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Standing With Asian Clients Affected by Pandemic: Counseling Recommendations Through MSJCC Framework

Abstract

As COVID-19 exacerbates racial discrimination against Asian populations in the U.S., mental health concerns among Asians have increased accordingly. Thus, counselors are encouraged to provide culturally competent counseling for Asian clients who experience racial discrimination and its detrimental impacts. This article proposes recommendations for counselors to effectively serve Asian clients based on the Multicultural and Social Justice Counseling Competencies (MSJCC) framework. Counselors can utilize the proposed considerations to alleviate mental health concerns among Asian clients.

Keywords

Asian, Asian American, COVID-19, racial discrimination, multicultural and social justice counseling competencies

Author's Notes

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Asians and Asian Americans in the U.S. have been vulnerable and at a higher risk for racial discrimination and trauma during the COVID-19 pandemic. Asian populations started to be unfairly blamed for the spread of the coronavirus since the onset of the pandemic (Benjamin, 2021), and unfortunately, hate incidents are still ongoing as shown in a recent attack on an Asian college student (Hutchinson, 2023). Reports of racially motivated discrimination, harassment, violence, and crimes have drastically increased toward Asian populations since the global outbreak of COVID-19 in 2019. Specifically, from March 19, 2020, to December 31, 2021, a total of 10,905 hate incidents against Asian American and Pacific Islander (AAPI) persons were reported to Stop AAPI Hate (SAH) (Horse et al., 2022). The most frequently experienced type of hate incidents was harassment (66.9%), followed by physical assault (16.2%), avoidance or shunning (16.1%), online incidents (8.6%), and coughed at or spat upon (8.2%). Reports from another survey showed that more than two-thirds (68%) of Asian and Asian American young adults reported they or their families experienced at least one COVID-19-related discrimination experience (Hahm et al., 2021).

In fact, this cognitive association between Asian Americans and disease is not new, instead, it has a long history (Li & Nicholson, 2020; Tessler et al., 2020). There is a historical pattern of increased individual discrimination toward targeted groups when disasters or tragedies happen (Liu & Modir, 2020), where scapegoating occurs, and there were numerous times that local governments and community members unfairly regulated and blamed Asian communities for the epidemic. For example, in 1900, San Francisco authorities quarantined and burned Chinatown in response to the San Francisco plague, and they regulated people and food in and out of Chinatown because they believed that Asian people and their food were the cause of the epidemic (Shah, 2001; Trauner, 1978). More recently, the SARS (Severe Acute Respiratory Syndrome) outbreak in 2003 was also associated with Asians and Chinatown as the epicenter of the disease (Eichelberger, 2007). Approximately 14% of Americans reported

avoiding Asian businesses, and increased threats and anxiety were reported among Asian Americans during the SARS (Blendon et al., 2004).

There is significant evidence to suggest that COVID-19-related discrimination has an extensive adverse impact on Asian Americans' health-related outcomes ranging from physical health to psychological well-being. Racial discrimination toward Asians increases general distress and internalizing problems, such as anxiety and depressive symptoms, and negatively influences physical wellness, such as sleep difficulties (Lee & Waters, 2021; Misra et al., 2020). COVID-19-related racism also can predict Asian American emerging adults' alcohol use severity through depressive symptoms and drinking to cope motives (Keum & Choi, 2022). Wu and colleagues (2021) investigated the disparities between Asians and Whites in COVID-19-associated impact on mental health, and they reported that Asians had a higher level of mental disorders and experienced twice more discrimination since the onset of the pandemic. The authors also reported that discrimination partially explained the mental health gap between two ethnic groups, Asians and Whites (Wu et al., 2021).

Moreover, any form of exposure to racially motivated discrimination, including direct experience and watching it through media or social networking services, can cause traumatic responses as the direct or secondary experience of trauma (Ermis-Demirtas et al., 2022). Asian Americans develop fear and concerns about potential future episodes of discrimination and hate incidents as traumatic responses (Yu et al., 2020). More specifically, according to a recent study that surveyed 575 Asians, more than three-fifths (61.7%) of the Asian population reported fear of bias victimization during the COVID-19 pandemic (Lantz & Wenger, 2023). In addition to this, Shimkhada and Ponce (2022) reported that experiencing hate incidents or witnessing them was related to serious psychological distress, delaying or not receiving the necessary care, and feeling unsafe.

Taken together, it is important to address the fear of future incidents as well as the direct experience of discrimination that Asian clients might bring into the counseling process to prevent and minimize their negative impacts on Asian clients' health consequences. Although there are numerous studies that showed how COVID-19-related racism impacted the Asian population's mental health, not many studies were conducted on how counselors can help and support this population (Anandavalli et al., 2020; Litam, 2020). Therefore, in this study, the authors propose the utilization of the Multicultural and Social Justice Counseling Competencies (MSJCC) framework in order to provide culturally responsive counseling services for the Asian population and advocate for them during and after the pandemic.

The MSJCC Framework

The MSJCC framework evolved from the previous multicultural counseling competencies (Sue et al., 1992) and a) embraced the complexities of identities, b) applied a socioecological perspective, and c) actively incorporated counselors' social justice advocacy work. To be specific, Ratts and colleagues (2016) suggested that a relationship between a counselor and their clients shows the different intersections of identities. They also claimed that the different identity statuses between the two in terms of their power and privilege could raise various considerations within the four developmental domains of the MSJCC. The four developmental domains in the MSJCC are (1) counselor self-awareness, (2) client worldview, (3) counseling relationship, and (4) counseling and advocacy interventions.

Even though the MSJCC framework was created to guide and promote counselors' multicultural counseling and social justice efforts, it is concerning that there is a lack of research that delved into this framework. For instance, Gantt-Howrey and colleagues (2022) reviewed 21 ACA journal articles with content analysis and found that among the articles published between 2015 and 2021, only 1.33% of them addressed the MSJCC, and 22 articles were associated with counselors' practices. Research articles that discussed counselors'

practice ‘through’ the lens of the MSJCC framework are scarce, and there are few that studied using it in school counselors’ leadership (Ratts & Greenleaf, 2018), application and enhancement of the MSJCC (Singh et al., 2020), and college counselors’ support for international students (Kim et al., 2019). In the following section, we will illustrate how counselors can effectively work with their Asian clients and advocate for them in each domain in the MSJCC framework.

Domain 1: Counselor Self-Awareness

When working with Asian clients, counselors should raise awareness of their own worldview, internal values and beliefs, and their potential benefits and limitations in working with Asian clients (Ratts et al., 2016). Counselor self-awareness begins with reflecting on the level of the counselor’s comfort when seeing Asian clients, especially when they have different cultural backgrounds (Arredondo, 1999). According to Hook et al. (2013), clients perceive counselors’ cultural humility or openness to different cultural heritages when counselors are respectful, considerate, and open to exploring and learning a new culture. These results provide guidelines for counselors to examine whether they can comfortably and openly work with Asian clients.

Taking a closer look into counselors’ own cultural identity, including racial and ethnic identity, can be an important aspect of raising self-awareness (Arredondo, 1999). Counselors are particularly encouraged to explore their identities in light of their privileged or marginalized positions in society (Ratts et al., 2016). White and people of color racial identity models can be a useful tool to deepen counselor self-awareness with regard to their level of understanding about differential racial socialization derived from oppressive systems (Helm, 1995; Sue et al., 1992). Counselors are also encouraged to recognize themselves as multicultural beings and understand their multiple intersecting identities and their effect on worldviews and experiences (Ratts et al., 2016). Counselors can ask themselves what their prominent social identities are

and how those identities shape their privileged/marginalized experiences.

Furthermore, those self-exploration strategies can lead to an understanding of its effects on their work with Asian clients who have been exposed to discrimination during COVID-19. In this regard, counselors are recommended to reflect on their strengths and limitations in working with Asian clients. For instance, counselors can evaluate their level of cultural familiarity with Asian cultures in light of their own cultural backgrounds. In addition, counselors can examine their attitudes toward the recent anti-Asian climate and identify any bias and prejudice against Asian cultures. The following questions can facilitate counselors' self-exploration: "How do those experiences influence my values and preconceptions about Asian populations?" and "Do I have any kinds of discomfort working with Asian clients who experience racial discrimination or other forms of marginalization?" Additionally, supervision, consultation, and education can be utilized as professional development opportunities to critically reflect on their salient identity, systems of oppression in society, and their status in these systems of power.

Domain 2: Client Worldview

In addition to being aware of themselves, culturally competent counselors need to be ready for exploring Asian clients' experiences and worldviews. First of all, counselors should be aware of current and historical discrimination against Asian communities and recognize the impact of discrimination on shaping clients' values, beliefs, and worldviews. Many Asian populations in the U.S. have experienced emotional exhaustion and deterioration in their psychological well-being as they were falsely blamed as the cause of COVID-19 (Jun & Wu, 2021; Litam, 2020). Besides the current racist incidents, the history of anti-Asian racism and the racist tropes of Asians have long been associated with worsened mental health conditions for Asians as well as othering and perpetuating foreignness in U.S. society (Chen et al., 2020). Therefore, culturally knowledgeable counselors can recognize historical and COVID-19-

related racism against Asians and its impact on their mental health so that they can address the mental health issues associated with the knowledge.

Furthermore, counselors are encouraged to learn Asian cultural values to work more effectively with Asian clients. Interpersonal harmony, emotional self-control, and endurance are known to be related to traditional Asian values (Iwamasa, 2012; Litam, 2020), which might lead to the stigmatization of utilizing mental health services (Shea & Yeh, 2008; Kim-Goh et al., 2015). Therefore, counselors not only can create ways to reduce stigma around mental health including outreach services and psychoeducation workshops but also explore culturally intimate ways of healing for Asian clients. For instance, mindfulness-based counseling and the inclusion of family members in counseling are known to be more effective for Asian clients (Kim-Goh et al., 2015). In addition, directive counseling strategies including short-term-based problem-solving approaches are reported to be a more preferred modality among Asian clients (Kim-Goh et al., 2015; Kim & Park, 2015; Li & Kim, 2004).

At the same time, counselors need to reckon with within-group differences. Museus and Iftikar (2014) introduced the term Asianization and pointed out how categorizing Asians into a monolithic group can ignore individual, ethnic, and other sociocultural differences among Asians while imposing racial stereotypes such as model minorities. In fact, Asian Americans represent more than 43 distinct ethnicities (Wang et al., 2020) and Asian clients may have a variety of experiences and worldviews based on their intersecting identities including their ethnicity, gender, immigration status, socioeconomic status, and English proficiency, to name a few. Researchers, for instance, found that some Asian subgroups were disproportionately exposed to discrimination and marginalization, which made them more vulnerable to COVID-19-related discrimination (Lozano et al., 2022; Oh et al., 2022; Wang et al., 2020). Therefore, counselors should be aware of possible differences and strive to better understand clients' experiences openly without preconceived ideas.

Diverse resources are available to enrich counselors' understanding of Asian clients, such as news articles, recent research findings, educational training, and interpersonal networking. Culturally competent counselors are cognizant of those resources and capable of making sense of a comprehensive understanding of Asian cultural backgrounds and the effects of anti-Asian discrimination. Workshops and educational training opportunities can be resources that provide information about historical and current racial discrimination against Asian populations, traditional values and norms for a certain culture, and familiar healing methods. Counselors can also utilize professional supervision and consultation with experts who are familiar with Asian cultures to navigate counselors' assumptions and correct misconceptions. Finally, immersion experiences, including interpersonal networking with Asian individuals and volunteer work at Asian community organizations, can be opportunities to expand counselors' comfort level in dealing with challenges that Asian clients are facing (De Ricco & Sciarra, 2005; Ratts et al., 2016).

Domain 3: Counseling Relationship

In terms of counseling relationships, counselors need to acknowledge that the privileged or marginalized status that both counselors and clients possess would influence the relationship dynamics and communication patterns between the two. For example, imagine an Asian client who experiences anti-Asian microaggression. The client meets a counselor who has the same racial identity as the perpetrator. The marginalized client identity and the privileged counselor identity can work negatively and prevent creating a safe and trustworthy counseling relationship. Clients may feel uncomfortable sharing their anger and frustration, making the point about systemic oppression, or talking about their experiences of marginalization within the counseling relationship. In this situation, counselors should be aware of the impact of the counselor-client privileged or marginalized identities on their counseling process and relationship.

The intersection of the privileged or marginalized counselor and client identities constructs the quadrants of counseling relationships, such as privileged client-privileged counselor and marginalized client-privileged counselor (Ratts et al., 2016). Besides understanding the quadrants, counselors are asked to acquire knowledge of different theories on how privileged or marginalized social status affects identity development, communication styles, and relationships (Ratts et al., 2016). This knowledge enables counselors to establish rapport and trust with clients without having barriers debilitating the counseling process. For instance, imagine a non-Asian racial minority counselor working with an Asian client who feels insecure and frustrated about recent anti-Asian incidents. The counselor can bring up their similar and different experiences as racial minorities in the counseling session and discuss how those experiences affect the counseling process. This type of discussion is possible when the counselor knows the benefits of discussing racial and ethnic differences in strengthening the working alliance and counselor credibility (Zhang & Burkard, 2008).

Broaching is a useful technique for counselors to bring racial, ethnic, and cultural issues to the table during the session when they perceive it helps address client concerns and promotes the counseling process (Day-Vines et al., 2020). Counselors can utilize broaching techniques to discuss the power dynamics between the counselor and the client (Day-Vines et al., 2020). For example, when an Asian client has experienced a racist incident and the counselor's racial/ethnic identity is the same as the perpetrator, the counselor may initiate the discussion by asking the client as follows: "I realized that I am a White man who has the same racial and gender identity as the person who offended you. I wonder how you would recognize it and how it affects our relationship." In the process of broaching power dynamics in counseling relationships, counselors need to keep a respectful, supportive, and safe environment for the clients.

One additional consideration is related to racial microaggression. Counselors should know that racial microaggressions can not only happen in counseling relationships but negatively affect the working alliance and counseling outcome (Hook et al., 2016). Hook et al. (2016) found that racial/ethnic minority clients including Asians perceived racial discrimination when counselors present a lack of understanding about biases or avoid discussion about cultural issues. Kim and Hogge (2021) investigated experiences of microaggressions among Asian international students and found 14 subthemes including the blindness towards oppressive systems, stereotypical assumptions against Asian culture such as submissiveness and model minority, overprotective and condescending behaviors, Eurocentric interpretation, and lack of knowledge about resources. These research findings speak to the necessity for counselors to continuously educate themselves about the possible microaggressions toward Asian clients. At the same time, counselors should endeavor to build safe and collaborative counseling relationships so that both the counselor and their client can address cultural issues comfortably.

Domain 4: Counseling and Advocacy Interventions

When counselors develop their multicultural and social justice counseling competencies in counselor self-awareness, client worldview, and counseling relationship domains, they are prepared to provide culturally relevant counseling and advocacy interventions for Asian clients. Counseling and advocacy interventions can be provided within six different socioecological levels from the intrapersonal level to the global/international level (Ratts et al., 2016).

Intrapersonal Level

Intrapersonal interventions aim to intervene in the individual characteristics of a client (Ratts et al., 2016). As COVID-19-related hate crimes have increased, Asians in the U.S. experience heightened fear, anxiety, and frustration about their safety (Tessler et al., 2020).

These emotional responses can derive not only from direct victimization but also from secondhand exposure to hate incidents, which provides implication for counselors the need for addressing clients' indirect experiences of hate crimes (e.g., vicarious traumatization) and their impact as well as direct exposure to it.

As remedies for emotional distress, first of all, counselors need to provide strategies to alleviate negative emotions that Asian clients may experience. As well as utilizing well-known techniques for relieving emotional arousal, counselors can employ healing strategies that are familiar to Asian culture. Recently, Litam and Oh (2022) found that strong ethnic identity and more use of coping strategies mitigated the negative effect of pandemic-related racial discrimination on depression and life satisfaction among Chinese migrants and Chinese Americans. They recommended that counselors promote their clients' existing coping skills as well as explore additional coping strategies such as engaging in physical activities or spiritual practices (Litam & Oh, 2022).

Self-advocacy skills and empowerment are other important parts of intrapersonal counseling intervention (Ratts & Greenleaf, 2018). Counselors can promote developing clients' self-advocacy skills and tactics to speak up against discrimination by utilizing psychoeducation and behavioral rehearsals (Litam, 2020). However, counselors are encouraged to be aware that cultural emphasis on interpersonal harmony may hinder Asian clients from outward conflicts with others (Litam, 2020) when engaging in self-advocacy skills. For example, sometimes counselors' advice such as confronting verbally against their colleague's microaggression, can be another burden for clients. Thus, counselors should closely examine clients' readiness for speaking up and not pressure them to take action unwillingly. In other words, counselors may be able to create action plans collaboratively with clients that fall into their culturally acceptable ranges. Furthermore, as a part of empowering clients, counselors can consider celebrating clients who seek counseling services despite emotional suppression (Trammell et

al., 2021) and underutilization of mental health services (Wu et al., 2021) among Asian cultures. With regard to anti-Asian hate during the pandemic, scholars also proposed to tackle posttraumatic stress (Ermis-Demirtas et al., 2022) and intergenerational trauma (Litam & Oh, 2022). Li (2021) recommended using art therapy when working with Asian communities who experience collective trauma.

In addition to alleviating emotional and traumatic stress, counselors can proactively facilitate the recovery process from racial trauma (Litam, 2020; Liu & Modir, 2020). When a client shares their experiences of marginalization, counselors should validate those experiences and normalize their frustration and other negative emotions. Counselors also can recognize clients' resilience and acknowledge their strength to deal with painful incidents (Liu & Modir, 2020). Furthermore, counselors need to be aware of how rhetoric such as "forever foreigners," "yellow peril," and recent "Kung flu" has been used to discriminate against Asians living in the U.S. (Li & Nicholson, 2021). This knowledge can be transferred to clients when counselors provide psychoeducation to raise client awareness regarding racial trauma running through historical and recent hate crimes (Litam, 2020). In the process, counselors can examine any aspects of internalized oppression that their clients present. Counselors can also encourage the client to reflect on how that internalized oppression influenced their thoughts and behaviors (Ratts et al., 2016).

Specific to vicarious traumatization related to racial trauma, vicarious racism (i.e., "secondhand exposure to the racial discrimination and/or prejudice directed at another individual" p. 235) can lead to subsequent health-related outcomes of clients, such as internalizing behavior, externalizing behavior, general physical illness, increased substance use and impaired cognitive development (Heard-Garris et al., 2018). Counselors are positioned to design and implement interventions that cultivate awareness of vicarious racism and address internalized oppression from systemic racism. A content analysis, from 51 articles, of practice

recommendations to address racism indicated that some general themes, such as psychoeducation (e.g., educate racism as a trauma), validation (e.g., explore and validate racism experiences and racism-related stress), self-awareness/critical consciousness (e.g., awareness on the psychological impact of racism) were notable (Miller et al., 2018).

Lastly, clients' intersecting identities and membership in specific subgroups should also be taken into consideration when designing and implementing intervention approaches. Asian clients may have different perspectives and experiences with regard to COVID-19-related discrimination, which might result from different social group memberships among Asian clients. For instance, Oh et al. (2022) found that female and non-heterosexual Asians more frequently reported exposure to subtle and obvious racism during the pandemic. Counselors, therefore, should acknowledge the within-group differences among Asian clients and take a closer look into possible risks for their clients under the systems of oppression. Furthermore, counselors are encouraged to discuss directly with their Asian clients how their own intersecting identities affect their experiences during the pandemic and collaboratively design ways for healing.

Interpersonal Level

Interventions at the interpersonal level include examining the influence of family, friends, and peers on the client's well-being and drawing their support (Ratts et al., 2016). First of all, counselors and clients can benefit from discussing their support systems. Social support can buffer the influence of discrimination on depression and may mitigate the effect on physical symptoms (Lee & Waters, 2020). In the same vein, Oh and colleagues (2022) reported that increasing the sense of belonging, solidarity, and social support with one's own ethnic group can be helpful for Asian people's well-being and growth. This discussion, then, can lead to encouraging Asian clients to build stronger relationships with family, friends, and colleagues. Counselors can directly discuss with their Asian clients how to reach out to their families or

friends to ask for alliances or resources. During this process, counselors are highly recommended to assess the mental health stigma among clients' families and friends that can hinder clients from seeking support from them (Nam & Lee, 2015).

Increasing support systems can be another strategy to intervene at an interpersonal level. First, counselors can promote building solidarity with other Asian individuals as a way of healing. It is known that cultural identity, a positive sense of self, and belongingness to a certain cultural group are significant protective factors against the adverse impacts of racial trauma (Lee & Waters, 2021; Liu & Modir, 2020). According to Lee and Rose (2022), intergenerational groups help members be aware that systemic oppression has oppressed them regardless of their generation. Also, the groups help them build solidarity with other generations to fight against racism. With this regard, Tsong and colleagues (2022) proposed critical consciousness-informed antiracist parenting (CCIARP) framework for Asian parents, counselors, and educators. Specifically, this framework addresses antiracist awareness, learning skills, getting involved in activism, and cultivating an antiracist parent-child relationship (Tsong et al., 2022). In other words, counselors can utilize different spaces to encourage clients to be connected with other Asian individuals and provide chances to talk about their shared culture, stories, and adversities. Furthermore, counselors can promote a broader coalition with other people who value equality and human rights (Ren & Feagin, 2021). For example, counselors can organize group counseling for people of color in general who experience systemic racism in the U.S. and then provide space for them to support each other, validate each other, and come together to fight against discrimination (Lee & Waters, 2021). Creating Black-Asian solidarity can be a great example of the establishment of solidarity between racial and ethnic minority groups (Chang, 2020).

Institutional Level

Counselors' institutional level of counseling and advocacy interventions involves

working with clients' social institutions, including their schools, churches, businesses, and community organizations (Ratts et al., 2016). In counseling sessions, counselors and clients can explore the factors detrimental to clients' feelings of safety within the institution. Also, when there exist any concerns about insecurity or unsafety, they can collaboratively come up with solutions to create a safer institutional environment. For example, an Asian client who came from a culture commonly wearing masks during the pandemic might feel uncomfortable not wearing a mask when attending public community activities. The counselor may help the client alleviate emotional discomfort and discuss with their client how they can create an institutional environment respecting individual choices on wearing masks.

There are various approaches that counselors can implement outside of the counseling office, such as providing workshops, professional development opportunities, or classroom lessons to discuss Asians' experiences during the pandemic and how to create a safe and inclusive environment for everyone. For instance, school counselors can implement antiracist practices and create a positive school climate (Ernis-Demirtas et al., 2022). Counselors also can provide workshops or develop materials that help members of their institution to reduce misunderstandings and stereotypes toward Asians by presenting atypical and disconfirming information (Misra et al., 2020) and promote the cultural competency of the members.

Posting an institutional statement that resists anti-Asian hate crimes on the website can be another way of advocating for Asian populations. Tausen and colleagues (2020) recommended that leaders of universities openly discuss anti-Asian racism and xenophobia, criticize those acts, show deep compassion, and commit to supporting Asian students. Considering U.S. residents who have less accurate knowledge about the coronavirus and less trust in science are more likely to possess negative attitudes toward the Asian population (Dhanani & Franz, 2020), it is important to convey accurate information about the pandemic and emphasize trust in science when counselors work in an institutional level.

Also, counselors can emphasize the importance of balanced media use and promote the collective capability of coping with the pandemic in their institution. Recently, Cho and colleagues (2021) reported that feelings of fear regarding the ongoing pandemic situation and the use of partisan cable TV as well as social media predicted stigmatization. They found that low self-efficacy in dealing with the pandemic was related to increased stigmatization, and high perceived collaborative capability in dealing with the pandemic was related to low stigmatization (Cho et al., 2021). Lastly, administering an institution-wide survey that measures the institution's culture and climate will help counselors acquire data with which they can advocate for underserved populations (Ratts & Greenleaf, 2018).

Community Level

Counselors can provide counseling and advocacy interventions by addressing the norms and values of a community (Ratts et al., 2016). In counseling sessions, counselors can provide a space for their Asian clients to reflect on how the community values and norms affect their physical and emotional well-being. For example, an Asian international student coming from a country with a stricter mask-wearing policy may feel confused and distressed by the community environment of not wearing a mask in public.

Counselors can engage in gathering information to understand the public atmosphere and identify areas that require counselors' advocacy activities. They can not only observe by driving or walking around the community (Ratts & Greenleaf, 2018) but listen carefully to the leaders and members of the community concerning their attitudes toward Asian populations. Specifically, if civic activities or public relations against anti-Asian racism happen in the community, counselors may utilize them as interventional strategies. When there is a public advertisement supporting the Stop Asian Hate movement, counselors can encourage Asian clients to explore and process their thoughts and feelings about it.

Introducing community resources supporting Asian individuals and communities would be helpful to clients. In 2021, there were multiple Stop Asian Hate rallies and protest demonstrations against anti-Asian hate crimes. Counselors can introduce to clients the opportunities to participate and engage in those activities themselves as well. Furthermore, counselors can provide clients with community resources through which clients can be connected to diverse racial and ethnic groups. The rhetoric of Asians as a model minority has been exploited to weaken the coalition of Asians with other people of color and White allies (Ren & Feagin, 2021). Thus, positive intergroup civic engagement can be utilized to reduce intergroup bias (Dovidio et al., 2017) and conflict (Al Ramiah & Hewstone, 2013) and provide space for dismantling systemic racism.

Public Policy Level

Counselors are highly encouraged to pay attention to local, state, and federal policies and laws that may impact clients' lives (Ratts et al., 2016). In counseling sessions, counselors and Asian clients can examine how local, state, and federal legislation as well as societal influences have affected the client. For example, Park and colleagues (2022) examined COVID-19 vaccine concerns among AAPIs and reported that 76% of the participants had at least one concern with the most frequent concern of side effects. Counselors, therefore, may closely pay attention to clients' reactions to public policies and be cautious about possible detrimental impacts on their mental health. It is also critical to understand how misinformed and inaccurate representation of the pandemic in public and political rhetoric, through the media, SNS, and public figures, might affect clients' well-being. For example, politicians' negative remarks on Asian populations can be harmful to clients' well-being as it was when former President Trump called the coronavirus as 'Kung Flu' (Litam, 2020). Dhanani and Franz (2021) found that using stigmatized language in describing the virus resulted in increased negative attitudes towards Asian Americans and xenophobia and emphasized the importance

of public health messaging. When these dismissive incidents happen, counselors are recommended to offer space during counseling sessions for clients to process their emotions and navigate options for advocating for themselves.

There are various ways that counselors can increase their efforts to inform public policies and laws of the widespread impacts of anti-Asian xenophobia. Such efforts might include tracking hate incidents toward Asians during and post-pandemic to build datasets (Lantz & Wenger, 2023) and utilizing research and data to initiate conversations about changing public policies and laws (Ratts & Greenleaf, 2018). In particular, a research study found that Asian students were less likely to choose in-person learning because of anti-Asian abuse and threats or health concerns (Chua et al., 2021). Counselors can use this finding to start discussing how public policy can create a safe environment for Asian students and accommodate their possible learning loss. Stop AAPI Hate (2023) proposes three different ways that counselors can advocate for their Asian clients: a) asking elected officials about their efforts to provide resources and interventions for survivors and their families, and prevention programs such as anti-racism education in schools and communities, b) endorsing civil rights laws, and c) supporting expanded civil rights protections that can safeguard the AAPI from discrimination in private businesses.

International and Global Level

Counselors' social justice work can be expanded to the global and international level. First of all, counselors are encouraged to increase their knowledge of global policy changes regarding the COVID-19 pandemic by being informed of the rapid changes in policy through the news and research articles. It is also important to note that a country's policies could reflect its culture and values given that Asian clients' national origin or nationality may vary. Counselors would benefit from obtaining up-to-date information about a client's country and culture when a client brings their international background or cross-cultural experience.

Counselors can support Asian clients by utilizing the internet and social media. For instance, counselors can provide clients with information about how to report hate crimes and access educational resources in multiple languages on the Stop AAPI Hate (2023) website. Counselors also can suggest that Asian clients use social media as a medium of building solidarity with other Asians around the world. Abidin and Zeng's (2020) study on the Facebook group Subtle Asian Traits (SAT) shows how Asian descent coped with racism by sharing experiences and emotions, increasing the visibility of anti-Asian racism incidents, and providing advice or offering practical help. Social media also can be utilized to disperse counter-hate messages and stand with Asian populations at an international level (Abidin & Zeng, 2020).

Implications

The current article can provide insights for counselors, supervisors, counselor educators, and researchers on working with Asians who have been experiencing historical and COVID-19-related racism. First of all, counseling practitioners can use this article as a comprehensive intervention guideline when they serve Asian clients who report the impact or seem to be impacted by the current anti-Asian climate. Supervisors can employ the framework as a tool to discuss their supervisee's strengths and weaknesses in providing multiculturally competent counseling services. Supervisors also can utilize the various interventions introduced in this article to navigate establishing more effective counseling strategies with their supervisees. In addition, counselor educators may integrate the different ways of intervention suggested in the article when they teach emerging counselors. Counseling students' knowledge of intervention in different domains can be deemed as the manifestation of their multicultural counseling competencies. Future research might explore the qualitative and quantitative investigation of the impact of various counseling strategies suggested in the article. Future researchers also should focus on within-group differences among Asian populations. Each

subgroup of Asians possesses different historical backgrounds, cultural values, and experiences such as according to their ethnicity (Kim et al., 2001), geographical location, education, and age (Nadal et al., 2015). Therefore, researchers need to explore the more tailored counseling strategies for each subgroup as well as their distinct experiences of marginalization.

Conclusion

While COVID-19 has negatively affected marginalized communities in the U.S., Asians have faced a disproportionate mental health impact due to COVID-19-related racial discrimination. Asians who have been unfairly blamed during the surge of COVID-19 showed increased mental health concerns, such as anxiety, depression, sleep difficulties, and traumatic symptoms. Thus, it is imperative for counselors to provide culturally responsive counseling interventions for Asian clients who were affected by systemic racism during this period. To achieve this goal, we suggested counseling considerations based on the MSJCC framework. This study provides various implications for counselors who work with Asian clients to be culturally competent in counselor self-awareness, client worldview, counseling relationship, and counseling and advocacy intervention domains. Therefore, the findings in this study may contribute to better serving Asian clients to mitigate the negative effects of COVID-19-related racial discrimination.

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