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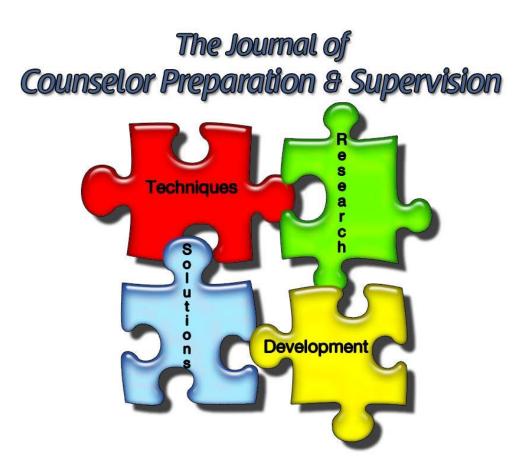
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The Journal of Counselor Preparation and Supervision Fall 2015 Full Issue

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Research. These articles focus on research (qualitative, quantitative, mixed) in counselor preparation, professional development, supervision, and professional practice.

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Editorial Note

We are excited to bring you the Fall 2015 issue of the Journal of Counselor Preparation and Supervision. This issue includes eight articles on a variety of topics. In counselor education, authors investigate counseling student perceptions of sexual violence (Kushmider, Beebe & Black), explore the dissertation process at CACREPaccredited doctoral programs (Borders, Wester, Flickling, & Adamson), conduct a gualitative study exploring Black students' preparation to counsel White clients (Haskins, Phelps & Crowell), survey pre-tenured counselor educators to determine the prevalence of and barriers to providing direct counseling services (Reljic, Lindsey & Protivnak). Focusing on counselor supervision, Shurts describes how to integrate postmodernism into counselor supervision and Felton, Morgan, and Bruce explore supervisors' experiences in triadic supervision. Adding to the school counseling literature, Ockerman, Patrikakou, and Hollenbeck focus on school counselors' confidence in providing Response to Intervention and Perusse, Poynton, Parzych and Goodnough compare current a survey of school counseling programs with a survey from 2001 and discuss how school counseling programs have changed. All of these manuscripts add significant information to the counseling, counselor educator, and supervision fields.

As editor, I thank all of the dedicated reviewers who worked quickly and diligently to produce high quality manuscript for JCPS. I also recognize my Associate Editor Jane Webber as she finishes her tenure with us. Jane worked tirelessly with the authors and manuscripts in this issue, she was a wonderful team member, and we will miss working with her. I want to also thank Editorial Assistant Ellery Parker who keeps me organized, and Graduate Assistants Lauren Spinella who spent many hours working on this issue, and Massiel Rosario who is our newest team member for her hard work. Additionally, I thank the NARACES Board for their continued support.



Edina Renfro-Michel, Editor

Rape Myth Acceptance: Implications for Counselor Education Programs

Kristin D. Kushmider, Jennifer E. Beebe, and Linda L. Black

Abstract

A sexually violent act or rape is committed every 1.9 minutes in the United States (USDJ, 2009, p.1). Blaming the rape victim for their perceived complicity is one component of the construct known as rape myth, a term identified by Burt (1980). This study explored and examined the perceptions, and understanding of sexual violence, rape, and rape myths by master's level counselors-in-training (n=5). Phenomenology and naturalistic inquiry guided the qualitative design and implementation. Suggestions for implementing rape education and training into counseling curriculums and clinical supervision are provided.

Keywords: Rape Myth, Counselors-in-training, Phenomenology, Counselor Education

Susan Brownmiller's groundbreaking work *Against Our Will: Men, Women, and Rape,* defined rape as a "conscious process of intimidation by which all men keep all women in a state of fear" (Brownmiller, 1975, p. 15). This provocative statement was made over 39 years ago, yet the crime is still prevalent today and the act of rape continues to be a process of violence and intimidation. Rape is defined nationally as "the penetration, no matter how slight, of the vagina or anus with any body part or object, or oral penetration by a sex organ of another person, without the consent of the victim" (Rape Abuse and Incest National Network [RAINN], 2014). It is reported that one rape or attempted rape occurs every 2 minutes (United States Department of Justice [USDJ], 2009, p. 1), and one out of six U.S. women have experienced an attempted or completed rape in their lifetime (RAINN, 2015). Due to the violent, sexual, and

personal nature of this crime, many misperceptions about rape and rape victims exist. In the early 1980's, Burt (1980) defined these misperceptions as rape myths.

Rape myths are beliefs held by many individuals within society that surround rape and sexual assault. Rape myths are untrue, can minimize the experience of rape, and are distinguished from rare situations in which the victim has fabricated details. These myths insinuate that victims are lying, imply a rape did not occur, or that the perpetrator was provoked (Franiuk, Seefelt, & Vandello, 2008). Other myths imply that the perpetrator could not control urges or that the victim deserved to be assaulted based on appearance, behavior, or style of dress (Edwards, Turchik, Dardis, Reynolds & Gidycz, 2011; Moor, 2007).

The uncritical acceptance of popular rape myths is a way for at-risk victims (i.e., women) to protect themselves from recognizing their own vulnerability to sexual assault, and for society to justify male sexual aggression against women (Edwards et al., 2011; Lonsway & Fitzgerald, 1994; Ryan, 2011). The same process also allows perpetrators to avoid responsibility for their actions (Burt, 1980; Edwards et al., 2011). Some popular rape myths may include suggestions that women want or deserve to be raped if they dress provocatively, that "no" really means "yes" (as if playing hard to get), or women who chose to drink alcohol and were raped should have engaged in more appropriate decision making (Women Against Violence Against Women [WAVAW], 2015).

Given the heinous nature of sexual violence, rape victims are three times more likely than the general population to suffer from depression, six times more likely to suffer from Post Traumatic Stress Disorder (PTSD), 13 times more likely to abuse alcohol, 26 times more likely to abuse drugs, and four times more likely to contemplate suicide (RAINN, 2015, Who are the Victims, \P 2). Given these statistics, it is likely that counselors will provide services to a client who has survived rape. In fact, Dye and Roth (1990) reported from a sample of therapists and mental health professionals, 93% have treated at least one client who had been sexually assaulted. According to Hensley (2002), many survivors may not seek treatment until symptoms become pervasive and counselors often do not receive formal training in treating symptoms of rape and sexual violence.

Victims of rape may turn to counseling professionals to address their emotional and mental health concerns. These victims are tremendously impacted by the quality of the responses and social reactions to their disclosure of rape from informal (family and friends) and formal (counseling professionals) sources (Ahrens, Cabral, & Abeling, 2009; Campbell, Ahrens, Sefl, Wasco, & Barnes, 2001; Filipas & Ullman, 2001; Golding, Siege, Sorenson, Burnam, & Stein, 1989). The purpose of this study was to identify rape myth acceptance among master's level counselors-in-training. The authors explored the phenomenological experiences of five master's level counselors-in-training including their perceptions and attitudes towards rape victims and the act of rape.

The authors recognize that men are also victims of sexual violence, however for the purpose of this study, we focus on female victims only. The terms survivor and victim are used interchangeably throughout this study. The authors recognize that many victims / survivors of rape identify as victims after the rape and as survivors as they begin their recovery process. We support that this identification is solely up to the victim / survivor.

Review of the Relevant Literature

Lonsway and Fitzgerald (1994) define rape myths as "attitudes and beliefs that are generally false but are widely and persistently held, and that serve to deny and justify male sexual aggression against women" (p. 134). This definition highlights the insidious nature of a process that is generally outside the awareness of most individuals and yet is a continual source of pain and confusion for survivors of sexual aggression. Rape myths come in many forms and are strongly connected to one's beliefs about sex role stereotyping, distrust of the opposite sex, sexist attitudes, acceptance of interpersonal violence (Burt, 1980; Chapleau, Oswald, & Russell, 2007), perceived social competence (Gamper, 2004), and false beliefs about the act of rape, victims, and perpetrators (Hammond, Berry & Rodriguez, 2011). Belief in rape myths is related to an individual's tolerance of interpersonal violence and violence towards women, a belief in traditional and restrictive gender roles for women, distrust of women, and men's hostile views towards women (Aronowitz, Lambert & Davidoff, 2012; Burt, 1980; Edwards et al., 2011; Lonsway & Fitzgerald, 1995). Acceptance of rape myths by society perpetuates the cycle of sexual violence against women.

Social Support Responses

Survivors of rape experience a wide range of feelings in response to the traumatic event. The most common feelings reported are fear, shame, guilt, anger, denial, depression, and other typical responses to trauma such as PTSD (Aronowitz, et al., 2012; Moor, 2007). Survivors often develop symptoms of depression, phobias, and sexual dysfunction, and may withdraw socially. Many survivors blame themselves for the assault, feel alienated from others, and become angry and confused about their intimate relationships (Dye & Roth, 1990; McLindon & Harms, 2011; Moor, 2007). Survivors report acceptance, support, empathy, and active listening as the most helpful reactions they receive from those to whom they disclose. Survivors acknowledge a greater sense of healing and lower PTSD and depressive symptoms when they have someone in their social network that believes their accounts of the assault (Campbell et al., 2001; Filipas & Ullman, 2001).

Most survivors will only tell a friend or family member about the assault, fewer will seek help from counselors, and an even smaller percentage will report to law enforcement. Almost two-thirds (59.3%) of rape victims report telling only a family member or close friend about the assault. Mental health professionals are the second most frequently told source (16.1%). Survivors who report to mental health professionals find them to be helpful only 70.1% of the time (Golding et al., 1989). A study by Campbell and Raja (1999) found that 58% of the mental health professionals who participated in the study believed that mental health practitioners engage in harmful therapeutic practices towards victims of rape and sexual assault. The most harmful and detrimental responses are direct and indirect responses that communicate blame towards the victim (Buddie & Miller, 2001; Filipas & Ullman, 2001).

Social responses that endorse rape myths could be perceived as victim blaming and may include responses that imply women are somehow responsible for the rape because of the way they dress or the behaviors they engage in, such as provocative dress or their level of sexual experience (White & Robinson Kurpius, 1999). Social reactions that are perceived as hurtful are also associated with increased distress. Negative reactions include calling the victim "irresponsible" and patronizing the victim (Campbell et al., 2001). Statements such as these make overcoming trauma more difficult and can contribute to poor mental health. Survivors of rape suffer the trauma of the assault itself and also from the effects of negative stereotypes, stigmas, and myths perpetuated by society about rape and victims of rape (Dye & Roth, 1990).

Rape Myth Acceptance and Counselors

McLindon and Harms (2011) noted that research which explores the beliefs of mental health workers and their understanding of the relationship between sexual assault and mental health is limited. Mental health professionals are more likely to demonstrate positive attitudes toward rape victims than the general public (Shechory & Idisis, 2006); however, these professionals have been found to hold negative, judgmental attitudes toward sexual assault victims (Dye & Roth, 1990; White & Robinson Kurpius, 1999). In an earlier study by White & Robinson Kurpius (1999), findings revealed that male mental health professionals hold more negative attitudes about rape victims than their female peers. They also concluded that male counselor trainees accept rape myths to a greater extent than their female counterparts especially when those male trainees had never counseled clients who had been sexually assaulted.

Counselors who demonstrate biased or judgmental speech or who experience strong emotional reactions to clients who have been raped may unwittingly be engaging rape myths. Negative or victim blaming responses may interfere with client progress and recovery during the counseling process. It is essential for counselors who work with survivors of rape to carefully examine and reflect upon their attitudes and experiences related to rape so they may help clients understand and address their own guilt or self- blaming responses to the assault (Dye & Roth, 1990; Kassing & Prieto, 2003). The purpose of the present study was to understand the individual experiences and meanings constructed among counselors in training regarding the social phenomena known as rape myths. The researchers identified four guiding research questions (a) What are participants' perceptions and beliefs related to sexual violence and or rape? This included discussions about the causation and prevalence of sexual violence, explanations of its causation (facts and myths), and impact on survivors; (b) What are participants' beliefs regarding the origin of these facts and myths? (c) What are participants' perceptions, expectations and or experiences treating survivors of rape? (d) What do participants need from their training programs to work effectively with survivors of rape?

Methods

Phenomenology and naturalistic inquiry guided the qualitative design and implementation of this study. From a phenomenological perspective, knowledge about any complex phenomenon is socially constructed, subjective, and strongly influenced by social, cultural, and historical contexts (Boss, Dahl, & Kaplan, 1996; Merriam, 2009). The authors were influenced by a feminist perspective and an understanding of privilege (McIntosh, 1988), oppression (Hanna, Talley, & Guindon, 2000; Merriam, 2009), and power dynamics (Merriam, 2009). This inquiry focused on the personal experiences of counselors-in-training as they relate to their beliefs, bias, knowledge, and perceived level of comfort concerning survivors of rape. Quantitative data was obtained through the use of the Rape Myth Acceptance Scale (Burt, 1980). This study adhered to the American Counseling Association Code of Ethics (ACA, 2014).

Role of the Researchers

Due to the nature of qualitative research and the potential for researcher bias to impact results, the researchers have chosen to share their background information (Merriam, 2009). The personal and professional experiences of the researchers have influenced their interest in the topic of rape myths among counseling trainees. The first author is a white female who has worked with survivors of sexual assault for over fifteen years. She was the director of a rape crisis center and became interested in this line of research and inquiry as a result of clients selfreporting negative counseling experiences within her community.

The second author is a white female counselor educator who worked with survivors of sexual assault for seven years. As a former professional school counselor, she had the opportunity to work with children, military families, and the community around issues of trauma. She became interested in this research as a result of clinical and supervision experiences.

The third author is a white female counselor educator with over 20 years experience providing counseling to clients who have experienced the trauma of sexual violence as children or adults. She has been a counselor educator for over 10 years and served as an auditor on this research study.

Participants

Five (n=5) master's students drawn from a convenience sample of university students that were purposefully selected from a counseling program sample of 18 master's level counseling students served as participants for this study. Participants were solicited on a voluntary and uncompensated basis. Women constituted N=3 of the sample population and males constituted N=2 of the sample population. N=4 participants were Caucasian and N=1 identified as Latino or Mexican American. Criteria for inclusion in the study included: participants who were in good standing in a master's of arts (or education) counseling program accredited by the Council for Accreditation of Counseling and Related Educational Programs (CACREP) within the Rocky Mountain region and current enrollment in a clinical practicum class.

Data Sources

Instrument. The *Rape Myth Acceptance Scale* (RMA) (Burt, 1980) is designed to measure the acceptance of rape myths and attitudes towards rape. The scale consists of 19 items assessed with a 7-point Likert scale; the items rate from strongly agree to strongly disagree. The scale has a reported Cronbach's alpha coefficient of (.875) on the final scale (Burt, 1980; Lonsway & Fitzgerald, 1994). Individuals' scores were drawn from the mean of their responses across all scale items. Thus, a score of 7 on the scale indicates no rape myth acceptance, while a score of 1 indicates strong agreement with all rape myths (Dye & Roth, 1990). The RMA scale was primarily used as a form of triangulation, which provided additional data and methods to

explain the emerging phenomena and establish validity for the qualitative results. No individual level data from the RMA scale is reported (Merriam, 2009).

Semi-structured interviews. In addition to the four research questions, participants were also asked to respond to 10 structured questions or statements regarding their beliefs and experiences with sexual violence and rape. The following questions formed the basis of the semi-structured interview: (a) What is your knowledge or experience of sexual violence? (b) What did you hear growing up about women who were raped or sexually assaulted? (c) In your opinion, how or from where did these beliefs originate? (d) As of late, there have been high profile cases in the media, what are your thoughts about these cases and their outcomes? (e) Describe any situations, circumstances or events where you believe a woman is responsible for rape. (f) Describe any situations, circumstances or events where you believe a perpetrator would be responsible for rape. (g) Describe your beliefs about rape within marital or committed relationships. (h) Describe your thoughts and feelings regarding the term date rape. (i) Describe gender roles for men and women in our society. (j) Tell me what you know and believe about stranger or non-acquaintance rape.

Vignettes. In addition to the 10 questions participants were asked to verbally discuss their responses to two vignettes. The first vignette involved a stranger rape scenario and the second vignette described an acquaintance rape scenario. Participants were read the two vignettes and then were asked to verbally discuss their responses about any similarities and differences between a stranger and acquaintance rape.

Procedures

Efforts to control bias. Prior to interviewing participants, the researchers documented their personal assumptions, biases and beliefs about possible participant responses in an epoch to

control for bias. The epoch also served as a check against unintended bias during the coding and analysis of participant interviews. Accuracy of details and information and control of personal bias throughout was insured by use of an auditor, an audit trail and detailed field notes. Upon approval from the Institutional Review Board, the first and second authors contacted practicum students to recruit voluntary participants. As a result, 5 out of 18 voluntarily agreed to participate and were provided with informed consent and a pseudonym to insure confidentiality. The research team was comprised of three counselor educators. The first and second authors made initial contact with participants to schedule an interview time; the third author had no contact with participants.

At the initial meeting participants were asked to complete the RMA scale (Burt, 1980). The RMA scale was used to quantify participants' acceptance of rape myths and provide a point of triangulation with respect to the qualitative data derived from the semi-structured interviews. Interviews were conducted during the fall semester with the member checking follow-up interviews completed in the spring. Each interview included verbal responses to the semi-structured interview questions and dialogue about the scenarios described in the vignettes. Each of the five interviews lasted on average 45 minutes with the follow-up interviews lasting from 30 minutes to one hour.

In order to provide interviewer congruence, the first and second author conducted the first interview conjointly. Either the first or second author conducted the remaining interviews. The third author served as a research advisor and auditor and had no contact with participants—however, all three authors reviewed the interviews to identify major themes and findings. The individual interviews were audiotaped and then transcribed verbatim. Four of the five interviews

were transcribed by the first and second authors, and one was transcribed by a professional transcriptionist.

Data Analysis

Formal analysis of the data began with the research team's collaborative use of an open coding process in order to identify themes that emerged from the first two transcripts. Participant statements were reviewed then grouped into 15 overarching categories. The research team reviewed and discussed the content and meaning of each statement. Through this process, thematic categories were collapsed and reformulated utilizing open coding procedures (Creswell, 2007) to insure that each member of the research team had a guide for coding the remaining transcripts. After identifying codes, the first and second authors conducted member checks and follow up interviews. Participants were asked to evaluate the accuracy of transcripts and the general themes applied in an individual meeting with the first or second author. There were no corrections or deletions made during follow up interviews. The auditor reviewed the transcripts, codes and statements from the member checking process; and after this process, the research team met a final time to solidify general themes.

Results

All participants attempted to complete the RMA scale; however, only three out of five (60%) completed all 19 items. It is unknown why the other two participants did not fully complete the RMA scale. The three participants (n=3; 2 males and 1 female) who completed the scale in its entirety appeared to have low overt acceptance of rape myths. Each participant scored between 20 and 25 out of a possible 140 total where M=23. A high score of 140 indicates strong acceptance of rape myths. There was no way to control for the influence of social

desirability; therefore, these scores were used solely for the purpose of triangulation of the interview and member checking of data.

Themes

Initially, there were 15 themes present in the interviews. Six recurring themes were identified. The six themes included contradiction, silence, feelings of professional helplessness, gender expectations, victims' using poor judgment, and not calling rape, rape.

Contradiction. All participants engaged in some form of contradictory or discordant speech. These contradictions were typically outside the awareness of the participants at the time of the interview. These contradictions came in many forms, such as, the initial denial of any knowledge of sexually violent events and later in the interview subsequent acknowledgment of an emergent realization that particular events were sexually violent. For example, a female participant recounted, "My knowledge is, mostly probably from movies, books, television, a few acquaintances, [with] very little personal experiences [with sexual violence] . . . which is weird because my grandfather (step-grandfather), was a sex addict and actively molested my sister, and it was not discussed."

Participants overtly rejected rape myth beliefs (RMA scale) while simultaneously and seemingly unwittingly relating stories, demonstrating acceptance of such beliefs. A male participant, when asked about his knowledge of sexual violence shared,

experience, I don't think any [then later stated] I was seeing this girl and her friend took a, brought a couple of guys 3 or 4, I don't know back to her dorm room and she ended up getting raped by all four of them ... I was scared to death!

He continued by stating, "...so even though rape was not brought up [in the home], I was exposed to domestic violence. Later in my teen years, I heard of an aunt who was raped by her

husband." This participant initially denied any personal experiences or knowledge of rape or sexual violence then later recounted several sexually violent events.

A female participant, who disclosed that she herself had been a victim of rape, later went on to contradict herself when she discussed two popular media cases. She stated, "I actually think she set him up, I think she was going for kicks and then she was going for money ... I know she got badly traumatized." These contradictions may perpetuate acceptance of rape myth, particularly that a woman's behavior contributes to her victimization or that women often lie about rape for revenge or financial gain.

Silence. In an effort to understand the origins of rape myths, participants were asked to describe what they heard about rape and rape victims and to identify the origins of those beliefs. Participants disclosed that rape wasn't spoken of in the home, was a family secret, was too taboo a topic, or was affected by religious values and cultural perspectives. Out of respect for family and authority, participants believed they did not have permission to question family and religious norms about sexual violence. It appeared that participants were responding to the institutional, cultural, familial and personal unspoken rules to not acknowledge or discuss sexual matters, thus silencing them. For example, one participant disclosed,

... I don't think it was talked about while I was growing up and where I grew up it wasn't a big problem. I could walk around the streets of my town at midnight and be safe [then]

I was raped when I was 17 ... um, so probably at that point it became very real to me. Clearly the culture of silence and perceived safety was shattered by a violent personal experience. When referencing the intersection of religious beliefs and culture a second participant noted, There was none [rape], it had to be the Catholic religion, I mean it wasn't just being brought up Catholic, it was being brought up Mexican Catholic, in an all white community, so things were a little bit different there. So I would say that, well, if you don't talk about it, then it doesn't exist [rape] ... there was a certain way [unspoken norm], you didn't question.

A majority of participants demonstrated an awareness and understanding that sexual violence or sexual assaults were not a part of everyday conversation. Not speaking about these events seemed to keep them from being real or acknowledged.

Feelings of professional helplessness. Participants were asked to consider, given their level of training, how comfortable they would be if they were to counsel a client who had experienced a sexual assault. Understandably, as counselors-in-training in a practicum experience, we anticipated a low level of comfort. Participants stated they would prefer not to work with a survivor, if presented with the choice. One participant responded to the question about working with a sexual assault survivor and stated,

... that would scare the crap out of me ... being raped, I haven't experienced it.

I can read on it, I can do whatever, but there's just certain things, that unless you

experience first- hand for yourself you will just never know what it's like.

Participants believed that no amount of training was sufficient for them to address the client's experience of sexual assault. Clients were viewed as so damaged and their experience so pervasive and traumatic that no one could be of assistance, certainly not a counselor in training. Participants perceived clients as *unable* to recover from such a trauma. Participants noted that they lacked the skills, understanding, and tools necessary to assist in a client's recovery. Another participant stated,

Never having been there I can't say how, for sure how hard or easy it would be. I feel it would be hard just because it is such a profound thing that happens to a person like, it's so hurtful, you know, and it's so damaging.

In summary, one participant stated,

...but the victims, the survivors, there's no coming back from that [rape]. You can't fix it. You know, you set a broken bone and it'll heal, but you won't be able to see the break... but in rape, it's in the mind, it's the soul, it's the person's whole that is altered and there is no coming back from that.

Gender expectations. Participants were asked to identify gender expectations and roles for women and men, which is a contributing factor in acceptance of certain rape myths (Burt, 1980; Chapleau et al., 2007). For example, the belief that a man cannot control himself or his sexual urges is a rape myth based in gender norms or expectations. Each participant described characteristics that would be consistent with traditional female and male roles. For instance, participants described rape as a misunderstanding of the differences between men and women (i.e., mostly date rape). One male participant noted, when referencing men and women, "... equal yes, but with differences ... boys and girls think differently." A second female participant put it more pointedly:

We have a Puritanical culture, which assumes that women, are at fault if they sexually attract men, that men can't control themselves, and so if a woman makes herself look sexy, or available, or gets herself in the wrong situation that a man literally can't help himself and the woman has done something wrong in the situation.

Other participants revealed a sense that even though men were perceived as the aggressor, it was to some degree a societal expectation. Participants seemed to identify rape and sexual assault as a form of sexual relations. Males were expected to be in the role of 'protector' and 'warrior', which seemed to give permission for them to 'take' or 'conquer' the submissive female. No participant recognized or articulated this contradiction. A female participant stated, "... men are more wired up to be the warrior, strong protector and the woman nurturer, caregiver." Another female participant indicated,

I think our society expects men to be providers ... look at men to be like their expectation of their desire for sex and that it's manly to want to have sex and to have sex and it's kind of fun to conquer ...

Although these were the counselors-in-training's opinions about the culture of gender norms and expectations, it seemed evident that these cultural stereotypes perpetuate acceptance of rape myths.

Poor judgment. The fourth theme that emerged was the belief that victims of rape may have exhibited poor judgment. "Victim" is used here because participants seemed to identify that an individual's lack of judgment or impaired judgment led to their victimization. Poor judgment centered on their decision-making, style of dress (i.e., too revealing), and engagement in risky situations (i.e. drinking). In relation to appearance or dress one male participant noted, "You know some young women ... you know showing too much skin, I don't think they are asking to be raped, but they're not using the best judgment for their safety." A female participant stated, "I think there are mixed messages about whether or not the woman was putting herself in a place where she was partially responsible or partially at fault [for the rape]." She also believed that "the media definitely tries to send those kinds of messages [that women are responsible for their own safety]." Other participants noted that women might be naïve or too trusting in that

they either did not understand or expect that men had other intentions. A male participant spoke to this idea when he stated:

... I think a lot of times women have good intentions ... an invitation over [to one's home] implies sex for a lot of men. I think if women weren't as nice and were more, I want to say apprehensive, or not as trusting they wouldn't put themselves in situations as much."

Beliefs and perceptions, such as the above statements, may perpetuate forms of victim blaming by counselors.

A male participant's comments represent the dynamic tension individuals feel when attempting to assign responsibility for a sexual assault:

I think guys use dating and alcohol to take advantage of women and if a women says "no" it means "no" even if there's some leading on or you know petting or necking. You know no is no and I don't cut the perpetrator any slack for that. Maybe the woman was not thinking well, ... [but] the mating call for the college coed [is] ... "I'm so drunk" ... that kind of invites things to happen, it doesn't mean that it is ok or that she's doing that, but I think it would be not wise for coeds to get you know to the point of blackout because it is very hard [for the man] to resist.

All participants commented on the potential for victims to use bad or poor judgment alluding to the possibility that they could potentially be responsible for being assaulted. These statements represent an unintended acceptance and promotion of rape myths among a group of caring educated professionals.

Not calling rape "rape". In response to the questions or prompts, there were several times when participants hesitated or refrained from using the term rape when describing rape or

sexual assault. Reluctance to use the term rape appeared to center around discomfort with the term and the violence it connoted. When asked to describe or define the term "rape," participants could not even use the term. For example, one participant stated,

The closest to *that* [rape] would be if a woman agrees to have sex and starts the process and then backs out, um, even then I don't think it's appropriate for the man to continue, but that would be the closest to *that*.

Another participant shared, "*It's* a crime, *it's* a violation. *It's* too common and *it's* going to traumatize her very, very seriously for a long time." A third participant needed to distance her comment even further stating, "...*this kind of thing* happens to people."

The six themes identified and supported by participant statements seem indicative that counselors-in-training are susceptible to accepting societal rape myths. As a result, it is imperative that practitioners and supervisors maintain a heightened awareness of these widely accepted myths.

Discussion and Implications

Violence against women occurs nationally and internationally. Rape is only one form of such violence against women, wherein the emotional effects are devastating. In addition to the pernicious nature of such an act, the societal misperceptions and false beliefs may further contribute to the emotional effects experienced by survivors of this form of violence. Since women make up the majority of clients seeking counseling services (Choate, 2008; Kopala & Keitel, 2003), and given that one out of six U.S. women have experienced an attempted or completed rape in their lifetime (*USDJ*, 2006; *USDJ*, 2000), it is very likely that counselors will encounter several clients with histories of rape and other forms of sexual assault.

Limited research has been conducted in the area of counselor awareness or acceptance of rape myths, beliefs about rape and survivors of rape, and the impact these perceptions have on the client's recovery and the therapeutic relationship. Indeed, the participants in this study were often unaware of the discordant nature of the narratives. This research supports the need for curriculum development in counselor training programs and attention to this issue in clinical supervision.

Curriculum that includes coursework addressing trauma was added to the standards for programs accredited by the Council for Accreditation of Counseling and Related Educational Programs (CACREP) (2009), yet not all counseling programs nationwide are accredited. The degree to which rape and rape myths are discussed are currently unknown, yet an essential component to the curriculum.

Counselors-in-training may benefit from increased self-exploration and critical thinking in the areas of rape and rape myths. Counselors who do not receive specific training on sexual assault and sexual trauma may not be aware of their beliefs or assumptions and their potential negative impacts on clients or may not understand the need to address the assault, or how to address the assault therapeutically in a nonjudgmental and unbiased manner. Consistent with the ethical codes and standards for the profession (American Counseling Association, 2014), counselors-in-training are expected to provide a safe and non-judgmental environment for clients to identify and explore their assumptions, biases, and beliefs about sexual assault and victims and survivors. Clinical supervision can help to address these issues with counselors-in-training and explore their assumptions specific to rape myths.

As new counselors graduate into the field, are they prepared, trained and equipped to handle working with clients who have experienced sexual assault? Many licensed counselors who did not receive training or supervision in violence affecting women (including sexual assault) in their graduate programs have sought additional training on sexual assault out of personal interest, and for professional development (Campbell, Raja, & Grining, 1999). In a recent study, mental health workers reported that sexual assault is an issue they frequently work with; however, the majority of participants had not received professional training on sexual assault assault, and are not comfortable responding to disclosures of sexual assault (McLindon & Harms, 2011).

Clients should be able to seek counseling without worry or fear that they will be blamed or judged for what has been done *to* them. The counselors-in-training who participated in this study disclosed feelings of professional helplessness and a desire for more specific and targeted coursework or training that would address clients who have experienced sexual assault. They reported believing that treating survivors of sexual violence could be an area of specialization, yet we view it as a core training need.

Clinical implications from these findings include a need for increased awareness of the nature and impact of rape myth acceptance on the part of counselors, supervisors, and counselor educators. There is an increased need for practitioner training specific to sexual assault, rape, and trauma as well as the need for critical conversations between supervisors, counselors-in-training, and early career counseling professionals about their personal assumptions and biases specific to victims/survivors of sexual assault. At that same time, we need to examine how the failure to identify and address these myths may lead to a perpetuation of misogyny, rape myths and false beliefs about sexual assault and survivors of sexual assault. These beliefs may impede the client's recovery process and continue to perpetuate violence against women in society.

Limitations

The researchers sought to identify the experiences and beliefs held by counselors-intraining regarding participants' perceptions and understandings of sexual violence, rape, rape myths and training expectations. This study was limited by a small sample size of participants who were selected from a convenience-based sample, from the same institution and the limited professional counseling experiences of the counselors-in-training. Additional limitations include incomplete data on the RMA scale from two participants, the use of self-reported data, and the likelihood that participants experienced interpersonal discomfort and the requisite social desirability that accompanies the discussion of sensitive topics. Each of which can limit the generalizability of the results of this study to all counseling professionals.

Directions for Future Research

Participants in this study reported a desire for additional training. We encourage seasoned practitioners and supervisors to be prepared to address the needs of counselors-intraining and new counselors who express a low level of comfort when working with clients who have survived a sexual assault. Supervisors will also need to address their own assumptions, biases, stereotypes, and acceptance of rape myths. Because national prevalence rates indicate that one in six women will experience a sexual assault, counselor educators have a profound responsibility to their clients, to invite and support dialogue and training about issues related to sexual violence. By refusing to be complicit in the silence about rape myths, counselors fulfill their roles as advocates and helping professionals.

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Dissertations in CACREP-Accredited Counseling Doctoral Programs: An Initial Investigation

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Abstract

Faculty in 38 CACREP-accredited doctoral programs in the US described their dissertation products over the last three years, composition of their dissertation committees, and their satisfaction ratings with dissertation products and processes. Results indicated traditional dissertation formats were predominant. Over half (54%) of completed dissertations were quantitative and 40% were qualitative. Committees typically included two or three counselor educators and at least one outside faculty member. Faculty were modestly satisfied with dissertations, citing the need for more rigor and consistency of standards. Higher satisfaction was related to committee composition as well as the use of a variety of research methods.

Keywords: Dissertations, Dissertation Committees. CACREP, Counselor Education

The dissertation is the culminating experience of a doctoral counseling student's professional education. According to the Council for Accreditation of Counseling and Related Educational Programs (CACREP, 2009), the purpose of dissertation research is to generate new knowledge that informs counseling practice, counselor education, and counseling supervision. Little is known, however, about counseling doctoral education in general, either in the US or internationally (Adkison-Bradley, 2013; Goodrich, Shin, & Smith, 2011), and even less is known about the dissertation products generated by doctoral students in these programs. Accordingly, Goodrich et al. (2011) called for additional research on doctoral students' research products and attitudes. Dissertations likely are the most consistent product required across doctoral counseling programs, and thus provide a meaningful focus for needed research. Study of

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dissertations is important because they "reflect both the research interests and sophistication of prospective graduates" (Zanskas, Phillips, Tansey, & Smith, 2014, p. 238). A search of relevant literature, however, yielded no empirical descriptions of counseling dissertations.

Instead, writers (Castro, Castro, Cavazos, & Garcia, 2011; Flynn, Chasek, Harper, Murphy, & Jorgensen, 2012; Hinkle, Iarussi, Schermer, & Yensel, 2014; Hoskins & Goldberg, 2005; Hughes & Kleist, 2005; Protivnak & Foss, 2009) have focused on highlighting the experiences of counseling doctoral students, including motivations for pursuing the degree and factors that influence their successful trajectory through their doctoral program and the dissertation process. Flynn et al. (2012) gave particular attention to doctoral students' dissertation experiences. Based on their qualitative study of doctoral graduates, they suggested an emergent theory of the initiation, management, and completion of the dissertation composed of interacting internal (e.g., personality traits), relational (e.g., barriers such as competing life demands), and professional factors (e.g., influence of dissertation chair and committee members, home environment). They emphasized the role of the dissertation chair in supporting the doctoral students' progress, but did not gather information about the composition or expertise of other faculty members on the committee. Focusing specifically on women in Ph.D. counseling programs, Castro et al. (2011) similarly identified personal characteristics (e.g., independence, perseverance) and supports (e.g., mentors, husbands) that allowed the women to be successful, and also found that the women turned negative external factors (e.g., lack of parental and family support) into positive motivations. Henfield, Owens, and Witherspoon (2011) interviewed African American doctoral students in counseling programs at Predominately White Institutions (PWIs); the students emphasized the importance of being assertive, forming relationships with more experienced African American students, joining race-based organizations on campus, and

relying on emotional support from their advisors. Thus, although Flynn et al. (2012), Castro et al. (2011), Henfield et al. (2011), and the other writers (cited above) provided instructive information for supporting doctoral students through their program, they did not shed light on dissertation committee membership nor actual dissertation products, such as the format and methodologies used.

Limited information is available about dissertation products in a few other professions. Morris (2013) classified marriage and family therapy (MFT) dissertations produced at one university over a 10-year period. He found that, in contrast to MFT educational guidelines, only five of 64 dissertations were directly focused on clinical MFT research. In a study of research designs in school psychology doctoral programs over 25 years, Lekwa and Ysseldyke (2010) found fewer doctoral students used experimental designs and more chose single-subject designs. Several other researchers have noted the growing number of interdisciplinary dissertation topics either within specific fields (e.g., political science; Knapp, 2013; nonprofit studies; Shier & Handy, 2014) or across disciplines at a university (Herther, 2010). Perhaps most relevant to this study is the ongoing documentation of doctoral dissertation research in rehabilitation counseling from 1979 (Lofaro, 1981) through 2011 (Zanskas et al., 2014). In the most recent review, Zanskas et al. (2014) reported quantitative research designs were employed in the majority of dissertations, and advanced and basic statistics were used equitably. Their data illustrated that, across 1990-2011, outcome studies (e.g., employment patterns, life satisfaction) were predominant, with increases in studies of attitudes towards persons with disabilities and research on clinical populations (e.g., those with spinal cord injuries).

There also has been a national and international dialogue around the appropriate formats of dissertation products. As early as 1991, the Council of Graduate Schools (CGS) urged respect

for the traditional dissertation and also suggested some flexibility in format might be appropriate. The CGS (1991) noted that some science disciplines allowed students to include scholarly articles published during their doctoral program in their dissertation, but emphasized that the parts of any dissertation product should be "logically connected and integrated" (p. 4), adding that "binding reprints or collections of publications together is not acceptable as a dissertation in either format or concept" (p. 4). Similarly, in 2005, the CGS again noted that some institutions permitted a dissertation in the format of a manuscript or manuscripts to be submitted for publication, although these products often included an overview statement or appendices with additional details about the "history, methods, and results" (p. 32). Maxwell and Kupczyk-Romanczuk (2009) reported that such a portfolio dissertation product was "evident worldwide in doctoral education" (p. 138) in professional (vs. PhD) doctorates. To date, however, there is no documentation concerning whether any counseling doctoral programs have adopted a non-traditional dissertation format or what those alternative formats might be.

Research Questions

In sum, although researchers in some disciplines have documented basic information about their dissertations, no research documenting dissertations in counseling programs could be located in the literature. Thus, the purpose of this study was to gather the first descriptive information about counseling doctoral students' dissertations. Five research questions guided this study: What dissertation formats are used in counseling doctoral programs? What research methodologies do doctoral students employ in their dissertation studies? What is the composition of students' doctoral dissertation committees, and what is the committee members' expertise? How satisfied are counselor educators with their students' dissertation products, and what changes would they like to make in their program's dissertation products and committee composition? Given the lack of information on counseling dissertations, we chose to focus on U.S. doctoral programs accredited by CACREP (2009). CACREP-accredited programs seemed a logical starting point since these programs are required to meet a common set of standards around doctoral research training, but the standards are somewhat general and so allow flexibility in dissertation products. In fact, research training in these programs varies widely (Borders, Wester, Fickling, & Adamson, 2013; Goodrich et al., 2011), suggesting the programs' requirements around dissertations also might vary. It was hoped that this study would provide initial information that could serve as a starting point for further investigations and discussions around doctoral counseling students' dissertations, including format, topics, expectations, and quality, as well as trends in research interests and students' potential "to disseminate innovative counselor education research in scholarly venues" (Adkison-Bradley, 2013, p. 47).

Method

Participants

Faculty members at 38 doctoral-level counselor education programs in the US and accredited by CACREP completed the survey. The 38 programs were located in 21 geographically diverse states and represented all regions of the Association for Counselor Education and Supervision (ACES). Faculty were located in relatively small and large programs, in both public and private universities, in regional and national universities, and in both rural and urban areas. Two of the 38 were online programs. In terms of Carnegie classifications, 38% of participants were located in very high research activity universities; 49% were in high research activity institutions, 8% were in doctoral/research universities, and 5%

were located in master's-level institutions.

Measure

Information regarding dissertations produced in CACREP-accredited doctoral programs and dissertation committees was collected as part of a larger survey focused on research training in those programs (see Borders et al., 2013). Although the authors reviewed similar published surveys (e.g., Aiken, West, & Millsap, 2008; Okech, Astramovich, Johnson, Hoskins, & Rubel, 2006; Rossen & Oakland, 2008) in an effort to create a comprehensive survey, no dissertationrelated questions were included in previous surveys. Thus, questions were created based on the authors' knowledge of the relevant literature (cited above), the first two authors' experiences as dissertation chairs and committee members, and professional conversations with colleagues at counselor education conferences. University colleagues reviewed the survey for clarity, and then a pilot study was conducted with two counselor education programs that differed in relevant ways (e.g., fulltime and part-time, in different states), thus supporting the face and content validity of the survey.

In the section on doctoral students' dissertation products, faculty were asked to describe the dissertation products required of doctoral students in their program, providing options of "traditional design – 4 or 5 chapters (e.g., introduction, review of the literature, methodology, results, discussion and implications)"; "compilation of series of articles around a topic: # of articles required, # of these articles that must be empirical, # of these articles that must be submitted/accepted/published before graduation" with space for providing other guidelines relevant to acceptable articles; and "other (please describe)." Next, faculty were asked to estimate the percentage of doctoral dissertations in the last three years that used qualitative, quantitative, and mixed methods, with space to describe the designs or approaches most typically

used under each as well as any additional comments on research designs of dissertations produced in the program.

Next, faculty were asked to report the number of counselor education, research methods, statistics, and other faculty members who composed students' dissertation committees, and provide explanations for how "other" faculty were selected. Finally, faculty were asked to rate their satisfaction with dissertation products and committee composition on a scale from 1 (not at all satisfied) to 5 (very satisfied), and then share any changes they would like to see in products, committees, or other dissertation processes.

Procedure

Eligible programs were identified through the CACREP website and identified a contact person at each program through the program's website. Following IRB approval, faculty at the 61 CACREP-accredited doctoral counseling programs were contacted. Two reported their doctoral program no longer existed; 45 agreed to participate and 38 completed the survey (64% of accredited programs). Those who agreed to participate were sent the informed consent and survey electronically. Follow-up emails were made throughout the course of data collection (approximately 6 months). Participants were invited to return the surveys electronically or by mail. To protect anonymity, a research assistant assigned a numeric code to each survey and uploaded the responses.

Data Analyses

Frequencies, percentages, means, and standard deviations were computed as appropriate to the data. The first author compiled the brief faculty comments in each section. For the most part, these comments are reported verbatim below; when there were multiple comments for a particular question (e.g., desired changes), the first author grouped the responses together as appropriate (e.g., more rigor).

Results

Dissertation Formats

Faculty in a majority of programs (n = 29, 76%) reported that most (95%) or all of their students created traditional dissertation products (e.g., 4 or 5 chapters). One described a twochapter format (review of literature, methodology and results); one reported a six-chapter traditional format in which the last chapter was a manuscript to be submitted to a journal, and one reported a similar product with the manuscript constituting chapter one of the four chapters. Faculty in six programs (15.78%) reported offering a combination of traditional products and an alternative option of compiling a series of articles around a topic. None reported using a nontraditional format exclusively and, when reported (n = 3), the percentages of non-traditional dissertations were 5%, 10%, and 50%. The number of required articles was 1 (n = 3), 2 (n = 1), 2 or 3 (n = 1), and 3 (n = 1). In four of the six programs, an empirical article was required and in two of the six programs at least one article had to be submitted for publication before graduation.

Only two faculty wrote comments about their alternative dissertation models. One wanted to encourage more students to use the alternative model, citing the context of pressure to admit more doctoral students without adding more faculty. This respondent added, "The traditional model of dissertation is a wonderful tool to assess the depth of students' research knowledge or knowledge about a specific subject, but I think it is limited in the ability to help them publish." The other faculty's comments suggested the change to an alternative model was dictated by the College of Education, and wrote, "I worry that the shift to journal-based publications will take some degree of rigor out of the dissertation process." Another faculty

respondent reported current discussions around creating an alternative format, a doctoral portfolio process that would include comprehensive exams and the dissertation process.

Dissertation Research Methods

Faculty (n = 36) estimated the percentages of methods used in dissertations over the last three years (see Table 1). All 36 faculty indicated students in their program used quantitative and qualitative methodologies, although the frequency at which students utilized these methods in dissertations differed. Quantitative methods were employed in slightly over half of the dissertations and qualitative methods were used at a somewhat lower but still substantive rate. Mixed methods were by far the least seldom used; twenty faculty reported their students did not use mixed methods.

Measure	Qualitative %	Quantitative %	Mixed Methods %
Mean	39.97	54.28	11.50
Median	30.50	50.00	10.00
Mode	30.00	50.00	10.00
SD	21.24	20.03	6.90
Range	5 to 98	2 to 90	5 to 30

Table 1Dissertation Research Methods

Note. For qualitative and quantitative, n = 36; for mixed methods, n = 18

Of the qualitative dissertations, faculty reported grounded theory and phenomenology (n = 20 each) were the most frequently used methods. Frequencies of a range of other qualitative approaches are reported in Table 2 (faculty could report more than one method).

Faculty also reported that a wide range of quantitative methods was used in dissertations (see Table 2) (again, faculty could report more than one method), with none of the methods being predominate over the others. In this section, some faculty indicated actual statistical analyses that were conducted in the dissertation; these included ANOVA, MANOVA (n = 8 each), regression (n = 6), structural equation modeling, factor analysis, multiple regression (n = 5 each), path analysis (n = 3 each), *t*-test, Chi-square, hierarchical multiple regression, and conjoint analysis (n = 1 each).

Table 2 Qualitative and Quantitative Approaches Used in Dissertations (n = 36)

Qualitative Approaches	n
Grounded theory	20
Phenomenology	20
Case Study	4
Ethnography	4
Narrative	3
Critical incident	1
Consensual qualitative research	1
Quantitative Approaches	
Experimental	5
Quasi-experimental	5
Survey	5
Correlational	3
Descriptive	3

Instrument development	3
Comparison of groups	2
Program evaluation	2
Delphi	1
HLM	1
Mediator/moderator modeling	1
Meta-analysis	1
Q methodology	1
Research review	1
Single case	1
Solomon 4-way	1

Note. Faculty could provide more than response.

For mixed methods, faculty reported interviews combined with another approach (e.g., survey, intervention, quasi-experimental, quantitative data, n = 5), case study with repeated measures or case study with correlations (n = 1 each), a survey combined with regression or SEM (n = 1), concept mapping (n = 1), and content analysis (n = 1). Two faculty reported students are discouraged from using mixed methods: "Students are advised away from this due to work required and controversy at our university over doing both"; "I don't often encourage students to use mixed methods for dissertations because I have found that it is very difficult for them to learn two methods well enough to succeed on a dissertation."

Dissertation Committees

Faculty (n = 36) also described the composition of doctoral students' dissertation committees (see Table 3). For those who gave exact numbers (vs. a range, n = 32), total committee members ranged from two to seven, but committees typically included three or four members. Of these, two or three were usually counselor educators. Thirty faculty reported that a non-counselor education committee member also was required. Of these, 20 reported requiring a research methods committee member (who could be a counselor educator) and seven required a statistics faculty member; five required both a statistics and a research methods committee member, although these could be the same person in two programs. Other committee members were selected from the student's cognate or minor area of study or because of their expertise in the student's dissertation methodology, topic, or population. One noted that the outside committee member could be a doctoral-level practitioner. Four said the outside person was appointed by the Graduate School. One reported that two external readers join the final oral exam and one said a graduate representative was appointed to moderate the defense and help ensure dissertation quality. In comments about desired changes in the dissertation process, three wanted to add a research methods or statistics person to their students' dissertation committees.

Table 3

Number of Counselor Education (CE) Faculty and Total Number of Dissertation Committee Members (n = 36)

Measure	CE Faculty	Total
Mean	2.30	3.47
Median	2.00	3.00
Mode	2.00	3.00
SD	0.76	1.16
Range	1 to 4	2 to 7

Satisfaction with Dissertation Products and Processes

On a scale of 1 (not satisfied at all) to 5 (very satisfied), faculty (n = 36) reported their satisfaction with their students' dissertation processes and products (see Table 4). The average

level of satisfaction was in the middle of the scale (M = 3.55), but about 64% reported being mostly or very satisfied with their dissertation processes and products.

Satisfaction	n	%
Not satisfied at all	2	5.60
Mixed satisfaction	7	19.40
Somewhat satisfied	4	11.10
Mostly satisfied	18	50.00
Very satisfied	5	13.89

Table 4 Counselor Education Faculty Satisfaction with Dissertation Products (n = 36)

Faculty respondents were asked if their colleagues would agree with their ratings. Eight said yes, five said no, and two said agreement would vary among the other program faculty. In their comments, five reported faculty agreement around the need to strengthen dissertation products (e.g., "We recently had comprehensive discussions about this due to CACREP. We all agree rigor needs to increase"). Those who said other faculty would not agree typically reported they themselves had higher standards for dissertations they chaired (n = 4) or had a different emphasis (e.g., the process over the product, n = 1) in comparison to other faculty in their program. One commented on disagreements around the use of mixed methods:

Traditionally, advisors may perceive that mixed methods should not be used for dissertation because students may not gain an in depth understanding of both methods/approaches. We now know that this is now the case and students should have that choice to pursue designs/methods of inquiry that could help them answer their research questions.

Faculty were invited to comment on any changes they desired in their dissertation processes and dissertation products. Many faculty (n = 20) addressed issues of rigor, such as comments on research methods and statistics used (e.g., "fewer correlational"), more consistency

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in standards and expectations across faculty dissertation chairs and committees, faculty with better research training, and more studies based in theory or a model. Three wished students had more research experience before beginning the dissertation, four desired more investment of faculty in the process, three preferred an alternative dissertation product, three desired higher quality in students' writing, two wanted more dissertation studies about clinical issues and applications, three desired better research methods instruction or student involvement with data before the dissertation phase, four wished more dissertations resulted in publications, one wished students could complete the dissertation more quickly, one thought more emphasis should be given to the literature review, and one preferred open dissertation proposal meetings (some participants are represented by more than one response in this list). Three faculty reported recent changes they found positive, including revisions in research standards "to increase the rigor of our students' research products," new faculty hires with higher "standards and expectations for rigor," and "an increase in level of dissertation expectations and corresponding skill mastery."

Faculty also could make any other comments about research designs of dissertations in their doctoral programs. Four reported discouraging or excluding survey research due to quality concerns (e.g., "We have excluded 'surveys' alone as appropriate for dissertations as a way of increasing the level of scholarly work"; "We allow surveys but only if they address issues likely to advance the profession and if there can be some assurance of representative sample"). One reported increased attention to "designs that incorporate program evaluation since many of our students work full-time and are often in positions requiring very significant and expansive program evaluations." A faculty member who reported that 60% of dissertations were qualitative noted, "It appears the department is moving toward encouraging more quantitative and/or mixed methods designs." Another wrote that students writing qualitative dissertations

were "encouraged to present their results in a way that best describes the study and results. This could be in 8, 9, or 10+ chapters, dependent upon methodology and number of participants." One reported, "We do not permit indiscriminate convenience sampling (e.g., recruitment blasts to CESNET)." One stated, "We are quite proud of the (relatively) high proportion of experimental, intervention designs produced by our students."

Comparisons of dissertation products and committees by satisfaction ratings. To further explore faculty satisfaction ratings, the average number and composition of committee members as well as dissertation formats and designs were calculated by ratings of satisfaction with dissertation process and products. Visual inspection of the cross-tabs suggested that those reporting lower satisfaction ratings had smaller committees, made up primarily of counselor educators. Their dissertations were exclusively traditional format, with little variability in the types of methodologies used. Most had a high percentage of qualitative methods, with little to no quantitative and mixed methods. Quantitative dissertations were mostly descriptive. Faculty reporting higher satisfaction ratings more often reported requiring a committee member from research methods or statistics. Their dissertations were more varied in terms of format and the use of qualitative, quantitative, and mixed methods. Due to lower power, these observations could not be examined with inferential statistics. These observations, however, were very similar to faculty comments throughout the survey.

For example, one faculty who reported being "not satisfied at all" with dissertation products and process also reported 98% of dissertations were qualitative and said most students choose all counselor educators to be on their committee; the faculty respondent wanted to change this practice and "mandate a statistician to be on their committee." In contrast, the five faculty who reported being "very satisfied" reported an average of 48% qualitative and 45% quantitative

dissertations; three reported 10% mixed methods. Two noted that students sometimes used advanced statistics (e.g., SEM) in their dissertations, and their qualitative methodologies spanned across multiple types of methodologies (e.g., grounded theory, phenomenology, narrative, CQR). One reported that survey method was the most typical method, but noted a "movement toward more experimental intervention studies." The very satisfied faculty said research methods or statistics faculty were required on the committee or were selected by a majority of students as the outside committee member(s). Two noted that all committee members had to be actively engaged in research. At least one of the very satisfied faculty was in a part-time program, as this respondent indicated greater consideration of quantitative program evaluations since many students worked full-time in positions "requiring very significant and expansive program evaluations." Finally, faculty who reported an alternative dissertation format was allowed also reported, on average, being mostly satisfied with their dissertation products and process (M = 4.0, SD = .71).

Comparisons by predominant research methods. Satisfaction ratings by faculty reporting that 70% or more of their dissertations were either qualitative or quantitative also were compared. Five faculty reported 70% or more of their dissertations were qualitative; their satisfaction ratings averaged 2.2 (SD = 1.30, mode = 1, range = 1 - 4). Their desired changes in dissertations were varied: mandate a statistician on the committee, require better research methods (not specified), allow an alternative dissertation model, and conduct an open dissertation proposal meeting.

Thirteen faculty reported 70% or more of their dissertations were quantitative; their average satisfaction ratings were 3.58 (SD = .79, mode = 4, range = 2 - 4). Their desired changes in dissertations also varied: increase consistency of standards across dissertation chairs and

committees (mentioned by four), give more focus to process over product, allow students some creativity in the process, encourage more rigor in research designs and writing, increase students' use of higher level statistics, encourage more original work, increase data practice in research tool courses, achieve more guidance from dissertation chair, and have more studies of clinical practice issues. One of the 13 faculty reported being pleased with the outcomes of increased expectations of dissertation work.

Discussion

The traditional dissertation format (i.e., 4 or 5 chapters) was the predominant format in CACREP-accredited doctoral programs in the US over the last three years. Faculty in only 16% of programs said they offered the alternative of a compilation of articles, which typically included one empirical manuscript. The type of dissertation format did not seem to be related to dissertation research methods (based on visual observation of cross-tabs). In the six programs offering an alternative format, an average of 31% were qualitative (range = 5% - 50%), an average of 63% were quantitative (range = 45% - 90%), and an average of 12% (range = 0% - 40%) were mixed methods, while averages overall were 39.97% qualitative, 54.28% quantitative, and 7.96% mixed methods. Thus, regardless the dissertation format, faculty reported a majority of students completed quantitative dissertations over the last three years, although the percentage completing qualitative dissertations was fairly close. These results mirror those reported by Zanskas et al. (2014) for rehabilitation counseling dissertations. Unfortunately, no comparison data are available to discern how these percentages compare to counseling dissertations completed in previous years.

For qualitative dissertations, faculty reported students primarily employed grounded theory and phenomenology methods. In the research training sections of the survey, faculty reported these were the two qualitative methods most often taught in their doctoral programs (Borders et al., 2013). Faculty reported a wide range of quantitative methods was used in dissertations, including descriptive and experimental designs, basic and advanced statistics; these results again were similar to designs and analyses used in recent rehabilitation counseling dissertations (Zanskas et al., 2014). In the previous study on research training in their doctoral programs (Borders et al., 2013), the counselor education faculty reported a similar range of quantitative research designs and quantitative analyses were taught. Thus, it appears dissertation students are choosing methods they are being taught during their doctoral programs.

Based on faculty reports, dissertation committees typically were composed of two or three counselor educators and one other faculty member, chosen based on the students' topic or methodology. Over half reported a research methods or statistics faculty member served on their committees, although in a few programs this person might be a counselor educator. Other faculty, including at least one reporting predominately qualitative dissertations, wished that a statistics person was required on their committees.

Faculty reported modest satisfaction with their dissertation process and products, including those who reported allowing an alternative format. Across satisfaction ratings, their desired changes most often were around measures to increase rigor of methodology and achieve consistency in standards across dissertation chairs and committees. Several reported being pleased with recent efforts in their program to increase rigor and consistency. In general, faculty reporting low satisfaction also reported committees predominated by counselor educators and low variability in research methods. In contrast, those reporting high satisfaction said their dissertation committees included research methods or statistics faculty. They also reported that their students used a variety of methods in dissertations, typically including a fairly strong

percentage of qualitative dissertations, and said students used more advanced statistical analyses in quantitative dissertations. Faculty satisfaction, then, did not seem to be dependent on dissertation format or dissertation methods (i.e., whether qualitative or quantitative), but satisfaction did appear related to composition of the dissertation committee.

The favorable satisfaction ratings when there was variety in dissertation methods cannot be fully explained by the data. High percentages of qualitative or quantitative dissertations may reflect the expertise of counseling faculty. On the other hand, it may be that allowing, or encouraging, consideration of several different methods reflects an emphasis on identifying a gap in the literature that then becomes the basis for writing research questions and choosing methodology. Such an approach was supported by a Delphi study of counseling research competencies (Wester & Borders, 2014); the expert panel emphasized breadth of knowledge of research methods that allowed one to select the most appropriate approach for answering research questions that are driven by the literature.

Faculty clearly had mixed opinions of mixed methods, including disagreements within their own programs, and reported quite a range of mixed methods used in dissertations. Most said students conducted interviews in combination with some other method, such as a survey or collection of quantitative data. Others, however, reported combinations of methods that do not fit the definition of "mixed methods." It appears that there is some confusion or misunderstanding among counselor education faculty about what mixed methods are and their appropriate (and rigorous) place in research.

Faculty also had mixed opinions of dissertations based on surveys. Five reported surveys as a quantitative method used in dissertations; one of these said surveys were the "most typical" design for their students' dissertations. On the other hand, four faculty reported specific efforts

to limit, exclude, or discourage use of surveys in order to increase the rigor of their dissertations. Somewhat in contrast with these comments, in the research training sections of the survey, 76% of faculty said survey design was covered in required coursework, with only 5% reporting survey design was not covered in their required or elective coursework (Borders et al., 2013). It is not clear what contributed to faculty's range of opinions about survey dissertations, although issues around quality certainly seemed implied. Similarly, Heppner, Wampold, and Kivlighan (2008), after noting the contributions of survey research to the counseling profession, stated, "Perhaps the most frequent problem with survey research is not with survey methods *per se*, but rather with the lack of knowledge about conducting sound survey research" (p. 228).

Limitations

The data in this study represent the first descriptions of dissertation products and process in CACREP-accredited counseling doctoral programs, but much more needs to be known. Detailed descriptions of the dissertation products created in alternative formats were not collected, and so it could not be determined whether they met the suggestions of the Council of Graduate Schools (1991, 2005). The data did provide descriptions of what research methods were employed by programs, and faculty estimates of which methods were used most often by students. Nevertheless, it was not possible to surmise with certainty which quantitative and qualitative methods, if any, are more "typical" of dissertations across counseling programs.

In addition, given the length of the full survey from which these data were gathered, questions about a number of other potential areas were not included. For example, it would be informative to ascertain what topics and subjects are being addressed in dissertations. A few faculty expressed a desire for more dissertations focused on clinical populations and issues, but this reflected thoughts about their own programs only. Since survey questions did not address dissertation topics specifically, it is not clear how many dissertations achieved CACREP (2009) standards of informing counseling practice, counselor education, and supervision, nor what gaps need to be addressed.

Importantly, data that would allow evaluation of the quality of dissertation research were not collected. Quality indicators, such as those used by Wester, Borders, Boul, and Horton (2013), would provide a more precise measure of the appropriate application of research methods in dissertations, would better indicate whether dissertation research is benefitting the profession, and perhaps would further our understanding regarding faculty satisfaction with dissertation products. In addition, information about incomplete dissertations was not requested (were research methods related to students not completing the dissertation?), and only faculty opinions and satisfaction ratings were collected, excluding doctoral students' views.

No obvious differences between the programs of faculty respondents and nonrespondents were apparent. Both groups included geographically diverse programs, relatively large and small programs, and full-time and part-time doctoral programs. Nevertheless, response bias may exist, as data about the dissertation products, committee composition, and satisfaction ratings of faculty in unrepresented programs is unknown. In addition, not all program faculties' opinions were represented, as some respondents said other faculty would not agree with their responses. Thus, results should be interpreted with some caution.

Finally, doctoral programs that offer a professional (vs. PhD) degree, such as the program described by Southern, Cade, and Locke (2012), were not included. These authors proposed a portfolio project, or Project Demonstrating Excellence (PDE), as part of a doctor of professional

counseling (DPC) program. Southern et al. (2012) suggested PDE dissertation alternatives should "reflect meaningful applications of scholarship in practice settings" (p. 8), such as a competency-based portfolio (demonstrating best practices and evidence-based practice), a participatory action research study, and/or a program development and evaluation project conducted in a clinical setting. Maxwell and Kupczyk-Romancauk (2009) described a similar portfolio approach for professional doctorates in education, designed to benefit the practice community rather than the academic community, yet still reflecting rigor. In line with CGS (1991, 2005) recommendations, they stated that the portfolio of works should have a thesis, "an over-riding line of argument" (p. 139) that provided coherence to the body of work doctoral students selected to include in the portfolio, and suggested the portfolio should be examined by a committee that included "highly regarded, experienced professionals" (p. 142) from relevant practice communities. They listed criteria for the professional education doctorate portfolio dissertation at one Australian university, which included clearly stated research questions with significance to practice; competency in reviewing relevant literature; quality of research design; collection and analysis of appropriate data; linking findings to theory, policy, practice, and future research; and quality of writing and/or other presentation media, as appropriate to the relevant audience(s). Future researchers, then, may want to explore similarities and differences between dissertation processes and products for PhD as well as DPC counseling programs.

Implications

Additional studies of counseling dissertations are needed to more fully understand their evolution, scope, and quality. In addition, it seems important to determine which dissertations are published and in what journals. Such information could be compiled by program and by program faculty and shared with prospective students. In addition, location of dissertation-based

publications would allow researchers to determine whether they reflect concerns about research quality of submitted manuscripts (e.g., Kline & Farrell, 2005) and published articles in counseling journals (e.g., Wester et al., 2013).

It appears some counselor educators may want to consider the possibility of adding outside members to the dissertation committees, particularly members from research methods or statistics. The value of these committee members was highlighted by some of our respondents and desired by others, and was related to higher faculty satisfaction with dissertation products. Concerns about rigor and consistency of standards across committee chairs suggest faculty may want to initiate conversations around these issues in their program. In addition, in programs where either qualitative or quantitative methods make up a high percentage of dissertations, faculty may want to reflect on whether research questions and methods are driven by the method or perhaps preferred by faculty, rather than being driven by the identified gap in the literature.

Although limited, the results provide a basis of comparison for future researchers seeking to determine any changes in the use of quantitative, qualitative, and mixed methods, as well as specific designs and committee composition. Such studies could help identify trends in the field, nationally and internationally, and reasons for any changes.

Conclusion

Ideally, the dissertation serves as the launching point for the new PhD's research agenda and continued contributions to scholarly counseling research (cf. Adkison-Bradley, 2013). Strong dissertations can lead to a productive career in which counseling researchers generate substantive contributions to counseling practice, counselor education, and counseling supervision. Hopefully, this study provides a foundation for building knowledge of the factors that contribute to quality counseling dissertation research that then can evolve into meaningful

research agendas.

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Critically Examining Black Students' Preparation to Counsel White Clients

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Abstract

This study explored how Black students are prepared to counsel White clients in two predominantly White universities. Data analysis revealed five themes, which exposed Black students' preparation experiences: (a) relevant content excluded, (b) stereotyping experienced, (c) authenticity challenged, (d) counter spaces should be included, and (e) cultural sensitivity of faculty warrants increase. The authors discuss implications of the study's findings for educators as well as limitations and recommendations for future research.

Keywords: African American, Counselor Preparation, White Clients, Counselor Education

Given the scope and nature of their work, counselor educators are duty-bound to practice in culturally sensitive and culturally appropriate ways, as acknowledged in various professional, and legal guidelines and ACA ethical mandates (ACA, 2014; Ratts, Singh, McMillan, Butler, & McCullough, 2015). While in many ways this is still an aspirational goal for the profession, training programs have been intentional and systematic in the preparation of future counselor educators to be culturally competent and provide effective services to diverse, marginalized, and underserved populations (CACREP, 2009, 2016). In the 1980s, the counseling profession began to recognize the importance of race and ethnicity and the need to address diversity and difference in the effectiveness of counseling services for diverse clients. Also during this time, scholars were conceptualizing and developing models for multicultural counseling competence (e.g., Sue, Bernier, Durran, Feinberg, Pedersen, & Smith, et al., 1982). Sue et al. (1982) conceptualized multicultural counseling competency in terms of three components: (1) counselors' multicultural knowledge, (2) beliefs and attitudes (self-awareness), and (3) skills. Since the initial conceptualization, this model has been expanded (Sue, Arredondo, & McDavis, 1992) and operationalized (Arredondo, Toporek, Brown, Jones, Locke, Sanchez, & Stadler, 1996). Arredondo and colleagues provided greater specificity to what was termed "multicultural competency" (p. 477) by defining 31 multicultural counseling competencies.

The multicultural competencies include three distinct characteristics and three dimensions. Specifically, becoming a culturally competent counselor requires active involvement in developing the following characteristics: examining one's own cultural biases and assumptions (Chu-Lien Chao, 2012); developing knowledge of the client's worldview (CACREP, 2016; Ratts et al., 2015); and learning culturally appropriate interventions (CACREP, 2016; Ratts et al., 2015). Each characteristic has three dimensions: (1) beliefs and attitudes, (2) knowledge, and (3) skills. By combining the three characteristics with each of the three dimensions, the authors created nine areas of competence. The Association of Multicultural Counseling and Development (AMCD) subsequently adopted these competencies (Arredondo et al., 1996). In 2015 these standards were updated to incorporate terminology more inclusive and demonstrative of the individuals in the counseling profession (e.g., privileged counselor; marginalized counselor; Ratts et al., 2015).

The American Counseling Association incorporated cultural and diversity standards into its Code of Ethics (ACA, 2000); and currently, multicultural standards have been incorporated into all eight sections of the Code of Ethics (ACA, 2005, 2014). These multicultural standards have influenced accreditation of programs, program curricula, and instruction in doctoral-level and master's-level counseling programs (CACREP, 2009, 2016). In addition, the Council for Accreditation of Counseling and Related Educational Programs (CACREP) has included multicultural standards in the training standards for doctoral- and master's-level counseling programs (CACREP, 2001, 2009, 2016).

Diversity in Counseling Curriculum

CACREP integrates multicultural considerations into the Social and Cultural Diversity core curriculum standards. Training focusing on a variety of modalities to help students better understand their own cultural persona; their role in being social justice advocates; understanding oppression, bias, prejudice, and discrimination; understanding behaviors and practices that interfere with positive human growth and development; and understanding the characteristics and challenges for domestic and internationally diverse groups has been recommended (CACREP, 2009). As training programs attempt to adhere to these standards, changes in curricula have taken place (Hipolito-Delgado, Cook, Avrus, & Bonham, 2011). Specifically, multicultural learning has been structured and incorporated into programs through four pedagogical strategies: (1) separate courses, (2) area of concentration models, (3) interdisciplinary approaches, and (4) integration models (Seward, 2009). There are bodies of literature that address challenges and issues associated with some of these strategies (e.g., separate courses); however, much of this literature is beyond the scope of this discussion. It has been acknowledged that one of the most effective ways for counselors to become culturally competent and put knowledge into practice is to employ a combination of the four strategies in master's counseling programs (Hipolito-Delgado, Cook, Avrus, & Bonham, 2011; Ridley, Mendoza, & Kanitz, 1994).

Many programs continue to use the separate course pedagogical strategy to address multicultural standards set forth by professional organizations and accrediting agencies (Priester et al., 2008). Scholars have found that in separate multicultural courses, faculty present select client populations (Priester et al., 2008; Seward, 2009). However, White client populations were consistently absent from the list of cultural groups studied. In addition, a review of the literature on multicultural training using a separate course format reveals that Black counselor/White client dyads are absent during training (Haizlip, 2012; Priester et al., 2008). Previously, scholars viewed Black students as more culturally savvy and embodying more multicultural competence in their counseling interactions with clients (Holcomb-McCoy, & Myers, 1999; Negy, 1999). Thus, supervisors and counselor educators may assume that discussions regarding the Black counselor/ White client dynamic do not need to be addressed (Seward, 2009) and that Black students do not need cultural training (Ivers, 2012; Negy, 1999).

Black Counselors' Interactions with White Clients

However, researchers indicate there may be a need for Black students to receive cultural training (Curtis-Boles & Bourg, 2010; Hernández, Almeida, & Carranza, 2010; Ivers, 2012). In a recent study, scholars have found that there was no significant difference between White students and Black students in terms of multicultural counseling competence (Ivers, 2012). In addition, scholars have noted that counselors of color often experience microaggressions and racism while counseling White clients (Hernández et al.; Marbley, 2004) and experience other difficulties, such as racism, stereotyping, and discrimination (Davis & Gelsomino, 1994). It is important for Black student counselors to understand that even though they are in a counselor role there can still be power and privilege dynamics operating that can create additional challenges. Literature examining the Black counseling students' experiences merely speaks to

the students' experiences regarding preparation and interaction with diverse clients and White instructors or White supervisors. Scholars have yet to hear the authentic voices of Black students as they contend with their preparation to counsel White clients. As such, this study sought to fill a gap in the literature by examining Black students' preparation to counsel White clients. The researchers sought to explore this phenomenon by answering the following research questions: How have counseling programs prepared Black students to work with White clients?, What challenges have Black students experienced in working with White clients?, and How can counselor education programs better prepare Black students to counsel White clients?

Method

This study utilized qualitative inquiry, as it focuses on context and participants' experiences (Creswell, 2012). The researchers selected a multiple case study design, which allowed them to explore a single phenomenon at two institutions. The case study was appropriate for this study, as it allowed the researchers to examine the direct experiences of African American students in counselor education programs (Patton, 2002). The case study research strategy led to new meanings about the relationship between Black students, educational preparation, and counseling services for White clients (Stake, 2006). Using a case study strategy afforded the researchers an opportunity to develop a comprehensive understanding of Black students at two selected academic institutions, and it enabled a dialogue to develop in regards to the theoretical framework of Whiteness. In addition, the case study provided an avenue to intensely study the master and counter narratives of Black students' preparation to counsel White clients at two institutions (Stake, 2006).

Inclusion criteria required programs to (1) be predominantly White, (2) be accredited by the Council for Accreditation of Counseling & Related Educational Programs (CACREP), (3)

have at least two Black students enrolled in practicum or internship, (4) have at least two fulltime faculty that teach these Black students, and (5) have taken at least one multicultural counseling course. After an extensive literature review, Internet exploration, discussions with experts in the field, Human Subjects IRB approval, and preliminary correspondence with potential programs, the first author determined that four programs met the criteria for case selection. In addition, the researchers adhered to the ACA code of ethics throughout the research process. The researchers selected two programs for this study because of the access to potential participants, program structure, and curricula. The program spokespersons agreed to participate in the study under the pretext of anonymity. As a result, researchers used the following pseudonyms: Eastern State University (ESU) and University of Southern State (USS). Furthermore, to ensure the anonymity of the participants and institution, the researchers used pseudonyms regarding places and programs affiliated with ESU and USS.

Settings

At ESU approximately 71 students are enrolled in counseling graduate programs. The student racial demographics include White (N = 51), Black (N = 11), Asian (N = 3), Hispanic (N = 3), and Multi-racial (N = 3). In this study, student participants were seeking a master's degree in areas related to mental health counseling. At USS approximately 74 students are enrolled in counseling graduate programs, with the following racial demographics: White (N = 62), Black (N = 9), Hispanic (N = 2), and Asian (N = 1). Student participants for this study were in master's degrees in school counseling and college counseling.

Participants

To identify faculty and student participants at two predominantly White universities the researchers used purposive sampling (Hays & Singh, 2012). The student participant criteria

included the following: (1) identify as Black or African American, (2) currently enrolled in Practicum or Internship at a CACREP accredited Predominantly White Institution (PWI), and (3) completed at least nine credit hours. The student sample consisted of six female students, with a mean age of 24 years old (SD = 2 years). Three students were in the school counseling program at USS and three students were in the mental health counseling program at ESU. All students were currently in a practicum or internship experience and had taken at least one multicultural course related to counseling. All student participants identified as women.

The criteria for faculty participation included the following: (1) faculty member at a CACREP predominantly White university, (2) tenure track or full-time clinical faculty, and (3) teaching Black counseling master's students. The faculty sample consisted of two White female faculty members from ESS and two White male faculty members from USS, ranging from 49-64 years of age. All instructors had served as university supervisors for the student participants' practicum and internship courses.

Researchers

The primary research team consisted of one Black woman (first author), one White woman, and one White man. The first author conducted all interviews with the participants for consistency. The researchers bracketed their positions prior to data collection to reduce bias and enhance rigor of the study. Bracketing is a process, which allows researchers to discuss prior experiences, preconceptions, and previous knowledge relevant to the research topic before collecting and analyzing the data to decrease its interference with or influence on the participants' experience (Hays & Singh, 2012). The primary researcher team discussed experiences and personal views related to the Black student/White client dyad. Specifically, the

researchers examined the clinical, teaching, and supervision experiences involving Black students and White clients.

Data Collection

Interview Protocols. The researchers operationalized the three research questions into interview questions. The researchers designed the interview questions to ensure that the same basic lines of inquiry were pursued with each person interviewed (Creswell, 2012). The researchers used the CACREP standards to determine the core components of training students need to become culturally competent: course curriculum, practicum and internship experiences, and supervision during the initial interview. The core of the interview focused on how these three components addressed Black students' preparation to counsel White clients.

After reviewing current literature, the researchers deduced that Black students have substantially more challenges than their White counter-parts. Consequently, the researchers include questions regarding Black students' challenges as they related to the training components. The researchers developed several introductory demographic questions to solidify the students' and faculty's suitability for the study, as well as to begin the rapport building process and relax the student and the faculty before delving into the main interview questions. A scholar in the field of counselor education with qualitative research expertise edited the protocols for appropriateness, and the researchers incorporated the feedback into the final protocols. The primary researcher asked the student participants eight open-ended questions (see Appendix A), and asked the faculty participants ten questions (see Appendix B).

The students and faculty participated in two face to face and or phone interviews spanning one semester. The first interview lasted 60 to 75 minutes and focused on interview protocol questions. The primary researcher conducted a second interview three months after the

initial interviews and lasted 45-60 minutes. The second interview allowed the researcher to revisit all of the questions from the first interview, probe for more details, and gather data regarding differences in responses due to current experiences. The second interview allowed the researchers to share any information they deem relevant to the topic, which was not included in the first interview.

Syllabi. The primary researcher also collected artifacts in the form of course syllabi. The syllabi included the following courses: techniques of counseling, multicultural counseling, human development, practicum, ethics of counseling, and group counseling. The researchers used this artifact data for the purpose of triangulation, to ensure credibility of findings (Creswell, 2012; Hays & Singh, 2012). Consequently, the course syllabi were valuable in understanding the structure of courses, as well as verifying the course content. The researchers examined the course objectives, accreditation standards, class topics, and course assignments from the syllabi, and coded this content using the constant comparative method (Creswell, 2012).

Data Analysis

The primary researcher recorded every interview and had each of the interviews transcribed into a text format. The primary researcher sent each participant copies of the transcripts to verify the accuracy of the information. Two participants did add additional information, which was included in the data analysis process. The researchers identified *a priori* codes based on current literature prior to data analysis. The first author discussed and analyzed the codes with a peer reviewer to ensure accuracy. The peer reviewer was an expert in the area of qualitative methodology with over 15 years of expertise in qualitative research and writing. The researchers made changes to the codes in response the reviewer's comments and then selected

participant statements that signified the identified *a prior* code to assist with accurately coding all transcripts.

The two researchers (one of whom was the first author) tasked with coding the data received training in the constant comparative method and together they had over 20 years of experience in conducting qualitative research. By using this method, the researchers constantly compared coded data to each new piece of data to establish codes (Creswell, 2012). An initial comparison allowed the researchers to identify distinct data that aligned with the *a priori* codes and helped the researchers to identify additional axial codes. Using the a priori codes and axial codes, the researchers read and reread text, going back and forth between the text and code, coding, rereading, and recoding; this process is indicative of the qualitative research process and allowed the researchers to derive five themes related to the experiences of Black counseling master's students at a PWI.

Trustworthiness. In response to these assumptions and biases, the researchers took several steps to ensure the credibility and trustworthiness of the study (Hays & Singh, 2012). First, researchers piloted interview questions with two individuals knowledgeable about qualitative research and multicultural competence. The researchers also used bracketing, triangulation, a peer debriefer, and member checking.

Prior to collecting data, the researchers' positions were also presented and examined through bracketing (Hays & Singh, 2012). As such, the researchers shared personal values and interactions concerning marginalization, cross-cultural education, and privilege. For example, they discussed their experiences with oppression, as well as the impact of this oppression on their interactions with students. The researchers also examined predispositions and biases regarding students' of color preparation to counsel White clients in counselor education programs and the

impact these connections would have on the collected data. Specifically, the researchers discussed how previous interactions with counseling students exposed them to the lack of attention to cross-cultural dynamics. Subsequently, the researchers expected that faculty members did not address the Black student/White client dyad. The researchers acknowledged a bias in favor of addressing this dyad in not only multicultural courses, but throughout the curriculum. With these in mind, the researchers included several additional steps to increase the study's credibility.

The researchers used methods triangulation and triangulation of sources to compare interview and artifact data for the purposes of triangulating findings (Patton, 2002). This allowed the researchers to gain a deeper and clearer understanding of the preparation of Black students at two predominantly White CACREP institutions to counsel White clients. In addition, it allowed the researchers to understand what specific aspects of the courses address the phenomenon in question. The researcher used a peer debriefer to enhance the accuracy of the study by posing questions about the coding process, the findings, and the authenticity of the study to ensure that the interviews reflected the participants' voices and not the researchers'. In qualitative research, scholars recommend the peer debriefer review at least 20-25% of collected data, in this study the peer reviewer reviewed approximately 30% of the interviews in form of three faculty interviews and five student interviews (Creswell, 2012).

The researchers also used member checking to validate the data. Member checking took place on three levels based on Lincoln and Guba's (1985) guidelines for member checking. The first level occurred during the interviews. The primary researcher restated and summarized information shared by participants throughout the interview, thereby allowing the participants to correct any information that the interviewer misunderstood or add additional information for clarity. The second type of member checking occurred in the week following the initial and follow up interviews. The participants received a detailed written summary of the interviews and had the opportunity to correct any information that was inaccurate. The primary research sent a revised summary and transcript to the participants for a final review. The final level of member checking happened at the culmination of the study, where the participants reviewed the findings and provided feedback.

Findings

The researchers uncovered five themes: (1) relevant content excluded, (2) stereotyping experienced, (3) authenticity challenged, (4) counter spaces should be included, and (5) cultural sensitivity of faculty warrants increase. The first two themes illuminate microaggressions experienced by Black students. The third theme explains the challenges the Black students experienced in feeling the need to conform and alter their typical and genuine behavior to try to succeed and contend with the difficulties they experienced with White clients. The final two themes suggest strategies counselor training programs can use to cultivate an educational environment conducive to engaging in dialogues and facilitating experiences that address the challenges experienced by Black students; whereby, more competently preparing Black students to counsel White clients.

Relevant Content Excluded

Students and faculty from both universities noted that curriculum failed to include content specifically related to Black students' preparation to counsel White clients. Faculty and students provided several examples illustrating this point. A faculty member from USS stated, "I don't address [Black students working with White clients] ...A lot of times, I think the audience that I have in mind are more middle-class White students...So it's very possible that I have been

inadvertently short-changing our minority students." Another faculty member from ESU, expanded this notion, "I'm much more oriented toward looking at issues for White counselors working with minority clients; it's another subtle form of discrimination that we are not sensitive to the minority issues."

Students from both universities admitted that the coursework was designed by White theorists for White clients, which they found theoretically helpful in their work with White clients. However, the students also indicated that content addressing cross cultural dynamics and challenges with White clients was inequitable. For example, one student discussed how Black concerns with White clients were not addressed, "There is a focus on helping the White counselors learn how to deal with people who are different than they are, but when it comes to the Black counselors, it's not really talked about at all." Another student shared that faculty seemed to ignore the Black counselor/White client dynamic by taking the stance that the courses reasonably address White clients, stating, "theories are basically geared toward White clients, and that's all you need to know about White clients." One of the faculty participants also discussed his failure to address the minority counselor/White client dyna in his syllabus development,

Each time you lay out the syllabus, you're required to make some really tough decisions about where, over a 15 week course, where are we going to put in our emphasis? ... I often times really will put much more emphasis on minority cultures than I do on the majority culture.

In support of this notion, syllabi in both programs showed that the Black counselor/White client dynamic was not included. While course objectives in four of the course syllabi examined referenced diversity or multicultural interactions or competence, none of the syllabus specified course content that would address the topic. Furthermore, the course syllabi course assignments failed to specifically expect students to address the dynamics and interactions of White clients with Black counselors.

Students not only explained the lack of attention of this dyad in curriculum content, but they also discussed the lack of attention in supervision and internship experiences. One student at ESU discussed this lack and how it affected her supervision experience,

I put a lot of time and effort into structuring the session and no matter what I go in with the client would suggest that I do something else... I wonder if I wasn't black, maybe she would treat me differently...But I can't bring this up in supervision and my supervisor doesn't bring it up when viewing my tapes sessions so I just to deal with it myself but I don't feel comfortable.

A student from USS relayed how her supervision experience also failed to address the White client dynamic, stating, "I haven't really gotten any feedback on counseling White students even when I do feel like I am having difficulty with developing rapport or feel uncomfortable my supervisor doesn't approach that topic." Several other students explained that supervision and practical experiences did not address the dynamics with their White clients, noting, that the topic was "glossed over", "ignored", and "assumed to be a non-issue." Faculty responses were consistent with the responses of the students. The faculty participants indicated that they "took a general approach", "focused on the basic counseling skills", and "did not aggregate based on race" when providing supervision to Black students,

Stereotyping Experienced

All student participants indicated encountering racial stereotyping in interactions with White individuals and clients during their programs. One student from ESU explained explicitly how she was stereotyped by a White client: "They assume that because you're Black you know about gangs... It just makes me feel like people are going to assume that I know everything about being Black or that being Black automatically means I know about rap music or gangs or other things like that." Another student described how she experienced stereotyping by a White client during her practicum, stating, "One of the group members looked at me and seemed to think I was a member of the counseling group and had a drug problem...I could only wonder what role me being Black played in her assumption." A student from ESU also indicated that she experienced similar interactions with White clients, stating, "a White client who I was counseling assumed that I would know a popular rap song simply because I was Black...he made the comment 'you know what I'm talking about right, you listening to that type of music.""

Three out of four faculty participants, all of whom were White, admittedly stereotyped Black students as not needing instruction on how to work with the White clients. One faculty member noted, "One of my assumptions that may be erroneous is that minority students have grown up in a minority culture world, and know a lot about the majority culture. So I often really will put much more emphasis on minority cultures." While none of the faculty admitted to addressing the dynamic, three out of the four faculty members in the study acknowledged that Black students would probably deal with racism and discrimination from White clients.

Authenticity Challenged

All six student participants indicated that they experienced difficulties in being authentic with White clients. In accordance, the students remained silent, *code switched* (i.e. changing how they communicated when interacting with White clients), or tried to become a *model minority* (i.e., a person of color who emphasizes high achievement and education to be successful [Kaba, 2008]). Student participants indicated that they were silent because they

"couldn't discuss the issues," "didn't want to be seen as playing the race card", and "didn't know how to bring up the issues." One student from ESU explained how she felt "silenced" and "uncomfortable discussing difficulties with a White client because it didn't seem to be an issue that anyone else had or brought up." A student at USS shared similar sentiments, asserting, "I'm the only minority. They are all White students and that makes it kind of hard to open up and talk about difficulties with White clients...I don't want them to think I don't know what I'm doing."

Not only did student participants felt silenced and could not authentically address the concerns they had regarding White clients, they also code switched, whereby they changed their speech patterns and communication style in an attempt to experience acceptance and respect by White clients. Specifically, the students in the study expressed that they code switched to "represent their race properly", "sound intelligent", "really do counseling", "talk a certain way", and "sound like a counselor." One student from ESU demonstrated this concept stating, "With White clients I talk much more professional, because I need to prove through how I talk that I am competent."

In addition to code switching, four of the six student participants explained that they aspired to be a "model minority." They endeavored to prove that they were "just as good as others or better", while simultaneously ignoring the difficulties they had with White clients for fear of being labeled as "incompetent", "inadequate", or "inferior." A student from ESU elaborated on this notion, stating, "I kind of feel like I'm constantly having to make sure I'm just as good as the White counselors." Students from USS expressed similar sentiments. One stated: "You're always striving to do more. It's like you have to go above what everyone else does in order to be considered on the same level." Another explained, "Even when I'm not sure of something with a White client, I have to appear like I am sure."

Counter Spaces Should be Included

Counter spaces are interactions with individuals that allow Black students to enhance their learning while simultaneously validating in their experiences (Solorzano & Villalpando, 1998). All student participants stated they used counter spaces for support in dealing with issues related to counseling White clients. One student from USS shared how beneficial these interactions were: "I talk to other African Americans in the program if there are concerns related to working with Whites." A student from ESU expressed similar sentiments related to talking to other minorities in her program about difficulties in counseling White clients. While several of the students' interactions within counter spaces were helpful, they also revealed frustration regarding having to facilitate the development and use of counter spaces, in that they had to rely exclusively on individuals they sought out to negotiate experiences with White clients.

The faculty members appeared to understand the need for integrating opportunities for students to interact in counter spaces. One faculty member explicitly noted that they have referred students to faculty and staff of color for "supervision and support." In addition, several faculty members indicated that Black students may need to talk to individuals who "understand their perspective" or who "they feel more comfortable with." The faculty participants also discussed how counter spaces could provide them opportunities for "mentorship and role modeling."

Cultural Sensitivity of Faculty Warrants Increase

To embolden faculty to not only rely on counter spaces, student and faculty participants indicated that increasing faculty members' cultural sensitivity would be the next logical step, which in turn would potentially facilitate changes in course content and supervision interactions.

Faculty members at USS and ESU supported this finding. One faculty member stated, "The faculty members need to be sensitive to the [Black counselor/White client] issue, so the faculty member can bring up the issues." Participants explored several strategies related to helping faculty members become more sensitive to the student of color/white client dyad. Pointedly, faculty participants noted that "hosting brown bag sessions" with faculty, adding "multicultural competencies and accrediting standards that explicitly address this issue", "attending professional development opportunities" that will challenge "cross cultural perspectives", and examining the "function of privilege and biases" on course content could increase faculty member cultural sensitivity. A faculty member at USS also discussed the importance of intentionally in regards to broaching this dyad; she explained that, "Structuring assignments that address the dynamic might be the best way to address the dynamic. Sometimes, when you structure something, it takes some of the discomfort away...of the faculty member and student."

Related to course preparation, student participants explained how culturally sensitive faculty members need to "intentionally broach the White client dyad" in all courses. A student at USS explained, "In courses where cross cultural conversation are included, faculty need to the take advantage of these opportunities and address the dynamic...by including case studies and role plays that include the challenges Black counselors experience with White clients."

In addition, students also explored how culturally sensitive faculty could address the dyad in supervision interactions. A student from USS discussed the importance of considering racial differences in supervision, asserting, "Faculty could help determine whether or not it's appropriate to discuss racial differences and how to go about bringing it up." Consequently, culturally sensitive faculty that specifically "integrate assignments that address the client dyad", "examine their own biases", and "intentionally broach this dyad" can help prepare Black students to identify and address concerns they may experience with White clients.

Discussion

The purpose of this study was to: (1) explore Black students' counseling preparation in regards to counseling White clients, and (2) to examine the role their counseling programs contributed to their preparedness at two universities. To date, this remains an understudied topic. Therefore, this study provided insight regarding what preparation students have experienced in their counseling programs. In addition, this study offers insight into what challenges Black students experienced when counseling White clients.

Past research supported the findings that students in counseling programs experience stereotyping when working with White clients (Hernández, et al., 2010; McDowell, 2004). Both McDowell and Hernández et al. found that interpersonal difficulties and stereotyping within the counseling interactions hinder black students' academic potential and increase dissatisfaction with attendance at predominately-White universities. The findings from the current study suggest that programming does indeed fail to address the challenges that Black students experience when working with White clients.

If Black students leave their preparation feeling uncomfortable and without the appropriate training to address this discomfort in terms of counseling White clients, the Black students' curriculum may be considered incomplete. This can limit how these students perform on the job when working with White clients. Conversely, if counseling programs provide White students with specific opportunities to learn about working with minority clients, then White students are actually leaving more prepared to address the needs of a diverse client population than Black students are to counsel White clients. By not mentioning their feelings about and

their comfort levels working with White clients, Black students can erroneously lead their professors to believe that they do not have concerns or difficulties in regards to their work with White clients.

Black students in this study visibly struggled with having to conform to White norms to prove their competence with White clients. They found themselves silenced for fear of negative judgment. Black students also felt compelled to code switch when working with White clients and display traits of a *model minority* to garner respect. Current literature support such strategies, which indicates that Black students can only have similar privileges to White students, when they conform to White societal norms or sanctioned cultural practices (Ladson-Billings & Tate, 1995). However, these findings also suggest that such strategies may be burdensome and impede the student of color's training endeavors. Systemic and programmatic changes may be necessary to combat these oppressive experiences.

Implications for Educators

The current accrediting standards in counseling programs mandate that all counselor educators include course content that increases the cultural competence of students when working with "diverse groups nationally and internationally", and "diverse populations" (CACREP, 2009, p.10). Counselor educators' interpretations of the standards continue to overlook curriculum content that would be advantageous to the Black students' preparation experiences and interactions with White clients. To address this complex issue, accreditation organizations should include standards that explicitly assist Black students and other students of color (i.e. Latino, Asian American, Native American) in becoming competent and comfortable counseling White clients. Although revising the accrediting standards would be the most effective way to globally address the needs of Black students as they relate to White clients, counseling programs need to ensure that faculty in these programs understand cross-cultural counseling dyads to encompass White and non-White clients and understand how to address the difficulties that may arise with Black students. Training counselor educators to address the impact of the Black counselor's race within the counseling relationship with White clients will demonstrate that Black students' curriculum needs are as important as those of their White colleagues are.

In programs, faculty members can begin to operationalize content related to Black students working with White clients by creating opportunities for students to participate in interactions where professionals are addressing the dynamic of Black counselors and White clients. Providing opportunities where students can explore the role of race, racism, societal oppression, and discrimination toward the counselor will aid counseling programs in producing curricula that are relevant to the lives of Black students and other students of color (i.e. Latino, Asian American, and Native American).

Limitations of the Study

The strategies used to triangulate data only included interviews and course syllabi. Additional methods such as observations of counseling courses and supervision sessions may be useful for future research. Furthermore, the recruitment strategy limited this study. The researchers initially recruited the participants for this study because of the researchers' professional relationships with faculty members at both universities. It seems likely that these professors may have been more open to participating than average professors due to this relationship. Nevertheless, the participation of these individuals may have strengthened this study. As with all qualitative studies, researcher bias is a concern. The researchers had several experiences related to the studied topic, which were instrumental in their pursuing this line of research. As a result, the researchers bracketed their experiences and attempted to remain close to the data by using the participants' own words and a peer reviewer to ensure data analysis accuracy.

Recommendations for Future Research

More research is necessary to explore the impact of the interactions of White clients and Black counselors within counseling relationships. Additional studies are also necessary to explore the preparation of other students of color (i.e. Latino, Asian American, and Native American), to determine how their experience compares to Black students. Furthermore, examine the students' experiences at HBCUs. These studies could illuminate how counselor educators address the Black counselor/White client dynamic at universities that primarily serve Black students. In addition, the perspectives of White students, international students, and faculty of color (i.e. Black, Latino, Asian American, Native American) may illuminate this research phenomenon. The White client perspectives with regard to their interactions with Black counselors have the potential illuminate this phenomenon.

The findings from this study provided considerable insight into the impact of colorblindness and exclusionary practices and supported the need to address minority students' interpersonal concerns in regards to counseling White clients. In addition, the findings encouraged programs and faculty to reflect on the role of perpetuating a curriculum that inadvertently marginalizes and discriminates against minority students.

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Appendix A

Student Interview Questions

- 1. Please tell me about your current program and your status in the program
- 2. What is you ethnic and/or racial identity?
- 3. Tell a little about why you chose to respond to the interview solicitation
- 4. How well prepared do you think you are to counsel clients?
- 5. How well prepared do you feel you are to counsel white clients?
- 6. Do you perceive a need for preparation to counsel white clients?
- 7. What opportunities do you have to counsel white clients?
- 8. What challenges have you experienced as they relate to your earlier responses on curriculum and course preparation?

Appendix B

Faculty Interview Questions

- 1. How long have you been working at your current University?
- 2. What courses do you teach?
- 3. What is you ethnic and/or racial identity?
- 4. Tell a little about why you chose to respond to the interview solicitation
- 5. What Counselor Education program courses or curriculum activities do you perceive prepare minority students to counsel white clients?
- 6. How does your Counselor Education program's practicum or internship prepare minority students to counsel white clients?
- 7. How does your Counselor Education program's supervision prepare minority students to counsel white clients?
- 8. How does your Counselor Education program's faculty advising aid in preparing minority students to counsel white clients?
- 9. What teaching strategies and support do you think would be useful in training minority students to counsel white clients?
- 10. What opportunities do minority students have in counseling white clients?

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Pre-tenured Counselor Educators Engagement in Direct Counseling Service: Results of a National Survey

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Abstract

One hundred and fifty pre-tenured counselor education assistant professors participated in a survey regarding their engagement of direct counseling service (DCS). Both quantitative and qualitative data was analyzed. Participants reported significant restrictions on time and a lack of departmental support for DCS and a perception that DCS will not be valued within the tenure processes. However, the majority of pretenured faculty desired to engage in more DCS to maintain skills and enhance their teaching and scholarship. Data regarding the participation of DCS by pre-tenured faculty, and implications for counselor educators are shared.

Keywords: Counselor Education, Direct Counseling Service, Tenure Process, Counseling Practice

Entry into counselor education faculty positions is often full of uncertainty and unprecedented transition (Baldwin, Lunceford, & Vanderlinden, 2005). New tenure-track professors in academia are expected to demonstrate proficiency and progress in the areas of research, service, and teaching as components of their tenure processes (Austin & Rice, 1998; Hill, 2004). Pre-tenured faculty also faces the challenges of understanding the organizational structures and values, expectations for performance and advancement, and the history and traditions of their new campus settings (Hill, 2004; Sorcinelli, 1994).

Olsen and Crawford (1998) described the early years of the tenure process as elusive and ambiguous, where expectations change frequently. Pre-tenured faculty strive to find a sense of balance between professional and personal lives as they strive for the accomplishments necessary to achieve tenure. Work overload, insufficient feedback, inadequate resources, and lack of collegial support are significant challenges encountered by new faculty (Lease, 1999; Olsen, 1993; Olsen & Crawford, 1998; Olsen & Sorcinelli, 1994).

Due to the number of duties that counselor educators are required to complete, engaging in additional work, such as direct counseling service (DCS), can be challenging, and particularly stressful if required as conditions of their employment. Many new counselor educators feel pressure to seek licensure and maintain a direct counseling practice, but are unsure of how DCS counts towards tenure and how to fit DCS in their current schedule (Magnuson, Norem, & Wilcoxon, 2002; Olson, 1993). DCS can be beneficial to faculty and counseling programs because the experience informs teaching and supervision by providing a current understanding of the field (Abouserie, 1996; Nelson & Neufeldt, 1998; Nilson, 2010; Sternberg, 2012). Ethically, DCS is especially helpful in establishing credibility for those counselor educators who do not meet the minimum requirements in their state for licensure, particularly if they teach students who will be seeking licensure (Cohen, Morgan, DiLillo, & Flores, 2003; DiLillo, DeGue, Cohen, & Morgan, 2006; Himelein & Putnam, 2001). The purpose of this study is to understand pretenured counselor educator's participation in DCS, and perceptions regarding whether corresponding counseling departments support this professional activity.

Direct Counseling Service (DCS) and Pre-tenured Counselor Educators

Along with personal life responsibilities and the requirements of a new academic position, pre-tenured counselor educators may engage in professional service (e.g., direct counseling practice) and find ways to balance their time (Sorcinelli, 1994). The decision to engage in direct counseling practice may be a hiring requirement (e.g., obtain hours required for state counselor licensure), or a personal choice. While the demands and pressures on pre-tenured

faculty are beginning to be addressed in the literature (Austin & Rice, 1998; Hill, 2004; Magnuson, Norem, & Haberstroh, 2001; Magnuson, Norem, & Lonneman-Doroff, 2009; Magnuson et al., 2002; Magnuson, Shaw, Tubin, & Norem, 2004), we found a paucity of research in the field of counselor education specific to pre-tenured counselor educators engaging in direct counseling practice. Emphasis is given in the counselor education literature primarily to pre-tenured counselor educators navigating the tenure and promotion processes (Hill, 2004; Magnuson et al., 2001; Magnuson et al., 2009; Magnuson et al., 2002; Magnuson et al., 2004). However no attention has been given to how pre-tenured counselor educators enhance their own knowledge and skills through engagement in direct counseling service. New faculty often consider how direct counseling service might be assessed or valued in tenure and promotion processes, how they might attach an additional role to their already overloaded lists of responsibilities (Olsen, 1993), and how direct counseling services might distract or compliment the establishment of a research agenda (Abouserie, 1996). After exploring research on current student populations and generational effects (Nilson, 2010; Sternberg, 2012) in combination with the direction of current research on counselor education pedagogy (Nelson & Neufeldt, 1998), it is apparent that faculty's teaching and scholarship can be enhanced by direct counseling service (DCS) by keeping faculty current in the classroom with relevant examples of client trends and patterns, while also providing access and knowledge of available and needed research in the area of client care.

A Dilemma for Pre-Tenured Faculty

Engaging in direct counseling service as a faculty member is a complex decision for pretenured faculty. Many doctoral graduates of counselor education programs simultaneously receive their diplomas from academic programs only to face the formidable challenge of independently obtaining the requisite supervised postgraduate experience for state counseling licensure (Magnuson, et al., 2002). Pre-tenured faculty who desire to obtain a clinical license for counseling practice must learn how to be a counselor educator while concurrently making time in their schedule to engage in supervised direct counseling practice. The process of earning tenure Hill (2004) noted an inherent contradiction between the philosophical can be arduous. foundation of counselor education, a commitment from counselor educators to model balance, boundaries, and wellness to students and supervisees while navigating career paths full of stressors, insufficient feedback, inadequate resources, lack of collegial support, and unrealistic expectations (Austin & Rice, 1998; Lease, 1999; Olsen & Crawford, 1998). Hill noted that counselor educators' abilities to maintain balance and professionalism might relate to students abilities to do the same. Magnuson, Norem, and Lonneman-Doroff (2009) found that those faculty members who were still employed as counselor educators by the end of their sixth year were able to develop and maintain boundaries between their work and home life. Adding DCS to an already busy schedule can be a significant decision. Thus, for those pre-tenured faculty who are required or chose to seek licensure, the perceptions of support and knowledge of tenure requirements within their colleges and departments could shape their success.

While there little research in the area of counselor education and direct counseling service, in the psychology literature, the issue of pre-tenured faculty engaging in direct clinical practice has been more closely examined (Cohen et al., 2003; DiLillo et al., 2006; Himelein & Putnam, 2001). Cohen, Morgan, DiLillo, and Flores (2003), emphasized the importance of operating from a true scientist-practitioner model, meaning that direct counseling practice has the unique opportunity to inform teaching and scholarship. While beneficial, DiLillo et al. (2006) reinforced the challenge that the tenure clock does not stop while junior faculty engaged in practice or time-consuming activities related to licensure. Himelein and Putnam (2001) asserted that the best clinical research is informed by practice. When clinicians stopped practicing, research was likely to become divorced from the needs and concerns of real world practitioners. These authors further emphasized that an inexperienced (i.e., no applied experience beyond graduate school) clinician supervising clinical students raised a number of ethical, professional, and liability-oriented concerns. Himelein and Putnam reported that a clinical training program should encourage pre-tenured faculty to engage in DCS; however, support for faculty has not been reported.

The authors of this manuscript decided during our pre-tenured years as counselor education faculty to add direct counseling service to our responsibilities. Our anecdotal experience and interactions with fellow pre-tenured colleagues revealed that while many of our colleagues expressed a desire to engage in direct counseling experience, our fellow counselor educators were uncertain of how to balance DCS with current work expectations. The exploratory research encapsulated in this manuscript reflects our own personal interest in the symbiotic relationships between service, research, and teaching, and recognition that there is a paucity of research in counselor education that addresses pre-tenured faculty engaging in DCS.

We developed three research questions to organize our exploration of this topic. 1. What are the demographic characteristics of the pre-tenured Counselor Educators who engage and do not engage in DCS? 2. What are pre-tenured Counselor Educator's perceptions of departmental and institutional support for their engagement in direct client service? 3. What are the attitudes of pre-tenured Counselor Educators regarding their own engagement in DCS while being a full-time faculty member within a CACREP-accredited Program?

Since there has been a paucity of research completed on direct counseling service in counselor education, our exploration focused on understanding the work life of pre-tenured counselor educators who complete or do not complete direct counseling service. It was important to investigate how supported pre-tenured counselor educators feel by their institution and department to complete direct counseling service, and pre-tenured counselor educators' perception about completing direct counseling service.

Method

Participants

In this study, we created a population list of 560 assistant professors utilizing the list of 213 Council for Accreditation of Counseling and Related Educational Programs (CACREP) Accredited programs on the CACREP website. CACREP programs were selected to provide a reasonably accessible list of faculty to create a population sample. We conducted a web search of each Counselor Education program webpage to create a list of names and emails of assistant professors in counselor education. An electronic survey was sent to all 560 assistant professors resulting in 150 respondents (a 30% response rate after subtracting all of the invalid email addresses and recently tenured professors). Fifty-eight percent (n = 87) identified as female and 39% (n = 63) identified as male completed the survey. The age range of the participants was 30 to 65 years old with a mean age of 44 years old. The ethnicity of the participants were reported as Caucasian/European Descent 77% (n = 115), African American or African 9% (n = 14), Asian American 6% (n = 9), Latino/Hispanic 4% (n = 6), Biracial 2% (n = 4), Native American/Inuit 1% (n = 2), and Other <1% (n = 1).

Procedure

The authors developed a web-based survey to collect data focusing on three primary areas: (1) participants' perceptions of level of support to engage in DCS; (2) participants' attitudes toward working as a counselor educator and completing direct counseling service; and (3) demographic information. The perceptions and attitudes of participants were measured using Likert-type questions ranging from (5) strongly agree to (1) strongly disagree. Examples included; "Being involved in DCS is/would be an endeavor that is supported and encouraged within my profession;" and, "Counselor educators should focus primarily on scholarship, while practitioners should focus primarily on providing DCS." The authors measured participants' demographics using yes/no and short answer questions. In addition, the final question of the survey asked the participants to share any information about beliefs regarding DCS that were not addressed through the previous questions of this survey. This question resulted in lengthy responses from participants that served to create a significant amount of qualitative data. Fiftysix percent (n = 84) of the participants chose to provide written responses, and the vast majority of responses were five or more sentences in length. IRB approval was obtained from both the University of Wisconsin Oshkosh and Youngstown State University. All pertinent ACA and ACES ethical codes were followed.

The researchers distributed the survey through online survey software Survey Monkey. A pilot survey was sent to 20 pre-tenured Counselor Education faculty in order to create an initial assessment tool. The faculty members' feedback, including grammar and wording changes, was incorporated into the final version of the survey. We distributed the final survey to each of the 560 identified assistant professors as a Survey Monkey email link. After the initial email was sent, we learned that 37 participants needed to be removed from the sample as they had achieved tenure, were adjunct (non tenure-track) professors, or were teaching in other departments besides

Counselor Education. Twenty-four participants were removed, as the contact information listed on the corresponding department websites was outdated or incorrect. This left the researchers with a final sample of 499 counselor educators, 150 participated in our study by completing the survey (30% response rate).

Research Design

The authors utilized a survey design to collect the data. As noted by Heppner, Wampold, and Kivlighan (2007), when completing an initial investigation it can be useful to use a survey design. Using a survey approach can also serve in creating direction for future research. After the data were collected, a mixed method research model was employed to create a broader picture of the relationships between pre-tenured assistant professors and DCS. The mixed method research model included both quantitative and qualitative inquiry. The quantitative inquiry included analysis of demographics and comparisons in questions responses between those who are and who are not tenured. The qualitative inquiry included exploring the comments and additional information offered by the participants.

Data Analysis

Descriptive statistics were employed to analyze the quantitative data such as means, standard deviations, percentages to explore the demographic data, attitudes regarding engagement in DCS, and perceptions regarding support. Additionally, t-tests were used to explore the differences between those who provide DCS and those who did not, with different demographic characteristics. We employed a MANOVA procedure to examine if there were differences in attitudes and perceptions between those who did participate in DCS and those who did not. The qualitative data were analyzed following a constant comparative method (Strauss & Corbin, 1990; Lincoln & Guba, 1985). We analyzed the participant's comments by noting

themes and recurrences following guidelines by Strauss & Corbin (1990). Further analysis of the comments involved repeated coding, comparing, and disaggregating, which were followed by a re-aggregation of data according to thematic categories that emerged. When no additional or new categories emerged, it was determined that saturation had been attained. More detailed information regarding the quantitative and qualitative data analysis is included in the results section.

Results

Quantitative Analysis

Table 1 summarizes the demographics for those who did and did not provide DCS. It should be noted that any deviation from the overall sample *n* of 150 in totals, percentages or degrees of freedom, is due to a lack of response to that question in particular. The majority of respondents were younger than 45 years old; 60% of those reporting engagement in DCS and 70% of those reporting no engagement in DCS were under 45 years of age. Nearly half of the sample, 43% (n = 64), reported engaging in DCS at some level. Seventy-six percent (n = 49) of participants who reported engaging in DCS stated that they provided approximately 1-10 hours of DCS per week. Interestingly, almost half of the participants who reported engaging in DCS, 53% (n = 39), stated that they teach nine or more semester hours. Seventy percent (n = 105) of the participants reported holding counseling licensure or certification, meaning that 30% of the sample were unlicensed counselor educators. Forty-eight percent (n = 72) of the participants held the highest licensure possible in their states. Participants reported having an average of 9.5 years of DCS experience in their chosen emphasis.

The participants taught in a variety of program tracks with 41% (n = 62) in Community/Clinical Mental Health counseling, 37% (n = 56) in School Counseling, 7% (n = 10) in Marriage/Couples/Family Counseling, 7% (n = 10) in Doctoral Programs, 4% (n = 6) in Rehabilitation Counseling, 2% (n = 3) in Student Affairs, and >1% (n = 1) in College Counseling. Participants reported that they completed the following years of service in their current faculty position: 9% (n = 13) completed one year; 15% (n = 22) completed two years; 19% (n = 29) completed three years; 19% (n = 29) completed four years; 13% (n = 19) completed five years; and 17% (n = 25) complete more than 5 years.

Those who reported engagement in DCS as pre-tenured counselor educators also reported having more years of DCS experience in their chosen counseling tracks than those pre-tenured counselor educators reporting no DCS, t(136) = 2.59, p = .01. Fifty-two percent (n = 33) of pretenured counselor educators who reported current DCS engagement had between six and 15 years experience. Seventy-seven percent (n = 49) of current pre-tenured counselor educators reported delivering between 1 and 10 paid and or unpaid hours per week of DCS. Twenty-two percent (n = 14) of respondents reporting engagement in DCS indicated that they are currently unlicensed; the authors interpreted this to mean that these pre-tenured counselor educators are likely in the process of acquiring hours toward licensure or practicing counseling in a state not requiring a counseling license. Thirty-four percent (n = 29) of those pre-tenured counselor educators reporting no current DCS also reported not having a practice license; this led the researchers to believe that licensure is not a academic requirement for the position held by these respondents. There was also a significant effect for supervision, t(122) = 2.69, p = .01, with those pre-tenured counselor educators providing DCS also reporting more engagement in direct supervision with their students than those respondents reporting no DCS provision.

After examining the roles of respondents within their departments and universities, we found that those pre-tenured counselor educators providing DCS also reported teaching more credits per semester, t(136) = 2.83, p = .01 than those who did not provide DCS. The majority of participants, sixty-five percent (n = 49) of DCS providers and thirty-five percent (n = 48) of non-DCS providers, reported teaching eight or more credits per semester. The majority of participants noted that research is valued most highly in the tenure process at their respective universities (See Table 1). Approximately half of the research participants (49% for non-DCS providers and 45% for DCS providers) indicated that their departmental colleagues spend most of their efforts on research. In assessing their own schedules, respondents further indicated that they spend the majority of their time in research activities.

Table 1

	DCS $n = 64$		No DCS $n = 86$		
Gender	22	500/	07	0.40/	
	32	50%	27	34%	
Female	32	50%	57	66%	
Age	M = 45.	8, SD = 10.6	M = -	42.7, $SD = 9.3$	
Ethnicity					
Asian	4	6%	5	6%	
Latino/Hispanic	2	3%	4	5%	
African American/Descent	4	6%	10	12%	
Native American/Inuit/Indigenous	2	3%	0	0%	
Caucasian	51	80%	66	77%	
Middle Eastern	1	2%	0	0%	
Biracial/Multiracial	1	2%	2	2%	
Years Experience providing service	M = 11.5	8, <i>SD</i> =8.6	M = 1	8.4, <i>SD</i> = 7.7	
Employed off campus for Service					
Yes	20	31%	5	6%	
No	44	69%	81	94%	
Hours of Service per week					
-	M = 6.2	, SD = 6.2	n = 0		
		, SD = 2.5	n = 0		
Hours of Supervision per Week					
	M = 4.6	, SD = 6.2	M = 1	2.9, SD = 2.8	
		, SD = 0.2 , SD = 3.8		2.9, SD = 2.9 2.9, SD = 2.9	
Licensure					
Yes	50	78%	57	66%	
No	14	22%	29	34%	
Highest Tier	50	78%	38	44%	
Inglest Her	50	1070	50	11/0	
Higher Ed Employment Term	<i>M</i> = 4.4 DCS <i>n</i> =	Years, <i>SD</i> = 1.9 = 64		3.5 Years, $SD = 1.7$ OCS $n = 86$ table continues	

	DCS $n =$	= 64	No DCS $n = 86$	
Credits Taught per Semester				
0-3	4	6%	7	8%
4-7	14	22%	23	27%
8-11	24	38%	39	45%
12+	17	27%	9	10%
Blank	5	8%	8	9%
Highest Priority for Tenure				
Research	45	70%	64	74%
Teaching	17	27%	20	23%
Service	1	2%	1	1%

Perceptions of support for direct counseling service. Participants of this study believed their colleagues and departments would support their involvement in DCS (M = 3.4, SD 1.1); however, two items appear noteworthy. First, it appears that the majority of participants did not believe DCS would contribute positively to their tenure processes (M = 2.6, SD 1.1). Secondly, the participants did not perceive that their colleagues who do engage in DCS are substantially rewarded in their tenure processes for their DCS involvement (M = 2.6, SD 1.1). A further examination of the data for possible differences between the perception of support for those that do engage in DCS and those who do not engage in DCS yielded significant results; F (6, 131) = 3.5, p = .002; Pillai's Trace = 0.16, partial $\eta^2 = .16$ for the entire model. After assessing the follow-up univariate calculations, it seemed as though the majority of the effect is due to a significant difference between DCS providers and non-DCS providers in their perceptions that colleagues providing DCS are more highly respected; F(1,137) = 15.6, p = .001; Pillai's Trace = .16, partial η^2 = .16. Participants in this study who provide DCS indicate that their colleagues receive more respect if they are working directly with clients or students in the community. A Bonferroni Correction was used to control for inflated alpha due to multiple univariate calculations.

Attitudes regarding DCS. Respondents indicated that pre-tenured counselor educators should have the freedom to pursue DCS if so desired. Many respondents also seemed to indicate that DCS would positively impact their teaching and scholarly activities, while simultaneously earning them more respect and credibility as an emerging counselor educator. The participants' responses seemed to illustrate some conflict with desiring to engage in DCS, feeling as though DCS might drain them professionally, and uncertainty in how DCS might affect their time management towards tenure. The data were more closely examined for possible differences between the attitudes towards DCS for those that do engage in DCS and those who do not. This examination yielded significant results *F* (14, 123) = 3.4, *p* < .001; Pillai's Trace = 0.28, partial $\eta^2 = .28$ for the entire model. The follow-up univariate calculations yielded significant results in several areas. A Bonferroni Correction was used to control for inflated alpha due to multiple univariate calculations.

First, DCS providers were more likely to agree that DCS does not hinder their ability to complete their professional responsibilities; benefits their teaching and research; assists them in earning respect in their role as a counselor educator; is part of the professional role of a counselor educator; has the potential to be draining to their overall professional role; can take time away from other important tasks of being a professor if not managed properly; and that counselor educators should have the freedom to provide DCS (See Table 2).

Table 2

Significant *F*-tests for Univariate Follow Up Tests Between DCS and No DCS Means by Attitude

Response Stimulus	MS	F	Sig	partial η^2
9. Counselor educators should focus primarily on scholarship, while practitioners should focus primarily on providing direct counseling services.	10.0	13.4*	.00	.09
10. Providing direct counseling services would hinder my ability to engage in teaching and research as a counselor educator.	22.3	16.1*	.00	.11
11. Being involved in direct counseling service would benefit my role as a counselor educator.	6.4	16.0*	.00	.11
14. Providing direct counseling services benefits my teaching and course preparation.	9.0	12.6*	.00	.09
15. Providing direct counseling services gives me more credibility as a counselor educator.	8.8	17.5*	.00	.11
18. Continued experience providing direct counseling services is not necessary now that I am a counselor educator.	12.6	14.0*	.00	.09
20. Providing direct counseling services is/would be draining on my role as a counselor educator.	12.6	10.4*	.00	.07
21. Being involved in direct counseling service takes/would take time and energy away from other efforts that are necessary in advancing my academic career.	14.3	10.4*	.00	.07
Note. Pillai Trace = .28, $df = 14$, $p < .001$. * Degrees of freedom for each question would be * indicates significance at $p < .003$.	e noted as I	F(1, 137)		

Qualitative Analysis

As a final component of the survey developed for this study, participants were provided an opportunity to respond to the following prompt; "Please add any information about your beliefs regarding DCS that you were not able to address through the previous questions of this survey." Fifty six percent (n = 84) chose to provide a written response regarding DCS, and the majority of responses were lengthy (i.e., five or more sentences). It was apparent to the researchers that the depth and richness of these comments needed to be analyzed more closely. Using procedures derived from grounded theory analysis, participants' comments were analyzed in such a way that particular categories and themes began to emerge from the data (Morrow & Smith, 2000). It is important to note that while the data provided by the open-ended response was analyzed and core categories clearly surfaced, additional and subsequent data collection was not gathered in regard to these initial responses. Following traditional qualitative approaches; further interviews with participants would be conducted and additional data would be gathered, synthesized, analyzed, and conceptualized to construct an emerging theory (Charmaz, 2003).

In spite of the fact that qualitative analysis conducted in this research resulted from analysis of participants' comments from a single point in time, the data derived from this analysis were closely analyzed using open coding procedures to construct categories, properties, and dimensions. Axial coding procedures were employed to explore relationships between categories and to ensure further analysis of participant's open-ended responses.

Four major categories emerged from the analysis that represented participants' opportunity to openly address their meaning-making processes in relation to pre-tenured counselor educators' engagement in direct counseling practice. These categories were conceptualized as *time restrictions, DCS within the tenure process, skill/practice currency,* and

CE (*counselor educator*) *role/identity development*. These categories further contained properties in addition to dimensions that described them more fully. Axial coding revealed that participants' responses described relationships between the categories.

Time restrictions. *Time restrictions* was defined as the struggle with time and a sense that there is never enough time to complete all of the tasks required of pre-tenured counselor educators. The following participants' statements serve to illustrate *time restrictions:* "Clinical practice is very important, and does support teaching and research, but also does take time away from teaching and research." Another participant stated, "I believe DCS is important, yet institutions that only regard publications as the mark of a professor make it extremely difficult for someone to fulfill those obligations and hold practice outside of the university. There just isn't enough time in the day." A pre-tenured faculty reported, "Any time doing DCS would have to be done outside regular work hours, which then adds to the work week ... Just not enough time to also do direct service." While another stated, "I feel torn between wanting to get back 'in the field' and barely being able to find time to write up research for publication. I'd love to do more, but the demands on my (our) time is just so great!" Similarly another remarked, "Perhaps I didn't ask the right questions in my (job) interview, but with the emphasis on publications and grants, there is no time for clinical work as I'm already putting in way too many hours."

DCS within the tenure process. *DCS within the tenure process* emerged as a second category in the analysis of participants' written comments. As participants described their experiences and perceptions of DCS in light of being pre-tenured faculty members, they discussed how DCS was viewed from the perspectives of the systems in which they belong (e.g., department, college, university). It seemed as though pre-tenured faculty members viewed DCS as more of a risk, if they did not work in a system that was supportive of the practice. Two

distinct properties emerged within this larger category; *system support* and *DCS value perception. System support* was identified along a dimension comprising the extremes of positive support and lack of support. Positive support was mentioned, albeit rarely, in participants' comments. The following quote is an example that describes positive support: "I am fortunate to work beside colleagues who actually have their own little practice outside of the university, but I interviewed at many places where the faculty were quite cynical about my desire to eventually return to clinical practice at some point."

Lack of support represented the other dimensional extreme contained within the subtheme *system support*. Lack of support was also commonly noted in participants' comments: "Practice feels critical to my ability to educate, however there is no mechanism for valuing that in terms of promotion/tenure, so it has to be an add-on to everything else if I really care about it." Another participant stated, "In general, untenured faculty are told to publish and minimize any other activity. Tenured faculty members do as they choose. Some focus on teaching and others their private work. Many work on the side but try to hide their outside work. Clearly students appreciate applied work experience."

DCS value perception represented a second subtheme in the category *DCS within the tenure process.* This theme reflected how the study participants believed that DCS would be perceived or valued for tenure. As the following comments suggest, many participants expressing written responses seemed to feel that DCS was not valued as part of their tenure processes: One participant stated, "I would like to spend at least one day a week providing counseling services. This would not be advisable because service is not valued over research. As far as service goes, providing counseling in the community would not be valued as highly as a state or national leadership role in a professional organization. I have resigned myself to the fact that if I want tenure as a counselor educator, I cannot maintain my role as a counselor/practitioner." Another remarked, "I think providing direct service would be valuable as a counselor educator and wish I could, but my institution would not give me any credit for it and it would only hurt me in pursuing tenure. I hate this situation." Similarly, another counselor educator reflected, "I provide a lot of individual supervision to my students, and, until I achieve tenure, even that feels like a risky career move. While it isn't directly frowned upon, in our department, non-research-based activities aren't well understood."

Skill/Practice Currency. Skill/Practice Currency surfaced as a third category in the analysis of how participants experience and perceive their roles in relation to DCS. Participants strongly expressed the idea of staying "current" in the field in their written responses, and the desire to want to be perceived as current by others as counseling practitioners with the latest developments in counseling practice. Two distinct properties emerged within this category: legitimacy perception, and field connection. The following responses describe more fully the subtheme of legitimacy perception: "I am the only non-tenured faculty member, others in the program are tenured and do not consider scholarship, research, or outside counseling as valuable. I think it is valuable to students to actually see counseling from the initial session to termination. I think that direct counseling by faculty should be given more weight; professors in the med school still practice. I think it does lend credibility to what we talk about and do." Another participant stated, "I think counselor educators, at least those involved in practicum/internship, supervision at the doc level and other clinically based courses, should have more experience in counseling. I also see evidence that strong clinical skills are devalued, both in hiring practice and reward systems. Having a year or two of experience is not sufficient, in my view, to adequately train counselors for today's marketplace ... I firmly believe that you cannot be as

effective a counselor educator if you are not continuously and simultaneously involved in the provision of DCS."

Field connection represented a second subtheme within the category skill/practice currency, and varied along the dimension of current and outdated connections with the counseling field at large. This subtheme reflected a number of participants' comments that skills and techniques become easily outdated and ineffective if they are not practiced or regularly used. The following comments further capture the *field connection* subtheme along the current dimension: One participant stated, "Seeing clients is essential to my ability to stay 'fresh' in the field and be 'current' in my teaching." A participant stated, "Being a provider of mental health services helps keep me 'fresh' in the profession - and increases credibility with my students." Similarly another stated, "I am ashamed that counselor educators are not required to practice at least 5 or 10 hours per week. Rather than allowing faculty to teach four courses per semester - so their skills as a practitioner or efforts as a researcher are hindered. We should all be required to practice. Our profession is not like others; either you use it or you lose it."

In contrast, the comments that follow serve to reflect the *field connection* subtheme along the dimension of outdated: "At our university we have several faculty members who have not 'practiced' in over 10 years. The students frequently comment on the fact that they do not feel that these individuals 'get it' and report in some of our 'clinical sections' that the faculty member's perspective is sometimes not current to today's cultural and societal based shifts in the fields of both community and school counseling." While another pre-tenured faculty reflected, "Nothing is worse than a professor telling stories about what counseling and therapy was like 20 years ago (the last time s/he saw a client). Staying current in the field always has to include some amount of providing therapy or counseling."

CE (counselor educator) role/identity development. CE role/identity development represents the final category reflected in participants' written responses. This final category embodies a number of responses that identified DCS as an integral component of who they see themselves becoming as emerging counselor educators. In addition, analysis revealed the properties of modeling and symbiotic relationships as further describing counselor educator role development. Essentially, *modeling* represents that pre-tenured faculty should not only talk about being a counselor to their students, but also make every effort to develop their own skills through DCS. The following statements demonstrate modeling in relationship to roles as a counselor educator: One participant stated, "I absolutely, positively believe that counselor educators should be required to be licensed in the state in which they teach. What kind of a role model are we if we don't - that gives the message to our students 'Do as I say not as I do.' I have very strong feelings about counselor educators who teach others how to be counselors but then don't practice themselves." A pre-tenured counselor educator reported, "I am still settling in to things but my goal is to return to practice in my community within four years. Yes, it will be hard but I am committed to doing this. I see it as essential. I can be a good role model in the classroom but it doesn't stop there and any counselor who believes it does, doesn't fully understand their professional identity." Another participant remarked, "The most influential role models in both, my master's and doctoral training programs were those counselor educators who kept their skills and community awareness current through the provision of DCS. I intend to follow their lead and to be back in the field practicing during my second year here. It is a priority for me."

Symbiotic relationships represented a second subtheme within the category of CE role/identity development. In essence, the subtheme of symbiotic relationships captures the idea

conveyed by participants that engagement in DCS has the potential to positively affect teaching and research and vice versa. The following comments reflect the symbiotic relationships subtheme: "I find myself getting involved with the community agencies but in ways that my students can participate and get hands on experience prior to field placements!" Another remarked, "It [DCS] benefits every single class I teach as I use examples from that day and the students can follow along (ethically) with my cases." While another stated, "Personally, I believe there is a reciprocal relationship between research, practice and teaching. Each function has the potential to improve the other." Finally, one participant reinforced the value of direct counseling service, "It [DCS] significantly affects my teaching knowledge and pedagogy. I miss it drastically and the longer I am away from it, the more I feel out of touch with reality."

Discussion

In this study, 150 pre-tenured counselor education assistant professors from institutions across the United States provided responses to a questionnaire designed to gauge how they perceive and are engaged in direct counseling service. After assessing the collected responses through both quantitative and qualitative lenses, particular themes became evident.

Participants consistently reported struggles to find balance in their positions, primarily in regard to managing internal politics within their departments or universities, developing new courses, and finding adequate time to develop and pursue scholarship. Assistant professors who reported being mostly dissatisfied in their positions across time were those that experienced a sense of workload strife among their program faculty, incongruence in what was expected of them, insensitivity to their personal needs, and lack of support leading to feeling isolated. Conversely, assistant professors in counselor education that reported greater satisfaction over time were those who felt supported and mentored, who felt a sense of "fit" with their

departments, institutions, institutional location, and who had a clearer idea regarding the expectations and requirements for tenure and promotion (Magnuson et al., 2004).

There appears to be a true desire on the part of respondents to engage in direct counseling service. This is consistent with the literature that has described the desire of new faculty to enhance their own clinical skills and, if possible and applicable, also work toward a level of counseling licensure within their states (DiLillo et al., 2006; Himelein & Putnam, 2001). The current research also identified some significant themes related to how pre-tenured counselor educators view or experience DCS which include: feeling significant restrictions on time to be able to pursue DCS; lack of departmental or institutional support to pursue DCS; little value placed on DCS within tenure processes; the idea that skill and practice remain current as a result of a DCS connection; the sense that DCS lends credibility to both teaching and research endeavors; and feeling that DCS plays an important role in the evolving identity of counselor educators who are new in their faculty careers. While the vast majority of respondents desired more opportunity for DCS, most also expressed feeling resigned to the fact that they would need to wait until receiving tenure for increased freedom and opportunity for engaging in DCS.

Limitations

The convenience sample, rather than a random sample for this current research needs to be taken into consideration when considering generalizability. The nature of the research may have influenced those who chose to respond; in other words, the topic of this research may have naturally drawn respondents who felt strongly about the DCS while those who felt less compelled by this topic may have chosen to not respond. This can obviously skew the data and the implications of the ensuing results. While we took precautions to avoid bias, the researchers were all conducting DCS during the time this study so our interpretation could have been influenced the way we interpreted the results. Lastly, while rich qualitative data was analyzed by the researchers, it is important to note that since this was an exploratory survey with only one round of comments assessed, the categories could be developed further. In future research, a qualitative study could be conducted to better understand the emerging categories that could be assessed through additional interviews.

Implications and Recommendations

The results from this current study may offer guidance for counselor educators intraining, applicants for new counselor education positions, new counselor educators, and veteran counselor educators. The findings provide opportunities for those in doctoral programs to examine their expectations for the field and determine if their expectations are realistic. The findings support properly researching the positions when applicants are applying to determine the culture and expectations of institutions, colleges, and specific counselor education departments. Applicants might consider approaching their selection process as collaborative, where they are interviewing departments at the same time that they are being interviewed. While there is obvious eagerness on the part of counselor educators to secure positions upon graduation, care should be exercised in making an effort to find an appropriate "fit" for employment (Magnuson et al., 2009).

During interview procedures, topics that applicants might explore include workload; expectations for scholarship, teaching, and service; specific requirements and expectations for tenure and promotion; program philosophies; potential for mentoring; working environment and dynamics within the department; and opportunities for DCS. For current pre-tenured counselor educators, it appears from this research that there are colleagues in the field that have created opportunities for DCS to compliment teaching and research/scholarship endeavors. While it can be a challenging endeavor, it appears that there are pre-tenured faculty who have made convincing cases for building DCS into their tenure processes.

The journey toward tenure can be challenging and complex (Austin & Rice, 1998; Cohen et al., 2003; Himelein & Putnam, 2001), and the existing research indicates that new counselor educators are often expected to "hit the ground running" (Magnuson et al., 2001). New faculty are also faced with figuring out the roles that they are required to serve in academic settings, in addition to navigating the tenure and renewal processes within their institutions. The current research reflects that there are a number of perceived benefits and challenges for pre-tenured counselor educators who engaged in direct counseling services.

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Infusing Postmodernism Into Counseling Supervision: Challenges and Recommendations

W. Matthew Shurts

Abstract

In this manuscript, two postmodern approaches to counseling supervision are examined: Narrative supervision and solution-focused supervision. Postmodernism is defined, key themes within the postmodern supervision literature are identified, a brief review and critique of the literature on both supervision approaches is provided, and implications for the practice of supervision and future research/scholarship areas are discussed.

Keywords: Supervision, Narrative Supervision, Solution-Focused Supervision, Counseling Supervision

Similar to the counseling process, the nucleus of individual supervision is the interpersonal alliance (Inman, 2006). As such, many processes associated with counseling are similar to those in the supervisory relationship. This includes the impact of philosophical thought, a discipline that has influenced psychological and counseling theories for decades. For instance, Dopson and Gade (1981) stated that Kierkegaard's philosophy influenced the counseling approaches of Rollo May as well as Carl Rogers. The artful aspect of effective counseling often is guided by the broad guidelines offered by philosophical views of life and nature. In recent years, postmodern tenets have modified how clinicians and supervisors approach their roles as helper and advisor, respectively. Postmodern counseling approaches such as solution-focused therapy have shifted the attention away from problems. These strengths based methods are now also applied in supervision (Knight, 2008).

Postmodernism is based on the assumption that there is no universal "truth" in the world (Hansen, 2002). The socially formulated discussions in which a person participates leads to his or her unique view of their world (Campbell & Ungar, 2004). Unlike modernists, postmodernists do not place absolute value upon rational, objective, and positivist (i.e., empirical) traditions (Ungar, 2006). There is a focus on meaning-making at the individual level with the assumption that their culture is made up of an infinite variety of equally valid viewpoints of the world. The result is a rejection of the epistemological assumptions of several centuries of positivist inquiry (Hansen, 2002; Rosenau, 1992). Postmodernists contend that reality and truth cannot be measured empirically because they are constantly changing entities constructed by each individual through his/her language and interactions. In addition, postmodernists reason that no individual's perspective is any more truthful than another's, as both are accurate social constructions based on life experiences.

Because the field has not produced indisputable truths based on pure objectivity, counseling methods are fundamentally narrative explanatory structures (Hansen, 2002). Supervisory methods may be viewed similarly (Whiting, 2007). Although some empirical research has been conducted on the topic, the supervisory experience invariably depends on the individual characteristics of both supervisor and supervisee, as well as the unique dynamics created in their developing relationship. In both roles, helping clients or supervisees, to better identify, appreciate, and utilize their skills is a fundamental goal. Indeed, encouragement appears to influence multiple supervision techniques (McCurdy, 2006). Assisting clients or supervisees to reflect upon their acquired and inner wisdom to formulate viable solutions to clinical dilemmas, rather than providing answers, helps them to take ownership of their conclusions and to better recall the insights that led to them. According to Whiting (2007) supervision is

complex and involves a multileveled dialogue, and numerous stories, which makes postmodern approaches a good fit for meeting these fundamental supervisory goals. The application of postmodernism in supervision allows supervisees to make their own meaning, while collaborating with the supervisor.

Accepting that each person's realities are uniquely subjective, and equally relevant to others' interpretations of life happenings, is essential to respecting clients' points of view (Taylor & Loewenthal, 2001). Postmodern philosophies emphasize these unique, subjective viewpoints, and thus, are well suited for counselors whose therapeutic interventions adhere to here-and-now dynamics. Due to the ever-evolving happenings of therapeutic and supervisory encounters, counselors and supervisors can benefit from the flexibility and open-mindedness offered by a postmodern approach.

Postmodern Approaches to Supervision

The counseling literature has increasingly focused on graduate supervision (Moss, 2009). As the demands for more trained clinicians and educators increase, so too does the requirement for more advanced training and effective supervisory methods. Indeed, clinical supervision is viewed as one of the most integral components of developing essential counseling skills among counselors-in-training (Hein, Lawson, & Rodriguez, 2011). Traditional models are consistently reviewed for efficiency and effectiveness. By definition, supervision involves a clear power differential between advisor and advisee (Bernard & Goodyear, 2014). The supervisor's position, experience, and expertise place her/him in an elevated role. Just as postmodern counselors seek to help clients construct their own answers to life difficulties, thus encouraging ownership of solutions, postmodern supervisors harbor a similar ideal (although this is not exclusive to postmodernism).

Many supervisors take an active role in working with advisees, often asking more directive questions and more readily offering specific advice than they might with a client in a counseling setting (Bernard & Goodyear, 2014). The rationale includes the need for novice clinicians to efficiently develop the tools necessary to help clients in very real need. Working with supervisees to effectively construct their professional identity includes balancing flexibility for self-exploration while allowing for more prescriptive instruction should the need arise (see Bernard's [1979] Discrimination Model). Given the evaluative role required of many supervisors, the power differential in supervision can be more pronounced than the model adapted by many postmodern counselors who strive put clients on equal power ground as themselves.

A paradigm shift has been evident in the supervision literature (Bernard & Goodyear, 2014). Specifically, three themes seem to emerge when examining postmodern supervision approaches. First, there is an increased focus of the importance of language in supervision, a central tenet of the postmodern paradigm (Presbury, Echterling, & McKee, 1999). Second, the value of using strength-based approaches over deficit-based techniques (i.e., highlighting and correcting mistakes) in supervision is receiving more attention (Bernard & Goodyear, 2014). This reinforces the postmodern notion that no one perspective is "correct." Finally, more and more authors are arguing for the removal of hierarchy within the supervision relationship (Behan, 2003). Again, this demonstrates a belief that supervisors have no greater access to truth than their supervisees. The emergence of these themes will become clearer as the two postmodern supervision approaches are described.

Clinical Applications of Postmodernism

Clinical approaches (e.g., person-centered, systems) often are applied as a framework for the practice of supervision (Bernard & Goodyear, 2014). This is especially true within marriage and family counseling supervision, where supervisors often select systems interventions to intentionally match their supervisees' theoretical approaches, in an effort to create isomorphic learning opportunities (Carlson & Lambie, 2012). Additionally, a number of writers have examined the impact of postmodern thought on the counseling profession (Hanson, 2010; Naden, Johns, Ostman, & Mahan, 2004; Xu, 2012). This paradigm shift has prompted a variety of new models and approaches for clinical work (Davidson, 2014). As such, new strategies also are being applied to the process of supervision. Although much of this postmodern supervision has occurred within the field of marriage and family counseling, authors are applying postmodern thought and approaches to individual supervision as well (Lyon, 2006; Ungar, 2006).

Pure postmodern approaches assume that the solutions to supervisees' challenge dwell in part within his or her intuition (McCurdy, 2006). Similar to those clients whose issues may dictate more direct interventions, there are times when prescriptive approaches are vital to a supervisee's development. Intuition, while an invaluable resource to clinical decisions, may not by itself be sufficient to guide novice counselors to effective clinical responses. Expert knowledge and concrete direction are sometimes required. While this is generated through experience and continued study, supervisees need a level of mastery in order to ethically treat their client population. Supervisors must consistently balance the need to directly address potentially harmful levels of therapeutic ignorance with the great benefits of permitting supervisees to engineer their own clinical insights – thereby increasing the likelihood that they will take ownership of, and retain, their acquired knowledge (Whiting, 2007). For faculty and/or field supervisors of master's and doctoral counseling students, as with similar relationships in other professional environments, a balance between traditional supervisory standards and their postmodern counterparts such as Narrative Supervision and Solution-Focused Supervision may be effective (Moss, 2009).

Narrative Supervision

Both narrative therapy and supervision are approaches rooted in the idea that individuals define reality by the stories they live and share with others (DeSocio, 2005; Neimeyer, 1993). Practitioners empower clients and supervisees by emphasizing responsibility for life realities. According to Anderson and Vandehey (2006), narrative therapy "has extended the idea that individuals are authors of their own lives" (p. 171). This approach involves an examination and sometimes creation of stories clients tell themselves and others about who they are and how they interact with others. Counselors try to enter their clients' individualized narrative world and offer suggestions and/or modifications that may lead to an improved story of their life (DeSocio, 2005; White & Epson, 1990). The same process can be applied to supervisory relationships.

As with other postmodern techniques, the narrative approach places emphasis on the language chosen by clients, supervisees, and supervisors. For example, narrative supervisors argue that the label "supervision" suggests a worldview of a developmental hierarchy of vision, experience, and knowledge (Carlson & Erickson, 2001; Edwards & Chen, 1999; Speedy, 2000). In addition, narrative supervisors believe that the hierarchical emphasis present in most supervision undermines the collaborative abilities of the process and inhibits the growth and creativity of the supervisee (Edwards & Keller, 1995). As a result, such supervision tends to be deficit or pathology-based which fosters dependence upon the supervisor for the "correct" answers and viewpoints (Carlson & Erickson, 2001). Narrative supervisors strive to give voice to the supervisee, drawing out possibilities from them whenever possible.

Postmodern supervisors are challenged to construct questions that are less instructive and designed to extract supervisees' knowledge (Ungar, 2006). Although there are many ways to work with supervisees' stories (all of which would constitute narrative interventions), several models and techniques have received specific attention in the narrative supervision literature. In what she labeled a "work in progress," Speedy (2000) presented her rationale for providing a discussion of narrative approaches to supervision arguing,

The traditional literature of counselling supervision seems to lack uncertainty and timidity. It is mostly written from the supervisor's, or supervisor trainer's, perspective and seems to be full of models, structures, checklists and frameworks. It is not a humble or exploratory literature. There are few stories and little is written from the client or supervisee's standpoint (p. 428).

She challenged supervisors to adopt a stance of naïve curiosity toward their supervisees and to ask deconstructing questions to reflect on supervisee stories.

Carlson and Erickson (2001) described one such approach for supervision using this narrative perspective. The three main supervisory practices or techniques: (1) experiencing privileging practices (honoring supervisees' personal experiences), (2) re-membering practices (helping supervisees affectively and intellectually re-experience a return to membership with significant relationships in their lives), and (3) creating communities of concern (fostering networks of other counselors with whom they can shares stories and experiences). Carlson and Erickson also provided practical steps to help supervisees develop their counselor-identity stories thus helping them develop their preferred style of interacting with clients. Lists of privileging and re-membering questions, which can be used to facilitate conversation, exploration, and storying and eventually, a community of concern, accompany these "steps".

By aiding fellow counselors to identify their own narratives, while adhering to his or her chosen identity concept, postmodern supervisors model compassionate and thoughtful intervention (Ungar, 2006). Bob (1999) presented additional suggestions for the application of narrative supervision and case formulation. She argued that supervision should be approached as a dialogue examining the different realities of the client, supervisee, and supervisor. After sharing these perspectives, "a new story can be developed that will be useful to the client and helpful to the supervisee in sitting with the client" (Bob, 1999, p. 152). Because the viewpoint of the supervisee is considered as valid as that of the supervisor, the supervisee must find the new narrative to be compelling, appropriate, and useful before he/she is asked to use the story in case formulation and eventually in session.

In addition to these more global supervision applications, narrative techniques also have been suggested when working with specific populations. For example, Etherington (2000) recommended the use of a narrative approach when supervising counselors who work with childhood sexual abuse victims. She noted that counselors often struggle to express their feelings about, reactions to, and plans with these clients. Etherington offered narrative recommendations (e.g., "exploding" words or images on to a piece of paper) that may allow supervisee to begin investigating these areas and developing their narrative rather than demanding/expecting a coherent narrative about traumatic events right away.

Proponents of narrative supervision consistently argue that supervisors should attempt to minimize, if not remove the hierarchy within the supervisory relationship. For example, Thomas (1994) noted that supervisors should attempt to honor the request of supervisees to "supervise us or evaluate us; not both" (p. 12). Such views negate the needs of interns whose lack of experience precludes their having the intuition required to construct viable solutions to clinical

dilemmas. Other supervisory models help address this deficit. Firth and Martens (2008) contended that "academic developers should restrict themselves to working with the practices that constitute the role and responsibilities of the supervisor as instituted and sanctioned by the university" (p. 287). In many situations, especially academia, clinical supervisors are charged with evaluating and/or grading their supervisees. This process serves a number of purposes, not the least of which is making sure supervisees are prepared for professional practice (American Counseling Association, 2014). This duty to the profession should not be minimized—To do so could result in unprepared and/or inappropriate clinicians harming their clients.

Moving from supervision to co-vision or another model where counselors are viewed as the equal of the supervisor (e.g., White, 1997), leads to questions such as: Why is a supervisor necessary? What is the reason and/or value for having a more experienced clinician who has been trained in the practice of supervision as a resource? Otherwise, supervision would be nothing more than consultation. Moreover, the ethical and legal responsibilities that come with one's supervisory status could be minimized. There are times when supervisees do not have the knowledge or skills to answer their own questions, create an appropriate narrative, etc. In these cases, the supervisor has an ethical responsibility to own his/her expertise and help their supervisee (Whitening, 2007). Should they fail to do so, client welfare could be jeopardized.

It should be noted that several authors within the postmodern supervision literature have acknowledged this responsibility (e.g., Wetchler, 1990; White, 1997). Bernard and Goodyear (2014) cautioned that relying only on postmodern models will lead supervisors to miss important information about their supervisees because they will be thinking about their supervisee's therapeutically rather than in an educational manner. However, very few authors have explicitly examined when to follow postmodern models and when to move into more of a didactic mode.

Prouty (2001) offered an empirically-based decision making model for using hierarchical methods versus collaborative methods within postmodern supervision. In addition, Wetchler's (1990) model contained a clinical education component for teaching skills that supervisees lacked based on assessments gleaned from first using solution-focused interventions. These approaches are examined in the following section.

Solution-Focused Supervision

Time constraints have accentuated the need for brevity in both counseling and supervision systems (McCurdy, 2006). As such, solution-focused approaches may serve as a prominent model for contemporary clinicians and advisors. As with the other postmodern approaches discussed above, much of the writing involving solution-focused supervision originally came from the family counseling/therapy literature (e.g., Marek, Sandifer, Beach, Coward, & Protinsky, 1994; Selekman & Todd, 1995; Thomas, 1994; Wetchler, 1990). However, authors have applied the model to supervision within non-family contexts (Fowler, 2011; Thomas, 2013) and discussed the benefits of such supervision regardless of context (Juhnke, 1994; McCurdy, 2006; Presbury, Echterling, & McKee, 1999). This approach to supervision grew out of family therapy models (which also have been applied to individual counseling) termed "solution-focused" (e.g., de Shazer, 1988, 1991), "solution-oriented" (e.g., O'Hanlon & Weiner-Davis, 1989), and "possibility therapies" (O'Hanlon & Beadle, 1999). The primary tenet of these approaches both in therapy and supervision is the amplification of and subsequent focus on strengths, competencies, and successes of individuals (McCurdy, 2006; Triantafillou, 1997). To quote Thomas (1994), "this model assumes that therapists have the resources to solve therapeutic dilemmas" (p. 13).

Wetchler (1990) and Marek et al. (1994) both proposed models of solution-focused supervision. Wetcher's model consisted of two components, the solution focus and clinical education. The majority of supervision is spent identifying the supervisee's successes and exceptions to patterns of difficulty. Using these positives as a base, the supervisee is encouraged to explore ways to increase these successful behaviors/interventions. The clinical education piece only is used when this solution focus alone cannot address supervisee-generated concerns (i.e., goals and questions for supervision).

Marek et al. (1994) built upon this model by adding a more practical framework consisting of goal setting, identifying exceptions, and monitoring progress through scaling questions. The authors focused on the process of goal setting noting that clear, concrete, behavioral goals are essential in this approach so both supervisees and supervisors can assess movement and development. In addition, de Shazer's (1988) "miracle question" is proposed as a tool for identifying goals and helping supervisees envision a session where they are able to help resolve their client's issues. By exploring a detailed, behavioral picture of such a session, the supervisee can identify the aforementioned concrete goals to work toward.

Selekman and Todd (1995) reiterated many of the interventions that fall within the scope of solution-oriented supervision (e.g., scaling questions, miracles questions, doing something different). However, these authors did add a focus on presuppositional questions and language within supervision. This technique involves the intentional use forward-thinking words of success like "when" and "will" during the questioning/discussion of supervisee goals. This method has been termed "change talk" and the "language of change" within the solution-focused literature (e.g., de Shazer, 1988, 1991; O'Hanlon & Weiner-Davis, 1989; Pearson, 2006). In addition, several additional techniques (e.g., future-oriented questions, externalizing the problem,

pattern interruption) also were put forth by Selekman and Todd (1995). This is in keeping with the focus on technique and interventions within the body of solution-focused supervision scholarship.

Supervision from a solution-focused perspective includes the supervisor facilitating the supervisee to explore his or her attributes, skillsets, and resources (McCurdy, 2006). Marek et al (1994) noted, "all supervisees, despite their theoretical orientation, can come to understand their own unique strengths and abilities as therapists through the solution focused supervision model" (p. 60). That same year, Juhnke (1994) also argued that this approach could be applied when working with clinicians who do not take a solution-focused approach to counseling. In addition, Juhnke was the first author to propose a model of solution-focused supervision for clinicians working with clients on an individual rather than marital or family counseling basis. Although his model and techniques do not differ significantly from those offered within the family therapy solution-focused supervision literature, this application outside of marriage and family supervision created the first explicit attempt to use solution-focused supervision in a non-isomorphic fashion.

Proponents of solution-focused supervision, like other postmodern approaches, present strong philosophical arguments for its contentions (Bernard & Goodyear, 2014). However, there has been a relative dearth of empirical evidence to support its conclusions. As a result, most of the writing regarding solution-focused (and narrative) supervision has been theoretical in nature. However, it should be noted that a similar lack of research has been a criticism of the supervision field in general (Bernard & Goodyear, 2014). Some authors offered case studies/reports as illustrations, but sometimes there is resistance to the idea of conducting research on postmodern approaches, with some authors suggesting that since there is no "truth," it is not possible or

necessary to defend their methods scientifically/empirically (Edwards & Chen, 1999). Strong and Gale (2013) confirmed this thought by reporting that there continues to be resistance within the postmodern clinical movement vis-à-vis research.

Like existentialism, postmodernism provides important philosophical theories, approaches, models, and techniques for understanding the human condition and how best to accentuate its attributes and confront its shortcomings (Hoffman, Stewart, Warren & Meek, 2009). Both approaches, however, may lack the level of pragmatic application some supervisors want and/or need to serve as independent alternatives to somewhat more established clinical and supervisory practices. Many supervisors may be hesitant to apply existential-phenomenological approaches due to the fact that they don't provide readily available manuals (Milton, 2009).

While the lack of empirical support for its practices is apparent, postmodern thought is not alone in this limitation. According to Rayner and Vitali (2014) existential-phenomenological therapies continue to lack empirical data to confirm its effectiveness. Although the number of studies has increased in recent years, more literature is needed to examine the efficacy of supervisory practices in general. Bernard and Goodyear (2014) have noted the need for research into the supervision models that have been accepted and practiced for years (e.g., developmental models).

Postmodern philosophies can be integrated successfully into effective and meaningful supervisory experiences. There are opportunities to blend the many benefits of postmodern supervisory approaches with those from more traditional models. According to McCurdy (2006), "the supervisory process is collaborative, exploratory, developmental, and strengths-based" (p. 146). The supervisee's intuition is considered an invaluable resource. However, in order for supervisors to accentuate the attributes of a mentorship position, boundaries must be established.

Supervisor and supervisee's roles need to be clearly articulated in order to sustain professional development (Firth & Martens, 2008). Postmodern approaches to supervision shun belief systems that include hierarchical foundations. At the same time it is acknowledged that it is impossible to completely eliminate the inequality of power between supervisor and supervisee even when adhering to postmodern practices (Behan, 2003).

Infusing Postmodernism into Supervision

Like mental health clinicians, supervisors confront time limitations due to managed care and productivity-centered work environments (McCurdy, 2006). Efforts need to be continuously employed to generate more efficient and effective supervisory strategies. One method achieving this is by accentuating the cohesive attributes of traditional and postmodern strategies. For example, traditional supervisory practices can benefit from postmodern approaches that nurture a supervisee's processing skills, develop problem solving abilities, and bolster feelings of selfefficacy can help foster the independence necessary for efficient internship experiences. Balancing modern and postmodern approaches to supervision is essential to optimal advisory experience. Each approach has merit. In his discussion of career counseling, Sampson, Jr. (2009) argued that comprehending and valuing each approaches' contributions is valuable and necessary. The same process and importance can be generalized to supervisory practices.

Novice clinicians have engaged in academic study regarding their profession's skillsets, strategies, and approaches. Accrediting organizations create standards of excellence that help prepare students for clinical work. However, direct experience is a necessary component for knowledge to be integrated in a person's professional core. In addition, theories, ethics, and standards are also communicated through the supervisory relationship (Lemire, 2009). Moreover, there are times when supervisees desire to learn from the supervisor's experiences and to engage

in consultation (Ungar, 2006). These traditional views are in contrast with pure postmodern thought, which rejects hierarchical relationships. Thus, an unwavering following of postmodern philosophies may in part negate the value of the expert status ingrained in the supervisor's role, thereby missing the needs of inexperienced professionals in search of mentorship.

Despite the potential limitations of a postmodern approach to supervision, its philosophies can enrich the experience for both supervisor and supervisee (Whiting, 2007). It can create opportunities for the burgeoning professional to call upon his or her own intuition and knowledge and can encourage him or her to take ownership of solutions. In contrast, simply supplying "the answer" without deep contemplation is unlikely to help the supervisee to fully absorb and integrate the material. A balance is artfully required. Indeed, supervision creates the forum for supervisees to experience the synergy between assisting clients, embracing the role of professional, harboring concerns, and existing with meaning (Ungar, 2006). Each participant in the supervisory relationship contributes to the quality of professional development, which ideally occurs for both supervisor and supervisee.

Postmodern approaches to supervision clearly have appeal and have been shown anecdotally to produce positive results. As noted by McCurdy (2006), supervision is a developmental process whose small successes manifest into overall growth, development, and success inside both the clinical and supervisory environments. Permitting advisees the time necessary to construct their own answers favors the facilitating role adopted by postmodern supervisors. The ideas of honoring the supervisee's perspective, working to identify supervisee strengths, and raising supervisee awareness regarding power and gender-bias make can enrich the supervisory experience. The case studies that have been provided in the literature offer glimpses into the power of postmodern interventions. Strict modernists would view supervisor-supervisee relationships with the former's expertise and experience as superior to those of the latter (Lemire, 2009). This format can be conducive to a mentorship relationship, which can accentuate the benefits of modeling quality professional behaviors. However, building and nurturing a collegial relationship – a natural consequence and goal of postmodern supervision approaches – can also enhance the supervisee experience. A supervisee's feeling of connectedness can be enhanced when supervisors provide cooperative professional development opportunities (McCurdy, 2006). These cooperative experiences in turn may contribute to vigorous, substantive discussions that better both participants' skillsets.

Although the postmodernist might argue for a strict application of a particular approach, integrative supervisors can use various postmodern interventions in their work. For example, these two approaches contain interventions that fit nicely within various "cells" of the atheoretical discrimination model (Bernard, 1979). In addition, supervisors can choose postmodern interventions to facilitate growth within Stoltenberg's (1981) series of levels and Stoltenberg and Delworth's (1987) dimensions of development. Specifically, it seems some of these interventions, which put considerable responsibility on the supervisee, might be more appropriate as the supervisee moves toward autonomy, therefore necessitating increased accountability (Stoltenberg & McNeill, 2010). Autonomy refers to the supervisee's level of independence within the supervisory relationship.

Future Research and Scholarship

Ungar (2006) advised the following: "In practice, the postmodern supervisor demonstrates sensitivity to the uniqueness of each person being supervised" (p. 67). This

approach is the core tenet of two postmodern approaches – narrative, and solution-focused – that has received significant attention in the psychotherapy literature. It is one that is appears compatible with traditional supervisory models, but further research is necessary to quantify its effectiveness. The idea of conducting empirical research about postmodern supervision approaches may sound counter-intuitive. However, less doctrinaire postmodern supervision practitioners and/or researchers interested in examining postmodern approaches have a wide variety of areas worthy of study. Given the large number of models and techniques associated with these two postmodern approaches, it seems that exploration of the effectiveness of these interventions is warranted. This could involve studies of counselor development (e.g., Loganbill, Hardy, & Delworth, 1982, Stoltenberg, 1981) resulting from postmodern interventions within supervision. In addition, qualitative studies examining the differences between postmodern and non-postmodern approaches as perceived by supervisees also could provide valuable information. For example, might beginning supervisees find narrative supervision lacking in terms of directives/structure? Is the relationship/rapport within supervision affected by the choice of a postmodern versus a non-postmodern approach?

Additional attention is warranted in the area of evaluation within postmodern approaches. Although many postmodernist supervisors resist evaluation, addressing it is imperative in order to engage ethically in supervision. Specifically, case studies exploring how to supervise an impaired counselor would be one way to help non-postmodern supervisors understand how some of their concerns around ethical issues might be resolved. An exploration of when the postmodern approaches may and may not be appropriate would be a welcome addition to the literature. In conclusion, this article investigated narrative, and solution-focused supervision. These two models represent broader clinical trends that have characterized the transition of counseling and clinical supervision into the postmodern era. This movement has resulted in a new body of theoretical development. However, little empirical evidence has been offered to date as to the utility of postmodern supervision. Although these approaches offer a greater appreciation for personal meaning-making and individual perspectives, it has yet to be determined whether or not these approaches will result in improved counselor supervision and training when compared to other methods. Rather than potentially resisting either the postmodern or modern/positivist perspective, supervisors can heed the words of compromise posed by Mills and Sprenkle (1995) who noted, "therapists have weathered [the] transition well, working hard to integrate valuable traditional perspectives within a new collaborative, constructionistic paradigm that is better suited to the shifting value systems of the present world" (p. 375). Continuing to add postmodernism to the body of researched supervision knowledge and literature seems an appropriate next step rather than throwing out any previous results as false "truth."

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Lessons from Triadic Supervisors: Maximizing Effectiveness

Andrew Felton, Michael Morgan, and Mary Alice Bruce

Abstract

Through this hermeneutic-phenomenological qualitative study, 10 supervisors of a CACREP accredited program identified emergent themes and challenges of triadic supervision: relationship dynamics, feedback, time management, contextual learning, and matching of supervisees. The researchers offer specific methods to approach these challenges within triadic supervision to maximize effectiveness.

Keywords: Supervision, Triadic, Effectiveness, Phenomenological, Clinical Supervision

As an essential aspect of counselor preparation, supervision calls for models that demonstrate consistent effectiveness (Borders, 2012; Kemer, Borders, & Willse, 2014). As of 2001, the standards of the Council for Accreditation of Counseling and Related Educational Programs (CACREP, 2016) have endorsed triadic supervision as a suitable training and supervision practice. With greater numbers of state counseling licensing boards accepting triadic supervision as an alternate to individual supervision (Oliver, Nelson, & Ybanez, 2010), researchers continue to explore this model which consists of a supervisor and two supervisees meeting simultaneously (Goldberg, Dixon, & Wolf, 2012; Hein & Lawson, 2008). As triadic supervision receives growing attention in the literature, guidelines for how to make best use of this model are critically needed. Although the model itself seems clear, the overarching structure and process of triadic supervision appears to vary widely in practice. Therefore, the purpose of this qualitative study was to investigate and understand practicing supervisors' experiences, with a goal of identifying commonplace challenges faced in triadic supervision, and offering pragmatic ways to address those challenges

Background

Since the 1900's, mental health professionals have recognized clinical supervision as crucial for their professional development and effective work with clients (Kemer et al., 2014; Tomlin, Weatherston, & Pavkov, 2014). Across social work, psychology, and counseling as well as couples and family therapy, various supervision modalities are used (Hein & Lawson, 2009). Researchers carefully investigate core components, and new structured models are brought forward to enhance supervision practice (Oliver et al., 2010).

Several promising models of triadic supervision have emerged in the counseling field (Goldberg et al., 2012; Lawson, Hein, & Getz, 2009; Stinchfield, Hill & Kleist, 2007). Lawson et al. (2009) drew on group supervision techniques to structure triadic supervision identifying collaborative relationships as central for supporting appropriate feedback exchanges. Goldberg et al. (2012) emphasized structuring sessions to pay particular attention to relationship dynamics, the ability to be vulnerable and understood, among members of the triad. According to Nuttgens and Chang (2013), differences in attitude and behavior that may be most likely to affect relationship dynamics revolve around ethics, gender, sexual attraction, power differentials, strength of skills, and emotional maturity. Stinchfield, Hill, and Kleist (2007) also concentrated on structure, using reflecting teams as a basis for feedback and understanding. Thus, similarities exist across models, most particularly related to the focus on thoughtful structuring of relationship dynamics, feedback and time management.

Overall, several empirical studies (Borders et al., 2012; Goldberg et al., 2012; Stinchfield, Hill, & Kleist, 2010) have identified a number of advantages, although challenges

also exist in triadic supervision. Stinchfield et al. (2010) discovered triadic supervision fostered a degree of trust among the participants that often led to meaningful and productive working relationships. As a result, members of the triads were able to understand the perspectives of the others and did not have to defend or explain themselves. Triadic supervision generally has resulted in insightful, valuable, challenging feedback while supportive to the growth of supervisees (Borders et al., 2012; Goldberg et al., 2012). Triadic supervisors have noted that feedback between and among the triad often complemented each other and created a dynamic synergy that enhanced learning and fostered a sense of community within the time constraints of a supervision session (Oliver et al., 2010).

Another benefit of triadic supervision is peer role-modeling (Borders et al., 2012). Lawson, Hein, and Stuart (2010) found the additional perspective of another supervisee helped bring forward ideas that neither supervisors nor the other supervisee had considered or tried. This diversity of views, along with the potential for indirect learning and peer support, are advantages found in group supervision (Lee & Everett, 2004), leading Borders (2012) to recommend that triadic supervisors recognize and understand the relationship dynamics and issues pertinent to group work. However, Lee and Everett (2004) noted that group supervision, with the greater number of supervisees, suffers from increased challenges to develop a safe climate, and to provide significant time and focus for each supervisee. Triadic supervision may avoid some of the drawbacks inherent in a group format, while still retaining some of the benefits.

Recent studies have also identified some challenges with triadic supervision. Triads of supervisees with disparate skills and personalities might fail to build sufficient trust and inhibit feedback, thus impeding progress and stifling the potential of both supervisees (Hein, Lawson &

Rodriguez, 2011). With mismatched supervisees, power differentials also emerged as a concern. Specifically, the supervisor's power, combined with the social or academic power potentially held by a higher-functioning supervisee seemed to affect relationship dynamics and the balance of time spent focused on each supervisee (Hein & Lawson, 2008; Hein et al., 2011; & Stinchfield et al., 2010).

However, the primary challenge may be role confusion and uncertainty affecting supervisors who attempt to apply the norms and philosophy of traditional individual supervision to a triadic supervision model (Borders et al., 2012). As such, numerous researchers (Borders et al., 2012; Goldberg et al., 2012; Hein & Lawson, 2008; Hein et al., 2011; Stinchfield et al., 2010) identified overall structure as a major concern among the majority of supervisors and supervisees. It appears crucial that participants create an effective structure that clarifies roles, process and goals in triadic sessions.

The current study was guided by two related questions: 1. What challenges and opportunities do triadic supervisors experience in the shift from individual to triadic supervision? 2. What guidelines for successful triadic supervision emerge in the meaning of those experiences?

Methods

Research Paradigm

Since our goal was to understand supervisors' experiences and derive meaning from those experiences, a hermeneutic phenomenological frame (Packer, 2011) guided our data collection and analysis. Hermeneutic phenomenology allows for close examination and illumination of experience through interpretation of meaning in participants' narratives (Newman, Cashin, & Waters, 2010). In their review of Paul Ricoeur's work as it pertains to hermeneutic phenomenology, Charalambous, Papadopoulos and Beadsmore (2008) rejected the idea of researchers as objective, passive recipients of knowledge. Rather, knowledge or meaning is constructed at the intersection of the participants' narratives and the researcher's own prior knowledge and setting. The focus shifts from merely understanding others' experiences, to understanding the meaning of their experiences.

According to Doyle (2007), Heidegger believed that the researchers' perspectives are integral to understanding the meaning of phenomenon, and so analysis seeks convergence between the perspectives of the participants, as well as the reflections of the researchers. In doing so, researchers must identify their own prior experiences, context and expectations of the data as these will influence their reflections (Wojnar & Swanson 2007). We acknowledge that each of us had experience with triadic supervision and believe triadic supervision offers valuable training experiences but recognize that other modalities are also important. Contextually, we are located within a university counselor preparation program that makes extensive use of triadic supervision, as well as some individual and group supervision. Thus, we are aware of some bias in favor of the triadic approach. With this study, we expected to learn both positive and challenging experiences to help us identify meaningful suggestions for other professionals.

Given the subjective nature of qualitative analysis, attention to issues of trustworthiness are critical. Morrow (2005) noted that trustworthiness reflects the credibility of the collection, analysis, and interpretation of qualitative data. To enhance trustworthiness, we sought participants who represented our intended audience – supervisors in counselor preparation programs who were engaging in triadic supervision. Additionally, we employed a prolonged immersion with the data using a hermeneutic cycle, two rounds of member checks with all participants, and researcher self-reflection. Further details of these efforts to support trustworthiness are given below.

Participants

Following IRB approval, 10 individuals who provided both individual and triadic supervision in a CACREP accredited counseling program and adhered to The Association for Counselor Education and Supervision best practices in clinical supervision (ACES, 2011) at a medium-sized Rocky-Mountain university were invited to participate in the study. These participants were recruited because they were recently integrating the triadic model to supervise practicum students at the university training clinic. All 10 agreed to the full data collection process. Participants were eight women and two men. Four were advanced doctoral students (all women), and the other six were program faculty (three each associate and assistant professor rank). One participant was African-American, two were of mixed Hispanic and Native American heritage, while the remaining seven were White of European-American descent. Ages of participants ranged from the mid-20's into the mid-50's.

Six participants were new to triadic supervision, having never received it and only having provided it in the semester prior to data collection. The other four (who were all faculty members) had varying previous experience: one had only provided triadic supervision a few times in previous semesters. One had received triadic supervision in graduate school and also had several years of experience providing it. The final two had over 15 years of experience including both receiving and providing triadic supervision. All participants provided triadic supervision at 1.5 hours per week in the semester prior to data collection. We did not differentiate participants by any theoretical approach or individual style. Although we are certain such differences did exist, these were not the focus of the current study. Our focus was

on how supervisors experienced the triadic format and we believed that the natural variation among participants' style would give us a broader perspective from which to build our understanding.

Procedure

Data were collected through individual, semi-structured interviews conducted and audio recorded by a research associate who was neither an author nor a participant in the study. This individual was a counseling professional who also had training in supervision and data collection and who was instructed to follow the interview protocol we established, while also having flexibility to use her counseling skills and research understanding to help participants clearly articulate their thoughts and experiences. Drawing upon the literature and personal experiences, we designed seven initial questions to invite participants to reflect on the unique opportunities and challenges of triadic supervision as compared to our usual program experiences of individual supervision. These initial questions were as follows: 1) Please describe your format/process for individual compared to triadic supervision. 2) Talk to me about your satisfaction with individual supervision as compared to triadic supervision. 3) What do you think of the effectiveness of individual compared with triadic supervision regarding the clinical success for the supervisees? 4) How about the demands on you as a supervisor during individual as compared to triadic supervision (for example, managing feedback and relationship dynamics)? 5) Please compare individual and triadic supervision regarding challenges for you as the supervisor. 6) Let me hear about advantages of individual as compared to triadic supervision. 7) What else would you like to offer related to individual and triadic supervision? Follow-up questions emerged within each interview to clarify and expand participants' responses.

Data Analysis

We employed a hermeneutic circle (Rennie, 2012) in our data analysis, which began with the raw transcriptions, incorporated our experiences and ideas as well as the literature, and returned to the data itself to begin again. Interviews were transcribed verbatim by the interviewer, and each participant reviewed her/his transcribed interview to verify that the transcription accurately conveyed the participant's words and intended meaning. We then immersed ourselves in the transcriptions over the course of several weeks, with multiple readings. In a line-by-line analysis, the lead author identified key words and phrases that appeared to capture the meaning of participants' experiences as triadic supervisors (based on repetition, participant emphasis, or apparent salience to participants). These were grouped according to similarity into initial themes with representative quotations for each. To improve the trustworthiness of the initial coding, the second author independently coded a randomly selected transcript, and this analysis was compared to the first author's coding of the same transcript. There was a high level of agreement between both versions, and the reflective discussion among all three of us about the few minor differences as well as points of agreement improved our thinking about the data, and our awareness of the meaning that we were bringing to the process based on our own experiences.

We met together several times during the data analysis as an intentional part of the hermeneutic circle. These discussions extended analysis beyond participants' words and transcript themes to include the existing literature on triadic supervision and the contribution of our own experiences and biases to our understanding. From these reflective discussions, we found new meaning emerging at the intersection of the transcribed interviews, the literature, and our own experiences. This circular process continued through data analysis and later writing. Themes and quotes were reflected upon, considered in light of our own experiences and the

literature, and then the full transcripts were reread to make sure that the emerging meaning was consistent with the overall interviews. With each successive transcript, both convergence and divergence in emerging themes and meaning was sought. There were multiple iterations of this circular movement from participants' interviews and themes to the literature, our experiences, and back again.

Once a draft of the manuscript was completed, we shared it with all 10 participants in an additional member-check used to close our hermeneutic circle back with participants themselves. Each was asked to reflect on the results, discussion and implications, and to share with us any omissions, misinterpretations or additions they wished to make. Only five chose to respond to our invitation, and none of them suggested any substantive changes to our interpretation of the data. Some minor wording changes and editorial suggestions were offered, which were incorporated in the text to the extent possible.

Results

Similar to the literature, supervisor-participants in the current study identified relationship dynamics (Borders, 2012; Hein & Lawson, 2008), feedback (Borders et al., 2012), time management (Borders et al., 2012; Hein et al., 2011), and matching supervisees (Hein et al., 2011) as challenges that required thoughtful adjustment in the shift from individual to triadic supervision. In addition, the theme related to contextual learning, which was not found in previous literature, arose from the interviews. We explore these challenges and themes and present representative participant quotes in the following sections.

Relationship Dynamics

One clear theme emerging from the interviews was the shift in relationship dynamics from the addition of another supervisee, and that this change presented both benefits and challenges. Participants reported a distinctive new "energy" in providing triadic supervision, which came from the change in relational dynamics compared to an individual approach. Supervision became more of a collaborative experience which several participants found "refreshing." Participants also felt more at ease in triadic supervision because of the presence of the second supervisee. The additional person affected the power in the room such that relationships felt less hierarchical, and the atmosphere was more collegial. One participant shared:

The three of us working together, takes away one piece of working with individuals that I didn't realize...the potential for tension that I'm the 'all knowing' supervisor and that the student is not...the student is simply there to be conferred of your wisdom. What I discovered was that it was so much easier for me in triadic to abandon that position and to hand over power to the students...they could actually grow [from] each other.

At the same time, however, participants saw the additional relationships as a challenge, with the potential to constrain both the process and content of supervision. A participating faculty member with several years' experience providing triadic supervision stated: "I think relationship building is the most important piece...If the relationship [between the two supervisees] is not a strong one, it may actually impede a person's ability to share the situations that they need assistance on." Another faculty participant who was new to triadic supervision agreed that attending to the relationship is different in triadic supervision.

I think the triadic experience for a mindful supervisor is going to be more intense than the individual, because you're dealing with the dynamic of the client, two supervisees, and the process that's going on between two supervisees... So you have a lot more variables going on, a parallel process to couples counseling vs. individual counseling.

A junior faculty member who was experienced in triadic supervision suggested that supervisors must attend to these expanded relationship variables with intentionality – remaining aware of how the relationships are evolving and working to nurture their development and health. Such extra effort is required to insure that the relationships promote supervisee competence and clinical development.

Feedback

A second theme that emerged from our analytic process was that feedback also changed in triadic supervision, again with some benefits and some new challenges. Several participants indicated that they may find themselves more willing to offer challenging feedback in a triadic format. Participants saw the additional supervisee as a co-witness to the skills and development of the other, and thus as someone who would validate and support an appropriate challenge. A very experienced faculty supervisor offered a strategic idea: "It's easier in some ways [for the supervisor] to give challenging feedback in triadic because in most cases, the other person is going to concur. So it's not just my opinion, and the other person can offer the same things I am."

Participants also noted that addressing a supervisee's personal vulnerabilities in triadic supervision was problematic. Each suggested that exposing a supervisee to a peer in a very vulnerable way might violate the supervisee's confidentiality and right to consent. The participants, even those who strongly favored triadic supervision, believed it would be most appropriate to address more personal supervisee concerns in an individual session. A faculty member experienced in using triadic supervision in mental health agencies remarked: "I think that individual over triadic might be more beneficial if you have a person who is at an impasse, or who might have an impasse, or they need more of that one-on-one assistance." When the focus is not so personal, participants agreed that the different perspective of the additional supervisee in triadic supervision greatly enhanced feedback. Participants were also in agreement that supervisors must use professional judgment to determine what feedback is most appropriate in triadic sessions and when an individual session would be warranted.

Time Management

The biggest challenge noted by participants in the current study was effective management of time in triadic supervision. Because individual supervision is typically an hour, and the triadic model followed by participants was one hour and thirty minutes, supervisors were faced with balancing their time and attention between two supervisees with less time per supervisee. One faculty participant who was providing triadic supervision for the first time stated, "You know, the clock sort of becomes an entity in the session itself, because you want to make sure that everyone has addressed what they want to address." Another faculty participant shared, "There seems to be a sense of hurry...I'd probably look at a two hour triadic session in the ideal world."

Meeting supervisees' needs, providing equal time and transitioning between supervisees were common concerns noted by participants. Furthermore, participants identified having larger caseloads, additional paperwork, and reduced time per supervisee as potential threats to adequate time for reviewing video, discussing cases, and focusing on clinical skill development. A faculty participant member expressed the following:

I believe the time got sacrificed in having two people in a 90 minute period for the level of feedback that I would like to give both in watching the tape, doing check-in, doing the various topics they're focusing on, theory, well-being, client progress, note taking. And in that time period when you've got two people, you're also looking at signing the charts and all those pieces.

Participants agreed that supervisors needed to be intentional in their balance and management of time but were somewhat stymied about how to best accomplish this. Some suggestions offered by participants include alternating which supervisee received attention first, dividing the time equally in half, or alternating the focus each week between supervisees. Although participants varied in their approaches and recommendations for managing time, they agreed that any strategy should remain focused on insuring that supervisees' clinical and professional development needs are being met. A doctoral student participant stated: "...my challenge as a supervisor is to structure my time enough so my supervisees are getting the clinical help they need from me" showing the difficulties that come with managing time and focusing on clinical development.

Contextual Learning

Although participants encouraged the use of individual supervision for addressing supervisees' personal concerns, they also recognized how triadic supervision offers learning opportunities not found in individual models. In particular, participants believed that supervisees in triadic supervision benefit from exposure to additional clinical cases and client presentations, various ways to conceptualize cases, and different treatment approaches that they would not receive in individual supervision. Participants added that this exposure allowed supervisees to consider their own approach and interventions, examine the skills of a colleague, and explore additional options with a supervisor and fellow counselor to help assure proper, ethical services for clients. An experienced triadic supervisor and faculty member shared how learning is ongoing in triadic supervision.

Triadic is probably better for clinical skill preparation than individual just because you get the opportunity to process not only your own cases and your own dynamic, but you get the opportunity to be an observer... While we're talking about someone's case, the other supervisee is thinking, 'Well, what would I do in that situation? How would that look? I can learn and do that as well.' So I think they just get an extra layer of learning.

Another experienced faculty member who was relatively new to the triadic format compared this extra layer of learning to the expansion of opportunity and complexity present in counseling sessions with more than one person. She said that in triadic supervision

...you have a lot more variables going on, a parallel process to couples counseling vs. individual, or family counseling vs. individual counseling... At the same time, as a clinician or a supervisor, you've got to be dynamic, aware, and mindful of all the factors that are going in the room.

Participants noticed that the triadic format offered some expanded learning experiences that did not occur in individual supervision. Several noted that the triadic format might be ideal for supervising co-counselors who worked with couples or families, particularly to work on the relationship between the counselors. The faculty member with triadic experience in mental health agencies reported how in triadic supervision with co-counselors "…you get a lot of parallel process conversations – so what's going on here and what's going on in the couple or family."

Furthermore, triadic supervision invites supervisees to come together, collaborate, and support one another, further enriching their personal growth and clinical development. The experienced faculty member albeit new to triadic supervision offered:

The relationship building and the camaraderie and the insight provided in triadic has the supervisees feeling a little bit more confident and supported, and they maybe move a little faster in their personal growth which makes their clinical effectiveness move a little faster.

This collaborative experience allows for "peer modeling" and "peer supervision" which creates a new learning dynamic for personal and professional growth. The peer supervision that occurs in triadic supervision, as noted by a very experienced faculty member, "can help prepare masters' students for a future role as a supervisor...a role many will likely take at some point in their career."

Matching Supervisees

One final theme consistently mentioned by participants was the need for intentionality in pairing supervisees for triadic supervision. Participants expressed how the matching of supervisees can play a significant role in the success or struggle of a triad. A new faculty member stated:

I worry that sometimes, with their peer there, they may be less willing to share... So I think that's really choosing the supervision pair in triadic very intentionally...think intentionally about the relationship that those two people will have and pair them up in a way that's most helpful for them.

Two participants, one a doctoral student and the other a faculty member, both suggested that all supervisors in a counselor preparation program could meet together to work on matching supervisees. However, in many cases those doing the matching may have only limited knowledge and experience with the supervisees on which to base their decisions. This may result in a poor match, complicating the balance of time and attention to each supervisee, or in which supervision attention shifts away from professional development to address the difficult relationship between the triadic partners.

Discussion

As illustrated by our study, supervisors realize both advantages and challenges in triadic supervision. Participants in the current study echoed many of the obstacles found in previous research including relationship dynamics (Borders, 2012; Hein & Lawson, 2008), feedback (Borders et al., 2012), and time management (Borders et al., 2012; Hein et al., 2011), and matching supervisees (Hein et al., 2011). The theme of additional learning opportunities, which has not been discussed in previous literature, also emerged as an important component in our study. Participants not only drew attention to these issues but consistently shared a belief that success in triadic supervision requires awareness and intentionality when addressing these components.

Triadic Relationships

Results from the current study support the findings of Borders et al. (2012) that the centrality of relationships is an important variable in triadic supervision as well as the unique relationship challenges posed by this supervision format. Participants identified the need to attend mindfully to the relationships in triadic supervision. Gazzola, De Stefano, Thériault, and Audet (2013) noted that supervisors who are unable to effectively nurture supportive connections may spend a disproportionate amount of time and energy vigilantly overseeing sessions and working to resolve relationship issues. Participants' experiences also support the idea that familiarity with group dynamics or couple's counseling (Borders, 2012; Gazzola et al., 2013;

Oliver et al., 2010) may help triadic supervisors avoid potential problems and maximize the potential benefits from the additional supervisee in triadic supervision. Several participants seemed to suggest that merely applying the skills, organization and thinking that they used in individual supervision failed to take full advantage of the possibilities offered in the triadic format. Understanding relationship dynamics among individuals is a fundamental element of supervisor training for group supervision (Borders, 2012; Hein & Lawson, 2008), and similar training will benefit triadic supervisors. Preparation in small group work and/or couples counseling may help supervisors incorporate the benefits of supervisee diversity across age, gender, religion, ethnicity and other factors (Hein & Lawson, 2009). However, much like the findings by Oliver et al. (2009), participants believe individual sessions are sometimes warranted to work on personal issues and address major presenting concerns.

Matching Supervisees

Consistent with the findings of Hein et al. (2011), several participants mentioned that a key variable in the success or struggle of a particular triad is the degree of fit or match between supervisees. The same has been true in our experience, and thus we encourage as much intentionality as possible in how triads are created. Involving all supervisors and instructors who have past interactions with the supervisees, as well as those that will be supervising can help in the matching process.

Consideration of supervisees' skill level, emotional maturity, and general psychological well-being is crucial in creating healthy, functioning triads that do not become immersed in power struggles or remediation work that become roadblocks to the goal of successful client work (Stinchfield et al., 2010). In this study, supervisors' experiences show that when triads are not picked with intentionality much of the focus in supervision is solely on relationship building

and restoration rather than client care and counselor development. Thus, we emphasize that understanding of supervisees' self-awareness, interactions with peers, classroom presence, and performance practices should be a consideration when assigning triads. Meanwhile, we realize that occasionally some supervisees need individual sessions due to personal issues or circumstances.

Feedback and Learning Opportunities

Building on the supervisory relationships, triadic supervisors can take advantage of unique opportunities for learning and feedback. Findings from the current study parallel past research (Borders et al., 2012; Oliver et al., 2010) in which triadic supervision fostered a sense of community. Through collaboration and shared responsibility, all triadic members may provide enhanced authentic feedback, encouraging supervisees to move forward in their counseling work. Supervisors that are able to move thoughtfully beyond an individual-supervision paradigm and find ways to incorporate all participants may discover new learning opportunities in triadic supervision.

Despite the potential learning opportunities, some challenges exist in ensuring that feedback from the supervisees is helpful and supportive. Good working relationships, established early on and maintained throughout, can help the triad address these kinds of concerns. Stinchfield et al. (2010) outlined distinctive roles for each member of the triad, providing a structured format for all members to actively participate throughout the process. Lawson, Hein, and Stuart (2009) suggested triadic supervisors may need to check-in with the non-presenting supervisee to identify links between the supervisees' learning processes. If both supervisees have been invited to play an active role in the supervisory process, whether they are

presenting or not, they not only develop clinical and conceptualization skills, they begin to develop the skills to be an effective consultant and supervisor.

Time Management

Supervisors using any model must manage time effectively to best support supervisee growth and client services. Many of our participants mentioned how time management took on a prominent role as they provided triadic supervision. CACREP standards (CACREP, 2016) allow both individual and triadic as acceptable for clinical supervision and only stipulate that supervision must average one hour per week. Typically, the time for triadic exceeds that of individual supervision session but is not twice that of an individual session (Lawson, Hein, & Getz, 2009). Thus, triadic supervisors must meet all the supervisory needs of two counselors in less time than if they were seen individually, including attention to client safety, clinical documentation, clinical skills, theoretical development, and other supervisory tasks. Supervisors must use time carefully in all supervision sessions, especially in terms of addressing priorities and meeting supervisee needs (Borders et al., 2012). However, disparate client needs may also pull the attention, energy, and time balance toward one supervisee over the other. Carefully attending to build supportive relationships among and between participants in triadic supervision can assist supervisors with time management (Hein et al., 2011).

Implications

Our hermeneutic-phenomenological framework allowed us to combine the expertise of the participants, past literature and our own experience and knowledge as researchers. Most importantly, the meaning that emerged suggested pragmatic approaches for addressing the challenges of triadic supervision and capitalizing on its potential. Before discussing specific implications, we want to mention a general one. We are aware that each of the participants, and we as well, approached the study, and triadic supervision itself with an open mind, eager to see possible benefits. Not surprisingly, we found some benefits, balanced with a number of challenges. As we reflected on our findings, we were aware that this positive mindset might have played a role in the experiences participants shared. Therefore, we encourage those who work with the triadic model to keep an open mind themselves to the possibilities it holds. It may be that such openness and flexibility allowed our participants to identify ways to take effective advantage of the model with their own supervisees. We now offer practical suggestions related to the relationships in triadic supervision, feedback and new learning opportunities, time management, and matching supervisee pairs.

Triadic Relationship

We suggest that in the initial meeting, supervisors clearly explain limits of confidentiality and inform supervisees that personal issues and dynamics may be discussed in the triad. This may be included in a contract that is specifically tailored to the triadic model. Additionally, establishing the expectation that both supervisees actively participate throughout each session should be discussed. As such, we recommend that the triad devote time early on to discussing the relationships. We believe this should include identifying the four simultaneous relationships (the supervisor with each supervisee, the two supervisees, and all three together).

Because it is likely that supervisees will compare themselves to each other (Lawson et al., 2009), supervisors should discuss this early on, reminding supervisees that counselor development is individual and varies based on myriad characteristics of the counselors and their

unique case-loads. Each should be invited to discuss concerns they have about the relationships, and together make plans for regular evaluation of the relationships, so any needed adjustments can be made.

To help facilitate relationship development, we believe that supervisor familiarity with and use of principles for clinical work with groups and couples can help in managing the relationship dynamics. Supervisors are encouraged to use immediacy and transparency in identifying, acknowledging and working through concerns related to feedback and relationships.

If the triadic supervisor merely applies an individual focus to triadic work, much will be missed. The supervisor must account for and intentionally take advantage of the presence of the other supervisee to improve the outcome for both. With this in mind, we acknowledge the importance of individual sessions under certain circumstances. Although supervisors may request such sessions, we recommend that supervisors make explicit that such sessions are for work that ethically requires confidentiality and not for avoiding difficult triad concerns or for individualized supervisory attention.

Feedback and Learning Opportunities

As mentioned in the discussion section, Lawson et al. (2009) suggested triadic supervisors check-in with non-presenting supervisees to keep them engaged, however we believe much more can be done to capitalize on the model. Supervisors can check-in at the beginning of each session and invite supervisees to bring up any major pressing issues, including relationship and feedback concerns. Additionally, supervisors can invite the non-presenting supervisee to notice and share observations about client dynamics, about counselor skills, possible interventions and conceptual understanding, and to reflect on application to personal case load and professional development. Differences of opinion become opportunities for additional learning and discussion. Purposefully involving the supervisees in both feedback and in calling attention to concerns may relieve some of the pressure supervisors face. In this way, all three people in the triad are actively participating regardless of who is presenting.

Time Management

Supervisors may choose to conduct weekly supervision sessions of one hour, biweekly of two hours, or weekly of one and one half hours, or some other combination. Some supervisors appear to divide the time of each session equally between the supervisees, and other supervisors choose to focus on one supervisee during one session and the other supervisee the next session. Without any evidence to support any single approach for managing time, we suggest that supervisors adopt three guidelines for managing time.

First, we encourage supervisors to facilitate an open conversation early in the triadic process to discuss how time will be managed equitably. Each should have the opportunity to discuss needs, desires, and procedures that may help the group effectively allocate time to address each supervisee's needs. The triad should settle on an initial plan for how time will be allocated during each session – who will go first, if time will be divided equally each session, or will alternately favor one supervisee. We found that some supervisees want to get right to business, while others prefer to ease into supervision with a little conversation, a check-in, or perhaps some mindfulness activity. Since those preferences may differ between triadic partners, supervisors should acknowledge different styles and the triad come to some initial agreement about how sessions will begin and end. Second, we believe that flexibility by all three members of the triad should be encouraged in those early discussions and then used over the course of supervision. As the triad works together, one or several may decide that the initial plan for time management isn't satisfactory, and the group should be open to revisiting those arrangements.

Client emergencies, other client or supervisee circumstances, and perhaps just a need for change requires flexible management of time. Supervisees should be encouraged to ask for extra time when warranted, while keeping in mind the legitimate needs of the other. The supervisor must then attend to how time is being used, and make sure that both client cases and supervisees are receiving the attention they need. Finally, we suggest that the triad regularly discuss time management to make sure that each supervisees' needs, along with the obligations of the supervisor are being met, and then make adjustments as needed. This kind of check-in can accompany those suggested earlier to review the supervisory relationships.

Matching Supervisees

Supervisors, especially those that have yet to meet the supervisees, may consider a pregroup screening process to further help with the matching process. Some factors that might be considered in matching supervisees include supervisee developmental level. While a less advanced counselor may benefit from participating in supervision with a more advanced counselor, we believe that the difference should not be so wide that the less advanced supervisee ends up receiving all of the attention.

In addition, supervisees may be matched based on theoretical approach. For those newly identifying with a theory, perhaps a theoretically similar supervision partner will be best. More theoretically secure counselors may experience more personal growth when matched with a supervisee from a different orientation. The same may be true for other counselor demographic variables. In some cases, being paired with a partner who shares gender, cultural, or other variables may help to solidify an insecure identity, while others may benefit from close work with a partner who is different. Some supervisees with unique needs may be served best by a particular pairing.

In making this recommendation, we acknowledge that these decisions may have to be made before much is known about the supervisees and what might best serve their growth. This is true in our own program, where students have only had two courses before they are paired for supervision. Although we have only limited information, we choose to make those decisions with as much intention as possible. Then, after one semester (and additional information about supervisee strengths and needs), triads are changed with the goal of maximizing learning, expanding perspectives and responding to supervisees' needs.

Limitations and Future Research

Results of the current study suggest that triadic supervision can be a helpful adjunct to other forms of supervision, and indeed may offer unique benefits for counselor preparation not available through other supervision approaches. However, in considering these results and our suggestions, several limitations must be kept in mind. All of the supervisors interviewed were faculty or doctoral students of a counselor education program at one mid-sized university in the Rocky Mountain region. It may be that supervisors outside of academia and outside of the Rocky Mountain region may have different experiences. Additionally, a greater number and diversity of supervisors will refine the field's understanding of when and how triadic supervision may best be used. This study did not consider supervisors theoretical approaches to supervision and how that can influence the triadic experience. The current study also did not obtain supervisee perspectives. Finally, our bias toward the potential benefits of this approach led us to focus more on the benefits and to not deeply explore potential disadvantages of triadic supervision. Future research should seek to address these limitations.

In addition, incorporating experienced supervisors using triadic supervision in clinical settings and other geographic regions may provide additional insight into the triadic model.

Future research that incorporates both supervisor and supervisee perspectives and experiences can further enrich our knowledge of the strengths and limitations of triadic supervision, and help pinpoint under what circumstances supervisees find it most helpful. With increasing literature supporting the contribution of triadic supervision, we encourage scholars to examine the impact of gender and cultural variables on the process. Both the literature and the results of the current study suggest that there are important parallels between small group and couple dynamics and triadic supervision. Further studies could explore and identify the key elements from each that support effective triadic work and the extent to which these elements provide helpful guidance to triadic supervisors.

We make a number of recommendations here based on the meaning that emerged from participant interviews, a review of the literature, and our own experiences. Further research should seek to validate or correct those recommendations with additional empirical data. Through the use of case studies, researchers may gather a much richer, yet individualized, understanding of supervisor and supervisee experiences. Additional study through the use of multi-case study or group comparison to identify both the advantages and limitations of each supervision modality (individual, triadic, group) may prove useful to the field. Additionally, attempts to identify best practices supported by empirical data for each can provide direction for supervisors and supervisors-in-training as they seek to best meet supervisee's needs. One possible way of assessing best practices may be to incorporate client outcomes into future research.

Conclusion

Ethically, supervisors must be prepared to use each of the different supervision formats (Gazzola et al., 2013). Results from previous and the current research suggest that the triadic

format holds both promise and challenge for supervisors. The supervisors in this study found that triadic supervision offered unique learning opportunities not found in individual or group supervision, particularly related to changes in relationship dynamics and feedback. Participants reported that supervisees in a triadic format have greater opportunities to learn through observation and interaction with a peer. At the same time, our participants noted challenges that must be addressed with this format.

Intentionality in the creation of supervision pairs was suggested but doing so can be challenging. In addition, each triad must negotiate how time is divided, how the non-presenting supervisee can remain engaged in the process, and how personal issues that arise for either supervisee can be addressed ethically. Future research can help pinpoint the specific practices that support supervisee growth and competent practice. When choosing a supervision model, whether it be individual, group, or triadic, supervisors must consider which creates the richest learning environment and offers the best professional development for supervisees while supporting the client.

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Preparation of School Counselors and Response to Intervention: A Profession at the Crossroads

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Abstract

As a result of the Response to Intervention (RTI) mandate in schools across many states, school counselors are uniquely positioned to a take a leadership role within its implementation. This research study examines how school counselors in one such state perceive their training and knowledge of RTI and thus their confidence in implementing it. Implications for training, supervision, professional development and future research are discussed.

Keywords: School Counseling, Training, Response to Intervention

Brought to national attention by the reauthorization of the Individuals with Disabilities Educational Improvement Act of 2004, and supported, delineated, and in some instances legally mandated by state departments of education across the country (Berkely, Bender, Peaster, & Saunders, 2009; Zirkel & Thomas, 2010; Zirkel, 2012), Response to Intervention (RTI) is an increasingly common framework in today's schools. RTI is best described as a multi-tiered service delivery model in which struggling students receive differentiated, research-based intervention per the demonstrated academic or behavioral needs. Rather than requiring a special education diagnosis prior to academic or behavioral supports, a child receives intervention *first* within an RTI framework. Therefore, RTI is conceptually founded upon a paradigm shift in education: from a student-centered deficit perspective in which a child needs a disability label to receive supports, to an ecological perspective in which quality and type of instruction are concrete factors that directly influence student learning (e.g., Buffum, Mattos, & Weber, 2010; Kozleski & Huber, 2010). The goal of RTI is to provide effective general instruction and databased intervention for all students who require such, with the aim of reducing the disproportionate representation of students of color (i.e., Black, Latino, and Native American) in special education (e.g., Donovan & Cross, 2002; Gresham, 2001; L. Fuchs, Fuchs, & Speece, 2002).

RTI frameworks share common characteristics, designed to support the goal of educational improvement and student success. From a national perspective, 17 states now require RTI in the process of identifying if a student has a specific learning disability (SLD), while 45 states have guidance documents in support of RTI (Hauerwas, Brown & Scott, 2013). Across the majority of these states, RTI is conceptualized as a three-tier model, with each tier providing more specialized and individualized instruction (e.g., Berkeley et al., 2009; Zirkel, 2011). Tier one involves the general classroom, with the inclusion of specific elements that may not be integrated within a traditional general education environment: universal screening measures to identify students who are at risk for academic (and/or behavioral) failure and differentiated, research-based, small group instruction. If a student fails to thrive in this environment over a designated period of time, he or she is identified for tier two intervention, generally conceptualized as targeted small group instruction occurring two to three times per week. If the child remains non-responsive to intervention, he or she moves to tier three, which may involve 1:1 or 1:2 instruction outside of the classroom 4-5 times per week. Within tiers two and three, progress-monitoring tools are used to track student progress (or lack thereof) as well as to inform instruction, intervention, and movement between tiers (e.g., National Joint Committee on Learning Disabilities, 2005). Effective instruction within an RTI framework is supported by

collaborative practices between school-based professionals (e.g., Bean & Lillenstein, 2012) and strong leadership from a systemic perspective (Kozleski & Huber, 2010; O'Conner & Freeman, 2012). Ultimately, school-based professionals perceive RTI as a positive change when they have a proactive, knowledgeable principal who speaks confidently about the reform, as well as other building-level leaders in support of the initiative (Hollenbeck & Patrikakou, 2014).

Due to the fundamental shifts in practice within RTI, school-based professionals report taking on new or additional responsibilities when working within the framework. For example, observations and interviews with teachers of reading (including specialists, coaches, and classroom teachers) indicated professionals were more actively engaged in collaborative practices following the implementation of RTI (Bean & Lillenstein, 2012). Additionally, researchers found school psychologists spent up to 25% of their day providing intervention within an RTI framework, in comparison to 5% of the time for those who were not involved with RTI (Sullivan & Long, 2010). At this time, however, there has been limited exploration of school counselors' beliefs and attitudes toward RTI, as well as the effect on their professional practice.

Concomitant with the reform-centered shifts within education, the school counseling profession has also undergone significant change (American School Counseling Association [ASCA] 2003, 2005, 2012); Education Trust, 1996; NOSCA, 2011), positioning school counselors into roles of leadership and social justice advocacy (Martin, 2002; Ockerman, Mason & Novakovic, 2012; Perusse & Goodnough, 2001; Sears, 1999). In the ASCA National Model (2003, 2005, & 2012), school counselors create, implement, and evaluate comprehensive developmental school counseling programs that reach all students, particularly marginalized and historically underserved students. Within this model, counseling interventions are delivered and evaluated via a tiered system, similar to that of RTI frameworks (see Ockerman, Mason &

Hollenbeck, 2012, for full discussion). Specifically, these tiers involve core curriculum and class-wide instruction for all students (aligning with tier one of RTI), small group, skill-based, and peer support services in tier two (aligning with tier two of RTI) and individual counseling and/or agency referral (aligning with tier three of RTI) (ASCA, 2012; Ockerman et al., 2012). Counseling interventions must be evidence-based as well as predicated on data garnered from school records and needs assessments. Moreover, assessment tools should be used to evaluate the efficacy of counseling interventions.

In 2008, ASCA developed a position statement related to school counselors' roles in an RTI framework. Despite this development, review of literature yields little evidence-based practice regarding how to prepare school counselors to work within this model. The RTI Action Network (2009) provided direction in its *Voices from the field* piece, denoting how a few school counselors in Colorado, Oklahoma, and Wyoming were able to contribute to and participate within their school-based RTI teams. Others, such as Miller (2008), Luck and Webb (2009) and Ryan, Kaffenberger and Carroll (2011), documented success in relation to implementing tiered school counseling services and evidence-based academic achievement programs in elementary and middle school counseling programs in Florida, Georgia and Virginia, respectively. For example, researchers found that student outcomes and achievement improved when school counselors facilitated classroom lessons (tier 1) and small groups (tier 2) using the evidencebased Student Success Skills curriculum (Brigman & Campbell, 2003; Luck & Webb, 2008; Webb, Brigman & Campbell, 2005). Moreover, calls for more focused, collaborative efforts between school-based mental health providers have been evidenced in response to RTI (Zambrano, Castro-Villarreal, & Sullivan, 2012).

Despite these efforts, there remains a dearth of research related to the preparation of school counselors in the context of RTI. The authors of this manuscript believe there is a unique opportunity, and responsibility, for school counselor educators and supervisors to prepare emerging and practicing school counselors to effectively serve all students. This requires a contextual understanding of RTI as an educational reform and the belief that leveraging RTI can serve to advance school counseling services and programs (Ockerman et al., 2012). School counselors in Illinois were at the forefront of a mandated statewide RTI implementation, and thus their experiences can inform the development and training needs in states yet to fully adopt RTI. Following the IDEA reauthorization of 2004, the state of Illinois quickly piloted and subsequently required RTI as a K-12 instructional and intervention model for academic and behavioral support (Adkins, 2007), with an implementation deadline of September 2010 (Illinois State Board of Education, 2008). Data for this paper were gathered subsequent to the 2010 implementation deadline to provide insight into school counselors' RTI beliefs and practices.

Students in the state of Illinois can be seen to represent the national profile of learners demographically, creating a case study with implications for preparation and professional practice. The student population in Illinois consists of 51% of students identified as White (in comparison to 52% nationally), 23% Hispanic (24% nationally), and 18% Black (16% nationally). Of these students, 8% are identified with Limited English Proficiency (in comparison to 13% nationally), and 44% percent are indicated as low income as measured by Free and Reduced Price Lunch status (48% of students nationally) (US Department of Education, 2011a & b). Understanding the experiences of school counselors in one state adopting RTI can inform future training initiatives in the Midwest and beyond. For this purpose, the present study will investigate the following:

Research Questions

- 1) What are Illinois school counselors' beliefs regarding RTI?
- 2) How confident are school counselors regarding their training on the various implementation aspects of RTI?
- 3) To what degree have the responsibilities of school counselors changed due to the RTI implementation?
- 4) Which aspects of RTI consume most of the school counselors' time?
- 5) Is attitude toward RTI predicted by factors including perceived confidence with various aspects of the framework?

Method

Members of the Illinois School Counselors Association (ISCA) were selected for involvement in this study. A link to an electronic survey, created in *SurveyMonkey*, as well as an informational sheet for research participation, were disseminated to the membership of the ISCA listserve in a mass email after Institutional Review Board and ISCA permissions were obtained. Research processes and analysis adhered to the American Counseling Association (ACA) Code of Ethics (2014) and the American School Counseling Association (ASCA) Ethical Standards (2010). Seventy-five of the 411 ISCA members completed the survey in its entirety. This yielded a response rate of approximately 18%, which is higher to that of other online surveys (for example, see Cochrane & Laux, 2008; Sullivan, Long, & Kucera 2011).

Ninety-seven percent of survey respondents reported working in public school settings. Nineteen percent indicated working in an elementary setting, 8% in an elementary/middle school, 16% in middle school, and 57% in high school. Forty-four percent reported having a Masters + 30 continuing education hours, and 8% held a doctorate, with 67% noting five or more years since their last degree conferral. Seventy-three percent of respondents reported five or more years of practice in the field, with 60% at their current position for five years or more. The average caseload reported was 335 students, with the median and mode of 300 students.

Measures

The survey used in this study is an adaptation of a tool developed for a statewide study of school professionals in response to RTI (see Hollenbeck & Patrikakou, 2014). The original survey was developed after an extensive review of literature across the following areas: importance of RTI training (e.g., Danielson, Doolittle, & Bradley, 2007; Kratochwill, Volpiansky, Clements, & Ball, 2007), impact of experience in the field and educational level (e.g., Hargreaves, 2005; Sullivan & Long, 2010), research-based components of RTI implementation (e.g., Buffum et al., 2010; National Joint Committee on Learning Disabilities, 2005), and leadership competence in educational reform (e.g., Fullan, 2002; Leithwood, Day, Sammons, Harris, & Hopkins, 2006; Marzano, Waters, & McNulty, 2005). In revising the survey for school counselors, the authors added items to align with the ASCA National Model (2003, 2005 & 2012), including counselor interventions at each tier, data collection and management, and collaborative practices.

The survey for school counselors consisted of five sections. The first section included ten questions addressing demographics (e.g., *highest degree obtained, number of years at current school*). The second section involved five multiple-choice questions regarding RTI training (e.g., *How many professional development trainings have you received to date in relation to RTI? Who provided those trainings?*). The third section contained 14 Likert-type items asking participants about their perceived level of confidence towards specific aspects of RTI (e.g., *How confident do you feel about counseling interventions for tier one?*). Open-ended questions also allowed

participants to add, or expand on, their perspectives (e.g., Additional areas of need, not previously identified). The fourth section included eight Likert-type questions measuring participants' beliefs about the specific RTI implementation in their school and perceived outcomes (e.g., I believe RTI is the best option to support struggling learners and students with socio-emotional concerns). In addition, a 20-item section addressed the frequency of completion of RTI-related tasks (e.g., I measure progress of my school-wide interventions through pre/post tests). Participants selected their responses from a Likert scale that offered six frequency options.

Procedure

The school counselor survey was piloted at the Annual Conference of The Illinois School Counselor Association. The first author asked conference attendees to complete an anonymous paper copy of the survey and leave it in a collection box, with directions to note any areas of confusion regarding questions. Ten pilot participants completed the survey, and final adjustments were made to the instrument regarding clarify of wording items. At this time the survey was converted to an electronic data collection platform, *SurveyMonkey*, for dissemination through the ISCA listserve.

Scales

For the purpose of this study's analyses, eight scales were constructed. As a measure of internal consistency, Cronbach's Alpha was computed for each of the eight scales (scale items and reliability coefficients are reported in Table 1). Alpha coefficients ranged from .68 to .92, with the majority over .80.

Table 1

Scale Items and Cronbach's Alpha Coefficients

Variables	Sample Items	Cronbach's a	
(number of items included)			

RTI Background Information (2)	Underlying rationale	.80
Responsibilities & benefits (2)	Anticipated benefits Roles and responsibilities within the tiered model	.70
Tier service delivery model (2)	Tier service delivery model (specific to one's school)	.80
Counseling interventions (3)	for tiers 1, 2, & 3	.90
Data collection & management (3)	School-wide data management systems for documentation and decision making about students who need supportive services within RTI	.92
Collaborative practices (3)	Collaborative practices in an RTI framework Increasing parental involvement in RTI	.85
School building leadership & RTI competence (4)	Principal appears highly knowledgeable about RTI	.85 Dat a
RTI viewed as beneficial (4)	RTI can improve the academic and behavior outcomes of all students	.68 Ana lysis

Descriptive statistics were generated to address the first four research questions, and a regression model was constructed to address the final question. The following independent variables were regressed on the dependent variable of the perceived benefit of RTI: highest degree, years since highest degree conferral, total years in practice, total years in current school, number of trainings received, and implementation date before or after the mandatory 2010 state-wide implementation. The following were used as variables representing the perceived level of confidence of respondents across eight areas related to RTI: background knowledge, roles and responsibilities, tiered service delivery model, research-based practices, data collection and management, collaborative practices, and leadership competence.

Results

Results are presented in relation to each of the five research questions in turn.

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Research Question 1: What are Illinois school counselors' beliefs regarding RTI?

The majority of the respondents, 83% percent, either agreed (66%) or strongly agreed (17%) with the statement that RTI can improve the academic and the behavior outcomes of all students. Two-thirds (66%) agreed that RTI is a vehicle of promoting culturally responsive practices, while 72% agreed that RTI is the best option to support struggling learners and students with social and emotional concerns. Eighty percent of participants indicated that their principal described RTI in a positive, enthusiastic manner, 61% reported that their principal seemed knowledgeable about RTI, and 56% reported that other building leaders seemed knowledgeable about RTI. When reporting on school climate, about half (56%) of participants indicated that RTI-related concerns and challenges were addressed in a positive manner, and 46% reported that the majority of their colleagues were in favor of an RTI framework.

Research Question 2: How confident are school counselors regarding their training on the various implementation aspects of RTI?

Thirty-seven percent of participants reported that they first heard about RTI at a buildinglevel meeting, whereas 32% reported first learning about RTI at a district-level meeting. Forty percent reported their school implemented the RTI framework in, or prior to, 2009; 43% reported RTI implementation during or following 2010; while 17% did not know when their school implemented RTI. Eleven percent of participants did not receive any professional training in relation to RTI. Thirty-seven percent reported one to two trainings, 39% three to six trainings, and 13% more than seven trainings. Over a third of participants reported as that they were at least satisfied with their training (32% satisfied; 6% highly satisfied).

The five training areas in which more than 40% of participants reported little confidence are as follows, in descending order: how to increase parent involvement in relation to RTI (54%),

collaborative practices in an RTI framework (41%), collecting and analyzing data to determine effectiveness of RTI interventions (40%), using progress monitoring data to inform counseling interventions within an RTI framework (40%), and school-wide data management systems for documentation and decision making about students (39%). The five training areas in which participants indicated their highest confidence are as follows: underlying rational of RTI (55%), anticipated benefits of RTI (54%), general tiered service-delivery model (54%), counseling interventions for tier 1 (41%), and counseling interventions for tier 3 (37%) (see table 2 for details).

Table 2

Confidence on Different Aspects of RTI

	% Little Confidence	% Some Confidence	% High Confidence
Historical overview of RTI	24	50	26
Underlying rationale of RTI	9	36	55
Anticipated benefits of RTI	4	42	54
Tiered service-delivery model - general	13	33	54
Tiered service delivery model – school specific	23	48	29
Role and responsibilities within the tiered model	23	48	29
Counseling interventions for tier 1	20	39	41
Counseling interventions for tier 2	20	46	34
Counseling interventions for tier 3	24	39	37
Collecting and analyzing data to determine effectiveness of RTI interventions	40	34	26
Using progress monitoring data to info counseling interventions in RTI	on 40	41	19

School-wide data management systems for documentation & decision making	39	37	24
Parental involvement in an RTI framework	54	36	10
Collaborative practices in an RTI framework	41	39	20

Research Question 3: To what degree have the responsibilities of school counselors changed due to RTI implementation?

Nineteen percent of participants reported that their responsibilities have not changed due to RTI implementation. The majority (67%) reported that their responsibilities have changed 40% or less. The three most frequently identified changes were as follows: "I now collaborate with colleagues as part of an RTI team" (70%); "I now provide tier 2 and/or tier 3 interventions to struggling students" (54%); and, "I am now involved in data collection and/or data management in support of RTI decisions" (52%).

Research Question 4: Which aspects of RTI consume most of the school counselors' time?

Respondents identified the following responsibilities as being performed either daily or weekly: involvement with case management for students with academic concerns (65%), implementation of tier 3 counseling interventions (64%), involvement with case management for students with social-emotional concerns (58%), support of teachers with academic interventions (51%), and provision of academic interventions directly to students (46%). The four activities in which a high percentage of participants reported no involvement are as follows: "measure progress of interventions with individual students through pre/post tests" (70%), "measure progress of my school-wide interventions through pre/post tests (55%), "measure progress of my school-wide interventions through pre/post tests (54%), and "collect data about the

needs of student through needs assessments to better inform culturally relevant practices in my

	Daily	Weekly	Monthly	Quarterly	Yearly	Not at all
Percent						
school" (49%; see table 3 for detailed response percentages).						

Table 3

Frequency of Completing the Following tasks in Relation to RTI Implementation

Implement Tier 1 counseling interventions	16	27	22	14	8	13
Measure progress of my school-wide interventions through pre/post tests	0	2	19	18	6	55
Implement Tier 2 counseling interventions	8	32	14	12	3	31
Measure progress of my small group/peer support interventions through pre/post	0	5	20	19	2	54
Implement tier 3 counseling interventions	28	35	11	5	2	19
Measure progress of my interventions with individual students through pre/post tests	0	3	14	11	2	70
Support teachers with academic interventions directly to students	14	37	22	8	3	16
Provide academic interventions directly to students	16	30	6	8	2	38
Being involved with case management for students with social-emotional concerns	29	28	21	3	2	17
Being involved with case management for students with academic concerns	27	38	16	1	0	18
Collect data about the needs of students through needs assessments to better inform RTI interventions		14	19	18	11	35
Collect data about the needs of students through needs assessments to better inform culturally relevant practices in my school		6	15	11	16	49
Examine school-wide data to determine RTI counseling interventions	2	17	13	25	16	27
Discuss standardized test data with relevant parties	2	9	27	33	13	16
Coordinate efforts and ensure proper communication between RTI team members, students, and family members		22	24	14	8	29

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Train or present information to my colleagues about RTI interventions	0	5	6	8	22	59
Train or present information to my colleagues about how to gather and analyze RTI data	0	0	8	11	16	65

Research Question 5: Is attitude toward RTI predicted by factors including perceived confidence with various aspects of the framework?

The full regression model accounted for 51% of the variance in perception of RTI as a beneficial change. Two variables were statistically significant: perceived leadership competence ($\beta = .35$; <u>p</u><.01), and understanding the specific roles, responsibilities and benefits of RTI ($\beta = .52$; <u>p</u><.05). If school counselors (a) perceived building-level leaders as knowledgeable and positively predisposed to RTI, and (b) were confident in understanding their roles and responsibilities within an RTI model, as well as its potential benefits, they were more likely to view RTI as a vehicle to drive improvements in academic and behavior outcomes for all students.

Discussion

The findings of this study have implications for both pre-service preparation and professional development of practicing school counselors. Driven by national efforts exploring school counselor preparation, the College Board found that 28% of the 5300 school counselors surveyed viewed their graduate level training as insufficient preparation for their role as school counselors, and 56% reported feeling "somewhat" prepared for the challenges they face (NOSCA, 2011). Likewise, in this current study, although the overwhelming majority of survey respondents believed RTI could improve academic and behavioral outcomes, over 40% had little confidence in their abilities to execute the following key roles: (1) increase parental involvement, (2) engage in collaborative practices, and (3) analyze and use data to make decisions about

student needs. Yet, data management and collaborative practice are among the duties reported as most significantly changed since RTI was implemented in their schools. Given this disconnect between perceived confidence and assignment of current responsibilities, the authors argue for concerted preparation efforts in these areas for both pre-service and practicing school counselors. In addition, two variables were found to influence school counselors beliefs' towards RTI: Those respondents with positive, proactive leaders and a clear understanding of their own roles and responsibilities in relation to RTI were more likely to view the initiative as benefiting student outcomes. Therefore, we believe RTI provides an impetus for school counselors to proactively define their responsibilities and leverage their knowledge base as part of the school leadership team.

Parental Involvement

Actively engaging parents/guardians in their children's educational process has long been understood to yield positive results (Patrikakou, 2004, 2008). Despite this, there remains little emphasis on parental involvement in the RTI process, and parents may be confused about new terminology and procedures for access to special education (Bryd, 2011). Therefore, highlighting opportunities for school counselor involvement in this area should be a goal at both the preservice and in-service levels. The need for outreach to parents becomes even more pronounced when one considers the academic, social, and emotional benefits that stem from fostering schoolfamily partnerships (Patrikakou, Weissberg, Redding, & Walberg, 2005).

Bryd (2011) recommends a systematic approach to increasing parental involvement in the RTI process. For the school counselor, this process should begin with a needs assessment of current levels of parental involvement and the development of three to five year goals for increasing involvement, as part of a comprehensive school counseling plan. For example, the

school counselor, working as a member of the RTI leadership team, could organize a quarterly RTI open house, in which parents would receive information about key aspects of RTI, including the educational "jargon" that is often seen by parents a roadblock to involvement (Pena, 2000). These open houses could also include hands-on experiences with intervention materials used by students. Linking interventions to strategies and resources that can be utilized at home would optimize parental involvement, so families could best support the learning needs of their children. Furthermore, the school counselor could organize and lead RTI support groups to help parents process and understand their child's learning challenges. The school counselor should also be an advocate for parental rights within the RTI process, as sometimes RTI can be perceived or presented as a roadblock to special education (US Department of Education, 2011). The school counselor's parental involvement plan, with its related short and long-term goals, should be assessed on an ongoing basis through the use of tools such as parent surveys and interviews. Ongoing data collection and analysis can support the school counselor's development of outreach programming that is highly specific and useful to the parent population of the school (Bryd, 2011).

Collaborative Practices

In addition to partnering with families, school counselors must form collaborative partnerships with all stakeholders—forging synergies amongst and between key individuals within a student's ecosystem (ASCA, 2003, 2005 & 2012; McMahon, Mason, & Paisley, 2009). Specifically, when participating in an RTI team, the school counselor should help parents/guardians, administrators, teachers, and support personnel identify and track the efficacy of evidence-based best practices for students. Using their facilitative skills, school counselors can lead this effort not only during meetings but also by following-up with each party to ensure

continuity of care. School counselors can foster a collaborative spirit by creating common ground and sharing accountability for results (ASCA, 2012), drawing upon strengths of stakeholders' contributions, and managing expectations (Chen-Hayes, Ockerman, & Mason, 2014). They may also create necessary paper-based and electronic processes to help increase efficiency among and between multiple parties (Chen-Hayes et al., 2014; Perry, 2007). Providing pre-service counselors with these opportunities during practicum and internship is paramount to their success in these endeavors after graduation. Thus, counseling students should be evaluated on group school-based assignments, with special attention given to teaming and collaborative practices (Education Trust, 2003). Professional development regarding how best to form teams to capitalize upon different communication styles and skill sets, as well as to create feedback loops, should be part of the on-going training of school counselors, especially when national reform efforts, such as RTI, are mandated.

Using data and data-management systems to document services and make decisions

The ability to collect and analyze data is integral to a school counselor's role. As noted by Hatch (2013), "using data to drive decisions ensures *every* student receives the benefit of a school counseling program that is preventative in design, developmental in nature, and comprehensive in scope" (p. 52). As such, school counselors must determine the needs of stakeholders through using readily available data (report cards, discipline records, attendance reports, graduation rates, etc.) and by creating and implementing needs assessments. Ockerman and colleagues (2012) asserted that this data-based skill set positions school counselors as integral members of RTI teams. Specifically, school counselors can administer needs assessments prior to interventions to establish baseline (academic, personal/social and college/career) and to determine the most urgent needs. Moreover, they can evaluate their efforts through both formal and informal assessments (pre/post tests, surveys, interviews, etc.) to create efficacy in helping students meet desired goals.

The transformed role of the school counselor emphasizes dismantling the pervasive achievement gap for poor and marginalized populations. This substantial paradigm shift (Martin, 2002; Ockerman et al., 2012) is congruent with the foundational roots of RTI, aiming to reduce the disproportionate representation of students of color in special education settings (Newell & Kratochwill, 2007). By proactively reviewing data about who is receiving special services and who is not, school counselors can champion equitable distribution of services for all students and thus contribute to important data-driven decisions within the RTI structure (Chen-Hayes et al., 2014). School counseling preparation programs must integrate such data-driven and assessment-based components into both curricular and experiential activities. Furthermore, seasoned school counselors, as indicated by the results of our survey, could benefit from advanced training to become competent in these necessary skills.

Leadership and Role Definition

The results of this study indicate that school counselors who perceive their school leaders as highly knowledgeable and enthusiastic about the implementation of RTI and are confident with their roles and responsibilities within the framework are more likely to view RTI as a viable means of improving student outcomes. Prior research on the influence of leadership upon reform supports the idea that if the principal/dean and other building leaders are supportive and proactive in the implementation of change, so too are school faculty and support staff (e.g., Green & Cypress, 2009; Leithwood et al., 2006; Hollenbeck & Patrikakou, 2014; Penlington, Kington, & Day, 2008). Conversely, if leadership actively oppose or are apathetic towards reform implementation, staff and faculty will follow suit. This finding underscores an opportunity for school counselors to positively engage with RTI to the benefit of the entire school faculty and students (Ockerman et al., 2012; Ryan et al., 2011), as it is not just the principal, but also other building leaders, that set the tone in relation to change. Specifically, school counselors can help others understand how collaborative data-driven decision making can aid children in learning, reduce unnecessary referrals to special education, limit concerns about equity and access, and simultaneously advance comprehensive school counseling programs. The authors urge school counselors to recognize and embrace this opportunity to help lead sustained and systemic change, responding with tenacity and intention to this national reform effort.

In addition to proactive leadership, school counselors who had a clear understanding of their own roles and responsibilities were most likely to view RTI as a vehicle that could drive academic and behavioral outcomes for all students. These same results were also documented in a state survey of various educational professionals (i.e., school psychologists, special educators, and general educators), in which school psychologists were most positive about RTI when they had proactive leadership and a clear understanding of their own roles and responsibilities (Hollenbeck & Patrikakou, 2014). The authors posit that those professionals that have had historically less regimented duties than those of educators, benefit greatly from a clear idea of how an educational reform influences and aligns with their specific professional practices. Therefore, we believe school counselors should leverage the advent of RTI to proactively define their roles by advocating for tasks compatible with their unique skill set (Ockerman et al., 2012). In addition, it is important for the school counselor's Annual Agreement (ASCA, 2012) to delineate these duties. Specifically, the Agreement can be used to list specific responsibilities, school counseling curriculum, and program components that will promote RTI services (at all three tiers) while also identifying areas of need for professional development (ASCA, 2012). It is

time for school counselors to proactively engage in defining their professional roles and responsibilities, thus maximizing their effectiveness with all students.

Limitations

Although this study provides important information regarding the effects of RTI training on school counselors' confidence and perceptions in the context of substantial statewide implementation, some limitations must be recognized. First, inherent in survey research is the potential influence of the self-selectivity of participants on study outcomes. Based on this argument, the sample used in this study may not be representative of the broader membership of practicing school counselors, therefore limiting the generalizability of findings. Furthermore, the lack of data regarding participants' gender, ethnicity, and age makes it difficult to ascertain if the sample represents the broader population of school counselors across the state. An additional limitation of any anonymous, self-reported information is the lack of verification of reported data, as well as the confirmation that only eligible individuals filled out the survey.

Future Directions

While this Illinois-based study is instructive, a national study is needed to examine school counselors' preparedness, especially in states implementing RTI. A survey of this magnitude would foster a more comprehensive view of practicing school counselors and thus assist school districts in addressing professional development needs. Moreover, it is imperative that counselor educators be vigilant about including RTI in their curriculum in introductory and school counselor special education courses, as well as within practicum and internship experiences, to ensure the next generation of school counselors are best prepared to meet student needs. The implementation of RTI creates a prodigious opportunity for school counselors to lead trailblazing efforts within their schools and communities. They are poised at a unique crossroads; positioned

to interface with administrators, staff, students and families to promote positive academic,

personal/social and career/college outcomes for all students.

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Changes Over Time in Masters Level School Counselor Education Programs

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Abstract

A national survey regarding the preparation of entry-level school counseling students was conducted to assess changes over time that may have occurred in the credit hours, screening methods, faculty experiences, course content, fieldwork requirements, and importance of The Education Trust concepts. Key findings include increases in the number of faculty with school counseling experience and the number of programs requiring practicum and internship to be completed in a school setting, and decreases in the number of courses designed specifically for school counseling students and the importance of supervision.

Keywords: Counselor Education, The Education Trust, School Counseling, Counselor Preparation

It has been over a decade since (Pérusse, Goodnough, & Noël, 2001) surveyed school counselor educators about their screening methods for school counselor student candidates, faculty experiences, curricular content, and fieldwork requirements. Pérusse & Goodnough (2001) also asked these same participants to rate their familiarity with the Education Trust National School Counseling Initiative and the New Vision for school counseling, the eight essential elements, as well as their level of agreement with the five domains of school counseling: (1) leadership; (2) advocacy; (3) teaming and collaboration; (4) counseling and coordination; and (5) assessment and use of data.

In the current study, we sought to replicate the original study to ascertain what has changed and what has remained the same since the original article was published in 2001. In the original study, Pérusse, Goodnough, & Noël (2001) discussed the similarities and differences between school counselor preparation programs. While differences among programs were noted, there were similarities within the structure of programs. For example, a majority of programs had a common core of courses required for all counseling students regardless of specialization, as well as specialized courses specific to the student's program of study within school counseling. Within this similar structure there existed differences among programs, especially with regard to the number of specialized school counseling courses offered, the number of hours of fieldwork experience required, and the number of programs that had at least one faculty member who had previous experience as a school counselor.

The Education Trust advocacy board developed the New Vision school counselor, focusing on educational equity, access, and academic success (House & Martin, 1998; The Education Trust, 2009a). Within this vision exists a concentrated effort on closing the achievement gap between poor and minority children and those who are more advantaged, through targeted interventions. The advocacy board further identified five domains that provide definition to the school counselor's role. School counselors work as *advocates* for individual student success, as *leaders*, and *collaborators* with administration and staff to promote student success. School counselors provide individual *counseling and coordination* of a sequentially planned program, and *assess* the effectiveness of their interventions through the use of data to improve student success (Pérusse & Goodnough, 2001). Additionally, the Education Trust identified eight essential elements for change leading to the transformation of school counseling programs. Such elements were deemed by the advocacy board as crucial to the future success of closing the achievement gap for disadvantaged students. The eight essential elements included: (1) criteria for selecting and recruiting candidates for counselor education programs; (2)

curricular content, structure, and sequences of courses; (3) methods of instruction, field experiences, and practices; (4) induction into the profession; (5) working relationship with community partners; (6) professional development for counselor educators; (7) university/school district partnerships; and (8) university/state department partnerships (The Education Trust, 2009b).

Pérusse and Goodnough (2001) highlighted counselor educator perceptions of how much their program's content mirrored the Education Trust's New Vision and five domains. Overall, participants rated these elements as important for any school counseling program, although slightly lower means were reported for actual program implementation of the New Vision (Pérusse & Goodnough, 2001). Results for the eight essential elements revealed that the majority of the Education Trust's goals were incorporated into these programs. The areas with highest ratings were multiculturalism and supervision, while lower means were associated with the induction process (i.e., the process for admitting students to the program), university and school partnerships, and university and state partnerships.

Changes Since 2001

National Center for Transforming School Counseling. The Education Trust and MetLife Foundation established the National Center for Transforming School Counseling (NCTSC) in 2003. The center's mission is to "make certain that school counselors across the country are trained and ready to help ALL groups of students reach high academic standards" (The Education Trust, 2003, ¶ 1). When established, The Education Trust retained standards with the original three foci of education equity, access to rigorous college and career-readiness curricula, and academic success for all students. The five domains of leadership, advocacy, teaming and collaboration, counseling and coordination, and assessment and use of data also

continue to be defined as they were in 2001. They provided school counselors with professional development, program reviews for pre-K - 12, and collaborated with state departments of education regarding certification. Currently, there are 10 essential elements in school counseling, rather than the previous eight.

The NCTSC's ten essential elements include the addition of: (1) a mission statement unique to the program that reflects the Transforming School Counseling Initiative (TSCI) principles; and (2) an emphasis on technological competency. The remaining eight essential elements retained their original 1999 intent, but with a few modifications. These include: 3. recruitment and selection of diverse candidates; 4. curriculum reform of content and sequence; 5. TSC-focused pedagogy, field experiences and practices; 6. induction into the profession; 7. a working relationship with community partners; 8. ongoing professional development for graduate school faculty; 9. university/school district partnerships; and 10. university/state department partnerships (The Education Trust, 2009b).

American School Counselor Association. The American School Counselor Association (ASCA) National Model was published in 2003. The ASCA National Model included many of the same equity-based elements found in the Education Trust's Transforming School Counseling Initiative – namely, leadership, advocacy, collaboration, and systemic change. Along with these elements were the three domains of academic, career, and personal/social development from the ASCA National Standards for School Counseling Programs (Campbell & Dahir, 1997) to describe standards for students, and the four quadrants of: (1) foundation; (2) delivery; (3) management; and (4) accountability (ASCA, 2005) to describe how a model school counseling program is conceived, managed, delivered, and evaluated. The ASCA National Model (2012) is now in its third revision. The original framework remains the same; however notable changes

exist in the language or definition of foundation, delivery, management, and accountability. With the third edition's emphasis on accountability, the management section was revised to include updated tools and assessments for school counselors (ASCA, 2012). Finally, the revised accountability component seeks to help school counselors provide data-driven results through analysis, evaluation, and improvement of their programs.

The Council for Accreditation of Counseling and Related Educational Programs. Another organization that has influenced school counselor preparation programs is The Council for Accreditation of Counseling and Related Educational Programs (CACREP). CACREP Standards have changed somewhat since the previous studies were completed. At that time, Pérusse, Goodnough, & Noël (2001) acknowledged that the 2001 Standards may have influenced school counselor preparation, and with the revisions to the standards published by CACREP in 2009, the influence is likely to have continued. Key changes for 2009 included: a standard specifying that core faculty have doctoral degrees in counselor education and supervision if they were not employed as full-time faculty for at least one year before July 1, 2013; that student learning outcomes (SLOs) are emphasized in the revised Program Area Standards; and a standard that limits delivery of instruction by non-core faculty to less than the number of credit hours taught by core faculty (Urofsky, 2008). The intention of these changes was to improve the content of counselor preparation programs, as well as fortify the distinctiveness of counselors graduating from CACREP accredited programs.

The current research compares findings obtained from the present study with those reported in two previous studies – one by Pérusse, Goodnough, & Noël (2001) regarding screening methods, faculty experiences, curricular content, and fieldwork requirements and a second study by Pérusse & Goodnough (2001) comparing the content of school counselor

education programs with The Education Trust initiatives. Specifically, we sought to answer the following research question: Are there any changes in the number of credit hours, screening methods, previous faculty experience in a school setting, course content, fieldwork requirements, and the importance of The Education Trust elements and concepts in school counselor education reported by counselor educators when compared to findings reported in 2001?

Method

Procedures

Entry-level school counselor preparation programs were identified using several sources (e.g., CACREP and ASCA directories, and state-level school counseling association websites). Nationally, 322 programs were identified. An online survey was developed using items identical to those employed by the previous study, and an email message was sent to the department chair or school counseling program coordinator of each identified program containing a link to the online survey. This national survey was initially distributed at the end of the Spring semester, and a reminder was sent early in the Fall semester.

Participants

A national sample of 131 submissions were received from the online survey, for a return rate of 41%. The initial request to complete the survey yielded 71 submissions (22% of all potential respondents), while the second request yielded an additional 60 submissions (19%). Given the amount of time that elapsed between the initial survey request and the reminder, the data were sorted by program characteristics unlikely to change in the relatively short amount of time between participation requests (number of credits, specializations offered, and CACREP approval) and examined to identify duplicates. Five duplicate entries were identified, leaving 126 usable surveys and an effective response rate of 39%. Of those 126 participants, 72 (57%) identified their program as CACREP accredited.

Instrument

The instrument was an online adaptation of the surveys employed by previous studies. The Pérusse, Goodnough, & Noël (2001) study contained three sections to assess: screening methods and the number of credit hours required in master's level school counseling programs (Part A); the number of faculty and their characteristics (Part B); and curriculum content to distinguish coursework designed specifically for school counselors from coursework designed for all master's level counseling students (Part C). To assess the Education Trust's ten essential elements, the measure of the eight essential elements employed in the Pérusse & Goodnough (2001) study was modified to reflect the addition of two essential elements and minor wording changes made by The Education Trust to the original eight essential elements (Part D). All items used to assess the ten essential elements are presented in Table 3 and were rated by participants on a 4 point scale where 1=never, 2=sometimes, 3=usually, and 4=always.

Data Analyses

Calculations were performed with Microsoft Excel (Microsoft, 2010) to obtain all reported descriptive statistics.

Results

Part A: Credit Hours and Screening Methods

The number of semester credit hours for completion of the master's-level school counseling program ranged from 30 to 67 credit hours (n = 118, M = 49.64, SD = 6.86), and the number of quarter credit hours ranged from 72 to 95 (n = 8, M = 75.25, SD = 8.05). Seventy-seven programs (61%) reported requiring between 48 and 59 semester credit hours, 23 (18%)

required 60 to 67 semester credit hours, and 18 (14%) required 36 to 45 semester credit hours in their entry-level programs. When compared to the previous study, the average number of credit hours reported was 1.5 credits higher.

All 126 participants responded to questions about screening methods. Nearly half of all respondents identified the following as the preferred methods for screening applicants to the program: grade point average (GPA; n = 125, 99.2%), a written statement of purpose (n = 114, 90.5%), a personal interview (n = 89, 70.6%), and entrance examinations (e.g., GRE scores) (n = 62, 49.2%). Fifty-five respondents (43.7%) required applicants to provide a writing sample, 36 (28.6%) required a group experience, 12 (9.5%) required a portfolio, and 5 (4.0%) required some specific work or volunteer experience. When compared to the screening methods with the survey administered in 2000, the percent of programs using: GPA, a personal interview, and a group experience increased by 1.2% or less; the use of a statement of purpose increased 14.2%; portfolio use increased 4.1%; the use of specific work/volunteer experience decreased 11.3%; and the use of entrance examinations decreased 14.8%.

Part B: Previous Faculty Experience in a School Setting

All 126 participants responded to questions about previous faculty experience in a school setting. One hundred and twenty-three programs (97.6%) reported having at least one faculty member who had worked in a school setting and 122 (96.8%) reported at least one faculty member with experience as a school counselor. The number of programs reporting faculty with experience in a school setting increased 8.8%, while the number of programs reporting faculty with school counseling experience increased 13.9%.

Respondents were also asked how many faculty members taught school counseling courses in their program. In the 126 programs, 496.5 faculty taught courses specific to the

school counseling specialization. Overall, a little more than two-thirds (n = 346.5, 69.8%) of these faculty members had previous work experience as a school counselor – an increase of 17.8% over the previous study's finding.

Part C: Checklist of Course Content Areas

Table 1 provides a summary of course content areas required for school counseling students and those designed specifically for school counseling. Of the 126 programs, 20 (15.9%) had school counseling as their only program option, an increase of 8% when compared to the data collected ten years earlier. Thirty-one programs (24.6%) did not identify any core courses designed specifically for school counseling students, a 20.2% increase compared to the data collected in 2000.

Table 1

counseling students.				
			Required and Designed	
	Required for School		for School Counseling	
	Counseling Students		Students	
Course Content Area	<i>n</i> % (2000 %)		n	% (2000 %)
Theories in Counseling	125	99.2 (99.5)	32	25.4 (11.2)
Testing, Assessment, Appraisal	123	97.6 (98.9)	40	31.7 (19.8)
Development Across the Lifespan	122	96.8 (92.6)	35	27.8 (10.9)
Group Counseling/Group Work	120	95.2 (98.4)	39	31.0 (13.9)
Research Methods and Evaluation	119	94.4 (96.8)	38	30.2 (7.7)
Helping Relationships	118	93.7 (98.4)	36	28.6 (11.9)
Career and Lifestyle Development	115	91.3 (99.5)	42	33.3 (24.5)
Multicultural Counseling	114	90.5 (91.5)	32	25.4 (9.8)
Legal/Ethical Issues in Counseling	98	77.8 (78.8)	46	36.5 (20.8)
Counseling Children and/or	54	42.9 (64.0)	69	54.8 (69.6)
Adolescents				
Psychopathology, DSM-IV,	54	42.9 (49.2)	10	7.9 (12.9)
Diagnosis				
Couple and Family Counseling	46	36.5 (48.1)	12	9.5 (9.9)

Course content areas required and those required and designed specifically for school counseling students.

Substance Abuse	41	32.5 (32.8)	11	8.7 (14.5)
Computer and Related	9	7.1 (19.0)	3	2.4 (16.7)
Technology				

Respondents were asked to write in any additional courses required in their school counseling program. This request generated a total of 204 course titles from 109 respondents. Titles of courses supplied by the respondents were grouped into course content areas using the categories used in the previous study (Pérusse, Goodnough, & Noël, 2001), and additional course content areas were created to capture responses that did not fit. Table 2 shows course content areas designed specifically for school counseling students, and suggest that, on average, programs required one or two specialized courses for school counseling students.

Table 2

	2000		2010	
Course Content Area	n	%	n	%
Introduction to school counseling	55	29.1	45	35.7
Organization and administration	41	21.7	29	23.0
Consultation	38	20.1	17	13.5
Special education	25	13.2	16	12.7
Program planning and management	17	9.0	14	11.1
Leadership and advocacy	0	0	9	7.1
Foundations in education/curriculum course	25	13.2	8	6.3
Issues in school counseling	6	3.2	8	6.3
Educational psychology	0	0	7	5.6
Play therapy	4	2.1	7	5.6
School law/ethics	4	2.1	6	4.8
Professional school counseling	0	0	5	4.0
Classroom management	0	0	5	4.0
School-community interventions/partnerships	0	0	5	4.0
Advanced school counseling	0	0	5	4.0
Crisis intervention	0	0	4	3.2
School guidance and counseling	5	2.6	4	3.2
English language learners	0	0	2	1.6

Specialized school counseling content areas required for school counseling students.

College readiness counseling	0	0	2	1.6
Elementary school counseling	27	14.3	2	1.6
Secondary school counseling	26	13.8	2	1.6
Classroom guidance	3	1.6	1	0.8
Youth at risk	3	1.6	1	0.8
Parent education	2	1.1	0	0

Fieldwork requirements. One hundred and twenty-five participants responded to questions about practicum, internship, and other field experiences required in their programs. Of the 125 respondents, 72 (57.6%) provided fieldwork opportunities in school settings prior to practicum or internship. These opportunities included observations, job shadowing, interviews, service learning, and teaching practicum.

Of the 122 (97.6%) programs that required a practicum for school counseling students, 11.4% more programs (n = 97, 79.5%) required these hours to be completed in a school setting in 2010 than in 2000. The total number of reported practicum hours varied from 6 to 1500. Most programs (n = 69, 56.6%; 15.9% increase from 2000) required 100 hours, 14 (11.5%; 2.7% increase) required 150 hours, and six (4.9%; 0.6% decrease) required 300 hours. Ten programs (8.2%) required from 6 to 75 hours (13.8% decrease), 5 programs (4.1%) required from 110 to 140 hours (0.3% increase), 8 programs (6.6%) required 175 to 280 hours (1.1% decrease), and 10 programs (8.2%) required more than 300 hours (0.6% decrease). For the eight programs with practicum requirements of 450 to 1500 hours, four combined practicum and internship, one required a 600 hour internship and a 480 hour practicum, and three programs listed the same number of practicum and internship hours.

Of the 115 (92%) programs that required an internship, all but one (n = 114, 99.1%) required these hours to be completed in a school setting, a 4.6% increase from 2000. Two programs required at least half of the internship hours to be completed in a school setting.

Approximately three quarters (75.7%; 24.8% increase) required 600 hours, and 5 programs (4.3%; 12.3% decrease) required 300 hours. Five programs (4.3%; 8.6% decrease) required from 150 to 240 hours, 14 required from 350 to 540 hours (12.2%; 3.9% increase), and 4 programs (3.5%; 4.5% decrease) required from 700 to 1500 hours. Four programs noted that the number of internship hours varied depending on previous experience, and the minimum number of hours required is reflected above.

Overall, total combined fieldwork experience hours for practicum and internship ranged from 0 to 3000 hours. One program (0.9%) did not require either practicum or internship to be completed in a school setting, a decrease of 2.8% compared to 2000.

Part D: Ten Essential Elements

One hundred and eighteen participants responded to the 27 items assessing the degree to which the ten essential elements were reflected in their school counselor education programs, and are presented in Table 3. The highest-rated item in 2010, 'the program includes multicultural concepts throughout the curricula,' was also the highest rated item in 2000. The next two highest-rated items in 2010 were 'counselor educators include the American School Counselor Association (ASCA) National Model for School Counseling Programs (2005) in their teaching' and 'Students (as future professionals) are taught to serve as team members in the school to increase student achievement.' Of the items assessed in both 2000 and 2010, the three items with the largest change in a positive direction were 'faculty encourage students to attend and present at professional meetings and conferences,' 'program faculty take steps to secure mentors for new school counseling professionals,' and 'faculty work cooperatively with students to conduct research, publish and/or present at professional meetings.' The two items with the largest change in a negative direction were 'supervision of fieldwork is focused on clinical

school counseling issues' and 'supervision of fieldwork is focused on non-clinical school counseling issues.' These were the second and third most highly rated items in 2000. Any other changes observed between 2000 and 2010 were relatively small; of the remaining nine items, five evidenced changes of between 0.02 and 0.09, and four evidenced changes of between 0.1 and 0.19.

Table 3

Extent to which the ten essential elements are reflected in school counselor education programs

programs		
Item	2000 M(SD)	2010 M(SD)
Element 1		
The mission statement for the school counseling program determines direction and focus	3.36(.85)	3.45(.74)
The program focuses on the importance of being a leader and advocate for change		3.53(.63)
Element 2		
The school counseling program prepares students to be technologically competent		3.17(.68)
Faculty demonstrate technological competence in their teaching Element 3		3.26(.53)
The screening and recruitment process effectively increases the diversity of new candidates for the school counseling program	2.98(.88)	3.06(.79)
The program philosophy guides the selection of candidates for the program		3.52(.74)
Faculty collaborate with stakeholders external to the university in the recruitment and/or selection of new candidates for the program		2.86(.96)
Element 4		
Students (as future professionals) are taught to serve as team members in the school to increase student achievement		3.70(.49)
Students (as future professionals) are taught to challenge educational inequity		3.64(.58)
Element 5		
The program includes multicultural concepts throughout the curricula	3.65(.56)	3.78(.51)
Supervision of fieldwork is focused on clinical school counseling issues	3.78(.46)	3.43(.58)
Supervision of fieldwork is focused on non-clinical school counseling issues	3.57(.61)	3.27(.66)
Theory and practice focus on the counselor as a team member		3.45(.70)

in the school setting Students in the program demonstrate the skills needed to be an		3.64(.56)
effective school counselor through performance-based outcomes		5.04(.50)
The program teaches students advocacy and leadership		3.61(.56)
strategies		5101(150)
Element 6		
Program faculty take steps to secure mentors for new school counseling professionals	2.38(1.04)	2.62(1.00)
Faculty work cooperatively with students to conduct research,	2.56(.91)	2.80(.78)
publish and/or present at professional meetings		
Faculty encourage students to attend and present at professional meetings and conferences	3.19(.85)	3.52(.61)
The program prepares students to take risks for kids and		3.41(.62)
challenge the system		
Element 7		
Faculty are actively involved in the school and community,	3.28(.78)	3.26(.66)
serving as models and effecting school/community change		
Faculty collaborative efforts with local school districts are being		2.96(.76)
made to support closing achievement gaps		
Element 8		
Faculty are engaged in professional activities that contribute to the development of innovative approaches to preparing school counselors	3.38(.81)	3.45(.59)
Element 9		
There are university/school system plans for making the role of the school counselors in local districts more effective	2.58(0.99)	2.77(.87)
Element 10		
Counselor educators, school district personnel and state	2.74(0.95)	2.85(.83)
department personnel collaborate to offer in-service to school counselors	2.74(0.93)	2.05(.05)
Faculty are working with the state department to make changes	2.91(1.01)	2.87(.92)
in school counseling in the state		× ,
Counselor educators provide professional development to	3.01(0.87)	3.15(.76)
practicing school counselors		
Counselor educators include the American School Counselor		3.77(.48)
Association (ASCA) National Model for School Counseling		
Programs (2005) in their teaching ^a		
Note. Items blank for 2000 were not asked at that time		
altern net next of ten accential alements		

^aItem not part of ten essential elements

Discussion

The results of this study extend the findings of Pérusse, Goodnough, & Noël (2001) with respect to screening methods, faculty experiences, curricular content, and fieldwork requirements of school counselor preparation programs. As was true of the previous study, 48 semester credit hours was the most common credit hour requirement. The screening methods employed to determine admission to the programs we surveyed fell into the same rank-order as was found in the previous study, but noteworthy increases in the use of a statement of purpose and portfolio and a decrease in specific experience requirements were observed.

In spite of the current study having 15.9% more participants representing programs where school counseling was the only graduate program offering in counseling, a 20.2% increase in the number of programs with *no* core courses designed specifically for school counseling students was noted. Further, of the course content areas required for school counseling students by 75% or more of the institutions surveyed, the number of those courses designed *specifically* for school counseling students also increased by 15.5%.

Similar to the findings of the previous study, the most variability among programs existed within the number of hours required for fieldwork experiences. The majority of programs in the current study were CACREP accredited (57%) which was a substantial increase in the representation of CACREP accredited programs when compared to the previous study (33%). CACREP sets minimum standards for practicum (100 hours) and internship (600 hours), and effectively excludes programs with fieldwork experience requirements below those thresholds. Of concern when interpreting the findings for pre-practicum, practicum, and internship in both the current and previous study is that these terms, while consistently interpreted and applied in CACREP accredited programs, may not be used to describe the same kinds of fieldwork experiences in non-CACREP accredited programs. For example, pre-practicum in a non-

CACREP program may be interpreted by the respondent from that program to mean the practicum experience common among CACREP accredited programs. Clearly defining the intended use of these terms to participants would have ensured the variability observed reflects actual differences among programs, as opposed to different interpretations by participants.

The results of this study also extend the findings of Pérusse & Goodnough (2001) with respect to alignment of school counselor education program content with The Education Trust's ten essential elements. Similar to the previous study, the current study assessed counselor educators' perceptions of the importance of the ten essential elements and the extent to which these elements were reflected in their school counselor preparation programs. Our intent was not to measure the alignment of these programs with Education Trust initiatives.

The findings regarding changes over time in The Education Trust essential elements indicate that the importance of supervision has decreased by approximately half of a standard deviation. The two items assessing supervision distinguished between clinical (e.g., individual and group counseling) and non-clinical (e.g., classroom guidance activities and program development) and were among the three highest rated items in the previous study. In the current study, the rank of these items fell to 13 and 15. This trend is troubling as the supervision received while in a school counselor preparation program may be the last time it is provided with regular frequency by a qualified supervisor – if supervision occurs at all (Page, Pietrzak, & Sutton, 2001; Perera-Diltz & Mason, 2012; Portman, 2002). Lack of non-clinical supervision as a practicing school counselor may inhibit professional identity development (Dollarhide & Miller, 2006), while lack of clinical supervision may diminish the perceived ability of a practicing school counselor to deliver effective services (Portman, 2002). This finding is somewhat surprising, as a 13.9% increase was observed in the number of programs with at least

one faculty member with school counseling experience – while the capacity to provide both clinical and non-clinical supervision has increased, its importance has decreased.

Of the ten highest rated items among the ten essential elements, seven items were related to the ASCA National Model. The Education Trust informed the ASCA National Model with the themes of leadership, advocacy, collaboration, and systemic change explicitly incorporated into the framework (ASCA, 2005). These findings suggest that counselor educators have incorporated the ASCA National Model in their teaching, and provide evidence of concurrent validity for the second highest rated item, "Counselor educators include the American School Counselor Association (ASCA) National Model for School Counseling Programs in their teaching." The ASCA National Model did not exist when the Pérusse & Goodnough (2001) study was conducted and these seven items were not assessed then, but the responsiveness of counselor educators to changes in the landscape of school counseling are evidenced by these findings.

Limitations of the current study include the use of a self-report questionnaire and, in relation to the previous study, a lower effective response rate (39% vs. 57%). Future research describing the screening methods, curricular content, faculty experiences, and fieldwork requirements could be conducted at least in part through review of program materials that are now available online through university websites (e.g., course catalogs, policy manuals, applications, and faculty curricula vitae). Future research investigating faculty experience characteristics could more clearly distinguish between full-time, part-time and/or adjunct faculty to describe differences that might exist with regard to the representation of faculty with school counseling experience on the full-time faculty. Future studies should also clarify and define for survey respondents the nature of the field-based experiences being assessed to ensure CACREP

and non-CACREP programs read the items similarly (e.g., defining practicum as the highly supervised field-based experience that occurs about halfway through a graduate student's training and typically consists of 75-150 hours, and internship as the final field-based experience where graduate students are expected to assume increased responsibility over time and are typically 450 to 600 or more hours).

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