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# THE PROFESSIONAL IDENTITY OF COUNSELING STUDENTS IN MASTER'S LEVEL CACREP ACCREDITED PROGRAMS

by

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A Dissertation submitted to the Faculty of Old Dominion University in partial fulfillment of the requirement for the degree of

Doctor of Philosophy

Counseling

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#### ABSTRACT

THE PROFESSIONAL IDENTITY OF COUNSELING STUDENTS IN MASTER'S LEVEL CACREP ACCREDITED PROGRAMS

Bianca Puglia

Old Dominion University, 2008

Director: Dr. Theodore P. Remley

This study examined the professional identity of master's level students enrolled in a

CACREP accredited training program. Professional identity was assessed through two

instruments: the Beliefs about Counseling Scale and the Professional Identity and

Engagement Scale which was developed for this study. The constructs of professional

identity represented in the scales included belief in the acquisition of licensure and

credentialing, the distinctiveness of professional counseling among other mental health

professionals, pride in the counseling profession, agreement with the counseling

philosophy, and behaviors exhibiting professional engagement.

Participants were 1,011 students enrolled in 79 CACREP accredited master's level

training programs. The student participants provided demographic information used for

this study. Information on student level (beginning, intermediate, or advanced),

enrollment status (full-time or part-time), years of paid professional counseling-related

experience, and whether a student was attending a program that also offered a doctoral

program or was in a master's only program was gathered.

Results indicated a strong agreement with the counseling philosophy and a presence of professional engagement behaviors. Additionally, participants expressed a high degree of agreement with the other criteria represented in the Beliefs about Counseling Scale. Further findings revealed that some of the conceptualized components of professional identity were being uniformly presented across the counseling training programs.

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### **CHAPTER ONE**

#### INTRODUCTION

Professional counseling is a master's level entry profession. That is, in order to become a professional counselor, a master's degree is required. Training and exposure to the profession officially begins in master's level training programs. As counselors-intraining progress through their training programs, they begin to acquire the necessary skills and knowledge to become both clinicians and professionals. Professionalism is an important aspect of professional counseling. This study examines professional identity on three levels: counseling philosophy, beliefs about the counseling profession (related to preparation program accreditation, licensure, certification and pride in being a professional counselor), and professional engagement.

As professional counseling is relatively new among the mental health professions, the professional identity of counselors has yet to be definitively articulated (Gale & Austin, 2003; Myers, 1992; Myers & Sweeney, 2004; Pistole & Roberts, 2002; Remley & Herlihy, 2007). It is important that professional counselors know who they are as professionals and how they differ from other mental health professionals. It is also important that professional counselors know the behaviors that are expected of them once they enter the field. Knowledge of the counseling philosophy and an understanding of the importance of professional engagement will give counselors-in-training the awareness needed to become strong and active members of the counseling profession.

The literature is in agreement that the counseling philosophy is based on a developmental orientation (Hansen, 2003; Ivey & Riggazio-DiGiglio, 1991; Ivey & van Hesteren, 1990;

Myers, 1992; Pistole & Roberts, 2002; Remley, 1991; van Hesteren & Ivey, 1990). This developmental orientation entails an approach to clients that rejects the medical model of illness and views clients as moving through a natural progression of human growth. The developmental perspective also embraces a holistic view of clients through which wellness is included (McAuliffe & Eriksen, 1999; Myers, 1992; Remley, 1991). The wellness perspective approaches clients from a macro view and surpasses the presenting problem that initially brings clients to seek professional counseling services.

By considering life stressors as natural to the human experience and promoting a lifestyle based on wellness, counselors facilitate clients' abilities to face future life stressors autonomously. This is called prevention (McWhirter, 1991; Myers, 1992; Remley, 1991; van Hesteren & Ivey, 1990).

The process by which prevention, development, and wellness is achieved is called empowerment (McWhirter, 1991; Remley & Herlihy, 2007). Empowerment is the process of facilitating clients' capabilities to negotiate their life's journey independently. It entails an awareness of the societal, cultural, and familial influences that have an impact on clients' lives. This awareness paves the way for skill development resulting in clients' abilities to gain and wield control over their lives. The components of the counseling philosophy are interrelated and complement each other in the way they promote client growth.

Professional counselors with a strong professional identity believe that professional counselors should belong to the American Counseling Association (ACA), should obtain professional counselor licenses and certifications, should attend graduate programs accredited by the Council on Accreditation of Counseling and Related

Educational Program (CACREP), favor the term *counselor* over terms such as *therapist*, receive supervision from other professional counselors, and have pride in being professional counselors. These are *beliefs* about the counseling profession as articulated by Gray (2000).

It is not enough for professional counselors to just learn about the counseling philosophy in their training programs or to develop the belief that professional counseling is a profession that is separate and distinct from other mental health professions. It is important that counseling students conduct themselves in a professional manner once they enter the field. The maintenance of professional counseling skills and competence is an important part of being a professional counselor. Professional activities such as attendance and presentation at conferences, membership in professional organizations, participation in research, the pursuit of licensure and credentials, and advocacy for clients as well as advocacy for the counseling profession are desired behaviors of a professional counselor who has a strong sense of professionalism (Feit & Lloyd, 1990; Van Zandt, 1990). These behaviors have been identified as professionalism and also as professional identity in the literature (Feit & Lloyd, 1990; Spurill & Benshoff, 1996; Van Zandt, 1990; Zimpfer, Mohdzain, West, & Buvenzer, 1992). The term professional engagement is being introduced here in an effort to demonstrate the closely linked relationship between belief in the counseling philosophy, beliefs about the counseling profession, and the desired behaviors of a counseling professional. A professionally engaged counselor also will have a strong belief in the counseling philosophy as well as agree with the beliefs about the counseling profession as laid out by Gray (2000) thus demonstrating a strong professional identity. Myers and Sweeney (2004) reported a lack of professional

counselor involvement in the profession itself as a great obstacle to the success of current advocacy efforts.

The three components of engagement, philosophy and beliefs about the profession make up professional identity. A necessitous factor that spurs professional engagement is a professional counselor's sense of pride in the profession. Counselors who take pride in their chosen profession will have a strong professional identity (Remley & Herlihy, 2007). Van Zandt (1990) pointed out that professional engagement can be a source of pride for professional counselors. Zimpfer et al (1990) used professional engagement behaviors of faculty members as part of their criteria for assigning a professional identity to counselor education training programs.

The literature clearly calls for more investigation into the professional identity of counselors. An expanded knowledge of the nature, development, and maintenance of professional identity will benefit both the profession and its practitioners.

#### **Purpose of the Study**

The purpose of this study was to investigate how professional identity develops in counselors-in-training as they progress through a Council for the Accreditation of Counseling and Related Educational Programs (CACREP) accredited master's level preparation program and how professional identity is related to various other influences. Professional identity has been an important concern for the counseling profession as it strives for full recognition among other mental health professions. As one of the youngest of the mental health professions, professional counseling still seeks to unify its

identity, to achieve equal status with other similar professionals, and to educate the public on the services rendered by professional counselors.

The professional literature calls for counselors to be advocates for their profession and for the inclusion of the components of professional identity in counselor education preparation programs. Since professional identity often originates in the training programs, an investigation of professional identity in counselor preparation programs will be an important addition to the professional literature.

## **Context for the Study**

There has been much discussion in the literature on the topic of professional identity. Studies investigating professional identity have approached this important topic in many ways. Gale and Austin (2003) identified obstacles to professional counselors' collective identity in interviews with professional leaders. Inconsistency in licensure requirements, lack of reciprocity among state licensing bodies, the lack of licensure requirement for some practice settings, absence of consistent standards across accrediting bodies, need for the development of a body of research specific to professional counseling, lack of professional counselor involvement, and a need to return to our developmental foundation with a rejection of the medical model were all identified as obstacles to counselors developing a strong professional identity.

Zimpfer et al (1992) examined the professional identity of faculty members in counselor education graduate programs. They used professional engagement behaviors as part of their criteria for determining professional identity. They were interested in the congruence of faculty professional affiliation and program affiliation. Although they

found that the majority of programs had faculty whose professional identity was congruent with the programs accreditation affiliation, Zimpfer et al. reported that a number of programs possessed a dual identity.

Myers and Sweeney (2004) investigated the nature of the ongoing advocacy efforts by the counseling profession's representative organizations. From their survey of the leaders of national, state, and regional professional organizations, they discovered some needed changes in the advocacy strategies for the profession. There was a continued call for the development of a definitive definition of identity for counselors, as well as a call for counselors to become more involved in promoting their chosen profession. Myers and Sweeney also noted that advocacy efforts among the counseling professional organizations would be improved through the development of a collaborative strategy.

On the topic of beliefs about the counseling profession, Gray found that counseling supervisees held stronger beliefs about professional identity when the supervisor was a Licensed Professional Counselor (LPC). This belief was stronger for supervisees who resided in states where licensure laws required that supervisors hold an LPC and prohibited supervision with a mental health professional from a profession other than a professional counselor. Gray interpreted this to mean that counselors develop their professional identity through relationships with other professional counselors. This speaks to the importance of awareness on the part of counselors-in-training of professional engagement. Counselors need to know how to maintain their competence as well as where to find like-minded professionals. LaFleur (2007) examined the attitudes and contributing factors to professional identity as perceived by Licensed Professional

Counselors. Respondents identified membership in professional organizations, supervision during training, licensure, and advocacy for the profession as contributing to the development of their professional identity. The results of LaFleur's study illustrate the interrelatedness of engagement and professional identity.

The aforementioned studies examined professional identity from either a systemic perspective (e.g., training programs, institutional advocacy efforts) or from a post-licensure perspective. From these investigations, contributing factors, as well as, obstacles to counselor professional identity have been identified. This study will use the information gleamed from this research to investigate the professional identity of counselors-in-training as they progress through their CACREP-accredited training programs.

## **Research Questions**

#### One

Do instruments that measure counselor agreement with the counseling philosophy, beliefs about the counseling profession, and professional engagement significantly measure the same construct, counselor professional identity?

#### Two

Is there a significant relationship between the level of agreement with the counseling philosophy in counseling master's degree students and their personal characteristics?

#### Three

Is there a significant relationship on the level of beliefs about the counseling profession in counseling master's degree students and their personal characteristics?

#### Four

Is there a significant relationship on the level of professional engagement in counseling master's degree students and their personal characteristics?

#### Limitations

Those aspects of a study that may negatively affect its results or generalizability and over which a researcher has no control, are known as limitations (Gay, Mills, & Airasian, 2009). Some of the anticipated limitations of this study include the following:

- (1) Respondents were divided into three stages representing the beginning, intermediate, and advanced stages of their master's degree preparation programs. These stages were created according to curricular standards and may not represent the true stages of development for each counselor-in-training counselor-intraining. Beginning counselors-in-training are those who have not surpassed the completion of three courses in their training programs. Intermediate counselors-in-training are those who have completed more than 3 courses, but are not yet enrolled in practicum or internship. Advanced counselors-in-training are those who have completed more than 3 courses and are currently enrolled in either, practicum or internship.
- (2) The study was comprised of 61 items which made the survey quite long and may have been a maturation threat for potential respondents.
- (3) The construct of counselor professional identity is not yet clearly defined and the

- definition on which this study was based may not be shared by all professional counselors.
- (4) The study was not representative of all counselors-in-training as it included as participants only those students enrolled in CACREP accredited master's level programs.
- (5) This study was intended to survey all counselors-in-training enrolled in a

  CACREP accredited master's level training program. As potential participants

  were not contacted directly, but through the faculty at their respective programs, it

  is not guaranteed that all counselors-in-training enrolled in a CACREP accredited

  master's level training program had the opportunity to participate in this study.
- (6) There is the consideration of self selection which addresses the fact that those who chose to participate in a study shared characteristics that could have influenced the results.
- (7) The instrument was developed for this study and despite efforts that were made to ensure reliability and content validity, it is possible that there were limitations in the validity of the information gathered in this survey.

## **Assumptions**

Any fact presumed to be true that is not actually verified is considered an assumption (Gay, Mills, & Airasian, 2009). In this study, it was assumed that

- all CACREP accredited master's level programs followed the standards required by the accrediting body;
- (2) participants were honest in their responses on the instruments;

- (3) the instruments accurately measured the constructs as they were presented in this document;
- (4) the instruments were disseminated to all master's level counselors-in-training in CACREP accredited master's level programs;
- (5) data for this study was collected, recorded, and interpreted in an ethical and accurate manner; and
- (6) the sample was representative of counselors-in-training who were enrolled in a CACREP accredited master's level program.
- (7) professional identity begins in a master's level training program.

#### **Definition of Terms**

Advocacy is the act of promoting a belief, action, or opinion. Advocacy in professional counseling refers to the promotion of the profession through collaboration with other mental health professionals, education to increase public awareness of professional counseling, and lobbying efforts to promote legislation for the benefit of professional counselors. Advocacy also refers to the facilitation and promotion of clients' abilities to access resources and services.

American Association of Pastoral Counselors (AAPC) is the representative organization for counselors who work from a theological or spiritual perspective. The organization sets standards, promotes pastoral counseling, and supports professional journals.

American Counseling Association (ACA) is the representative organization for professional counselors. ACA and its divisions support advocacy for counselors and the counseling profession, continuing education, research, and peer-reviewed publications.

American Personnel and Guidance Association (APGA) is the precursor organization to the American Counseling Association.

American Psychological Association (APA) is the representative organization for psychologists. APA serves the same function for the psychology profession as ACA does for the counseling profession. APA also serves as the accrediting body for the psychology training programs as CACREP does for the professional counseling training programs.

Commission for Accreditation of Marriage and Family Therapy Education (COAMFTE) is the accrediting body for graduate training programs in marriage and family therapy.

Commission on Rehabilitation Counselor Certification (CRCC) is the organization that sets standards and monitors the awarding and maintenance of the Certified Rehabilitation Counselor Credential. A professional counselor holding this credential has completed a specified set training, has demonstrated specialized knowledge, and is required to pursue continuing education.

Commission on Rehabilitation Education (CORE) is the accrediting body that sets curricular standards for rehabilitation counselor training programs. Programs that seek CORE accreditation must meet the standards and apply for accreditation.

Council for the Accreditation of Counseling and Related Educational Programs

(CACREP) is responsible for setting curricular standards for counselor education training

programs. Only programs meeting CACREP standards can apply and earn the right to say they are accredited. CACREP accredits programs in the specialty areas of mental health, community, school, career, gerontological, and college counseling.

<u>Professional counseling</u> is a collaborative relationship between a professional counselor and an individual or individuals whose purpose is to facilitate the growth and development of the individuals resulting in movement toward self actualization.

<u>Counseling Philosophy</u> is the underlying belief system of professional counseling practice. It has four closely related components: development, wellness, prevention, and empowerment.

<u>Counselors-in-Training</u> refers to graduate students who are enrolled or admitted to master's level counseling training programs.

<u>Developmental Orientation</u> is a perspective underlying the counseling philosophy which entails a belief that human growth and development occurs in expected patterns.

These patterns may be stressful and are considered natural. A developmental orientation also includes a belief in positive human change.

Empowerment is the process by which individuals gain an awareness of the external influences on their lives and how they learn to gain control of their lives within these contexts.

<u>Licensed Professional Counselor</u> (LPC) is a designation used in many, but not all states, for professional counselors who have met certain criteria in order to be licensed to practice in the issuing state.

National Board of Certified Counselors (NBCC) is a certifying agency that offers a voluntary national certification for counselors. NBCC also develops the exams that are

used by some states for licensure and other specialty certifications, such as Licensed Professional Counselor, Licensed Mental Health Counselor, and National Certified School Counselor.

<u>Prevention</u> is a component of the counseling philosophy which is concerned with facilitating the acquisition of skills by clients who will then be able to successfully cope with future life stressors.

<u>Professional Development</u> is the maintenance of clinical competence through continuing education.

<u>Professional Engagement</u> is the set of expected behaviors for professional counselors which are considered a part of professional identity. Examples of professional engagement are attendance at professional conferences, legislative lobbying on professional counseling issues, and participation in research.

Professional identity is comprised of three components, agreement with the counseling philosophy, beliefs that the counseling profession includes activities such as becoming licensed and certified, and professional engagement. Counselors who have a strong professional identity agree with the counseling philosophy, believe that counselors should become licensed and certified, and exhibit the behaviors of professional engagement. In this study, the term *professional identity* always refers to the professional identity of counselors.

Wellness is a component of the counseling philosophy which encompasses a holistic view in professional counseling practice. Counselors working from a wellness perspective focus on educating clients to maximize their functioning in all aspects of their lives.

#### **CHAPTER TWO**

#### LITERATURE REVIEW

#### Introduction

In order to better understand the current state of professional identity for the counseling profession, a brief overview of the history of counseling is presented here. According to Remley and Herlihy (2007) and Neukrug (2007), it is generally accepted that the founder of the counseling profession is Frank Parsons whose work concerned vocational guidance. Parsons founded the Vocational Bureau whose mission was to match individuals to appropriate occupations and provide guidance that would take these individuals from education and training to placement and career planning. Vocational guidance was assured its professional status by the creation of the United States Employment Service in 1932 intended to provide vocational guidance to all unemployed Americans.

In response to the Russian launch of the satellite named Sputnik and the fear that Communists had achieved technological superiority, the U.S. Congress passed the *National Education Defense Act* of 1958. This piece of legislation charged secondary school counselors with the task of encouraging students to prepare for careers in math, science, and technological fields. As a result, vocational guidance moved into the schools. Initially, school guidance counselors were trained in summer institutes at universities and then through additional graduate level courses. This training was later provided through master's level counseling programs (Neukrug, 2007; Remley & Herlihy, 2007). Eventually, guidance was expanded to the elementary schools in addition to the middle and high school levels.

The decade of the 1960's brought the first set of ethical guidelines for the profession that was established by the American Personnel and Guidance Association (APGA). The *Mental Health Centers Act* of 1963 expanded counseling in the area of community counseling. Further expansion was seen in the 1970's in all aspects of counseling, particularly in the areas of school and rehabilitation counseling.

Also at this time, credentialing appeared for rehabilitation and mental health counselors. In 1974, Virginia was the first state government to license professional counselors. The 1980's recorded significant events on a national scale for the counseling profession. The Council for the Accreditation of Counseling and Related Educational Programs (CACREP) was established to set curricular standards for counselor education programs. The National Board of Certified Counselors (NBCC) appeared and offered a national credential for counselors called the National Certified Counselor (NCC). The decade of the 1990's has seen an expansion in licensure among the states, an increase in specialty credentials, and a focus on multiculturalism.

Counseling's roots can clearly be traced to psychological theories and techniques. Counseling psychology is closely aligned with professional counseling as counseling psychology also recognizes the importance of a developmental orientation to helping people resolve personal issues. An event particularly important to the profession of counseling was the move of psychology in the 1950s from a master's level entry profession to a doctoral one. The requirement for doctorate for the profession of counseling psychology essentially created the counseling profession which offers recognition and licensure at the master's degree level.

#### **Professional Identity**

As with any new profession, counseling has grappled with the development and discovery of its professional identity. Establishing or identifying counseling's professional identity has been a topic of debate in the professional literature throughout the history of the profession. The topic of professional identity currently continues to be popular in professional publications. Professional identity is given a prominent place in the CACREP standards. It is included as one of the eight common core areas of the curricular standards. The standards set as learning objectives aspects of professional functioning which include, history and philosophy of the counseling profession, advocacy for the profession and for clients, knowledge of professional organizations, distinctions between professional counseling and other human service providers, knowledge of credentialing and licensure, knowledge of ethics and computer literacy (CACREP, 2001). This description of professional identity is insufficient. It does not specify the philosophy underlying the counseling profession and the professional functions are not comprehensive enough for a full understanding of the concept of professional identity.

A look at the literature reveals that a clear definition of professional identity has yet to be articulated. Many investigators in the professional journals have identified various components of counseling's professional identity and have put forth definitions based on these identified components. Many of these components are recognized as aspects of counseling practice that differentiates professional counseling from other mental health professions, which logically should be included in a definition of counseling's professional identity. The following discussion outlines some of the components of professional identity of counselors and offers some proposed definitions.

#### The Counseling Philosophy

In order for a practitioner to identify as a professional counselor, it is necessary to know what makes counselors different from other mental health professionals. For counselors, the difference lies in the way in which they practice, as contrasted to the way other mental health providers practice. The counseling philosophy is the base on which counseling practice is built. The counseling philosophy entails the view of the human experience through the lenses of development, wellness, prevention, and empowerment.

A developmental orientation underlies all counseling practice according to Ivey and van Hesteren (1990). The developmental orientation entails a concern with positive human change and understands that there are expected life events, some of which are stressful, as humans grow and develop. The developmental perspective replaces the view put forth by the medical model which sees stressors as being indicators of mental illnesses (Remley, 1991). Ivey and Regazio-DiGilio (1991) said that life stressors are the impetus for growth and development.

The counseling component of wellness entails a view of clients from a holistic perspective. This comprehensive perspective considers both the mind and the body. (Ivey & van Hesteren, 1990). Myers (1992) traced the progression of the inclusion of wellness into the counseling profession. She identified wellness as one of the underlying foundations of counseling practice.

Prevention is another integral part of the counseling philosophy. Remley (1991) identified prevention as a primary concern for counselors in their practice. Ivey and Ragazzio-Digiglio (1991) stated that prevention was not at the forefront of counseling

practice. But earlier in 1990, Ivey and van Hesteren described counseling practice as proactive which implies prevention. Myers (1992) highlighted the interrelatedness of wellness, development, and prevention noting that healthy choices are made by healthy people. Albee & Ryan-Finn (1993) linked prevention to a developmental orientation and called for advocacy on the part of mental health providers to move from the medical model to a preventative perspective of mental health.

Empowerment, according to McWhirter (1991) underlies all counseling practice. She noted that it is rooted in the belief that individuals can make positive life changes and can learn the skills necessary to deal with future life stressors after completing counseling. Empowerment is the component of the counseling philosophy which further cements the interrelatedness of the components. Empowerment takes into account the groups, communities, and societies within which individuals function. It parallels development in its systemic view and its belief in positive change. It also echoes prevention in its goal of skill development for clients and its holistic view is shared by wellness.

van Hesteren and Ivey (1990) observed that the counseling profession was moving toward a developmental orientation and reported this as a natural progression due to counseling's roots in education. They noted that counseling differed from social work in its rejection of psychopathology and remediation. Counseling differed from clinical and counseling psychology in its holistic approach to change. While clinical and counseling psychologists are concerned with the individual, counselors help clients by viewing them in the context of the systems in which they live. They view clients through a developmental lens and see client stressors as developmental disturbances, which is

contrary to the medical model view of these disturbances as mental illnesses. van

Hesteren and Ivey proposed a definition for counseling's professional identity on four
fronts: (a) counselors are concerned with positive human change; (b) counselors
recognize that in addition to considering the individual, attention must be given to the
systems in which these individuals live; (c) counselors are aware of the diverse settings in
which counseling takes place in that they are in constant communication with these
settings which include school, community and business organizations. This preventative
orientation is unique to counseling; and (d) counselors are aware that all counseling
occurs in a cultural context. Multicultural forces are ever-present in counseling.

Ivey and van Hesteren (1990) further explained their position regarding the developmental orientation of counselors. They admit that there is considerable overlap among the mental health professions, but maintain that counseling's proactive practice sets it apart from those practitioners focused on remediation. They observed that counseling's more comprehensive view of the individual considers both the mind and the body. Some other mental health practitioners consider only the physical as is dictated by the medical model which focuses on repair and remediation. Ivey and van Hesteren have stated that the developmental orientation is the foundation on which professional counseling is built. Psychological interventions and theories come after a developmental understanding is achieved. They have said their position is supported by the existence of several ACA divisions dedicated to different aspects of development, such as, religion and values, multicultural counseling and development, and career development.

McWhirter (1991) presented empowerment as a key component of counseling.

She asserted that although the literature does not explicitly use the term, empowerment

clearly underlies a counselor's work with clients. She defined empowerment as the process by which clients become aware of how power affects their lives. Power refers to those external forces influencing clients' lives, such as the groups, communities and societies in which they live. Skill development is an important part of empowerment as it facilitates clients' ability to gain personal power and wield it in an appropriate manner. Empowerment results in the ability of individuals to exercise control over their own lives. Empowerment is rooted in the belief that clients can make positive changes and can, through education, gain the ability to deal with future life stressors.

Remley (1991) wrote that counselors reject the medical model and embrace the developmental perspective. He said that counselors are interested in prevention and believe that all people could benefit from counseling. According to Remley, professional counseling services are not reserved for those seen as mentally ill, but are appropriate for high functioning individuals as well.

Ivey and Regazio-DiGilio (1991) suggested that counselors have not fully rejected the medical model and therefore disagreed with Remley's assertion. Ivey and Regazio-DiGilio also stated that prevention is not at the forefront of a developmental orientation. They view life stressors as events that serve as the impetus for growth and development. In their opinion, prevention would eliminate the necessary life events which precipitate growth.

Myers (1992) traced the progression of the counseling philosophy as reflected by the development of ACA. She noted that there is pressure on ACA to declare or develop a unifying philosophy for the counseling profession. She referred to the opinions of Remley (1991) and Ivey and Regazio-DiGilio (1991) and pointed out that prevention is

an integral part of developmental growth. She traced the historic support of the developmental perspective by ACA and noted the natural movement of ACA toward the inclusion of wellness in the counseling philosophy. She highlighted the interrelatedness of wellness, prevention, and development, and identified these as the underlying foundation of counseling's professional identity. She called for the profession to promote the recognition of this philosophy for third party reimbursement.

Albee and Ryan-Finn (1993) examined the movement of perspectives in mental health through public health strategies. They noted that the move from a developmental preventative approach to mental health gave way to the medical model with the rise of the Diagnostic and Statistical Manual of Mental health (DSM). They attribute the attitude that all emotional disturbances as illness to the advent of third party payments and the drug companies. They note that a system based on the medical model is not inclusive of marginalized groups and blocks prevention as a viable strategy for mental health.

Hansen (2003) expressed concern that the inclusion of diagnostic training in counseling training programs could threaten counselor professional identity. He warned that the DSM, based on the medical model, was contradictory to counseling's humanistic/developmental roots. Although Hansen understood the economic benefits of learning the diagnostic model, he noted the importance of the way in which it was presented in the training programs.

Pistole and Roberts (2002), in their discussion of the professional identity of mental health counselors' professional identity, noted that the profession had already established its distinctiveness among mental health service providers. They held that its education - development - preventive orientation with its wellness/holistic focus

differentiated mental health counseling from other mental health professions on a philosophical level. They identified the use and value of counseling research by mental health counselors as way to strengthen professional identity.

The underlying philosophy of the counseling profession is comprised of four components: a developmental orientation, a wellness perspective, prevention, and empowerment. These four components are interrelated and serve as the unique viewpoint distinguishing professional counseling from other mental health professions.

## **Beliefs about the Counseling Profession**

Beliefs about the counseling profession include a professional orientation that entails seeking preparation programs that are CACREP-accredited, acquiring licensure and/or certification, ACA association membership, and supervision by other counselors. These beliefs also include being proud to be a professional counselor.

Feit and Lloyd (1990) proposed defining the professional identity of counseling through the behaviors of its practitioners. They called for professional counselors to be competent and well trained which would enhance the profession's growth in the long run. They noted that not all counselors take advantage of the state licensure and national certification available to them. They also noted a resistance to continuing education by counseling practitioners despite the importance of remaining current. They identified an important behavior that is still needed by counseling training programs, which is to achieve accreditation by CACREP. Feit and Lloyd admitted that licensure, continuing education, and accreditation are not the fully defined set of behaviors for the professional

counselor and called for more work in identifying a set of professional behaviors which will meet the counseling profession's standards.

Van Zandt (1990) spoke about professionalism. Professionalism is an ideal comprised of a set of behaviors and attitudes characteristic of the individual professional. This attribute is described as an internalized construct. The ideal for professionalism as defined by Van Zandt is (a) a personal standard of competence; (b) the way in which a person promotes the image of the profession; (c) the pursuit of professional development and improvement of skills; (d) the maintenance of quality within the profession; and (e) professional pride. Counselors are responsible for advocacy efforts on both individual and organizational levels. Examples of behaviors attributed to professionalism are reading professional research and journals, attendance at conferences, and involvement in professional organizations.

Zimpfer, Mohdzain, West, and Bubenzer (1992) examined the professional identity of counseling programs. A total of 521 counselor preparation programs participated in the study, which represented a response rate of 77% of those programs that were invited. The professional identity of counseling graduate programs was determined by a number of criteria. Program accreditation, conference attendance by faculty, licensure and credentials held by faculty members, type of preparation program of the last faculty member hired, and desired preparation of the next faculty member hired were important criteria. The study asked whether programs were accredited by either CACREP or APA. In addition, the authors included an examination of program content to determine if a program had a counseling or psychology orientation. Although the study revealed that most programs had faculty with a professional identity consistent

with the training program, Zimpfer et al. noted that a number of the programs had a dual identity. The question for these researchers was whether a program could graduate a counselor with a strong identity if the faculty did not illustrate a strong identity of their own. They called for more work in the area of professional identity due to the number of programs in the study which desired both CACREP and APA accreditations and reported no preference on promoting licensure in either field.

McAuliffe and Eriksen (1999) proposed a professional identity for counseling which combined constructivist and developmental theories in a proposed model for the profession. They noted that the counseling profession has been unable to fully embrace a wellness/developmental orientation because of three factors: (1) methods for assessment and application of developmental theories are rare and unclear; (2) societal norms preclude individuals from seeking help until they are in crisis; and (3) third party reimbursements were still rooted in diagnosis and remediation, i.e., the medical model. These strong factors have blocked the counseling clinician's ability to practice developmentally, to promote prevention, and to survive financially. Their constructivist model with its focus on social contexts is congruent with the developmental model put forth by van and Ivey (1990) with their model's inclusion of client systems and cultural contexts.

Spruill and Benshoff (1996) considered the promotion of professionalism a duty for counselor educators. They asserted that professionalism begins in the graduate training program and continues throughout the professional lifespan. Professionalism entails participation in professional organizations, acquisition of credentials, and professional development. They saw professionalism as a process which builds through

relationships with counselor education, counseling supervision, professional counselors, and professional organizations.

Gale and Austin (2003) discussed the fragmentation caused by the establishment of specialties in the field of counseling. They attributed this fragmentation to the differences and sometimes conflicting guidelines in the standards of practice put forth by the many professional organizations. They noted in particular, credentialing and licensing bodies, multiple accrediting boards, and various professional organizations. They observed that licensing requirements vary from state to state and there is not always reciprocity for counselors looking to relocate. There are two qualifying exams for licensure, both of which address only clinical practice which is not applicable to all counseling specialties. Some specialties do not require a license before granting a credential. In fact, some work settings do not require a license or credential beyond the university degree. There are different accreditation bodies for counselor training programs, including CORE (Council on Rehabilitation Education), AAPC (American Association of Pastoral Counseling), and COAMFTE (Commission on Accreditation for Marriage and Family Education). Also, some programs still maintain APA (American Psychological Association) accreditation in addition to CACREP. For CACREP programs, training standards are different depending on the counseling concentration area chosen. For the mental health, couples and family, and marital concentrations, 60 hours of graduate training are required by CACREP. Only 48 hours are required by CACREP for the career, school, community, and gerontological concentration areas.

Some counselors are affiliating with the professional organization dedicated to their concentration area in place of ACA. Those counselors maintaining an affiliation

with both ACA and a specialty organization have to contend with standards of practice particular to each organization which may have conflicting guidelines.

Gale and Austin (2003) examined published interviews with senior contributors to the *Journal of Counseling and Development* (*JCD*). These interviews appeared in *JCD* within volumes 66 to 77 under the "lifelines" section [through volume 73(2)] and the "Profiles" section [beginning with volume 75(1)]. The authors looked for themes addressing factors that could affect the collective identity of counselors. Gale and Austin (2003) reported that the senior contributors to *JCD* believed that training programs needed to return to the basics of counseling. These basics include skill development and a focus on positive human development. Although the contributors believed that psychopathology and diagnostic skills needed to be part of counseling training, counselors should be able to work with the individual in the context of his or her environment. They expressed concern that counselors were adopting the medical model.

The contributors also saw specialization areas as detrimental to the counseling profession, but rated this as less important than returning to counseling's base of development and prevention. Senior contributors to *JCD* identified themselves as having a developmental holistic orientation supporting approaches rooted in wellness and prevention. They also stated that the counseling profession needed to develop its own research and exhibit more leadership at the societal level. This is in agreement with Hanna and Bannak (1997) who called for the development of a body of research by professional counselors. Gale and Austin (2003) recommended that ACA formulate a strategic plan for the profession as a whole. They also said that the profession's accrediting bodies need to work together to promote the basis of counseling instead of the

specialty areas. They called for these bodies to work for portability of licensure and the establishment of a strong national certification. They said that counselors need to be active in the promotion of the profession and to better understand their relationships with other mental health professionals.

Gray (2000) conducted a study examining the strength of professional identity of professional counselors holding licensure for two years or less. He found that LPC's who received licensure supervision from a supervisor who was a Licensed Professional Counselor reported a stronger professional identity then those who received supervision from a supervisor licensed in another mental health field. Additionally, he found that supervision from a Licensed Professional Counselor in a state that required counselors to seek supervision from an LPC resulted in an even stronger professional identity. This supported Spruill and Benshof's (1996) belief that professionalism is strengthened, in part, through supervisory relationships. Gray's study looked at Licensed Professional Counselors in the states of Texas, Virginia, Louisiana, and Mississippi. Gray held that professional identity is developed through relationships with other professional counselors.

LeFleur (2007) explored contributing factors to professional identity as perceived by Licensed Professional Counselors who were also members of ACA. She surveyed LPC's from the southern states of Florida, Louisiana, Tennessee, South Carolina, and Virginia. She found that respondents overwhelmingly perceived licensure and supervision as contributing to their professional identity. She also identified advocacy as having importance. Respondents noted that professional organization affiliation was important, but to a lesser degree than licensure. Her findings supported Spruill and

Benshoff's (1996) view of professionalism which includes acquisition of licensure, affiliation with professional organizations, and relationships with counseling supervisors.

The belief in the importance of accreditation standards, licensure/certification, and supervision is touted in the literature. The importance of accreditation standards were outlined by Feit and Lloyd (1990) and Gale and Austin (2003). The pursuit of licensure and credentialing was also considered valuable (Feit and Lloyd, 1990; Gale & Austin 2003; LeFleur, 2007; Spruill & Benshoff, 1996; Van Zandt 1990; Zimpfer et al. 1992). The importance of receiving supervision from other professional counselors was addressed by Gray (2000), LeFleur (2007, and Spruill & Benshoff, 1996).

# **Professional Engagement**

The literature refers to expected and desired behaviors of professional counselors. There is a belief expressed that counselor involvement, i.e., engagement, is an important aspect of professional identity (Gale & Austin, 2003; Myers & Sweeney, 2004). These behaviors are for some seen as professional identity (Feit & Lloyd, 1990) and for others as professionalism (Spruill & Benshoff, 1996; Van Zandt, 1990). I have created the term *professional engagement* in an attempt to accurately describe these behaviors and their meaning as part of professional identity. The behaviors are specific to the expectations of how professionals will conduct themselves in professional situations. Engagement refers to the activities of professionals who are actively participating in desired behaviors. A counselor who is a member of ACA is considered to be more engaged than one who is not a member. Likewise, a counselor who is a committee member in ACA is considered more engaged than one who is only a member of the larger organization. Membership in

professional organizations is only one of the desired behaviors outlined in the literature. Behaviors that are indicative of a professionally engaged counselor include advocacy for the profession and the client, professional development for the improvement and maintenance of counseling practice, participation in research, and involvement in professional counseling organizations.

Advocacy has been part of counseling for a number of years. van Hesteren and Ivey (1990) called for counselors to maintain a constant dialogue with the settings in which counseling takes place. Van Zandt (1990) discussed the importance of promoting the profession and of professional pride. He stated that advocacy for both clients and the profession was the professional counselor's responsibility. Albee and Ryan - Finn (1993) encouraged advocacy for the rejection of the medical model and a return to a preventative stance for mental health. MacAuliffe and Eriksen (1999) called for advocacy efforts to procure third party reimbursements for professional counselors. The importance of advocacy at the societal level is strongly supported as the strategy for solidifying an identity for the counseling profession (Gale & Austin, 2003; Myers & Sweeney, 2004).LeFleur (2007) identified advocacy as a contributing factor to the professional identity of licensed counselors.

Myers and Sweeney (2004) conducted a national survey of 71 leaders in counseling professional organizations and accrediting agencies at the regional, state, and national levels. They noted that advocacy for the profession is closely linked to advocacy for clients as successful advocacy at the national level would enable more effective advocacy efforts on behalf of clients. They observed a lack of information in the literature about current advocacy efforts and needs for the profession. The purpose of

their survey was to identify current advocacy efforts and needs as perceived by the leaders surveyed. Strategies on how to assess the success of current and future advocacy efforts wee also investigated. The organizational leaders served as members of the ACA governing council, ACA presidents (past and present), presidents of ACA state branches, regions, and divisions, as well as the chairs (past and present) of the ACA professionalization, public policy, and legislative committees. Also included were the executive directors and board chairs of CACREP, CORE, NBCC, and CRCC. The study had a response rate of 39% (71 of 180 possible responses). Respondents reported the existence of an organizational statement requiring advocacy effort (52%). The majority included this in either their mission statement or strategic plan. Other organizations included advocacy in their bylaws or by establishing committees or by using paid lobbyists. At the state level, a lack of funds for lobbying efforts was reported. Most advocacy efforts focused on licensed professional counselors (67%), with some focused on certified counselors (35%), and others on counseling specialties (32%). The perception of successful advocacy efforts among the respondents was also varied with 51% rating their efforts as moderately successful. A total of 30% felt advocacy by counselors had been highly successful and 6% reported no success at all. Types of advocacy activities identified were committees (68%), literature and information (63%), coalitions with other professional groups (59%), government relations liaisons (55%), and paid consultants and staff (24% and 31% respectively). Respondents commented that their organizations needed more active memberships and that the committees did not feel empowered by the executive councils. There was strong agreement (over 50%) on the advocacy needs of the counseling profession. An improved public and professional

image of counseling (87%), the publicizing of counseling services provided (75%), the pursuit of legislative action (69%), equal access to jobs (69%), equal pay as compared to other mental health professionals (61%), and the development of a common professional identity were all identified as current needs. The responding leaders recommended that advocacy efforts be focused on only a few areas at a time. They believed that this would be the most successful strategy. The needed resources most often stated were volunteers for committees (71%) and funding (52%). Respondents recommended collaborating with other mental health professions in order to support legislation. Obstacles to advocacy efforts that were identified included inadequate resources (58%), a lack of funding (51%), opposition (51%), and a lack of collaboration (47%).

Myers and Sweeney (2004) found a theme in the comments of the responding leaders. The respondents cited a lack of counselor involvement to be a great obstacle and offered many reasons for this, among which were apathy, a competitive marketplace, fragmentation of the counseling field, and reluctance on the part of counseling to self promote. Myers and Sweeney admitted that their study was limited by a low response rate (39%), but also saw their study as a base from which to identify needed research areas on the topic of advocacy. They noted a need for more studies on the advocacy activities of both counselors and counseling profession leaders, as well as studies on the advocacy content and skills included in counselor education training programs. They discussed the need to develop strategies for the acceptance of counseling credentials and licensure by other mental health professionals and for third party reimbursement. They recommended that the counseling field's professional organizations work together to pursue and create advocacy strategies. They also called on counselor educators to

include in their training of future counselors the importance of advocacy for the profession, as well as for clients. They found that the need to develop a unifying definition for the profession is still ongoing.

Professional development is the maintenance and improvement of knowledge and skills. Feit and Lloyd (190) observed a resistance on the part of professional counselors to continuing education, despite the importance of maintaining competence in counseling practice. VanZandt (1990) called for counselors to keep current through the reading of professional journals, attendance at conferences, and involvement in professional organizations. Zimpfer et al. (1992) also included conference attendance in their definition of behaviors indicative of a strong professional identity. Spruill and Benshoff (1993) included professional development in their definition of behaviors indicative of professionalism.

Participation in research specifically germane to professional counseling has also been identified as an important professional behavior. In 1997, Hanna and Bannak added to the professional identity discussion by pointing out that it may not be possible to differentiate counseling from psychology.

They noted that counseling techniques were indiscernible from psychotherapy techniques. They suggested that scholars in the counseling profession should focus on developing a body of knowledge unique to counseling which would develop its own knowledge base from which to work.

Weinrach, Thomas, and Chan (2001), in their response to Goodyear's (2000) criticism of their 1998 study, defined professional identity as "a possession of a core set of values, beliefs, and assumptions about the unique characteristics of one's selected

profession that differentiates it from other professions" (p. 168). Weinrach et al. (2001) defended their position that the authors published in the ACA flagship journal, the *Journal of Counseling and Development* I (JCD), should be affiliated with counselor education and not with counseling psychology. This was their criticism of the prevalence of counseling psychologists who had published in *JCD* under the editorship of Goodyear. Goodyear (2000) asserted that the content of the article and not the author's professional affiliation was more important. Weinrach et al. (2001) pointed out that, although there were similarities between the two professions, counseling and counseling psychology practitioners differ distinctively in the way they practice. They argued that the content of an article is influenced by the way in which the author conceptualizes and practices. Weinrach et al. (2001) believed that it was important that the content of articles in the *Journal of Counseling and Development* reflect the practice and language of professional counseling.

Pistole and Roberts (2002) stated that the professional identity of mental health counselors would be strengthened with the integration of the use and value of scholarly research. They were concerned that master's level counselors may not be prepared to perform research, but needed to understand its utility to practice. They felt that an emphasis on research use would promote professional identity.

Involvement in professional counseling organizations is considered an integral part of professionalism. The lack of professional counselor involvement has been discussed by Gale and Austin (2003 and Myers and Sweeney (2004). This important professional engagement behavior addresses VanZandt's (1990) call for professional counselors to maintain quality with the profession and to promote the image of the

profession. Spruill and Benshoff (1996) included membership and participation in professional organizations in their view of professionalism. Professional memberships were also included as a contributing factor to professional identity by LeFleur (2007).

Behaviors identified as professional engagement include participation in research, involvement in professional organizations, and professional conference attendance. These behaviors are considered characteristics of professionalism.

### **Summary**

Professional identity is an ongoing discussion for the field of counseling. The literature reveals a number of components of professional identity that have been identified. The counseling philosophy consists of four components: development, wellness, prevention, and empowerment. Beliefs about the counseling profession are related to licensure, certification, supporting accreditation, supervision by similar professionals, and pride in being a counselor. Professional engagement encompasses professional behaviors such as professional development, participation in research, and advocacy efforts.

The most agreed upon opinion about counselor professional identity seen in the literature is the need for professional counseling to clarify its identity. The research overwhelmingly calls for more investigation of this important topic among practitioners and scholars within the counseling profession.

# **CHAPTER THREE**

# **METHODOLOGY**

As counselors-in-training progress through their master's degree programs, they are exposed to various dimensions of professional identity. This study measured the agreement of counseling master's degree students with the counseling philosophy, their beliefs about the counseling profession, and their professional engagement. Based on available literature, it is possible that a combination of these three areas may make up what is known as *professional identity* in the profession of counseling.

# **Purpose of the Study**

The purpose of this non-experimental survey design was to investigate the strength of professional identity in counseling master's degree students by measuring students' agreement with the counseling philosophy, beliefs about the counseling profession, and professional engagement. Strength of professional identity was measured in relation to a number of possible influences including the following: whether they were beginning, intermediate, or advanced graduate students, whether students were studying part-time or full-time, students are studying in a master's program that included a doctoral program or offered a master's program only, and whether the student has had paid full-time counseling-related experience.

# **Research Questions**

One

Do instruments that measure counselor agreement with the counseling philosophy, beliefs about the counseling profession, and professional engagement significantly measure the same construct, counselor professional identity?

#### Two

Is there a significant relationship between the level of agreement with the counseling philosophy in counseling master's degree students and their personal characteristics?

#### Three

Is there a significant relationship on the level of beliefs about the counseling profession in counseling master's degree students and their personal characteristics?

#### Four

Is there a significant relationship on the level of professional engagement in counseling master's degree students and their personal characteristics?

# Hypotheses

- Research question 1: Is there a significant relationship among agreement with the counseling philosophy, beliefs about the counseling profession, and professional engagement?
  - (H<sub>1</sub>) There are significant positive relationships among levels of agreement with the counseling philosophy, beliefs about the counseling profession, and professional engagement.
- Research question 2: Is there a significant relationship between agreement with the counseling philosophy for counselors-in-training and whether they are beginning,

intermediate, or advanced graduate students, whether students are studying parttime or full-time, whether students are studying in a master's program that includes a doctoral program, or are in a master's program only, and whether the student has had paid full-time counseling-related experience?

- (H<sub>2</sub>) Advanced graduate students have the highest levels of agreement with the counseling philosophy, intermediate graduate students have the next highest levels, and beginning graduate students have the lowest levels.
- (H<sub>3</sub>) Full-time graduate students have higher levels of agreement with the counseling philosophy than part-time graduate students.
- (H<sub>4</sub>) Graduate students at the master's level studying in programs that include doctoral degree programs have higher levels of agreement with the counseling philosophy than graduate students studying in programs that offer master's degrees only.
- (H<sub>5</sub>) Graduate students who have had paid full-time counseling-related experience have higher levels of agreement with the counseling philosophy than graduate students who have not had paid full-time counseling-related experience.

Research question 3: Is there a significant relationship between levels of beliefs about the counseling profession for counselors-in-training and whether they are beginning, intermediate, or advanced graduate students, whether students are studying part-time or full-time, whether students are studying in a master's program that includes a doctoral program, or are in a master's program only, and whether the student has had paid full-time counseling-related experience?

- (H<sub>6</sub>) Advanced graduate students have the highest levels of beliefs about the counseling profession, intermediate graduate students have the next highest levels, and beginning graduate students have the lowest levels.
- (H<sub>7</sub>) Full-time graduate students have higher levels of beliefs about the counseling profession than part-time graduate students.
- (H<sub>8</sub>) Graduate students at the master's level studying in programs that include doctoral degree programs have higher levels of beliefs about the counseling profession than graduate students studying in programs that offer master's degrees only.
- (H<sub>9</sub>) Graduate students who have had paid full-time counseling-related experience have higher levels of beliefs about the counseling profession, than graduate students who have not had paid full-time counseling-related experience.
- Research question 4: Is there a significant relationship between levels of professional engagement for counselors-in-training and whether they are beginning, intermediate, or advanced graduate students, whether students are studying part-time or full-time, whether students are studying in a master's program that includes a doctoral program, or are in a master's program only, and whether the student has had paid full-time counseling-related experience?
  - (H<sub>10</sub>) Advanced graduate students have the highest levels of professional engagement, intermediate graduate students have the next highest levels, and beginning graduate students have the lowest levels.

- (H<sub>11</sub>) Full-time graduate students have higher levels of professional engagement than part-time graduate students.
- (H<sub>12</sub>) Graduate students at the master's level studying in programs that include doctoral degree programs have higher levels of professional engagement than graduate students studying in programs that offer master's degrees only.
- (H<sub>13</sub>) Graduate students who have had paid full-time counseling-related experience have higher levels of professional engagement than graduate students who have not had paid full-time counseling-related experience.

# Variables

The independent variables considered in this study included the following attribute variables believed to influence the agreement with the counseling philosophy, beliefs about the counseling profession, and the professional engagement of the respondents. They are: amount of training a counselor-in-training has completed; enrollment status (whether counselors-in-training are enrolled full-time or part-time program type (whether the program includes a doctoral degree program or offers a master's degree program only); and experience level (whether counselors-in-training have had paid full-time counseling-related experience.

The dependent variables were: agreement with the counseling philosophy that distinguishes professional counselors from other mental health professionals, beliefs about the counseling profession, and professional engagement. The counseling philosophy was examined through four components (see Remley & Herlihy, 2007) that

include the use of wellness as a model for counseling, the view of clients from a developmental perspective, prevention as a goal of counseling, and the incorporation in counseling of empowerment of clients. Beliefs about the counseling profession were measured using a scale developed by Gray and Remley (2000) that measures the beliefs of counselors regarding the counseling profession. Beliefs about the counseling profession address issues related to beliefs regarding professional association membership, counselor credentialing, and ways in which counseling is distinguished from other mental health professions. Finally, professional engagement is the degree to which counselors-in-training exhibit behaviors considered to be indicative of professionalism. These behaviors include participation in professional organizations, workshop or conference attendance, participation in research, and advocacy efforts on systemic and individual levels. Membership in ACA is considered an engagement behavior. Serving on a committee for ACA in addition to membership is considered a higher level of engagement behavior. For workshop and conference attendance, it is considered a higher level behavior to present at the conference or workshop rather than simply attending. In the case of advocacy, systemic efforts are considered a higher level behavior.

# Instrumentation

Section One of the survey (see Appendix A) collected demographic information on the participants. Respondents were asked to provide personal information such as age, gender, and ethnicity. Educational background information was collected. Information on their enrollment status (full- or part-time) and the number of credits they have

completed was ascertained. The demographic sheet also assessed respondents' chosen concentration area in counseling (e.g., mental health, community, school) as well as type of program in which they are enrolled (e.g., master's only or master's/doctoral). Additionally, respondents were asked to provide information on any full-time paid counseling experience that they have had.

The Professional Identity and Engagement Survey (PIES) was developed for this study. Section Two, Four, and Five of the survey contained the PIES. Section Two measured knowledge of the four components underlying the counseling philosophy, items developed from the literature (see Remley & Herlihy, 2007). A 5-point Likert type scale ranging from '1' *strongly disagree* to '5' *strongly agree* was used. Section Two contained 18 items. Items 2, 4, 5, 6, 9, 15, 17, and 18 were reverse scored. Scores on the scale can range from 18 to 90, with higher scores indicating higher levels of counselor agreement with the counseling philosophy.

Section Three is a scale that was developed by Gray and Remley (2000), the Counselor Profession Scale (CPS) that measures beliefs about the counseling profession. Issues related to beliefs regarding professional association membership, counselor credentialing, and ways in which counseling is distinguished from other mental health professions were addressed in this section. This scale was reviewed by expert judges for content validity and was shown to be reliable through a test-retest procedure. Two of the three expert judges were required to rate an item appropriate for use in this scale. The CPS has 14 items. Scores on the scale range from 14 to 70, with higher scores indicating higher levels of beliefs about the counseling profession believed to be indicative of a strong professional identity.

Three items in Section Four of the instrument collected information on the manner in which knowledge of counseling licensure and credentialing, the counseling professional institutions and the counseling philosophy was best gained as perceived by the respondent. Response choices in this section include: (a) class I am taking or have already completed; (b) faculty member in whose class I was not enrolled; (c) another counseling master's student in the program; (d) a doctoral student in my program; (e) professional counselor not associated with my university; (f) through my own research for school or clients; (g) I haven't learned about this; (h) I don't remember where I learned this; and (i) other (please specify). Items addressed awareness of credentialing, professional counseling associations, and the counseling philosophy. The three questions in this section were exploratory in nature. The researcher was interested in the respondents' perceptions of their knowledge sources.

Section Five assessed the extent of respondents' professional behaviors, i.e., professional engagement. Information on memberships in professional organizations, such as ACA (American Counseling Association) and its divisions was collected. The depth of respondents' involvement was solicited through items addressing offices held and committee membership in organizations to which they belong. Those serving as committee members and officers were assessed as having a higher level of professional engagement than those reporting membership only. Conference or workshop attendance was likewise investigated with items addressing depth of involvement, i.e., presentation or attendance only. Presentation at conferences represented a higher level of engagement. Participation in research was similarly assessed at different engagement levels ranging from research participant to principal investigator. Finally, this section addressed

advocacy through lobbying behaviors and conversing activities. Lobbying behaviors were also assessed at different levels of professional engagement. There are 16 items addressing current professional engagement. Scoring for this section was determined by organizing the behaviors into three rankings representing different levels of engagement behavior: (a) low level; (b) mid-level; and (c) high level. Low level engagement behaviors were assigned 3 points with the exception of professional organization memberships (1 point for one membership, 3 points for 2 memberships, 6 points for 3 or more). Mid-level engagement behaviors earned 10 points while high level behaviors earned 20 points. In the case of conference attendance and presentation, only low level and high level behaviors were identified, earning scores of 3 points and 20 points, respectively. Additional points for conference behavior were assigned according to the level of conference where attendance or presentation occurred. Specifics on the scoring of the professional engagement section are presented in Table 1.

Table1
Professional Engagement Scoring

	nar Engagement				
Behavior Level	Organizations	Research	Advocacy	Conference	Conference Multiplier
Low	Memberships	Participant =	Conversing =	Attendance =	Local x2
	1 = 3  points; 2 =	3 points	3 points	3 points	
	6 points; 3 or				
	more = 9 points				
Mid	Committee = 10	Partner/team	Petition = 10		State x3
	points	= 10 points	points; Recruit		Regional x4
			new		
			counselor=10		
			points		
High	Officer = 20	Own project	Lobby = 20	Presentation	National/International
	points	= 20 points	points	= 20 points	x5
			Recruit to		
			organization= 20		
			points		
Range	0 to over 200				
	points				

# PIES Item Generation and Initial Validation Procedures

The Professional Identity and Engagement Survey (PIES) was developed to measure agreement with the counseling philosophy that distinguishes counseling from the other mental health professions and the degree of professional engagement of counselors-in-training enrolled in a CACREP accredited master's level training program. Operational

definitions were gleaned from a review of pertinent counseling literature. Individual items were initially generated through discussion and feedback with peers and committee members. An attempt was made to ensure clarity of items and to avoid any cultural bias in the items generated. The four components of professional identity (i.e., wellness, developmental approach, prevention, and empowerment) are interrelated constructs, and an attempt was made to generate items that could be related to one of the components more so than to another component. For example, empowering a client to use appropriate assertive skills to avoid bullying can be related to all components of professional identity. The acquisition of skills empowers clients to choose their actions and can prevent an unwanted future outcome. This acquisition also affects the client's self esteem, thus promoting wellness and can be seen as an appropriate developmental event. Professional engagement, on the other hand, is a more discrete construct made up of quantifiable actions or behaviors. A 56-item instrument was initially generated addressing professional identity and engagement. There was a third section created whose purpose was to identify environmental factors influencing professional identity. This section is called the Knowledge Sources whose purpose was to collect information on respondents' perceptions of where they best acquired information on counseling topics.

The initial 56-item instrument was divided into three sections. Section A consisted of 32 items addressing the four components of professional identity. The 11 items of Section B were concerned with the acquisition of knowledge about counseling licensure and credentialing, the counseling philosophy, and engagement both, outside and inside the classroom. Section C addressed professional engagement activities in its 13 items. An expert review was conducted on this first version of the PIES. Six experts on

professional identity were identified. These experts all are currently employed as counselor educators and have published on the subject of professional identity, either in the form of journal articles or textbooks. All were Caucasian males. Each was sent an expert review packet which contained a cover letter, instructions for completing the review, and the instrument. Of the six experts, four returned packets. One reviewer did not rate the items according to the instructions and his responses were deemed unusable. Three experts completed the review as requested with the exception of reviewer one who used a 10 point scale beginning at item 13 instead of the requested 7 point scale. The use of a different scale was not viewed as a concern as the researcher was interested in the strength of the survey items across all components. Reviewer feedback and the review procedure are presented below.

For Section A of the PIES, reviewers were asked to rate each of the 32 items on the four components of professional identity, i.e., wellness, development, prevention, and empowerment. Each item was rated on its agreement with the four components using a scale of '0' *Not at all* to '7' *Totally*. For example, item 25 in Section A of the reviewer packet was rated on the component of wellness as by reviewer one (rating of 7), reviewer two (rating of 6), and reviewer three (rating of 7). Reviewers were also asked to provide editorial suggestions and comments per item. For Sections B and C, reviewers were asked to offer their feedback in the form of commentary only.

The rating scores were examined in three different stages. Scores were recorded on a data grid presented in Appendix B. On this grid, the first column identifies the reviewer and the component on which he is rating an item. For example, *1 wellness* refers to reviewer one's ratings of an items association with the component of wellness; *2* 

*empowerment* refers to reviewer two's ratings on the component of empowerment; and 3 prevention indicates reviewer three's ratings on prevention and so forth. During the first stage of examination, items which were rated not at all (0) on all four components by any two reviewers were eliminated (items 2, 7, 20, 27, and 31). This procedure left 27 items to be considered. The second stage of examination resulted in the elimination of 6 more items which had been rated not at all (0) on all four components by any one reviewer (items 11, 12, 17, and 26). The third stage of examination entailed the elimination of any item that was rated not at all (0) on any single component regardless of reviewer. This resulted in the elimination of an additional 7 items (items 4, 5, 8, 9, 10, 21, 22, and 24). The 14 remaining items have been accepted as part of Section Two of the PIES. These items are shown in a bar graph in Appendix C which illustrates each item's strength across components. Of the 14, items that survived the expert review, only one item was a reverse scored item. In an effort to strengthen content validity, a second expert review was conducted to generate additional reverse scored items. Items that were eliminated in the third stage of the first expert review were reworked by incorporating the reviewer's feedback. Eight reverse scored items were generated and given to a second expert panel for rating across the components of the counseling philosophy. The second expert review consisted of three counselor educators, all of whom have published on the topic of professional identity. All 3 were Caucasian male and each has more than 20 years experience as a counselor educator. One of the three was also a participant in the first review. They were given packets similar to the ones used in the first review with the exception of the inclusion of the 14 final items resulting from the first review. All 8 items were consistent across the components of the counseling philosophy and across

reviewers. A bar graph for the second review illustrating the items across components is presented in Appendix D. Feedback was considered and two items were reworded to improve clarity. The final version of this section of the PIES contains 18 items.

Commentaries and feedback for Sections B and C were considered and incorporated into these sections. The items in Sections B and C addressed the manner in which information was gained and the type and quantity of engagement behaviors, respectively. For Section B which addressed knowledge sources, it was decided to reduce the length of this section to three questions. As this section is exploratory in nature, the researcher thought a reduction in length would decrease the risk of attrition among respondents. The Professional Identity and Engagement Survey is presented in its final form in Appendix A.

### **Data Collection**

On April 19, 2008, notice of approval for this study was received from the Old Dominion Human Subjects Review Board (Appendix E) signaling the beginning of the data collection period. Potential participants were recruited through their CACREP accredited master's degree programs. A directory of accredited programs was obtained through the CACREP website (<a href="www.cacrep.org">www.cacrep.org</a>). The document was dated March 6, 2008. Of the 215 programs listed in the directory, 208 received invitations for their master's level students to participate in the study. Contact information for seven of the programs was not available and efforts to obtain the needed contact information via telephone were not fruitful. One faculty member from each program was chosen to receive an electronic mail message requesting that the faculty member forward an

included invitation to participate in the study to their master's level students (Appendix F). Invitations were mailed beginning April 23, 2008 with the last e-mails being sent on April 28. The survey was closed to participants on May 10 resulting in a data collection period of 15 days. After data collection was closed, anyone attempting to access the survey was presented with a message from the researcher (Appendix G) informing them that the survey was closed. Participants were able to access the survey through a professional survey website, Survey Monkey. A link to the survey was included in the invitation:

(http://www.surveymonkey.com/s.aspx?sm=uO989U4PjVFHLWVb0xEtLA\_3d\_3d). Upon accessing the website, participants were presented with an informed consent page (Appendix H). Those participants giving informed consent were then able to complete the survey. The survey included five sections: (a) participant information; (b) beliefs about counseling; (c) additional beliefs about counseling; (d) knowledge sources; and (e) professional engagement.

Of the 208 programs that were contacted, 79 responded representing a 37.98% response rate by program. Number of responses from master's level students per program ranged from 1 to 45 with an average number of 12.8 respondents per program. Response rates were calculated by program as statistics were unavailable on the number of master's students enrolled in CACREP accredited master's level programs according to the CACREP office (J. Gunderman, personal communication, April, 24, 2008). Of the 1217 students accessing the survey, there were 1059 (87%) completed surveys. No patterns of attrition were observed for the 158 incomplete surveys. The completed surveys were screened which resulted in a final data set of 1011 responses. The 48 cases that were

eliminated through the screening process were deemed inappropriate for three reasons. Four respondents were not enrolled in a CACREP accredited program. Three respondents refused informed consent and were automatically exited from the survey. The other 41 cases were eliminated because of their stated concentration area (school or forensic psychology, rehabilitation counseling, or human development). The 1011 usable responses were coded by ACES region according to number of responses as well as, by number of programs. This was done in order to determine to what degree a representative sample had been obtained. Table 2 presents a breakdown of respondents by region.

ACES has 5 regions: North Atlantic (NARACES), South Central, Southern (SACES), Rocky Mountain (RMACES), and Western (WACES).

Table 2

ACES regions

TOLD TOGIONS				
ACES region	Responses	%	Programs	%
North Atlantic	203	20.1	13	16.5
North Central	184	18.2	18	22.8
Southern	488	483	41	51.9
Rocky Mountain	79	7.8	2	2.5
Western	57	5.6	5	6.3
Total	1011	100.0	79	100.0

According to the CACREP directory, programs offering a doctoral degree in addition to a master's degree program represented 26.1% of the total CACREP programs listed.

Master's only programs made up 73.9% of all accredited programs. Table 3 presents the proportions represented in this study.

Table 3
Program Type

	Responding Programs	%	CACREP Directory	%
Master's only	48	60.7	159	73.9
Master's/Doctorate	31	39.3	56	26.1
Total	79		215	100.0

# **Participant Characteristics**

Participants were counseling students enrolled in a master's level CACREP accredited program. The age range was 22 to 75 years old with a mean age of 32.57 years (SD = 9.99). The majority of participants (59.1%) were between the ages of 22 and 30. A majority of the respondents were female (87%) and Caucasian (81.9%). Nearly half (44%) of respondents held a bachelor's degree in psychology and nearly half (41%) reported pursuing a school concentration in their counseling master's programs. Table 4 summarizes participant demographics.

Table 4

Participant Demographics

Participant Demographics		
Demographic	#	%
Gender		
Male	131	13.0
Female	880	87.0
Age		
22 - 30 years	598	59.1
31 - 40 years	209	20.7
41 - 50 years	118	11.7
51 - 60 years	70	6.9
61 -	14	1.4
Unreported	2	.2
Ethnicity		
African American	76	7.5
Asian American	17	1.7
Hispanic	44	4.4
Caucasian	828	81.9
Bi- or Multi- racial	31	3.1
Other	15	1.4
Bachelor's		
Human Services	67	6.6
Social Work	33	3.3
Psychology	445	44.
Sociology	61	6.
Business	49	4.8
Education	115	11.4
Arts & Humanities	177	17.5
Sciences & Math	35	3.5
Other	29	2.9
Concentration Area		
College	34	3.4
Community	259	25.6
Mental Health	176	17.4
School	420	41.5
Marriage & Family	93	9.2
Undecided	11	1.1
Other	18	1.8

Note. Ethnicities reported in "Other": Native American, American, Appalachian, Human, and International (non American). Bachelor's reported in "Other": General Studies, Consumer Science, Architecture, Engineering, Recreation, Interdisciplinary Studies, Human Development, Pre-med, and Health. Included in "Other" for Concentration: Addictions, Career, Organizational, Child and Adolescent.

Information about the academic status and background of the participants was also collected. Enrollment status was nearly equivalent with 41.8% reporting part-time status and 58.2 % reporting full-time enrollment. Participants were placed in one of three student levels. Beginning students were those who had completed three or fewer courses. Intermediate students were those who had completed four or more courses, but who were not currently in practicum or internship. Advanced students were determined through current enrollment in practicum or internship. The majority of respondents were intermediate level (45.9% with beginning and advanced students garnering 15.2% and 38.1% respectively. Six respondents did not report enough information for their student level to be determined. Most reported having no paid professional counseling experience (60.7%) while 28.1% did report having more than one year of paid counseling experience. Table 5 presents a summary of participants' academic characteristics.

Table 5
Participant Academic Characteristics

Demographic	#	%
Student Level		
Beginning	154	15.2
Intermediate	464	45.9
Advanced	387	38.3
Undetermined	6	.6
Enrollment		
Part-time	423	41.8
Full-time	588	53.2
Years experience		
No experience	614	60.7
Less than 1 year	113	11.2
More than 1 year	284	28.1

Three questions asked participants to identify where they best learned about a particular counseling topic. These knowledge source questions inquired about licensure and credentialing, professional organizations, and the counseling philosophy.

Respondents were asked to identify where they thought they best learned about the topics of licensure, professional organizations, and the counseling philosophy. The majority of participants reported their knowledge source as a class in which they were enrolled. Table 6 summarizes the knowledge source questions.

Table 6
Knowledge Sources

Source	Licensure &		Prof	essional	Counseling		
	Crede	entialing	Organ	izations	Philosophy		
	#	%	#	%	#	%	
In class	692	68.4	812	80.3	894	88.4	
Faculty	40	4.0	55	5.4	13	1.3	
Another student	25	2.5	18	1.8	3	.3	
Doctoral student	5	.5	1	.1	11	1.1	
Professional counselor	28	2.8	13	1.3	23	2.3	
My own research	103	10.2	54	5.3	36	3.6	
Have not Learned this	41	4.1	14	1.4	13	1.3	
Do not recall	19	1.9	10	1.0	0	0.0	
Other	58	5.7	34	3.4	18	1.8	

Note. Knowledge sources reported for "Other" included: admissions process, orientation, advisor, and program chair.

# **Data Analysis**

Data were analyzed with SPSS 16.0. To minimize response bias, some PIES items were reverse scored and the instrument was named the *Counseling Graduate Student Survey* in its administration (Appendix A). Data for the independent variables was collected via the participant information sheet with the exception of student level and whether the master's program also had a doctoral program. Student level was calculated using the information in questions 9 and 10 of the participant information sheet. (Question 9 asked respondents to identify how many courses the respondent had completed, and Question 10 asked if the respondent was currently enrolled in practicum or internship.) Participants responding that they had completed three courses or less were

considered beginning level students. Those who had completed four or more courses, but were not yet in practicum or internship were considered intermediate level students.

Advanced students were those currently enrolled in practicum or internship. Information on whether a program also offered a doctoral program or was a master's only program was obtained directly from the CACREP program directory. The data set was screened for appropriateness and incomplete or irrelevant responses (e.g., non CACREP accredited programs or a reported non-counseling concentration). Inappropriate responses were eliminated.

Listed below is a review of the research hypotheses and the analyses used:

Hypothesis 1: There are significant positive relationships among levels of agreement with the counseling philosophy, beliefs about the counseling profession, and professional engagement.

Analysis: A correlational analysis was used to examine the three scales (agreement with the counseling philosophy, beliefs about the counseling profession, and professional engagement) to test for validity of the two scales developed for this study (agreement with the counseling philosophy and professional engagement) with the Gray and Remley scale of beliefs about the counseling philosophy.

Hypotheses 2 – 5 addresses the research question: Is there a significant relationship between agreement with the counseling philosophy for counselors-in-training and whether they are beginning, intermediate, or advanced graduate students, whether students are studying part-time or full-time, whether students are studying in a master's program that includes a doctoral program, or are in a master's program

- only, and whether the student has had paid full-time counseling-related experience?
- Analysis: A factorial ANOVA was used to identify significant relationships between the personal characteristics of respondents and their agreement with the counseling philosophy.
- Hypotheses 6 9 address the research question: Is there a significant relationship between levels of beliefs about the counseling profession for counselors-intraining and whether they are beginning, intermediate, or advanced graduate students, whether students are studying part-time or full-time, whether students are studying in a master's program that includes a doctoral program, or are in a master's program only, and whether the student has had paid full-time counseling-related experience?
- Analysis: A factorial ANOVA was used to identify significant relationships between the personal characteristics of respondents and their beliefs about the counseling profession.
- Hypotheses 10 13 address the research question: Is there a significant relationship between levels of professional engagement for counselors-in-training and whether they are beginning, intermediate, or advanced graduate students, whether students are studying part-time or full-time, whether students are studying in a master's program that includes a doctoral program, or are in a master's program only, and whether the student has had paid full-time counseling-related experience?
- Analysis: A factorial ANOVA was used to identify significant relationships among the personal characteristics of respondents and their professional engagement.

# **Chapter Four**

### Results

This chapter presents the results of the statistical analyses used to test the hypotheses associated with each of the research questions. Observations about the data collected will also be presented. First, information on the three instruments administered during the study will be presented. Second, the analyses germane to the research questions will be discussed. Pertinent information from the analyses will be presented in tabular form.

# **Participants**

There are 212 counseling master's degree programs that are accredited by the Council on Accreditation of Counseling and Related Educational Program (CACREP). The department chair, coordinator, or CACREP representative of each of these programs was contacted and asked to invite all master's degree students in their programs to participate in this study. It is not known how many students are enrolled in each of the 212 programs or how many program representatives actually invited their students to participate. A total of 1,011 completed surveys were received and data collected from these completed surveys were analyzed.

#### Instrumentation

Three scales were administered for this study. The scales collected information on participants' agreement with the counseling philosophy, their beliefs about the counseling

profession and their professional engagement. The instruments used to measure these constructs were the Professional Identity and Engagement Survey which addressed professional engagement and agreement with the counseling philosophy and the Beliefs about Counseling Scale which addressed additional aspects of professional identity.

Table 7 presents the descriptive statistics for each of the instruments.

Table 7

Description Statistics of Scales

	Mean	Standard Deviation	Median	Mode	Range of Scores	Possible Scores
Philosophy	76.56	5.37	73.00	73.00	27 - 90	18 - 90
Beliefs Counseling	49.54	5.57	49.00	48.00	29 - 68	14 - 70
Prof. Engagement	63.28	52.80	52.00	0	0 - 297	0 - 300+

Scores for the Counseling Philosophy scale (M = 76.56, SD = 5.37) illustrates strong agreement with the counseling philosophy. For the Beliefs about Counseling Scale, the score indicates a strong professional identity (M = 49.54, SD = 5.57). The mean score on the Professional Engagement Scale illustrates a low level of engagement on the part of respondents. The mode for professional engagement of 0 illustrates that the score found most often among participants was that they were involved in no engagement behaviors. However, there were only 42 respondents from the total of 1,011 who reported no engagement behaviors.

Internal consistency reliability was tested by calculating a Cronbach's alpha for each scale. Cronbach's alpha for the counseling philosophy scale was .65 (18 items). For beliefs about counseling, Cronbach's alpha was .56 (14 items). Cronbach's alpha for professional engagement was .56 (16 items). The reliability of the three scales is

acceptable as Feldt (1965) reported that ranges of .3 to .7 were considered good for measures of constructs in social research.

# The Construct of Professional Identity

Research question 1 stated, "Is there a significant relationship among agreement with the counseling philosophy, beliefs about the counseling profession, and professional engagement?" The purpose of this question was to examine the degree of overlap among the scales and to establish evidence of validity for the two scales developed for this study (i.e., Counseling Philosophy Scale and the Professional Engagement Scale) with the already established scale of Beliefs about the Counseling Profession (Gray, 2000) which measured professional identity. Hypothesis 1 states that there are significant relationships among agreement with the counseling philosophy, beliefs about the counseling profession, and professional engagement. The results of the Pearson product moment correlational analysis is presented in Table 8.

Table 8
Pearson Product Moment Correlation of Scales

	Counseling		Beliefs about		Professional	
	<b>Philosophy</b>		Counseling		<b>Engagement</b>	
Scale	r	P	r	P	r	$p_{\perp}$
Counseling Philosophy	_	_	.210**	.000	.040	.205
Beliefs about Counseling	.210**	.000	****	_	.123**	.000
Professional Engagement	.040	.205	.123**	.000	_	_

<sup>\*\*</sup> p< .01

The correlational analysis revealed a significant relationship between the Counseling Philosophy Scale and the Beliefs about Counseling Scale (r[969] = .21, p < .001). The relationship between the Professional Engagement Scale and Beliefs about

Counseling Scale was also significant (r [969] = .12, p < .001). The results support hypothesis 1. Results suggest that the Counseling Philosophy Scale and the Professional Engagement Scale are measuring some of the same constructs as the Beliefs about Counseling Scale. The Professional Engagement and Counseling Philosophy Scales were not significantly correlated which suggests that these two scales measure discrete constructs.

# **Student Characteristics and Counseling Philosophy**

Research question 2 stated, "Is there a significant relationship between agreement with the counseling philosophy for counselors-in-training and whether they are beginning, intermediate, or advanced graduate students, whether students are studying part-time or full-time, whether students are studying in a master's program that includes a doctoral program or are in a master's program only, and whether the students have had paid full-time counseling-related experience?" A 4-way ANOVA was conducted to examine this question. Hypotheses 2 through 5 stated that higher levels of agreement with the counseling philosophy occurred based on the characteristics of the student variables. The results of the ANOVA are presented in Table 9.

Table 9
Student Characteristics and Counseling Philosophy

ANOVA results Characteristic SS Df MS F**Doctoral Program** 1.06 16.06 .56 .454 1 Years Experience 75.21 2 37.60 1.31 .269 Enrollment 1 34.68 .271 34.68 1.21 Student Level 96.51 3 32.17 1.13 .338 Doc Program\*Years Experience 2 143.25 5.01 .007 286.51 Doc Program \*Enrollment 30.83 30.83 .299 1 1.08 Doc Program\*Student Level 171.91 3 58.30 2.04 .107 Years Experience\*Enrollment 2 9.62 .714 192.42 .34 Years Experience\*Student Level 178.65 4 44.6 1.56 .183 Enrollment\*Student Level 33.77 2 16.89 .59 .554 Doc Program\*Years Experience\*Enrollment .476 2 .238 .01 .992 Doc Program \*Years Experience\*Student Level 40.03 4 10.01 .35 .844 Doc Program\*Enrollment\*Student Level .457 44.90 2 22.45 .79 Years Experience\*Enrolment\*Student Level 151.26 4 37.82 .260 1.32 Doc Program\*Years 33.23 4 16.56 .58 .678 Experience\*Enrollment\*Student Level

Levine's test of equality for this analysis was not significant F = 1.19, p = .200. There was an interaction effect between years of paid professional counseling experience and whether the respondent was enrolled in a program that also had a doctoral program for

the level of agreement with the counseling philosophy F(39, 971) = 5.01; p = .007. This between-subjects effect was considered weak as indicated by  $\eta 2$  which illustrated that the effect accounted for only 1% of the variance with adequate power (P= .96). Therefore, hypotheses 2 through 5 were rejected and the null hypotheses were accepted as there were no main effects.

# Student Characteristics and Beliefs about the Counseling Profession

Research question 3 stated, "Is there a significant relationship between the level of beliefs about the counseling profession for counselors-in-training and whether they are beginning, intermediate, or advanced graduate students, whether students are studying part-time or full-time, whether students are studying in a master's program that includes a doctoral program or are in a master's program only, and whether the students have had paid full-time counseling-related experience?" A 4-way ANOVA was conducted to examine this question. Hypotheses 6 through 9 stated that higher levels of beliefs about the counseling profession occurred based on the characteristics of the student variables. Table 10 presents the result of the statistical analysis.

Table 10
Student Characteristics and Beliefs about Counseling
ANOVA results

Characteristic	SS	Df	MS	$\overline{F}$	$\overline{p}$
Doc Program	27.68	1	27.68	.89	.346
Years Experience	9.37	2	4.67	.15	.861
Enrollment	9.81	1	9.81	.31	.575
Student Level	5.15	3	1.72	.06	.083
Doc Program*Years Experience	5.09	2	1.54	.05	.952
Doc Program *Enrollment	27.05	1	27.05	.87	.352
Doc Program*Student Level	46.73	3	15.58	.50	.683
Years Experience*Enrollment	46.56	2	23.28	.75	.475
Years Experience*Student Level	64.04	4	16.01	.51	.726
Enrollment*Student Level	5.74	2	2.87	.092	.912
Doc Program*Years Experience*Enrollment	26.55	2	13.28	.41	.654
Doc Program *Years Experience*Student Level	29.33	4	7.33	.24	.919
Doc Program*Enrollment*Student Level	38.79	2	19.39	.621	.537
Years Experience*Enrollment*Student Level	384.34	4	96.09	3.08	.016
Doc Program*Years Experience*Enrollment*Student Level	30.09	4	7.52	.24	.915

Levine's test of equality for this analysis was not significant F = .962, p = .539. There was a significant interaction effect among years of paid professional counseling

experience with student level (beginning, intermediate, or advanced), and enrollment (full-time or part-time) for beliefs about counseling (F[39,929] = 3.079, p = .016). This interaction effect was considered weak as indicated by  $y^2$  which stated that the effect accounted for only 1.3% of the variance. No main effects were found. Therefore, hypotheses 6 through 9 were rejected and the null hypotheses were accepted for each of the student characteristics. Power for this analysis was .97.

# **Student Characteristics and Professional Engagement**

Research question 4 stated, "Is there a significant relationship between the level of professional engagement for counselors-in-training and whether they are beginning, intermediate, or advanced graduate students, whether students are studying part-time or full-time, whether students are studying in a master's program that includes a doctoral program or are in a master's program only, and whether the students have had paid full-time counseling-related experience?" A 4-way ANOVA was conducted to examine this question. Hypotheses 10 through 13 stated that higher levels of professional engagement occurred based on the characteristics of the student variables. The results of the statistical analysis are presented in Table 11.

Table 11
Student Characteristics and Professional Engagement
ANOVA results

ANOVA results Characteristic	SS	Df	MS	$\overline{F}$	p
Doc Program	54.129	1	54.13	.02	.882
Years Experience	8092.233	2	40496.12	16.50	.000
Enrollment	12509.583	1	12509.58	5.10	.024
Student Level	124962.287	3	41654.10	16.98	.000
Doc Program*Years Experience	6217.522	2	3108.76	1.27	.282
Doc Program *Enrollment	288.149	1	288.15	.12	.732
Doc Program*Student Level	3190.575	3	1063.53	.43	.729
Years Experience*Enrollment	1919.070	2	959.54	.39	.676
Years Experience*Student Level	9579.901	4	2394.98	.98	.420
Enrollment*Student Level	5696.655	2	2848.33	1.16	.314
Doc Program*Years Experience*Enrollment	4118.603	2	2059.30	.84	.432
Doc Program *Years Experience*Student	6748.373	4	1687.09	.69	.601
Level	8825.124	2	4412.56	1.80	.166
Doc Program*Enrollment*Student Level	8530.277	4	2132.57	.87	.482
Years Experience*Enrolment*Student Level	7423.816	4	1855.95	.76	.554
Doc Program*Years Experience*Enrollment*Student Level					

Levine's test of equality for this analysis was significant F = 3.02, p < .001. There was no concern about a Type I error as an examination of the results of the analysis found

that the doctoral program variable accounted for 0% of the variance, thus explaining the violation of the assumption of homoscedasticity.

Three main effects were found with respect to this research question. Years of paid counseling experience was significant (F [39, 97] = 16.05, p < .001). This effect accounted for 0.3% of the variance as indicated by  $\mathfrak{g}^2$ . Part-time versus full-time enrollment was also significant, (F[39, 929] = 5.10, p = .024). This effect accounted for 0.5% of the variance as indicated by  $\mathfrak{g}^2$ . Student level (beginning, intermediate, and advanced) showed significance (F [39, 929] =16.98, p< .001). This effect accounted for 5% of the variance as indicated by  $\mathfrak{g}^2$ . Hypotheses 10, 11, and 13 were supported. No between subjects effects were found. Power for this analysis was .85. Mean differences for these variables are presented in Table 12.

Table 12
Mean Differences for Significant Variables
Professional Engagement

_			95% Confidence Interval		
Variable	N	M	Lower Bound	Upper Bound	
Years Experience					
None	614	54.58	50.89	58.28	
Less than a year	113	76.01	63.95	98.07	
More than a year	284	77.01	70.43	83.59	
Enrollment					
Part-time	423	56.25	51.34	61.16	
Full-time	588	68.34	64.02	72.65	
Student Level					
Beginning	154	35.58	30.04	41.13	
Intermediate	464	58.06	54.48	63.64	
Advanced	387	79.90	74.28	85.51	

The majority of students had no paid counseling experience (n = 614) and scored on average 54.58. Those having less than a year's experience or more than a year's experience averaged 76.01 and 77.01 respectively. Part-time students (n = 423, M = 56.25) averaged lower scores on professional engagement than full-time students (n = 588, M = 68.34). Professional engagement increased progressively across student level with beginning students scoring on average 35.58, intermediate students averaging 58.06, and an average score for advanced students of 79.90. Confidence intervals for all levels of the significant variables were short and optimal with the narrowest interval range of 7.39 and the widest range of 34.12 (Charter & Feldt, 2002).

## **Knowledge Sources**

The Knowledge Sources section of this survey consisted of three questions asking respondents to identify where they best learned about (a) licensing and credentialing, (b) professional counseling organizations, and (c) the counseling philosophy. This section was exploratory in nature and was initially presented in Table 6 in Chapter 3 and revisited in Table 13 below. Table 13 presents the data from the knowledge sources section organized in categories. Sources identified as "internal to program" include (a) In a class where I was enrolled; (b) Faculty member in whose class I was not enrolled, (c) another student in the program (either doctoral or master's level student), and (d) other (these responses were all program related, e.g., orientation, admissions process, program advisor). External to program sources include a professional counselor not affiliated with the student's program or through the student's own research.

Table 13

Knowledge Sources

Internal and External to Program

Source	Lice	nsure &	Professional		Counseling	
	Crede	entialing	Organizations		Philosophy	
	n	%	n	%	n	%
Internal to Program	820	81.1	920	91.0	939	92.8
External to Program	131	12.9	67	6.6	59	5.9
Have not Learned Yet	41	4.1	14	1.4	13	1.3
Do not recall	19	1.9	10	1.0	0	0.0

The majority of students identified program sources as the place where they attained information on licensing and credentialing, professional organizations, and the counseling philosophy. Less than 2% reported not having learned about professional

organizations and the counseling philosophy. Only 4.1% had not learned about licensing and credentialing. Of the 1,011 students responding, a total of 68 reported not yet having learned about one of these areas.

## **Summary**

This study examined professional identity across master's students enrolled in a CACREP accredited training program. Instruments measuring counseling philosophy and professional engagement were found to be correlated to an instrument measuring beliefs about the counseling profession. These constructs together may constitute a part of counselor professional identity. Results also demonstrated an overwhelming agreement with the counseling philosophy and beliefs about counseling among master's level counseling students in CACREP accredited programs. The study also discovered factors influencing professional engagement which include years experience, student level, and enrollment. Finally, the study investigated the knowledge sources for students on the areas of licensing and credentialing, professional organizations, and the counseling philosophy. Results revealed that students were gaining knowledge about these areas from within their training programs.

## **CHAPTER FIVE**

#### DISCUSSION

This chapter will present an interpretation and will discuss the significance of the findings of this study. The impact the results of this study might have on counselor education and the counseling profession is included as well. Implications for further research will also be discussed.

## **Purpose of the Study**

The purpose of this study was to examine the professional identity of master's level students enrolled in a CACREP accredited master's level training program. This study examined professional identity on three levels: counseling philosophy, beliefs about the counseling profession (related to preparation program accreditation, licensure, certification, and pride in being a professional counselor), and professional engagement. Strength of professional identity was measured in relation to a number of possible influences including the following: whether counseling masters students were beginning, intermediate, or advanced graduate students, whether students were studying part-time or full-time, whether students were studying in a master's program that included a doctoral program or were studying in a master's program only, and whether students had paid full-time counseling-related experience.

Professional identity has been an important concern for the counseling profession as counseling strives for full recognition among other mental health professions. As one of the youngest of the mental health professions, professional counseling still seeks to

unify its identity, to achieve equal status with other similar professionals, and to educate the public on the services rendered by professional counselors. This study was designed to examine professional identity in order to further the goal of unity for the counseling profession.

## Discussion of the Construct of Professional Identity

Professional identity was measured through the Professional Identity and Engagement Survey consisting of the Counseling Philosophy scale and the Professional Engagement scale. The Beliefs about the Counseling Profession scale was also administered. Appendix A presents a copy of the instruments used for this study. The Beliefs about the Counseling Profession scale (Gray & Remley,(2000) measures the professional identity of professional counselors holding licensure for two years or less. His criteria for professional identity included beliefs in licensure and credentialing, wellness, professional membership, conference attendance, advocacy for the profession, pride in the counseling profession, and CACREP accreditation of graduate programs. His scale was found to be reliable through a test-retest procedure.

Internal consistency reliability for the Counseling Philosophy scale and the Professional Engagement scale was established by calculating a Cronbach's alpha for each (.65 and .56 respectively). The alpha calculated for the Beliefs about the Counseling Profession scale was .56 which reinforces this scale's formerly established reliability. Although Feldt (1965) thought that alphas in the range of .3 to .7 were acceptable for social research which generally measures vague constructs. Further examination of the scales is in order to address attenuation issues.

The Beliefs about the Counseling Profession scale was significantly correlated to the Counseling Philosophy scale and to the Professional Engagement scale (Table 8). This implies that counseling philosophy and professional engagement may be components of professional identity and are measuring some of the same components that the Beliefs about the Counseling Profession scale measures. The lack of a correlation between the Counseling Philosophy scale and the Professional Engagement scale suggests that philosophy and engagement are discrete constructs. Perhaps acceptance of the counseling philosophy and engagement in professional counseling activities are components of the construct in counseling known as *counselor professional identity*.

The Counseling Philosophy scale was based on four components: (a) a developmental orientation, (b) wellness, (c) prevention, and (d) empowerment.

Agreement among the graduate counseling students who participated in this study with this philosophy was strong as the mode score recorded was 73 and the mean score was 76.56 when the possible range of scores was 27 to 90 and higher scores indicated more agreement with the counseling philosophy (Table 7). It was expected that agreement with the counseling philosophy would be low at the beginning and increase as students progressed through their training programs. The results did not support this expectation. It was assumed that counselor professional identity would begin in the training programs and increase as students progressed through their master's degree programs. However, this finding suggests that students are entering their graduate programs with a strong professional identity as a counselor. This finding brings up the question of whether the profession of counseling was chosen because of its philosophy by some students. This finding supports the literature in its assertion that counselors believe that problems client

experience are often developmental in nature and that wellness is a goal of professional counseling (Ivey & Ban Hesteren, 1990; Ivey & Regazzio-Digiglio, 1991; McAuliffe & Eriksen, 1999; Myers, 1992; Pistole & Roberts, 2002; Remley, 1991). The two remaining components of the counseling philosophy (prevention of emotional and mental problems and empowerment of clients) also seem to be accepted widely among the counseling master's degree students in training programs. This finding supports the literature which includes prevention and empowerment in the counseling philosophy (McWhirter, 1991; Myers, 1992; Pistole & Roberts, 2002; Remley, 1992; Remley & Herlihy, 2007). There is also a consistent call in the literature for professional counseling to return to its developmental roots (Gale & Austin, 2003; Hansen, 2003; McAuliffe & Eriksen, 1999). The results of this study suggest that counseling master's degree students actually embrace and endorse the fundamental roots of the counseling profession (the developmental nature of problems, wellness, prevention, and client empowerment).

The Professional Engagement scale measured the engagement behaviors of research participation, professional membership, conference attendance and presentations, and advocacy. It was suggested in the literature that these behaviors are a part of professional identity. Feit and Lloyd (1990) and Van Zandt (1990) categorized engagement behaviors as professional identity and professionalism. Spurill and Benshoff (1996) identified the inclusion of expected professional behaviors in counseling curricula as a duty of counselor educators. The range of scores on this scale (0 - 297) suggests that engagement behaviors are occurring on the parts of counseling master's degree students in training programs (Table 7). To what extent students are professionally engaged is still unknown. It is interesting that the mode for the Professional Engagement scale was 0

(indicating that the most frequent score of counseling master's degree students indicated that they are not engaged in professional activities at all). However, only 42 of the 1,011 respondents had scores of 0. This indicates that some degree of engagement behavior is taking place with most counselor master's degree students. It is unknown whether counseling graduate students are aware that professional engagement is expected of them once they enter training programs to become professional counselors. Professional engagement will be further discussed in the following section.

The professional literature has noted the need for a universally accepted definition of counselor professional identity. As the counseling profession has been struggling to articulate its distinctiveness among the other mental health professions, this study suggests that progress has been made toward that end. The overwhelming agreement with the counseling philosophy and agreement with Gray's beliefs about the counseling profession among this study's participants suggests that a collective ideology is being presented in counselor training programs across the United States. This ideology appears to include the counseling philosophy and professional engagement, as well as, the additional criteria laid out by Gray of licensing and credentialing, CACREP accreditation, and pride in the profession.

## **Participant Characteristics and Professional Engagement**

The power level for this analysis was .85 with a small effect size. This small effect size is appropriate and not surprising for a study with such a large sample size (n =1,011). This sample size is within an acceptable range according to Cohen (1992).

Within subjects effects for three variables were found to be significant with professional engagement: years experience, enrollment, and student level (Table 11).

The mean score of 63.28 out of possible scores exceeding 300 initially appears low, but is not surprising as respondents were counselors-in-training and not practicing professional counselors who would be expected to report more engagement. High scores on professional engagement were not expected. It is important to note that professional engagement scores ranged from 0-297, indicating that some respondents were not engaged professionally at all, and others were exceptionally engaged. The most frequent score recorded for professional engagement was 0 which was the score of 42 participants. It is surprising that only 42 participants were not professionally engaged. The results indicate that most of the counseling graduate students who participated in the study were engaged professionally at some level. A summary of the result may be reviewed in Table 12.

The majority of students in this study who reported having no paid counseling-related experience also had the lowest professional engagement score (Table 12). This is expected as Gray (2000) and LeFleur (2007) reported professional identity is linked to relationships with other professional counselors. It was expected that having no professional experience would result in less reported engagement behavior. Professional engagement scores increased with the amount of experience reported. Gray and LeFleur studied professional counselors who had already completed their training. If their assertion of building professional identity through relationships is applied to the training programs, then counselors - in - training build their professional identity through relationships with the counselor educators in their training programs. Assuming that full-

time students have more exposure to their program environment, it would be logical that engagement scores would reflect this exposure. This seems to be a possibility as full-time students reported more professional engagement than part-time students.

Additionally, students who had been in their programs longer, thus having an opportunity to develop relationships with their professors, reported more engagement behaviors. It is not surprising that the mean scores for Professional Engagement increased progressively across student level. This finding supports the notion that professional identity is built on relationships with like-minded professionals. The results of this study illustrate a degree of awareness of professional engagement in the training programs, but it does not shed light on the degree to which professional engagement is considered important.

#### **Discussion of Knowledge Sources**

The Knowledge Sources section of this study's survey instrument was exploratory in nature and asked respondents to identify where they thought they best learned about three separate areas of counseling. The three areas were licensing and credentialing, professional organizations, and the counseling philosophy. Responses were categorized into sources internal to the training program, sources external to the training program, and no source as the information had not been learned. Students were also given a choice to report that they did not recall where they learned about these areas (Table 13).

The majority of the student participants in this study reported learning about all three areas from sources internal to their training programs. This supports the indication that the counseling philosophy is being presented by counseling professors as the accepted ideology for the counseling profession. As 91% of students reported learning

about professional organizations from internal sources, this may suggest that information about professional engagement institutions, such as, the American Counseling Association, do occupy a place of some prominence in the training programs. Again, to what degree students are being taught about professional organizations is still unknown. Only 81.1% of the student study participants reported learning about licensure and credentialing from sources internal to their training program. This result is noteworthy. Licensure and credentialing for professional counselors have been identified in the literature as important aspects of professional identity. Spurill and Benshoff (1996) considered attaining licensure is one of the important professional behaviors that should be included in training programs. Inconsistencies surrounding licensure requirements and the lack of pursuit of licensure by professional counselors have been identified as obstacles to the development of a professional identity for counseling by Gale and Austin (2003). The inclusion of licensure and credentialing as an important part of the preparation of professional counselors is well documented in the literature (Feit & Lloyd, 1990; Gale & Austin, 2003; LeFleur, 2007; Spruill & Benshoff, 1996; VanZandt 1990; Zimpfer et al., 1992). Because it is so important that counseling students be taught about certification and licensure, it is disturbing to see that nearly 13 % of the students in this study attributed learning about licensure and credentialing to sources external to their training programs.

The findings in the Knowledge Sources section of this study provide a glimpse into the whatthe information is being transmitted in training programs. A more in-depth investigation is necessary to determine the level of awareness of counselors- in-training as to the expected behaviors of a professionally engaged counselor.

## Participant Characteristics and Counseling Philosophy

As the between subjects effect of years experience and doctoral program accounted for only 1% of the variance and as the power calculated for this analysis was .97, the effect was considered not practically significant. Therefore no conclusive assumptions were made based on this result.

# Participant Characteristics and Beliefs about the Counseling Profession

As the between subjects effect of years experience, student level, and enrollment accounted for only 1.3% of the variance and as the power level for this analysis was .965, the results of this analysis were considered not practically significant. Therefore no conclusive assumptions were made based on this result.

#### Limitations

The limitations of this study include:

- (1) Attenuation is a concern for the instruments in this study. Since the construct of professional identity is still nebulous, the accuracy of the instruments is in question.
- (2) Accuracy and consistency on the part of the respondents is a concern common to survey research.
- (3) Results of this study may not be generalizable, in that, not enough program demographics were available to compare to the demographics of the sample. However, with the large sample size, the results of this study

could arguably be generalized to all counseling master's degree students in CACREP programs throughout the United States.

#### Significance of the Study

This study has significance for counselor education and the counseling profession. The findings in this study indicate that there is a developing ideology for the counseling profession, albeit incomplete. The overwhelming agreement of this study's participants with the counseling philosophy and the implication that this philosophy is being widely presented in the training programs suggests that the components of development, wellness, prevention, and empowerment may be the foundation on which professional counseling is built. Professional engagement behaviors are also strongly present in the training programs. The overwhelming agreement with the Beliefs about Counseling scale suggests that Gray has identified other possible components of professional identity. This study indicates that progress toward a definitive definition of professional identity is being made as is evidenced by the uniformity with which the learning sources for the counseling philosophy and professional counseling organizations were identified as internal to the training programs. This is an indicator of cohesion for the profession.

For counselor educators, the findings show that students are being exposed to the counseling philosophy and professional organizations with consistency across the training programs. A need to be more diligent about licensure and credentialing options for professional counselors may be needed.

#### **Implications for Further Research**

Further research is needed to delineate the construct of professional identity. The development of instrumentation that can aid in the isolation of components of professional identity would be helpful. A factor analysis of the instrumentation for this study would be appropriate. Further study on the presentation of professionalism in the counseling training programs would also enhance knowledge of how professional identity is being developed. It is not enough to know that professional engagement behaviors are present in the programs, an exploration of the perceptions of counselors-in-training as to the behavioral expectations for them as they enter the field after completing their training is needed. Another area for examination is the relationship between the students and the counselor educators in their respective programs.

#### **Summary**

The components of professional identity are not yet defined. This study has examined two possible aspects: the counseling philosophy and professional engagement. With an articulated ideology and strong professionals, counselor professional identity will eventually be delineated. This study found that there is an overwhelming agreement with the counseling philosophy based on the components of a developmental orientation, wellness, prevention, and empowerment. It was also discovered that there is some degree of professional engagement taking place in the training programs in the areas of professional organization membership, conference attendance and presentation, research participation, and advocacy for both clients and the counseling profession. There was also an indication that more components of professional identity may be identified in Gray's Beliefs about the Counseling Philosophy. Further research studies should address these

constructs in more detail and further the progress toward a definitive articulation of counselor professional identity.

## **CHAPTER SIX**

#### MASUSCRIPT FOR SUBMISSION

This manuscript was prepared for submission to the journal, Counselor Education and Supervision.

# The Professional Identity of Master's Level Counseling Students Enrolled in CACREP Accredited Preparation Programs

Professional counseling is a master's level entry profession. That is, in order to become a professional counselor, a master's degree is required. Training and exposure to the profession officially begins in master's level preparation programs. As counselors-intraining progress through their master's degree programs, they begin to acquire the necessary skills and knowledge to become both clinicians and professionals.

Professionalism is an important aspect of professional counseling. This study examines professional identity on three levels: counseling philosophy, beliefs about the counseling profession (related to preparation program accreditation, licensure, certification, and pride in being a professional counselor), and professional engagement.

As professional counseling is relatively new among the mental health professions, the professional identity of counselors has yet to be definitively articulated (Gale & Austin, 2003; Myers, 1992; Myers & Sweeney, 2004; Pistole & Roberts, 2002; Remley & Herlihy, 2007). It is important that professional counselors know who they are as professionals and how they differ from other mental health professionals. It is also important that professional counselors know the behaviors that are expected of them once they enter the field. Knowledge of the counseling philosophy and an understanding of the

importance of professional engagement will give counselors-in-training the awareness needed to become strong and active members of the counseling profession.

The three components of engagement, philosophy and beliefs about the profession make up professional identity. A necessitous factor that spurs professional engagement is a professional counselor's sense of pride in the profession. Counselors who take pride in their chosen profession will have a strong professional identity (Remley & Herlihy, 2007). The literature clearly calls for more investigation into the professional identity of counselors. An expanded knowledge of the nature, development, and maintenance of professional identity will benefit both the profession and its practitioners.

## The Construct of Professional Identity

As with any new profession, counseling has grappled with the development and discovery of its professional identity. Establishing or identifying counseling's professional identity has been a topic of debate in the professional literature throughout the history of the profession. The topic of professional identity currently continues to be popular in professional publications. Professional identity is given a prominent place in the CACREP standards. It is included as one of the eight common core areas of the curricular standards. The standards set as learning objectives aspects of professional functioning which include, history and philosophy of the counseling profession, advocacy for the profession and for clients, knowledge of professional organizations, distinctions between professional counseling and other human service providers, knowledge of credentialing and licensure, knowledge of ethics and computer literacy (CACREP, 2001). This description of professional identity is insufficient. It does not specify the philosophy

underlying the counseling profession and the professional functions are not comprehensive enough for a full understanding of the concept of professional identity.

A look at the literature reveals that a clear definition of professional identity has yet to be articulated. Many investigators in the professional journals have identified various components of counseling's professional identity and have put forth definitions based on these identified components. Many of these components are recognized as aspects of counseling practice that differentiates professional counseling from other mental health professions, which logically should be included in a definition of counseling's professional identity. The following discussion outlines some of the components of professional identity of counselors and offers some proposed definitions. *The Counseling Philosophy* 

In order for a practitioner to identify as a professional counselor, it is necessary to know what makes counselors different from other mental health professionals. For counselors, the difference lies in the way in which they practice, as contrasted to the way other mental health providers practice. The counseling philosophy is the base on which counseling practice is built. The counseling philosophy entails the view of the human experience through the lenses of development, wellness, prevention, and empowerment.

The literature is in agreement that the counseling philosophy is based on a developmental orientation (Hansen, 2003; Ivey & Riggazio-DiGiglio, 1991; Ivey & Van Hesteren, 1990; Myers, 1992; Pistole & Roberts, 2002; Remley, 1991; Van Hesteren & Ivey, 1990). This developmental orientation entails an approach to clients that rejects the medical model of illness and views clients as moving through a natural progression of human growth. The developmental perspective also embraces a holistic view of clients

through which wellness is included (McAuliffe & Eriksen, 1999; Myers, 1992; Remley, 1991). The wellness perspective approaches clients from a macro view and surpasses the presenting problem that initially brings clients to seek professional counseling services.

By considering life stressors as natural to the human experience and promoting a lifestyle based on wellness, counselors facilitate clients' abilities to face future life stressors autonomously. This is called prevention (McWhirter, 1991; Myers, 1992; Remley, 1991; Van Hesteren & Ivey, 1990).

The process by which prevention, development, and wellness is achieved is called empowerment (McWhirter, 1991; Remley & Herlihy, 2007). Empowerment is the process of facilitating clients' capabilities to negotiate their life's journey independently. It entails an awareness of the societal, cultural, and familial influences that have an impact on clients' lives. This awareness paves the way for skill development resulting in clients' abilities to gain and wield control over their lives. The components of the counseling philosophy are interrelated and complement each other in the way they promote client growth.

Beliefs about the Counseling Profession

Beliefs about the counseling profession include a professional orientation that entails seeking preparation programs that are CACREP-accredited, acquiring licensure and certification, ACA association membership, and supervision by other counselors. These beliefs also include being proud to be a professional counselor.

Professional counselors with a strong professional identity believe that professional counselors should belong to the American Counseling Association (ACA), should obtain professional counselor licenses and certifications, should attend graduate

programs accredited by the Council on Accreditation of Counseling and Related Educational Program (CACREP), favor the term *counselor* over terms such as *therapist*, receive supervision from other professional counselors, and have pride in being professional counselors. These are *beliefs* about the counseling profession as articulated by Gray (2000).

## Professional Engagement

The literature refers to expected and desired behaviors of professional counselors. There is a belief expressed that counselor involvement, i.e., engagement, is an important aspect of professional identity (Gale & Austin, 2003; Myers & Sweeney, 2004). These behaviors are for some seen as professional identity (Feit & Lloyd, 1990) and for others as professionalism (Spruill & Benshoff, 1996; Van Zandt, 1990). It is not enough for professional counselors to just learn about the counseling philosophy in their training programs or to develop the belief that professional counseling is a profession that is separate and distinct from other mental health professions. It is important that counseling students conduct themselves in a professional manner once they enter the field. The maintenance of professional counseling skills and competence is an important part of being a professional counselor. Professional activities such as attendance and presentation at conferences, membership in professional organizations, participation in research, the pursuit of licensure and credentials, and advocacy for clients as well as advocacy for the counseling profession are desired behaviors of a professional counselor who has a strong sense of professionalism (Feit & Lloyd, 1990; Van Zandt, 1990). These behaviors have been identified as professionalism and also as professional identity in the literature (Feit & Lloyd, 1990; Spurill & Benshoff, 1996; Van Zandt, 1990; Zimpfer,

Mohdzain, West, & Buvenzer, 1992). The term *professional engagement* is being introduced here in an effort to demonstrate the closely linked relationship between belief in the counseling philosophy, beliefs about the counseling profession, and the desired behaviors of a counseling professional. A professionally engaged counselor also will have a strong belief in the counseling philosophy, as well as, agree with the beliefs about the counseling profession as laid out by Gray (2000) thus demonstrating a strong professional identity. Myers and Sweeney (2004) reported a lack of professional counselor involvement in the profession itself as a great obstacle to the success of current advocacy efforts. Van Zandt (1990) pointed out that professional engagement can be a source of pride for professional counselors. Zimpfer et al (1990) used professional engagement behaviors of faculty members as part of their criteria for assigning a professional identity to counselor education training programs.

#### Method

#### **Participants**

A total of 1,011 students enrolled in 79 CACREP accredited programs across 35 states participated in this study. Students completed an institutional review board consent form and a demographic sheet. The age range was 22 to 75 years old with a mean age of 32.57 years (SD = 9.99). The majority of participants (59.1%) were between the ages of 22 and 30 (n = 598). Respondents were overwhelmingly female (87%, n = 880) and Caucasian (81.9%, n = 131). Nearly half (44%, n = 445) of the respondents held a bachelor's degree in psychology and again, nearly half (41%, n = 420) reported pursuing a school concentration in their counseling master's programs. Enrollment status was nearly equivalent with 41.8% reporting part-time status (n = 423) and 58.2 % reporting

full-time enrollment (n = 588). Participants were placed in one of three student levels. Beginning students were those who had completed three or fewer courses. Intermediate students were those who had completed four or more courses, but who were not currently in practicum or internship. Advanced students were determined through current enrollment in practicum or internship. The majority of respondents were intermediate level (45.9%, n = 154) with beginning (n = 464) and advanced (n = 387) students garnering 15.2% and 38.1% respectively. Six respondents did not report enough information for their student level to be determined. Most reported having no paid professional counseling experience (60.7%, n = 614) while 28.1% did report having more than one year of paid counseling experience (n = 284). 113 (11.2%) reported having less than one year's paid professional counseling related experience.

Information on the type of program where participating students were enrolled was also collected. A total of 39.3% of the programs also offered a doctoral program (n = 31) while 60.7% were a master's only program (n = 48). Programs were identified by ACES region to determine if a representative sample had been obtained. A total of 203 (20.1%) of the participants came from 13 programs in the North Atlantic Region of ACES; 184 (18.2%) came from 18 programs in the North Central Region; 488 (48.3%) came from 41 program in the Southern Region; 79 (7.8%) came from 2 programs in the Rocky Mountain Region; and 57 (5.6%) came from 5 programs in the Western Region. The number of participants from each region of ACES approximated the number of CACREP accredited programs in each region in that 16.5% of all CACREP accredited programs are in the North Atlantic Region; 22.8% are in the North Central Region;

51.9% are in the Southern Region; 2.5% are in the Rocky Mountain Region; and 6.3% are in the Western Region.

#### Instruments, Procedure, and Hypotheses

The Professional Identity and Engagement Survey (PIES) was developed for this study. The survey contained two subscales and one exploratory section: the Counseling Philosophy scale, the Professional Engagement scale, and the exploratory Knowledge Sources survey. The Counseling Philosophy scale measured knowledge of the four components underlying the counseling philosophy (a developmental orientation, wellness, prevention, and empowerment). This scale contained 18 items. Scores on the scale can range from 18 to 90, with higher scores indicating higher levels of counselor agreement with the counseling philosophy. The Professional Engagement scale assessed the extent of students' professional engagement. Information on memberships in professional organizations, such as, ACA and its divisions was collected. The depth of respondents' involvement was solicited through items addressing offices held and committee membership in organizations to which they belonged. Those serving as committee members and officers were assessed as having a higher level of professional engagement than those reporting membership only. Conference or workshop attendance was likewise investigated with items addressing depth of involvement, i.e., presentation or attendance only. Presentation at conferences represented a higher level of engagement. Participation in research was similarly assessed at different engagement levels ranging from research participant to principal investigator. Finally, this section addressed advocacy through lobbying behaviors and conversing activities. Lobbying behaviors were also assessed at different levels of professional engagement. There were 16 items in this

scale. The three items in Knowledge Sources survey of the PIES collected information on the manner in which knowledge of counseling licensure and credentialing, the counseling professional institutions and the counseling philosophy was best gained as perceived by the respondent. Response choices in this section include (a) class I am taking or have already completed; (b) faculty member in whose class I was not enrolled; (c) another counseling master's student in the program; (d) a doctoral student in my program; (e) professional counselor not associated with my university; (f) through my own research for school or clients; (g) I haven't learned about this; (h) I don't remember where I learned this; and (i) other (please specify). Items addressed awareness of credentialing, professional counseling associations, and the counseling philosophy. The three questions in this section were exploratory in nature.

The PIES underwent an expert reviews during its development. Experts on the topic of professional identity were identified through their publications and asked to give their feedback on the instrument. They were also asked to rate the individual items on the Counseling Philosophy scale to ensure that items related to the four components stated earlier. In an effort to ensure content validity, some items on the Counseling Philosophy scale were reworked using the experts' feedback and put through a second expert review. This was done to generate reverse scored items to enhance content validity.

The Beliefs about Counseling scale was developed by Gray and Remley (2000). Issues related to beliefs regarding professional association membership, counselor credentialing, and ways in which counseling is distinguished from other mental health professions were addressed in this section. This scale was reviewed by expert judges for content validity and was shown to be reliable through a test-retest procedure. This

instrument has 14 items. Scores on the scale range from 14 to 70, with higher scores indicating higher levels of beliefs about the counseling profession believed to be indicative of a strong professional identity.

Participants were recruited through their CACREP accredited master's degree programs. Programs were identified through a directory of CACREP accredited programs obtained on the CACREP website (<a href="www.cacrep.or">www.cacrep.or</a>). A total of 208 of the 215 programs in the directory were contacted. Each program was chosen to receive an electronic mail message requesting that the faculty member forward an included invitation to participate in the study to their master's level students. Informed consent and all data collection were done electronically through a secured professional internet service. All procedure was monitored closely for ethical soundness.

The following hypotheses were tested in this study:

Hypothesis 1: There are significant positive relationships among levels of agreement with

the counseling philosophy, beliefs about the counseling profession, and professional engagement.

Hypothesis 2: There will be a significant relationship between student characteristics (enrollment, student level, years of paid counseling related experience, or whether the student is enrolled in a master's only program or one that also offers a doctoral program) and agreement with the counseling philosophy among master's level counseling students enrolled in a CACREP accredited training program.

Hypothesis 3: There will be a significant relationship between student characteristics (enrollment, student level, years of paid counseling related experience, or

whether the student is enrolled in a master's only program or one that also offers a doctoral program) and level of beliefs about counseling among master's level counseling students enrolled in a CACREP accredited training program.

Hypothesis 4: There will be a significant relationship between student characteristics (enrollment, student level, years of paid counseling related experience, or whether the student is enrolled in a master's only program or one that also offers a doctoral program) and level of professional engagement among master's level counseling students enrolled in a CACREP accredited training program.

#### **Data Analysis and Results**

Three scales were administered for this study. The scales collected information on participants' agreement with the counseling philosophy, their beliefs about the counseling profession, and their professional engagement. Additionally, data from the Knowledge Sources survey is presented. Scores for the Counseling Philosophy scale (M = 76.56, SD = 5.37) illustrated strong agreement with the counseling philosophy (n = 1,011). For the Beliefs about Counseling Scale (n = 969), the scores indicates a strong professional identity (m = 49.57, m = 5.57). The mean score on the Professional Engagement Scale (m = 1,011) illustrates a low level of engagement on the part of respondents (m = 63.28, m = 52.80). The mode for professional engagement of 0 illustrates no engagement behaviors reported. There were 42 respondents who reported 0 engagement behaviors. Internal consistency reliability was tested by calculating a Cronbach's alpha for each scale. Cronbach's alpha for the counseling philosophy scale was .65 (18 items). For beliefs about counseling, Cronbach's alpha was .56 (14 items). Cronbach's alpha for professional engagement was .56 (16 items). The reliability of the three scales is

acceptable as Feldt (1965) reported that ranges of .3 to .7 were considered good for measures of constructs in social research. Despite Feldt's opinion, further analyses of the instruments is in order to address attenuation issues. Table 1 presents the means and ranges of scores on the instruments.

Table 1
Descriptive Statistics of Scales

	Mean	Standard Deviation	Median	Mode	Range of Scores	Possible Scores
Philosophy	76.56	5.37	73.00	73.00	27 - 90	18 - 90
Beliefs Counseling	49.54	5.57	49.00	48.00	29 - 68	14 - 70
Prof. Engagement	63.28	52.80	52.00	0	0 - 297	0 - 300+

# Correlation of Scales

The purpose of this analysis was to address hypothesis 1 by examining the degree of overlap among the scales and to establish evidence of validity for the two scales developed for this study (i.e., Counseling Philosophy Scale and the Professional Engagement Scale) with the already established scale of Beliefs about the Counseling Profession (Gray 2000) which measured professional identity. The pearson's product-moment correlational analysis revealed a significant relationship between the Counseling Philosophy Scale and the Beliefs about Counseling Scale (r[969] = .21, p < .001). The Professional Engagement Scale and Beliefs about Counseling Scale were significantly correlated as well (r[969] = .12, p < .001). Results suggest that the Counseling Philosophy Scale and the Professional Engagement Scale are measuring some of the same constructs as the Beliefs about Counseling Scale. The Professional Engagement and

Counseling Philosophy Scales were not significantly correlated indicating that these scales are measuring discrete constructs.

Student Characteristics and Counseling Philosophy

A 4-way ANOVA was conducted to investigate hypothesis 2. There was an interaction effect between years of paid professional counseling experience and whether the respondent was enrolled in a program that also had a doctoral program for the level of agreement with the counseling philosophy, F(39, 971) = 5.01; p = .007. This between-subjects effect was considered weak as indicated by  $\mathfrak{n}2$  which illustrated that the effect accounted for only 1% of the variance. Because of the risk a Type I error as indicated by the high power level (P = .96), this analysis is considered not practically significant. A further investigation of the two variables reinforced this as years experience and doc program were not correlated (r = .005).

Student Characteristics and Beliefs about the Counseling Profession

A 4-way ANOVA was conducted to examine hypothesis 3. There was a significant interaction effect among years of paid professional counseling experience with student level (beginning, intermediate, or advanced) and enrollment (full-time or part-time) for beliefs about counseling (F[39,929] = 3.079, p = .016. This interaction effect was considered weak as indicated by  $\eta^2$  which stated that the effect accounted for only 1.3% of the variance. Power for this analysis was .97. As the power level was high indicating a risk of a Type I error, this interactive effect was considered not practically significant. Further investigation of the variables showed a weak, significant correlation between years experience and enrollment (r = .08, p = .017). Student level showed no

correlation with either years experience or enrollment. This additional analysis supports a concern of an increased risk of a Type I error.

Student Characteristics and Professional Engagement

A 4-way ANOVA was conducted to investigate hypothesis 4. Levine's test of equality for this analysis was significant F = 3.02, p < .001. There was no concern about a Type I error as an examination of the results of the analysis found that the doctoral program variable accounted for 0% of the variance, thus explaining the violation of the assumption of homoscedasticity.

Three main effects were found with respect to this research question. Years experience was significant (F[39, 97] = 16.05, p < .001). This effect accounted for 0.3% of the variance as indicated by  $\mathfrak{y}^2$ . Enrollment was also significant, (F[39, 929] = 5.10, p = .024). This effect accounted for 0.5% of the variance as indicated by  $\mathfrak{y}^2$ . Student level showed significance (F[39, 929] = 16.98, p < .001). This effect accounted for 5% of the variance as indicated by  $\mathfrak{y}^2$ . Power for this analysis was .85. Mean differences for these variables are presented in Table 2.

Table 2
Mean differences for significant variables
Professional Engagement

_		95% Confidence Interval			
Variable	N	M	Lower Bound Upper Bo		
Years Experience					
None	614	54.58	50.89	58.28	
Less than a year	113	76.01	63.95	98.07	
More than a year	284	77.01	70.43	83.59	
Enrollment					

Part - time	423	56.25	51.34	61.16
Full - time	588	68.34	64.02	72.65
Student Level				
Beginning	154	35.58	30.04	41.13
Intermediate	464	58.06	54.48	63.64
Advanced	387	79.90	74.28	85.51

The majority of students had no paid counseling experience (n = 614) scored on average 54.58, while those having less than a year's experience or more than a year's experience averaged 76.01 and 77.01 respectively. Part-time students (n = 423, M = 56.25) averaged lower on professional engagement than full-time students (n = 588, M = 68.34). Professional engagement increased progressively across student level with beginning students scoring on average 35.58, intermediate students averaging 58.06, and an average for advanced students of 79.90. Confidence intervals for all levels of the significant variables were short and optimal with the narrowest interval range of 7.39 and the widest range of 34.12 (Charter & Feldt, 2002).

## Knowledge Sources

The Knowledge Sources section consisted of three questions asking respondents to identify where they best learned about: (a) Licensing and Credentialing, (b) Professional counseling organizations, and (c) the counseling philosophy. The majority of students identified program sources as the place where they attained information on licensing and credentialing (81.1%), professional organizations (91%), and the counseling philosophy (92.8%). Less than 2% reported not having learned about

professional organizations and the counseling philosophy. Only 4.1% had not learned about licensing and credentialing. Of the 1,011 students responding, a total of 68 reported not yet having learned about one of these areas.

Limitations of the Study

The limitations of this study include: (1) Attenuation is a concern for the instruments in this study. Since the construct of professional identity is still nebulous, the accuracy of the instruments is in question. (2) Accuracy and consistency on the part of the respondents is a concern common to survey research. (3) Results of this study may not be generalizable, in that, not enough program demographics were available to compare to the demographics of the sample. However, with the large sample size, the results of this study could arguably be generalized to all counseling master's degree students in CACREP programs throughout the United States.

## **Discussion**

The Beliefs about the Counseling Profession scale was significantly correlated to the Counseling Philosophy scale and to the Professional Engagement scale. This implies that counseling philosophy and professional engagement may be components of professional identity and are measuring some of the same components that the Beliefs about the Counseling Profession scale measures. The lack of a correlation between the Counseling Philosophy scale and the Professional Engagement scale suggests that philosophy and engagement are discrete constructs. The significance of these findings is the suggestion that two of the components of counselor professional identity may have been identified. Perhaps acceptance of the counseling philosophy and engagement in

professional counseling activities are components of the construct in counseling known as *counselor professional identity*.

The Counseling Philosophy scale was based on four components: (a) a developmental orientation, (b) wellness, (c) prevention, and (d) empowerment. Agreement among the graduate counseling students who participated in this study with this philosophy was overwhelming as the mode score recorded was 73 and the mean score was 76.56 when the possible range of scores was 27 to 90 and higher scores indicated more agreement with the counseling philosophy. It was expected that agreement with the counseling philosophy would be low at the beginning and increase as students progressed through their training programs. The results did not support this expectation. It was assumed that counselor professional identity would begin in the training programs and increase as students progressed through their master's degree programs. However, this finding suggests that students are entering their graduate programs with a strong professional identity as a counselor. This finding brings up the question of whether the profession of counseling was chosen because of its philosophy by some students. This finding supports the literature in its assertion that counselors believe that problems client experience are often developmental in nature and that wellness is a goal of professional counseling (Ivey & Van Hesteren, 1990; Ivey & Regazzio-Digiglio, 1991; McAuliffe & Eriksen, 1999; Myers, 1992; Pistole & Roberts, 2002; Remley, 1991). The two remaining components of the counseling philosophy (prevention of emotional and mental problems and empowerment of clients) also seem to be accepted widely among the counseling master's degree students in training programs. This finding supports the literature which includes prevention and empowerment in the counseling

philosophy (McWhirter, 1991; Myers, 1992; Pistole & Roberts, 2002; Remley, 1992; Remley & Herlihy, 2007). There is also a consistent call in the literature for professional counseling to return to its developmental roots (Gale & Austin, 2003; Hansen, 2003; McAuliffe & Eriksen, 1999). The results of this study suggest that counseling master's degree students actually embrace and endorse the fundamental roots of the counseling profession (the developmental nature of problems, wellness, prevention, and client empowerment).

The Professional Engagement scale measured the engagement behaviors of research participation, professional membership, conference attendance and presentations, and advocacy. It was suggested in the literature that these behaviors are a part of professional identity. Feit and Lloyd (1990) and Van Zandt (1990) categorized engagement behaviors as professional identity and professionalism. Spurill and Benshoff (1996) identified the inclusion of expected professional behaviors in counseling curricula as a duty of counselor educators. The range of scores on this scale (0 - 297) suggests that engagement behaviors are occurring on the parts of counseling master's degree students in training programs. To what extent students are professionally engaged is still unknown. It is interesting that the mode for the Professional Engagement scale was 0 (indicating that the most frequent score of counseling master's degree students indicated that they are not engaged in professional activities at all). However, only 42 of the 1,011 respondents had scores of 0. This indicates that some degree of engagement behavior is taking place with most counseling master's degree students. It is unknown whether counseling graduate students are aware that professional engagement is expected of them once they enter training programs to become professional counselors.

The majority of students in this study who reported having no paid counselingrelated experience also had the lowest professional engagement score (Table 2). This is expected as Gray (2000) and LeFleur (2007) reported professional identity is linked to relationships with other professional counselors. It was expected that having no professional experience would result in less reported engagement behavior. Professional engagement scores increased with the amount of experience reported. Gray and LeFleur studied professional counselors who had already completed their training. If their assertion of building professional identity through relationships is applied to the training programs, then counselors - in - training counselors-in-training build their professional identity through relationships with the counselor educators in their training programs. Assuming that full-time students have more exposure to their program environment, it would be logical that engagement scores would reflect this exposure. This seems to be a possibility as full- time students reported more professional engagement than part-time students. Additionally, students who had been in their programs longer, thus having an opportunity to develop relationships with their professors, reported more engagement behaviors. It is not surprising that the mean scores for Professional Engagement increased progressively across student level. This finding supports the notion that professional identity is built on relationships with like-minded professionals. The results of this study illustrate a degree of awareness of professional engagement in the training programs, but it does not shed light on the degree to which professional engagement is considered important.

The Knowledge Sources section of this study's survey instrument was exploratory in nature and asked respondents to identify where they thought they best learned about

three separate areas of counseling. The three areas were licensing and credentialing, professional organizations, and the counseling philosophy. Responses were categorized into sources internal to the training program, sources external to the training program, and no source as the information had not been learned. Students were also given a choice to report that they did not recall where they learned about these areas. The majority of the student participants in this study reported learning about all three areas from sources internal to their training programs. This supports the indication that the counseling philosophy is being presented by counseling professors as the accepted ideology for the counseling profession. As 91% of students reported learning about professional organizations from internal sources, this may suggest that information about professional engagement institutions, such as, the American Counseling Association, do occupy a place of some prominence in the training programs. Again, to what degree students are being taught about professional organizations is still unknown. Only 81.1% of the student study participants reported learning about licensure and credentialing from sources internal to their training program. This result is noteworthy. Licensure and credentialing for professional counselors have been identified in the literature as important aspects of professional identity. Spurill and Benshoff (1996) considered attaining licensure is one of the important professional behaviors that should be included in training programs. Inconsistencies surrounding licensure requirements and the lack of pursuit of licensure by professional counselors have been identified as obstacles to the development of a professional identity for counseling by Gale and Austin (2003). The inclusion of licensure and credentialing as an important part of the preparation of professional counselors is well documented in the literature (Feit and Lloyd, 1990; Gale & Austin,

2003; LeFleur, 2007; Spruill & Benshoff, 1996; VanZandt 1990; Zimpfer et al., 1992). Because it is so important that counseling students be taught about certification and licensure, it is disturbing to see that nearly 13 % of the students in this study attributed learning about licensure and credentialing to sources external to their training programs.

The findings in the Knowledge Sources section of this study provide a glimpse into what information is being transmitted in training programs. A more in-depth investigation is necessary to determine the level of awareness of counselors-in-training as to the expected behaviors of a professionally engaged counselor.

The professional literature has noted the need for a universally accepted definition of counselor professional identity. As the counseling profession has been struggling to articulate its distinctiveness among the other mental health professions, this study suggests that progress has been made toward that end. The overwhelming agreement with the counseling philosophy and agreement with Gray's beliefs about the counseling profession among this study's participants suggests that a collective ideology is being presented in counselor training programs across the United States. This ideology appears to include the counseling philosophy and professional engagement, as well as, the additional criteria laid out by Gray of licensing and credentialing, CACREP accreditation, and pride in the profession. It is important to note that the sample for this study was only drawn from master's level programs that had CACREP accreditation which represents the highest standards of training for the counseling profession. This may explain the overwhelmingly high scores for counseling philosophy and beliefs about the counseling profession, as well as, the unexpected level of professional engagement reported by the students.

#### **Implications for Counselor Education**

Further research is needed to delineate the construct of professional identity. The development of instrumentation that can aid in the isolation of components of professional identity would be helpful. A factor analysis of the instrumentation for this study would be appropriate. Further study on the presentation of professionalism in the counseling training programs would also enhance knowledge of how professional identity is being developed. It is not enough to know that professional engagement behaviors are present in the programs, an exploration of the perceptions of counselors-in-training as to the behavioral expectations for them as they enter the field after completing their training is needed. Another area for examination is the relationship between the students and the counselor educators in their respective programs.

This study has significance for counselor education and the counseling profession. The findings in this study indicate that there is a developing ideology for the counseling profession, albeit incomplete. The overwhelming agreement of this study's participants with the counseling philosophy and the implication that this philosophy is being widely presented in the training programs suggests that the components of development, wellness, prevention, and empowerment may be the foundation on which professional counseling is built. Professional engagement behaviors are also strongly present in the training programs. The overwhelming agreement with the Beliefs about the Counseling Profession scale suggests that Gray has identified other possible components of professional identity. This study indicates that progress toward a definitive definition of professional identity is being made as is evidenced by the uniformity with which the learning sources for the counseling philosophy and professional counseling organizations

were identified as internal to the training programs. This is an indicator of cohesion for the profession.

For counselor educators, the findings show that students are being exposed to the counseling philosophy and professional organizations with consistency across the training programs. A need to be more diligent about licensure and credentialing options for professional counselors may be needed.

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# APPENDIX A

## COUNSELING GRADUATE STUDENT SURVEY

Section 1. Participant	Information	1						
1. What is your year o	of birth? (e	x. 1976)	_					
2. Gender:Fema	le	Male	Transgender					
3. What is your race/e	ethnicity?							
African Ame	•	White/Europ	ean American					
Asian Americ	can	Biracial/Mul						
Hispanic		Pacific Islander						
Native Amer	ican	<del></del>						
Other (please	specify) _							
4. What was your bac	helor's dec	ree maior?						
Human Servi		Psychology						
Social Work		Sociology						
Education		Business						
Other (please	specify)							
counseling-related job		k experience have	e you had as a counselor or in a					
None								
Less than a y								
_A year or mo								
If a year or mor	e, how mar	y years?						
7. Are you enrolled?								
Part-time (1	or 2 course	s)						
Full-time (3 o	courses or r	nore)						
If you are not co	arrently enr	olled, mark wheth	er you were part-time or full-time the					
last semester you were	enrolled.							
8. What is your conce	ntration an	rea?						
School Coun	seling							
College Cour	-	lent Affairs						

Community Counseling
Gerontological Counseling  Mental Health Counseling
Marriage and Family Counseling
Undecided
Other (please specify)
9. How many courses have you COMPLETED?0 - 3 courses
4 or more courses
10. Are you CURRENTLY enrolled in practicum or internship?
Yes
No
Section 2. Beliefs About Counseling
Indicate your level of disagreement or agreement with each statement below.
Strongly DisagreeStrongly Agree
Strongly DisagreeStrongly Agree 1 2 3 4 5 6
1. A counselor's role is to educate clients about dealing with future life stressors.
2. Clients cannot be trusted to make important life decisions on their own.
3. Guiding a client to achieve balance in all aspects of life is an important part of counseling.
4. Effective counselors should focus only on the problems clients present.
5. Including spiritual concerns in counseling is inappropriate.
6. It is important for counselors to pursue a long term relationship with clients.
7. Client issues can be viewed as natural phases of change across the lifespan.
8. Addressing the mind-body-spirit connection is preferable in counseling.
9. After completing counseling, clients need to return to counseling each time the same stressors reappear.
10. Feeling sad is a common response to the death of a loved one.
11. A goal of counseling is for clients to develop their ability to make their own choices.

- 12. Counselors assist clients to identify available resources.
- 13. Client empowerment is an important aspect of counseling.
- 14. Counselors build on client's strengths.
- 15. It is unusual for adolescents to challenge authority during this life stage.
- 16. Counselors help clients advocate for themselves.
- 17. Counselors perceive psychoeducation to be ineffective when working with clients.
- 18. Clients should depend on their counselors throughout their lifespan.

Section 3. Additional Beliefs About Counseling

Indicate your level of disagreement or agreement with each statement below.

Strongly Disagree			Stron	gly Agree
1	2	3	4	5

- 1. Counselors should be active members of the American Counseling Association.
- 2. The counseling profession is best described as a profession that is very similar to the profession of psychology and social work.
- 3. It is important for counselors to become licensed by their state even if their job does not require that they become licensed.
- 4. It would be best if all counseling graduate programs were CACREP-accredited or CORE-accredited.
- 5. It is acceptable for counselors to use titles such as "therapist," psychotherapist, "human development professional," or "mental health professional," instead of the title, "counselor."
- 6. Counselors should hold graduate degrees from academic programs in "counselor education," or "counseling" as opposed to holding graduate degrees from academic programs in "psychology."
- 7. It is appropriate for counselors-in-training to receive their clinical supervision from related professionals including psychologists, social workers, psychiatrists, or psychiatric nurses.

- 8. Counselors who do not attend professional conferences and professional development workshops on a regular basis are acting in an unprofessional manner.
- 9. All counselors should become certified by the National Board of Certified Counselors (NBCC) or the Council on Rehabilitation Counselor Certification (CRCC).
- 10. Counselors should more strongly identify with their counseling specialty area (such as rehabilitation, marriage and family, school, or career) rather than with the overall profession of counseling.
- 11. Counselors should be actively involved in promoting the counseling profession through educating the general public, administrators, or legislators regarding the positive contributions of counselors.
- 12. Psychologists are generally better prepared than counselors for positions in the field of mental health.
- 13. Determining whether clients have specific emotional or mental disorders is the major focus of the counseling process.
- 14. Counselors should feel pride in having chosen to become a counselor instead of having chosen to become a psychologist, social worker, psychiatrist, or psychiatric nurse.

Section 4. Knowledge Sources

Please choose the **BEST** response for you.

1. I learned about c	redentialing (e.g.,	, licensure,	certification)	for prof	essional
counselors from					

counselors from
Course I am taking or have already completed.
Faculty member in whose course I was not enrolled.
Another counseling master's student in my program.
A doctoral student in my program.
Professional counselor not associated with my university.
Through my own research for school or clients.
I haven't learned about this.
I don't remember where I learned this.
Other (please specify)
2. I learned about professional counseling associations (e.g., American Counseling
Association, state counseling association) from
Course I am taking or have already completed.
Faculty member in whose course I was not enrolled.
Another counseling master's student in my program.

A doctoral student in my program.
Professional counselor not associated with my university.
Through my own research for school or clients.
I haven't learned about this.
I don't remember where I learned this.
Other (please specify)
2. I be a second about the convention while combar (e.g., developmental fearer wellmage
3. I learned about the counseling philosophy (e.g., developmental focus, wellness
orientation, prevention, empowerment) from
Course I am taking or have already completed.
Faculty member in whose course I was not enrolled.
Another counseling master's student in my program.
A doctoral student in my program.  Professional counselor not associated with my university.
Through my own research for school or clients.
I haven't learned about this.
I don't remember where I learned this.
Other (please specify)
Section 5. Professional Engagement
1. I am a member of (please check all that apply)
ACA (American Counseling Association)
ASCA (American School Counselor Association)
AMHCA (American Mental Health Counselors Association)
ARCA (American Rehabilitation Counseling Association)
IAMFC (International Association of Marriage and Family Counselors)
IAAOC (International Association of Addictions and Offender Counselors)
CSI (Chi Sigma Iota)
My state counseling association and its divisions
My local counseling association
I am not a member of any counseling organization
Other professional associations (please specify)
2. Are you an officer in any of the counseling associations mentioned above?
Yes
No
Not applicable
3. Are you a committee member of any of the organizations mentioned above?
Yes
No
Not applicable
4. Have you ever volunteered for service to any of the organizations mentioned above?

Y	Yes Tes
N	Jo
_	u ever attended a professional counseling conference?
	Zes .
N	lo
6. If you at	iswered yes, how many conferences did you attend at each of these levels?
	Jational
	Legional (Multi-state)
	tate
	ocal
	lot applicable
	u ever presented at a professional counseling conference?
	es La
N	
8. If you ar	nswered yes, how many presentations did you make at each of these
levels?	Francisco (1.1)
N	lational
-R	egional (Multi-state)
	tate
L	ocal
N	lot applicable
0 D 1	
_	nave any experience in counseling research?
$-\frac{1}{N}$	
10. If you a	answered yes, in what way were you involved in research? (please check
all that app	oly)
I	was a research participant.
I	assisted a professor or other person with his/her research project.
I	was part of a research team.
I	conducted a research project on my own.
_N	lot applicable
11 II	
-	ou had a conversation with another mental health professional (not a
profession	about how professional counselors differ from other mental health
hi oressions	Yes
	1es No
	No Don't Know
	- VAL T ARMO 11

•	about how professional counselors differ from other mental health s?
•	Yes
	No
	Don't Know
government	ever sent a communication (letter, e-mail, phone call, etc.) to a office about a professional counseling issue?
Ye	S
No	
Do:	n't Know
14. Have you	ever signed a petition about a professional counseling issue?
	Yes
	No
	Don't Know
	ever encouraged another person to join a professional counseling
organization	
	_Yes
	No Don't Know
	Don't Know
counselor?	ever encouraged someone to consider becoming a professional
Ye	
No	
Do:	n't Know
THAN	K YOU VERY MUCH FOR COMPLETING THIS SURVEY FORM!

## APPENDIX B

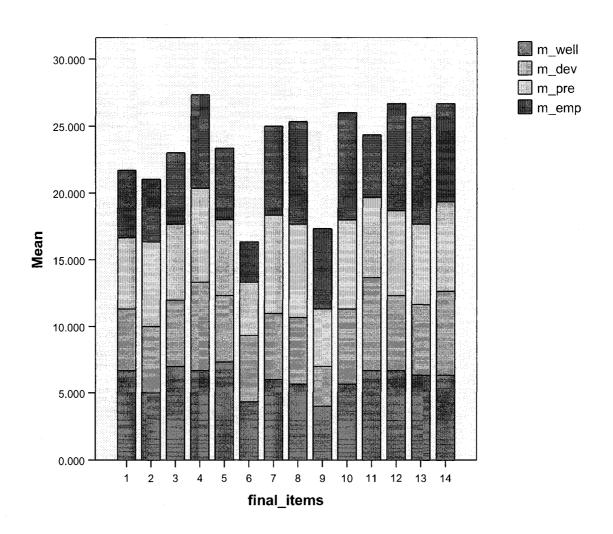
## DATA GRID FOR FIRST EXPERT REVIEW

Guide to Grid: 1 wellness refers to reviewer 1's ratings on the component of wellness for potential survey items. Reviewer 1 rated item 1 as a 7; item 2 as a 0. This means that reviewer 1 thought that item 1 strongly reflected the component of wellness and that item 2 did not reflect wellness at all. A "." means the reviewer did not rate the item.

Reviewer																
Number +	Ite	Ite	Ite	Ite	Ite	T4 o	Ite	Ite	Tto	Teo	T4 o	T4 o	T4 a	T4 o	Tao	T4 o
Compon		m	m	m	m	Ite m	m		Ite	Ite	Ite	Ite	Ite	Ite	Ite	Ite
ent	m 1	2	3	4	5	6	7	m 8	m 9	m 10	m 11	m 12	m 13	m 14	m 15	m 16
1	1 .		3	. 7	5	U	,	G		10	11	12	13	17	13	10
Wellness	7	0	3	4	7	7	0	3	4	7	7	3	8	10	4	2
1Develop	,	Ŭ	J	•	,	,	Ŭ		•	,	,	2	Ü	10	•	_
ment	2	0	4	7	3	2	0	4	7	3	2	7	8	6	3	6
1Preventi																
on	4	0	7	0	0	4	0	7	0	0	2	5	8	5	4	2
1Empow																
erment	2	0	2	2	2	2	0	2	2	2	2	4	8	4	9	3
2																
Wellness	7	2	6	5	3	7	2	6	5	3	7	4	6	7	6	6
2																
Develop																
ment	6	0	5	7	4	6	0	5	7	4	5	4	6	4	4	4
2																
Preventio																
n	6	0	6	5	4	6	0	6	5	4	5	0	7	7	7	5
2																
Empower	_	_		_	_	_	_		_		_		_	_		
ment	7	2	6	6	3	7	2	6	6	3	5	٠	7	7	7	1
3		•	_	_	_	_			_	_	•	^	_	_	_	_
Wellness	6	0	6	6	7	7	•	•	7	7	0	0	6	5	2	5
3																
Develop	_	0	,	,	7	7			7	7	0	0	_	_	2	_
ment	6	0	6	6	7	7	•	•	7	7	0	0	6	5	2	5
3 Preventio																
	6	0	6	6	7	7			7	7	0	6	6	5	2	5
n 3	U	U	O	O	/	/	•	•	/	/	U	O	O	3	2	3
5 Empower																
ment	6	0	6	6	7	7			7	7	0	0	6	5	2	5
ment	U	U	U	U	/	/		•	/	/	U	U	U	5	4	5

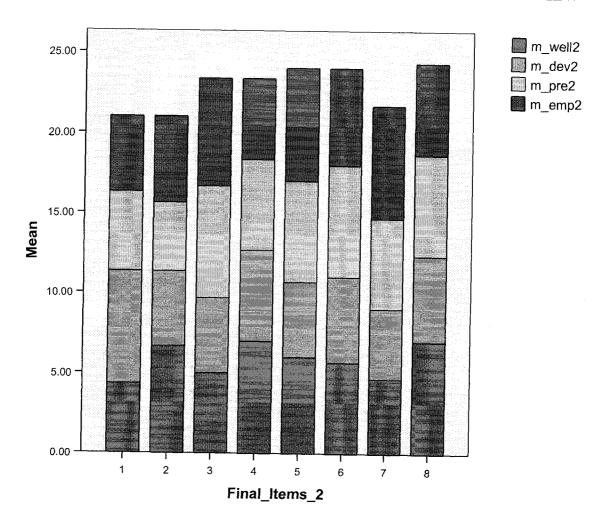
Reviewer																
Number																
+	Ite	Ite	Ite	Ite	Ite	Ite	Ite	Ite	Ite	Ite	Ite	Ite	Ite	Ite	Ite	Ite
Compone	m	m	m	m	m	m	m	m	m	m	m	m	m	m	m	m
nt	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32
1																
Wellness	0	4	4	0	10	7	3	7	7	6	0	6	6	5	0	3
1Develop																
ment	0	3	4	0	6	7	3	0	10	7	0	4	3	7	0	5
1Preventi																
on	0	8	7	-, 0	3	7	6	4	6	10	0	7	4	6	0	0
1Empow																
erment	2	6	9	0	0	2	10	3	2	3	0	10	10	8	0	0
2																
Wellness	2	7	6	7	7	5	7	4	6	6	0	7	6	7	٠	3
2																
Develop																
ment	7	5	4	5	7	6	7	7	4	4	0	6	6	5	0	2
2																
Preventio																
n	6	7	7	6	4	5	7	5	5	7	1	5	77	7	0	4
2																
Empower																
ment	1	7	7	7	7	6	7	7	5	6	0	7	7	7	0	1
3		_					_	_	_				_			
Wellness	5	7	7	0	6	0	7	6	7	0	0	7	7	7	0	0
3																
Develop																
ment	5	7	7	0	6	0	7	6	7	0	0	7	7	7	0	•
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Preventio																
n	5	7	7	0	6	0	7	6	7	0	0	7	7	7	0	•
3																
Empower	_	_	_	_	_	_	_	_	_	_	_	_	_	_		
ment	5	7	7	0	6	0	7	6	7	0	0	7	7	7	0	0

# APPENDIX C INTERRELATEDNESS OF FINAL ITEMS FROM FIRST EXPERT REVIEW



APPENDIX D

INTERRELATEDNESS OF FINAL ITEMS FROM SECOND EXPERT REVIEW



#### APPENDIX E

#### **HUMAN SUBJECTS REVIEW BOARD APPROVAL**

Molly H Duggan/ELC/EDUC/O DU 04/19/2008 10:34 AM

To Theodore P Remley Jr/ELC/EDUC/ODU@ODU

cc Molly H Duggan/ELC/EDUC/ODU@ODU

Subject HSR04.06.REMLEY-Puglia:

NOTIFICATION OF EXEMPT STATUS

This letter serves as official notice that your research project (HSR04.06) entitled "The Professional Identity of Counseling Students in Master's Level CACREP-Accredited Programs" has been found exempt by the Old Dominion University Darden College of Education's Human Subject Research Committee. Research may begin. By acting as the responsible project investigator of this research project, Ted Remley has agreed to conduct a responsible and ethical research investigation and to notify the Old Dominion University Darden College of Education Human Subject Research committee of any changes that may occur during the course of the investigation. If changes occur that cause a need for the Old Dominion University Institutional Review Board to review the research investigation due to change in exempt status or Federal funding, it is your responsibility as the responsible project investigator to notify that committee immediately.

Good luck with your research investigation. Please deliver a signed, hard copy of your application to the Committee Chair at your earliest convenience.

Sincerely,

Molly H. Duggan Chair, Human Subjects Research Committee Darden College of Education

Molly H. Duggan, PhD Assistant Professor Community College Leadership Program Educational Leadership & Counseling Old Dominion University Room 166-5, Education Building Norfolk, VA 23529-0157

URL: <a href="http://www.odu.edu/~mduggan">http://www.odu.edu/~mduggan</a>
Office phone: (757) 683-3165

fax: (757) 683-5756

### **APPENDIX F**

## INVITATIONS TO DISSEMINATE AND PARTICIPATE

## PLEASE FORWARD THIS MESSAGE TO YOUR MASTER'S DEGREE STUDENTS

Dear Counselor Educator:

I am writing to request your help in asking your master's level students to complete a survey that is a part of my dissertation research study. My research is on the topic of counselor professional identity. I am a Ph.D. degree candidate at Old Dominion University in Norfolk, Virginia. My dissertation chair is Dr. Ted Remley, <a href="mailto:tremley@odu.edu">tremley@odu.edu</a> and my e-mail address is <a href="mailto:bpuglia@odu.edu">bpuglia@odu.edu</a> if you have any questions or comments about my study. Dr. Ed Neukrug and Dr. Danica Hays are also serving on my dissertation committee.

For your convenience, I have included a message below to your students requesting their participation. Please forward this message to all of your current master's degree students.

Appreciatively,

Bianca Puglia, LPC, NCC Ph.D. Candidate Old Dominion University Norfolk, Virginia

\*

Dear Counseling Master's Degree Student:

Your participation is requested in a survey concerning the training of counselors. This survey will take you only a short time to complete, about 10 minutes or so. Your time and participation will be greatly appreciated. Your responses will be confidential and you or your university will not be identified in the data analysis or when the results are reported. Please contact me at <a href="mailto:bpuglia@odu.edu">bpuglia@odu.edu</a> if you have any questions. You may access the survey by clicking on the link below:

http://www.surveymonkey.com/s.aspx?sm=uO989U4PjVFHLWVb0xEtLA 3d 3d

Thank you!

Appreciatively,

Bianca Puglia, LPC, NCC Ph.D. Candidate Old Dominion University Norfolk, Virginia

## **APPENDIX G**

## SURVEY CLOSED MESSAGE

Thank you for attempting to participate in this study. The study is now closed. If you have any questions, please contact Bianca Puglia, doctoral Candidate at Old Dominion University. BPuglia@odu.edu

# **APPENDIX H**

## INFORMED CONSENT

## Informed Consent

This survey is intended for master's level students who are enrolled in a CACREP
counseling training program. There is no perceivable risk in participating in this study.
There is the consideration of the time it will take which is appreciated by the researcher.
By choosing "I agree," the participant is giving informed consent to participate in this
study.

I	agree
I	disagree

## VITA

## Bianca Puglia

Ph.D. Counseling, Old Dominion University, August, 2008 M.Ed. Counseling, University of New Orleans, December, 2001 B.A. French, University of New Orleans, May, 1994

Department of Educational Leadership & Counseling Old Dominion University 110 Education Building Norfolk, VA 23529

#### **Research Interests**

Professional Identity of Counselors Clinical supervision Counselors with Disabilities Play Therapy

## **Professional Experience**

Clinical Director – Voices For Children; New Orleans, LA. - Spring 2005 to Fall 2006 - This was a psychoeducational group program for children whose families were going through a divorce. The program was court mandated. Groups were held at the Contemporary Arts Center and were co-led by counselors and artists.

Partial Hospitalization Program Therapist – Center for Better Living. February 2002 to June 2004 - Group facilitator for clients considered seriously mentally ill. Specialized in the dual diagnosis group. Also worked individually with clients. Metairie, LA.

Outpatient Therapist – Center For Better Living. August 2003 – June 2004 - Met with clients in individual and group settings from the community. Metairie, LA.