Best Practices

When Being "Essential" Illuminates Disparities: Counseling Clients Affected by COVID-19

Stacey Diane Arañez Litam and Carlos P. Hipolito-Delgado

The 2019 novel coronavirus (COVID-19) has highlighted social disparities in the United States. This article examines how preexisting racial and ethnic disparities, exacerbated by COVID-19, have negatively affected communities of color that tend to be overrepresented in lower socioeconomic groups, have limited access to health care and education, have an undocumented status, and work in jobs considered "essential." Counselors are encouraged to use creative strategies to design and facilitate telecounseling and reduced- or no-cost workshops in which attendees can participate safely. Specific cultural considerations, aspects of crisis management, and creative interventions that can be used with clients of color at an appropriate social distance are discussed. Counselors can also instill hope in their clients by promoting sociopolitical development. As the impact of COVID-19 will be felt for years, it is crucial that counselors be prepared to address the needs of those disproportionately affected.

Keywords: COVID-19, essential workers, communities of color, social disparities, telecounseling

The 2019 novel coronavirus (COVID-19) has illuminated social disparities in the United States. In the current COVID-19 reality, government policies are more likely to adversely affect people of color, who tend to be overrepresented in lower socioeconomic groups, be undocumented, have limited access to health care and education, and work in jobs considered "essential" (Devakumar et al., 2020). Additionally, many racial and ethnic groups face myriad daily stressors that become exacerbated by the presence of natural disasters, such as the COVID-19 pandemic. The combination of these factors necessitates special attention from counselors who are called to support clients in times of pandemics.

Racial and ethnic groups are more likely than their White counterparts to report lower median incomes (U.S. Census Bureau, 2019a), lower educational attainment (U.S. Census Bureau, 2019b), and higher rates of poverty (Gramlich, 2020). These combined factors limit employment opportunities and force people of color into industries where they are deemed essential and are at greater risk for contracting COVID-19 (Centers for Disease Control and Prevention [CDC], 2020). Many people of color are employed in environmental services, in transportation sectors, and as home health care workers—jobs in which they are unable to work from home and are in close contact with others (Golden, 2020). For example, nearly 25% of African American and Latinx workers are employed in the service industry, compared with 16% of White workers (CDC, 2020). Increased rates of exposure to COVID-19 are especially problematic because communities of color face multiple challenges associated with accessing health care, including language barriers, financial concerns associated with missing work to receive care, and a long-standing distrust of the health care system (CDC, 2020). Furthermore, some racial and ethnic groups are more likely to have preexisting chronic health conditions that negatively affect the prognosis of COVID-19 treatment (Devakumar et al., 2020) and are less likely to have health insurance compared with their White counterparts (Bartel et al., 2019). Indeed, emerging statistics indicate that communities of color have disproportionately higher rates of hospitalization (CDC, 2020) and experience greater economic consequences during the COVID-19 pandemic (M. H. Lopez et al., 2020).

Stacey Diane Arañez Litam (ID) https://orcid.org/0000-0001-5398-8305, Counseling, Educational Leadership, and Adult Learning, Cleveland State University; **Carlos P. Hipolito-Delgado** (ID) https://orcid.org/0000-0002-9988-6045, Department of Counseling, University of Colorado Denver. Correspondence concerning this article should be addressed to Stacey Diane Arañez Litam, Counseling, Educational Leadership, and Adult Learning, Cleveland State University, 2121 Euclid Avenue, Julka Hall 275, Cleveland, OH 44115 (email: s.litam@csuohio.edu).

Although the work of communities of color may be labeled essential, their physical, psychological, and economic well-being are not treated as such. To this end, counselors are well positioned to support communities of color affected by the COVID-19 pandemic by familiarizing themselves with culturally appropriate strategies. The present article provides an overview of how preexisting societal disparities, exacerbated by COVID-19, have negatively affected communities of color. Specific cultural considerations, aspects of crisis management, and creative interventions that can be used with clients of color at an appropriate social distance are provided. This article is crucial to the counseling literature because it is among the first to specifically address counseling during the COVID-19 pandemic and the needs of the communities most heavily affected.

The Impact of COVID-19 on Communities of Color

Emerging research has illuminated the dire financial and medical consequences of COVID-19 on ethnic minority groups (CDC, 2020). These impacts are evidenced by higher rates of infections, deaths, income loss, and psychological stress that are prevalent in many communities of color. It is essential to understand how existing societal inequities have interacted with the pandemic in ways that continue to negatively affect communities of color during the COVID-19 pandemic.

Even before the emergence of COVID-19, many racial and ethnic groups lacked the income and wealth necessary to take time away from work when urgent medical care was needed or when family caregiving was required. These financial realities are highlighted by data from the U.S. Census Bureau (2019b), which showed that the median household income for Whites was $70,642 compared with $51,450 and $41,361 for Hispanics and African Americans, respectively. This financial gap widened following the pandemic, as non-White racial and ethnic groups experienced higher percentages of job losses and wage cuts and lacked emergency funding compared with their White counterparts (M. H. Lopez et al., 2020). The disparities illuminated by COVID-19 also extend into health care access. African Americans are twice as likely to be uninsured than Whites (Bartel et al., 2019), and Hispanics are 3 times more likely to be uninsured and are significantly less likely to have paid sick leave than Whites (Bartel et al., 2019).

The combined factors of poverty (Gramlich, 2020; U.S. Census Bureau, 2019b), barriers to health care (CDC, 2020), and lower rates of professional help seeking (Sue & Sue, 2016) have placed racial and ethnic communities at considerable health risk during the COVID-19 pandemic. Indeed, rates of hospitalization and death have affected communities of color at much higher rates than Whites. In the United States, African Americans have accounted for 33%

of all COVID-19-related hospitalizations (CDC, 2020). When supporting communities of color affected by COVID-19, counselors must understand how societal realities affect their clients' lived experiences and worldviews. For example, communities of color are more likely than their White counterparts to live in densely populated areas and in multigenerational households, which create challenges for social distancing and isolating sick or older family members (CDC, 2020).

Although research is limited on the psychological effects of the COVID-19 pandemic on communities of color, the presence of multiple challenges results in a greater degree of stress in communities of color. Furthermore, the physical, psychological, and financial consequences faced by these groups are likely to linger beyond the initial outbreak and continue into the foreseeable future. It is therefore of paramount importance for counselors to be prepared to work with communities of color affected by COVID-19. Counselors must consider how non-White racial and ethnic groups continue to be underserved within traditional health care services (Sue & Sue, 2016). Understanding the influencing factors that create barriers to help seeking in communities of color is important for counselors, who will need to demonstrate flexibility by providing counseling services during nontraditional hours and outside of hospitals, clinics, and agency settings. To better support communities of color during the pandemic, counselors are called to increase mental health accessibility by offering reduced or no-cost counseling services within the clients' own communities and at an appropriate social distance. For example, counselors can collaborate with schools, faith- and community-based systems, and housing organizations to reach clients in places that they already frequent, such as in parks and large outdoor public gathering spaces. Counselors must also be prepared to provide ethical telehealth services through online platforms that are readily accessible for clients at no cost or at a reduced cost.

Clinical Implications for Counselors

The compounding effects related to increased exposure to infection, financial stress, and a sense of uncertainty because of the unprecedented nature of COVID-19 may result in client crisis. Individuals who are disproportionately affected by COVID-19 also may experience crises associated with the sudden death of loved ones, family members, friends, and community members following viral infection. When clients seek professional mental health services due to COVID-19-related crises, professional counselors should be prepared to triage client concerns.

Applying Maslow's Hierarchy of Needs

Clients affected by the COVID-19 pandemic may benefit from a counselor whose perspectives are grounded in Maslow's (1943, 1970) hierarchy of needs to first address clients'

immediate concerns before engaging in crisis counseling. Maslow's hierarchy consists of five layers arranged to form a pyramid. From the bottom ascending upward, these five needs include physiological, safety, love and belongingness, esteem, and self-actualization. According to Maslow (1943, 1970), the bottom needs must first be satisfied before other needs can be met. Indeed, counselors must consider whether clients who are disproportionately affected by COVID-19 are able to effectively address their concerns for safety, housing, food, and other essential needs. To address client needs at Maslow's base level, counselors may use direct questions designed to specifically assess for the presence of food, safety, and security. Examples of such questions include "How has COVID-19 affected your family?" and "Have your diet and eating habits changed since the pandemic?" From the client's response, counselors may learn important information related to food access and connect clients to local food banks or other relevant community resources as needed. Another important issue relates to sleep. Example questions include "How has the amount and quality of your sleep changed since the pandemic? Why do you believe this has occurred?" Asking clients about changes related to the quality and amount of their sleep invites clients to broach the presence of any pandemic-related changes. For example, clients may be reluctant to report the temporary relocation of their family into a shelter or may not immediately disclose how financial stressors due to job loss represent a salient emerging concern. Counselors are encouraged to examine the causes of these changes from the client's perspectives and to avoid making assumptions. Counselors bear the onus of familiarizing themselves with available resources that can help clients meet their needs when financial barriers occur. When clients are in need of mental health support but financial barriers, fears related to undocumented status, or other challenges limit accessibility to services, counselors are encouraged to be advocates by eliminating barriers and connecting clients with free or low-cost resources (Ratts et al., 2015).

Engaging in COVID-19-Related Crisis Counseling

A crisis consists of a precipitating event, a perception of the event that leads to feelings of subjective distress, and diminished functioning when the distress is not alleviated by coping responses (Pueleo & McGlothlin, 2014). Following precipitating events, such as those occurring during the COVID-19 pandemic, perceptions about the world as safe and predictable are significantly diminished (Webber & Mascari, 2016). Counselors must be prepared to assist clients who present with COVID-19-related crisis and consider how environmental factors, cultural influences, and the presence of interpersonal support systems may affect clients' experiences of crisis. Basic counseling skills of congruence, unconditional positive regard, and empathy represent important strategies to begin building a therapeutic alliance, as well as understanding the client's worldview and COVID-19-related crisis experiences. Counselors must avoid making assumptions about the underlying experiences associated with an event and instead allow clients to uncover their own personal meanings. For example, a counselor may assume that the presenting concerns of a postal worker who describes marked feelings of anxiety and fear are related to the client's increased exposure to the virus when the client is actually ruminating on the well-being of their mother who resides in a nursing home.

After the client's safety and physiological needs have been met, counselors may engage in crisis counseling. In response to the COVID-19-related crisis, counselors are called to work collaboratively with clients to help them reestablish a sense of safety and predictability. Counselors can help clients defuse emotions by identifying and validating clients' experiences, remaining mindful that the goals of crisis counseling, such as during the COVID-19 pandemic, are to help clients reframe their cognitive process, organize and interpret their experiences, and integrate the experience into their life story in meaningful ways (Bauer, 2001; National Organization for Victim Assistance, 2016). Counselors can work with clients to develop specific, objective, and measurable action plans that address their individual pandemic experiences. Identifying clients' available resources and coping skills is also essential in promoting the wellness of clients disproportionately affected by COVID-19. Additionally, troubleshooting strategies aimed at responding to barriers if and when they occur may increase the likelihood that the client's plan to endure the pandemic will be successful. Encouraging clients in culturally sensitive ways to use coping responses may further promote a sense of resilience in times of pandemic-related crises. For example, compassion meditation is an effective strategy for racial and ethnic groups to release feelings of fear and anger and decrease suffering by cultivating compassion and unconditional regard toward self, others, and the universe (Germer & Neff, 2015). Compassion meditation represents a culturally relevant strategy that may promote overall psychological wellness (Hoffman et al., 2011; Shonin et al., 2015) and may be especially applicable for Asian American and Pacific Islanders (AAPIs) who experience COVID-19-related racial discrimination (Litam, 2020).

After clients have met their basic physiological needs, defused their emotions, and developed a crisis plan, counselors may begin helping clients strive toward posttraumatic growth. Posttraumatic growth occurs when individuals demonstrate a growth mind-set in combination with a deep acknowledgment and personal appreciation for having endured challenges (Tedeschi & Calhoun, 1996, 2004). Embodying a growth mind-set following traumatic experiences, such as a pandemic, may result in clients finding new ways to relate to others, embracing possibilities, identifying personal strengths, experiencing spiritual change, and enjoying a deepened appreciation for life (Tedeschi & Calhoun, 2004).

Counselors may help clients achieve posttraumatic growth during the pandemic by acknowledging and validating the reality of their COVID-19-related challenges without letting the pain become all consuming. Specifically, counselors may explore with clients how social distancing may have renewed a deeper appreciation for one's friends, family, and community and identify ways personal growth was achieved during the pandemic. Additionally, counselors may encourage clients to frame their pandemic-related experiences of crisis in ways that inspire sociopolitical change and address social inequities.

Addressing Grief and Loss

The role of social distancing may affect the process of grief and loss for communities of color who value shared celebration and social gatherings. Following the death of friends, loved ones, and community members from COVID-19, clients may struggle to overcome their feelings of grief in new, socially distanced ways. Grief involves the complex psychological response of losing a significant person through death and includes thoughts, feelings, and behaviors related to the loss (Shear, 2012). When counseling communities of color affected by grief and loss due to COVID-19, counselors must be prepared to bracket off their own personal experiences with family, friends, and community members affected by the virus and remain present for the client. Counselors are also encouraged to identify and challenge the maladaptive internalized messages that clients might tell themselves about their loved ones death, such as "If I would have recognized the signs of COVID-19 infection sooner, my loved one would still be here" or "It's my fault that my loved one contracted the virus." Counselors are also called to consider how social distancing may have limited the ability of clients to attend memorial services or to grieve with family members. One socially distant grieving strategy is to encourage clients to memorialize their lost loved ones in personally meaningful ways, such as by using art to celebrate a loved one's life or by gathering virtually via various online platforms with friends and family of the loved one. Adolescents and young adults may also experience a sense of loss resulting from their inability to participate in important milestones, including birthdays, graduations, sporting events, and proms. Counselors can help young clients commemorate meaningful achievements, such as high school graduation and commencement, in creative ways, for example, by encouraging celebrations through virtual video platforms.

Practical Applications for Counseling During COVID-19 Pandemic

Demystifying the Telehealth Counseling Process

Because people of color are less likely to use professional counseling services compared with White individuals, counselors must dedicate ample time to orient clients to counseling, especially when providing telecounseling. Counselors must take additional care to address the ethical issues of confidentiality, expected counseling outcomes, and any potential consequences that may arise during telecounseling (American Counseling Association, 2014, Standards A.2.b. and H.2.a.). Counselors should remind clients to participate in telecounseling from a specific, private location with an uninterrupted internet connection and consider who else in the home may overhear the conversation. Special considerations related to Health Insurance Portability and Accountability Act of 1996 violations from telecounseling are also warranted. Counselors may need to spend additional time explaining telecounseling terms that may be unfamiliar to clients with limited technology knowledge and choose a telecounseling application that uses SSL (Secure Sockets Layer) to provide a secure connection between devices. When providing telecounseling services, counselors are encouraged to select backgrounds and set up inviting workspaces to minimize distractions for clients while communicating warmth without sterility. Dedicating sufficient time to develop rapport and understand how clients' lives have been uniquely affected by their pandemic experiences is essential. To this end, counselors may ask clients about how their daily life has changed following the pandemic.

The willingness of counselors to self-disclose can help humanize them and make them more approachable to clients (Hipolito-Delgado & Mann, 2012) in a virtual environment. Counselors can use inclusive language to affirm and acknowledge the universally shared challenges related to social distancing without shifting the focus away from the client. For example, a counselor might say, "Many of us have struggled with feelings of loneliness, grief, and loss during the pandemic. I'm wondering if this is also true for you." This technique communicates a mutually validating and shared experience while inviting the client to self-disclose on a more personal level.

Conducting Socially Distanced Workshops

Counselors are encouraged to use creative strategies that reach communities of color where they are. For example, providing free workshops can introduce counseling services to these communities (Hipolito-Delgado & Diaz, 2013). In the COVID-19 reality, counselors can facilitate reduced- or no-cost workshops to outline important strategies to maintain wellness and mitigate the effects of pandemic-related stress. For example, a workshop could outline the physical, emotional, and mental health benefits of regular exercise; underscore the importance of maintaining social relationships and connections during times of social distancing; or focus on intergenerational communication strategies for families dealing with conflict stemming from living in confined spaces. Other interactive and experiential workshops could focus on

helping attendees practice behavioral interventions, such as progressive muscle relaxation and diaphragmatic breathing, to mitigate COVID-19-related stress. Facilitating mindfulness meditation, compassion exercises, or yoga represents helpful and free strategies that may benefit communities of color.

As part of the workshop development process, counselors must consider the importance of maintaining their own health, as well as the health of community members. Counselors are encouraged to facilitate community workshops in large, open-air, public spaces where attendees can safely learn information, participate in activities, and bring their children, all while practicing appropriate physical distancing. Given the inflexibility of many schedules, communities of color may most benefit from workshops offered outside of traditional working hours, such as after 5 p.m. Encouraging attendance of various interdisciplinary professionals, such as case workers, social workers, and staff from housing organizations, may also benefit clients by providing opportunities to address several important needs at one time. Prior to executing such workshops, counselors are encouraged to collaborate with community leaders who are familiar with the community's current needs and the members who might serve as conduits to promoting community engagement. Following a COVID-19-related crisis, counselors are called to use strategies that help clients to reachieve a sense of control and predictability (Litam & King-White, in press).

To reduce the disproportionate rate of COVID-19 cases among communities of color, counselors can also partner with hospitals, community health centers, or schools to develop a wellness program aimed at helping communities of color better navigate their pandemic experiences. Goals of the wellness program can include establishing the importance of physical activity, sleep, nutrition, healthy (safe) social interaction, and appropriate social distancing on wellness. Counselors can facilitate wellness challenges in which participants are encouraged to voluntarily track their exercise, sleep, diet, and amount of social interactions each week. This strategy can lead to more holistic services for communities of color and introduce counseling services to those more inclined to see a doctor rather than a counselor for COVID-19-related stress.

Assessing the Influence of Social Positioning

Counselors must consider how intersecting identities influence their clients' social positioning. Originally proposed by Crenshaw (1989), the term *intersectionality* denotes the various ways in which race, gender, and other identities intersect to shape the multiple dimensions of identity. These identities designate one's social positioning, which influences the structural, political, and representational aspects of one's lived experiences (Crenshaw, 1991). To best understand clients' worldviews, values, and beliefs as these relate to their experiences of the COVID-19 pandemic, counselors must conceptualize each client through an intersectional lens. For example, a transgender, bisexual, Evangelical Christian, African American man experiencing poverty will likely conceptualize experiences of discrimination and COVID-19-related distress differently than a cisgender, White, heterosexual man with the same financial challenges. Counselors must work to understand the ways through which clients' identities, such as race, ethnicity, affectional identity, sexual identity, gender identity, socioeconomic status, documented status, ability status, and other identities, influence their lived experiences during the pandemic.

Individuals who face homelessness and housing insecurity during the pandemic may struggle with additional stressors related to sharing and living in communal spaces, which can lead to higher risk of exposure to infection (Devakumar et al., 2020). Lesbian, gay, bisexual, and transgender (LGBT) individuals are affected by homelessness at higher rates compared with their heterosexual counterparts (Keuroghlian et al., 2014), so counselors must be prepared to address the needs of LGBT clients with preexisting disparities that are compounded by COVID-19-related stressors. Homeless LGBT youth represent approximately 30% to 45% of clients at homeless agencies, drop-in centers, outreach, and housing programs (Durso & Gates, 2012), and they report higher rates of mental health and substance use, suicidal ideation, instances of physical and sexual trauma (Rew et al., 2005), and human trafficking (Keuroghlian et al., 2014; Litam, 2017) compared with heterosexual individuals. Within the LGBT community, transgender folx are among the most vulnerable and necessitate special attention during the COVID-19 pandemic because they may face additional barriers related to housing and safe access to hormone replacement therapy. *Folx* is a gender-neutral term used to be more inclusive of those who do not identify on the gender binary (Peters, 2017).

Transgender, nonbinary, and gender queer folx face instances of humiliation from policies that require them to use bathrooms and showers incongruent with their gender identity (Mottet & Ohle, 2006), and they are often not welcome in shelters (Mottet & Ohle, 2006; Quintana et al., 2010). Counselors must be prepared to support clients facing intersecting identities and multiple concerns (e.g., homelessness, mental health diagnoses, suicidal ideation and attempts, substance use, trauma experiences) that may be exacerbated by COVID-19-related stress. When counseling homeless LGBT clients during the pandemic, counselors must consider the influence of age and gender, use culturally appropriate techniques that are grounded in trauma-informed care (Hopper et al., 2010; Roberts et al., 2012), and strive to integrate consistent support across housing, medical, substance use, and social services (Drake et al., 2004). Additionally, infusing the Multicultural and Social Justice Counseling Competencies (Ratts et al., 2015) into counseling is important to support the intersecting identities of clients affected by COVID-19.

Considering Faith-Based and Community Support Systems

Many racial and ethnic groups have deeply held values that connect them to their religious- and faith-based communities. Counselors can encourage clients to seek support from these communities by engaging in mutual storytelling with community members about their pandemic experiences or by attending weekly virtual workshop services. Indeed, receiving validation from others within their communities while enduring challenging experiences is an invaluable intervention for racial and ethnic groups (Utsey et al., 2008; Yang & Counts, 2018) and may be helpful for communities of color during the COVID-19 pandemic. Extant research indicates exposure to social support is a well-documented adaptive coping strategy for African Americans (Lewis-Cole & Constantine, 2006; Utsey et al., 2008), Asian Americans (Wei et al., 2012), and Latinx Americans (Finch & Vega, 2003; J. D. Lopez, 2005). Examples of social support during the pandemic includes writing letters to family and friends, playing interactive games through online apps and other devices, and sharing walks in the park at an appropriate 6-foot physical distance.

Engaging in Sociopolitical Development of Communities of Color

Traditional forms of talk therapy may fall short in producing the necessary changes to address a client's pandemic-related concerns. When this occurs, counselors are called to effect change through advocacy and action (Ratts et al., 2015). Although initially destabilizing, the reality of enduring a pandemic provides unprecedented opportunities for personal growth. The existing societal inequities exacerbated by COVID-19 have illuminated the long-standing challenges faced by many communities of color and present opportunities for these marginalized communities to work toward equity. Counselors are called to engage in the sociopolitical development (SPD) of clients and communities of color. SPD is the process by which people develop knowledge of the self, social inequality, and community organizing and then use this knowledge to take action aimed at ending oppression (Zion et al., 2015). Although SPD is not an appropriate immediate goal for counseling marginalized clients affected by COVID-19, SPD represents an important long-term goal for these clients and their communities.

SPD is a fluid and recursive process (Zion et al., 2015) that encompasses the psychological and sociopolitical realms (Watts et al., 2002). The first step for clients engaging in SPD is to develop an understanding of self in relation to oppression (Zion et al., 2015). Counselors can facilitate this process by encouraging clients to reflect on how their intersecting identities and pandemic experiences were affected by privilege and oppression. Next, counselors and clients can work collaboratively to deepen critical consciousness. Critical consciousness is the ability to think independently and critically of the dominant propaganda, which often blames individuals for their marginalization (Watts et al., 2002). The goal of developing critical consciousness is to help clients identify aspects within their realities where they are unfairly disadvantaged or privileged and examine the social circumstances that perpetuate these inequities. For example, experiences of COVID-19-fueled racial discrimination toward AAPIs have increased substantially during the pandemic (Litam, 2020). These experiences of COVID-19 racism have deleterious effects on the psychological health and life satisfaction of Asian Americans (Litam & Oh, 2020). To this end, counselors might help AAPI clients explore how government policies affect their pandemic experience and identify strategies to mitigate the effects of COVID-19-related racial discrimination (Anandavalli et al., 2020). Finally, it is vital for marginalized clients to develop self-efficacy and skills to engage in sociopolitical actions that address the existing inequities (Hope & Jagers, 2014). Although the extant literature fails to explore how counselors can prepare clients to engage in advocacy and action, there is anecdotal evidence that group leadership opportunities and engagement in youth activist training show promise with students of color. Therefore, counselors and clients can work together to document how COVID-19 has affected communities of color and argue for policies to ameliorate disparities in access to health care and housing.

Conclusion

The COVID-19 pandemic has disproportionately affected people of color who have limited access to health care or who are considered essential to the functioning of society, but whose health and financial needs are not recognized as essential. Therefore, communities of color necessitate special consideration, and counselors are called to support these communities by considering the role of social positioning in client conceptualization. Asking questions to assess whether basic needs are met during the pandemic and using direct interventions that incorporate aspects of crisis management and address issues of grief and loss may be particularly applicable when supporting clients affected by COVID-19-related stressors. Counselors are encouraged to use creative strategies to design and facilitate reduced- or no-cost workshops in large, open-air, public settings where attendees can participate safely while practicing appropriate social distancing. Additionally, connecting clients to appropriate faith- and community-based support systems may serve as protective factors to mitigate the deleterious effects of COVID-19-related stress.

Furthermore, engaging in client SPD may bring about changes that reduce social inequity for future generations. As the impact of COVID-19 is likely to be felt for years, it is crucial that counselors be prepared to address the needs of those most affected.

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