight to carry up on your shoulders" in Mexico, it's "a lot of weight upon your chest" and he used another term that I wasn't really used to, but it's because it's a different country.

Most participants highlighted not only of language but also of culture. Participant Six noted some cultural differences in help-seeking with her clients. She utilized circumlocution, where she used many words to describe something simple, and generate conversation.

In their countries, they're very private, their cultural values are very private so when I would ask them counseling questions, they wouldn't respond. So I really had to go in a round-about way and ask them "What do you do in our country? What is your story? What did you do as your living?" And things like that. So we would approach it that way, and have like a casual conversation trying to get to know them. And they would open up more to me.

All of the participants noted the importance of understanding culture-related issues within the various expressions of a single language in bilingual counseling. According to Participant Three:

But, looking at the clients that I do have, there's one from Mexico that I am counseling right now that her husband has been deported, so I mean, you're not going to get deported if you are from Puerto Rico, so that's not going to be an issue for you.

### **Connections**

Even though the participants shared challenges, they also highlighted positive outcomes. Many identified the connection with the client as one of the most positive consequences of doing

bilingual counseling. This connection was attributed to being perceived by their clients as having the language skills and the understanding of cultural values. They believed shared language gave them the opportunity to be closer to their clients. They also perceived themselves as more knowledgeable in terms of the clients' cultural worldviews including beliefs, values, and actions. The participants shared that this made their clients feel "understood." Participant Five explained,

It's something that right away once you start speaking Spanish with them it kind of allows them to let down their guard, and it's Ok, this person if I explain something to him he's going to understand me.

Participant Four shared that her overall experience working with non-English speakers was very positive. After she highlighted the need for more Spanish-speaking counselors and discussed the need to serve this underserved client population, she shared the following,

It wasn't as scary as I thought it would be, they were really understanding and forgiving, especially the kids, they would kind of smile and I would ask them, and they knew some words in English, and I'd ask them, otherwise we would just sort of navigate the word that I was trying to come up with, and they were really helpful and warm.

Finally, Participant Two highlighted a common feeling of connection with her clients, to be seen as someone with whom the client could communicate.

My biggest success is actually being where they're at, understanding where they came from, and why they are in the situation that they're in, it's just the language of understanding them; and also being able to use terms that they can relate to. So, because it's like if I were to put you in Japan, and you know no Japanese, and one person speaking, even if it was broken English, but it was enough, you would kind of just gravitate towards that person because it's very mind boggling to be in a... it's exhausting to be in an environment where you don't speak the language to be able to communicate.

### **Barriers to Conducting Bilingual Counseling**

Although the bilingual counseling students in this study experienced success in counseling, and felt a connection with their clients, they also perceived some difficulties. The final theme that was expressed by the participants regarding their experiences was that of missing links or the barriers to conducting bilingual counseling. Sub-themes in this category include *Supervision* and the *Lack of Bilingual Client Resources*.

**Supervision.** The participants in this study were concerned about their use of the language, and would have liked to have bilingual supervisors. Half had a supervisor who was able to speak the language in which they were counseling. For those who did not receive supervision with a bilingual supervisor, they reported that they did not focus on language skills. According to Participant Five:

Well, with the supervision, it's not about the language, first my supervisor doesn't speak Spanish, but they are flexible enough to let me do whatever is necessary to do to solve if I have some issue. If everything, the forms are in English and Spanish, what you give to the clients in English and Spanish, when I go and do the supervision with him it's about the client in general, what can I do with this client.

In addition, several of the participants commented about needing to translate tapes (which were required for their practicum classes) into English so that they could be understood and evaluated



by an English-speaking supervisor. According to one, “Everything I bring is in English ... I need to translate everything about the client, or the situation that I encountered, to English.”

Participants reported that they were relieved when they had a supervisor who was able to speak the same language that they were using with their clients in counseling as the following quotes exemplify:

My practicum supervisor, which is a doctoral student, she’s bilingual, and at the site, I was also dealing with a bilingual family...so she was able to sit in and observe and understand what was going on, so that’s great because it was in Spanish and I didn’t have to explain what was going on (Participant Six).

Because she has that experience with bilingual counseling she was so supportive of me being a bilingual counselor and she was able to pick up on different not necessarily English things, she was always so complimentary, “I don’t know what you’re worried about, you speak Spanish perfectly” but she was really perceptive about cultural things (Participant Four).

**Lack of bilingual client resources.** Based on their experiences, participants stated that one of the major needs for the clients was help with translating counseling forms, or the availability of translated forms. As illustrated in the comment below, participants recommended that counselors-in-training be prepared to translate forms for their clients.

And the center that I work at, some of their forms are not in Spanish, all like their surveys and things like that, so when we give them the surveys, either their children will have to read to them or they’ll have to fill them out or something. When you look at counseling techniques, we don’t even have a form in Spanish yet, so we have a long ways to go (Participant Three).

Be prepared because you’re going to find situations where you’re going to need some materials for the children, and in Spanish and you’re not going to have it available to you...be prepared to translate. And the sessions usually take longer, you’re going to move slower, and the process it just more time, you have to have more patience, even more so than you would normally. With kids, you have to have a lot of patience to begin with, but more so when you are working with translating for the parent, trying to get feedback, and work the whole dynamic of the family (Participant One).

## Discussion

The experiences of the counseling students who participated in this study spoke to the barriers, limitations, and benefits of conducting bilingual counseling. All of the participants in the study revealed that working with non-English speakers was somewhat of an accident or coincidence. However, even though none of them planned to do this prior to encountering a population that motivated them to do non-English counseling, they all echoed the importance of and need for bilingual counselors. In summary, the participants in this study did not report receiving any training on bilingual counseling during their counselor preparation program. In addition, half of the participants received supervision from an English-speaking supervisor while the others were supervised by someone who spoke the language they were using in counseling.

Similar to the findings reported by Castaño et al. (2007), all participants in this study reported that they had not received any kind of formal training in providing counseling services

in another language. These findings support those of other researchers (Biever et al., 2002; Verdinelli & Biever, 2009) who stated that even though there are bilingual counselors possibly capable of providing services to LEP clients, these counselors may be hesitant to do so because of a lack of training. Most of the participants highlighted the need for counseling programs to provide training opportunities for students to practice their bilingual language skills (speaking, reading, and writing). Although the most common recommendation was training in the form of additional courses, such as a counseling skills class in Spanish, some of the participants provided other suggestions such as establishing a peer group of bilingual counselors-in-training to serve as a tool for processing ideas as well as practicing language skills.

The counseling literature has demonstrated that students, particularly those who are early in their training and under clinical supervision, desire ongoing and consistent feedback (Arthur & Gfroerer, 2002; Heckman-Stone, 2003; Trepal, Bailie, & Leeth, 2010). Similar to the results reported by Verdinelli and Biever (2009), the participants that reported having had a bilingual supervisor shared that supervision was utilized to obtain feedback related to clinical skills, language, vocabulary, and cultural issues.

### **Limitations**

Even though a few studies have examined the perception of preparation and training by bilingual practicing mental health counselors, as well as their provision of services in two languages, these studies have focused on the experiences of psychologists. No studies have analyzed the experiences of current bilingual counseling students pertaining to providing counseling in a second language. The intent of this study was to qualitatively understand mental health counseling students' experiences in providing counseling in a second language.

Two potential limitations should be considered when interpreting the results of this study. First, the synthesis and analysis of results completed by the researchers may have been influenced by the researchers' own personal biases regarding bilingual counseling. To minimize the likelihood of a researcher bias, we employed a phenomenological epoche approach, wherein we collaborated with each other concerning the interpretation of results.

Second, while few studies on this topic exist, it is important that results not be generalized to all mental health counseling practicum students who are practicing bilingual counseling. For example, the relative homogeneity of the participants should be taken into account when examining results. Although the main goal of the study was to examine experiences of practicum students who engage in bilingual counseling, which could include any number of language combinations, the majority of the study participants provided counseling in English and Spanish. The experience of bilingual practicum students who speak languages other than English and Spanish may be different from the experiences shared by participants in this study. Moreover, each study participant was a graduate mental health counseling student at the same southwestern university. It is possible that their experiences may have been influenced by a similar program of study that may not generalize to bilingual mental health counseling students at other institutions. Finally, since the goal of qualitative research is not to produce transferability in findings, applying the themes from this study to other students who are bilingual counselors is cautioned.

## **Implications for Future Research**

Future quantitative and qualitative research on this topic is needed. For example, a qualitative, phenomenological design with non-English-speaking clients who received counseling from a bilingual mental health counselor in the bilingual counselor's second language could be informative. It would provide an additional perspective related to the bilingual counseling relationship and potentially provide important implications for bilingual counseling training. From a quantitative perspective, a pre-test, post-test design analyzing the effectiveness of different types of bilingual counselor training, such as bilingual supervision and courses designed to enhance bilingual counseling skills, would be helpful. A correlational design that compares levels of fluency in a second language with counselor-client working alliance would also contribute to our professional knowledge base.

## **Conclusion**

As a result of this investigation, students' experiences with bilingual counseling came to light. The participants' reactions included feelings of nervousness associated with being in the counseling role for the first time, as well as additional anxiety stemming from counseling in a language other than the one in which they were trained. Factors contributing to these feelings included having obtained clinical training only in English, the fear of not understanding or not connecting to the client due to a language barrier, and the lack specific supervision regarding their language skills in their new counseling role.

Similar to the findings of Verdinelli and Biever (2009), participants reported challenges of translating their thoughts from their dominant language to their second language, using technical vocabulary, understanding language and cultural variations between Spanish-speaking clients, and limited practice working with English-speaking clients. Mental health counselors-in-training speaking a second language often employed informal resources of double-checking their language skills with classmates, family members, or friends. Few reported utilizing the informal training discussed by Castaño et al. (2007) (e.g., popular media, books, journals, immersion). Five of the six participants identified the connection with the client as one of the most positive consequences of doing bilingual counseling, attributing it to being perceived as having the language skills as well as the understanding of cultural values.

Based on the experiences of these participants, we endorse recommendations consistent with the literature (Biever et al., 2002; Verdinelli & Biever, 2009). There is a need for training in bilingual counseling in counselor preparation programs. The participants in the study also indicated a desire for feedback on their bilingual counseling skills and highlighted the importance of developing clinical supervision specific to bilingual counseling. Fields such as nursing and education have long offered specific training programs focusing on preparation in bilingual service delivery. Given the fact that mental health counselors and counseling students provide bilingual counseling services, it is time that more attention is devoted to this critical area of counseling practice.

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