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A Personal Counseling Experience for Master's Level Counseling Students: Practices and Perceptions of Counselor Education Program Directors

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A Personal Counseling Experience for Master's Level Counseling Students: Practices and
Perceptions of Counselor Education Program Directors

A Dissertation

Submitted to the Graduate Faculty of the
University of New Orleans
in partial fulfillment of the
requirements for the degree of

Doctor of Philosophy
in
Counselor Education

by

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M.Ed., University of New Orleans, 1998

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DEDICATION

This dissertation is dedicated to my husband Paul and my children Katherine and Marshall. The three of you are the center of my universe and I am grateful to have all of you to go through this life with. Thank you for allowing me to keep moving forward. I will love you forever.

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The completion of this dissertation took the love, support, and mentoring of a number of individuals. Throughout this process I have come to realize how fortunate I am to be surrounded by people who had a vested interest in helping me move forward.

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ABSTRACT

There exists a strong endorsement in the literature of the effectiveness of an individual counseling experience as an influence in the personal and professional development of counseling students, yet few counselor education programs seem to require that students complete such an experience. Thus, the question arises as to why the required individual counseling experience as a client is not being required by a large proportion of counseling programs.

The purposes of this descriptive, exploratory study were to determine the prevalence of the required experience as a client in individual counseling, examine the opinions of counselor education program leaders regarding the risks and benefits of experiential training components, determine the modalities used to deliver experiential training components, obtain counselor education program coordinators' views on the various modalities, and explore policies and procedures used in counselor education programs with respect to experiential training components. Finally, this study attempted to determine the level of satisfaction of those program directors who do utilize a required individual counseling experience, as well as their policies and procedures with regard to outcome measurement.

Results of the study showed that there were some significant inverse relationships between counselor education program directors' opinions regarding potential benefits for counseling students and their policies regarding a required individual counseling experience. Additionally, although respondents did not strongly endorse the potential risks associated with the exercise, it is still not required by the majority of the counselor education programs surveyed. However, those program directors who do endorse a required individual

counseling experience reported on its many benefits, and offered qualitative insights into how the requirement is implemented.

The results of this study have implications for the counseling profession by offering empirical evidence regarding the prevalence of a required individual counseling experience for master's-level counseling students. The results of this study contribute to the counseling profession's knowledge base by determining counseling program directors' opinions of the potential benefits and risks of a required individual counseling experience, and by establishing that program directors whose programs require this exercise are overwhelmingly satisfied that the experience accomplishes the purposes for which it is intended.

CHAPTER ONE

INTRODUCTION

In Chapter One, the rationale is introduced for the investigation of counselor

preparation program coordinators/chairs/heads/directors regarding their opinions, modalities,

and policies and procedures for delivering experiential learning to master's level students

through a required individual counseling experience. A background for this study and a

conceptual framework are presented. Included are an overview of experiential learning, the

relevance of experiential learning in the acquisition of core counseling objectives, and the

individual counseling experience as it relates to personal and professional development of

counselor trainees. The significance and purpose of this study are stated and research

questions are identified. Terms specific to this study are defined and limitations,

delimitations, and assumptions are addressed.

Background

 Experiential educators believe that knowledge is acquired through process rather

than by simply understanding content; that is, through direct interaction with the

phenomenon being studied. Those who endorse experiential education espouse that learning

will be more effective if the learner is as involved as possible, and that this involvement is

maximized if the student has something that matters at stake (Crosby, 1981).

With regard to higher education, specifically counselor preparation, the role of prior

experience and knowledge must be taken into account in order to promote learning on a

higher order level. Transformative learning (Mezirow, 1997), which is defined as learning

that occurs as a person forms and reforms meaning based on prior experience, is similar to

the change in perspective that is the goal of counseling. Given the developmental and humanistic perspectives that drive many counselor education programs, and given that counseling is concerned with facilitating change, goals, and values, transformative learning may be congruent with the counselor education philosophy (Hoshmand, 2004).

The Council for the Accreditation of Counseling and Related Programs (CACREP) accredits counseling programs at both the master's and doctoral levels (Bobby & Kandor, 1992). This accreditation includes core curriculum requirements within six counseling specialties that are set in place to graduate competent counselors, and to protect the public as well as the counseling profession. Personal growth, personal development, and self-care are included in CACREP's mandates; however, specific implementation methods are not addressed in the CACREP standards.

Experiential learning is a required and viable learning strategy in counselor education, and generally is satisfied through an academic group counseling experience. In experiential group counseling, students are asked to openly engage in a meaningful way and are assessed as to their interpersonal effectiveness (Merta & Sisson, 1991). However, this requirement is not without its ethical concerns, due to the gate keeping function that faculty must serve when combining academics with the self-growth requirement involved in experiential learning (Remley & Herlihy, 2010). Additional conflicts regarding student participation include privacy issues, the potential for dual relationships among students, and student concerns about having their participation evaluated and criticized by others (Anderson & Price, 2001).

An experience as a client in individual counseling has been found to be influential in the acquisition of personal growth, personal development, and self-care of counseling

students, and is heavily endorsed in the literature (Bemack, Epp, & Keys, 1999; Corey &

Corey, 2007; Dearing, Maddox, & Tangney, 2005; Fouad & Hains, 1990; Gilroy, Carroll, &

Murra, 2002; Grimmer & Tribe, 2001; Guy, Stark, & Poelstra, 1988; Kline, Falbaum, Pope,

Hargraves, & Hundley, 1997; McEwan, & Duncan, 1993; Murphy, 2005; Norcross, Bike,

Evans, & Schatz, 2008; Osborn, Daninhirsch, & Page, 2003; Rizq & Target, 2008; Williams,

Coyle, & Lyons, 1999). A considerable body of literature exists that endorses an individual

counseling experience as a client as a requirement in counselor preparation programs (Corey

& Corey, 2007; Dearing Maddux, & Tangney, 2005; Farber, 2000; Fouad & Hains, 1990;

Leech, 2007; Norcross, 2000; Norcross, Bike, Evans, & Schatz, 2008; Osborn, Daninhirsch,

& Page, 2003), yet few counselor preparation programs seem to mandate an individual

counseling experience for their students.

Empathy, which is considered the core construct of the counseling profession, is

included in nearly all theoretical approaches, and it has been suggested that the ability to

understand the client's feelings is best learned experientially (Elliott & Partyka, 2005; Pagell,

Carkuff, & Berensen, 1967; Rogers, 1975). Experiential processes have also been shown to

increase sensitivity and raise awareness concerning multicultural issues (Kim & Lyons, 2003;

Merta, Stringham, & Ponterotto, 1988; Pope-Davis & Coleman, 1997; Roysircar, Sandhu, &

Bibbins, 2003), as well as strengthen professional identity (Auxier, Hughes, & Kline, 2003;

Barnett & Cooper, 2009; Bruss & Kopala, 1993; Cook, 1999).

Wellness, impairment, and burnout among counseling professionals are documented

in the literature (Barnett & Cooper, 2009; Gilroy, Carroll, & Murra, 2002; Lawson, 2007;

Lawson, Venart, Hazler, & Kottler, 2007; Norcross, Dryden, & DeMichele, 1992;

O'Connor, 2001; Pope & Tabachnick, 1994; Stadler, Willing, Eberhage, & Ward, 1988;

Venart, Vassos, & Pitcher-Heft, 2007; Watkins, 1983), and they have long-reaching effects for the public as well as the profession. Personal therapy is a viable and regenerative option for counselors to address self-care and self-awareness that are necessary components for counselor fitness.

Counselor education programs can have an impact in the prevention of counselor impairment. Through their methods of instruction, program directors can exert a substantial influence on the attitudes and behaviors of counseling students (Norcross, Evans, Bike, & Schatz, 2008; Westwood, 1994). Requiring an individual counseling experience for master's level counseling students may foster the personal and professional growth mandated by CACREP.

Conceptual Framework

The goal of experiential education is to understand the process by which knowledge is attained rather than to learn facts. It combines direct experience that is meaningful to the student with guided reflection and analysis, and is best described as a series of relationships: the learner to self, the learner to teacher, and the learner to the learning environment (Proudman, 1992).

According to the educational theorist John Dewey (1938), experience is the foundation for everything in life, and the goal of experiential education is to understand the thought process by which we look at our experiences. Rather than a transfer of knowledge, experiential education is concerned with learning that takes place within a social environment; that is, real life experiences that are organized and facilitated by the instructor.

American sociologist Kurt Lewin (1947) drew from Dewey's theory of experiential learning (1938) in his studies of group dynamics which emphasized active participatory

learning. Lewin's *action-research* method was concerned with undertaking action and studying the action that takes place within the realm of intergroup relations. Experientially, Lewin hypothesized that in order to generate solutions to social problems, one must experience tension in immediate concrete experiences.

Perhaps one of the most well known educational theorists, David Kolb, derived his experiential learning model from Lewin. Kolb (1984) defined learning as an essential lifelong task, and introduced the cycle of learning in which the learner reflects on a concrete experience, finds meaning, draws conclusions through reflection and discourse, and tests these conclusions, which then lead to new experiences. The two continuums of concrete-abstract and reflective-active are the core of Kolb's model, which is regarded as a classical foundation for experiential learning (Meittinen, 2000).

To understand the process of experiential learning for counseling students, it is necessary to examine the context of the adult learner, whose prior knowledge and differing processes of learning must be taken into account. Experiential learning has been shown to increase critical thinking skills, a necessary component of higher education (Kreber, 2001). It is important for higher education students to immerse themselves in experiences they may practice and to be able to create meaningful learning inclusive of prior experience (Fiddler & Marienau, 2008). Experiential learning in higher education was also examined in the work of Mezirow (1997) whose theory of *transformative learning* stated that learning occurs as a person forms and reforms meaning based on prior experience. Mezirow also hypothesized that it is the obligation of higher education to facilitate understanding rather than provide it.

In counseling, it is expected that the client will learn from examining prior experiences and transforming these experiences into new learning. Transformational

education is associated with change in worldview as well, resulting in shifts of prior ways of thinking. Thus, experiential education appears to be a natural fit for counselor education, and the literature supports counselor educators requiring students to have an experience as a client in an individual counseling format. This literature is discussed in detail in Chapter Two.

Purpose of the Study

Individual personal therapy has been shown to be influential in the acquisition of personal development, self-exploration, and self-growth, all key experiential training components mandated by the American Counseling Association (ACA, 2005) and the Council for Accreditation of Counseling and Related Programs (CACREP, 2009). Despite a significant body of literature that endorses the benefits of an individual counseling experience as a client for students, the experiential component is typically satisfied through an academic group training format. Although individual counseling has been shown to be effective in the fostering of personal and professional development expected of master's students, many counselor education programs do not require students to complete an experience as a client in individual counseling. There appears to be a discrepancy between what is endorsed in the literature as a viable training exercise and what is being required by many counselor education programs.

The purposes of the study are to determine the prevalence of the required experience as a client in individual counseling, examine the opinions of counselor education program leaders regarding the risks and benefits of experiential training components, determine the modalities used to deliver experiential training components, obtain counselor education

program coordinators' views on the various modalities, and explore policies and procedures used in counselor education programs with respect to experiential training components.

Significance of the Study

There exists a strong endorsement in the literature of the effectiveness of an individual counseling experience as an influence in the personal and professional development of counseling students, yet few counselor education programs seem to require that students complete such an experience. Thus, the question arises as to why the required individual counseling experience as a client is not being required by a large proportion of counseling programs. Findings of this study may be significant for counselor educators and for the counseling profession. If the benefits of a required individual counseling experience for master's level counseling students can be identified or if these benefits are strongly endorsed, perhaps more counselor education program coordinators/chairs/heads/directors will consider implementing this requirement. Also, if the risks of a required individual counseling experience for master's level counseling students can be identified or if these risks are strongly endorsed, perhaps counselor education coordinators/chairs/heads/directors can implement strategies to minimize the risks. For those counselor education programs that are considering implementing a required counseling experience for master's level counseling students, the results of the study can identify the modalities that are used in programs that do have the requirement and are satisfied with the outcomes. And finally, for those counselor education programs that are considering implementing a required counseling experience for master's level counseling students, the results of the study can help to identify modalities that are used in programs that have the requirement but are not satisfied with the outcomes.

Research Questions

This study attempted to answer the following research questions.

1. What are the policies and procedures of counselor education programs regarding a required individual counseling experience?

2. What are the modalities used to deliver experiential training in counselor education programs?

3. Is there a relationship between how strongly program coordinators endorse the benefits of the required individual counseling experience as a client and their programs' policies and procedures with respect to requiring the experience?

4. Is there a relationship between how strongly program coordinators endorse the risks of a required individual counseling experience and their policies and procedures with respect to requiring the experience?

5. Is there a difference between CACREP accredited and non-CACREP accredited counselor education programs with respect whether or not they require master's level counseling students to complete an individual experience as a client?

6. Is there a difference between program coordinators of CACREP accredited and non-CACREP accredited programs with respect to how strongly they endorse the benefits of a required individual counseling experience?

7. Is there a difference between program coordinators of CACREP accredited and non-CACREP accredited programs with respect to how strongly they endorse the risks of the required individual experience as a

client?

8. For counselor education programs that do not require the RICE, what are
   the reasons for this decision?

9. For counselor education programs that do require the RICE, how many
   sessions are required, how is this experience documented, and how are the
   outcomes measured?

Limitations and Delimitations

According to Creswell (2003), there are limitations in quantitative research such as potential weaknesses or problems in relation to data collection and analysis. One potential limitation of this study involves the availability of counselor training programs that require an individual counseling experience for master's level counseling students, as it is assumed that many programs do not have this requirement. Another limitation is that counselor preparation program coordinators/chairs/heads/directors will self-select to participate in the study, and may differ from those who do not participate. Additionally, perceptions of the significance of a required individual counseling experience for master's level counseling students will be just that, participants' perceptions. Perceptions can change over time, and participants may have responded differently if surveyed at other times. The reliability and validity of the instrument may be a limitation as well, as there has been no prior use of the instrument. The researcher attempted to minimize this limitation through the use of an expert panel to establish face validity and to identify any items that may be unclear.

Delimitations are the restrictions or bounds set by the researcher to narrow the scope of the study (Creswell, 2003). The main delimitation in this study is that only counselor education program coordinators/chairs/heads/directors will be surveyed; therefore the results

may not be representative of the views of all counselor education faculty. Due to differences in academic and experiential training requirements across mental health disciplines, this research study is delimited to findings for the profession of counseling and therefore cannot be applied to other mental health professions.

Assumptions

The assumptions that were made with regard to conducting this study included: a) that participants will provide honest and accurate answers when completing the survey instrument, b) that participants who choose to reply to the survey are representative of all counselor preparation program coordinators/chairs/ heads/directors, and c) that the instrument utilized in the study is reliable and valid, and accurately measures the opinions, modalities, and policies and procedures counselor preparation program coordinators/chairs/heads/directors regarding experiential components for the training of master's level counseling students.

Definition of Terms

The following are conceptual definitions of terms used throughout this study.

Burnout: A syndrome characterized by dimensions of emotional exhaustion, depersonalization, and reduced feelings of personal accomplishment.

Empathy: Reading or feeling into the experiences of another person.

Experiential Learning: A process by which the learner is directly involved with the phenomenon being studied.

Impairment: An objective change in a person's professional functioning, resulting in diminished work-related performance.

Individual Counseling: Direct participation in counseling (50-60 minutes per session) as a client with a mental health professional, for the purpose of exploring and/or experiencing the dynamics associated with individual counseling.

Multicultural Competence: Possession of skills necessary to work effectively with clients from various cultural/ethnic backgrounds.

Personal Development: The process of gaining personal insights, increasing awareness, and improving interpersonal communication to enhance counseling skills.

Planned Academic Group Experience: Supervised practice and direct participation in a small group in order to experience group membership, group leadership, and group dynamics.

Professional Identity: The result of mentoring, modeling, and interactions among professionals and professional organizations.

RICE: Required Individual Counseling Experience. A pre-degree experiential exercise whereby a master's level counseling student completes at least three individual counseling sessions as a client with a mental health professional.

Self-Awareness: The understanding of one's thoughts and beliefs as they pertain to internal and external standards and values.

Transformative Learning: Learning that takes place as a person forms and reforms meaning based upon reflecting on prior experience.

Wellness: A level of personal growth and professional competence that is achieved through a series of choices in which mind, body, and spirit are integrated.

CHAPTER TWO

REVIEW OF THE LITERATURE

Introduction

Experiential training components for master's level counselor education students are mandated by CACREP and generally are satisfied through a planned academic group counseling experience. An experience with individual counseling as a client has been found to be influential in the development of personal and professional competencies, yet this experience does not appear to be required in most counselor education programs.

This chapter includes an overview of experiential learning, including models, components and learning styles, and a discussion of the literature regarding the importance of experiential learning in counselor education. Additionally, counselor preparation is examined, including the development of empathy and the group training component, both of which are experiential in nature. Ethical concerns in experiential training are discussed. Finally, the issue of professional identity, including elements of professional development, and how a required individual counseling experience can be relevant, are addressed.

Experiential Learning

How do we know what we know, and how is knowledge acquired? It is the belief of experiential educators that learning has more to do with the *process* rather than arriving at a final, static state. In this process, the learner is directly involved with the realities of what is being studied, and this involvement includes direct interaction with the phenomenon rather than simply conceptualizing it (Keeton & Tate, 1978; Kolb, 1984).

According to John Dewey (1958), who has been described as the most influential educational theorist of the twentieth century (Kolb, 1984), experience is the foundation for everything in life. The goal of experiential education is to be able to understand and use experience, and this is achieved by understanding the thought process by which we examine our experience. According to Wright (2000), Dewey felt that education should be more than a transfer of knowledge from individual to individual, but rather should be a "continuous process of reconstruction in which there is a progressive movement away from immature immediate experience to experience which becomes more pregnant with meaning, more systemic and ordered" (Dewey, 1960, xi). Roberts (2003), in his interpretation of Dewey's experiential learning theory, posited that experience occurs within the social environment, and that knowledge is constructed and based on these experiences. Furthermore, this knowledge should be organized in real-life experiences that provide a context for information. According to Roberts, the teacher's role is to organize this content and to facilitate the actual experiences. In an early study that examined the philosophical foundations of Dewey's theory, Crosby (1981) stated that in the experiential education process, the teacher assists the student in developing and approaching an experience which will result in the student moving from challenge to resolution. Following this resolution comes a processing of the experience so that the learning may be generalized for future use.

Dewey's philosophy of education, as reflected in *Experience in Education* (Dewey, 1938), consists of a number of key concepts. First and foremost, everything occurs in the social environment, and all human experience is social in nature; this involves contact and communication. Dewey argued that education often has not understood the value of the social nature of students, and that scheduling, rules, and procedures can inhibit student

learning. In this vein, Dewey theorized that the social environment affects all other aspects of the educational process. Second, the nature of knowledge is important to Dewey's theory; the experiences of students (predetermined education imposed by outside forces, such as books) typically are irrelevant to knowledge. Dewey theorized that knowledge is what students learn from their experiences, and he encouraged opportunities for students to grasp the relationship between content and real life situations. The teacher's role is critical in Dewey's theory in that it is the role of the educator to facilitate appropriate experiences that engage students. In experiential learning, the teacher is responsible for knowledge of the subject matter, but also for knowledge of the individual learners, and must recognize that the surroundings are conducive to experiences that lead to growth. Learner readiness is also a key component to Dewey's theory, in that the experience must be within the ability of the learner, and the learner must be prepared to learn.

A number of authors have expanded on Dewey's theoretical approach. Joplin (1981) referred to experiential learning as an "action-reflection cycle" (p.21). This cycle is ongoing and ever-building, with the later stages being dependent on the earlier ones. Joplin developed a five-stage model to communicate an experiential action strategy to teachers as they planned their courses. *Focus,* the first stage of the cycle, includes presenting the task and gaining the attention of the student. The second is the *Action* stage which involves the student in a stressful, unfamiliar situation, such as an internship, that requires the use of new knowledge. The *Support and Feedback* stage supports and enables the student to continue to try, and appropriate feedback ensures that the student has enough information to forge ahead. The final stage in Joplin's model is *Debrief,* when the learning is recognized,

articulated, and evaluated. Joplin viewed this stage as sorting and ordering of information, which often involves personal perceptions and beliefs.

Other notable theorists have expanded on the experiential learning theory of Dewey. Kurt Lewin, an American social psychologist, drew from experiential learning in his studies of organizational behavior, specifically in his work on group dynamics and the methodology of action research (Kolb, 1984). Whereas Dewey focused on the impact of experience in learning, Lewin emphasized active participatory learning (Atkinson & Murrell, 1988). A consistent theme in Lewin's work was his concern for the integration of theory and practice; that is, scientific inquiry and social problem solving. Lewin is credited with the "action-research" method, including the T-group (T = training) phenomenon, which grew out of his desire to design a new approach to leadership and group-dynamics training (Lewin, 1947). Nagda, Tropp, and Paluck (2006) stated that Lewin's "full-cycle psychology" (p. 440) approach to action research incorporates the scientific study of social problems, the thoughtful development of solutions to those problems, and the generation of new knowledge from practice. As with Dewey, Lewin discovered that learning is best facilitated in an environment where there is a dialectical tension and conflict between immediate, concrete experience and analytical detachment.

David Kolb, an American educational theorist, derived his experiential learning model from Lewin (Kolb, 1984), and defined learning as an *occupation,* a lifelong task that is essential for personal development and career success. According to Wright (2000), Kolb contributed to experiential learning by introducing the cycle of learning, whereby learning begins with a concrete experience upon which the learner reflects and finds meaning (reflective observation), and draws conclusions (abstract conceptualization) through

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reflection and discourse. The learner then enters a phase of active experimentation in which ideas and conclusions are tested, which ultimately leads to new experiences, and the cycle continues. According to Miettinen (2000), this four-stage model of learning is regarded a classical foundation for experiential learning, and has been widely used in management consultation, leadership training, and research on cognitive processing styles.

At the core of Kolb's model is the relationship of the two continuums of cognitive growth and learning: the concrete-abstract continuum, and the reflective-active continuum. The concrete-abstract continuum, which represents how individuals grasp information from their environments, ranges from a preference for involvement with particular and palpable events, to a preference for detached analysis. The reflective-action continuum, which represents how individuals process the information they have gathered, extends from learners who take a more observational role in learning to those who prefer active participation. Individuals must continually choose, along the respective continuums, how they will gather and process information to resolve the problems and conflicts presented by any learning situation (Atkinson & Murrell, 1988; Caffarella & Barnett, 1994; Kolb, 1984; Kolb & Kolb, 2005; Kreber, 2001; O'Connell & Smith, 2005; Sugarman, 1985; Washborne, 1996).

Kolb (1984) described experiential learning model as the basis for a fourfold taxonomy of learning styles. According to Kolb, *Divergers* prefer concrete learning situations that they can view from a number of perspectives. *Assimilators* prefer reflection and abstract situations and tend not to accept information at face value. *Convergers* prefer to experiment actively with ideas and test the practical relevance of these ideas, and *Accommodators* prefer active involvement in concrete situations. Kolb developed a self-description inventory, the Learning Style Inventory (LSI; Kolb, Rubin, & McIntyre, 1979), to

measure strengths and weaknesses in learners (Sugarman, 1985). This inventory is a nine-item self-description questionnaire, with each item asking the respondent to rank-order four words in a way that best describes his or her learning style. One word in each item corresponds to one of the four learning modes; concrete experience (sample word, *feeling*), reflective observation (*watching)*, abstract conceptualization (*thinking),* and active experimentation (*doing)*. The LSI measures a person's relative emphasis on each of the four learning modes of the learning process.

As a result of these theoretical constructs, experiential learning has taken on meaning in a variety of ways. Proudman (1992) stated that experiential education is not simply learning by doing, as this is not education. He argued that good experiential learning combines direct experience that is meaningful to the student with guided reflection and analysis. Proudman stated that it is this challenging, active, student-centered process that impels students toward opportunities for taking initiative, responsibility, and decision making. Similarly, Warren (1988), in her theory of the student-centered classroom, sees the teacher's role as "challenging in its subtlety" (p.4), whereby the teacher actively facilitates the process either to maximize learning or to keep it from becoming miseducative, or allows the students to struggle with the experience to serve as a didactic lesson.

Adult Learners

For the purposes of this study regarding the experiential learning process for counselor education students, it is important to examine experiential learning in the context of the adult learner. For experiential learning to be effective in this population, Caffarella and Barnett (1994) stated that educators and trainers must be cognizant of the characteristics of adult learners. These characteristics include the role of experience and prior knowledge,

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differences in processes of learning, active involvement in the learning process, and recognition of the context of adult lives. Kreber (2001) argued that experiential learning is likely to foster students' learning on a higher order level, such as critical thinking ability, which has been recognized as an important goal of higher education. Kreber further asserted that learning becomes experiential only after experiences or events have been transformed by either reflection or action.

Fiddler and Marienau (2008), in their study of community based experiential learning in higher education, argued that it is compelling for students to actively immerse themselves in experiences they may practice and from which they can expand their capacity for creating meaningful learning. The authors pointed to the importance of reflection as a "requisite mediator between the experiences of students and the meaning they make of those experiences – the interweaving of thinking, doing, and feeling" (p. 75).

Another type of experiential learning that is relevant to the adult learning is *transformative learning* which is based on the work of Mezirow (1997). The author defined transformative learning as learning that takes place as a person forms and reforms meaning, which is based upon reflecting on prior experience. More specifically, Mezirow stated that transformation leads to "a more fully developed (more functional) frame of reference…one that is more (a) inclusive, (b) differentiated, (c) permeable, (d) critically reflective, and (e) integrative of experience" (Mezirow, 1996, p. 163). Taylor (2008) argued that it is instinctual among all humans to make meaning of their daily lives, and it is therefore vital in adulthood to develop a more critical worldview as we seek better ways of understanding the world. Boyd and Meyers (1988) agreed, in their study of the role frames of reference in transformative education, stating that assumptions and expectations frame an individual's

point of view and influence thinking, beliefs, and actions. The role of higher education, therefore, is to facilitate understanding rather than to provide it, with the goal being what Mezirow (1996) refers to as "autonomous thinking" (p. 158).

Experiential Learning in Counselor Education

With regard to counselor education, this experiential, transformative, way of learning seems congruent with the change that is expected of clients. Hoshmand (2004) stated that transformational education is associated with change in worldview as a result of deep shifts in ways of knowing and ways of being. Hoshmand asserted that, given the developmental and humanistic perspectives that drive many counselor education programs, and given that counseling is concerned with facilitating change, goals, and values, transformative learning may be congruent with the counselor education philosophy. Similarly, Griffith and Frieden (2000) argued that the facilitation of reflective thinking and personal process recall that is expected of clients is similar to that of counselor education students engaging in supervision.

Experiential learning, with its focus on the "non-academic" search for knowledge that is based on the individual's experiences and processes, much like the nature of client learning, seems like a natural fit for counselor education. It is the responsibility of counselor education programs to endorse the experiential learning process that will, in turn, transform students into professionals who are capable of developing their inner resources.

Counselor Preparation

Preparation standards.

In 1981, the American Counseling Association (ACA) Governing Council along with the Association for Counselor Education and Supervision (ACES) agreed to establish the Council for the Accreditation of Counseling and Related Programs (CACREP) in order to

continue counselor education program accreditation (Sweeney, 1995). CACREP, the largest agency for counselor training, is the only body that accredits counseling programs at both the master's and doctoral levels (Bobby & Kandor, 1992). This accreditation includes one or more of six counseling specialties: career counseling, school counseling, student affairs and college counseling, addiction counseling, clinical mental health counseling, and marriage, couple, and family counseling (CACREP, 2009). Within these programs are core curriculum requirements of professional orientation and ethical practice, social and cultural diversity, human growth and development, career development, helping relationships, group work, assessment, research and program evaluation, and supervised practicum and internship.

CACREP influences training beyond currently credentialed programs. It is also the benchmark for credentialing criteria. "When a program applies for CACREP accreditation, it is evidence of an attitude and philosophy that program excellence is a fundamental goal" (CACREP, 2009, p.1). These standards of preparation are set forth to ensure the protection of the public as well as the profession of counseling, and are critical to our identity.

Counseling programs strive to graduate students who will become competent, stable, and effective counselors. CACREP (2009) standards state, "The program faculty conducts a systemic development assessment of each student's progress throughout the program, including consideration of the student's academic performance, professional development, and personal development" (CACREP, section I). The standards related to professional identity require that "students actively identify with the counseling profession by participating in professional organizations and by participating in seminars, workshops and other activities that contribute to personal and professional growth" (CACREP, section II). Furthermore, with regard to professional functioning, it is mandated that within the focus of

professional orientation and ethical practice, "self-care strategies appropriate to the role of counselor" be included in the curriculum (CACREP, section II). However, the mandates do not prescribe how counselor education programs should implement the guidelines and stipulations of personal growth, personal development, and self-care.

Forms of experiential learning are required in the training of counselors; for example, the standards regarding practicum and internship state, "These experiences will provide opportunities for students to counsel clients who represent the ethnic and demographic diversity of their community" (CACREP, section III). With regard to requirements regarding experiential learning in group training, CACREP mandates that these studies "…provide both theoretical and experiential understandings of group purpose, development, dynamics, theories, methods, skills, and other group approaches in a multicultural society" (section II).

The experiential group component of counselor training.

A group experience has become widely accepted as an integral part of training and continuing professional development (Yalom, 2005). CACREP and the Association for Specialists in Group Work (ASGW) require students to have experiences as group members as part of their training (Hatch & McCarthy, 2003). ASGW maintains that skill development inclusive of self-disclosure, giving and receiving feedback, and the use of confrontation requires a training model that utilizes an experiential group (Anderson & Price, 2001). There is general agreement among counselor educators that one essential element of training is group counseling (Furr & Barret, 2000). Similarly, Laux, Smirnoff, Ritchie, and Cochrane (2007) asserted that that students' participation in training groups is almost a universal requirement in counselor education. The CACREP standards (2009) specify, as noted in the previous section, that studies " provide both theoretical and experiential understandings of

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group purpose, development, dynamics, theories, methods, skills, and other group approaches in the multicultural society." This standard also calls for "direct experiences in which students participate as group members in a small group activity, approved by the program, for a minimum of 10 clock hours over the course of one academic term." According to Fall and Levitov (2002), the rationale for using the instructional and experiential components for group work is the assumption that comprehensive group leadership training requires "…both the acquisition of knowledge and adequate opportunity to experience and apply that knowledge in personal as well as practical ways" (p.122).

Ethics issues regarding the group component.

Ethical and practical issues arise for counselor educators who want to require students to have an experiential academic group experience. According to Remley and Herlihy (2010), the self-growth requirement of experiential learning has been the subject of ethical debate in academic institutions. Because counselor education programs combine academics with an experiential component, role conflicts can occur due to the gate keeping role that faculty must serve (Herlihy & Corey, 2006). Ethically, the problem of dual relationships may be a concern if the instructor is leading or observing the experiential group. A professional dual relationship is defined as a situation wherein a provider of services assumes two or more roles with a recipient of services (Romano, 1998). Herlihy and Corey (2006) defined dual relationships in academia as "…when a professor assumes two or more roles simultaneously or sequentially with a person seeking his or her help" (p.1). Students are in a vulnerable position due to the power differential that exists between student and instructor. There is the potential for the student to have less power when the teacher serves as the evaluator, supervisor, and facilitator of the student's self-awareness (Anderson & Price, 2001).

Similarly, Furr and Barret (2000) reported that the most significant problem with an experiential group course was the dual role of the professor, in that a faculty member may have become familiar with students' personal lives while being expected to evaluate them in a group component. Other issues related to the dual relationship in an experiential group situation would be the instructor's possible loss of objectivity if the student refused to share personal information, or jealousy/resentment between students (Anderson & Price, 2001). Additionally, when evaluating students during the semester, as required by CACREP, a professor may be in an ethical dilemma if he/she has gained knowledge about a particular student that would not typically be known. However, roles in academia are complex, and the role of the professor needs to be managed rather than avoided (Herlihy & Corey, 2006). Another issue to be considered is the dual relationship that may occur between students in training who are developing their own relationships with one another which can be compromised in the group experience (Romano, 1998). Examples of this duality would be romantic or working (employment) relationships.

Models.

The availability of doctoral students to lead master's level experimental groups is common practice in those programs that have a PhD component. Because not all counselor education programs offer the doctorate, other avenues can be explored with the goal of comprehensive training while avoiding the issue of dual relationships. The level of practicality must be assessed to ensure a best fit. According to Fall and Levitov (2002), some of these training methods include the direct observation model, field-based leadership, and simulated group counseling. In the direct observation model the student observes but does not participate in group sessions. While this exposes the students to an actual group, it lacks

the experiential component. Field-based leadership, where the students are leading real groups under supervision in the community, leads to a concern about student inexperience and the resulting ethical concerns. "Simulated group counseling allows the student to act as leader, member, and observer during the span of the course" (p.127), which meets the objectives of the group training course. Fall and Levitov stated that multiple role playing can be problematic for students because it would likely include material drawn from personal experience.

Hatch and McCarthy (2003) suggested that participation in a challenge course (or ropes course) prior to commencing experiential group counseling exercises can be an effective component for counselors in training. They proposed that the therapeutic benefits of *adventure therapy* when used as part of team-building activities, can facilitate the intra- and interpersonal growth necessary in the acquisition of group counseling skills without exacerbating potential problems such as dual roles and invasion of privacy.

Ambiguity continues to exist regarding the role of experiential learning in the current models of training in counselor preparation. According to Herlihy and Corey (as cited in Romano, 1998), methods to manage these potential risks, such as consulting with other professionals, informed consent, and instructor self-awareness, can minimize potential problems. Experiential learning in the skill acquisition of counseling students can be a viable training strategy to enhance counselor effectiveness.

Comparison of experiential learning in group and individual formats.

The rationale for required participation as a member of a counseling or personal growth group can be applied to a requirement to participate as a client in an individual counseling experience. Both experiences provide an opportunity for self-reflection and

insight. Both individual and group experiences also have a mentoring or modeling component, whereby the student can observe "in vivo" professional skills, therefore enhancing professional development. Kline, Falbaum, Pope, Hargraves, and Hundley (1997), in their study of group experiences of students in counselor education, found that, as a result of these experiences, students reported increased emotional experiencing and self-awareness, which are similar to the potential benefits of an experiential individual counseling experience.

In addition to similarities, there are distinct differences between group and individual counseling. First, the group experience is primarily a training requirement, which focuses on skill development. Although personal concerns may come to the surface as a result of the group experience, this is not the primary goal. There is the potential for individual concerns that arise in group to cause the student to feel self-conscious, and the student may not want to further explore these issues in the presence of a group of peers. Second, an individual counseling experience does not result in the same dual relationship concerns as group counseling presents. The individual counseling experience could be structured to be independent of the program, accomplished off-campus at a facility that is not associated with the program. This "outsourcing" would eliminate the issue of potential bias on the part of the faculty instructor.

Potential Benefits of Experiential Learning

The development of empathy.

Several schools of thought have arisen to explain how counseling works, but a common thread in most seems to be the concept of empathic understanding. The theory and practice of counseling is predicated on the notion that the experience of the client can (and

should) be understood by the counselor (Hartley, 1995; Rogers, 1975; Truax & Carkhuff, 1967). The word *empathy* originated in the German language. The term *einfühling*, meaning "feeling into" the experience of another person (Duan & Hill, 1996; Feller & Cottone, 2003; Hartley, 1995), was organized and developed at the turn of the century in psychology theory in the work of Titchener (1924). Titchener coined the term *empathy* as a "process of humanizing objects, of reading or feeling ourselves into them" (p. 417), and this concept has been key in understanding why and how therapy works (Bohart & Greenberg, 1997; Clark, 2004; Crutchfield, Baltimore, Felfeli, & Worth, 2000; Duan & Hill, 1996; Redfern & Dancey, 1993). Free, Green, Grace, Chernus, and Whitman (1985) suggested that the concept of empathy was used by Freud when he wrote, "We take the patient's psychical state into consideration, put ourselves into it and try to understand it by comparing it with our own" (p. 917). Perhaps the most influential American psychologist and developer of the humanistic, person-centered approach that is used in the counseling profession was Carl Rogers (Bohart & Greenberg, 1997; Clark, 2004; Gatongi, 2007; Greenberg & Goldman, 1988; Hackney, 1978; Josefowitz & Myran, 2005; Wickman & Campbell, 2003). Rogers (1957) stated, "I have drawn out several conditions which seem to me to be *necessary* to initiate constructive personality change, and which, taken together, appear to be *sufficient* to inaugurate the process" (p. 95). These necessary and sufficient conditions, which Rogers identified as genuiness, unconditional positive regard, the ability of the counselor to empathize with the client, and communication of empathy and unconditional positive regard, are hallmarks of the counseling profession.

The construct of empathy can be seen in a number of theoretical constructs of counseling. Feller and Cottone (2003) suggested that the common components of counseling include relationship factors of empathy that influence the therapeutic alliance. According to Bohart and Greenberg (1997), psychoanalytic theory, especially object relations, relies heavily on the empathy within the therapeutic alliance. More specifically, Rowe and MacIsaac (1989) explained that the therapist, by thinking and feeling his or her own way into a client's inner life, comes to know what the client is experiencing in the moment, and communicates in some verbal or non-verbal fashion that the experience has been understood. Similarly, Buie (1981) suggested that "the empathizer compares…behavioral cues with one or more referents in his own mind which could be expressed by similar behavior. He then infers that the inner experience of the object qualitatively matches that associated with his referent" (p. 305).

Cognitive therapy defines the characteristics of warmth, accurate empathy, and genuiness as contributing substantially to counselor effectiveness (Feller & Cottone, 2003). Beck, Rush, Shaw, and Emery (1979) described empathy as a facilitating factor in the therapeutic alliance, assisting the therapist in making sense of unproductive behaviors in a non-judgmental manner. Pearson (1999) concurred when he stated that in cognitive behavioral approaches, empathy is the tool that allows counselors to get to the work of changing thoughts and behaviors, an important means to an end.

The importance of Rogers' theory regarding the importance of the client-counselor relationship is reflected in the rational emotive behavior therapy (REBT) of Ellis (as cited in Feller & Cottone, 2003). Ellis (1996) stated that counselors who use REBT care about helping clients overcome their problems. Unconditional positive regard is modeled for the

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clients, teaching them how to accept themselves unconditionally, and this, in turn, shows the client how to better relate to others.

Empathy is also a central concept in relational therapies, such as responsive therapy, motivational interviewing, and solution-focused brief therapy (Feller & Cottone, 2003). Gerber and Basham (1999) described responsive therapy as beginning with the assertion that a good counselor is one who matches interventions to the circumstance and style of each client. The careful use of specific microskills to build a trust-based working relationship between client and counselor is based on the concept of empathy. The concept of motivational interviewing, as described by Miller and Rollnick (1991), is a particular way to help the client recognize and do something about a present or potential problem by creating discomfort and discrepancy, thus triggering a natural motivation for change. The expression of empathy is the first principle needed for the client to engage in this triggering and resolution. Solution-focused brief therapy (SFBT), based on the work of de Shazer (1985), suggested that empathy is a component which is necessary to focus on to understand what the client wants as well as understand how effective change would make a difference in the client's life. McKergow and Korman (2009), in their study of how SFBT differs from other forms of therapy, agreed with de Shazer when they stated that the role of counselor is to listen carefully to what the client says, believing that in the words themselves lies everything necessary for clients to find and build solutions.

Empathic responding is considered a basic skill in any counselor education program. Across counselor education programs and throughout training tracks, empathic responding is seen as one of the most important basic counseling skills for counselors-in-training to acquire (Crutchfield, Baltimore, Felfeli, & Worth, 2000; Ivey, 1991; Redfern, Dancey, & Dryden,

1993). Research on empathic skill acquisition can be seen in Rogers's (1957) graded training experiences, and was continued by Truax and Carkhuff's (1967) didactic-experiential training.

In Rogers' graded experiences (1957), students listened to tape-recorded interviews, experienced live demonstrations by a supervisor, partook in group and personal therapy, conducted individual psychotherapy, and recorded their own interviews for discussion with a facilitative supervisor. Rogers also implemented the method of recording interviews for the purpose of facilitative supervision (Greenberg & Goldman, 1988). He was the first to emphasize that the most effective student learning occurs experientially in the same type of facilitative environment as the client-therapist relationship.

Rogers (1975) theorized that a therapist's personal therapy should sensitize him or her to the types of attitudes or feelings the client may be experiencing, thus helping the therapist become empathic at a deeper level. Pagell, Carkhuff, and Berenson (1967) found that while attending skills and summarization of feeling can be learned didactically, the ability to create and maintain an empathic relationship is better learned experientially. Elliott and Partyka (2005) agreed, and stated that experiential personal therapy is vital for the humanistic counselor, as it not only provides the basis for the therapist's genuiness and authenticity, but also enhances the therapist's empathy. Elliott and Partyka further asserted that if the counselor has personally been through what is being offered to the client, he or she will also be better able to understand the client's experience, and that will help the counselor to be more responsive to the client's moment-to-moment experiencing.

Along this experiential learning continuum, Truax and Carkhuff (1967) implemented their didactic-experiential training procedure that began with the trainees' own experience as

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a learning base. This program included a therapeutic context and training in the implementation of therapeutic conditions, and a quasi-group therapy experience in which trainees engaged in personal exploration to foster the emergence of their therapeutic selves.

Multicultural competence.

One of the tasks of counselor education programs is to ensure that students understand the complexity of multiculturalism. Personal biases create debilitating emotional blocks that can hinder a counselor's ability to effectively provide cross-cultural counseling experiences (Ellenwood & Snyders, 2006; Pederson & Ivey, 1993). Counselors must consider their personal culture and the ways that their personal and professional socialization potentially influence practices in multicultural counseling (Arthur & Achenbach, 2002; Pope-Davis & Ottavi, 1994; Ridley, Espelage, & Rubenstein 1997). Experiential activities are a powerful means to stimulate multicultural awareness and can be used to help individuals confront and overcome racial/ethnic bias (Kim & Lyons, 2003).

Research suggests that many counselor education students feel unprepared for the realities of working with culturally diverse clients (Arthur & Achenbach, 2002; Craven & Kimmell, 2002; Hays, Dean & Chang, 2007; Kim & Lyons, 2003; Merta, Stringham, & Ponterotto, 1988). It has been suggested that experiential processes can be used to increase sensitivity and raise awareness about multicultural issues, challenge students' personal frameworks about cultural diversity, and help them develop cultural empathy (Kim & Lyons, 2003; Merta, Stringham, & Ponterotto, 1988; Pope-Davis & Coleman, 1997; Roysircar, Sandhu, & Bibbins, 2003). A major criticism of current multicultural or cross-cultural training is that such efforts rely heavily on cognitive approaches such as lectures,

discussions, and readings, with little attention given to the behavioral and experiential aspects

of training (Merta, Stringham, & Ponterotto, 1988).

Endorsement of multicultural experiential processes is present in the literature.

Merta, Stringham, and Ponterotto (1988), in their study of a training exercise designed to

expand on traditional cognitively focused multicultural instruction, concluded that exposing

counselor trainees to *in vivo* interactions with individuals of diverse cultures resulted in an

increase in questions and reflections. Burnett, Hamel, and Long (2004), in their study of

service learning in graduate counselor education, concluded that cultural awareness,

sensitivity, knowledge and skills increased in counselor education students who participated

in community service with diverse populations as an adjunct to classroom learning.

Similarly, in their study addressing privilege and oppression in counselor training and

practice, Hays, Dean, and Chang (2007) concluded that a heightened awareness of students'

personal experiences was reflected in their reactions to clients with whom they perceived a

power differential. As a result, the students in this study suggested that instructors should

challenge and assess students' beliefs within all courses throughout training, and include

participation in experiential activities with diverse groups.

Strengthening professional identity.

Professional identity, as it pertains to the social sciences, is derived from scientific

traditions, individualization, and administrative practices. These practices are the result of

interactions among professionals, professional organizations, educational institutions, the

state, the marketplace, and other players (Krejsler, 2005). Professional identity is also the

result of mentoring and modeling, as well as how one is viewed by colleagues, peers, and the

general public. Pistole and Roberts (2002) asserted that "the development of professional

identity is an important aspect of the training and ongoing sense of belongingness to mental

health counselors" (p.1). Pistole and Roberts further stated that there are two themes at the

center of the identity of counselors: establishing and producing a systemic body of theory for

the profession, and distinguishing the profession from other service providers. All of these

aspects of professional identity are systemic in nature, given the fact that they are

intertwined.

Training programs have a tremendous influence on the professional identity of their

students. According to Ivey and Van Hesteren (1990), "Human development is primary

educational, as contrasted with *psychological* in function" (p.534). The implementation in

1981 of CACREP, which accredited counseling programs, differentiated counseling practice

from psychology (Gale & Austin, 2003). Some training programs have both CACREP and

APA accreditations, and as a result of a lack of licensing afforded the graduates of

psychology programs, according to Gale and Austin, these graduates often seek licensure as

professional counselors. Additionally, not all CACREP programs require the same

coursework or number of semester hours. These differences in training affect the identity of

the profession.

Professional identity is pertinent and important to the public because counselors have

a primary duty to protect their clients. According to Walden, Herlihy, and Ashton (2003), a

defining characteristic of a professional organization is "the formulation of a code or system

of standards that prescribe acceptable professional behaviors for the members of that group"

(p.106). A code of ethics represents who we are as a profession, and is representative of our

professional identity. Additionally, a code of ethics unifies practice, provides methodologies,

and supports its practitioners, while providing the best care for clients (Hendricks, 2008). A

primary means by which professional counselors protect their clients is through the ACA Code of Ethics.

Counselors' identities differ from identities formed in other professions because, in addition to forming attitudes about their professional selves, counselors develop a "therapeutic self" which is a blend of blend of both the personal and professional self (Auxier, Hughes, & Kline, 2003). According to Bruss and Kopala (1993), the professional identity of counselors is rather complex because it is inextricably tied to their personal identity. Ekstein and Walerstein (1958) proposed that professional identity is an extension of the self or self-concept. Counselors develop what Skovholt and Rønnestad (1992) referred to as a "therapeutic self that consists of a unique personal blend of the developed professional and personal selves" (p. 21).

According to Skovholt and Rønnestad (1992), the development of professional and personal identities begins during training. Auxier, Hughes, and Kline (2003), in their study of identity development in counselors in training, reported "recycled identity formation" (p. 32) which includes conceptual learning, experiential learning, and external evaluation, all of which contribute to the learning process. In an earlier study, Cook (1999) theorized that self-awareness is an important component to psychotherapy, and can be achieved only when students become aware of their own values, attitudes, prejudices, beliefs, assumptions, feelings, countertransferences, personal motives and needs, competencies, skills, and limitations. Bruss and Kopala (1993), in their study of graduate school training in psychology, found that the professional identity of therapists is complex in that it is tied to the identity of the individual, and is shaped by many factors such as self-confidence and self-

worth. Barnett and Cooper (2009) included the concept of self-care in the development of professional identity.

The Individual Counseling Experience

  Wellness, impairment, and burnout among counseling professionals.

  When counselors take good care of themselves, there is a positive effect on delivery of services to their clients. Simply put, well counselors produce well clients. It is widely accepted that counselor impairment presents a problem for the counseling profession (Barnett & Cooper, 2009; Gilroy, Carroll, & Murra, 2002; Lawson, 2007; Lawson, Venart, Hazler, & Kottler, 2007; Norcross, Dryden, & DeMichele, 1992; O'Connor, 2001; Pope & Tabachnick, 1994; Stadler, Willing, Eberhage, & Ward, 1988; Venart, Vassos, & Pitcher-Heft, 2007; Watkins, 1983). Wellness has been defined as "the process and state of a quest for maximum human functioning that improves the body, mind and spirit" (Roach & Young, 2007, p. 32). Counselors who are unwell, or what Lawson (2007) described as "stressed, distressed, or impaired" (p. 20), are less likely to offer the highest level of care to their clients, and often experience a degradation in the quality of their personal lives as well. Lawson, Venart, Hazler, and Kottler (2007) noted that counseling is a profession wherein the counselor serves as the instrument for the work that is done. The level of commitment and connection that occurs with clients is a result of empathically experiencing the world through clients' perceptions and connecting to their pain. Venart, Vassos, and Pitcher-Heft (2007) stated that nurturing wellness and preventing impairment require that counselors "take an honest appraisal of their health, balance, and self-care not once, but continually throughout their careers" (p. 50). Venart, Vassos, and Pitcher-Heft also asserted that counselors need to be

aware of issues such as transparency and their own unresolved issues, as clients attend to both verbal and non-verbal messages from their counselors.

The *burnout* concept has been covered extensively in the literature (Brodie & Robinson, 1991; Lawson, 2007; Mackey & Mackey, 1993; Maslach, Jackson, & Leiter, 1996; Stebnicki, 2007; Watkins, 1983; Williams, Coyle, & Lyons, 1999; Wiseman & Egozi, 2006). It has been described as a syndrome characterized by dimensions of emotional exhaustion, depersonalization, and reduced feelings of personal accomplishment. Counseling professionals need to be concerned about burnout because of the impact on the personal and professional life of the counselor. Skovholt (2001) suggested that counselors are particularly vulnerable to burnout because of the intensive nature of the work and because of the intimacy of the psychological relationships that are developed through empathy. The term *empathy fatigue* was used by Stebnicki (2007) to describe a state of "emotional, mental, physical, and occupational exhaustion that occurs as the counselor's own wounds are continually revisited by the client's life stories of chronic illness, disability, trauma, grief, and loss" (p.317).

The essence of counseling is to consistently summon the energy to engage with another human's emotions while at the same time balancing one's own personal experiences and challenges outside of the job (Cummins, Massey, & Jones, 2007). Counselors are dealing not only with the emotions of their clients, but possibly with their own histories of trauma, unresolved personal issues, and life stressors. Gilroy, Carroll, and Murra (2002) surveyed counseling psychologists' personal experiences with depression and treatment, and concluded that psychologists are a population at risk for depression. The negative impact on professional functioning as a result of depression, such as inability to maintain focus with

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client, memory problems, fatigue, and lack of energy and motivation for therapeutic work, can lead to more serious consequences of impairment, such as ethical violations.

Another area of concern regarding impairment of counselors is vicarious traumatization and compassion fatigue (Lawson, 2007; O'Connor, 2001; Stadler, Willing, Eberhage, & Ward, 1988; Venart, Vassos, & Pitcher-Heft, 2007). In 1995, Pearlman and Saakvitine (as cited by Lawson, 2007) defined vicarious traumatization as resulting from "the cumulative effect…of working with survivors of traumatic events. Anyone who engages empathically with victims or survivors is vulnerable" (p.31).

The problem of impaired counselors creates not only a significant concern for the public, but for has far reaching effects on colleagues as well as the broader profession. Sherman and Thelen (1998) studied distress and professional impairment among psychologists in clinical practice and reported that highly publicized cases of therapist misconduct often portray psychologists in an embarrassing light, harming the field's reputation in the public eye. Stadler, Willing, and Eberhage (1988) stated that counselors whose performance is impaired by mental or physical problems may pose a threat to client welfare and the maintenance of professional standards.

Guy and Liaboe (1986) referred to the "puzzling silence" (p. 20) among mental health professionals concerning the need for periodic or ongoing psychotherapy for the experienced psychotherapist. Despite the possibility of practicing under possibly dangerous psychological conditions, Barnett and Hillard (2001) stated that fear of consequences for admitting impairment, such as loss of clients and embarrassment, often prohibits psychologists from seeking personal therapy. Wiseman and Egozi (2006), in their study of personal therapy for Israeli school counselors, stated that there exists a taboo on opening and

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exposing the process of therapy with colleagues. Gilroy, Carroll, and Murra (2002) reported that psychological and attitudinal barriers to seeking treatment continue to exist, and that the idea persists among professionals that therapists should "embody the prototype of mental health" (p. 402). Similarly, Morrisette (1996) pointed to the resistance of professional associations to self-scrutiny, society's judgment about such work, and professionals' fear of demonstrating a human vulnerability. This was resonated in the work of Farber (2000) who believed that the apprehension of many psychologists to seek treatment is due to continued societal stigma and negative stereotypes regarding practitioner mental health. This notion was echoed in the work of Smith and Moss (2009) who stated that mental health professionals not only fail to identify impairment and intervene with peers, they can fail to identify signs of impairment in themselves. Studies show that approaches that deal with impaired professionals focus on code enforcement rather than prevention (Gilroy, Carroll, & Murra, 2002; O'Connor, 2001).

Personal counseling for counselors.

With increased understanding and insight into self, clients, and the counseling field, counselors can better assist clients. Personal therapy can be regenerative and can help the counselor become more effective therapeutically (Watkins, 1983). There is substantial endorsement in the literature from professionals who value individual counseling (Buckley, Karasu, & Charles, 1981; Daw & Joseph, 2007; Lawson, 2007; Macaskill & Macaskill,1992; Mackey & Mackey, 1993; Neukrug & Williams, 1993; Norcross, Bike, Evans, & Schatz, 2008; Norcross, Dryden, & DeMichele, 1992; O'Connor, 2001; Pope & Tabachnick, 1994; Rizq & Target, 2008; Schwebel & Coster, 1998; Watkins, 1983; Williams, Coyle, & Lyons, 1999; Wiseman & Egozi, 2006), and who endorse benefits that include increased self-

awareness, normalizing the role of counselor through role modeling, understanding the counseling process, and understanding the changes in the self. The values that counselors hold regarding being in therapy themselves may be significantly related to their ability to perform their professional role (Neukrug & Williams, 1993).

Norcross, Dryden, and DeMichele (1992) reported that the goal of individual counseling for the therapist is to "alter the nature of subsequent therapeutic work in ways that enhance its effectiveness" (p. 1). The authors identified six benefits of individual counseling which include (a) improving emotional and mental functioning, (b) developing a more complete understanding of personal dynamics, interpersonal elicitations, and conflictual issues, (c) alleviating emotional stresses inherent in the profession, (d) serving as a socialization experience, (e) placing the counselor in the role of the client, thus sensitizing the counselor to interpersonal reactions and needs, and increasing respect for the client, and (f) providing role modeling of clinical methods. Mackey and Mackey (1993), in their study of the value of personal psychotherapy in the training of social work students and experienced practitioners, found that therapists were seen as objects of identification to be emulated in their clinical work, and that the experience of individual counseling helped them understand the therapeutic process, increased listening skills, clarified fundamental therapeutic principles, reinforced boundaries, and helped "find and preserve a central part of themselves that remained constant despite differing roles which were adopted in practice" (p. 106).

Still more literature has endorsed the benefits of the individual counseling experience for practitioners, citing increased ability to display empathy, warmth, and genuiness; increased sensitization to the needs of clients; first-hand opportunity to observe clinical

methods; and strengthening the validity of the therapeutic process (Buckley, Karasu, &
Charles, 1981; Elliott & Partyka, 2005; Gilroy, Murra, & Carroll, 2002; Hill, 2005; Kirsch,
2005; Laireiter & Willutzki, 2005; Lebow, 2005; Leech, 2007; Norcross, 2000; Schwebel &
Coster, 1998; Strozier & Stacey, 2001; Venart, Vassos, & Pitcher-Heft, 2007).

Some literature exists that is not in favor of an individual counseling experience for
practicing clinicians. Buckley, Karasu, and Charles (1981), although in agreement that an
individual counseling experience produced improvements in self-esteem, work function, and
social relationships, found that 21% of treated clinicians surveyed reported that their
treatment was "harmful" and suggested that this was due to unresolved transference issues.
Pope and Tabachnick (1994) surveyed psychologists regarding their experiences as patients:
22% reported that their experiences in therapy had been at least somewhat harmful, citing
breaches of confidentiality; another 31% stated that they continued to daydream about the
therapist; and 6% reported that they had experienced sexual feelings or fantasies about the
therapist. Despite these concerns, there appears to be strong evidence that an individual
counseling experience for professional counselors results in positive outcomes for the
practitioner, clients, and the profession.

Research studies relevant to the required individual counseling experience.

Norcross, Bike, Evans, and Schatz (2008) asserted that "academicians and training
directors can exert substantial impact on graduate students' attitudes and behaviors – both as
models through personal interaction and as standard setters through program requirements"
(p. 1374). Requiring students to engage as a client in an individual counseling may be an
effective method by which counselor education as a whole can foster the professional
identity that is expected in the profession.

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Competencies in counselor education generally fall into three categories: knowledge, skill, and awareness, with most teaching approaches designed to instill a strong knowledge and skill basis within the curriculum (Westwood, 1994). Most counselor education admissions procedures focus on the criteria of Graduate Record Examination scores, undergraduate grade point average, letters of recommendation, and interviews that have "low-positive correlations with academic success and the attainment of counseling skills" (Roach & Young, 2007, p. 29). Myers, Mobley, and Booth (2003) surveyed counselor preparation programs, and found that criteria for admission focused on predictors of academic success only. It has been suggested in the literature that the characteristics of personal traits are more important in beginning counselors than teachable skills (Figley & Nelson, 1989; Patterson & Utesch, 1991).

A concern for the wellness of counselor education students is evident in the literature (Bruss & Kopola, 1993; Dearing, Maddox, & Tangney, 2005; de Vries & Valadez, 2005; Myers, Mobley, & Booth, 2003; Roach & Young, 2003; Yager & Tovar-Blank, 2007). The personal wellness of the counselor education student typically is not a focus in the academic curriculum (Blank, 2007). However, it is suggested by Blank that the most effective counselors are those who continually work toward self-care, and promoting this concept in counselor education is most appropriate, given that professional identity is still being formed.

Strategies to promote counseling student wellness have been offered. Yager and Tovar-Blank (2007) proposed that students be made aware of the personal growth and change that can be expected as part of their graduate work, and suggested providing students with an informed consent statement. The authors suggested that these procedures would

assist in associating self-growth with wellness. Figley (2002) suggested presenting wellness as a lifestyle in counseling programs, and promoted cognitive understanding of issues such as burnout and compassion fatigue, and encouraging social support as well as openly sharing personal struggles. A similar model proposed by Witmer and Granello (2005) incorporated a course-specific wellness class and included aspects of wellness throughout the curriculum.

Farber (2000) suggested that teaching graduate students about the realities of their own personal distress and providing them with tools for identifying their own impairment may help to debunk "the myth of the invulnerable practitioner" (p. 344). Norcross (2005) noted that the profession's collective silence on the topic of personal therapy sends the message to beginning clinicians that personal therapy is not necessary once they are in practice, and he suggested that a preventative approach to this misconception is through education.

Counselor educators must be concerned about impairment in the students they are training and the potential harm to clients (Roach & Young, 2007). This inherent danger of impairment offers a powerful argument for the necessity of promoting and monitoring wellness in counseling students (Bradley & Post, 1991; Emerson & Marcos, 1996; Hensley, Smith, & Thompson, 2003; Herlihy & Corey, 2006). Relevant to promoting wellness in counselor education programs are personal awareness and personal development. Personal awareness as defined by Witmer and Granelleo (2005) refers to the consciousness of one's strengths and limitations, and one's thoughts, feelings, emotions, and needs. Personal development as defined by Roach and Young (2007) refers to personal and professional growth due to knowledge and experience.

Self-awareness.

Self-awareness is a highly valued core issue in counseling, as is evidenced by the vast amount of attention in the counseling literature on the topic in multicultural counseling, group work, school counseling, and training and supervision (Corey & Corey, 2007; Ellenwood & Snyders, 2006; Farber, 2000; Leech, 2007; Norcross, Bike, Evans, & Schatz, 2008; Osborn, Daninhirsch, & Page, 2003; Pederson & Ivey, 1993; Romano, 1988; Smith & Moss, 2009). According to Hansen (2009), for self-awareness to be present the following conditions must be present: (a) the self must exist, (b) this self must be available for introspection, (c) the self must have enduring essence, and (d) the self must be able to be represented by language.

Although there are differing positions regarding self-awareness in counseling (Hansen, 2000; Rogers,1957; Hanson, 2004), there is agreement that there needs to be some degree of counselor transparency in order to conceptualize clients' motives, needs, and problem areas and for the counselor to be able to reflect upon his or her role in that dyad. So important is the role of self-awareness in counselor training that CACREP (2009) states that self-awareness is a required prerequisite for counselor fitness.

Prevention of impairment.

It has been suggested that it is the role of faculty to more effectively screen for impaired counseling applicants (de Vries & Valadez, 2005). Witmer and Young (1996) expressed concern that impaired counseling students are destined to become impaired counseling professionals and are apt to do great harm if the issue of admitting and graduating impaired students is not addressed. Lumadue and Duffey's (1999) study of gatekeeping in graduate programs revealed that some students entering a counseling program were impaired

and pursued a graduate degree as a socially acceptable substitution for treatment. This has placed a burden on counselor educators, as there is not currently a set of non-academic indicators of student impairment which would help strengthen the screening process (Li, Lampe, Trusty, & Lin, 2009). Macran and Shapiro (1998) further asserted that there is a substantial minority of students who have entered the profession as a means of resolving their own conflicts. According to de Vries and Valdez (2005), one possible sign of impairment is the resistance of students to engage in a required individual counseling experience. Thorne and Dryden (1991) suggested that, without the obligation to undergo counseling, there is no guarantee that students will confront in a systematic and thorough manner those areas of their personalities which are a potential source of difficulty or conflict.

Modeling.

The literature suggests that counseling faculty leadership plays a role in the promotion of wellness, and that faculty have an important responsibility to educate trainees regarding the prevention of impairment. Dearing, Maddox, and Tangney (2005) reported that there are unique considerations about entering the counseling profession. One example is the socialization process whereby attitudes held by faculty members and supervisors are likely to influence the attitudes and identities of counselors. Farber (1999) suggested that graduate students are likely to look toward mentors such as professors or supervisors for guidance regarding personal counseling. Strozier and Stacey (2001) found that students would be more likely to engage in therapy if they believed that it was viewed as valuable by their professors. Dearing, Maddox, and Tangney further asserted that faculty should be mindful of their own beliefs toward personal counseling, and consider the extent to which they are willing to share their own personal beliefs and experiences with students.

Faculty and student perspectives on the individual counseling experience.

It is evident that not all faculty endorse a requirement of personal therapy. In a study by Strozier and Stacey (2001) regarding the relevance of personal therapy in the education of master of social work students, most of the faculty surveyed emphasized the importance of students having the right to make personal decisions about issues such as therapy. Wiseman and Egozi (2006), in a similar vein, suggested that requiring personal therapy would preclude students from making the individual choice and personal commitment that are essential to gain real benefits from counseling. Muller (2004) suggested that the idea that counselors should undergo their own counseling comes from psychoanalysis, which counseling is not, and argues that "it is arrogant to assume that it is only through counseling that we may come to know ourselves" (p.3). Additionally, graduate students can be overwhelmed by demands on their time and requiring personal counseling may not be a viable option. Training programs often do not require personal therapy because of the practical constraints (i.e. cost, time), as well as limited availability of therapy resources (Glass, 1986). Patterson and Utesch (1991), in their study concerning family therapy graduate students' attitudes about personal therapy as a component of training, reported that 25% of the graduate students surveyed cited financial and time constraints as the most frequent reasons for not beginning therapy.

In keeping with the mandate to promote wellness in counselor education, there is evidence that counseling students endorse the requirement of personal counseling as a way to develop and strengthen their professional identities (Daw & Joseph, 2007; Fouad & Hains, 1990; Murphy, 2005; Smith, 2005; Strozier & Stacey, 2001). Patterson and Utesch (1991) studied personal therapy for family therapy graduate students, and reported that 45 of the 51

students surveyed believed that all therapists should be in personal therapy at some point in their training. Mackey and Mackey (1993), in their qualitative study of required personal psychotherapy in master of social work students, found that of the 15 students interviewed, 93% talked about their therapists as role models, and 93% reported that therapy had helped them understand the therapeutic process. Grimmer and Tribe's (2001) qualitative study of counseling psychologists' perception of the impact of personal therapy on professional development found that as a result of experiential counseling in training, the seven counseling psychologists surveyed achieved a greater understanding of the therapeutic process. Strozier and Stacey (2001) reported that students' experiences with personal counseling enhanced their understanding of the treatment process and helped them become more effective in their own therapy with clients. Students in the Strozier and Stacey study, which consisted of 139 first year, second year, and part-time master of social work students, cited therapy as a way to increase self-awareness (60%) and deal with personal issues (46%). Dearing, Maddux, and Tangney (2005), who surveyed 262 psychology graduate students, found that the students endorsed individual counseling a means of gaining insight into becoming an effective therapist.

Murphy (2005), in his study of the experience of mandatory personal therapy during training, discussed the issue of *reflexivity* in students. He defined reflexivity as the realization by the student that personal issues occurring before or during training can affect counseling practice, resulting in the acknowledgement that personal therapy is a useful way to work through this unresolved material. Murphy also asserted that the development of empathy is part of personal growth and a precondition to the emergence of conscious awareness, stating, "It is essential to have an understanding of what it is like to have touched the various parts of

the counseling process, including that of being the client" (p.31). There is further evidence

that counseling students endorse a required counseling experience. Fouad and Hains (1990)

reported that among the 106 counseling students surveyed, 66% believed that counseling

should be a required part of the curriculum, and 85% reported being satisfied or very satisfied

with their counseling experience.

However, not all students endorse the benefits of a required individual counseling

experience. McEwan and Duncan (1993) studied personal therapy in the training of

psychologists, and report that some graduates perceived emotional and financial stress as a

result of engaging in counseling. The 79 clinical and counseling psychology graduates in the

McEwan and Duncan study also cited feeling coerced into therapy (23%), minimal

justification for therapy (40%), no choice in therapist (62%), and therapy having no clearly

defined goals (28%). Macaskill and Mackaskill (1992), in their survey of 25 psychology

students found that 29% cited psychological distress and 13% cited family or marital distress

as a result of a required counseling experience. Other ethical concerns were also present in

the literature, and included informed consent, dual relationships, effect on the student when

compelled into therapy, unnecessary therapy, poor role modeling, poorly conducted therapy,

and concerns regarding how the outcome of counseling would be verified (Dearing, Maddux,

& Tangney, 2005; Herlihy & Corey, 2006; McEwan & Duncan, 1993).

The individual counseling experience as a remediation strategy.

In CACREP accredited programs faculty are responsible for structuring, overseeing,

and being accountable for the training and therapeutic work of counseling students.

Challenges for counseling students can be both academic and psychological in nature, or

what Kaslow et al., (2007) refer to as *foundational* and *functional* domains (p. 480).

Ongoing assessments and proactive methods are necessary to address issues of both competence and impairment in counseling students (Jordan, 2002; Lamb et al., 1987). Numerous authors have reported that remediation is the most frequently utilized method of addressing impaired students (Elman & Forrest, 2004; Jordan, 2002; Kaslow et al, 2007; Lamb et al., 1987; Li, Lampe, Trusty, & Lin, 2009; Morrissette, 1996; Russell & Peterson, 2003). Russell and Peterson (2003), in their qualitative study of student impairment and remediation in accredited marriage and family therapy programs, surveyed 44 program directors who reported that the most popular remediation methods included referral to therapy, increased supervision, leave of absence, increased contact with the faculty advisor, and repeating academic coursework.

Personal therapy as a remediation strategy is present in the literature. Lamb et al. (1987) in their critique of confronting impairment during internship suggested that requiring personal therapy is appropriate when the students' issues seem to be psychological in nature. Olkin and Gaughen (1991), in their study of evaluation and dismissal of students in master's level clinical programs, reported that 77% of the 54 counselor education program directors surveyed reported that personal therapy was used as a form of remediation. However, according to, Forrest, Elman, Gizara and Vacha- Haase (1999), little is known about the type, quality, length, and outcome of personal therapy in remediation.

Elman and Forrest (2004), in their exploratory interviews with 14 psychology training directors, addressed the gap in the literature about the effectiveness of individual counseling as a form of remediation. Elman and Forrest reported that programs using individual therapy as a remediation component experienced a dilemma regarding the students' need for privacy and the programs' need for accountability regarding the quality of graduates, and indicated

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that program directors valued students' confidentiality over students' professional accountability. In a later work by Kaslow, et al. (2007), the authors proposed guidelines for recognizing and intervening with impaired students, and stated that personal therapy can be a valuable part of a remediation plan, in that it can aid in understanding the personal challenges that can inhibit the acquisition of particular skills.

However, the use of personal therapy as a remediation strategy is not endorsed by all. Schoener (1999) in his analysis of personal counseling as a remediation strategy, reported that there is no evidence that personal counseling is effective and that mandating it may well be in conflict with the Americans with Disabilities Act. Schoener also suggested that systemically, graduate programs may play a part in the difficulties that the student is experiencing, and that faculty need to be more open to self-examination.

Conclusions

Experiential learning involves direct involvement with the phenomenon being studied. Counselors have a responsibility to be empathic towards their clients, and the ability to be open to their own processes is conducive to achieving this goal. Experiential learning as a client in individual counseling is widely endorsed in the literature, and benefits the counselor, client, and the profession, although the CACREP experiential component is generally satisfied solely by academic group training. While CACREP mandates that students participate in experiences that promote self-exploration and personal growth, guidelines have not been written that address specific methods to achieve these measures. The purpose of this study is to explore the practices and policies of counselor education preparation programs with regard to the experiential training component, specifically the

requirement or lack of requirement of an individual counseling experience for master's-level

counseling students.

CHAPTER THREE

METHODOLOGY

In this chapter, the purpose of the study is restated. The research questions are

presented. A rationale is provided for the use of survey methods in the study. Sampling

procedures and participant selection criteria, the instrumentation and instrument development

process, and data analysis methods are also described.

Purpose of the Study

The American Counseling Association (ACA) and the Council for

Accreditation of Counseling and Related Programs (CACREP) mandate that

experiential training components for master's level counseling students include

personal development, self-exploration, and self-growth (ACA, 2005; CACREP, 2009).

Individual personal therapy has been found consistently and in numerous studies to rank

among the top influences on the key training components of personal development, self-

exploration, and self-growth of counselors (Bemack, Epp, & Keys, 1999; Corey & Corey,

2007; Dearing, Maddox, & Tangney, 2005; Fouad & Hains, 1990; Gilroy, Carroll, & Murra,

2002; Grimmer & Tribe, 2001; Guy, Stark, & Poelstra, 1988; Kline, Falbaum, Pope,

Hargraves, & Hundley, 1997; McEwan, & Duncan, 1993; Murphy, 2005; Norcross, Bike,

Evans, & Schatz, 2008; Rizq & Target, 2008; Williams, Coyle, & Lyons, 1999). A

considerable body of literature exists that endorses an individual counseling experience as a

client as a requirement in counselor preparation programs (Corey & Corey, 2007; Dearing,

Maddux, & Tangney, 2005; Farber, 2000; Fouad & Hains, 1990; Leech, 2007; Norcross,

2000; Norcross, Bike, Evans, & Schatz, 2008; Osborn, Daninhirsch, & Page, 2003), although

some writers have expressed concerns based on ethical, financial, and scheduling issues

(McEwan & Duncan, 1993; Orlinsky, Geller, & Norcross, 2005; Macaskill, 1999; Macran & Schapiro, 1998; Muller, 2005; Rizq & Target, 2008; Strozier & Stacey, 2001; Thorne & Dryden, 1991; Williams, Coyle, & Lyons, 1999; Williams & Irving, 1996; Wiseman & Egozi, 2006). The CACREP standards require a planned group academic experience to fulfill the experiential training component; however, experience as a client in an individual counseling format is not mentioned nor is it equivalent to a planned academic group experience. Despite the effectiveness of individual therapy in stimulating the kind of self-growth demanded in counseling students, it appears that many counselor education programs do not require students to complete an experience as a client in individual counseling (referred to hereafter as a required individual counseling experience, or RICE). There is scant literature addressing the reasons for this discrepancy between the practices that are endorsed in the literature and the actual practices of counselor preparation programs.

In this study, data were obtained from counselor education program coordinators to determine their opinions, modalities for delivery, and policies and practices regarding experiential components of training for master's level counseling students. The purposes of the study were to determine the prevalence of the required experience as a client in individual counseling (RICE), examine the opinions of counselor education program leaders regarding the risks and benefits of experiential training components, determine the modalities used to deliver experiential training components, obtain counselor program coordinators' views on the various modalities, and explore policies and procedures used in counselor education programs with respect to experiential training components. It was hoped that these data might increase understanding of the discrepancy between the strong endorsement in the

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literature of a required individual counseling experience (RICE) for master's level counseling students, and the lack of this requirement in many counselor education programs.

Research Questions

Individual personal therapy consistently has been found to rank among the top influences on personal development, self-exploration, and self-growth of counselors. However, this experiential component of counselor training is required by some but not other counselor education programs. Research questions for this exploratory study included:

1. What are the policies and procedures of counselor education programs regarding a required individual counseling experience?

2. What are the modalities used to deliver experiential training in counselor education programs?

3. Is there a relationship between how strongly program coordinators endorse the benefits of the required individual counseling experience as a client (RICE) and their programs' policies and procedures with respect to requiring the experience?

4. Is there a relationship between how strongly program coordinators endorse the risks of the RICE and their policies and procedures with respect to requiring the experience?

5. Is there a difference between CACREP accredited and non-CACREP accredited counselor education programs with respect to whether or not they require master's level counseling students to complete an individual experience as a client?

6. Is there a difference between program coordinators of CACREP

accredited and non-CACREP accredited programs with respect to how strongly they endorse the benefits of a required individual counseling experience?

7. Is there a difference between program coordinators of CACREP accredited and non-CACREP accredited programs with respect to how strongly they endorse the risks of the required individual experience as a client?

8. For counselor education programs that do not require the RICE, what are the reasons for this decision?

9. For counselor education programs that do require the RICE, how many sessions are required, how is this experience documented, how are the outcomes measured, and to what extent are program coordinators satisfied with the outcomes?

Participants

In order to examine current thinking within counselor preparation programs, those currently preparing others to enter the field of counseling, that is, counselor education program coordinators/chairs/heads/directors were believed to be the best sources of information relevant to the current research questions. According to CACREP (Section I, 2009), individual counselor education programs "have the authority to determine program curricula within the structure of the institution's policies and to establish the operational polices and procedures of the program." Therefore, the target population for this study was program coordinators/chairs/directors/heads of master's-level counselor education programs in the United States. All of the 843 counselor education program

coordinators/chairs/directors/heads, of both CACREP accredited and non-CACREP accredited programs, were contacted. The targeted return rate was approximately 20%, or 200 participants.

Characteristics of the sample.

The target population for this study was 843 counselor education program coordinators/chairs/heads/directors. Two hundred sixty-two participants (262) returned the survey, for a return rate of 31%. Of these returned surveys, 202 were fully completed. Because some returned surveys were missing responses to one or more items, the number of responses to individual items varies.

A slight majority of participants were female (55.6%). Table 1 includes descriptive statistics for the participants' sex.

Table 1
Frequency Distribution of Participants by Sex

Sex	n	%
Female	140	55.6
Male	112	44.4
Total	252	100.0

The vast majority of the participants were Caucasian (85.3%). African Americans comprised 5.6% of the respondents, while 2.8% identified themselves as Asian. American Indian or Alaska Natives comprised less than 1% of the sample, while 1.6% identified themselves as being of Hispanic Origin. Bi-Racial/Multicultural comprised 2.0% of the sample. Those who selected the culture category "other" represented 2.4% of the participants and included the self-descriptors of European, Jewish American, Latin American, Scottish

American, White American, and European American. Table 2 depicts descriptive statistics

for the participants' culture.

Table 2
Frequency Distribution of Participants by Culture

Culture	Frequency	%
American Indian or Alaska Native	1	.4
Asian	7	2.8
Black or African American	14	5.6
Caucasian	214	85.3
Hispanic Origin	4	1.6
Bi-Racial/Multicultural	5	2.0
Other	6	2.4
Total	252	100.0

Participants were asked if they received their doctorate degrees from a CACREP

or CORE accredited program. A slight majority (50.6%) reported that they received their

doctoral degrees from non-CACREP/CORE accredited programs. Table 3 presents

descriptive statistics for their degree program accreditation.

Table 3
Frequency Distribution of Participants by CACREP or CORE Accreditation

Accreditation	Frequency	%
CACREP	116	47.0
Non-CAREP	125	50.6
Do not know	6	2.4
Total	247	100.0

Participants' length of time of doctoral degree status ranged from 1 to 30 years, with a mean of 15.6 years (SD = 8.8). Descriptive statistics for participants' year of receipt of doctoral degree are depicted in Table 4.

Table 4
*Frequency Distribution of Participants by Year of Receipt of Doctoral Degree*_____

Year Received Doctoral	Degree Frequency	%
1979	22	10.1
1980	9	4.1
1981	6	2.8
1982	1	.5
1983	2	.9
1984	8	3.7
1985	3	1.4
1986	4	1.8
1987	5	2.3
1988	4	1.8
1989	2	.9
1990	8	3.7
1991	6	2.8
1992	10	4.6
1993	6	2.8
1994	13	6.0
1995	6	2.8
1996	11	5.0
1997	9	4.1
1998	14	6.4
1999	10	4.6
2000	5	2.3
2001	7	3.2
2002	6	2.8
2003	4	1.8
2004	10	4.6
2005	8	3.7
2006	9	4.1
2007	6	2.8
2008	2	.9
2009	2	.9
Total	218	100.0

Participants' years of experience as the coordinator/ head/director at their

institution ranged from 30 years to less than one year, with a mean of 5.3 years

(SD = 6.7). Descriptive statistics for participants' years of experience as program

director are presented in Table 5.

Table 5
Frequency Distribution of Participants' by Years of Experience as Program Director

Years of Experience	Frequency	%
30	5	2.1
27	2	.9
25	4	1.7
24	2	.9
23	1	.4
20	4	1.7
18	3	1.3
17	1	.4
16	3	1.3
15	11	4.7
14	7	3.0
13	2	.9
12	5	2.1
11	3	1.3
10	16	6.8
9	5	2.1
8	10	4.3
7	15	6.4
6	15	6.4
5	22	9.4
4	20	8.5
3	40	17.1
2	25	10.7
1	11	4.7
Less than 1	2	.9
Total	234	100.0

Participants were asked if the master's program in counseling that they

coordinate is CACREP or CORE-accredited. The majority of the respondents (76.8%)

indentified the program they direct as CACREP or CORE accredited. A frequency

distribution of CACREP or CORE-accreditation status of master's programs in counseling that respondents coordinate is found in Table 6.

Table 6
Frequency Distributions of Participants' CACREP or CORE Program Accreditation

CACREP or CORE Program Accreditation	n	%
Yes	179	76.8
No	54	23.2
Total	233	100.0

Participants were asked to identify the master's level counseling programs that they coordinate/chair/head/direct. Because it is common for program directors to head multiple programs at an institution, totals for the frequencies of responses exceed the total number of respondents. Frequency distributions of counseling programs are listed in Table 7. Clinical Mental Health programs had the highest representation of the participants, with 128 participants directing these programs. School Counseling was represented by 103 participants, followed by Student Affairs Counseling and Marriage, Couple, and Family Counseling, each directed by 39 participants. Twenty-eight (28) respondents directed programs in Rehabilitation Counseling. Addictions Counseling and Career Counseling programs were directed by 10 and 8 participants, respectively. Thirty-four (34) respondents identified themselves as directing programs that were not listed. The text box for "other" responses to this question was inadvertently left out of the *ELCPS* by this researcher; therefore, the identities of these programs are unknown.

Table 7

Frequency Distributions of Participants' Programs That They Direct

Work Setting	n
Career Counseling	8
School Counseling	103
Student Affairs and College Counseling	39
Addiction Counseling	10
Marriage, Couple, and Family Counseling	39
Clinical Mental Health Counseling	128
Rehabilitation Counseling	28
Other	34

Note. Because it is common for program directors to head multiple programs at an institution, totals for the frequencies of responses exceed the total number of respondents.

Participants were asked at what type of academic institution they were employed. Public institutions comprised the largest group (71.4%), followed by Private/Religious Affiliation (20.3%) and Private/non-religious affiliation (8.3%). A frequency distribution of types of academic institutions can be found in Table 8.

Table 8

Frequency Distribution of Types of Academic Institutions

Type of Academic Institution	Frequency	%
Public	155	71.4
Private/religious affiliation	44	20.3
Private/non-religious affiliation	18	8.3
Total	217	100.0

Participants were asked to identify the primary work settings in which they have worked (other than practicum and internship). The most common primary work setting reported was Counselor Educator (n = 201), followed by Private Practice (n = 129) and Community Mental Health Agency (n = 107). Because it is common for counselor educators to have experience in a number of practice settings, totals for the frequencies of responses exceed the total number of respondents. A frequency distribution of primary work settings (other than practicum and internship) can be found in Table 9.

Table 9
Frequency Distribution of Primary Work Settings

Primary Work Setting	n
College Counselor	64
Counselor Educator	201
Community Mental Health Agency	107
Mental Health Hospital	48
Private Practice	129
Substance Abuse Clinic	35
Elementary School	52
Middle School	46
High School	56
Other	59

Note. Since it is common for counselor educators to have experience in a number of practice settings, totals for the frequencies of responses exceed the total number of respondents. A complete list of "other" responses can be found in Appendix D.

Instrumentation

Although previous studies have explored the effectiveness of individual therapy as stimulating the kind of self-growth demanded in counseling students, there is scant literature addressing the prevalence of a required individual counseling experience in the role of client, the opinions of counselor education program leaders regarding the benefits and risks of such an experience, or the modalities employed by programs to fulfill the experiential learning component. No appropriate instrument was found that would measure these constructs;

therefore, a researcher-developed, on-line survey was used to assess the opinions and practices of counselor education program coordinators with respect to the RICE. This instrument, the *Experiential Learning in Counseling Programs Survey* (ELCPS), was used to collect data from the participants.

The ELCPS contains 41 items arranged into four sections: demographic information, opinions, modalities for delivering experiential training, and policies and procedures. Items on the ELCPS were developed based upon previous research studies which examined experiential training in counselor education programs, including group and individual modalities, professional and personal development, benefits and risks of requiring an individual counseling experience, ethical concerns, and the stated research questions.

Section I consisted of nine questions that solicit participants' demographic information. Items 1-9 asked participants to provide information on their sex, culture, and credentials and experience. Section I also solicited information regarding work experience and institutional accreditation.

Section II consisted of 21 items and was designed to gather data about participants' opinions regarding the risks and benefits of requiring an individual counseling experience (RICE) for master's level counseling students. Items 10-30 asked participants about their opinions of individual experiential counseling with regard to professional development and identity, self-growth, self-awareness, and self-exploration. Also included in this section were items that asked participants' opinions as to whether required counseling increases the ability to cope with unresolved issues, cultural awareness, use of self-disclosure, feedback, empathy, verbal communication, and help seeking attitudes; as well as whether the experience normalizes the counselor's role. Finally, Section II asked participants to indicate their

opinions about possible negative outcomes, including psychological risks, ethical dilemmas, and time and financial constraints that students would incur as a result of required experiential counseling.

Section III consisted of five questions to solicit information regarding modalities of delivery of experiential training in participants' counselor education programs, regardless of whether or not these modalities are used in their particular program.   Included in items 31-35 of Section III were opinions about the role of CACREP standards, individual versus group experiential learning, and the influence that faculty can potentially exert on the professional development of counseling students.

Section IV was composed of items 36-39, and was designed to gather data on specific policies and procedures of the participants' counselor education programs with regard to experiential counseling, both individual as well as planned academic group experiences. Participants were asked to indicate how individual experiential counseling is documented and measured if it is indeed required (see Table 28).

Table 10

Instrument Development –Experiential Learning in Counseling Programs Survey

Item #	Literature Reference
1-9	Respondents' Demographic Information
10	Daw & Joseph, 2007; Gilroy, Carroll, & Murra, 2002; Guy, Stark, & Poelstra, 1988; McEwan & Duncan, 1993; Rizq & Target, 2008; Strozier & Stacey, 2001; Williams, Coyle, & Lyons, 1999
11	Gilroy, Carroll, & Murra, 2002; Grimmer & Tribe, 2001; Murphy, 2005; Norcross, Bike, Evans, & Schatz, 2008; Williams, Coyle, & Lyons, 1999; Wiseman & Egozi, 2006
12	McEwan & Duncan, 1993; Orlinsky, Geller, & Norcross, 2005; Williams, Coyle, & Lyons, 1999; Williams & Irving, 1996; Wiseman & Egozi, 2006
13	Buckley, Karasu, & Charles, 1981; Corey & Corey, 2007; Daw & Joseph, 2007; Dearing, Maddox, & Tangney, 2005; Farber, 2000; Gilroy, Carroll, & Murra, 2002; Grimmer & Tribe, 2001; Guy, Stark, & Poelstra, 1988; McEwan & Duncan, 1993; Murphy, 2005; Norcross, Strausser-Kirkland, & Missar, 1988; Rizq & Target, 2008; Williams, Coyle, & Lyons, 1999; Wiseman & Egozi, 2006
14	McEwan & Duncan, 1993; Muller, 2004; Rizq & Target, 2008; Strozier & Stacey, 2001; Thorne & Dryden, 1991; Williams & Irving, 1996; Williams, Coyle, & Lyons, 1999; Wiseman & Egozi, 2006
15	Corey & Corey, 2007; Dearing, Maddox, & Tangney, 2005; Fouad & Hains, 1990; Gilroy, Carroll, & Murra, 2002; Grimmer & Tribe, 2001; Guy, Stark, & Poelstra, 1988; Kline, Falbaum, Pope, Hargraves, & Hundley, 1997; McEwan & Duncan, 1993; Murphy, 2005; Norcross, Bike, Evans, & Schatz, 2008; Rizq & Target, 2008; Williams, Coyle, & Lyons, 1999
16	Butler-Byrd, Nieto, & Senour, 2006; Craven & Kimmell, 2002; Hays, Dean, & Chang, 2007; Ellenwood & Snyders, 2006; Merta, Stringham, & Ponterotto, 1988; Roysicar, Gard, Hubbell, & Ortega, 2005; Williams, Coyle, & Lyons, 1999

Table 10 Continued

Item #	Literature Reference
17	McEwan & Duncan, 1993; Muller, 2004; Thorne & Dryden, 1991; Williams, Coyle, & Lyons, 1999; Williams & Irving 1996
18	Ladany, Walker, & Melincoff, 2001; Pattee & Farber, 2008; Simone, McCarthy, & Skay, 1998; Sloan & Kahn, 2005; Vogel & Wester, 2003
19	McEwan & Duncan, 1993; Macaskill, 1988; Macran & Shapiro, 1988; Muller, 2004; Williams & Irving, 1996
20	Daw & Joseph, 2007; Gilroy, Carroll, & Murra, 2002; Grimmer & Tribe, 2001; Guy, Stark, & Poelstra, 1988; Neukrug & Williams, 1993; McEwan & Duncan, 1993; Norcross, Strausser-Kirkland, & Missar, 1988; Murphy, 2005; Williams, Coyle, Lyons, 1999
21	Gilroy, Carroll, & Murra, 2002; Grimmer & Tribe, 2001; Norcross, Strausser-Kirkland, & Missar, 1988; Murphy, 2005; Williams, Coyle, & Lyons, 1999
22	Dearing, Maddox, & Tangney, 2005; Farber, 2000; Gilroy, Carroll, & Murra, 2002; Grimmer & Tribe, 2001; McEwan & Duncan, 1993; Murphy, 2005; Strozier & Stacey, 2001
23	Dearing, Maddox, & Tangney, 2005; Farber, 2000; Fouad & Hains, 1990; Gilroy, Carroll, & Murra, 2002; Neukrug & Williams, 1993; Norcross, 2000; Norcross, Bike, Evans, & Schatz, 2008
24	Macran & Shapiro, 1998; Patterson & Utesch, 1991
25	Corey & Corey, 2007; Gilroy, Carroll, & Murra, 2002; Murphy, 2005; Neukrug & Williams, 1993; Watkins, 1983; Wiseman & Egozi, 2006
26	Clark, 2004; Daw & Joseph, 2007; Gilroy, Carroll, & Murra, 2002; Grinner & Tribe, 2001; Guy, Stark, & Poelstra, 1988; Neukrug & Williams, 1993; Peebles, 1980; Prochaska & Norcross, 2007; Wiseman & Egozi, 2006

Table 10 Continued

Item	Literature Reference
27	Gilroy, Carroll, & Murra, 2002; Grimmer & Tribe, 2001; Guy, Stark, & Poelstra, 1988; McEwan & Duncan, 1993; Murphy, 2005; Neukrug & Williams, 1993; Norcross, Strausser-Kirkland, & Missar, 1988
28	Macaskill, 1999; McEwan & Duncan, 1993; Norcross, Bike, Evans, & Schatz, 2008
29	Bradley & Post, 1991; Dearing, Maddox, & Tangney, 2005; Osborn, Daninhirsch, & Page, 2003; Patterson & Utesch, 1991; Woodyard & Canada, 1992
30	Dearing, Maddox, & Tangney, 2005; Gilroy, Carroll, & Murra, 2002; Norcross, Bike, Evans, & Schatz, 2008; Patterson & Utesch, 1991
31	Fall & Levitov, 2002; Furr & Barret, 2000; Hatch & McCarthy, 2003; Kline, Falbaum, Pope, Hargraves, & Hundley, 1997; Laux, Smirnoff, Richie, & Cochrane, 2007
32	Froele, Robinson, & Kurpius, 1983; Hawley, 2006; Jordan, 2002; Levitov, Fall, & Jennings, 1999; Rabinowitz, 1997; Smith, 2009; Shurts, Cashwell, Spurgeon, Degges-White, Barrio, & Kardatzke, 2006; Woodward & Yii-Nii, 1999
33	Davenport, 2004; Morrissette & Gadbois, 2006
34	Anderson & Price, 2001; Bleiberg & Baron, 2004; Davenport, 2004; Fouad & Hains, 1990; Furr & Barret, 2000; Holzman, Searight, & Hughes,1996; Kolbert, Morgan, & Brendel, 2002; Morrissette & Gadbois, 2006; Murphy, 2005
35	Dearing, Maddox, & Tangney, 2005; Farber, 1999; Gilroy, Carroll, & Murra, 2002; Norcross, Bike, Evans, & Schatz, 2008; Pope & Tabachnick, 1994; Strozier & Stacey, 2001

Respondents provided specific information for items 1-9 and 36-39; for example,

Item 5 asked, "Approximately how many years have you been in your position as

coordinator/chair/head/director of the counseling program at your institution?" Items 10-35 used a 7-point Likert scale; for example, item 13 stated, "A required experience of participating as a client in individual counseling (at least three sessions) would help master's level counseling students cope with unresolved issues that might hinder the effectiveness of their work with clients." Response choice for this item included; 1 = Strongly Disagree; 2 = Disagree; 3 = Slightly Disagree; 4 = Unsure; 5 = Agree; 6 = Slightly Agree; and 7 = Strongly Agree.

Instrument validation.

An expert panel was used to review the survey items for content validity. The expert panel consisted of nine faculty members from different universities in the United States. The survey was administered by email, and the panel members were asked to provide written feedback, also by email. The results of the panel's feedback regarding the survey, as well as their demographic information, were documented. Minor modifications were made to the survey based on this input.

The nine faculty members who constituted the expert panel were seven females and two males, all of whom are full or associate professors in counselor education. Six participants identified themselves as Caucasian, one Black or African American, one Bi-Racial/Multicultural, and one Other, which was specified as South Asian. Panel members' mean number of years of holding their doctoral degrees was 7.44 (range = 4-16 years). Seven members received their doctorate degrees from CACREP accredited institutions. Accreditation status of panel members' universities where they are currently affiliated included six CACREP accredited and two non-CACREP accredited, and one No Response. Eight members identified the institution where they are employed as Public, and one

member's institution was Private/religious affiliation. Panel members' master's programs that they head included one in School Counseling, three in Student Affairs and College Counseling, one in Marriage, Couple, and Family Counseling, one in Clinical Mental Health Counseling, and one No Response. Panel members' work settings (other than practicum and internship) allowed for more than one response and are listed in Table 11.

Table 11
Expert Panelists' Primary Work Settings Other Than Practicum and Internship

Work Setting	n	%
College Counselor	3	33
Counselor Educator	6	67
Community Mental Health Agency	3	33
Mental Health Hospital	3	33
Private Practice	5	56
Substance Abuse Clinic	2	22
Elementary School	2	22
Middle School	1	11
High School	4	44

The expert panelists suggested that item 9 include CORE accredited programs. The experts also suggested that item 13 concerning what master's program the participants direct be formatted to allow for multiple responses, as a program director can lead multiple programs at an institution. The experts suggested that all responses to questions in the Opinions and Modalities sections be formatted to allow for only one response. All of these suggestions were implemented. Finally, experts suggested that the Modalities section of the *ELCPS* include a more specific explanation of experiential training; as a result, this explanation was included at the beginning of the Modalities section.

Procedures

The word "survey" is used to describe a method of gathering information from a sample of individuals (American Statistical Association, 1980). According to Creswell

(2003), a survey "provides a quantitative or numeric description of trends, attitudes, or opinions of a population by studying a sample of that population (p. 153)." Surveys gather information from a portion of a population of interest, and the sample is scientifically chosen so that each person in the population will have a measureable chance of selection. Thus, the results can be reliably projected from a sample to the larger population.

Researchers today have several different from which to choose when conducting a survey, from traditional paper-and-pencil surveys to Web surveys (Porter, 2004). The increased use of the Internet has had a tremendous impact on the field of survey research. Computer access is omnipresent throughout much of the world, and computer-based research techniques continue to be explored (Reynolds, Woods, & Baker, 2007).

The literature concerning survey research supports the notion that electronic surveys are attractive both academically and commercially because of the cost-saving potential (Boyer, Olson, Calatone, & Jackson, 2002). In regard to project time, paper surveys take the longest, from printing to mailing out, data entry, and return mail (Reynolds, Woods, & Baker, 2007). Electronic surveys are generally created once, sent out, received immediately, and returned in a shorter span of time (Shannon & Bradshaw, 2002). Another advantage of Web-based surveys is that a potentially larger sample is available and this sample can more easily include a vast geographical area (Shannon, Johnson, Searcy, & Lott, 2002).

Response rates are very important because a high response rate increases confidence in the survey's accuracy and generalizability (Cobanoglu, Warde, & Moreo, 2001). However, the literature concerning response rates is contradictory. Some researchers have obtained comparable or even higher response rates using electronic surveys (Shannon & Bradshaw, 2002). The literature regarding response rate indicates that a Web survey is less time-

consuming for the respondent to complete, as less time is spent clicking a mouse than filling out or bubbling in responses. Cook, Heath, and Thompson (2000) found that precontact with potential respondents resulted in higher and less variable response rates for electronic surveys for several reasons, including confirmation of email addresses, reducing the perception of being spammed, and an opportunity to express concerns or decline participation. The issue of validity must also be considered because, although the response rates with electronic surveys are higher, the identity of the respondent is not always known, and the survey could be screened before reaching the intended viewer. This scenario would affect the external validity of the results (Porter, 2004).

Porter (2004) reported that surveys delivered by mail typically have a smaller rate of being undelivered, possibly because they are likely to be forwarded by the USPS. However, when individuals change residences or jobs, their email addresses are typically discontinued without forwarding information. On the other hand, failed delivery of an electronic survey is known almost immediately. Additionally, electronic addresses are not as stable as mail addresses (Shannon & Bradshaw, 2002); electronic addresses often are obtained from membership lists that have been compiled by hand, increasing the rate of human error. Another issue of concern regarding sampling is confidentiality and privacy. The best way to guarantee survey security and participant anonymity is by outsourcing the administration of the online survey to a neutral, third-party research firm, such as Qualtrics™ (McAndrews, 2009).

In conclusion, electronic surveys are more convenient in that they reach the intended respondents when they are at their workstations or at home when using their computers.

Electronic surveys can be completed immediately and cannot be misplaced, unlike paper-and-pencil surveys, and can be discarded electronically. Electronic surveys are less expensive, faster, are accessible to most people, and the data are coded automatically.

The survey was sent to all 843 counselor education program directors listed in *Counselor Preparation, Programs, Faculty, Trends* (Schweiger, Henderson, & Clawson, 2008). Approximately 200 respondents were needed so that results could be generalized to the larger population.

Sampling

The target population for this study was program coordinators/chairs/directors/heads of master's level counselor education programs in the United States. All counselor education programs were targeted, both CACREP-accredited and non-CAREP-accredited.

A survey, the ELCPS, was developed by the researcher (see Appendix A). A letter of transmittal (see Appendix B) and participant consent form (see Appendix C) accompanied all surveys.   Following approval of the study by the dissertation committee, written consent and approval of the Institutional Review Board of the University of New Orleans was obtained.

The on-line survey tool, www.qualtrics.com was used to create and collect survey data. A total of 843 counselor education programs are listed in the Schweiger et al. directory (2008). All program directors of master-level counseling programs were asked to complete the on-line survey. In some instances, multiple individuals from the same institution were asked to participate, because some larger counselor education programs had different faculty members serving as directors of the school counseling, clinical mental health counseling, career counseling, student affairs and college counseling, addiction counseling, and marriage, couple, and family counseling programs, and it is possible that policies and procedures

regarding a RICE may differ from program to program.

Potential participants for the ELCPS were pre-contacted by a generic mass email requesting participation, as this procedure has been shown to increase return rate (Porter & Witcomb, 2007). One week later, another email was sent which included a brief description of the study, a statement regarding participant anonymity, and a consent to participate in the study. The message also provided directions for accessing the ELCPS via a secure electronic link generated by Qualtrics. Thus, participation in the study was completely voluntary and anonymous. No identifying data were collected from the participants, nor were their responses assigned identifying characteristics.

Follow-up email correspondence was sent to potential participants after approximately two weeks, again at three weeks, and at four weeks after initial contact, in order to increase response rate. The response rate was 31%. Receipt of completed data was followed by imputing and analyzing the data in SPSS 16.0. Data were statistically analyzed to answer descriptive questions and inferential statistics addressed relationships and comparisons between variables. A conservative alpha rate of .01 was used to minimize the potential of an inflated error resulting from multiple variables.

Data Analysis

Data analysis for this study used descriptive statistics, correlations, and Chi-Square tests of association.

Research question 1.

What are the policies and procedures of counselor education programs regarding a required individual counseling experience?

Data analysis.

Frequency distributions were calculated on responses to item 36 and 37.

Research question 2.

What are the modalities used to deliver experiential training in counselor education programs?

Data analysis.

Frequency distributions were calculated on responses to items 37 and 39.

Research question 3.

Is there a relationship between how strongly program coordinators endorse the benefits of the required individual counseling experience as a client (RICE) and their programs' policies and procedures with respect to requiring the experience?

Data analysis.

Pearson product moment correlations were used to compare items 10-11, 13, 15-16, 18, 20-23, 25-27, 29, and 30 to item 36.

Research question 4.

Is there a relationship between how strongly program coordinators endorse the risks of the RICE and their policies and procedures with respect to requiring the experience?

Data analysis.

Pearson product moment correlations were used to compare items 12, 14, 17, 19, 24, and 28 to item 36.

Research question 5.

Is there a difference between CACREP-accredited and non-CACREP- accredited

counselor education programs [as measured by item 7] with respect to whether or not they require master's level counseling students to complete an individual counseling experience as a client [as measured by item 36]?

Data analysis.

CACREP accredited and non-CACREP accredited [Item 7] frequency ratings were compared on item 36 using the Chi Square statistic.

Research question 6.

Is there a difference between CACREP-accredited and non-CACREP-accredited programs [as measured by item 7] with respect to how strongly they endorse the benefits of a required counseling experience [as measured by higher scores on items 10-11, 13, 15-16, 18, 20-23, 25-27, 29, and 30]?

Data analysis.

Pearson product moment correlations were used to compare CACREP and non-CACREP programs [item 7] on responses to items 10-11, 13, 15-16, 18, 20-23, 25-27, 29, and 30.

Research question 7.

Is there a difference in CACREP-accredited and non-CACREP-accredited programs [as measured by item 7] with respect to how strongly they endorse the risks of a required counseling experience as a client [as measured by higher scores on items 12, 14, 17, 19, 24, and 28] ?

Data analysis.

Pearson product moment correlations were used to compare CACREP or non-CACREP programs [item 7] on responses to items 12, 14, 17, 19, 24, and 28.

Research question 8.

For counselor education programs that do not require the RICE, what are the reasons for this decision?

Data analysis.

Quantitative and qualitative data analysis methods were used to tabulate responses to item 38 and determine if any common factors exist. Themes were generated using comparison/grounded theory qualitative data analysis. Frequencies of responses were identified.

Research question 9.

For counselor education programs that do require the RICE, how many sessions are required, how is this experience documented, and how are the outcomes measured?

Data analysis.

Quantitative and qualitative data analysis methods were used to tabulate responses to item 39 and determine if any common factors exist. Themes were generated using comparison/grounded theory qualitative data analysis. Frequencies of responses were identified.

CHAPTER FOUR

RESULTS

In this chapter, the results of the study are presented. The purposes of this study were to determine the prevalence of the required experience as a client in individual counseling in master's-level counselor education programs, examine the opinions of counselor education program leaders regarding the risks and benefits of experiential training components, determine the modalities used to deliver experiential training components, obtain counselor education program coordinators' views on the various modalities, and explore policies and procedures used in counselor education programs with respect to experiential training components.

The general research question for this study was: What are the policies and procedures of counselor education program directors regarding an individual counseling experience for master's-level counselor education students?

The *Experiential Learning in Counselor Education Programs Survey (ELCPS),* a 41-item survey created by this researcher to assess the opinions and practices of counselor education program coordinators with respect to a required individual counseling experience (RICE), was the instrument used for data collection. The *ELCPS* is divided into four sections including Demographic Information, Opinions, Modalities for Delivering Experiential Training, and Policies and Procedures. The *ELCPS* was sent via email to 843 counselor education program directors throughout the United States through the on-line survey tool Qualtrics™. A total of 262 directors responded to the survey. Because some participants failed to respond to every survey item, total numbers of responses to each item vary from 202 to 252.

Analysis of the Research Questions

        Research question 1.

        Research Question 1 asked: What are the policies and procedures of counselor education programs regarding a required individual counseling experience? Descriptive statistics were calculated on survey responses for *ELCPS* item 36, which asked the policy of the master's degree program regarding a required individual counseling experience. The frequencies and percentages for each response choice to Item 36 are presented in Table 12. Of the 262 participants, a total of 203 responded to Item 36. Of these respondents, 29 (14.3 %) of their programs had no policy regarding students' participation as a client in individual counseling. Seventy-nine (38.9%) encouraged but did not require students to participate as a client in individual counseling. Nearly equal numbers responded that only some students (e.g., those who are currently in remediation) are encouraged but not required to participate as a client in individual counseling (30; 14.8 %) or that only some students (e.g. those who are currently in remediation) are required to participate as a client in individual counseling (32; 15.8%). Only 33 (16.3%) program directors reported that all students in their programs are required to participate as a client in individual counseling.

Table 12

Frequency Distributions of Participants by Policies and Procedures: Individual Counseling
Experience

Policies and Procedures	n	%
My program has no policy regarding students' participation as a client in individual counseling.	29	14.3
Gaining experience as a client in individual counseling is encouraged but not required.	79	38.9
Only some students (e.g. those who are currently in remediation) are encouraged but not required to participate as a client in individual counseling.	30	14.8
Only some students (e.g. those who are currently in remediation) are required to participate as a client in individual counseling.	32	15.8
All students are required to participate as a client in individual counseling.	33	16.3
Total	203	100.0

Research question 2.

Research Question 2 asked: What are the modalities used to deliver experiential

training in counselor education programs? Descriptive statistics were calculated on survey

responses for *ELCPS* items 37, which asked if the master's level training program required

that students participate in the role as a group member in a planned academic group

experience, and item 39, which asked if the program required an individual counseling

experience (RICE). The frequencies and percentages for each item are presented in Table 13.

The results indicate that of the 203 participants who responded to Item 37, most (193; 95.1%)

responded that their training program requires students to participate in the role as a group

member in a planned academic group experience. By contrast, only 36 (17.6%) of the 204

participants who responded to Item 39 indicated that their training program requires students

to participate in a required individual counseling experience.

Table 13

Frequency Distribution of Experiential Training in Counselor Education Programs

Planned Academic Group Experience	n	%
Yes	193	95.1
No	10	4.9
Total	203	100.0

Required Individual Counseling Experience (RICE)	n	%
Yes	36	17.6
No	168	82.4
Total	204	100.0

Research question 3.

Research Question 3 asked: Is there is a relationship between how strongly

program coordinators endorse the benefits of the RICE and their policies and procedures with

respect to requiring the experience? To test for Research Question 3, frequencies were

calculated for the participants' responses to survey items 10-11, 13, 15-16, 18, 20-23, 25-27,

29, and 30 on the *ELCPS,* which asked participants to indicate the extent of their agreement

or disagreement with statements describing the benefits of the RICE, using a Likert-type

scale with anchored responses at each point. The possible responses included strongly

disagree (1), disagree (2), slightly disagree (3), unsure (4), slightly agree (5), agree (6), and

strongly agree (7). Responses were recoded to allow for easier reading. Frequencies and

percentages for responses to the items describing benefits of a RICE are presented in Table

14.

Table 14

Frequency Distribution for Items 10-11, 13, 15-16, 18, 20-23, 25-27,29, and 30

Item	n	%
Opinions about the Benefits of the RICE		

10. A RICE (at least 3 sessions)
would foster professional development
in master's-level counseling students.

Strongly Disagree	8	3.7
Disagree	8	3.7
Slightly Disagree	5	2.3
Unsure	18	8.3
Slightly Agree	30	13.8
Agree	86	39.6
Strongly Agree	62	28.6

11. A RICE (at least 3 sessions)
would strengthen the ability of
master's-level counseling students
to identify with their clients.

Strongly Disagree	5	2.3
Disagree	6	2.8
Slightly Disagree	4	1.8
Unsure	15	6.9
Slightly Agree	33	15.1
Agree	83	38.1
Strongly Agree	72	33.0

13. A RICE (at least 3 sessions)
would help master's students
cope with unresolved issues
that might hinder the effectiveness
of their work with clients.

Strongly Disagree	3	1.4
Disagree	12	5.6
Slightly Disagree	12	5.6
Unsure	32	15.0
Slightly Agree	44	20.6
Agree	72	33.6
Strongly Agree	39	18.2

79

Table 14 Continued

Item	n	%

15. A RICE (at least 3 sessions) would increase the self-awareness and self-exploration of master's-level counseling students.

Strongly Disagree	5	2.3
Disagree	3	1.4
Unsure	23	10.7
Slightly Agree	49	22.9
Agree	87	40.7
Strongly Agree	47	22.0

16. A RICE (at least 3 sessions) would increase master's-level counseling students' awareness of their cultural assumptions.

Strongly Disagree	4	1.9
Disagree	19	8.9
Slightly Disagree	12	5.6
Unsure	71	33.3
Slightly Agree	51	29.3
Agree	42	19.7
Strongly Agree	14	6.6

18. A RICE (at least 3 sessions) would increase master's-level counseling students' skill in using self-disclosure appropriately with clients.

Strongly Disagree	4	1.9
Disagree	29	13.9
Slightly Disagree	10	4.8
Unsure	60	28.7
Slightly Agree	58	27.8
Agree	43	20.6
Strongly Agree	5	2.4

Table 14 Continued

Item	n	%

20. A RICE (at least 3 sessions)
would increase master's-level
counseling students in understanding
the process and content of counseling.

Strongly Disagree	1	.5
Disagree	4	1.9
Slightly Disagree	1	.5
Unsure	13	6.2
Slightly Agree	42	20.0
Agree	88	41.9
Strongly Agree	61	29.0

21. A RICE (at least 3 sessions) would
normalize the role of counselor for
master's-level counseling students.

Strongly Disagree	2	.9
Disagree	8	3.8
Slightly Disagree	6	2.8
Unsure	30	14.2
Slightly Agree	46	21.8
Agree	85	40.3
Strongly Agree	34	16.1

22. A RICE (at least 3 session) would
increase help-seeking attitudes of
master's-level counseling students.

Strongly Disagree	2	1.0
Disagree	14	6.8
Slightly Disagree	10	4.8
Unsure	54	26.1
Slightly Agree	56	27.1
Agree	55	26.6
Strongly Agree	16	6.1

Table 14 Continued

Item	n	%

23. Master's-level counseling students who participate in a RICE (at least 3 sessions) will attach less stigma to seeking counseling.

	n	%
Strongly Disagree	2	1.0
Disagree	11	5.2
Slightly Disagree	9	4.3
Unsure	44	21.0
Slightly Agree	47	22.4
Agree	71	33.8
Strongly Agree	26	12.4

25. Master's-level counseling students who have participated in a RICE (at least 3 sessions) are less likely to experience professional burnout.

	n	%
Strongly Disagree	14	6.7
Disagree	39	18.6
Slightly Disagree	24	11.4
Unsure	106	50.5
Slightly Agree	15	7.1
Agree	7	3.3
Strongly Agree	5	2.4

26. Master's-level counseling students who have participated in a RICE (at least 3 sessions) will be more empathic towards their clients.

	n	%
Strongly Disagree	3	1.4
Disagree	12	5.8
Slightly Disagree	7	3.4
Unsure	55	26.6
Slightly Agree	70	33.8
Agree	47	22.7
Strongly Agree	13	6.3

Table 14 Continued

Item	n	%

27. Master's-level counseling students would benefit from a RICE (at least 3 sessions) by observing *their* counselor model effective counseling skills and techniques.

	n	%
Strongly Disagree	1	.5
Disagree	5	2.4
Slightly Disagree	7	3.4
Unsure	26	12.5
Slightly Agree	67	32.2
Agree	79	38.0
Strongly Agree	23	11.1

29. Having master's-level counseling students participate in a RICE (at least 3 sessions) would be ethical if prospective students were fully informed that this is a program requirement.

	n	%
Strongly Disagree	2	1.0
Disagree	5	2.4
Slightly Disagree	8	3.8
Unsure	14	6.7
Slightly Agree	29	13.9
Agree	88	42.1
Strongly Agree	63	30.1

Table 14 Continued

Item	n	%

30. Having master's-level counseling students participate in a RICE (at least 3 sessions) would be acceptable if arrangements could be made for students to receive counseling at no fee and at a facility that is not affiliated with the counseling program.

Strongly Disagree	2	1.0
Disagree	10	4.8
Slightly Disagree	9	4.3
Unsure	13	6.2
Slightly Agree	36	17.2
Agree	86	41.1
Strongly Agree	53	25.4

Means and standard deviations for items 10-11, 13, 15-16, 18, 20-23, 25-27, 29, and 30 were also calculated to help answer Research Question 3 and are presented in Table 15. A higher mean indicates a stronger agreement with the statement regarding the benefits of the RICE; lower means indicate a stronger disagreement. For the purposes of describing the results, mean scores between 5.5 and 6.49 were considered to indicate that participants "agree" with an item, mean scores between 4.5 and 5.49 were considered to indicate that the participants "slightly agree," and mean scores between 3.5 and 4.49 were considered to indicate that participants were "unsure."

Mean scores above 5.5 on items 10, 11, 15, 20, 29, and 30 indicate that participants "agree" with the statements that a RICE would increase understanding of the process and content of counseling ($M = 5.85$, $SD = 1.90$), would be ethical if prospective students were fully informed that it is a program requirement ($M = 5.77$, $SD = 1.28$), would increase students' ability to identify with clients ($M = 5.76$, $SD = 1.37$), would increase self-

awareness and self-exploration ($M = 5.64$, $SD = 1.12$), would be acceptable if arrangements could be made for students to receive counseling for no fee at a facility not affiliated with the program, ($M = 5.59$, $SD = 1.38$), and would foster professional development ($M = 5.58$, $SD = 1.52$).

Mean scores on items 13, 16, 21, 22, 23, 26, and 27 indicate that participants "slightly agree" with the statements that a RICE would normalize the role of counselor ($M = 5.37$, $SD = 1.29$), that students would benefit by observing their counselor model effective skills and techniques ($M = 5.32$, $SD = 1.13$), that a RICE would help counseling students cope with unresolved issues that might hinder their effectiveness as counselors ($M = 5.21$, $SD = 1.46$), that students who participate in a RICE would attach less stigma to counseling ($M = 5.10$, $SD = 1.36$), would increase help-seeking attitudes of master's-level counseling students ($M = 4.82$, $SD = 1.33$), that students will be more empathic towards their clients as a result of a RICE ($M = 4.79$, $SD = 1.26$), and that a RICE would increase awareness of cultural assumptions ($M = 4.54$, $SD = 1.39$).

Participants indicated that they were "unsure" about only two potential benefits: that a RICE would increase master's-level counseling students' skill in using self-disclosure appropriately with clients ($M = 4.38$, $SD = 1.39$), and that students who participate in a RICE would be less likely to experience professional burnout ($M = 3.52$, $SD = 1.29$). None of the items that described potential benefits received a mean score that would indicate any level of disagreement with the item.

Table 15

Means and Standard Deviations for Items 10-11, 13, 15-16, 18, 20-23, 25-27, 29, and 30

Item	n	*M*	*SD*
Opinions About the Benefits of the RICE			
10. A RICE (at least 3 sessions) would foster professional development in master's-level counseling students.	217	5.58	1.52
11. A RICE (at least 3 sessions) would strengthen the ability of master's-level counseling students to identify with their clients.	218	5.76	1.37
13. A RICE (at least 3 sessions) would help master's students cope with unresolved issues that might hinder the effectiveness of their work with clients.	214	5.21	1.46
15. A RICE (at least 3 sessions) would increase the self-awareness and self-exploration of master's-level counseling students.	214	5.64	1.12
16. A RICE (at least 3 sessions) would increase master's-level counseling students' awareness of their cultural assumptions.	213	4.54	1.39
18. A RICE (at least 3 sessions) would increase master's-level counseling students' skill in using self-disclosure appropriately with clients.	209	4.38	1.40
20. A RICE (at least 3 sessions) would increase master's-level counseling students in understanding the process and content of counseling.	210	5.85	1.90

Table 15 Continued

Item	n	*M*	*SD*
21. A RICE (at least 3 sessions) would normalize the role of counselor for master's-level counseling students.	211	5.37	1.29
22. A RICE (at least 3 session) would increase help-seeking attitudes of master's-level counseling students.	207	4.82	1.33
23. Master's-level counseling students who participate in a RICE (at least 3 sessions) will attach less stigma to seeking counseling.	210	5.00	1.36
25. Master's-level counseling students who have participated in a RICE (at least 3 sessions) are less likely to experience professional burnout.	210	3.52	1.29
26. Master's-level counseling students who have participated in a RICE (at least 3 sessions) will be more empathic towards their clients.	207	4.79	1.26
27. Master's-level counseling students would benefit from a RICE (at least 3 sessions) by observing *their* counselor model effective counseling skills and techniques.	208	5.32	1.13
29. Having master's-level counseling students participate in a RICE (at least 3 sessions) would be ethical if prospective students were fully informed that this is a program requirement.	209	5.77	1.77

Table 15 Continued

Item	n	*M*	*SD*
30. Having master's-level counseling students participate in a RICE (at least 3 sessions) would be acceptable if arrangements could be made for students to receive counseling at no fee and at a facility that is not affiliated with the counseling program.	209	5.59	1.38

Note. Strongly Disagree = 1, Disagree = 2, Slightly Disagree = 3, Unsure = 4, Slightly Agree = 5, Agree = 6, Strongly Agree = 7

To investigate whether there is a relationship between the strength of program coordinators' endorsements of the benefits of the RICE (items 10-11, 13, 15-16, 18, 20-23, 25-27, 29, and 30) and their programs' policies and procedures with respect to requiring it (item 36), 15 Pearson product moment correlations were calculated using the participants' policies and procedures scores and the endorsements of benefits scores. To minimize the potential for a Type 1 error, a conservative *p* level of .01 was used. The results of these correlations are presented in Table 16.

A significant negative correlation was found (r = -.21, p = .003) between the policies and procedures of counselor education program directors regarding a RICE and their opinions that a RICE would foster professional development in master's-level students. Counselor education program leaders' strength of endorsement of the potential benefit of fostering professional development is negatively correlated to their policies and procedures with regard to requiring a RICE. In other words, the more strongly program directors endorsed the benefit of fostering professional development, the less likely were their programs to require a RICE.

A significant negative correlation was found (r = -.18, p = .009) between policies and procedures of counselor education program leaders regarding a RICE and their opinions that a RICE would strengthen the ability of students to identify with their clients. Counselor education program leaders' strength of agreement with the statement that a RICE would strengthen the ability of students to identify with their clients is negatively correlated to their policies and procedures regarding a RICE. In other words, the more strongly program directors endorsed the benefit of strengthening the ability to identify with clients, the less likely were their programs to require a RICE.

No correlation was found (r = -.15, p = .038) between policies and procedures regarding a RICE and the potential benefit that a RICE would help students cope with unresolved issues. No relationship was found between the strength of counselor education program leaders' endorsement of the benefit of helping students cope with unresolved issues and their policies and procedures regarding a RICE.

A significant negative correlation was found (r = -.18, p = .009) between policies and procedures of counselor education program leaders regarding a RICE and their opinions that a RICE would increase self-awareness and self-exploration of master's-level counseling students. The strength of counselor education program leaders' endorsement of the statement that a RICE would increase self-awareness and self-exploration of counseling students is negatively correlated to their policies and procedures with regard to requiring the RICE. In other words, the more strongly program directors endorsed the benefit of increasing self-awareness and self-exploration, the less likely were their programs to require a RICE.

No correlation was found (r = -.17, r = .017) between the strength of counselor education program directors' endorsement of the statement that a RICE would increase

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counseling students' awareness of their cultural assumptions and their policies and procedures with regard to requiring it. No relationship was found between the strength of counselor education program leaders' endorsement of the statement that a RICE would increase students' awareness of their cultural assumptions is not correlated to their policies and procedures with regard to requiring it.

No correlation was found ($r = -.001$, $p = .985$) between policies and procedures of counselor education program leaders regarding a RICE and the potential benefit that a RICE would increase the use of self-disclosure appropriately with clients. No relationship was found between the strength of counselor education program leaders' endorsement of the appropriate use of self-disclosure with clients and their policies and procedures regarding a RICE.

No correlation was found ($r = -.14$, $p = .046$) between policies and procedures of counselor education program leaders regarding a RICE and the potential benefit that a RICE would increase in understanding the process and content of counseling. No relationship was found between the strength of counselor education program leaders' endorsement of increasing in understanding the process and content of counseling and their policies and procedures regarding a RICE.

A significant negative correlation was found ($r = -.18$, $p = .000$) between policies and procedures of counselor education program leaders regarding a RICE and their opinion that a RICE would normalize the role of counselor for counseling students. The strength of counselor education program leaders' endorsement of the statement that a RICE would normalize the role of counselor for counselor education students is negatively correlated to their policies and procedures with regard to requiring the RICE. In other words, the more

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strongly program leaders endorsed the benefit of normalizing the role of counselor, the less likely were their programs to require a RICE.

A significant negative correlation was found (r = -.18, p = .008) between policies and procedures of counselor education program leaders regarding a RICE and their opinions that a RICE would increase help-seeking attitudes of counseling students. The strength of counselor education program leaders' endorsement of the statement that a RICE would increase the help-seeking attitudes of counseling students is negatively correlated to their policies and procedures with regard to requiring the RICE. In other words, the more strongly program leaders endorsed the benefit of increasing the help-seeking attitudes of counseling students, the less likely were their programs to require a RICE.

No correlation was found (r = -.11, p = .111) between policies and procedures regarding a RICE and the potential benefit that a RICE would help counseling students attach less stigma to counseling. No relationship was found between the strength of counselor education program leaders' endorsement of the benefit of helping counseling students attach less stigma to counseling and their policies and procedures regarding a RICE.

No correlation was found (r = -.181, p = .011) between policies and procedures regarding a RICE and the potential benefit that a RICE would reduce the likelihood of professional burnout. No relationship was found between the strength of counselor education program leaders' endorsement of the benefit of reducing the likelihood of professional burnout for counseling students and their policies and procedures regarding a RICE.

A small significant negative correlation was found (r = -.184, p = .010) between policies and procedures of counselor education program directors regarding a RICE and their opinions concerning the development of empathy in master's-level students. In other words,

counselor education program leaders' opinions regarding the development of empathy in counselor education students is negatively correlated to their practices and procedures with regard to requiring a RICE. A weak inverse relationship was found between these two variables.

No correlation was found ($r = -.15$, $p = .032$) between policies and procedures of counselor education program leaders regarding a RICE and the potential benefit that a RICE would benefit students by observing counseling skills and techniques. No relationship was found between the strength of counselor education program leaders' endorsement of the benefit of students observing counseling skills and techniques and their policies and procedures regarding a RICE.

A significant negative correlation was found ($r = -.20$, $p = .004$) between policies and procedures of counselor education program leaders regarding a RICE and their opinions that the RICE would be ethical if prospective students were fully informed of the program requirement. The strength of counselor education program leaders' endorsement of the statement that a RICE would be ethical if prospective students were fully informed of the program requirement is negatively correlated to their policies and procedures with regard to requiring the RICE. In other words, the more strongly program leaders endorsed the benefit of the RICE being ethical if prospective students were fully informed of the program requirement, the less likely were their programs to require a RICE.

No correlation was found ($r = -.09$, $p = .224$) between policies and procedures of counselor education program leaders regarding a RICE and the potential benefit that a arrangements would be made for students to receive the counseling at no fee and at a facility that is not affiliated with the counseling program. No relationship was found between the

strength of counselor education program leaders' endorsement of the benefit that

arrangements would be made for students to receive counseling at no fee and at a facility that

is not affiliated with the counseling program, and their policies and procedures regarding a

RICE.

Table 16

Pearson Correlation Results of Participants' Scores of Policies and Procedures and
Endorsements of Benefits

<u>Policies and Procedures</u>

Items	Pearson Correlation	Sig. (2-tailed)
10. A RICE (at least 3 sessions) would foster professional development in master's-level counseling students.	-.21*	.003
11. A RICE (at least 3 sessions) would strengthen the ability of master's-level counseling students to identify with their clients.	-.18*	.015
13. A RICE (at least 3 sessions) would help master's students cope with unresolved issues that might hinder the effectiveness of their work with clients.	-.15	.038
15. A RICE (at least 3 sessions) would increase the self-awareness and self-exploration of master's-level counseling students.	-.18*	.009
16. A RICE (at least 3 sessions) would increase master's-level counseling students' awareness of their cultural assumptions.	-.17	.017
18. A RICE (at least 3 sessions) would increase master's-level counseling students' skill in using self-disclosure appropriately with their clients.	-.00	.985
20. A RICE (at least 3 sessions) would increase master's-level counseling students in understanding the process and content of counseling.	-.14	.046

Table 16 Continued

Items	Pearson Correlation	Sig. (2-tailed)
21. A RICE (at least 3 sessions) would normalize the role of counselor for master's-level counseling students.	-.18*	.008
22. A RICE (at least 3 session) would increase help-seeking attitudes of master's-level counseling students.	-.11	.123
23. Master's-level counseling students who participate in a RICE (at least 3 sessions) will attach less stigma to seeking counseling.	-.11	.111
25. Master's-level counseling students who have participated in a RICE (at least 3 sessions) are less likely to experience professional burnout.	-.17	.013
26. Master's-level counseling students who have participated in a RICE (at least 3 sessions) will be more empathic towards their clients.	-.18*	.009
27. Master's-level counseling students would benefit from a RICE (at least 3 sessions) by observing *their* counselor model effective counseling skills and techniques.	-.15	.032
29. Having master's-level counseling students participate in a RICE (at least 3 sessions) would be ethical if prospective students were fully informed that this is a program requirement.	-.20*	.004

Table 16 Continued

Items	Pearson Correlation	Sig. (2-tailed)
30. Having master's-level counseling students participate in a RICE (at least 3 sessions) would be acceptable if arrangements could be made for students to receive counseling at no fee and at a facility that is not affiliated with the counseling program.	-.09	.224

n=195

Correlation is significant at the .01 level (2-tailed)

Research question 4.

Research Question 4 asked: Is there a relationship between how strongly program coordinators endorse the risks of the RICE and their policies and procedures with respect to requiring the experience? To test for Research Question 4, frequencies were calculated for the participants' responses to survey items 12, 14, 17, 19, 24, and 28 on the *ELCPS,* which asked participants to respond to statements describing their opinions about the risks of the RICE using a Likert-type scale with anchored responses at each point. The possible responses included strongly disagree (1), disagree (2), slightly disagree (3), unsure (4), slightly agree (5), agree (6), and strongly agree (7). Responses were recoded to allow for easier reading in the table. Frequencies and percentages for responses are depicted in Table 17.

Table 17

Frequency Distribution for Items 12, 14, 17, 19, 24, and 28

Item	n	%
Opinions About the Risks of the RICE		

12. Having master's-level counseling students participate in a RICE (at least 3 sessions) would preclude them from making the choice and personal commitment to counseling that are essential for gaining real benefit from it.

	n	%
Strongly Disagree	30	14.1
Disagree	79	35.7
Slightly Disagree	28	13.1
Unsure	33	15.5
Slightly Agree	23	10.8
Agree	16	7.5
Strongly Agree	7	5.3

14. Because the outcome of a RICE (at least 3 sessions) cannot be predicted for master's-level counseling students, a negative outcome is possible.

	n	%
Strongly Disagree	3	1.4
Disagree	18	8.4
Slightly Disagree	14	6.5
Unsure	17	7.9
Slightly Agree	56	26.2
Agree	94	43.9
Strongly Agree	12	5.6

Table 17 Continued

Item	n	%

17. Having master's-level counseling students participate in a RICE (at least 3 sessions) is risky because personal development cannot be forced.

	n	%
Strongly Disagree	13	6.2
Disagree	51	24.3
Slightly Disagree	38	18.1
Unsure	16	7.6
Slightly Agree	51	24.3
Agree	29	13.8
Strongly Agree	12	5.7

19. Having master's-level counseling students participate in a RICE (at least 3 sessions) would be unethical because it would put the students in a vulnerable position as clients.

	n	%
Strongly Disagree	49	23.3
Disagree	90	42.9
Slightly Disagree	27	12.9
Unsure	17	8.1
Slightly Agree	15	7.1
Agree	8	3.8
Strongly Agree	4	1.9

24. Having master's-level counseling students participate in a RICE (at least 3 sessions) is not advisable because faculty would have no way of verifying the outcome of the experience without breaching student confidentiality.

	n	%
Strongly Disagree	29	13.9
Disagree	105	50.5
Slightly Disagree	22	10.6
Unsure	19	9.1
Slightly Agree	11	5.3
Agree	14	6.7
Strongly Agree	8	3.8

Table 17 Continued

Item	n	%

28. It would be unreasonable to
ask master's-level counseling
students to be responsible for
the expense and time involved
in a RICE (at least 3 sessions).

Item	n	%
Strongly Disagree	23	11.1
Disagree	56	26.9
Slightly Disagree	35	16.8
Unsure	18	8.7
Slightly Agree	37	8.7
Agree	25	12.0
Strongly Agree	14	6.7

Means and standard deviations for items 12, 14, 17, 19, 24, and 28 also were

calculated to help answer Research Question 4 and are presented in Table 18. A higher mean

indicates a stronger agreement with the statement regarding the risks of the RICE; lower

means indicate a stronger disagreement. For the purposes of describing the results, mean

scores between 4.5 and 5.49 were considered to indicate that participants "slightly agree"

with an item, while mean scores between 3.5 and 4.49 were considered to indicate that

participants were "unsure" about an item, and means scores of 2.5 and 3.49 were considered

to indicate that participants "slightly disagree."

The mean score on item 14 indicates that participants "slightly agree" with the

statement that a negative outcome of a RICE is possible because the result cannot be

predicted ($M = 5.03$, $SD = 1.41$).

Mean scores on items 12, 19, and 24 indicate that participants "slightly disagree" with

the statements that a RICE would preclude students from making the choice and personal

commitment essential for gaining real benefit from it ($M = 3.09$, $SD = 1.65$), would not be

advisable because faculty would have no way of verifying the outcome without breaching student confidentiality ($M = 2.77$, $SD = 1.60$), and would be unethical because it would put students in a vulnerable positions as clients ($M = 2.52$, $SD = 1.47$).

Participants indicated that they were "unsure" about two potential risks: that a RICE would be risky because personal development cannot be forced ($M = 4.00$, $SD = 1.73$), and that it would be unreasonable to ask master's-level counseling students to be responsible for the expense and time involved ($M = 3.58$, $SD = 1.83$).

Table 18

Means and Standard Deviations for Items 12, 14 ,17, 19 ,24, and 28

Item	n	*M*	*SD*
Opinions about the Risks of the RICE			
12. Having master's-level counseling students participate in a RICE (at least 3 sessions) would preclude them from making the choice and personal commitment to counseling that are essential for gaining real benefit from it.	213	3.09	1.65
14. Because the outcome of a RICE (at least 3 sessions) cannot be predicted for master's-level counseling students, a negative outcome is possible.	214	5.03	1.41
17. Having master's-level counseling students participate in a RICE (at least 3 sessions) is risky because personal development cannot be forced.	210	4.00	1.73
19. Having master's-level counseling students participate in a RICE (at least 3 sessions) would be unethical because it would put the students in a vulnerable position as clients.	210	2.52	1.47
24. Having master's-level counseling students participate in a RICE (at least 3 sessions) is not advisable because faculty would have no way of verifying the outcome of the experience without breaching student confidentiality.	208	2.77	1.60

Table 18 Continued

Item	n	*M*	*SD*
28. It would be unreasonable to ask master's-level counseling students to be responsible for the expense and time involved in a RICE (at least 3 sessions).	208	3.58	1.83

Note. Strongly Disagree=1, Disagree=2 ,Slightly Disagree=3, Unsure=4, Slightly Agree=5, Agree=6, Strongly Agree=7

To investigate whether there is a relationship between the strength of program coordinators' endorsement of the risks of the RICE (items 12, 14, 17, 19, 24, and 28), and their programs' policies and procedures with respect to requiring it (item 36), 6 Pearson product correlations were calculated using the participants' policies and procedures scores and the endorsements of risks scores. The results of these correlations are presented in Table 19. Item 36 (policies and procedures regarding the RICE) was correlated with items 12, 14, 17, 19, 24, and 28 (risks of the RICE). In order to minimize the potential of a Type 1 error, a conservative *p* level of .01 was used.

No correlation was found (r = .12, p = .088) between the strength of counselor education program leaders' endorsement of the statement that a RICE would preclude students from making the choice and personal commitment necessary to gain any benefit and their policies and procedures with regard to requiring it. No relationship was found between the strength of participants' endorsement of the potential risk that a RICE would preclude students from making the personal commitment to counseling and their policies and procedures with regard to requiring it.

No correlation was found (r = .12, p = .084) between the strength of counselor education program directors' endorsement of the statement that a RICE would be risky

because a negative outcome is possible and their policies and procedures with regard to requiring it. No relationship was found between the strength of participants' endorsement of the risk of a possible negative outcome and their policies and procedures with regard to requiring it.

A significant positive correlation was found (r = .19, p = .007) between policies and procedures of counselor education program leaders regarding a RICE and their endorsement of the statement that a RICE would be risky because personal development cannot be forced. In other words, the more strongly program directors endorsed the statement that a RICE would be risky because personal development cannot be forced, the more likely were their programs to require a RICE.

A significant positive correlation was found (r = .33, p = 000) between policies and procedures regarding a RICE and participants' endorsement of the statement that a RICE would be unethical because it would risk putting students in a vulnerable position as clients. In other words, the more strongly program directors opinions endorsed the statement that a RICE would be unethical because it would put students in a vulnerable position as clients, the more likely were their programs to require a RICE..

A significant positive correlation was found (r = .27, p = .000) between policies and procedures of counselor education program leaders regarding a RICE and their endorsement of the statement that program faculty could not verify the outcome without breaching student confidentiality.   In other words, the more strongly program leaders endorsed the statement that program faculty could not verify the outcome of a RICE without breaching student confidentiality, the more likely were their programs to require a RICE

A significant positive correlation was found (r = .18, p = .009) between policies and procedures regarding a RICE and program directors' endorsement of the statement that it would be unreasonable to expect students to be responsible for the expense and time involved in a RICE. In other words, the more strongly counselor education program leaders endorsed the statement that it would be unreasonable to expect students to be responsible for the expense and time involved in a RICE, the more likely were their programs to require a RICE.

Table 19

Pearson Correlation Results of Participants' Scores of Policies and Procedures and Endorsements of Risks

Policies and Procedures

Items	Pearson Correlation	Sig. (2-tailed)
12. Having master's-level Counseling students participate in a RICE (at least 3 sessions) would preclude them from making the choice and personal commitment to counseling that are essential for gaining real benefit from it.	.12	.088
14. Because the outcome of a RICE (at least 3 sessions) cannot be predicted for master's-level counseling students, a negative outcome is possible.	.12	.084
17. Having master's-level counseling students participate in a RICE (at least 3 sessions) is risky because personal development cannot be forced.	.20*	.004
19. Having master's-level students participate in a RICE (at least 3 sessions) would be unethical because it would put the students in a vulnerable position as clients.	-.33*	.000
24. Having master's-level counseling students participate in a RICE (at least 3 sessions) is not advisable because faculty would have no way of verifying the outcome of the experience without breaching student confidentiality.	.27*	.000

Table 19 Continued

Items	Pearson Correlation	Sig. (2-tailed)
28. It would be unreasonable to ask master's-level counseling students to be responsible for the expense and time involved in a RICE (at least 3 sessions).	.18*	.009

n = 202
Correlation is significant at the .01 level (2-tailed)

Research question 5.

Research Question 5 asked: Is there a difference between CACREP-accredited and

non-CACREP-accredited programs with respect to whether or not they require master's-

level counseling students to complete an individual counseling experience as a client? To

investigate whether CACREP and non-CACREP accredited programs (item 7) differ in

whether they require a RICE (item 36), chi-square statistics were used. First, accreditation

status (item 7) was compared on item 36 using a chi-square test. In order to minimize the

potential of a Type I error, a conservative p level of .01 was used. The chi-square results are

shown in Table 20. These results indicate that there is no difference between CACREP-

accredited and non-CACREP- accredited institutions with respect to whether they require the

RICE ($\chi^2 = 5.27$, $df = 4$, $p > .05$).

Table 20

Chi-square Analysis of the RICE Between CACREP and non-CACREP Accredited Institutions

		Required Individual Counseling Experience (RICE)			
Variable	n	Yes	No	χ^2	*p*
				5.27	.26
Accreditation					
CACREP	152	22	130		
Non-CACREP	48	10	38		
Total	200	32	168		

Research question 6.

Research Question 6 asked: Is there a difference between CACREP-accredited and non-CACREP-accredited programs in how strongly their program directors endorse the benefits of the RICE? To test for Research Question 6, frequencies were calculated for the participants' responses to survey items 10-11, 13, 15-16, 18, 20-23, 25-27, 29, and 30 on the *ELCPS,* which asked participants to describe the extent to which they endorsed the benefits of the RICE using a Likert-type scale with anchored responses at each point. The possible responses included strongly disagree (1), disagree (2), slightly disagree (3), unsure (4), slightly agree (5), agree (6), and strongly agree (7). Responses were recoded to allow for easier reading in the table. Responses are depicted in Table 21.

Table 21

Frequency Distribution for Items 10-11, 13, 15-16 ,18, 20-23, 25-27, and 30

Item	CACREP	%	non-CACREP	%
Opinions about the Benefits of the RICE				
10. A RICE (at least 3 sessions) would foster professional development in master's-level counseling students.				
Strongly Disagree	5	3.1	3	5.7
Disagree	7	4.4	1	1.9
Slightly Disagree	4	2.5	1	1.9
Unsure	12	7.5	5	9.4
Slightly Agree	23	14.5	7	13.2
Agree	84	41.5	18	34.0
Strongly Agree	42	26.4	18	34.0
Total	177	100.0	37	100.0
11. A RICE (at least 3 sessions) would strengthen the ability of master's-level counseling students to identify with their clients.				
Strongly Disagree	4	2.5	1	1.9
Disagree	5	3.1	1	1.9
Slightly Disagree	3	1.9	0	0.0
Unsure	8	5.0	6	11.5
Slightly Agree	28	17.4	5	9.6
Agree	62	38.5	19	36.5
Strongly Agree	51	31.7	20	38.5
Total	161	100.0	52	100.0

Table 21 Continued

Item	CACREP	%	non-CACREP	%

13. A RICE (at least 3 sessions)
would help master's students
cope with unresolved issues
that might hinder the effectiveness
of their work with clients.

	CACREP	%	non-CACREP	%
Strongly Disagree	3	1.9	0	0.0
Disagree	10	6.3	2	4.0
Slightly Disagree	8	5.0	8	6.0
Unsure	24	15.1	6	12.0
Slightly Agree	32	20.1	12	24.0
Agree	57	35.8	13	26.0
Strongly Agree	25	15.7	14	28.0
	159	100.0	50	100.0

15. A RICE (at least 3 sessions) would
increase the self-awareness and self-
exploration of master's-level counseling
students.

	CACREP	%	non-CACREP	%
Strongly Disagree	0	0.0	0	0.0
Disagree	5	3.1	0	0.0
Slightly Disagree	3	1.9	0	0.0
Unsure	13	8.2	8	16.0
Slightly Agree	35	22.0	12	24.0
Agree	69	43.4	17	34.0
Strongly Agree	34	21.4	13	26.0
Total	159	100.0	50	100.0

16. A RICE (at least 3 sessions)
would increase master's-level
counseling students' awareness
of their cultural assumptions.

	CACREP	%	non-CACREP	%
Strongly Disagree	2	1.3	2	4.0
Disagree	8	11.4	1	2.0
Unsure	19	31.0	19	38.0
Slightly Agree	39	24.7	11	22.0
Agree	30	16.8	11	22.0
Strongly Agree	11	6.1	3	6.0
Total	158	100.0	50	100.0

Table 21 Continued

Item	CACREP	%	non-CACREP	%

18. A RICE (at least 3 sessions) would increase master's-level counseling students' skill in using self-disclosure appropriately with clients.

	CACREP	%	non-CACREP	%
Strongly Disagree	3	1.9	1	2.0
Disagree	22	14.2	6	12.0
Slightly Disagree	5	3.2	5	10.0
Unsure	45	29.0	13	26.0
Slightly Agree	46	29.7	11	22.0
Agree	31	20.0	12	24.0
Strongly Agree	3	1.9	2	4.0
Total	155	100.0	50	100.0

20. A RICE (at least 3 sessions) would increase master's-level counseling students in understanding the process and content of counseling.

	CACREP	%	non-CACREP	%
Strongly Disagree	1	.6	0	0
Disagree	4	2.6	0	0
Slightly Disagree	1	.6	0	0
Unsure	8	5.1	4	8.0
Slightly Agree	32	20.5	9	18.0
Agree	65	41.7	22	44.0
Strongly Agree	45	28.0	15	30.0
Total	156	100.0	50	100.0

21. A RICE (at least 3 sessions) would normalize the role of counselor for master's-level counseling students.

	CACREP	%	non-CACREP	%
Strongly Disagree	1	.6	1	2.0
Disagree	7	4.5	1	2.0
Slightly Disagree	3	1.9	3	5.9
Unsure	21	13.5	8	15.7
Slightly Agree	36	23.1	10	19.6
Agree	64	41.0	19	37.3
Strongly Agree	24	15.4	9	17.6
Total	156	100.0	51	100.0

Table 21 Continued

Item	CACREP	%	non-CACREP	%

22. A RICE (at least 3 session) would
increase help-seeking attitudes of
master's-level counseling students.

	CACREP	%	non-CACREP	%
Strongly Disagree	1	.7	1	2.0
Disagree	10	6.6	4	7.8
Slightly Disagree	7	4.6	3	5.9
Unsure	40	26.3	12	23.5
Slightly Agree	41	27.0	13	25.5
Agree	41	27.0	14	27.5
Strongly Agree	12	7.9	4	7.8
Total	152	100.0	51	100.0

23. Master's-level counseling
students who participate in
a RICE (at least 3 sessions)
will attach less stigma to
seeking counseling.

	CACREP	%	non-CACREP	%
Strongly Disagree	1	.6	1	2.0
Disagree	6	3.9	5	9.8
Slightly Disagree	6	3.9	3	5.9
Unsure	32	20.6	9	17.6
Slightly Agree	35	22.6	11	21.6
Agree	54	34.8	17	33.3
Strongly Agree	21	13.5	5	9.8
Total	155	100.0	51	100.0

25. Master's-level counseling students
who have participated in a RICE (at
least 3 sessions) are less likely to
experience professional burnout.

	CACREP	%	non-CACREP	%
Strongly Disagree	10	6.5	4	7.8
Disagree	26	16.8	13	25.5
Slightly Disagree	17	11.0	7	13.7
Unsure	81	52.3	3	5.9
Slightly Agree	12	7.7	3	5.9
Agree	5	3.2	2	3.9
Strongly Agree	4	2.6	1	2.0
Total	155	100.0	51	100.0

Table 21 Continued

Item	CACREP	%	non-CACREP	%

26. Master's-level counseling students who have participated in a RICE (at least 3 sessions) will be more empathic towards their clients.

	CACREP	%	non-CACREP	%
Strongly Disagree	2	1.3	1	2.0
Disagree	9	5.9	3	5.9
Slightly Disagree	5	3.3	2	3.9
Unsure	36	23.5	16	31.4
Slightly Agree	56	36.6	14	27.5
Agree	33	21.6	14	27.5
Strongly Agree	12	7.8	1	2.0
Total	153	100.0	51	100.0

27. Master's-level counseling students would benefit from a RICE (at least 3 sessions) by observing *their* counselor model effective counseling skills and techniques.

	CACREP	%	non-CACREP	%
Strongly Disagree	0	0.0	1	2.0
Disagree	4	2.6	1	2.0
Slightly Disagree	5	3.3	2	3.9
Unsure	20	13.1	5	9.8
Slightly Agree	49	32.0	17	33.3
Agree	59	38.6	18	35.5
Strongly Agree	16	10.0	7	13.7
Total	153	100.0	51	100.0

Table 21 Continued

Item	CACREP	%	non-CACREP	%
29. Having master's-level counseling students participate in a RICE (at least 3 sessions) would be ethical if prospective students were fully informed that this is a program requirement.				
Strongly Disagree	1	.6	1	2.0
Disagree	4	2.6	1	2.0
Slightly Disagree	7	4.5	1	2.0
Unsure	10	6.5	4	7.8
Slightly Agree	22	14.3	7	13.7
Agree	67	43.5	20	39.2
Strongly Agree	43	27.9	17	33.3
Total	154	100.0	51	100.0
30. Having master's-level counseling students participate in a RICE (at least 3 sessions) would be acceptable if arrangements could be made for students to receive counseling at no fee and at a facility that is not affiliated with the counseling program.				
Strongly Disagree	1	.6	1	2.0
Disagree	7	4.5	2	3.9
Slightly Disagree	7	4.5	2	3.9
Unsure	9	5.8	4	7.8
Slightly Agree	24	15.6	12	23.5
Agree	65	42.2	20	39.2
Strongly Agree	41	26.6	10	19.6
Total	154	100.0	51	100.0

Means and standard deviations for items 10-11, 13, 15-16, 18, 20-23, 25-27, 29, and

30 also were calculated to help answer Research Question 6 and are presented in Table 22.

A higher mean indicates a stronger agreement with the statement regarding the benefits of the

RICE; lower means indicate a stronger disagreement. For the purposes of describing the

results, mean scores between 5.5 and 6.49 were considered to indicate that participants

"agree" with an item, while mean scores between 4.5 and 5.49 were considered to indicate

that the participants "slightly agree."

Mean scores on items 10, 11, 15, 20, 29, and 30 indicate that participants "agree"

with the statements that the RICE would help students understand the process and content of

counseling (CACREP M = 5.83, SD = 1.14; non-CACREP M = 5.96, SD = .90), would be

ethical if prospective students were fully informed that it is a program requirement

(CACREP M = 5.73, SD = 1.27; non-CACREP M = 5.80, SD = 1.33), would increase

students' ability to identify with clients (CACREP M = 5.74, SD = 1.39 non-CACREP M =

5.88, SD = 1.32), would increase students' self-awareness and self-exploration (CACREP M

= 5.65, SD = 1.15; non-CACREP M = 5.70, SD = 1.03), would be acceptable if

arrangements could be made for no fee at a facility not affiliated with the program,

(CACREP M = 5.64, SD = 1.36; non-CACREP M = 5.43, SD = 1.39), and would foster

professional development (CACREP M = 5.56, SD = 1.50; non-CACREP M = 5.60, SD =

1.62).

Mean scores on items 13, 16, 21, 22, 23, 26, and 27 indicate that participants "slightly

agree" with the statements that a RICE would help normalize the role of counselor (CACREP

M =5.38, SD = 1.27; non-CACREP = M = 5.31, SD = 1.38), that students would benefit

from observing their counselor model effective skills (CACREP M = 5.32, SD = 1.10; non-

CACREP M = 5.31, SD = 1.26), that a RICE would help counseling students cope with

unresolved issues that might hinder their effectiveness as counselors (CACREP M = 5.16,

SD = 1.49; non-CACREP M = 5.46, SD = 1.39), that students would attach less stigma to

counseling (CACREP M = 5.00, SD = 1.36; non-CACREP M = 5.00, SD = 1.54), the a

RICE would increase help-seeking attitudes of master's-level counseling students (CACREP M = 4.84, SD = 1.31; non-CACREP M = 4.76, SD = 1.44), that student would be more empathic with their clients as a result of a RICE (CACREP M = 4.84, SD = 1.28; non-CACREP M = 4.67, SD = 1.26) and that a RICE would increase awareness of cultural assumptions (CACREP M = 4.51, SD = 1.42; non-CACREP M = 4.62, SD = 1.34).

Participants indicated that they were "unsure" about two potential benefits: that a RICE would increase master's-level counseling students' skill in using self-disclosure appropriately with clients (CACREP M = 4.38, SD = 1.39; non-CACREP M = 4.38, SD = 1.48), and that students would be less likely to experience professional burnout (CACREP M = 3.58, SD = 1.28; non-CACREP M = 3.31, SD = 1.35).

Table 22
Means and Standard Deviations for Items 10-11, 13, 15-16, 18, 20-23, 25-27,29, and 30

	CACREP			non-CACREP		
Item	n	*M*	*SD*	n	*M*	*SD*

Opinions About the Benefits
of the RICE

10. A RICE (at least 3 sessions) would foster professional development in master's-level counseling students.

	177	5.56	1.50	37	5.60	1.62

11. A RICE (at least 3 sessions) would strengthen the ability of master's-level counseling students to identify with their clients.

	161	5.74	1.39	52	5.88	1.32

13. A RICE (at least 3 sessions) would help master's students cope with unresolved issues that might hinder the effectiveness of their work with clients.

	159	5.16	1.49	50	5.46	1.39

15. A RICE (at least 3 sessions) would increase the self-awareness and self-exploration of master's-level counseling students.

	159	5.65	1.15	50	5.70	1.03

16. A RICE (at least 3 sessions) would increase master's-level counseling students' awareness of their cultural assumptions.

	158	4.51	1.42	50	4.62	1.34

18. A RICE (at least 3 sessions) would increase master's-level counseling students' skill in using self-disclosure appropriately with clients.

	155	4.38	1.39	50	4.42	1.4

Table 22 Continued

Item	CACREP			non-CACREP		
	n	*M*	*SD*	n	*M*	*SD*
20. A RICE (at least 3 sessions) would increase master's-level counseling students in understanding the process and content of counseling.	156	5.83	1.14	50	5.96	.90
21. A RICE (at least 3 sessions) would normalize the role of counselor for master's-level counseling students.	156	5.38	1.27	51	5.31	1.38
22. A RICE (at least 3 session) would increase help-seeking attitudes of master's-level counseling students.	152	4.85	1.31	51	4.76	1.44
23. Master's-level counseling students who participate in a RICE (at least 3 sessions) will attach less stigma to seeking counseling.	155	5.00	1.30	51	5.00	1.54
25. Master's-level counseling students who have participated in a RICE (at least 3 sessions) are less likely to experience professional burnout.	155	3.58	1.28	51	3.31	1.35
26. Master's-level counseling students who have participated in a RICE (at least 3 sessions) will be more empathic towards their clients.	153	4.84	1.28	51	4.67	1.26
27. Master's-level counseling student would benefit from a RICE (at least 3 sessions) by observing *their* counselor model effective counseling skills and techniques.	153	5.32	1.10	51	5.31	1.26

Table 22 Continued

	CACREP			non-CACREP		
Item	n	*M*	*SD*	n	*M*	*SD*
29. Having master's-level counseling students participate in a RICE (at least 3 sessions) would be ethical if prospective students were fully informed that this is a program requirement.	154	5.73	1.27	51	5.80	1.33
30. Having master's-level counseling students participate in a RICE (at least 3 sessions) would be acceptable if arrangements could be made for students to receive counseling at no fee and at a facility that is not affiliated with the counseling program.	154	5.64	1.36	51	5.43	1.39

Note. Strongly Disagree = 1, Disagree = 2, Slightly Disagree = 3, Unsure = 4, Slightly Agree = 5, Agree = 6, Strongly Agree = 7

To investigate whether there is a difference between CACREP and non-CACREP accredited programs (as measured by item 7) with respect to how strongly they endorse the benefits of the RICE (items 10-11, 13, 15-16, 18, 20-23, 25-27, 29, and 30), 15 Pearson product moment correlations were calculated using the CACREP and non-CACREP scores and the endorsements of benefits scores. In order to minimize the potential for a Type 1 error, a conservative *p* level of .01 was used. The results of this correlation are presented in Table 23.

No correlation was found (r = .01, p = .856) between CACREP status of counselor education programs regarding a RICE and the strength of program leaders' endorsements of any of the statement that described potential benefits. No significant relationship was found between CACREP accreditation status and the statements that a RICE would foster professional development, would strengthen the ability of students to identify with their

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clients, that a RICE would help students cope with unresolved issues, increase self-awareness and self-exploration in master's-level counseling students, increase counseling students' awareness of cultural assumptions, increase skill in using self-disclosure appropriately with clients, increase students' understanding of the process and content of counseling, normalize the role of counselor, increase help-seeking attitudes of counseling students, would help counseling students attach less stigma to seeking counseling, would lessen the likelihood of professional burnout for master's-level counseling students, would help counseling students' become more empathic, would benefit counseling students by observing counseling skills and techniques, would be ethical if prospective students were fully informed that this is a program requirement, and would be acceptable if arrangements could be made for students to receive counseling at no fee and at a facility that is not affiliated with the counseling program.

Table 23

Pearson Correlation Results of Participants' Scores of CACREP and non-CACREP
Accreditation and Endorsements of Benefits

CACREP and non-CACREP Accreditation

Items	Pearson Correlation	Sig. (2-tailed)
10. A RICE (at least 3 sessions) would foster professional development in master's-level counseling students.	.01	.856
11. A RICE (at least 3 sessions) would strengthen the ability of master's-level counseling students to identify with their clients.	.05	.506
13. A RICE (at least 3 sessions) would help master's students cope with unresolved issues that might hinder the effectiveness of their work with clients.	.09	.202
15. A RICE (at least 3 sessions) would increase the self-awareness and self-exploration of master's-level counseling students.	.02	.775
16. A RICE (at least 3 sessions) would increase master's-level counseling students' awareness of their cultural assumptions.	.03	.637
18. A RICE (at least 3 sessions) would increase master's-level counseling students' skill in using self-disclosure appropriately with clients.	.01	.863
20. A RICE (at least 3 sessions) would increase master's-level counseling students in understanding the process and content of counseling.	.05	.453

Table 23 Continued

Items	Pearson Correlation	Sig. (2-tailed)
21. A RICE (at least 3 sessions) would normalize the role of counselor for master's-level counseling students.	-.02	.735
22. A RICE (at least 3 session) would increase help-seeking attitudes of master's-level counseling students.	-.03	.700
23. Master's-level counseling students who participate in a RICE (at least 3 sessions) will attach less stigma to seeking counseling.	-.11	.133
25. Master's-level counseling Students who have participated in a RICE (at least 3 sessions) are less likely to experience professional burnout.	-.08	.204
26. Master's-level counseling Students who have participated in a RICE (at least 3 sessions) will be more empathic towards their clients.	-.06	.391
27. Master's-level counseling students would benefit from a RICE (at least 3 sessions) by observing *their* counselor model effective counseling skills and techniques.	-.02	.972
29. Having master's-level counseling students participate in a RICE (at least 3 sessions) would be ethical if prospective students were fully informed that this is a program requirement.	.024	.735

Table 23 Continued

Items	Pearson Correlation	Sig. (2-tailed)
30. Having master's-level counseling students participate in a RICE (at least 3 sessions) would be acceptable if arrangements could be made for students to receive counseling at no fee and at a facility that is not affiliated with the counseling program.	-.07	.338

n = 196
Correlation is significant at the .01 level (2-tailed)

Research question 7.

Research Question 7 asked: Is there a difference between CACREP-accredited and

non-CACREP-accredited programs with respect to how strongly they endorse the risks of the

RICE? To test for Research Question 7, frequencies were calculated for the participants'

responses to survey items 12, 14, 17, 19, 24, and 28 on the *ELCPS,* which asked participants

to respond to statements describing their opinions about the risks of the RICE using a Likert-

type scale with anchored responses at each point. The possible responses included strongly

disagree (1), disagree (2), slightly disagree (3), unsure (4), slightly agree (5), agree (6), and

strongly agree (7). Responses were recoded to allow for easier reading in the table.

Responses are displayed in Table 24.

Table 24
Frequency Distribution for Items 12, 14, 17, 19, 24, and 28

Item	CACREP	%	non-CACREP	%
Opinions About the Risks of the RICE				
12. Having master's-level counseling students participate in a RICE (at least 3 sessions) would preclude them from making the choice and personal commitment to counseling that are essential for gaining real benefit from it.				
Strongly Disagree	21	13.3	8	16.0
Disagree	56	35.4	18	36.0
Slightly Disagree	22	13.9	6	12.0
Unsure	25	15.8	7	14.0
Slightly Agree	19	12.0	4	8.0
Agree	12	7.6	3	6.0
Strongly Agree	3	1.9	4	8.0
Total	158	100.0	50	100.0
14. Because the outcome of a RICE (at least 3 sessions) cannot be predicted for master's-level counseling students, a negative outcome is possible.				
Strongly Disagree	2	1.3	1	2.0
Disagree	15	9.4	3	6.0
Slightly Disagree	10	6.3	4	8.0
Unsure	15	9.4	2	4.0
Slightly Agree	41	25.8	14	28.0
Agree	66	41.5	24	48.0
Strongly Agree	10	6.3	2	4.0
Total	159	100.0	50	100.0

Table 24 Continued

Item	CACREP	%	non-CACREP	%

17. Having master's-level counseling
students participate in a RICE (at least
3 sessions) is risky because personal
development cannot be forced.

	CACREP	%	non-CACREP	%
Strongly Disagree	9	5.8	4	8.2
Disagree	36	23.1	15	30.6
Slightly Disagree	31	19.9	5	10.2
Unsure	16	8.3	0	0.0
Slightly Agree	34	21.8	17	34.7
Agree	25	16.0	4	8.2
Strongly Agree	8	5.1	4	8.2
Total	156	100.0	49	100.0

19. Having master's-level counseling
students participate in a RICE
(at least 3 sessions) would be
unethical because it would
put the students in a vulnerable
position as clients.

	CACREP	%	non-CACREP	%
Strongly Disagree	40	25.6	9	18.0
Disagree	62	39.7	24	48.0
Slightly Disagree	21	13.5	6	12.0
Unsure	12	7.7	5	10.0
Slightly Agree	12	7.7	3	6.0
Agree	6	3.8	2	4.0
Strongly Agree	3	1.9	1	2.0
Total	156	100.0	50	100.0

Table 24 Continued

Item	CACREP	%	non-CACREP	%

24. Having master's-level counseling
students participate in a RICE (at least
3 sessions) is not advisable because
faculty would have no way of verifying
the outcome of the experience without
breaching student confidentiality.

	CACREP	%	non-CACREP	%
Strongly Disagree	22	14.4	6	11.8
Disagree	77	50.3	25	49.0
Slightly Disagree	16	10.0	6	11.8
Unsure	14	9.2	5	9.8
Slightly Agree	7	4.6	4	7.8
Agree	12	7.8	2	3.9
Strongly Agree	5	3.3	3	5.9
Total	153	100.0	51	100.0

28. It would be unreasonable to
ask master's-level counseling
students to be responsible for
the expense and time involved
in a RICE (at least 3 sessions).

	CACREP	%	non-CACREP	%
Strongly Disagree	17	11.1	6	11.8
Disagree	43	28.1	13	25.5
Slightly Disagree	26	17.0	8	15.7
Unsure	14	9.2	3	5.9
Slightly Agree	26	17.0	10	19.6
Agree	20	13.1	5	9.8
Strongly Agree	7	4.6	6	11.8
Total	154	100.0	51	100.0

Means and standard deviations for items 12, 14, 17, 19, 24, and 28 were also

calculated to help answer Research Question 4 and are presented in Table 25. A higher mean

indicates a stronger agreement with the statement regarding the risks of the RICE; lower

means indicate a stronger disagreement. For the purposes of describing the results, mean

scores between 4.5 and 5.49 were considered to indicate that participants "slightly agree"

with an item, while mean scores between 3.5 and 4.49 were considered to indicate that

participants "slightly disagree" with an item, and means scores of 2.5 and 3.49 were considered to indicate that participants "disagree."

A higher score on item 14 indicates a stronger agreement with the statement concerning a possible negative outcome of a RICE because the result cannot be predicted (CACREP $M = 4.99$, $SD = 1.44$; non- CACREP $M = 5.10$; $SD = 1.38$). Scores on items 12, 19, and 24 indicate that participants "slightly disagree" with the statements about a RICE precluding students from making the choice and personal commitment essential for gaining real benefit from it (CACREP $M = 3.08$, $SD = 1.59$; non-CACREP $M = 3.12$, $SD = 1.82$), not advisable because faculty would have no way of verifying the outcome with breaching student confidentiality (CACREP $M = 2.76$, $SD = 1.60$; non-CACREP $M = 2.88$, $SD = 1.64$), and unethical because it would put students in a vulnerable positions as clients (CACREP $M = 2.51$, $SD = 1.50$; non-CACREP $M = 2.58$, $SD = 1.44$). Participants indicated that they were "unsure" about only two potential risks, being risky because personal development cannot be forced (CACREP $M = 3.86$, $SD = 1.72$; non-CACREP $M = 3.80$, $SD = 1.88$), and that it would be unreasonable to ask master's-level counseling students to be responsible for the expense and time involved (CACREP $M = 3.50$, $SD = 1.79$; non-CACREP $M = 3.00$, $SD = 1.20$).

Table 25

Means and Standard Deviations for Items 12, 14, 17, 19, 24, and 28

Item	CACREP			non-CACREP		
	n	*M*	*SD*	n	*M*	*SD*
Opinions about the Risks of the RICE						
12. Having master's-level counseling students participate in a RICE (at least 3 sessions) would preclude them from making the choice and personal commitment to counseling that are essential for gaining real benefit from it.	158	3.08	1.59	50	3.12	1.82
14. Because the outcome of a RICE (at least 3 sessions) cannot be predicted for master's-level counseling students, a negative outcome is possible.	159	4.99	1.44	50	5.10	1.38
17. Having master's-level counseling students participate in a RICE (at least 3 sessions) is risky because personal development cannot be forced.	156	3.86	1.72	49	3.80	1.88
19. Having master's-level counseling students participate in a RICE (at least 3 sessions) would be unethical because it would put the students in a vulnerable position as clients.	156	2.51	1.50	50	2.58	1.44
24. Having master's-level counseling students participate in a RICE (at least 3 sessions) is not advisable because faculty would have no way of verifying the outcome of the experience without breaching student confidentiality.	153	2.76	1.60	51	2.88	1.64

Table 25 Continued

Item	CACREP			non-CACREP		
	n	*M*	*SD*	n	*M*	*SD*
28. It would be unreasonable to ask master's-level counseling students to be responsible for the expense and time involved in a RICE (at least 3 sessions).	154	3.50	1.79	51	3.00	1.20

Note. Strongly Disagree=1, Disagree=2 ,Slightly Disagree=3, Unsure=4, Slightly Agree=5, Agree=6, Strongly Agree=7

To investigate whether there is a difference between counselor education program coordinators' endorsement of the risks of the RICE (items 12, 14, 17, 19, 24, and 28) and CACREP or non-CACREP accreditation status (item 7), a Pearson product correlation was calculated using the counselor education programs' scores of CACREP and non-CACREP status and the endorsements of risks scores. The results of this correlation are presented in Table 26. Six Pearson product moment correlations were used to answer this research question. Item 7 (CACREP or non-CACREP status) was correlated with items 12, 14, 17, 19, 24, and 28 (risks of the RICE). In order to minimize the potential of a Type 1 error, a conservative *p* level of .01 was used.

No correlation was found between CACREP status of counselor education programs regarding a RICE and the strength of program leaders' endorsements of any of the statements that describe potential risks. No significant relationship was found between CACREP accreditation and status and the statements that a RICE would preclude counseling students from making the choice and personal commitment to counseling that are essential for gaining real benefit from it, is not advisable because a negative outcome is possible because the outcome cannot be predicted, is risky because personal development cannot be forced, would put the students in a vulnerable positions as clients, is not advisable because faculty would

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have no way of verifying the outcome of the experience without breaching student

confidentiality, would be unreasonable to ask master's-level counseling students to be

responsible for the expense and time involved.

Table 26

Pearson Correlation Results of Participants' Scores of CACREP and non-CACREP
Accreditation and Endorsements of Risks

<u>CACREP and non-CACREP Accreditation</u>

Items	Pearson Correlation	Sig. (2-tailed)
12. Having master's-level counseling students participate in a RICE (at least 3 sessions) would preclude them from making the choice and personal commitment to counseling that are essential for gaining real benefit from it.	.01	.888
14. Because the outcome of a RICE (at least 3 sessions) cannot be predicted for master's-level counseling students, a negative outcome is possible.	.04	.627
17. Having master's-level counseling students participate in a RICE (at least 3 sessions) is risky because personal development cannot be forced.	-.02	.827
19. Having master's-level students participate in a RICE (at least 3 sessions) would be unethical because it would put the students in a vulnerable position as clients.	.02	.781
24. Having master's-level counseling students participate in a RICE (at least 3 sessions) is not advisable because faculty would have no way of verifying the outcome of the experience without breaching student confidentiality.	.03	.633

Table 26 Continued

Items	Pearson Correlation	Sig. (2-tailed)
28. It would be unreasonable to ask master's-level counseling students to be responsible for the expense and time involved in a RICE (at least 3 sessions).	.05	.453

Correlation is significant at the .01 level (2-tailed)

Research question 8.

Research Question 8 asked: For counselor education programs that do not require a RICE, what are the reasons for this decision (as indicated by item 38)? Item 38 on the *ELCPS* was an open-ended question and asked participants if their program does not require master's-level students to have an experience as a client in individual counseling (at least 3 sessions), to please state why this is the case. Frequencies were calculated on item 38 and are presented in Table 27. All responses can be found in Appendix E.

Table 27

Frequency Distribution for Item 38 for Research Question 8

Item	n
38. If your program does not require master's level counseling students to have an experience as a client in individual counseling (at least 3 sessions) please state why this is the case.	
Ethical concerns/confidentiality/cannot require treatment/ don't know how it could be mandated/enforced	49
Costs (time and money)	37
A RICE is illegal	10
Other experiential strategies work just as well/current policy adequate	9
Concerns regarding the professionalism/quality of the university counseling center	8
Counselor/site availability	7
Lack of consensus from the faculty regarding the risks/benefits of a RICE	7
Don't know why/not sure/ never been discussed	7
A RICE is not mandated by CACREP/CORE	5
Three sessions won't give students insight into the process	4
No research to support the outcome of the RICE	4
Program currently revisiting the RICE	3
University politics/ states that we cannot do this	3
Personal motivation is the key to progress in counseling	1
Total	154

Research question 9.

Research Question 9 asked: For counselor education programs that do require a RICE, what are the policies and procedures regarding the experience (as measured by item 39), and how satisfied are they that the RICE serves the purpose for which it was intended (as measured by item 40)? Item 39 on the *ELCPS* is divided into two parts. The first part asked participants whether their master's-level counseling program requires an individual counseling experience (RICE). The second part was open-ended and asked participants who answered "yes" to indicate how many sessions are required, how this experience is documented, and how the outcomes are measured. Frequency distributions of programs that require the RICE are presented in Table 28.

Table 28

Frequency Distribution for Items 39 and 40 for Research Question 9

Item	n	%
39. Does your program require students to participate in a required individual counseling experience (RICE)?		
No	168	82.4
Yes	36	17.6
39. How many sessions are required?		
20	3	
10	10	
8	3	
6	7	
5	2	
4	2	
3	6	
2	1	
39. How is the experience documented?		
Signed form/sign-off sheet from treating counselor	22	
Sessions are supervised live or taped	5	
Student journals regarding the experience are submitted	2	
Student confirmation	2	
Faculty member/instructor contacts the treating counselor	2	

39. How is the outcome measured?

It is not	11
Student self-evaluation/self-report/reflection papers	7
Counseling attendance	7
Instructor's rating: a scale reflecting observation of student's counseling session	3
Letter from the treating counselor	2
Evaluation of the experience during individual supervision	2
Course rubrics	1
Through discussion during the oral defense of the comprehensive exam	1

40. How satisfied are you that the RICE serves the purposes for which it is intended?

Dissatisfied	1	2.8
Neutral	2	5.6
Somewhat Satisfied	3	8.3
Satisfied	19	52.8
Very Satisfied	11	30.6
Total	36	100.0

Analysis of Qualitative Data

Open-ended item.

Question 41 of the *ELCPS* gave participants the option to respond to the following open-ended statement: "Please add any comments that you wish to offer." Of 262 participants, 70 (27%) chose to respond. All responses can be found in Appendix F.

Following a review of the comments, themes were generated using constant comparison/grounded theory qualitative data analysis and are stated below.

Quality of the professional delivering the counseling is critical.
 The following responses help to support this theme.

"All answers depend on the quality of the counselor."

"The quality of the individual counseling cannot be guaranteed. If the counselor is effective, then I believe the RICE would be helpful. However, counseling might not be effective and harm the student."

"I would say much depends on the counselor."

"I think there are many potential benefits to the students participating in the RICE, as long as the counselor is a good, ethical practitioner."

"Not sure how we would control the quality or skills of who would be doing the counseling".

"Sadly, required counseling with "bad" counselors will not be helpful."

Individual counseling should be required.

The RICE can be an effective tool in influencing the skills necessary for effective professional development and delivery of counseling. The following responses help to support this theme.

"All counseling students should see what it's like to be the client in order to truly understand what clients go through."

"I think the need for students to receive counseling is necessary."

"Having the experience of being a client is, in our opinion, one of the best personal and professional growth experiences that our students discuss during their portfolio defense."

"Students reported gains in self-awareness and overwhelmingly recommended that future students participate in the activity."

"I do believe that the RICE is a beneficial practice for [a]counselor's professional development, and it is my opinion that many of the ethical concerns raised by some faculty could be attended to through informed consent and through students being provided options to receive services from a private practitioner."

"Indeed, the more students act as counselees, the better they can connect with their future counselees."

"This requirement is a foundational personal growth aspect of our program that we believe, as a faculty consensus, is important and valuable to the students' overall growth, learning, and development as counseling professionals."

"We consider this a critical part of the learning experience of becoming a counselor."

Individual counseling should not be required.

Not all counselor education program leaders feel that the RICE is necessary or should be mandated. The following responses help to support this theme.

"An individual counseling experience may be effective for many and maybe most counseling students. However, I do not feel it should be required."

"Do nursing, medical, law, and dental professional schools require their students to participate in a similar "RICE" experience?"

"I see it as ineffective. I think it infringes on their personal rights to require counseling as a requisite for admittance, but I would be worried about someone who was reluctant to seek help."

"I think one can be an effective counselor without participating in mandatory individual sessions. However, it is a useful experience and should be highly encouraged."

"RICE experience is NOT essential to training qualified counselors."

"One cannot predict if the experience would be helpful or not."

"Training standards and requirements should be based on empirical evidence, not opinions."

Short term counseling experience is problematic.

For some participants, lack of endorsement for the RICE was due to what they perceived as the short term nature of the exercise. The following responses help to support this theme.

"Three sessions is useless unless you believe in SFBT."

"I think there is a risk in providing some short term experience and evaluating students on their experience."

"I believe that 3 sessions is just a seed, but certainly not sufficient in any way. It takes at least 3-4 sessions to establish an alliance."

"There is little or no data to support that 3 required sessions are enough to meet the programmatic goals for requiring the sessions, let alone how the required number of sessions

relate to meeting student/client goals rather than simply opening up the proverbial can of worms."

"If it were 3 sessions in and out I would find that to actually be detrimental to their understanding and appreciation of what counseling is all about."

"I think requiring personal counseling could be very beneficial. However, I don't know that 3 sessions would accomplish much. This structure, could, in fact give students a false sense of security around their counseling experience and impede genuine, reflective counseling."

Current exercises are effective for self-awareness.

Some participants noted that the goal of self-awareness can be achieved through methods other than the RICE. The following responses help to support this theme.

"Clinical supervision can often be very effective in helping students become self-aware of issues that may impact their counseling relationships."

"Happy with the group component because we de-emphasize individual counseling in schools because there is no time for it with high caseloads. It would make no sense to require it for students because they are always welcome to pursue it on their own."

"Not needed. Students engage in various types of experiential learning experiences in class and in the field".

Faculty has/is currently exploring a RICE.

Faculty in a few programs already have explored or are currently exploring the RICE. The following responses support this theme.

"I hope this survey will assist me in getting the individual requirement at our institution."

"This is an interesting topic as it is often debated among our faculty."

"We are currently wrestling with this."

"The university does not allow us to make this requirement."

"We would like to require individual counseling but have been told (by lawyers) that we can't."

"Would like our program and others to further encourage (or require) individual counseling as part of their experience."

"Would like our current 4 sessions required to be 10."

Participant Opinions Regarding Modalities for Experiential Learning

Additional data, not directly related to Research Question 2, were gathered to ascertain program directors' opinions about various modalities for delivering experiential learning. Frequencies were calculated for the participants' responses to survey items 31-34 on the *ELCPS* , which asked participants to indicate the extent of their agreement or disagreement with the statements describing modalities for delivering experiential learning in their counselor education programs using a Likert-type scale with anchored responses at each point. The possible responses included strongly disagree (1), disagree (2), slightly disagree (3), unsure (4), slightly agree (5), agree (6), and strongly agree (7). Responses were recoded to allow for easier reading. Frequencies and percentages for responses to the items describing benefits of a RICE are presented in Table 29.

Table 29

Frequency Distribution for Items 31-34

Item	n	%
Modalities for Delivering Experiential Training		
31. The experiential training component recommended by CACREP can be effectively achieved through a planned group experience.		
Strongly Disagree	4	2.0
Disagree	16	7.8
Slightly Disagree	11	5.4
Unsure	13	6.4
Slightly Agree	49	24.0
Agree	87	42.6
Strongly Agree	24	11.8
32. The experiential training component recommended by CACREP can be effectively achieved through having master's-level counseling students "real play" in the role of client during practice sessions with their peers in counseling techniques/skills courses.		
Strongly Disagree	13	6.4
Disagree	28	13.8
Slightly Disagree	25	12.3
Unsure	11	5.4
Slightly Agree	59	29.1
Agree	54	26.6
Strongly Agree	13	5.0

Table 29 Continued

Item	n	%
33. Master's-level counseling students would benefit more from an individual counseling experience than from a planned academic group experience with respect to facilitating their self-growth and self-reflection.		
Strongly Disagree	6	2.9
Disagree	26	12.7
Slightly Disagree	20	7.6
Unsure	46	17.6
Slightly Agree	38	18.6
Agree	44	21.6
Strongly Agree	24	11.8
34. A RICE (at least 3 sessions) carries less potential risk than a planned group experience for master's-level counseling students.		
Strongly Disagree	8	3.9
Disagree	42	20.6
Slightly Disagree	25	12.3
Unsure	77	37.7
Slightly Agree	23	11.3
Agree	22	10.8
Strongly Agree	7	3.4

Means and standard deviations for items 31-34 were also calculated and are presented in Table 30. A higher mean indicates a stronger agreement with the statement regarding the modalities of the RICE; lower means indicate a stronger disagreement. For the purposes of describing the results, mean scores between 5.5 and 6.49 were considered to indicate that participants "agree" with an item, mean scores between 4.5 and 5.49 were considered to indicate that the participants "slightly agree," and mean scores between 3.5 and 4.49 were considered to indicate that participants were "unsure."

Mean scores above 4.5 on items 31 and 33 indicate that participants "slightly agree" with the statements that experiential training components recommended by CACREP can be effectively achieved through a planned group experience ($M = 5.18$, $SD = 1.48$), and that master's-level counseling students would benefit more from an individual counseling experience than from a planned academic group experience with respect to facilitating their self-growth and self-reflection. Mean scores on items 31 and 34 indicate that participants were "unsure" about the statements that the experiential training component recommended by CACREP can be effectively achieved through having master's-level counseling students "real play" in the role of client during practice sessions with their peers in counseling techniques/skills courses ($M = 4.42$, $SD = 1.73$), and that a RICE carries less potential risk than a planned group experience for master's-level counseling students.

Table 30
Means and Standard Deviations for Items 31-34

Item	n	*M*	SD
Modalities for Delivering Experiential Training			
31. The experiential training component recommended by CACREP can be effectively achieved through a planned group experience.	201	5.18	1.48
32. The experiential training component recommended by CACREP can be effectively effectively achieved through having master's-level counseling students "real play" in the role of client during practice sessions with their peers in counseling techniques/skills courses.	203	4.42	1.73
33. Master's-level counseling students would benefit more from an individual counseling experience than from a planned academic group experience with respect to facilitating their self-growth and self-reflection.	204	4.53	1.65
34. A RICE (at least 3 sessions) carries less potential risk than a planned group experience for master's-level counseling students.	204	3.79	1.45

Note. Strongly Disagree = 1, Disagree = 2, Slightly Disagree = 3, Unsure = 4, Slightly Agree = 5, Agree = 6, Strongly Agree = 7

Summary

This chapter presented the results of the study. The first research question asked the

participants about the policies and procedures of their counselor education programs

regarding a required individual counseling experience (RICE). Descriptive statistics were

calculated for the participants' response to survey Item 36 on the *ELCPS*. Results indicated that of the 203 respondents, 29 (14.3 %) had no policy regarding students' participation as a client in individual counseling. Seventy-nine (38.9%), encouraged but did not require students to participate as a client in individual counseling. Almost equal numbers responded that only some students (e.g., those who are currently in remediation) are encouraged but not required to participate as a client in individual counseling (30; 14.8 %), or that only some students (e.g. those who are currently in remediation) are required to participate as a client in individual counseling (32; 15.8%). Only 33 (16.3%) reported that all students are required to participate as a client in individual counseling.

The second research question asked about the modalities used to deliver experiential training in their counselor education programs. Descriptive statistics were calculated on responses to Items 37 and 39 on the *ELCPS*. Of the 203 participants, most (95.1%) responded that their training program requires students to participate in the role as a group member in a planned academic group experience. By contrast, only 36 (17.6%) of the 204 participants who responded to Item 39 indicated that their training program requires students to participate in a required individual counseling experience.

The third research question asked if there was a relationship between how strongly they endorsed the benefits of the RICE and their policies and procedures with respect to requiring the experience. Mean scores on items 10, 11, 15, 20, 29, and 30 indicated that participants agreed with the statements that a RICE would increase understanding of the process and content of counseling, would be ethical if prospective students were fully informed that it is a program requirement, would increase students' ability to identify with clients, would increase self-awareness and self-exploration, would be acceptable if

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arrangements could be made for students to receive counseling for no fee at a facility not affiliated with the program, and would foster professional development. Mean scores on items 13, 16, 21, 22, 23, 26, and 27 indicated that participants slightly agreed with the statements that a RICE would normalize the role of counselor, that students would benefit by observing their counselor model effective skills and techniques, that a RICE would help counseling students cope with unresolved issues that might hinder their effectiveness as counselors, that students who participate in a RICE would attach less stigma to counseling, that a RICE would increase help-seeking attitudes of master's-level counseling students, that students will be more empathic towards their clients as a result of a RICE, and that a RICE would increase awareness of cultural assumptions. Participants indicated that they were unsure about only two potential benefits: that a RICE would increase master's-level counseling students' skill in using self-disclosure appropriately with clients, and that students who participate in a RICE would be less likely to experience professional burnout. None of the items that described potential benefits received a mean score that would indicate any level of disagreement with the item.

Fifteen Pearson product moment correlations were used to compare Items 10-11, 13, 15-16, 18, 20-23, 25-27, 29, and 30 to item 36 on the *ELCPS* which asked participants to describe the policy of the master's-degree program regarding a RICE. Results indicated that there were significant relationships between counselor education program policies and procedures and program directors' endorsements of the statements that a RICE would foster professional development for master's-level counseling students ($r = -.21$, $p = .003$), strengthen the ability of counseling students to identify with their clients ($r = -.18$, $p = .009$), increase self-awareness and self-exploration in counseling students ($r = -.18$, $p = .009$),

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normalize the role of counselor (r = -.18, p = .000), increase the development of empathy (r = .18, p = .010), and would be ethical if prospective students were fully informed of the program requirement (r = -.20, p = .004). These correlations were negative, indicating an inverse relationship between the strength of program directors' endorsements of these benefits and their policies and procedures regarding the RICE. No correlation was found between counselor education program directors' endorsements of the statements that a RICE would increase counseling students' awareness of their cultural assumptions (r = -.17, p = .017), would increase the use of self-disclosure properly with clients (r = -.001, p = .985), would increase understanding of the process and content of counseling (r = -.14, p = .046), would result in students attaching less stigma to counseling (r = -.11, p = .111), would help prevent professional burnout (r = -.181, p = .011), would benefit the student by observing counseling skills and techniques (r = -.15, p = .032), or would be acceptable if arrangements could be made for students to receive counseling at no fee and at a facility that is not affiliated with the counseling program (r = -.09, , p = .224).

The fourth research question asked if there was a relationship between how strongly they endorsed the risks of the RICE and their policies and procedures with respect to requiring the experience. The mean score on item 14 indicated that participants slightly agreed with the statement that a negative outcome of a RICE is possible because the result cannot be predicted. Mean scores on items 12, 19, and 24 indicated that participants slightly disagreed with the statements that a RICE would preclude students from making the choice and personal commitment essential for gaining real benefit from it, would not be advisable because faculty would have no way of verifying the outcome without breaching student confidentiality, and would be unethical because it would put students in a vulnerable

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positions as clients. Participants indicated that they were unsure about two potential risks: that a RICE would be risky because personal development cannot be forced, and that it would be unreasonable to ask master's-level counseling students to be responsible for the expense and time involved.

Six Pearson product moment correlations were used to compare Items 12, 14, 17, 19, 24, and 28 to item 36 on the *ELCPS* which asked participants to describe the policy of the master's-degree program regarding a RICE. Results indicated that there were significant relationships between counselor education program policies and procedures and program directors' endorsements of the statements that a RICE would be risky because personal development cannot be forced ($r = .19$, $p = .007$), would put students in a vulnerable position as clients ($r = .33$, $p = .000$), would be unethical because program faculty could not verify the outcome without breaching student confidentiality ($r = .27$, $p = .000$), and that it would be unreasonable to expect students to be responsible for the expense and time ($r = .18$, $p = .009$). These correlations were positive, indicating that although program directors did not seem to endorse these risks, this low level of concern about risks still does not translate into requiring the RICE.

The fifth research question investigated if there is a difference between CACREP-accredited and non-CACREP-accredited programs with respect to whether or not they require master's-level counseling students to complete an individual counseling experience as a client. To investigate whether CACREP and non-CACREP accredited programs (item 7) differ in their requirement of a RICE (item 36), chi-square statistics were used. First, accreditation status (item 7) was compared on item 36 using a chi-square test. In order to minimize the potential of a Type I error, a conservative *p* level of .01 was used. The chi-

square results indicated that there was no significant difference between CACREP and non-CACREP accredited institutions regarding whether they require a RICE ($\chi^2 = 5.27$, $df = 4$, $p > .05$).

The sixth research question asked if there a difference between CACREP-accredited and non-CACREP- accredited programs with respect to how strongly they endorse the benefits of the RICE. To investigate whether there is a difference between CACREP and non-CACREP accredited programs (as measured by item 7) with respect to how strongly they endorse the benefits of the RICE (items 10-11, 13, 15-16, 18, 20-23, 25-27, 29, and 30), a Pearson product moment correlation was calculated using the CACREP and non-CACREP scores and the endorsements of benefits scores. Fifteen Pearson product moment correlations were used to answer this research question. In order to minimize the potential for a Type 1 error, a conservative p level of .01 was used. Results indicated that there were no significant differences between directors of CACREP-accredited and non-CACREP-accredited programs with respect to the strength of their endorsement of the benefits.

The seventh research question asked whether there a difference CACREP and non-CACREP accredited programs with respect to how strongly they endorse the risks of the RICE. To investigate whether there is a difference between CACREP and non-CACREP accredited programs (as measured by item 7) with respect to how strongly they endorse the risks of the RICE (items 12, 14, 17, 19, 24, and 28), six Pearson product moment correlations were calculated using the CACREP and non-CACREP scores and the endorsements of scores. Results indicated that there were no significant differences between CACREP and non-CACREP-accredited programs and the strength of program directors' endorsement of the risks of the RICE.

The eighth research question asked of those counselor education programs that do not require the RICE, what are the reasons for this decision. Of the 168 respondents who identified their counselor education program as not requiring the RICE, 144 (86%) chose to respond. Issues such as ethical concerns of confidentiality and requiring treatment (n = 48, 33.3%) and costs in terms of time and money (n = 24, 17%) were the most frequently cited. Other less frequently reported responses included legalities of the RICE (n = 10, 14%), quality of the treating counselor (n = 8, 6.3%), satisfaction with current experiential activities (n = 9, 6.3%), lack of counselor availability (n = 7, 5%), lack of consensus regarding the risks/benefits (n = 7, 5%), don't know or never been discussed (n = 7, 5%), not mandated by CACREP/CORE (n = 5, 3.5%), 3 sessions not enough (n = 4, 2.8%), no research to support the RICE outcome (n = 4, 2.8%), program currently revisiting the RICE (n = 3, 2.1%), university states that we cannot do this (n = 3, 2.1%), personal motivation key to counseling (n = 1, .7%), and don't know how it would be mandated (n = 1, .7%).

The ninth research question asked counselor education program directors that do require the RICE to state their policies and procedures and level of satisfaction with the exercise. Of the 204 respondents, 36 (17.6%) stated that their counselor education program required a RICE. Ten participants (28%) reported that 10 sessions are required, followed by 6 sessions (19%), and three sessions (16%). Other less frequently reported session requirements were 20 sessions (n = 3), 8 sessions (n = 3), 5 sessions (n = 2), 4 sessions (n = 2), and 2 sessions (n = 1). The most frequently reported method of documentation is a signed form from the treating counselor (58%), followed by supervised live or taped sessions (14%). With regard to how the outcome is measured, 11 (31%) reported that it is not, student self-evaluation (19%), counseling attendance (19%), instructor's evaluation of the

session (8.3%), letter from the treating counselor (5.6%), reflection in individual supervision (5.6%), course rubrics (2.7%), and discussion during the oral defense (2.7%). Responses regarding satisfaction that the RICE serves the purpose for which it is intended, outcomes included: "satisfied" (n = 19, 52.8%), "very satisfied" (n = 11, 30.6%), "somewhat satisfied", (n = 3, 8.3%), "neutral" (n = 2, 5.6), and "dissatisfied" (n = 1, 2.8%).

CHAPTER FIVE

DISCUSSION

In this chapter, the findings of this study are discussed. Limitations are reviewed. Implications for counselor education program directors are provided. Finally, recommendations for future research are suggested.

The purposes of the study were to determine the following: (a) the opinions of counselor education program directors regarding a required individual counseling experience (RICE) , (b) the modalities used to deliver experiential training in counselor education programs, (c) the policies and procedures regarding a RICE; (d) if there is a relationship between how strongly program coordinators endorse the benefits of the RICE and their programs' policies and procedures with respect to requiring the experience, (e) is there a relationship between how strongly program coordinators endorse the risks of the RICE and their policies and procedures with respect to requiring the experience, (f) is there a difference between CACREP and non-CACREP accredited programs with respect to whether or not they require master's-level counseling students to compete a RICE, (g) is there a difference between CACREP and non-CACREP accredited programs with respect to how strongly they endorse the benefits of a RICE, (h) is there a difference between CACREP and non-CACREP accredited programs with respect to how strongly they endorse the risks of a RICE, (i) for counselor education programs who do not require a RICE, what are the reasons for that decision, and (j) for counselor education programs that do require the RICE, how many sessions are required, how is this experience documented, and how are the outcomes measured.

Discussion of Findings

      Policies and procedures of counselor education programs regarding a RICE.

      Research question 1 explored participants' policies and procedures regarding a required individual counseling experience (RICE). One of the main objectives of this study was to examine the overall extent to which the RICE is used in counselor education programs. Seventy-nine (38.9%) of the 203 participants who responded to a forced-choice item indicated that the RICE was "encouraged but not required" for all students in their counselor education programs. Responses were almost equally distributed among the remaining four choice options for this item. Thirty-three (33) participants (16.3%) indicated that their program did have a RICE, or "required all students to participate as a client in individual counseling." The policy of 32 (15.8%) programs was that "only some students (e.g. those who are currently in remediation) are required to participate in individual counseling." Similarly, 30 (14.8%) respondents indicated that "only some students (e.g. those who are currently in remediation) are encouraged but not required to participate in individual counseling," and 29 (14.3%) indicated that "my program has no policy regarding students' participation as a client in individual counseling."

      In a separate survey item, of 204 respondents, 36 (17.6%) indicated that their programs do require a RICE, and 168 (82.4%) indicated that their programs do not require it. It is evident that the majority of counselor education programs do not require a RICE. Although the RICE has been supported extensively in the literature, some writers have asserted that most counseling programs do not require this exercise (Guy, Stark, & Poelstra, 1988; Mackey & Mackey, 1993; Wiseman & Egozi, 2006). The results of this study provide the first empirical evidence to support this assertion.

Modalities for delivering experiential training.

Research Question 2 explored the modalities used to deliver experiential training in counselor education programs. Griffith and Frieden (2000) suggested that experiential learning seems congruent with the change that is expected of clients. These authors argued that the facilitation of reflective thinking and personal process recall that is expected of clients is similar to that of counselor education students engaging in supervision. Experiential learning, with its focus on the "non-academic" search for knowledge that is based on the individual's experiences and processes, much like the nature of client learning, seems to be a natural fit for counselor education.

To determine the modalities used to deliver experiential training in counselor education programs, responses to two survey items were analyzed. Item 37 asked whether or not the respondent's master's-level training program required students to participate in the role of a group member in a planned academic group experience. The vast majority (193; 95.1%) of the 203 respondents indicated that their master's-level counseling program had a required planned academic group experience. This finding was expected, as both the Association for Specialists in Group Work(ASGW) and CACREP require students to have experiences as group members as part of their training (Anderson & Price, 2001; Furr & Barret, 2000; Hatch & McCarthy, 2003; Laux, Smirnoff, Ritchie, & Cochrane, 2007). ASGW maintains that skill development inclusive of self-disclosure, giving and receiving feedback, and the use of confrontation requires a training model that utilizes an experiential group (Anderson & Price, 2001). The CACREP standards (2009) specify that counseling programs "provide both theoretical and experiential understandings of group purpose, development, dynamics, theories, methods, skills, and other group approaches in the

multicultural society." The standards also call for "direct experiences in which students participate as group members in a small group activity, approved by the program, for a minimum of 10 clock hours over the course of one academic term" (section II). The majority of the participants in this study (152; 76%) indicated that their counselor education programs were CACREP-accredited. Therefore, it would be expected that a planned academic group experience would be required in most of the respondents' programs.

The second item (item # 39) asked whether or not the respondents' master's-level training programs required students to participate in a required individual counseling experience (RICE). A majority (168, 82.4%) of the 204 respondents indicated that their programs did not require an individual counseling experience for master's-level counseling students, while only 36 (17.6%) indicated that a RICE was required in their programs. This finding is also not surprising. As was noted earlier, a prevalent assumption has been that a RICE is not widely required, despite the fact that the development of professional and personal identities begins during training. It has been argued that it is through methods of instruction that program directors can exert substantial influence on the attitudes and behaviors of counseling students (Norcross, Evans, Bike, & Schatz, 2008; Skovholt & Rønnestad, 1992; Westwood, 1994). Corey (2010) recently noted that requiring counseling trainees to receive individual counseling is quite controversial among faculty, with some strongly supporting the idea and others believing that required individual counseling would be ineffective.

Program directors' endorsement of potential benefits of a RICE.

Research question 3 investigated the relationship between how strongly program coordinators endorse the benefits of the RICE and their policies and procedures with respect

to requiring the experience.   First, frequencies and mean scores were calculated for the

participants' responses to 15 survey items on the *ELCPS*. These 15 items asked participants

to indicate their opinions about potential benefits of the RICE, using a Likert-type scale with

anchored responses at each point ranging from strongly disagree (1) to strongly agree (7).

For the purpose of describing the extent to which participants agreed or disagreed with each

of these items, mean scores ranging from 1.5-2.49 were considered to indicate "disagree;"

mean scores ranging from 2.5-3.49 were considered to indicate "slightly disagree;" mean

scores ranging from 3.5-4.49 were considered to indicate "unsure;" means scores ranging

from 4.5-5.49 were considered to indicate "slightly agree;" and mean scores from 5.5-6.49

were considered to indicate "agree."

Mean scores above 5.5 on items 10, 11, 15, 20, 29, and 30 indicated that participants

"agree" with the statements that a RICE would increase understanding of the process and

content of counseling ($M = 5.85$, $SD = 1.90$), would be ethical if prospective students were

fully informed that it is a program requirement ($M = 5.77$, $SD = 1.28$), would increase ability

to identify with clients ($M = 5.76$, $SD = 1.37$), would increase self-awareness and self-

exploration ($M = 5.64$, $SD = 1.12$), would be acceptable if arrangements could be made for

students to receive counseling for no fee at a facility not affiliated with the program, ($M =$

5.59, $SD = 1.38$), and would foster professional development ($M = 5.58$, $SD = 1.52$). Scores

on items 13, 16, 21, 22, 23, 26, and 27 indicated that participants "slightly agree" with the

statements that a RICE would normalize the role of counselor ($M =5.37$, $SD = 1.29$), that

students would benefit by observing their counselor model effective skills and techniques(M

$= 5.32$, $SD = 1.13$), that a RICE would help counseling students cope with unresolved issues

that might hinder their effectiveness as counselors ($M = 5.21$, $SD = 1.46$), that students who

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participate in a RICE would attach less stigma to counseling (*M* = 5.10, *SD* = 1.36), that a

RICE would increase help-seeking attitudes of master's-level counseling students (*M* = 4.82,

SD = 1.33), that students who experience a RICE will be more empathic (*M* = 4.79, *SD* =

1.26), and that a RICE would increase awareness of cultural assumptions (*M* = 4.54, *SD* =

1.39). Participants indicated that they were "unsure" about only two potential benefits: that a

RICE would increase master's-level counseling students' skill in using self-disclosure

appropriately with clients (*M* = 4.38, *SD* = 1.39), and that students would be less likely to

experience professional burnout (*M* = 3.52, *SD* = *1.29).* None of the mean scores indicated

any degree of disagreement with any of the potential benefits of a RICE.

These results were not surprising, given the extensive endorsement in the literature of

the potential benefits of an individual counseling experience for master's-level counseling

students (Bemack, Epp, & Keys, 1999; Corey & Corey, 2007; Dearing, Maddox, & Tangney,

2005; Fouad & Hains, 1990; Gilroy, Carroll, & Murra, 2002; Grimmer & Tribe, 2001; Guy,

Stark, & Poelstra, 1988; Kline, Falbaum, Pope, Hargraves, & Hundley, 1997; McEwan, &

Duncan, 1993; Murphy, 2005; Norcross, Bike, Evans, & Schatz, 2008; Osborn, Daninhirsch,

& Page, 2003; Rizq & Target, 2008; Williams, Coyle, & Lyons, 1999).

Participants agreed most strongly with the statement that a RICE would increase

understanding of the process and content of counseling (*M* =5.85, *SD* = 1.90). Understanding

first hand how the counseling process works as well as understanding processes of

psychological change is seen as a vital learning experience for counseling students (Grimmer

& Tribe, 2001). This result lends support to this assertion made in the counseling literature.

Participants also agreed that a RICE would increase students' ability to identify with

clients (*M* = 5.76, *SD* = 1.37) and slightly agreed that the experience would increase their

level of empathy ($M = 4.79$, $SD = 1.26$). Murphy (2005) suggested that the ability to feel into the experiences of others is an important part of professional growth. Empathy is seen across counselor education programs and throughout training tracks as one of the most important basic counseling skills for counselors-in-training to acquire (Crutchfield, Baltimore, Felfeli, & Worth, 2000; Ivey, 1991; Redfern, Dancey, & Dryden, 1993). This result is supportive of the preponderance of the literature on the development of empathy.

Mean scores indicated that participants agreed with the statement that a RICE would increase self-awareness and self-exploration of master's-level counseling students ($M = 5.64$, $SD = 1.12$). So important is the role of self-awareness in counselor training that CACREP (2009) states that self-awareness is a required prerequisite for counselor fitness. Additionally, it has been argued that development of professional and personal identities begins during training and that self-awareness is an important component to psychotherapy that can be achieved only when students become aware of their own values, attitudes, prejudices, beliefs, assumptions, feelings, countertransferences, personal motives and needs, competencies, skills, and limitations (Cook, 1999; Skovholt & Rønnestad 1992). Results indicate that counseling program directors believe that a RICE would increase the self-awareness and self-exploration that, according to the literature, is vital to the development of competent counselors.

Participants also agreed with the statement that a RICE would foster professional development in master's-level counseling students ($M = 5.58$, $SD = 1.52$). The significance of personal therapy while in training and its role in the formation of professional development, inclusive of what Rizq and Target (2008) referred to as emotional and

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professional robustness, is seen as a result of a counseling experience during counselor training. This result supports the assertion made by Rizq and Target.

Respondents "slightly agreed" that a RICE would increase master's-level counseling students' awareness of their cultural assumptions ($M = 4.54$, $SD = 1.39$). This finding is congruent with the literature that asserts that experiential activities are a powerful means to stimulate multicultural awareness and can be used to help individuals confront and overcome racial/ethnic bias (Kim & Lyons, 2003).

Although respondents were "unsure" that students who experience a RICE would be less likely to suffer professional burnout ($M = 3.52$, $SD = 1.29$), the concept of self-care in the development of professional identity is also seen in the literature (Barnett & Cooper, 2009). It is also suggested by Yager and Tovar-Blank (2007) that the most effective counselors are those who continually work toward self-care, and promoting this concept in counselor education is most appropriate, given that professional identity is still being formed. Participants also "agreed" that a RICE would be ethical if prospective students were fully informed that this is a program requirement ($M = 5.77$, $SD = 1.77$) and would be acceptable if arrangements could be made for students to receive counseling at no fee and at a facility that is not affiliated with the counseling program ($M = 5.59$, $SD = 1.38$). Confidentiality concerns and financial expense have been cited as barriers to counseling students engaging in individual therapy (Gilroy, Carroll, & Murra, 2002; Pope & Tabachnick, 1994). Norcross (2005) noted the importance of providing full disclosure of this requirement during the screening process. However, it appears that, based on the responses in this survey, program directors may believe that these potential problems can be resolved so that a RICE would be both ethical and acceptable in practice.

Relationship between opinions regarding benefits and program policies and procedures.

Correlations were computed between the potential benefits of the RICE and the policies and procedures of counselor education program directors. Because of the high number of correlations, a conservative p value of .01 was used for all statistical tests to minimize the potential for a Type 1 error.

Results indicated that there were significant relationships between counselor education program policies and procedures and program directors' opinions that a RICE would foster professional development for master's-level counseling students ($r = -.21$, $p = .003$), strengthen the ability of counseling students to identify with their clients ($r = -.18$, $p = .009$), increase self-awareness and self-exploration in counseling students ($r = -.18$, $p = .009$), normalize the role of counselor ($r = -.18$, $p = .000$), and increase the development of empathy ($r = .18$, $p = .010$). There was also a significant relationship between counselor education program policies and procedures and program directors' opinions that a RICE would be ethical if prospective students were fully informed of the program requirement ($r = -.20$, $p = .004$). These correlations were negative, indicating an inverse relationship between the strength of program directors' endorsements of these benefits and their policies and procedures with regard to requiring the RICE. In other words, a stronger endorsement of these benefits was associated with a reduced likelihood that a RICE was required.

These negative correlations, or inverse relationships, were unexpected and initially seemed to be contrary to expectations. However, it may be that these results are reflective of the lack of consensus about requiring an individual counseling experience and the fact that the majority of counselor preparation programs do not require a RICE despite the reported

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potential benefits. The preponderance of the literature is supportive of the benefits of a RICE *in theory*, although no empirical evidence has been offered as to whether the potential benefits are realized in actual practice. Because the majority (82.4%) of program directors who participated in this study directed programs that do not require a RICE, their endorsement of potential benefits is also primarily theoretical and has not translated into the practice of requiring a RICE, and is therefore congruent with the literature. It is also possible that, although counselor educators endorse the benefits of a RICE, the personal wellness of the counselor education student typically is not a focus in the academic curriculum (Blank, 2007).

Because the results of the computations of correlations between strength of endorsement of potential benefits and program policies and procedures were unexpected, participants' responses to open-ended items (#38 and #41) were examined to determine if these responses might provide possible explanations. Item 38 asked counselor education program directors who do not require a RICE to state why this is the case. Some reported that although the RICE could be beneficial, they were satisfied with their current experiential exercises (e.g., "Although a useful strategy, other academic and experiential activities also work well…so it is just a strategy that we have not used.") Others commented that while a RICE might be beneficial it is not required, offering statements such as "I think it would benefit all master's-level counseling students to participate in their own counseling experience. As a university student they are not required to do so unless this is part of their remediation plan." Item 41 invited the participants to make additional comments regarding the survey. One participant cited clinical supervision as being effective for facilitating self-awareness, stating that "An individual personal counseling experience may be effective for

many and maybe most counseling students. However, I do not feel it should be required. Clinical supervision can often be very effective in students becoming self-aware of issues that may impact the counseling relationships."

Additionally, data gathered on program directors' opinions regarding the modalities for experiential learning were examined. Participants "slightly agreed" that experiential training components could be satisfied through group training and but also "slightly agreed" that students would benefit more from a RICE than from a planned academic group. There appears to be a theme of ambiguity regarding experiential training exercises.

Program directors' endorsement of potential risks of a RICE.

Research Question 4 investigated the relationship between how strongly program coordinators endorse the risks of the RICE and their policies and procedures with respect to requiring the experience. To determine the relationship between how strongly the participants endorse the risks of the RICE and their policies and procedures with respect to requiring it, frequencies and mean scores were calculated for the participants' responses to six survey items on the *ELCPS*. These six items represented the possible risks of a RICE. For the purpose of describing the extent to which participants agreed or disagreed with each of these items, mean scores ranging from 1.5-2.49 were considered to indicate "disagree;" mean scores ranging from 2.5-3.49 were considered to indicate "slightly disagree;" mean scores ranging from 3.5-4.49 were considered to indicate "unsure;" mean scores ranging from 4.5-5.9 were considered to indicate "slightly agree;" and mean scores from 5.5-6.49 were considered to indicate "agree."

Mean scores on items 12, 19, and 24 indicated that participants "slightly disagreed" with the statements that a RICE would precluding students from making the choice and

personal commitment essential for gaining real benefit from it ($M = 3.09$, $SD = 1.65$), that a RICE is not advisable because faculty would have no way of verifying the outcome without breaching student confidentiality ($M = 2.77$, $SD = 1.60$), and that a RICE would be unethical because it would put students in a vulnerable position as clients ($M = 2.52$, $SD = 1.47$). Participants indicated that they were "unsure" about two potential risks, that a RICE would be risky because personal development cannot be forced ($M = 4.00$, $SD = 1.73$), and that it would be unreasonable to ask master's-level counseling students to be responsible for the expense and time involved ($M = 3.58$, $SD = 1.83$).

The mean score on one item indicated that participants "slightly agreed" ($M = 5.03$, $SD = 1.41$) with the statement that a negative outcome of a RICE is possible because the result cannot be predicted. This seems to be a reasonable response, as no result can be predicted in any situation.

The results suggest that program directors are not particularly concerned about potential risks such as students not having the right to make a personal choice about counseling, financial and time constraints, limited availability of qualified counselors, and possible emotional stress. Although it is reported in the literature that training programs may not require individual therapy due to financial and time constraints (Glass, 1986; McEwan & Duncan, 1993), perceived lack of personal choice in the process (Wiseman & Egozi, 2006), as well as issues of confidentiality (Dearing, Maddux, & Tangney, 2005; Herlihy & Corey, 2006), the literature suggests that both students and faculty agree that the perceived benefits outweigh the risks (Daw & Joseph, 2007; Grimmer & Tribe, 2001; Murphy, 2005) and that these risks can perhaps be managed by faculty rather than be avoided. The results of this

study, with respect to the strength of program directors' endorsement of the potential risks, provide support for this body of literature.

Relationship between opinions regarding risks and program policies and procedures.

Correlations were computed between the potential risks of the RICE and the policies and procedures of counselor education program directors. Results indicated that there were significant relationships between counselor education program policies and procedures and program directors' opinions that personal development cannot be forced ($r = .19$, $p = .007$), that a RICE would put students in a vulnerable position as clients ($r = .33$, $p = .000$), that program faculty could not verify the outcome of a RICE without breaching student confidentiality ($r = .27$, $p = .000$), and that it would not be reasonable to ask students to be responsible for the expense and time involved ($r = .18$, $p = .009$). These correlations were positive, indicating that a stronger disagreement with statements describing potential risks was associated with less likelihood that a RICE was required. In other words, this disagreement did not translate into policies and procedures of requiring the RICE.

Because the results of the computations of correlations between strength of endorsement of potential risks and program policies and procedures were unexpected, participants' responses to open-ended items (#38 and #41) were examined to determine if they might provide possible explanations. Item 38 asked counselor education program directors who do not require a RICE to state why this is the case. Some participants cited concerns regarding the quality of the treating counselor, offering statements such as " I do highly recommend it to all students in pre-practicum. To be very frank, one concern I have is the lack of skill level and overall professionalism present in our campus counseling center"

and "I think there are many potential benefits to students participating in a RICE, as long as the counselor is a good, ethical practitioner." Item 41 invited the participants to make additional comments regarding the survey. Respondents commented on student readiness for the counseling experience with comments such as "It is recommended and suggested, but students may not be ready to work on their own issues until later in the program." Cost also seemed to be an issue, as evidenced by such statements as, "Historically it has not been done – however we have been wrestling with the issue for a number of years. Costs and details have been stumbling blocks – although the majority of the faculty are acutely in agreement theoretically that it would be a positive move." It appears, from an examination of the qualitative data, that although program directors support the RICE in theory, certain obstacles and concerns (such as quality of counseling services, student readiness level, and costs) may be preventing its implementation in practice.

Differences between CACREP-accredited and non-CACREP-accredited programs.

Research Question 5 investigated whether or not there was a difference between CACREP-accredited and non-CACREP-accredited programs with respect to whether or not they require master's-level counseling students to complete a RICE. To answer this question, the results of two survey questions were analyzed. First, Item 7 on the *ELCPS* asked the participants if the counselor education program they direct is CACREP-accredited or non-CACREP- accredited. Slightly more than three quarters (152; 76.8%) of the 200 participants identified their programs as being CACREP-accredited. This is an unexpectedly high percentage, given the fact that of the 1600 counselor education programs in the United States, only 525 are CACREP accredited (Remley & Herlihy, 2010). Therefore, because

76.8% of the participants in this study identified themselves as directing CACREP - accredited programs, the sample may not be representative. Due to the underrepresentation of non-CACREP-accredited programs in the sample, any findings with respect to accreditation status should be interpreted with extreme caution.

To determine if there was a difference between CACREP and non-CACREP-accredited programs in their endorsement of the RICE, chi-squared statistics were used. In order to minimize the potential of a Type I error, a conservative p level of .01 was used. Results of this test indicate that there was no statistically significant difference between CACREP and non-CACREP programs regarding whether or not they endorse the RICE ($\chi^2 =$ 5.27, $df = 4$, $p > .05$). This is not surprising, although it is noteworthy that the majority of respondents directed programs that were CACREP- accredited. Perhaps participants' accreditation status is reflective of a degree of confidence in their established policies and procedures have been approved by CACREP program evaluators and do not require a RICE. However, it is interesting to note that of the 36 who stated that their counselor education programs require a RICE, 25 (72.2%) are CACREP- accredited. Perhaps the information provided in this study that the RICE is utilized in counselor education programs that are CACREP-accredited will be of interest to those programs who do not utilize the exercise due to ethical concerns.

Program accreditation and endorsement of potential benefits of a RICE.

Research question 6 investigated if there was a difference between CACREP-accredited and non-CACREP- accredited counseling programs in how strongly they endorse the benefits of the RICE. To test for Research Question 6, frequencies were calculated for the participants' responses to survey items 10-11, 13, 15-16, 18, 20-23, 25-27, 29, and 30 on

the *ELCPS,* which asked participants to respond to statements describing their opinions about the benefits of the RICE using a Likert-type scale with anchored responses at each point ranging from strongly disagree (1), to strongly agree (7).

For the purpose of describing the extent to which participants agreed or disagreed with each of these items, mean scores ranging from 1.5-2.49 were considered to indicate "disagree;" mean scores ranging from 2.5-3.49 were considered to "slightly disagree;" mean scores ranging from 3.5-4.49 were considered to indicate "unsure;" means scores ranging from 4.5-5.9 were considered to indicate "slightly agree;" and mean scores from 5.5-6.49 were considered to indicate "agree." Means and standard deviations for respondents from both CACREP-accredited and non-CACREP-accredited programs for items 10-11, 13, 15-16, 18, 20-23, 25-27, 29, and 30 were also calculated to help answer Research Question 6. A higher mean indicated a stronger agreement with the statement regarding the benefits of the RICE; lower means indicated a stronger disagreement. The results indicated that there were no significant differences between program directors from CACREP-accredited and non-CACREP- accredited programs with respect to the strength of their endorsement of the benefits of the RICE. Once again this is not surprising, as it is reflective of Research Question 5, which asked if there was a difference between accreditation status and the RICE requirement. No differences were found in accreditation status or endorsement of benefits between CACREP and non-CACREP accredited programs.

Relationship between opinions regarding benefits and program accreditation.

Correlations were also computed between the potential benefits of the RICE and accreditation status of counselor education programs. Results indicated that there were no

significant relationships between CACREP-accredited and non-CACREP-accredited status and strength of endorsement of the benefits of the RICE.

This result corroborates what was found when comparing the means and standard deviations of accreditation status with endorsement of the benefits of the RICE, as well as the result of the chi-square test from Research Question 5 which indicated no significant differences between program directors at CACREP and non-CACREP accredited institutions in their endorsement of the RICE.

Program accreditation and potential risks of a RICE.

Research Question 7 investigated if there was a difference between CACREP and non-CACREP accredited programs with respect to how strongly they endorsed the risks of the RICE. To test for Research Question 7, frequencies were calculated for the participants' responses to survey items 12, 14, 17, 19, 24, and 28 on the *ELCPS,* which asked participants to respond to statements describing their opinions about the risks of the RICE using a Likert-type scale with anchored responses at each point. The possible responses included strongly disagree (1), disagree (2), slightly disagree (3), unsure (4), slightly agree (5), agree (6), and strongly agree (7). For the purpose of describing the extent to which participants agreed or disagreed with each of these items, mean scores ranging from 1.5-2.49 were considered to indicate "disagree;" mean scores ranging from 2.5-3.49 were considered to "slightly disagree;" mean scores ranging from 3.5-4.49 were considered to indicate "unsure;" means scores ranging from 4.5-5.9 were considered to indicate "slightly agree;" and mean scores from 5.5-6.49 were considered to indicate "agree." Means and standard deviations for respondents from both CACREP-accredited and non-CACREP-accredited programs for items 12, 14, 17, 19, 24, and 28 were also calculated to help answer Research Question 7. A

higher mean indicated a stronger agreement with the statement regarding the risks of the RICE; lower means indicated a stronger disagreement.

The comparison of the means and standard deviations in Research Question 7 indicated that there is no relationship between accreditation status and endorsement of the risks of the RICE. This corroborates what was found when comparing the means and standard deviations of accreditation status with endorsement of the risks of the RICE, as well as the result of the chi-square test from Research Question 5 which indicated that there were not significant differences between CACREP and non-CACREP accredited institutions in their endorsement of the RICE.

Relationship between opinions regarding risks and program accreditation.

Correlations were also computed between the potential risks of the RICE and accreditation status of counselor education programs. Results indicated that there were no significant relationships between CACREP and non-CACREP status and strength of endorsement of the risks of the RICE.

The results of these correlations indicated that there is no relationship between accreditation status and endorsement of the risks of the RICE. This corroborates what was found when comparing the means and standard deviations of accreditation status with endorsement of the benefits of the RICE, as well as the result of the chi-square test from Research Question 5 which indicated that there were no significant differences between CACREP and non-CACREP accredited institutions in the strength of their endorsement of the RICE. Again, it is important to note that, due to the underrepresentation of non-CACREP-accredited institutions in this study, any results related to program accreditation status should be interpreted with extreme caution.

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Reasons for not requiring a RICE.

 The vast majority (82.4%) of program directors who participated in this study indicated that their programs did not require a RICE, although these respondents generally endorsed the potential benefits of such an experience. Research Question 8 investigated the reasons that counselor education program directors gave for not requiring the RICE at their institution. This question was open-ended to allow participants to elaborate. Of the 168 respondents who identified their counselor education programs as not requiring the RICE, 120 (71%) chose to respond. Some participants chose to give more than one reason, which yielded 154 responses. Several themes were evident in their responses. Forty-three (43) stated that ethical concerns, such as potential violations of confidentiality and inability to verify outcomes, prevent them from requiring the RICE. Respondents made statements such as "requiring counseling is not ethical" or "doesn't required counseling break the confidentiality of the student?" Another 32 participants cited costs (both time and money), as illustrated by statements such as "consideration of the cost in time and money has been a factor." At least 10 respondents made comments regarding the legality of the RICE, as illustrated by statements such as "our legal counsel has informed me that setting up such a requirement sets the stage for an ADA complaint should we need to terminate the student" or "there are legal ramifications." Ten (10) respondents cited concerns regarding the quality of the counseling, as reflected in statements such as "challenge of assuring the qualification of the counselor." Respondents also cited the opinion that encouraging counseling is better than requiring it; ten participants offered statements such as "a blanket requirement takes away the students' right to choose" or "personal motivation is the key to counseling." Eight participants commented on the lack of counselor/site availability, as reflected in comments such as "no current

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facility." A lack of consensus from faculty regarding the benefits/risks of the RICE was reflected in seven comments, such as "no agreement among the faculty that it should be done" or "lack of consensus among faculty about potential benefits and potential risks." Participants also cited that they did not know why the RICE was not required at their institution; seven commented that "It just hasn't happened" or "not sure why we haven't made it a requirement." Satisfaction with current experiential exercises was cited by seven respondents, who offered comments such as "other academic and experiential activities work just as well." Still other participants (5) stated that they do not require the RICE because it is not mandated by CACREP/CORE (e.g., "not specifically mandated by CORE"). Some respondents believed that 3 sessions was a problematic number (e.g., "3 sessions won't give them insight into the process as well as a bunch of role plays"). A concern was expressed that a RICE could be harmful to the student who is not ready to work on personal issues (e.g., "mandated counseling may not be so helpful and can be harmful"). A concern regarding the lack of evidence to support the benefits of the RICE was illustrated by statements such as "there is no empirical evidence to indicate that the RICE benefits counselor trainees or their clients" and "there is no research that supports the requirement of 1, 2, 3, or more sessions." Still other participants stated that their programs are currently considering the RICE with comments such as "the program is in transition, this requirement is being considered."

Curiously, some of these qualitative data concerning why the RICE is not required in a large percentage of counselor education programs seem to contradict what was found in the quantitative data. While participants "slightly agreed" with the statement that a negative outcome of a RICE is possible because the result cannot be predicted *(M* $= 5.03$, *SD* $= 1.41)$, participants "slightly disagreed" with statements that the RICE would preclude students from

making the choice and personal commitment essential for gaining real benefit from it, would

not be advisable because faculty would have no way of verifying the outcome without

breaching student confidentiality ($M = 2.77$, $SD = 1.60$), and would be unethical because it

would put students in a vulnerable positions as clients ($M= 2.52$, $SD = 1.47$). Participants'

results also indicated that they were "unsure" that a RICE would be risky because personal

development cannot be forced ($M = 4.00$, $SD = 1.73$), and that it would be unreasonable to

ask master's-level counseling students to be responsible for the expense and time involved

($M = 3.58$, $SD = 1.83$).

Policies and procedures and satisfaction with the RICE.

Research Question 9 investigated the policies and procedures and level of satisfaction

of the RICE at institutions that do have the requirement. This two-part question first asked

participants if their institution required a RICE. Of the 204 participants who responded to

this question, 36 (17.6%) stated that their counseling program required students to participate

in a RICE.   The second part of this question was open ended, and asked those participants

whose programs do have a RICE to indicate the number of sessions, how the experience is

documented, and the level of satisfaction, using a Likert-scale with anchored responses at

each point ranging from very dissatisfied (1) to very satisfied (7).

For those counseling programs that do require the RICE, the required number of

sessions ranges from as few as 2 (one program) to as many as 20 (for three programs). Ten

participants (36%) reported that they require 10 sessions, and seven respondents (19%)

reported that 6 sessions is their requirement. A wide range in the number of required sessions

was apparent. Perhaps the wording of the survey items that asked participants' opinions,

which stated "at least 3 sessions," was an unduly conservative number and thus may have

influenced participants' responses. Although the item did specify "at least" three sessions, some participants commented that this number of sessions was insufficient.

With regard to how the RICE experience is documented, the most frequent responses were signed form/sign-off sheet from treating counselor (22), and sessions are supervised live or taped (5). It was surprising that documentation procedures included written documentation and viewing live sessions, without mention of informed consent. These procedures raise ethical concerns. The importance of student privacy is seen in the literature. Morrissette (1996) reported that concerns surrounding confidentiality and the risk of personal exposure are worrisome to counseling students and are instrumental in their apprehension to disclose personal dilemmas. Similarly, Morrissette and Gadbois (2006) stated that, although there appear to be benefits with experiential teaching strategies, those that involve the disclosure of personal information raise important questions about privacy, purpose, and consent. It would be interesting to explore how the five programs that use live or taped supervision of sessions, in particular, have addressed the associated ethical concerns.

The most frequent response to the question regarding how the RICE outcome is measured was, "It is not" (n = 11, 31%), followed by "Student self-evaluation/self-report/reflection papers" (n = 7, 19%), and "Counseling attendance" (n = 7, 19%). Perhaps the reason it is not measured by the most of the respondents is that they do not find it necessary to do so. Possibly, it is not an exercise that needs measuring to be valuable. It is also possible that the effects of a RICE are measured indirectly, such as through faculty observations of students' demonstrated abilities to understand the content and process of counseling and to empathize with clients as the students move through the master's degree program.

Item 9 investigated the extent to which directors of programs that require the RICE are satisfied with this requirement. Of the 36 respondents, 33 (92%) reported that they were "somewhat satisfied" to "very satisfied" that the RICE serves the purpose for which it is intended. One respondent reported feeling "dissatisfied" with the RICE, and 2 indicated that they were "neutral." These results clearly indicate that the vast majority of program directors who require the RICE are pleased with the results. The potential benefits of the RICE are widely discussed in the literature, and those program directors whose programs require the RICE are pleased with the results. However, the results of this study indicate that this method of experiential learning is not utilized in the majority of counselor education programs. It may be that directors of programs that do not require a RICE are unaware of the level of satisfaction with the experience felt by directors of programs that do require a RICE. Directors of programs that do not require a RICE might be encouraged to consider implementing the experience based on the results of this study.

Finally, an open-ended question, inviting all participants to make any further comments, yielded 70 (27%) responses. Themes that emerged included (a) concern about the quality of the professional delivering the services, (b) individual counseling should be required, (c) individual counseling should not be required; (d) short term counseling is problematic; and (e) current exercises are effective for self-reflection (f) faculty has/is currently exploring a RICE.

A fairly substantial number of respondents felt the need to comment further on the benefits and potential benefits of a RICE. Those respondents who do require the RICE commented: "I think the need for students to receive counseling is necessary"; "Having the experience of being a client is, in our opinion, one of the best personal and professional

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growth experiences that our students discuss during their portfolio defense"; "Students reported gains in self-awareness and overwhelmingly recommended that future students participate in the activity"; "I do believe that the RICE is a beneficial practice for [a]counselor's professional development, and it is my opinion that many of the ethical concerns raised by some faculty could be attended to through informed consent and through students being provided options to receive services from a private practitioner"; "Indeed, the more students act as counselees, the better they can connect with their future counselees"; "This requirement is a foundational personal growth aspect of our program that we believe, as a faculty consensus, is important and valuable to the students' overall growth, learning, and development as counseling professionals"; and "We consider this a critical part of the learning experience of becoming a counselor." Responses to this final, open-ended item indicated that directors of those programs that require the RICE have strongly positive opinions about its overall benefit.

Those program directors who reported that they do not require the RICE also endorsed the benefits. One participant commented that "An individual counseling experience may be effective for many and maybe most counseling students. However, I do not feel it should be required." Another stated, "I think one can be an effective counselor without participating in mandatory individual sessions. However, it is a useful experience and should be highly encouraged." One respondent favored a RICE, yet was concerned about potential risks; this participant stated, " I am absolutely in support for individual counseling and group counseling experiences; however I think there is risk in providing some short term experience and evaluating students on their experience." Others supported a RICE in theory, but added caveats or described obstacles, as was reflected in comments such as "I think

there are many potential benefits to students participating in RICE, as long as the counselor is a good, ethical practitioner" and "We would like to require individual counseling but have been told (by lawyers) that we can't."

Respondents seemed to have definite opinions regarding the RICE, based on the number of comments. Those program directors whose programs require the RICE offered the most lengthy comments, indicating that they have strong opinions about the benefits of the exercise for counseling students.

Participant opinions regarding modalities for experiential learning.

Survey questions 31-34 on the *ELCPS* asked participants the extent of their agreement or disagreement with the statements describing modalities for delivering experiential learning in their counselor education programs. First, frequencies and mean scores were calculated for the participants' responses to 4 survey items on the *ELCPS*. These 4 items asked participants to indicate their opinions about modalities for delivering experiential learning using a Likert-type scale with anchored responses at each point ranging from strongly disagree (1) to strongly agree (7).

For the purposes of describing the results, mean scores between 5.5 and 6.49 were considered to indicate that participants "agree" with an item, mean scores between 4.5 and 5.49 were considered to indicate that the participants "slightly agree," and mean scores between 3.5 and 4.49 were considered to indicate that participants were "unsure." Mean scores above 4.5 on items 31 and 33 indicate that participants "slightly agreed" with the statements that experiential training components recommended by CACREP can be effectively achieved through a planned group experience ($M = 5.18$, $SD = 1.48$), and that master's-level counseling students would benefit more from an individual counseling

experience than from a planned academic group experience with respect to facilitating their self-growth and self-reflection. Mean scores on items 31 and 34 indicate that participants were "unsure" about the statements that experiential training components recommended by CACREP can be effectively achieved through having master's-level counseling students "real play" in the role of client during practice sessions with their peers in counseling techniques/skills courses ($M = 4.42$, $SD = 1.73$), and that a RICE carries less potential risk than a planned group experience for master's-level counseling students ($M = 3.79$, $SD = 1.45$).

The literature suggests that program directors generally endorse the experiential group component. According to Furr and Barret (2000), counselor educators agree that the experiential group is critical in the acquisition of group counseling skills. This is further supported by Guth and McDonnell (2004) who asserted that the experiential group can help create structure, establish rapport, and build trust among class members and between the instructor and members. However, the 'slight agreement' of participants with this item raises a question as to whether program directors are as supportive of the experiential group as the literature seems to suggest. It is possible that while experiential group training assists in the acquisition of group skills, this particular type of instruction may not be effective in helping students acquire other critical skills for counselors in training.

Participants also slightly agreed with the statement that students would benefit more from an individual counseling experience than from a planned group experience with respect to facilitating their self-growth and self-reflection. Morrissette and Gadbois (2006) referred to the realization of some students of the degree of personal exploration and intense self-examination that resulted from the planned academic group experience. It is also noteworthy

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that the literature concerning the comparison of individual and group experiential processes was rather sparse. It remains open to question as to just how satisfied program directors are with using the experiential group alone to satisfy CACREP mandates regarding experiential learning.

Participants were "unsure" about experiential training components recommended by CACREP being satisfied through "real plays" with peers in techniques/skills classes, and that a RICE would carry less potential risk than a planned group experience for master's-level counseling students. The fact that the counseling program directors surveyed are "unsure" about the "real play" technique, which may be utilized in a number of counselor preparation programs, raises a question for future exploration regarding the effectiveness of this technique.

Limitations of the Study

One limitation that may have affected the results of the study involved sampling bias, including both sample availability and sample representation. It was assumed that most counselor education programs do not have a RICE requirement, but the availability of programs that have this requirement was unknown. The results indicated that 36 (17.6%) of those who responded to the survey require the RICE. This small number limits the confidence with which findings regarding the actual use of the RICE may be interpreted. Another sampling bias involved sample representation. Counselor education program directors who chose to complete the survey may have differed in some way from those directors who did not respond to the survey; therefore, respondents may not have been representative of all counseling program directors in the United States. The survey was sent to all of the current 843 counselor education program directors and 262 were returned,

representing a return rate of 31 %, which is robust for a survey. However, 60 of the returned surveys contained incomplete responses, so that the number of usable responses to the survey items ranged from 202 to 252. Thus, the effective return rate was somewhat lower than 31%.

The survey instrument may not be a stable measure of counselor preparation program directors' perceptions of the benefits and risks of a RICE, as perceptions change over time, and participants may have responded differently if surveyed at other times. Also, the use of Likert-type scales with anchored response points limit the variability of responses; thus, the results may not accurately measure the strength of agreement or disagreement with item statements that asked participants' opinions.

Another limitation was related to the accreditation status of the participants' programs. The majority of respondents' programs were CACREP-accredited (152; 76%), as opposed to non-CACREP-accredited (48; 24%). Of the 1600 counselor education programs in the United States, only 525 are CACREP accredited (Remley & Herlihy, 2010). Therefore, because 76% of respondents identified themselves as directing CACREP-accredited programs, the sample in this study is not representative of the accreditation status of counselor education programs nationwide.

Another possible limitation was the use of the phrase "at least 3 sessions." This phrasing was intended to mean that three sessions was a minimum number and that more sessions were acceptable. Despite the fact that the term "at least" was used in all items regarding opinions and modalities, a number of respondents indicated that limiting the experience to three sessions was problematic, and this may have affected how they responded to these items.

Only counselor education program directors were surveyed; therefore, the results may not be representative of all counselor education faculty. Opinions of program directors with regard to experiential training may not be entirely reflective of the opinions of their faculty members.

Implications for Counselor Educators

This study explored the use of a required individual counseling experience for master's-level counseling students, the modalities for delivering experiential learning, and the policies and procedures for delivering an individual counseling experience for master's-level counseling students. This study is the first to offer empirical evidence regarding the prevalence of a RICE in master's-level counselor education programs. The results of this study contribute to the counseling profession's knowledge base by determining counseling program directors' opinions of the potential benefits and risks of a RICE, and by establishing that program directors whose programs require a RICE are overwhelmingly satisfied that the experience accomplishes the purposes for which it is intended.

As a result of this study, counselor education program directors whose programs do not currently utilize a required individual counseling experience (RICE) for master's level counseling students, but who believe that this experience would be beneficial, may be encouraged to consider implementing this requirement. Additionally, counselor education program directors who do not currently utilize the RICE because they believe that the experience would be risky, may be motivated to reconsider their reluctance to consider implementing it in the knowledge that their colleagues do not strongly endorse the potential risks.

Participants in this study endorsed most of the potential benefits of a RICE that have been discussed in the literature. They indicated that it is their opinion that participation in a RICE would increase students' personal/professional development, self-exploration, skill acquisition, and ability to empathize with client, all key training components. More counselor education programs may be encouraged to implement a RICE as a result of these findings. As a result, the development of future counselors may be enhanced, therefore increasing the quality of services provided to clients.

Suggestions for Future Research

Due to the limited amount of literature regarding opinions, modalities, and practices/perceptions of counselor education program directors regarding an individual counseling experience for master's-level counseling students, this study offers new information that the RICE is successfully utilized in a small number of counseling programs. Future research should further investigate the modalities, policies and procedures, and safeguards taken to minimize risks in those programs that do utilize the RICE. More in-depth insight into their practices could assist those programs that may wish to consider implementing this experience.

A future study might explore students' perceptions of the benefits and risks of a RICE. Valuable information could be provided by students and by graduates of programs that required them to complete a RICE. Students who have completed a RICE could describe how the experience benefited them, as well as any risks that they believe were or were not adequately addressed by their preparation programs. Graduates could describe how they believe the experience may have increased their effectiveness as counselors.

Perhaps qualitative studies could provide a richer understanding of the ways in which a RICE benefits master's-level counseling students, and of students' experiences of a RICE.

Interviews with directors of counseling programs that do require a RICE could provide more information regarding a number of questions, such as how these programs overcame any obstacles to implementing a RICE, what the faculty and students perceive to be the benefits of the experience, how the risks are successfully navigated, and the specific purposes that the RICE is intended to serve.

Conclusions

This study was a descriptive, exploratory study of the perceptions of counselor education program directors regarding an required individual counseling experience for master's-level counseling students. One purpose of this study was to explore the modalities of experiential learning and the frequency of a required individual counseling experience (RICE) in counselor preparation programs. In addition, this study sought to understand the perceptions of counseling program directors regarding the benefits and risks of a RICE which affect their decisions with regard to implementing such an exercise in their counselor preparation programs. Finally, this study attempted to determine the level of satisfaction of those program directors who do have the RICE requirement, as well as their policies and procedures with regard to outcome measurement.

The findings indicate that there were some significant inverse relationships between counselor education program directors' opinions regarding potential benefits for counseling students and their policies regarding requiring the RICE. Additionally, although respondents did not strongly endorse the potential risks associated with the exercise, a RICE is still not required by the majority of the counselor education programs surveyed. However, those

program directors who do endorse the RICE reported on its many benefits, and offered qualitative insights into how the requirement is implemented.

The findings also indicated that there is no significant difference between CACREP and non-CACREP accredited counselor education programs with regard to endorsing a required individual counseling experience, although results should be interpreted with extreme caution due to the underrepresentation of non-CACREP-accredited programs in the sample.

The results of this study have shown that the potential benefits of the RICE are endorsed by counselor education program directors; therefore, perhaps more of their peers will consider implementing the exercise. Also, perhaps the concerns regarding potential risks will be mitigated by the fact that these potential risks have been shown not to be endorsed by the program directors in this study.. This study has added the first empirical evidence to support the large body of theoretical literature on the benefits and risks of a RICE. This study has contributed to determining the prevalence of the RICE in master's level counselor training programs. Respondents generally endorsed potential benefits, lending support to the conceptual literature that described these potential benefits. Although concerns about potential risks have also been expressed in the literature, the results of this study indicate that program directors do not have a high level of concern about those risks. Directors of programs that do require a RICE are overwhelmingly satisfied with the experience.

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APPENDIX A: LETTER OF TRANSMITTAL

 Dear Potential Research Participant,

I am a doctoral student in the Counselor Education program at the University of New Orleans under the direction of Dr. Barbara Herlihy. I am writing to request your participation in my dissertation research study which pertains to perceptions and practices of counselor education program directors with respect to requiring experiential individual counseling for master's-level counseling students. This study has been IRB approved at the University of New Orleans.

In order to establish educational and training requirements for experiential learning in counselor preparation, data must be collected regarding the current views and practices of counselor education program directors. I hope that my research will contribute to a better understanding of the modalities used to deliver experiential training in counselor education programs. In addition, findings could be used to assist program directors in determining curriculum standards in the training of counselors. **If you are a current faculty member who is presently a program coordinator/chair/head/director, or have been one in the past, then you are eligible to participate.**

Participants in my research project will complete an on-line survey which will take approximately 15 minutes to complete. Through the services of Qualtrics™, the survey will be administered while maintaining anonymity of the research participants. At no time will you be asked to record your name. Anonymity will be obtained through encrypted internet addresses. If the results of this study are published, only group statistical data will be used and no direct comparison of individual participant responses will be given. Participation in this study is voluntary and can be terminated at any time.

Thank you for agreeing to participate in my research project. Your willingness to offer your time and provide thoughtful consideration of your answers is greatly appreciated. Should you have any questions at any time, please feel free to contact Dr. Barbara Herlihy at (504) 280-6662 or myself at (504) 296-9781.

After reading the informed consent, click on the link below:

Follow this link to the Survey:
${l://SurveyLink?d=Take the Survey}

Or copy and paste the URL below into your internet browser:
${l://SurveyURL}

Follow the link to opt out of future emails:
${l://OptOutLink}

Sincerely,
Kristen UnKauf, LPC
Doctoral Candidate
Department of Educational Leadership, Counseling and Foundations
University of New Orleans
E-mail: kunkauf@uno.edu

**APPENDIX B: EXPERIENTIAL LEARNING IN COUNSELING PROGRAMS
SURVEY**

Thank you for participating in this dissertation study on the topic of experiential learning in master's level counselor training programs. Please use the following <u>definitions</u> as you respond to the survey items:

Required experience of participating as a client in individual counseling:
Direct participation in counseling (50-60 minutes per session) as a client with a mental health professional, for the purpose of exploring and /or experiencing the dynamics associated with individual counseling.

Planned academic group experience:
Supervised practice and direct participation in a small group in order to experience group membership, group leadership, and group dynamics.

I. Demographic Information

1. What is your sex?

__ Female   __ Male

2. Which one of the following cultures do you identify with the most?) Please choose only ONE).
__ American Indian or Alaska Native
__ Asian
__ Black or African American
__ Caucasian
__ Hispanic Origin
__ Middle Eastern
__ Native Hawaiian or Other Pacific Islander
__ Bi-Racial/Multicultural
__ Other (Please specify)

3. What year did you receive your doctorate in Counselor Education or a related field?

[Pull down menu]

4. Did you receive your doctorate from a CACREP or CORE- accredited program?
__ Yes   __ No   __ Do not know

5. Approximately how many years have you been in your position as coordinator/chair/head/director of the counseling program at your institution?
[Pull down menu]

6. What master's level counseling program do you coordinate/chair/head/direct?
   __ Career Counseling
   __ School Counseling
   __ Student Affairs and College Counseling
   __ Addiction Counseling
   __ Marriage, Couple, and Family Counseling
   __ Clinical Mental Health Counseling
   __ Rehabilitation Counseling
   __ Other (Please specify)

7. Is the master's program in counseling that you coordinate/chair/head/direct at your institution CACREP or CORE-accredited?
   __ Yes   __ No

8. In which of the following primary work settings have you worked (other than practicum and internship)? Please check all that apply.
   __ College Counselor
   __ Counselor Educator
   __ Community Mental Health Agency
   __ Mental Health Hospital
   __ Private Practice
   __ Substance Abuse Clinic
   __ Elementary School
   __ Middle School
   __ High School
   __ Other(s) (Please specify)

9. In what type of institution are you employed?
   __ Public   __Private/religious affiliation   __Private/non-religious affiliation

II. Opinions

The literature indicates that counselor educators generally agree that experiential learning is an important component of training for master's-level counseling students. Most training programs require students to participate as a group member in a planned academic group experience, but fewer programs require students to have the experience of participating as a client in individual counseling. The items below ask you to indicate the extent of your agreement/disagreement with statements that describe **potential risks and benefits** of requiring master's level students to participate in a *required individual counseling experience* (RICE) as a client. Please state your opinion regarding these potential risks and benefits, irrespective of whether or not your program requires students to have such an experience. Please use the following scale:

Strongly Disagree, Disagree, Slightly Disagree, Unsure, Agree, Slightly Agree, Strongly Agree

10. A RICE (at least 3 sessions) would foster professional development in master's-level counseling students.

| 1 | 2 | 3 | 4 | 5 | 6 | 7 |

11. A RICE (at least 3 sessions) would strengthen the ability of master's-level counseling students to identify with their clients.

| 1 | 2 | 3 | 4 | 5 | 6 | 7 |

12. Having master's-level counseling students participate in a RICE (at least 3 sessions) would preclude them from making the choice and personal commitment to counseling that are essential for gaining real benefit from it .

| 1 | 2 | 3 | 4 | 5 | 6 | 7 |

13. A RICE (at least 3 sessions) would help master's-level counseling students cope with unresolved issues that might hinder the effectiveness of their work with clients.

| 1 | 2 | 3 | 4 | 5 | 6 | 7 |

14. Because the outcome of a RICE (at least 3 sessions) cannot be predicted for master's-level counseling students, a negative outcome is possible.

1   2   3   4   5   6   7

15. A RICE (at least 3 sessions) would increase the self-awareness and self-exploration of master's-level counseling students.

   1   2   3   4   5   6   7

16. A RICE (at least 3 sessions) would increase master's-level counseling students' awareness of their cultural assumptions.

   1   2   3   4   5   6   7

17. Having master's-level counseling students participate in RICE (at least 3 sessions) is risky because personal development cannot be forced.

1   2   3   4   5   6   7

18. A RICE (at least 3 sessions) would increase master's-level counseling students' skill in using self-disclosure appropriately with their clients.

   1   2   3   4   5   6   7

19. Having master's-level counseling students to participate in a RICE (at least 3 sessions) would be unethical because it would put the students in a vulnerable position as clients.

   1   2   3   4   5   6   7

20. A RICE (at least 3 sessions) would increase master's-level counseling students in understanding the process and content of counseling.

   1   2   3   4   5   6   7

21. A RICE (at least 3 sessions) would normalize the role of counselor for master's-level counseling students.

   1   2   3   4   5   6   7

22. A RICE (at least 3 sessions) would increase the help-seeking attitudes of master's-level counseling students.

   1   2   3   4   5   6   7

23. Master's-level counseling students who participate in a RICE (at least three sessions) will attach less stigma to seeking counseling.

   1   2   3   4   5   6   7

24. Having master's-level counseling students to participate in a RICE (at least 3 sessions) is not advisable because faculty would have no way of verifying the outcome of the experience without breaching student confidentiality.

   1   2   3   4   5   6   7

25. Master's-level counseling students who have participated in a RICE (at least 3 sessions) are less likely to experience professional burnout.

   1   2   3   4   5   6   7

26. Master's-level counseling students who have participated in a RICE (at least 3 sessions) will be more empathic towards their clients.

   1   2   3   4   5   6   7

27. Master's-level counseling students would benefit from a RICE (at least 3 sessions) by observing *their* counselor model effective counseling skills and techniques.

   1   2   3   4   5   6   7

28. It would be unreasonable to ask master's-level counseling students to be responsible for the expense and time involved in a RICE (at least 3 sessions).

   1   2   3   4   5   6   7

29. Having master's-level counseling students to participate in a RICE (at least 3 sessions) would be ethical if prospective students were fully informed that this is a program requirement.

        1   2   3   4   5   6   7

30. Having master's-level counseling students participate in a RICE (at least 3 sessions) would be acceptable if arrangements could be made for students to receive the counseling at no fee and at a facility that is not affiliated with the counseling program.

        1   2   3   4   5   6   7

III. Modalities for delivering experiential training.

In the section below, please give your opinion regarding various modes of delivering experiential training that are used by counselor education programs. Experiential training is defined as *a process by which the learner is directly involved with the phenomenon being studied.* Please state your opinion regarding the practices, irrespective of whether or not they are employed in your training program. Please use the following scale:

Strongly Disagree, Disagree, Slightly Disagree, Unsure, Agree, Slightly Agree, Strongly Agree

31. The experiential training component recommended by CACREP can be effectively achieved through a planned academic group experience.
1   2   3   4   5   6   7

32. The experiential training component recommended by CACREP can be effectively achieved through having master's-level counseling students "real play" in the role of client during practice sessions with their peers in counseling techniques/skills courses.

1   2   3   4   5   6   7

33. Master's-level counseling students would benefit more from an individual counseling experience than from a planned academic group experience with respect to facilitating their self-growth and self-reflection.

        1   2   3   4   5   6   7

34. A required individual counseling experience (RICE) (at least 3 sessions) carries less potential risk than a planned group experience for master's-level counseling students.

        1   2   3   4   5   6   7

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35. Faculty members serving as counseling program coordinators who have themselves sought personal individual counseling will have a more positive attitude toward requiring master's students to participate in a RICE (at least 3 sessions).

    1   2   3   4   5   6   7

IV. Policies and procedures of your counselor training program.

36. Which of the following statements describes the policy of the master's-degree program you coordinate/chair/direct/head regarding master's degree requirements?

___ All students are required to participate as a client in individual counseling.

___Only some students (e.g. those who are currently in remediation) are required to participate as a client in individual counseling.

___ Only some students (e.g. those who are currently in remediation) are Encouraged but not required to participate as a client in individual counseling.

___ Gaining experience as a client in individual counseling is encouraged but not required.

___ My program has no policy regarding students' participation as a client in individual counseling.

37. Does your master's level training program require that students participate in the role as a group member in a planned academic group experience?
___ Yes   ___ No

38. If your program <u>does not</u> require master's-level students to have an experience as a client in individual counseling (at least 3 sessions), please state why this is the case.
    Survey participant fills in answer

39. If your program <u>does</u> require students to participate in a required individual counseling experience (RICE), please respond to the remaining three questions:

How many sessions are required?

[drop-down menu]

What are the intended outcomes for students of participating in a RICE?

Survey participant fills in answer

How is this experience documented?

Survey participant fills in answer

How is the outcome measured?

Survey participant fills in answer

40. How satisfied are you that the RICE serves the purposes for which it is
     intended?

  Very Dissatisfied, Dissatisfied, Slightly Dissatisfied, Unsure,

  Satisfied, Slightly Satisfied, Very Satisfied

41. Please add any comments you wish to offer (optional).

Survey participant fills in answer

APPENDIX C: IRB APPROVAL LETTER

University Committee for the Protection of Human Subjects in Research
University of New Orleans

_____

Campus Correspondence

Principal Investigator: Barbara Herlihy

Co-Investigator: Kristen UnKauf

Date: December 10, 2009

Protocol Title: "A Personal Counseling Experience for Master's Level
                             Counseling Students: Practices and Perceptions of
                             Counselor Education Program Directors"

IRB#:   27Dec09

The IRB has deemed that the research and procedures described in this protocol application are exempt from federal regulations under 45 CFR 46.101category 2 due to fact that responses will be obtain anonymously.

Exempt protocols do not have an expiration date; however, if there are any changes made to this protocol that may cause it to be no longer exempt from CFR 46, the IRB requires another standard application from the investigator(s) which should provide the same information that is in this application with changes that may have changed the exempt status.

If an adverse, unforeseen event occurs (e.g., physical, social, or emotional harm), you are required to inform the IRB as soon as possible after the event.

Please correct the contact number for Ann O'Hanlon on your consent forms. The correct number is 504-280-3990.

Best wishes on your project.
Sincerely,

Robert D. Laird, Chair
UNO Committee for the Protection of Human Subjects in Research

APPENDIX D: OTHER PRIMARY WORK SETTINGS OF COUNSELOR EDUCATION PROGRAM DIRECTORS (OTHER THAN PRACTICUM AND INTERNSHIP)

Work Settings	n
1. Rehabilitation Facility	8
2. Corrections	5
3. Church Counseling	4
4. Career Center	3
5. Military Mental Health Facility	3
6. Non-profit Agency	3
7. Residential Treatment	3
8. Medical School	2
9. Student Affairs (higher education)	2
10. Camping Facility	1
11. University Student Assistance Program	1
12. College Dean	1
13. Consulting Psychologist	1
14. Department Chairperson	1
15. Diversity Enhancement Program	1
16. Family Counseling Center	1
17. Program for At-Risk Youth	1
18. Group Home	1
19. Health Care Administration	1
20. Medical Setting	1
21. Mobile Crisis Team	1
22. Nursing Facility	1
23. Pastoral	1
24. PHP, RTC	1
25. Preschool	1
26. Proprietary Rehabilitation	1
27. Psychology Training Clinic	1
28. Upward Bound	1
29. School District Director/ School Psychologist	1
30. Sex Therapy	1
31. TBI Facility	1
32. VA Hospital	1
33. Vocational Rehabilitation	1
34. Women's Center	1
Total	56

APPENDIX E: QUALITATIVE DATA

Participants' responses to Item 38.

If your program does not require master's-level students to have an experience as a client in individual counseling (at least 3 sessions) please state why this is the case.

1. 3 sessions won't give them insight into the process as well as a bunch of realistic role plays as clients. Further if they have a lousy counselor then they can pickup some bad habits.

2. A blanket requirement for individual counseling takes away individuals' right to choose.

3. Although a useful strategy, other academic and experiential activity also works well...so it is just a strategy that we have not used.

4. As a faculty, we don't feel that strongly that we should require students to do this. We provide our own "real play" situations as part of our required course work.

5. Belief that personal motivation is key to progress in counseling.

6. Concern for costs, counselor availability, ethics of requirement.

7. Confidentiality.

8. Consideration of the cost in time and money has been a factor.

9. CORE

10. Cost and no current facility.

11. Cost is probably the most significant obstacle.

12. Cost of 3 sessions, forced nature of the experience, what is the documentation of meeting the requirement, does documentation break the confidentiality for the student. I was in an APA approved program in Counseling Psychology that required students to g as a group to the University Counseling Center for Group Counseling. The Counselor dismissed the group because trust was not established and so no one wanted "to work."

13. Cost, do not believe in "forcing" students into counseling, diverse theoretical orientations.

14. Costs and available sites.

15. Do not believe it is ethical to require it.

16. Expense.

17. Experience as a client is encouraged but is not required by our program at this time. There is conversation among faculty to revisit individual counseling as a program requirement.

18. Faculty believe it may be unethical to require counseling.

19. Faculty feel that repeatedly strongly encouraging it is the better way to approach this aspect of students' professional development.

20. Faculty reluctance.

21. Faculty have seen this as an ethical issue.

22. Focus of the program is school counseling. School counselors should not be attempting therapy in the school setting. Also, we are a rural setting and counseling resources that would be totally confidential are extremely limited.

23. For most of the reasons that you mentioned (cost, ethical considerations, etc); however I also think that there is inertia from past behaviors. in that, it would take considerable cultural change in our department to move in a new direction to requires individual counseling.

24. Forced counseling may not work.

25. Historically it has not been done - however, we have been wrestling with the issue for a number of years. Cost and the details (campus wellness center, private practice, when in the program, etc.) have been stumbling blocks - although the majority of the faculty are in agreement theoretically that it would be a positive move.

26. I think it would benefit all master's-level counseling students to participate in their own counseling experience. As a university, they are not required to do so unless this is part of their remediation plan. I talk with my students about doing their own work through individual counseling and encourage them to do so on their own.

27. I'm not sure. I do HIGHLY recommend it to all students in Pre-practicum. To be very frank, one concern I have is the lack of skill level and overall professionalism present in our campus counseling center.

28. I'm not sure... I teach GROUP, so I know that "group work" is required for at least 10 hours.

29. If student attend the Counseling Center on campus they are not allowed to intern at that site.

30. In the ethics course students were able to choose individual counseling as one of two options for a required assignment. The students were able to attend these sessions at the university counseling center.

31. Issue is discussed in depth in several courses and internship supervision. Students make decisions whether individual personal counseling experience is appropriate for them. Faculty members may encourage students to do so when specific issues arise that suggest that it would be effective for an individual student.

32. It has never been considered by our program.

33. It is hard to require a form of treatment because it assumes that someone requires it for a mental health issue. It is similar to getting treatment for a physical illness that may not exist. A better option is a "mental health well check" if this exists.

34. It is one of the options in the portfolio to demonstrate personal growth.

35. It is recommended, and suggested, but students may not be ready to work on their own issues until later in the program.

36. It is unethical.

37. It is unethical to require this.

38. It just hasn't happened yet. I don't think there would be any real opposition to the idea.

39. It recommends the experience, and if the students go through a remediation process, they may be mandated to personal counseling.

40. Lack of consensus among faculty about the potential benefits and potential risks of maintaining confidentiality in rural areas.

41. Lack of consensus on benefit/risk.

42. Legal and potential ethical conflicts in making such a requirement fit students.

44. Limited resources; securing qualified counselors.

45. Most have done so just on the recommended level. We are looking at moving to required individual sessions to supplement required group.

46. Most of our students have already done this or do it voluntarily based on our strong encouragement. We do not have resources to provide these services at a student friendly cost.

47. Most of the student in program enter personal counseling as they progress through the program ~50%. When this group does enter counseling it is on their own according not someone else's, which greatly increases the potential for the process to be successful.

48. N/A

49. No agreement among faculty that it should be required.

50. No consensus on benefit.

51. No one has ever followed through on bringing it to the faculty as a formal proposal.

52. No research to support the requirement in terms training outcomes.
53. No resources to provide at low/no cost.

54. Not required by CACREP; not sure it is ethical to mandate it; fine with current policy of encouraging it for when people need it; we do some much other experiential work in schools in pre-practicum hours that we see that as more valuable to get our candidates out in schools early and often doing a variety of tasks prior to practicum and internship.

55. Not required by CORE.

56. Not specifically mandated by CORE.

57. Not sure how it could be mandated or enforced.

58. Not sure why we have not made it a requirement--something to follow up with the faculty.

59. Not sure; I suspect it is an artifact from previous faculty discussions/concerns around ethical issues of confidentiality, dual relationships, mandated counseling as a program requirement, etc..

60. Not sure; I suspect it is an artifact from previous faculty discussions/concerns around ethical issues of confidentiality, dual relationships, mandated counseling as a program requirement, etc..

61. Our faculty believes that it is unethical to compel students to participate in counseling as part of their training experience. Issues related to confidentiality, expense to students, and the idea that a counselor can be effective only if he or she has bee in individual counseling is not held by the faculty in this program.

62. Our growth groups are excellent and we encourage but not require students to seek counseling. Many work on their issues in techniques and theories classes since there is a strong practice component.

63. Our legal counsel has informed me that setting up such a requirement sets the stage for an ADA complaint should we need to terminate a student from our program. Mostly, I am concerned that a 3 session experience does little good and potential harm--you open things up without the containment or ability to work things through. What our program does is strongly encourage students toward treatment (longer term) and help facilitate low fee referrals. Most students have taken advantage of this, viewing it as supportive rather than punitive.

64. Perception that this cannot be required legally.

65. Politics...I think they should and have said so strongly.

66. Privacy Rights of Students.

67. Probably due to the logistics and current requirements do not specify that counseling is required.

68. Required counseling seems inappropriate just as it is difficult to counsel someone who is mandated to be there.

69. Required of students in the remediation process (both individual and group counseling).

70. Requiring counseling is not ethical. Students should not be coerced into counseling. It is not something I think we should model in our program. Instead our program educates students about the need for and benefit of pursuing your own counseling. In this ay we model how to encourage others to participate. We model good self-care which includes not only physical checkups, but counseling checkups as well.

71. Risk of litigation; challenge of assuring qualification level of counselor; cost to either counselee-client or to program.

72. Students may role play as either client or counselor.

73. The counseling center on campus is not a viable resource for our students to complete a RICE. We have not explored ways to make the experience available at no cost at agencies in the community.

74. The faculty could never agree to do it. Some faculty don't think 3 sessions would be valuable. It would have to be approved at several levels including lawyers.

75. The faculty encourages all master level students to engage in RICE but does not require (at this time does support the concept of force).

76. The program is in transition, this requirement is being considered.

77. The University Legal Department is not in support of this as a mandated requirement.

78. The university says we cannot require therapy for our students as part of their degree.

79. There are a number of reasons: mandated counseling not so helpful and can be harmful; not much can be learned from only a minimum of 3 sessions; ethical issues arise; boundary issues arise regarding where students are supposed to get the counseling experience; practical issues arise such as expense and time; classroom experiential exercises can be more productive...

80. There are legal ramifications of this...and there is difficulty in ensuring that the counseling would even be any good...and we offer experiences that students really embrace within the pre-practicum experience and in a group facilitation class.

81. There has been concern about the costs involved with this type of requirement in addition to the issue of confidentiality.

82. There is no clarity on how the information from the counseling sessions would be used. If information is not obtained, there does not seem to be a valid reason for instituting this requirement.

83. There is no consensus or prevailing empirical data about the benefits of RICE.

84. There is no empirical evidence to indicate that a RICE benefits counselor trainees or their clients.

85. There is no research which supports the requirement of 1, 2, 3 0r more sessions I would like to know the other question...if your program does require individual counseling Why?

86. There is some concern on the part of the university as to the legal ramifications of the policy. Also there is concern about who absorbs the cost of the experience.

87. There really is not a reason, that's just the way it was when I got here and we haven't changed it.

88. There were several problems with this survey. I was frustrated because the questions assumed that RICE was a "required" element rather than "recommended." We strongly recommend every student to engage in counseling, set up several ways for them to participate free of charge, and require them to participate in clients in two groups (about 35 hours). The key is the "requirement." I do not believe programs should require students to engage in activities for which they may not be ready, but all counseling students should engage in counseling before the attempt to counsel others.

89. They do have an experience as "practice" clients in the Skills class.

90. They get constant role play experiences throughout the program. Three counseling sessions for no good reason is useless and time wasteful for both parties.

91. This policy has not been discussed.

92. Time and expense.

93. Time, money and potential ethical issues. If those could be resolved, we would definitely include it as a requirement.
94. To be honest, the faculty have never discussed the possibility.

95. To date we have been reluctant to impose a requirement to become vulnerable as a client, although we do recommend it to all students and we strongly recommend it to students with evident issues.

96. Too many confidentiality and dual relationships potentially involved; students do not take it seriously.

97. Two reasons. 1) It is unethical to mandate therapy outside of forensic environments, and 2) we emphasize using evidence based practice to help clients with identified problems. Counseling for counseling's sake is BS, unethical, and those who espouse it cannot be considered competent.

98. Uncertain benefits.

99. Unethical; no data supporting its utility especially the required aspect.

100. Unrealistic time demands on students and professional counselors to provide experience. Cost.

101. Unsatisfactory reports from students about their experience at the cost-free option that was provided.

102. Unsure...I assume complications around implementation.

103. Very large program, not really part of the culture, logistics of arranging it and monitoring it would be burdensome.

104. We are a new department and this is not on the top of the list of things we need to do, it is close to the top though.

105. We are situated in a small community and are concerned that referring 20 relatively healthy kids to counseling as a matter of practice or just for the experience would tax an already over burdened mental health system.

106. We believe that strong encouragement is more effective than a requirement, which may be legally indefensible.

107. We believe the group experience required can create the desired effects for our students. Students who struggle interpersonally may be required to attend RICE.

108. We do not believe that mandating counseling is a necessary component of the training process. Many students follow our strong encouragement to pursue such counseling as an adjunct to their professional growth during the program. When students seem to be experiencing personal difficulties, we may require them to seek counseling to work on specific identified issues. We require them to provide a letter that states that they attended a

certain number of sessions, and we ask them to describe their progress in he identified area, but we never speak with the counselor about personal issues.

109. We do not believe that this experience can be coerced.

110. We do require it of certain students under a remediation plan. Would be best to be able to mark several categories for that question vs. only one.

111. We encourage it, but do not require it for a variety of reasons. We want students to seek counseling voluntarily (not have it mandated) and we are concerned about the expense as well as the additional workload for the counseling center.

112. We have been advised by university lawyers that we cannot require individual counseling.

113. We have discussed requiring a RICE; however, the faculty has never been in agreement to make it mandatory. We strongly encourage it, however.

114. We have never established this as a policy, but do informally recommend it to students.

115. We have not seen statistical evidence of its value.

116. We recommend it but have been advised to not require it by administration.

117. We would if we had an independent and cost free staff to do it. Our counseling center is already overburdened and we not have doctoral students.

118. While individual counseling experience is recommended in the program, the program does not require the candidate to participate as a client in personal counseling. The availability of counseling services to many of our candidates who live in isolated, rural communities is very limited; therefore, it would be at a hardship to require this experience.

119. Worth of that experience is too variable.

120. The coordinator complained that too many students were seeking counseling. The option was discontinued.

APPENDIX F: QUALITATIVE DATA

Participants' responses to Item 41.

Please add any comments you wish to offer (optional).

1. All answers depend upon the quality of the counselor delivering the sessions. I think requiring 6 would be even better.

2. All counseling students should see what it's like to be the client in order to truly understand what clients go through.

3. An individual personal counseling experience may be effective for many and maybe most counseling students. However, I do not feel that it should be required. Clinical supervision can often be very effective in helping students become self-aware of issue that may impact their counseling relationships. Another interesting issue that is not addressed in this survey, is whether students have had any experience with personal counseling prior to enrolling in a counseling program.

4. Coming to terms with an issue that one needs help resolving is often more meaningful than an artificial attempt at getting counseling.

5. Community Counseling is not listed. Our faculty is split with the requirement of individual counseling.

6. Consider what the stages of change would say about requiring counseling.

7. Cost benefit-Favor RICE in the abstract-practical implications in the concrete outweigh this.

8. DO nursing, medical, law and dental professional schools require their students to participate in a similar "RICE" experience? If not, what are their rationales for not doing so?

9. Experience as a group member is required beyond the academic group.

10. First I got my doctorate in 1976. Second I have been a coordinator for 32 years. Lots of "unsures" because three sessions is useless unless you believe in SFBT.

11. Good Luck - I think the need for students to receive counseling is necessary.

12. Great idea for a study. Look forward to the results.

13. Having the experience of being a client is, in our opinion, one of the best personal & professional growth experiences that our students discuss during their portfolio defense.

14. I am absolutely in support of individual counseling and group counseling experiences; however, I think there is risk in providing some short term experience and evaluating students on their experience. We've done it in the group course (with an outside facilitator), but we're rethinking how we've done it because many students have complained about the level of exposure without adequate time to work things through. So, I thin the effectiveness is dependent on the design, having someone outside the program facilitate it, etc.

15. I answered unsure to many questions, because the quality of individual counseling cannot be guaranteed. If the counselor is effective, then I believe RICE would be helpful. However, counseling might not be effective and could be harmful to the student.

16. I believe that 3 sessions is just a seed, but certainly not sufficient in any way. It takes at least 3-4 sessions to establish an alliance.

17. I explain to prospective students that RICE serves at least three purposes: 1) your wellness; 2) to experience what a client experiences; 3) to learn from what works/doesn't work regarding the counselor's role. This allows the student to figure out for her/his-self how she/he will practice in the future. Lessons learned from the experience, so to speak.

18. I found some of the questions difficult to answer. For example re. CACREP requirements, I would say that the group experience BY ITSELF is a good but not sufficient start at meeting the requirements. Same with "real plays". Finally, with RICE where service are provided by professional counselors (or other mh providers), I would say much depends on the counselor, how many sessions are required, and how this is all explained to the students. There are little to no data to support that 3 required sessions are enough to meet the programmatic goals for requiring the sessions, let alone how the required # of sessions relate to meeting student/client goals rather than simply opening up proverbial cans of worms. Good luck with this survey. I look forward to seeing what you find!

19. I found the statement "at least 3 sessions" problematic because I would want students to experience therapy for no less than 6 months in order to gain any real personal or academic benefit. If it were 3 sessions and out, I would find that to actually be detrimental to their understanding and appreciation of what counseling is all about.

20. I have occasionally made a RICE part of a specific course I was teaching and have observed that some students did have a negative experience with a particular counselor. I have been told about some of my colleagues turning a required group experience and a required "real" play situation in clinical skills training into inappropriate intrusions into our students' personal lives. Nonetheless, I do believe these experiences can be useful to most students when they are handled appropriately. And, I use a variety of activities (such as semi-structured reflective journal writing) to support my students in gaining self-awareness.

21. I hope this survey will assist me in getting the individual requirement at our institution.

22. I received my degree in 1976, but was unable to select that as an option.

23. I see it as ineffective.

24. I think it infringes on their personal rights to require counseling as a requisite for admittance - but I would be worried about someone who was reluctant to seek help, given the profession they are entering.

25. I think one can be an effective counselor without participating in mandatory individual sessions. However, it is a useful experience and should be highly encouraged.

26. I think the RICE would depend a great deal on the approach. For instance, a solution focused or other empowerment approach would be extremely beneficial for both counselor attitude, empathy, and avoiding burnout.

27. I think there are many potential benefits to students participating in RICE, as long as the counselor is a good, ethical, practitioner.

28. I was Program Coordinator of our Community Counseling Program. This was not offered as an option at the beginning and there was no format for me to specify as requested.

29. In our institution the counseling is provided by program practicum students or graduates doing an internship.

30. Interesting questions. may I know what your hypothesis is and may I receive a copy of your findings?

31. Many of my responses were driven by the (at least 3 sessions) aspect of the questions. I think requiring personal counseling could be very beneficial. However, I don't know that 3 sessions would accomplish much. This structure, could, in fact, give students a false sense of security around their counseling experience and impede genuine, reflective counseling. I do believe the more opportunities we provide for self-awareness and conscious choice-making, the better prepared our students will be.

32. Most responses were constricted due to unknown quality of clinical services to be provided in the RICE for students. If acceptable quality treatment is to be assumed (for the student in the RICE), then you should exp[licitly state that.

33. My doctoral student, Kathy Oden, conducted her dissertation research on this topic a few years ago. Students self-reported gains in self-awareness and overwhelmingly recommended that future students participate in the activity.

34. Nice to have versus need to have. RICE experience is NOT essential in training qualified counselors.

35. No.

36. None.

37. Not sure how we would control for what needed to be discussed nor the quality or skills of who would be doing the counseling of students. It presents many more ethical concerns than it resolves. Happy with the group component b/c we deemphasize individual counseling in schools b/c there is no time for it with high caseloads. We emphasize group work and SC curriculum lessons and planning for all students as the major intervention modalities, so individual counseling is taught but the least emphasized in our program--it would make no sense to require it for students but they are always welcome to pursue it on their own.

38. One cannot predict if the experience would be helpful or not.

39. Our entry level program is Masters of Arts in Community Counseling and is accredited under the 2001 standards.

40. Please see my comment re: the campus counseling center. This is a very serious concern for me.

VITA

Kristen Guidry UnKauf earned a Bachelor of Arts degree in Sociology in 1993 from the University of New Orleans, and earned a Master of Education degree in Counselor Education in 1998, also from the University of New Orleans. Kristen is currently a candidate for the degree of Doctor of Philosophy in Counselor Education at the University of New Orleans, and is expected to graduate in May 2010.

Kristen is a Licensed Professional Counselor (LPC) and a National Certified Counselor (NCC). She is a member of the American Counseling Association (ACA), American College Counseling Association (ACCA), and Louisiana Counseling Association (LCA). Kristen is also a member of Phi Kappa Phi honor society.

Kristen has experience as a college mental health counselor as well as private practice. In October 2009, she presented at the annual Louisiana Counseling Association state conference, and in 2010 at the annual American Counseling Association national conference. Research interests include mental health counseling in higher education.