
hearing our elders

Given What I Know: Seeing the Past as a Portal to an Intentional Future

Caroline S. Clauss-Ehlers and William D. Parham

Dr. Terrence Roberts is our second guest for the Hearing Our Elders series. Dr. Roberts is one of the Little Rock Nine, the first group of African American students to attend Little Rock Central High School in 1957. Interview segments are woven into the manuscript, providing a historical and political context from which to understand the current national climate with regard to social justice and multicultural responsiveness. Dr. Roberts's interview revealed six critical themes: resilience, understanding context in the face of the status quo, reimagining language, choice as key to good mental health, use of the self as an intervention tool, and the importance of being historical in one's thinking. Intentionality is identified as a metatheme that asks the question of where one falls on the status quo vs. change-agent continuum.

Keywords: Dr. Terrence Roberts, Hearing Our Elders series, Little Rock Nine

[INSERTED FOR SPACE/SPANISH TRANSLATION TO COME] Dr. Terrence Roberts is our second guest for the Hearing Our Elders series. Dr. Roberts is one of the Little Rock Nine, the first group of African American students to attend Little Rock Central High School in 1957. Interview segments are woven into the manuscript, providing a historical and political context from which to understand the current national climate with regard to social justice and multicultural responsiveness. Dr. Roberts's interview revealed six critical themes: resilience, understanding context in the face of the status quo, reimagining language, choice as key to good mental health, use of the self as an intervention tool, and the importance of being historical in one's thinking. Intentionality is identified as a metatheme that asks the question of where one falls on the status quo vs. change-agent continuum.

Keywords: Dr. Terrence Roberts, Hearing Our Elders series, Little Rock Nine

We were humbled as we listened to Dr. Terrence Roberts share his life experiences, which frame this issue of the *Journal of Multicultural Counseling and Development's* newly launched Hearing Our Elders series. At

[AU1] *Caroline S. Clauss-Ehlers, Department of Educational Psychology, Rutgers University, The State University of New Jersey; William D. Parham, Department of Educational Support Services, Loyola Marymount University, Los Angeles. This article represents the second contribution to the Hearing Our Elders series introduced as a tool for illuminating lessons learned from the journeys of historic vision-guided and resilient luminaries whose impact on multicultural counseling continues to be felt. The authors are equal contributors to this article and will be rotating authorship during their writing for this series. Correspondence concerning this article should be addressed to Caroline S. Clauss-Ehlers, Department of Educational Psychology, Rutgers University, The State University of New Jersey, Graduate School of Education, 10 Seminary Place, New Brunswick, NJ 08901 (e-mail: cc@gse.rutgers.edu).*

© 2016 American Counseling Association. All rights reserved.

age 15, amid the backdrop of the turbulent 1950s segregated South, Dr. Roberts was one of the nine first African American students to attend the all-White Little Rock Central High School in Little Rock, Arkansas. By virtue of his participation, Dr. Roberts helped end segregation. His interview illuminates the importance of self-pride and self-affirmation, raises the expectation of resilience as a response to deeply rooted social ills, and demonstrates the power of hope for the future in spite of overwhelming odds. Out of his description of the historical context of the time, Dr. Roberts shares his deep commitment to change and equity that characterized his adolescence. He takes us back to that place in time:

Dr. William Parham: I would like to start our conversation by asking you to invite us back to 1957 when you and your classmates, within the context of horrific racial injustice, stood tall to claim your basic human rights. Take us there and help us understand how a teenager managed such high-intensity turbulence.

Dr. Roberts: Well, I think one of the first things you have to realize when you think about us as teenagers [is that] we were Black teenagers in this country with a very long history of racial oppression. We had learned that just to survive we needed to understand the dynamics swirling around us and we needed to grow up very quickly. We needed to grow up intellectually and emotionally, especially. We needed to be able to handle stuff that came at us all day every day. So it is a bit different than asking a teenager of today how he or she might handle things because the world has shifted quite a bit. In 1954, I was 13 years old when the Supreme Court decision was handed down in the Brown case [*Brown v. Board of Education*, 1954]. I was actually pretty excited because this was a time when the law was changing. Prior to that time, the law was definitely not on my side. In fact, until Brown, all of us were living under the aegis of the Plessy decision from 1896 [*Plessy v. Ferguson*, 1896]. Now, of course, the Plessy decision didn't start anything. It was simply and merely the codification of stuff that had been going on for centuries. And yet, the bright light of Brown was spectacular for me because I thought not too much will change in the wake of this change of the law, especially right away. But the fact that the law has changed represents a tremendous and total change in the legal framework. I counted on that. That was my backup position, if you will. So, if we were going to follow the law in Little Rock, I was going to be a part of it. That was my thought, even as a 15-year-old.

The following provides a timeline of events referenced from the state of Arkansas website (Arkansas.com). The scene is one of a nation divided; on September 2, 1957, the day before the new school year was scheduled to start, Arkansas Governor Orval Faubus ordered the Arkansas National Guard to surround Little Rock Central High to block the Little Rock Nine from having

access. The students attempted to enter the building on September 4, 1957, but the National Guard prevented them from doing so.

On September 20, 1957, the troops withdrew because of a federal judge's injunction to the National Association for the Advancement of Colored People's (NAACP) lawyers Thurgood Marshall and Wiley Branton, which banned the Governor from deploying the National Guard. In response, Governor Faubus had the Little Rock police surround the school on September 23, 1957, and more than 1,000 civilians protested the Little Rock Nine's entrance. When they learned that police had escorted students into the school, the crowd became increasingly aggressive. Out of fear for the student's safety, school administrators had students exit the school through a side door that morning.

The next day, September 24, 1957, U.S. Congressman Brooks Hays and Little Rock Mayor Woodrow Mann reached out to President Eisenhower for help. The President responded by deploying the 101st Airborne Division and National Guardsmen, letting the Governor know that the children would attend Little Rock Central High. On September 25, 1957, the Little Rock Nine entered Little Rock Central High School through the main entrance under federal military protection, while being verbally assaulted by an angry crowd (see Arkansas.com for a complete timeline). Dr. Roberts recalled the experience.

Dr. Parham: Do you feel comfortable sharing your day-to-day experiences as a student once you had been admitted? What was it like walking the campus of the high school and sitting in classes? What were the during-the-day experiences that you feel comfortable talking about?

Dr. Roberts: Well, I'm very comfortable talking about that. In fact, I have spent a lot of time in my life reviewing some of those things. I think one of the first things when we got to school finally, it took some doing because the Governor and many of the people in Little Rock were so opposed to the school idea of desegregation. We finally made it in with the help of the U.S. Army, and I can say up front without the Army being present there—and they were present there throughout the entire school year—we probably would have been killed. There is no question in my mind about that given the intensity of the opposition.

And yet, although the President enlisted the Army to protect the Little Rock Nine, structural inequity remained through the school's internal violence and social stratification. Dr. Roberts shared, for instance, how each student had to sign an affidavit agreeing not to engage in any extracurricular activities. Although the rationale for this policy was presented by officials as being related to safety, Dr. Roberts's contention was that this was actually about maintaining the status quo due to fears of social interaction between Black and White students. He said:

We had to sign an affidavit. Now, ostensibly, that was born out of concern of our safety and well-being on part of the school officials. I think the real reason was they were more fearful of social interaction between the nine of us and our White peers at school, because often, when you are in those situations, even though by law and by custom you are not supposed to interact, you do anyway. And that would've been too much for those who cherished maintaining the status quo to handle. So we did sign, because we knew we were not going to be able to go there unless we signed.

Dr. Roberts's sharing that signing the affidavit was a way to prohibit interaction between White and Black students by preventing the Little Rock Nine from participating in extracurricular activities reflects a social distance phenomenon that has been documented throughout 20th- and 21st-century literature (Bogardus, 1947; Clauss-Ehlers & Carter, 2006; Garcia, Lewis, & Ford-Robertson, 2015). Social distance as applied to race refers to the extent to which racial groups feel distant from or close to one another (Clauss-Ehlers & Carter, 2005). Social distance research has identified a distant consistent bias that indicates a preference for one's racial/ethnic group (Bogardus, 1947; Clauss-Ehlers & Carter, 2006).

Bogardus (1947) developed a social distance scale that measured reactions to interracial interactions in seven social situations ranging from most intimate (e.g., would marry) to least intimate (e.g., would have live outside my country). In longitudinal research conducted from 1926–1956, Bogardus (1958) found little change in expressed social distance toward 30 racial/ethnic groups. Those racial/ethnic groups in which the least social distance was expressed consistently remained “the north European races and [what participants perceived to be] those lighter in [skin] color” (Bogardus, 1958, p. 129; as cited in Clauss-Ehlers & Carter, 2005).

It is fascinating to note that Dr. Roberts was an adolescent embarking on his journey as one of the Little Rock Nine precisely the year after Bogardus (1958) completed his 30-year longitudinal research (e.g., 1956), and the year just prior to the publication of these findings (e.g., 1958). In fact, Dr. Roberts's brave commitment to attend Little Rock Central High School flew in the face of extreme social distance measures that were aimed at preventing the school's desegregation. In the article “Nine Children Face an Angry Town: An Interview with Terrence Roberts, One of the ‘Little Rock Nine’” (Adams, 2008), Dr. Roberts describes the precarious process that determined how many students would attend Little Rock Central High.

This process involved the school board asking students from two Black schools, Horace Mann and Dunbar Junior High, if they wanted to be involved. Dr. Roberts recalled how 150 children volunteered in the spring of 1957, but, by August, this number decreased to 17. Dr. Roberts attributed the diminishing numbers of students to the screening measures implemented by the board. Eventually, this number voluntarily decreased to nine students due to understandable fears resulting from Governor Faubus' violent remarks. In the interview with Adams (2008), Dr. Roberts shared:

[AU2] *Dr. Roberts:* It had a lot to do with the screening by the school board. Rumor had it that it was the intention of the board to weed out all of us—we'd have been down to zero by the time they finished. Rumor also had it that the NAACP found out about the process and forced the board to back off. By that time, only 17 of us remained. And, of that number, eight dropped out, leaving nine.

Adams: They dropped out voluntarily?

Dr. Roberts: Voluntarily—because of the increasing fear. [Arkansas] Governor Orval Faubus had begun making remarks about armed caravans coming into town, about blood flowing in the streets of Little Rock. It was a pretty scary time!

The notion that social distance increases in response to more intimate interracial scenarios as described by Dr. Roberts continues to be reflected in current research findings. In their study of attitudes toward interracial marriage in the United States, for instance, Garcia et al. (2015) found that, although there has been some change in behaviors with regard to race, Whites are more likely to support social distance and laws against interracial marriage. In contrast, Blacks are more supportive of interracial marriage and seek to decrease social distance.

Despite the forced and enforced social distance, Dr. Roberts and his peers honored the legacy of strength and resilience that he inherited from his family and community elders. In so doing, they illuminated what could be accomplished even under the most adverse circumstances. In the many years since the historic and heroic actions of the Little Rock Nine, Dr. Roberts has enjoyed a career as a psychologist whose teaching, service, consultations, and scholarship (e.g., *Lessons from Little Rock*, Roberts, 2009; *Simple Not Easy: Reflections on Community Social Responsibility and Tolerance*, Roberts, 2010) continue to evidence his commitment to asking tough questions and engaging in difficult dialogues around the intersection of social, political, and economic systemic structures with the multiple identity dimensions under the umbrella of multiculturalism, including race, ethnicity, culture, gender, social class, sexual identity, disability, and religion.

A question that sets the stage for tough conversations asks, "Relative to inequities in educations, housing, healthcare, income, and employment, how much has really changed since 1957?" As a prelude to his response to this question, which is forthcoming, Dr. Roberts, moments prior to the recorded interview, shared what he described as an interesting experience. On June 17, 2015, in hopes of starting a race war, confessed gunman 21-year-old Dylann Roof shot and killed nine members of the Emanuel African Methodist Episcopal (AME) Church in South Carolina. In a conversation just prior to the start of the interview, Dr. Roberts expressed a heartfelt emotional reaction to the horrific and senseless loss of life and to the psychological aftermath surviving family and community members would likely experience. Especially poignant for Dr. Roberts, however, was his observation of

the gender composition of the South Carolina AME church victims. As was the case with the Little Rock Nine, six women and three men were the targets of the hate-filled aggression. This disclosure prompted the following reflective question: “Is this an eerie coincidence or a sign that not much has changed?” (T. Roberts, personal communication, September 4, 2015).

Emerging from a perusal of local, regional, and national audio, visual, and written media are numerous stories of Black–White racial tensions. The 2005 Toledo, Ohio, neo-Nazi march in North Park (a predominately Black community); the 2009 Oakland, California, riots following the shooting of Oscar Grant at the Bay Area Rapid Transportation train station; the 2014 riots in Ferguson, Missouri, following the shooting of Michael Brown; and the 2015 Baltimore, Maryland, riots following the death of Freddie Gray, to name only a few, represent examples of race-based tensions that introduce consideration that perhaps not much has really changed.

The numerous incidents over the last decades of race-based tensions and the systemic political, social, and economic structures that permit these race-based tensions to continue to exist prompt reflections of a declaration asserted by Martinique-born, Afro-Caribbean psychiatrist and philosopher Franz Fanon. In his now classic book, *The Wretched of the Earth* (1963; 2005), Fanon states, “each generation must discover its mission and either fulfill it or betray it in relative opacity” (p. 145). That call 55 years ago to step to the plate and decide which course of action to take now seems prophetic. Its relevance and applicability to today’s generation of seasoned and early-career mental health professionals as students are clear and irrefutable.

[AU3] Like the previous article in the Hearing Our Elders series, this raises the question: How much has really changed? Intentionality is a metatheme that is apparent in Dr. Roberts’s interview. MacDonald (2012) described intentionality as “the name given to the distinctive mental relation characteristic of conscious states or events that they can be directed at something or about something. For many theorists in the Analytic-Empirical tradition, intentional relatedness is an intrinsic feature of consciousness. . . . On the other hand, for many theorists in the continental tradition, intentionality as one of the central concepts of the phenomenological approach to consciousness, it is crucial to its account of perception, meaning and the social world” (p. 000). Hence, *intentionality* refers to how one’s mental state directs one to be deliberate about a situation.

[AU4] Dr. Roberts’s words and experience reflect the question of intentionality, leading us to ask: “Where do you fall—change agent or status quo supporter?” This inquiry is central to Dr. Roberts’s early life experience as a teen who witnessed the adults around him being intentional in starkly contrasting ways. He shares, for instance, how adults in the high school he attended before going to Little Rock Central High School were angry about racial discrimination. They channeled this anger to support the academic success of Dr. Roberts and his peers. Dr. Roberts said:

[AU5] Life in Little Rock when I was growing up was so very much constricted by racial discrimination laws and customs. There were only a few schools where all Black kids went so one we knew each other for of each other and we were all in the presence of adults who were very angry about the situation. Many of them were able to corral that anger and take the energy and point toward us in the form of what they used to say to us and how they use to demand of us that we pay attention. One of the first phrases I heard early on and I can remember it as if it were being said right now was “Boy, get your education.” That was repeated, item for item: “Boy, get your education.” So, not only myself but all of my Black peers would hear that same thing. A large majority of us took it to heart and we paid attention.

At the same time, we know that Dr. Roberts experienced intentionality in the opposite direction—by adults and teenagers committed to maintaining segregation. He recalled the hatred he experienced daily as a teenager:

Now some of the White students actually left. They exited the schools themselves since we were there, and they said they were not going to school with us, so they never came back. Those who stayed, the majority of them were simply uninterested in us at all. They paid no attention; we were ignored. But for the large contingent, it was an opportunity for them to display their hatred in terms of their physicality toward us, in terms of their verbalizations. So we heard just about any kind of obscenity that you could imagine. We were beaten, we were kicked, we were spit upon. We were knocked down, we had acid poured in our faces—all of that stuff. And yet eight of us managed to get through the year.

We recall the four key considerations presented during the January 2016 Hearing Our Elders series launch: “(a) highlight resilience, reconciliation, and reclamation; (b) acknowledge achievements despite adversity; (c) offer words of wisdom to fuel the ongoing struggle for recognition as whole, uniquely endowed persons; and (d) provide important historical documentation for future generations of multicultural scholars and practitioners to access” (Parham & Clauss-Ehlers, 2016, p. 8). We derive a fifth element from Dr. Roberts’s interview—the importance of sharing stories that help us examine, both individually and collectively, choices made in our past, the consequences of those choices, and what we can learn from them to make better decisions in the future and for the future.

historical context

Dr. Terrence Roberts was invited as our second interviewee for the Hearing Our Elders series given his experience of both adolescence and the perils of living through early desegregation efforts in the late 1950s. His historical living legacy is a reminder of institutional segregation and racism. Dr. Roberts’s legacy highlights how fear can shape a nation: fear of the unknown, fear of change, and fear of a perceived “other.” His interview provides a portal from which to understand how the fears of a nation have been lived out in the past, and the historical direction they can provide (if we choose to acknowledge and bear witness to them) about making intentional choices for the future. Dr. Roberts invites and challenges us to exercise intentional thinking based on our history that asks us to ask ourselves about our values and the kind of society we want to have, as reflected in the following interview segment:

Dr. Clauss-Ehlers: At the beginning of the interview, you were talking about the teachers in your school being so committed. I am wondering what your thoughts are about how we can encourage youth, encourage the next generation, to be committed to a more just society? How we can do that and how we can provide that supportive mentoring?

[AU6] *Dr. Roberts:* That's a tough one, because it seems to me that you are going to have to convince young people that there is some validity to this notion that [living] in a just society is a goal shared by a lot of people. I don't know if that is true. I think that a lot of people are frankly very, very comfortable with the injustice, the unjust system that we have currently; it works for them. It absolutely works, and it's economically beneficial. Mass incarceration has provided employment for countless people. We now have a great deal of privatization of prisons. European investors are sending tons of money into private prisons. If we suddenly change our attitude about who is a criminal, these folks are going to lose a lot of revenue, and they are not going to be happy about it.

Dr. Roberts's interview is an invitation to look at history to truly reflect upon and understand social and civil rights movements. What are their outcomes? How did they meet their demise? Through an understanding of history, we, as a collective, can ask: What do we want to care about? What would a society without fear look like? Dr. Roberts said:

So young people know this; they are aware of it. That's why this movement "Black Lives Matter" is really taking off. Young people are beginning to really ask serious questions. Now traditionally what has happened in this country, movements have started, but they have been co-opted and they have been destroyed from within because the powers that be do not want the change. Again, history gives us this. This is not something I am making up. You can look at any history book and you see it written large.

Dr. Roberts's life trajectory embodies that experience—growing up and participating in the civil rights movement. Both arguably and ironically, the inhumane, malicious, and vicious attacks perpetrated by angry, White Little Rock Central High School students as well as by the surrounding White communities against the Little Rock Nine both fueled and sustained their stand-and-be-counted leadership and commitments to stay the course. Their unified decision to remain firm and steadfast in their convictions altered the course of history.

An additional observation merits attention. Hidden behind the visible daily individual and collective actions of Dr. Roberts and his eight peers—Carlotta Walls LaNier, Ernest Green, Elizabeth Eckford, Gloria Ray Karlmark, Jefferson Thomas, Melba Pattillo Beals, Minniejean Brown, and Thelma Mothershed—were moment-by-moment decisions to honor the Mohandas K. Gandhi-inspired code of nonviolence (Gandhi, 1957). Consider the amount of restraint needed to fend off being hit, kicked, spit on, and verbally assaulted from the start to the end of each school day.

Furthermore, imagine the increased venom and up-the-ante attacks replete with invectives and denunciatory language spewed by White students and the surrounding communities when any one of the Little Rock Nine showed evidence of being worn down and emotionally and physically depleted. The depth to which the Little Rock Nine had to reach within themselves and out to their families and elders for inner strength is not only remarkable, but echoes a proclamation voiced by Dr. Martin Luther King, Jr., in his 1963 book *Strength to Love*. Therein he stated, “The ultimate measure of a man is not where he stands in moments of comfort and convenience, but when he stands in times of challenge and controversy” (p. 26). For the Little Rock Nine, the greater the onslaught of hate, the more committed they were to do their part to push for brighter days confronting people’s fears, violence, and also people’s support and encouragement. In short, Dr. Roberts’s interview represents an invitation to an intentional future where turning stumbling blocks into stepping stones becomes the rule versus the exception. To what degree is today’s generation of early-, mid- and seasoned career professionals ready to receive the metaphorical baton from the Little Rock Nine and many other pioneers on whose shoulders the current generation stands?

procedures

Dr. William Parham reached out to Dr. Terrence Roberts about the Hearing Our Elders series. Dr. Roberts gave permission to conduct a 30- to 60-minute interview. We developed a total of seven interview questions for Dr. Roberts prior to the interview. The interview was conducted at Dr. Roberts’s home on September 4, 2015. Dr. William Parham was present at Dr. Roberts’s home for the interview, and Dr. Caroline Clauss-Ehlers called in to participate via phone. The interview was transcribed by an outside professional transcription service, at which point, interviewers independently identified themes, compared themes for interrater reliability, and developed final thematic categories based on this overlap. In addition, the authors identified a metatheme that emerged from the final thematic categories.

thematic categories

Dr. Roberts’s interview encourages us to understand the past so that we can be open for the future. The intentional choices we make, at both societal and individual levels, indicate our collective values (T. Roberts, personal communication, September 4, 2015). We (the authors) shared identified themes—a process that demonstrated enormous overlap across thematic content. We then collapsed themes into key reflections shared by Dr. Roberts. The six key themes and relevant message points identified include: (a) resilience and finding balance—as strategies for responding to deeply

TABLE 1
The Question of Intentionality:
Change Agent or Status Quo Supporter

| Thematic Category | Change Agent or Status Quo Supporter |
|--|--|
| Resilience and finding balance: Strategies for responding to deeply embedded social ills | Maintain an awareness of sense of self through connections with loved ones Don't internalize hostile external messages, rather, view them as not belonging to you but to the individual who is saying them Seek out at least one caring adult or supportive relationship Seek solace from community systems that support well-being Work to maintain a balance |
| Understanding context and intentionality in the face of the status quo: Turning up the outrage upon seeing the playing field for what it really is | Seek to understand how personal fears, reservations, and cautions are blocking your ability to behave proactively in response to incidents of social injustice Identify a social issue to which you can devote time and attention and seek ways of affiliating with that cause if only through volunteer work |
| Reimagining the language we use as a way of resisting encapsulation | Become aware of connections between culture and language spoken by self and others Explore how key phrases, whether colloquial or professional, reflect encapsulation Encourage clients to name their experience, and develop a language that reflects their lived reality Contribute to the profession through research, training, and practice that supports an inclusion of voices |
| Choice as key to good mental health | Conduct research that explores connections between implicit theories and psychological distress Develop evidence-based interventions based on findings from research on the incremental approach Engage in clinical work that encourages people to consider the choice they have through an understanding of incremental theory |
| Self as a basic intervention tool in educational, mentoring, and clinical relationships: Bidirectional benefits | Operationalize the mantra, "Each one, teach one" Accept the notion of reaching back to help others as a moral and professional imperative and identify a person or persons to mentor. |
| Be historical in your thinking: The truth about the past will set you free | Learn about the past, paying particular attention to individuals and groups who successfully navigated injustice and inequity. Identify multiple survival strategies that were used by elders to succeed and to avoid pitfalls Embrace a "pay it forward" approach and actively seek to guide individuals or groups and encourage them to lean on you until they can stand on their own |

embedded social ills; (b) understanding context and intentionality in the face of the status quo—turning up the outrage upon seeing the playing field for what it really is; (c) reimaging the language we use—as a way of resisting encapsulation; (d) choice as key to good mental health; (e) self as a basic intervention tool in educational, mentoring, and clinical relationships—bi-directional benefits; and (f) be historical in your thinking—the truth about the past will set you free. The question of intentionality was relevant to each theme, challenging the reader, and the profession, to consider the kinds of choices one wants to make in response to inequity. Just as the title of the current article focuses on “given what I know,” being intentional means exercising a choice in the face of awareness of the surrounding context. Table 1 presents the challenge to intentionality for each theme.

One challenge we met was to present interview content as illustrative of key themes in one category. It was often the case, for instance, that Dr. Roberts’s responses reflected multiple themes simultaneously. Given that this was something we struggled with perhaps reflects Dr. Roberts’s sense that “we are almost victims of our own language” (T. Roberts, personal communication, September 4, 2015). Rather than attempt to deflate the important richness and complexity of what was shared, we decided to integrate themes, discussing how they are intertwined with one another, the categorization merely providing the reader with a way into the material.

RESILIENCE AND FINDING BALANCE: STRATEGIES FOR RESPONDING TO DEEPLY EMBEDDED SOCIAL ILLS

Dr. Roberts brings immense resilience to his life experience. He shared how he learned to be resilient from the racial discrimination and history of slavery that came before him. His resilience is a portal from the past that has a positive impact on the present. Dr. Roberts said:

When you think about it, I was born in 1941. Slavery as a legalized constitutionally supported system began, I think we can generally say, as far back as 1619. Although those first 20 Africans who landed in Jamestown were not legally slaves at the time, their life was pretty much one of enslavement. So from 1619 until the Brown decision in 1954, we were legally not very much involved in the center of the activity in terms of what it meant to be an American citizen. That is a lot of years. A lot of time to figure out how to be resilient, how to respond, how to resist. So I was a beneficiary really of a lot of that activity that have been ongoing because Africans and then later African Americans were not passive people during that 335-year span between 1619 and 1954. So, I was aware of that as it was learning my own way of being resilient.

Dr. Roberts’s resilience is also reflected in his coping with the way the Little Rock Nine were set up in the school. He described how he was not with any of the Little Rock Nine students due to the alphabetization of their last names that separated them among homerooms. In fact, Dr. Roberts recounted how they were not Little Rock Nine, they were Little Rock One, nine times:

The homeroom assignment determined your class schedule, and because our names were alphabetically disparate, we were not together at all during the year. In fact, you might think of us not so much of the Little Rock Nine, but the Little Rock One, nine times.

QUESTION OF INTENTIONALITY:
CHANGE AGENT OR STATUS QUO SUPPORTER
WITH REGARD TO RESILIENCE AND FINDING BALANCE:
STRATEGIES FOR RESPONDING TO DEEPLY EMBEDDED SOCIAL ILLS

One of the most important factors that promotes resilience among young people is a relationship with one caring adult growing up (Carr, 2011). It was terrifying to hear Dr. Roberts describe how he was completely on his own in a hostile environment. Rather than have the support of his Little Rock peers, Dr. Roberts had to quickly learn how to navigate a dangerous system on his own. He shared:

. . . which [being Little Rock One, nine times] made it even more difficult because sometimes you know when you are in a situation and you have a backup or two or three of you together, it makes a little easier to deal with the stuff that you face.

Recent literature has examined resilience as a dynamic process that interacts with the surrounding environment. Examining resilience from a sociocultural perspective allows us to determine the extent to which the individual's interaction with the surrounding context promotes coping (Clauss-Ehlers & Wibrowski, 2007). In the face of utter aloneness and aggression, Dr. Roberts shares how contextual factors gave him strength to cope with the situation, understanding it for what it was:

Dr. Clauss-Ehlers: It is just very humbling to hear your experience. And also, you were talking about being in this other school where you could feel the commitment from the teachers. And then this shift in transition and I guess I'm wondering, and this relates to our question: How did this experience or how did this transition have an impact on your identity given that this is all going on during your adolescence?

[AU8] *Dr. Roberts:* Well, given my family background, I was able to put it in context very quickly because I had learned at home, from my mom, especially, that none of the stuff that was happening around me and would happen to me as I left home had anything to do with my identity. None of that stuff defined who I was or who I was becoming. So I was pretty secure with that. My sense of self was intact. I understood that teachers at Central High would not be as involved and concerned about my learning or my welfare or anything else. But I was surprised to find such a range in terms of the teachers at Central. And they ranged along a continuum from many who hated us with obvious vile passion, and those at the other end who are willing to help as far as they could, although their voices were practically mute, because they were under

heavy social pressure from their own peers and from the community. But I did not find in terms of my own personal growth and development, nothing got in the way.

Lessons learned from being resilient when confronted with the status quo include: (a) maintain an awareness of sense of self through connections with loved ones; (b) do not internalize hostile external messages, rather, view them as not belonging to you but to the individual who is saying them; (c) seek out at least one caring adult or supportive relationship; (d) seek solace from community systems that support well-being; and (e) work to maintain a balance.

UNDERSTANDING CONTEXT AND INTENTIONALITY IN THE FACE OF THE STATUS QUO: TURNING UP THE OUTRAGE UPON SEEING THE PLAYING FIELD FOR WHAT IT REALLY IS

In the spirit of honest reflection, Dr. Roberts wondered if the current generation of students and professionals have fallen asleep at the wheel or lost momentum in the fight for equity and justice. Numerous current-day and well as past incidences of racial tensions are responded to with voices from a few and with the collective silence of the greater group. Dr. Roberts raised several questions, including: To what degree has today's generation been medicated into inaction? What intrapersonal and external variables account for the level of inaction that seems apparent?

Seeing the playing field for what it was and feeling empowered to do something about it other than retreat, the Little Rock Nine turned their outrage into constructive nonviolent approaches to systemic racism. How can today's generation of students and professionals feel empowered to take active and progressive stances against injustice? Just as Dr. Roberts derived strength from the teachers and elders of his community, who are the elders from whom the current generation of students and professionals can learn to be intentional in accordance with the traditions of the Little Rock Nine? These and related questions deserve answers.

REIMAGING THE LANGUAGE WE USE AS A WAY OF RESISTING ENCAPSULATION

Language refers to those systems and symbols that allow communities to communicate with one another. Given that language represents the ways in which individuals in a community speak with one another, culture is an inherent aspect of any language system (Clauss, 1998). For instance, in Spanish, rather than saying "I" with a capital *I*, the word for I is "yo" with a lowercase *y*. Here, language appears to reflect collective rather than individualistic cultural values. The *I* isn't so valued in Spanish that it is given an uppercase letter (Clauss,

1998). In contrast, the U.S. “I” is a capital *I*, suggesting a culture that focuses on the individual.

Consider the expressions “America is the melting pot of the world” or “let’s all work to level the playing field.” Imagine for a moment a box of Crayola crayons placed in a slow burning wok. Gradually, each crayon loses its essence as a prerequisite to becoming part of a new substance and form. In a similar way, to what degree do immigrant populations, as one example, buy into the notion that the price of the ticket to become fully American and enjoy the resultant benefits demands losing the essence (e.g., culture, customs, traditions) of who they are? On a related note, to what degree do American citizens knowingly or unknowingly collude in the promotion of the losing-your-essence perspective by continuing to believe in and articulate the melting-pot image? What costs—emotional and otherwise—are incurred when these beliefs are put into action?

The level-the-playing-field image comes with the assumption that leveling the playing field is a universally desired goal—and perhaps it is. But, what if it is not? To what degree does this proposed goal of leveling the playing field fail to consider that existing systemic and structural political, social, and economic forces are put in place to thwart the accomplishment of equity for one and all?

Similarly, Dr. Roberts discusses how language can trap us into certain images. He encourages us to be aware of the language we use so that we are not victims of it and so it does not perpetuate “images in the minds of people that this is the norm” (T. Roberts, personal communication, September 4, 2015). Shared Dr. Roberts:

Well, I think one of the first things we do is get rid of that language of marginalized communities because it tends to underscore, verify, and create images in the minds of people that this is the norm. I think we have to simply talk about are we as a group of people able and willing to adjust who we are in ways that make living healthy, positive, growth-producing for all people. When you really think about it, we are almost victims of our own language because we keep using it all the time.

**QUESTION OF INTENTIONALITY:
CHANGE AGENT OR STATUS QUO SUPPORTER
WITH REGARD TO REIMAGING THE LANGUAGE
WE USE AS A WAY OF RESISTING ENCAPSULATION**

The focus of this question of intentionality asks how we can engage in a symbolic linguistic system that does not perpetuate societal ills. What kind of linguistic structure will provide us with an honest appraisal of human interaction? How does the language we use, which reflects the culture in which we live, support the status quo? How is intentionality applicable to our ability to reassess the language we use so that we have a new and deeper meaning attached to it?

Dr. Clauss-Ehlers: I guess I wanted to hear more about just what your thoughts are about language and what that means for us.

Dr. Roberts: Oh sure. That is going to be essential as we go forth as a nation. If we are unable to figure out how to use the language that we have, and I must admit we are trapped by the language. . . In fact, that brings up another issue. We are so sold on the rightness of who we are, that we think that English is the only valid language in the universe. Let's just throw that in. But at some point, we have to figure out how to use this English language in a way that allows for each voice to be heard and listened to. I don't know how we do that, but I do know we have to do it. I do know also that as I listen to the language, I can hear very clearly the words and phrases that are used to prop up the current status quo. We use words in terms of like diversity and race relations as if these things have meaning. They really have no meaning.

Interestingly, the Merriam-Webster dictionary definition of *encapsulation* is "To enclose in or as if in a capsule." An unawareness of language puts us at risk of protecting ourselves through placement in a "capsule." Such was the inside of Little Rock Central High School—the capsule in which Dr. Roberts had to negotiate to survive. Reimagining a history of language is beyond the scope of this paper. Nevertheless, preliminary strategies applicable to getting out of the capsule include: (a) becoming aware of connections between culture and language spoken by self and others; (b) rather than take language for granted, exploring how key phrases, whether colloquial or professional, reflect encapsulation; (c) encouraging clients to name their experience, and developing a language that reflects their lived reality; and (d) contributing to the profession through research, training, and practice that supports an inclusion of voices.

"CHOICE AS KEY TO GOOD MENTAL HEALTH"

An important intentionality theme is Dr. Roberts's contention that "choice is a key to good mental health" (T. Roberts, personal communication, September 4, 2015). Implicit theories, or "mindsets," refer to "beliefs about how much people can change their attributes" (Schroder, Dawood, Yalch, Donnellan, & Moser, 2015, p. 120). Entity theories tend to view self-attributes as fixed and unchanging. Biological factors are usually considered the cause of self-attributes for entity theorists. On the other hand, incremental theory states that self-attributes are viewed as malleable and able to grow and improve. Incremental theorists view self-attributes as being connected to motivation and environmental circumstances. For the former, mistakes and taking calculated risks are unwanted and considered threatening. In contrast, for the latter, mistakes are regarded as ways to learn and grow (Schroder et al., 2015). Dr. Roberts related the concept of choice to positive mental health outcomes during the following interview segment:

Dr. Parham: Something so simple, yet so profound I think it does speak to your assertion and your longtime observation about how we have trapped ourselves. And we continue to collude with being trapped and not asking in a curious way: Do we really want to get out of this trap? From what you are saying, I can glean that we really have not failed at moving ahead. We really have succeeded at staying stuck.

Dr. Roberts: I think you are right. Years ago, I wrote a paper about choice. And I entitled the paper, *Choice as a Key to Good Mental Health*. And once we understand choice and the fact that we have choice, and we always make choice, in that we never do “not” choose. So we are always choosing. And it is pretty clear to me that we have consistently chosen a certain direction. And that is problematic because the rhetoric suggests we are going in one way, but the reality shows us that we are going in quite another way altogether.

Dr. Roberts’s view is reflected in current research. Those research participants who prescribed to an incremental view reported fewer mental health symptoms, cognitive reappraisal, and a tendency to choose therapy over medication. Hence, self-appraisal that reflects an incremental approach suggests a reduction in mental health problems. Through an intentional approach, the finding “that implicit theories are associated with symptom severity raises the distinct possibility that changing implicit theories more toward incremental beliefs may lead to reductions in symptoms” (Schroder et al., 2015, p. 134).

**QUESTION OF INTENTIONALITY:
CHANGE AGENT OR STATUS QUO SUPPORTER
WITH REGARD TO CHOICE AS KEY TO GOOD MENTAL HEALTH**

Implicit theories present interesting implications for questions of intentionality. Considering research that indicates a connection between malleable self-appraisal and better mental health outcomes, what are the ways that we can explore how introducing an incremental approach can support making choices that support positive mental health outcomes (Walton, 2014)? Three strategies are to conduct research that explores connections between implicit theories and psychological distress; develop evidence-based interventions based on findings from research on the incremental approach; and engage in clinical work that encourages people to consider the choice they have through an understanding of incremental theory.

**SELF AS A BASIC INTERVENTION TOOL IN EDUCATIONAL,
MENTORING, AND CLINICAL RELATIONSHIPS:
BIDIRECTIONAL BENEFITS**

“To whom much is given, much is required” (Luke 12:48, New King James version) is a biblical mantra that best captures a theme that emerged from

Dr. Roberts's interview. He very clearly asserts his awareness and recognition of decisions made by his parents and multiple professionals who, as a result of the racial turbulence of the time, were forced to work below their level of education, abilities, and talents. Their decision to use their educations, talents, and survival energy in constructive ways directed at teaching African American youth how to make it in a troubled world did not go unnoticed by Dr. Roberts and his classmates. As a way of honoring their elders for demonstrating the moral imperative of responding to social ills in constructive ways, the Little Rock Nine embraced their elder's teachings, understood the intrapersonal strength they possessed, and translated their lessons learned into strategies for their own success. The cocreated, bidirectional benefits of working within and across generations were clearly apparent to the youth and their elders.

Dr. Roberts's life example presents a call of intentionality for students and the profession. At any moment, and in our work with students, clients, organizations, communities, and one another, we are privileged to teach, respond, engage, and perhaps the most powerful—listen. Just by being intentional in the moment, we can better understand those with whom we work. Alternatively, by being heard and engaged, it is hoped that those with whom we work can become intentional in ways that better their lives, the lives around them, and the relationships in which they are engaged, or seek to be engaged. This is not unlike the Carl Rogers' (1961, 1989) notion of investing in an understanding of human relationships that he discusses in his book *On Becoming a Person: A Therapist's View of Psychotherapy*. According to Rogers (1961, 1989):

There is one final reason for putting out this book, a motive which means a great deal to me. It has to do with the great, in fact, the desperate, need of our times for more basic knowledge and more competent skills in dealing with the tensions in human relationships. Man's awesome scientific advances into the infinitude of space as well as the infinitude of sub-atomic particles seems most likely to lead to the total destruction of our world unless we can make great advances in understanding and dealing with interpersonal and intergroup tensions (p. 000).

**BE HISTORICAL IN YOUR THINKING:
THE TRUTH ABOUT THE PAST WILL SET YOU FREE**

Dr. Roberts's acknowledgment of the support, lessons, and benefits derived from infusion by elders of a can-do spirit into him and his eight classmates is evident. The care, concern, and protection shown by his elders stands out as a seminal ingredient that fueled the readiness of the Little Rock Nine to engage a situation that knowingly was going to test him in ways he had yet to fully imagine. The implications for elders and seasoned professionals to teach, mentor, guide and push aspirants to the profession are unmistakable.

The call to the professional community relative to working with students and early career professionals is illuminated in the mantra "each one, teach

[AU10] one” (Bornsheuer-Boswell, 2014; Ferguson, Ritter, DiNitto, Kim, & Schwab, 2005). Students and early career professionals are encouraged to learn about their personal histories as well as the back-in-the-day realities with which older, more seasoned professionals had to contend. Importantly, learning specifically about the tools, including psychological and emotional, used by elders and more seasoned professionals to successfully navigate the challenges they were presented with seems especially relevant. Midcareer professionals can also provide a link to this work—connecting their mentors, many of whom may be elders, with early career professionals and students.

We hereby invite the professional community to use lessons learned as a motive and to use a pay-it-forward approach to reach back and pull a student or early career professional forward with encouragement to do the best of which they are capable (Brey & Ogletree, 1999). We invited students and early career professionals to seek out the wisdom and wise counsel of elders, whether family or professionals, paying particular attention to ways they developed skills related to seeing the big picture, strategic planning, identifying resources, goal setting, task completion despite the presence of adverse obstacles, and self-regulation. Finally, we invite mid-career professionals to provide linkages between students/early career professionals and elders; to become actively involved in mentoring students and early career professionals, recruiting potential talent to the mental health profession; and to themselves engage in ongoing connections with elders so that knowledge and skills can be shared across professional generations.

conclusion

Endings represent beginnings! As this narrative comes to a close, some final observations bear mentioning. We have experienced a renewed excitement and an emotional reboot relative to the social justice and human rights work which frames much of our respective professional practices. Every story has a person, and every person has a story. Listening to the story and lived experiences of Dr. Terrence Roberts, and considering what we have learned as a result of our respective experiences across teaching, service, practice, consultation, administrative, and scholarship domains, two reminders have been triggered. First, we are reminded about the importance of continuing to take risks relative to advancing difficult conversations and dialogues about the intersections of the systemic and structural features of local, regional, and national social, political, economic, and legal domains with culture, race, ethnicity, sexual identity, ability, religion, and other dimensions of identity under the umbrella of multiculturalism. Second, we are reminded about the ever-present struggle embedded in addressing social ills. There is no easy fix for significant social challenges, especially those rooted in legacies of privilege and have-and-have-not philosophies.

It has been many years since that fateful day in the fall of 1957 when the lives of the Little Rock Nine, their surrounding communities (both supportive and

unsupportive), and American citizens were forever changed. At the end of the school year, Dr. Roberts reported that he, his Little Rock Nine comrades, and quite likely the surrounding communities, experienced a sense of relief that the daily tensions could now subside. Tensions never did subside to the degree for which they hoped. They manifested in other forms and arguably continue to the present day.

In hindsight, the continued presence of tension provided the necessary fuel for continuing the fight for equity and justice. Perhaps the juxtaposition of violence with nonviolence represents the yin and yang of human rights and social justice work. Each side draws meaning for their work from the very force that opposes them. Can one force exist without the other? And, is the fight for justice and equity an ongoing and necessary catalyst for growth activated predictably by the generation-driven zeitgeist of the time?

The psychological toll and high emotional cost paid by Dr. Roberts and his classmates for engaging in their life-altering work remains evident. Distance in the form of years away from the day-to-day horrors of 1950s racial turbulence does not, in itself, erase the painful and sometimes traumatic memories seared into their hearts and minds. Time does not heal all wounds. It is what you do with the time that you have that heals all wounds. The enormous pride the Little Rock Nine felt having accomplished their goal of desegregation and attending Central High is a feeling from which Dr. Roberts continues to draw emotional nourishment (T. Roberts, personal communication, September 4, 2015). Dr. Roberts engages in an intentional daily practice of self-care. He continues to surround himself with supportive friends and colleagues. Teaching, consultation, and scholarship opportunities represent must-do, goal-directed activities that are in tune with and attentive to emerging intersections of social, political, and economic challenges. The fight for human rights social justice is a lifelong journey (Gandhi, 1951; King, 1963; Roberts, 2009, 2010; Rogers, 1961, 1989).

In like manner, the importance of finding multiple ways to engage in self-care on a daily basis cannot be overstated. Promoting teaching, service, consultation, and scholarship for persons not able to advocate for themselves comes with a price that can only be paid for by daily investments in self-care activities. There is no lack of complex, delicate, and sensitive issues across political, social, economic, legal, and other domains with which to grapple and resolve. Relatedly, there are abundant ways to exercise self-care, and the benefits derived from adopting self-care as a lifestyle option are tremendous.

The interview with Dr. Terrence Roberts proved to be the sounding of a metaphorical alarm clock. When an actual alarm clock comes on, whether in the morning, noon, or night, two options are presented for consideration. Option 1 is to hit the snooze alarm and go back to sleep. Option 2 is to turn off the alarm, get out of bed, and get “into the mix” of the upcoming day’s activities determined to meet the opportunities as well as likely challenges with quiet confidence and a sense of resolve. What choice will you make?

references

- Adams, R. (February 21, 2008). Nine children face an angry town. *Adventist Review*. Retrieved from <http://archives.adventistreview.org/article/1663/archives/issue-2008-1505/nine-children-face-an-angry-town>
- Arkansas: The Natural State. (2015). *Central High*. Retrieved from <http://www.arkansas.com/attractions/central-high/>
- [AU12] Benishek, L. A., Bieschke, K. J., Park, J., & Slattery, S. M. (2004). A multicultural feminist model of mentoring. *Journal of Multicultural Counseling and Development*, 32, 428-442.
- Bogardus, E. S. (1947). Measurement of personal-group relations. *Sociometry*, 10, 306-311.
- Bogardus, E. S. (1958). Racial distance changes in the United States during the past 30 years. *Sociology and Social Research*, 43, 127-135.
- Brey, R. A., & Ogletree, R. J. (1999). Faculty-graduate student mentoring: Implications for health education. *Journal of Health Education*, 30, 24-29.
- Brown v. Board of Educ., 347 U.S. 483 (1954).
- Carr, A. (Ed.). (2011). *Positive psychology: The science of happiness and human strengths* (2nd ed.). New York, NY: Routledge.
- Clauss, C. S. (1998). Language: The unspoken variable in psychotherapy practice. *Psychotherapy: Theory, research, practice, training*, 35, 188-196.
- Clauss-Ehlers, C. S., & Carter, R. T. (2005). Current manifestations of racism: An exploratory study of social distance and White racial identity. *Journal of Social Distress and the Homeless*, XIV, 261-285.
- Clauss-Ehlers, C. S., & Carter, R. T. (2006). White American attitudes in interracial situations: An empirical examination of perceived behavioral options and White racial identity. *Journal of Social Distress and the Homeless*, 15, 117-139.
- Clauss-Ehlers, C. S., & Wibrowski, C. (2007). Building resilience and social support: The effects of an educational opportunity fund academic program among first- and second-generation college students. *Journal of College Student Development*, 24, 574-584.
- Fanon, F. (1963, 2005). *The wretched of the earth*. New York, NY: Grove Press.
- Ferguson, M., Ritter, J., DiNitto, D. M., Kim, J., & Schwab, A. J. (2005). Mentoring as a strategy for welfare reform. *Journal of Human Behavior in the Social Environment*, 12, 165-183.
- Gandhi, M. M., & Desai, M. (1957). *Gandhi: An autobiography—The story of my experiments with truth*. Boston, MA: Beacon Press.
- Garcia, G. E., Lewis, R., & Ford-Robertson, J. (2015). Laws limiting Black-White marriage: A longitudinal analysis of perceptions and related behaviors. *Journal of Black Studies*, 46, 199-217.
- King, Jr., M. L. (1963). *Strength to love*. Minneapolis, MN: Fortress Press.
- Merriam-Webster.com (2015). *Encapsulate*. Retrieved from <http://www.merriam-webster.com/dictionary/encapsulate>

Parham, W. D., & Clauss-Ehlers, C. S. (2016). Celebrating our elders who led us across the bridge: A call to action for the academy. *Journal of Multicultural Counseling and Development, 44*, 4–27.

Plessy v. Ferguson, 163 U.S. 537 (1896).

Roberts, T. (2009). *Lessons from Little Rock*. Little Rock, AR: Butler Carter Books.

Roberts, T. (2010). *Simple not easy: Reflections on community social responsibility and tolerance*. Little Rock, AR: Parkhurst Books.

Rogers, C. (1961, 1989). *On becoming a person: A therapist's view of psychotherapy*. New York, NY: Houghton Mifflin Press.

[AU13] Sachs, P.S. (2012). *Languages of intentionality: A dialogue between two traditions on consciousness*. London, England: Continuum International Publishing Group.

Schroder, H. S., Dawood, S., Yalch, M. M., Donnellan, M. B., & Moser, J. S. (2015). The role of implicit theories in mental health symptoms, emotion regulation, and hypothetical treatment choices in college students. *Cognitive Therapy and Research, 39*, 120–139.

Walton, G. M. (2014). The new science of wise psychological interventions. *Current Directions in Psychological Science, 23*, 73–82.

01Author Query List JMCD0416 Ehlers

Author: Your article has been edited for grammar, consistency, and to conform to ACA and APA journal style. To expedite publication, we generally do not query every routine grammatical or style change made to the manuscript, although substantive changes have been noted. Note, the issue is not finalized, so page numbers of your article may change. Pay careful attention to your tables (if any) and proof carefully as information has been re-keyed and edited for APA tabular style. Please review article carefully and provide answers to the following specific queries:

- [AU1: Please verify all author information. Author bio should reflect affiliation at the time this article was written as well as current information for all authors.]
- [AU2: Okay as edited?]
- [AU3: There is no corresponding citation for this reference in the reference section. Please provide a complete reference per APA style.]
- [AU4: Please provide page number for this quote from this original reference.]
- [AU5: This quote seems incorrect here. Please advise.]
- [AU6: Are the underlined parts of this quote okay as edited?]
- [AU7: Should this be “had”? Please clarify.]
- [AU8: Okay as edited? I changed “for” to “from” here.]
- [AU9: Please provide page number of the original reference on which this quote appears.]
- [AU10: There is no corresponding citation for this reference in the reference section. Please provide a complete reference per APA style.]
- [AU11: Do you mean “1957” here? If not, please provide missing reference for “Gandhi, 1951.”]
- [AU12: There is no in-text reference for this entry within the article. Please indicate where an in-text reference should appear, or indicate if this reference should be deleted from the list.]
- [AU13: There is no in-text reference for this entry within the article. Please indicate where an in-text reference should appear, or indicate if this reference should be deleted from the list.]