

# **THE COUNSELOR EDUCATOR'S SURVIVAL GUIDE**

**Designing and Teaching  
Outstanding Courses in  
Community Mental Health Counseling  
and School Counseling**

**SAMPLE  
CHAPTER**



**Dilani M. Perera-Diltz  
Kathryn C. MacCluskie**  
EDITORS

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**Dilani M. Perera-Diltz  
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**EDITORS**

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# Contents

<i>Preface</i>	vii
<i>About the Editors</i>	xi
<i>About the Contributors</i>	xiii
<b>1 Introduction: Foundations of Instructional Strategies for Counselor Educators</b> <i>Kathryn C. MacCluskie</i>	1
<b>2 Foundations of Clinical Mental Health Counseling: The Nuts and Bolts of the Profession</b> <i>Jill D. Duba and Donald Nims</i>	13
<b>3 Foundations and Techniques of School Counseling: Preparing for Contemporary Roles</b> <i>Debra C. Cobia</i>	53
<b>4 Human Growth and Development: Merging Life Span Development With the Counseling Process</b> <i>Bill McHenry and Jim McHenry</i>	79
<b>5 Multicultural Counseling: Training Culturally Intentional, Competent, and Ethical Counselors for the 21st Century</b> <i>Sherlon Pack-Brown, Sarah Coulter, and LaShonda Fuller</i>	93
<b>6 Legal and Ethical Issues: Promoting Responsible Practice and Commitment to Ethical Ideals</b> <i>Elizabeth Reynolds Welfel and Daniel O'Donnell</i>	115
<b>7 Theories of Counseling: If You Don't Have a Map You Might Get Lost</b> <i>Nancy L. Murdock and Chia-Chih D. C. Wang</i>	135
<b>8 Counseling Skills: Building the Pillars of Professional Counseling</b> <i>John Sommers-Flanagan and Nicholas Heck</i>	153
<b>9 Group Work: Standards, Techniques, Practice, and Resources</b> <i>Samuel T. Gladding and Nathaniel N. Ivers</i>	171

<b>10 Career Counseling: A Process-Based Teaching Approach for Training Career Counselors</b>	187
<i>Sarah Toman</i>	
<b>11 Assessment: Teaching Assessment in Counselor Education</b>	207
<i>John M. Laux, Carrie A. VanMeter, Stephanie A. Calmes, and Holly L. Harper</i>	
<b>12 Diagnosis, Pathology, Wellness, and Evidence-Based Practices for Counselors: Figuring Out What’s Wrong, What’s Right, and the Best Way to Help</b>	221
<i>Dale-Elizabeth Pehrsson, Mary Amanda Graham, Kerry A. Bartlett, and Asti Sproul</i>	
<b>13 Teaching Research: Adventures in Wonderland</b>	255
<i>Paula R. Danzinger</i>	
<b>14 Psychopharmacology Across the Life Span: Psychotropics Are Quite Complicated on Many Levels</b>	269
<i>Carl F. Rak, Dilani M. Perera-Diltz, and Kathryn C. MacCluskie</i>	
<b>15 Field Placement: “Where the Rubber Hits the Road”</b>	283
<i>Christopher M. Faiver, M. Cecile Brennan, and Paula J. Britton</i>	
<b>16 Adapting Courses to the Online Format</b>	299
<i>Dilani M. Perera-Diltz</i>	
<i>Appendix: 2009 CACREP Standards</i>	315
<i>Index</i>	333

# Foundations of Clinical Mental Health Counseling

# 2

## *The Nuts and Bolts of the Profession*

Jill D. Duba and Donald Nims

This course provides the foundation or survey of salient topics that all novice counseling students should be privy to from the early stages of their academic careers. We address the most critical topics that we believe should be included in this course. Due to the nature of this course, however, there must be a balance between the quantity (course topics) and quality (depth of conversation, discussion, attention) of information being presented. Although one goal of the course is to increase one's knowledge base, opportunities for conceptualization and application must be provided. We hope that the learning activities we suggest will aid counselor educators in this process. In addition, in such a course, it is important to schedule time at the end of each class for an open discussion about the topic addressed during that class period while asking students what they need in order to proceed into another new topic area. That is, appropriate closure on each topic may prevent students from feeling overwhelmed with the quantity of information being presented.



Finally, some topics may be more significant than others. For example, consider the topic on supervision in counseling. Before professional counselors are eligible to supervise, they must have completed a certain degree of clinical experience. So it may be more appropriate to address what students can *expect* from supervision. Also, consider the topic of consultation. In some programs, this is a separate course, whereas in others consultation is expected to be covered as a learning objective in one particular course (such as the foundations or internship course). Counselor educators must decide how much time should be allotted for any of the subtopics of this course.

Our chapter provides an outline—or a survey—of ideas. Our hope is that counselor educators might take the ideas and tweak them in order to best match their personal styles, as well as the dynamics of the classroom and program. We have organized the resources provided from the Supplemental Reading section onwards under the following topic areas:

- Mental Health Counseling in America or in the 21st Century
- Introduction to Ethics and Legal Issues in the Counseling Profession
- Counseling in a Multicultural Society
- Ethical, Legal, and Professional Behavior and Practice (Competence and Malpractice, Confidentiality, Records, and Technology)
- Professional Counselor as Scholar Practitioner: Yesterday and Today
- Introduction to Counseling Theories
- The Counseling Process: Skills, Assessment, Diagnosis and Treatment
- Counseling Children, Vulnerable Adults (Older Persons, Persons With Disabilities)
- Couples and Family Counseling
- Group Counseling
- School Counseling
- Counselor Supervision
- Career Counseling
- Consultation

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## OBJECTIVES AND CACREP STANDARDS

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The objectives of this course are fitting for an introduction course, as well as for expectations set forth by the Council for the Accreditation of Counseling and Related Educational Programs (CACREP, 2009) Standards. As in any introduction course, a common dilemma is how in depth any particular topic should be covered. Consider the topic of consultation. Some programs may have one course dedicated entirely to consultation. In other programs, this topic is covered in internship. However, some programs meet the relevant CACREP standard by addressing consultation in the introduction course. In the latter case, counselor educators must carefully assess whether or not students have been given appropriate opportunities to master the relevant course

objectives. That is, how can any given introduction topic be taught in such a way that a student has developed a proper knowledge or skill base? In what ways will students be encouraged to examine how their dispositions and values will impact any given counseling setting? We hope that this chapter will provide counselor educators with some ideas about meeting the following suggested course objectives.

## Knowledge

1. Demonstrate knowledge of the history and philosophy of the counseling profession, including significant factors and events specifically related to marriage and family counseling. (Section II.G.1.a.)
2. Demonstrate knowledge of the professional roles, functions, and relationships with other human service providers. (Section II.G.1.b.)
3. Demonstrate knowledge of professional organizations, primarily ACA, its divisions, branches, and affiliates, including membership benefits, activities, services to members, and current emphases. (Section II.G.1.f.)
4. Demonstrate knowledge of professional credentialing, including certification, licensure, and accreditation practices and standards, and the effects of public policy on these issues. (Section II.G.1.g.; Section II.G.1.j.)
5. Demonstrate knowledge of public and private policy processes, including the role of the professional counselor in advocating on behalf of the profession. (Section II.G.1.h.; Section II.G.1.i.)
6. Demonstrate knowledge of advocacy processes needed to address institutional and social barriers that impede access, equity, and success of clients. (Section II.G.1.g.; Section II.G.2.e.; Section II.G.2.f.)
7. Demonstrate knowledge of ethical standards of the American Counseling Association (ACA) and related entities and applications of ethical and legal considerations in professional counseling specifically related to marriage and family. (Section II.G.1.j.)
8. Demonstrate knowledge regarding general framework for understanding the stages and major models of consultation. (Section II.G.5.f.)
9. Demonstrate knowledge of counselor and consultant characteristics and behaviors that influence helping processes. (Section II.G.5.b.; Section II.G.5.f.)

## Skills

1. Demonstrate the ability to recognize counseling issues in clients through effective listening and attending skills and through theoretical models. (Section II.G.5.b.)
2. Demonstrate the ability to recognize multiple factors related to social concerns affecting clients in diverse settings. (Section II.G.2.a.)
3. Demonstrate application of consultative models to cases. (Section II.G.5.f.)



## Dispositions

1. Become aware of one's attitudes toward social concerns. (Section II.G.2.e.)
2. Undertake self-analysis. (Section II.G.1.d.)

## Values

1. Respect the diverse cultural and social backgrounds of individuals and groups. (Section II.G.2.)
2. Articulate the worth of counseling as a profession to clients and students. (Section II.G.1.a.; Section II.G.1.c.)

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## CRITERIA FOR EVALUATING A TEXT

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There are many ways by which to locate the most appropriate textbook and supplemental course materials. Certainly conducting Internet searches, consulting with publishing representatives, and conversing with colleagues is a way to start. Generally speaking, an appropriate textbook is one that meets the following:

1. Is based in a professional counseling context
2. Is written by practicing and/or knowledgeable professional counselors or counselor educators
3. Includes supplemental materials and resources for the instructor
4. Includes the ACA code of ethics
5. Addresses as many of the course objectives as possible
6. Is current

However, most of us want a book that fits our counseling identity and values. We want materials that we feel connected to, materials that convey what we believe are important about any given topic. So, for example, instead of getting acquainted with a potential textbook, it might be relevant to become acquainted with the authors or editor. Do these individuals have the same professional values? Are they professional counselors? Are they involved in the profession?

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## MOST POPULAR TEXTS

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In any case, the following textbooks appear to be the most popular for an introduction course.

- Corey, G., Corey, M. S., & Callanan, P. (2007). *Issues and ethics in the helping professions* (7th ed.). Belmont, CA: Brooks/Cole.
- Gladding, S. T. (2008). *Counseling: A comprehensive profession* (6th ed.). Upper Saddle River, NJ: Merrill Prentice Hall.
- Kottler, J., & Shepard, D. S. (2007). *Introduction to counseling: Voices from the field* (6th ed.). Belmont, CA: Brooks/Cole.
- Nystul, M. S. (2010). *Introduction to counseling: An art and science perspective* (4th ed.). Upper Saddle River, NJ: Merrill Prentice Hall.
- Remley, T. P., & Herlihy, B. (2010). *Ethical, legal, and professional issues in counseling* (3rd ed.). Upper Saddle River, NJ: Merrill Prentice Hall.

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## TOPIC: MENTAL HEALTH COUNSELING IN AMERICA OR IN THE 21ST CENTURY

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### Supplemental Reading

- Beam, A. (2001). *Gracefully insane: Life and death in America's premier mental hospital*. New York: Public Affairs Books.
- Buckley-Walker, K., Crowe, T., & Caputi, P. (2010). Exploring identity within the recovery process of people with serious mental illnesses. *Psychiatric Rehabilitation Journal*, 33, 219–227.
- Chaiken, S. B. (2010). Creating wellness through collaborative mental health interventions. In C. L. Scott (Ed.), *Handbook of correctional mental health* (pp. 345–376). Arlington, VA: American Psychiatric Association.
- Clarke, S. P., Oades, L. G., Crowe, T. P., Caputi, P., & Deane, F. P. (2009). The role of symptom distress and goal attainment in promoting aspects of psychological recovery for consumers with enduring mental illness. *Journal of Mental Health*, 18, 389–397.
- Compton, M. T. (2010). *Clinical manual of prevention in mental health*. Arlington, VA: American Psychiatric Association.
- Kartalova-O'Doherty, Y. (2010). Recovering from recurrent mental health problems: Giving up and fighting to get better. *International Journal of Mental Health Nursing*, 19, 3–15.
- Kelly, T. A. (2009). *Healing the broken mind: Transforming America's failed mental health system*. New York: New York University.
- Marshall, S. L., Oades, L. G., & Crowe, T. P. (2009). Mental health consumers' perceptions of receiving recovery-focused services. *Journal of Evaluation in Clinical Practice*, 15, 654–659.
- Mears, S. L., Yaffe, J. & Harris, N. J. (2009). Evaluation of wraparound services for severely emotionally disturbed youths. *Research on Social Work Practice*, 19, 678–685.
- Merikangas, K. R., He, J. P., Brody, D., Fisher, P., Bourdon, K., & Koretz, D. S. (2010). Prevalence and treatment of mental health disorders among US children in the 2001–2004 NHANES. *Pediatrics*, 125, 75–81.
- Newnham, E. A., & Page, A. C. (2010). Bridging the gap between best evidence and best practice in mental health. *Clinical Psychology Review*, 30, 127–142.

- Perlick, D. A., Hofstein, Y., & Michael, L. A. (2010). *Barriers to mental health service use in young adulthood*. New York: Oxford University.
- Torrey, E. F. (2001). *Surviving schizophrenia* (4th ed.). New York: Harper Collins Books.
- Torrey, E. F. (2008). *The insanity offense: How America's failure to treat the seriously mentally ill endangers its citizens*. New York: W.W. Norton.
- Vuckovich, P. K. (2010). Compliance versus adherence in serious and persistent mental illness. *Nursing Ethics*, 17, 77–85.
- Wells, R., & Punekar, R. S. (2009). Why do some health centers provide more enabling services than others? *Journal of Health Care for the Poor and Underserved*, 20, 507–523.

## Websites

- National Institute of Mental Health  
<http://www.nimh.org>  
This website provides extensive information regarding the status of mental health research and treatment in the United States. Definitions and criteria for mental health diagnosis are also provided. There are also links to other sites with application to mental health treatment.
- National Alliance for the Mentally Ill  
<http://www.nami.org>  
This website provides information similar to the NIMH but with a perspective from the consumer. Links are provided to state chapters with information regarding meetings.

## Learning Activity

During this particular course lecture, the instructor might consider visiting one or two local mental health treatment programs in the area.

## Vignette

An individual comes to your clinic wanting to see someone because he or she is depressed. How do you determine the level of severity? How does the availability of payment impact the delivery of service? How does your opinion of potential compliance with treatment influence whether you decide to treat this individual?

## TOPIC: INTRODUCTION TO ETHICS AND LEGAL ISSUES IN THE COUNSELING PROFESSION

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### Supplemental Reading

- Jennings, L., Sovereign, A., Bottorff, N., Mussell, M. P., & Vye, C. (2005). Nine ethical values of master therapists. *Journal of Mental Health Counseling, 27*, 32–47.
- Kaplan, D. M., Kocet, M. M., Cottone, R. R., Glossoff, H. L., Miranti, J. G., Moll, E. C., . . . Tarvydas, V. M. (2009). New mandates and imperatives in the revised ACA code of ethics. *The Journal of Counseling and Development, 87*, 241–255.
- Ponton, R., & Duba, J. D. (2009). The ACA code of ethics: Articulating counseling's professional covenant. *Journal of Counseling and Development, 87*, 117–121.
- Werth, J. L., Burke, C., & Bardash, R. J. (2002). Confidentiality in end-of-life and after death situations. *Ethics & Behavior, 12*, 205–222.

### Websites

- ACA Code of Ethics  
<http://www.counseling.org/Resources/CodeOfEthics/TP/Home/CT2.aspx>  
Every student should know how to locate the ACA ethical codes, as well as have them handy for a quick reference throughout the course.
- *A Practitioner's Guide to Ethical Decision Making* by Holly Forester-Miller & Thomas Davis  
<http://www.counseling.org/Counselors/PractitionersGuide.aspx>  
This on-line article reviews the moral principles, as well as an ethical decision-making model.

### Learning Activity

Typically there are activities in the textbooks. However, students may be encouraged to compare and contrast various informed consent and personal disclosure statements. Such example forms and statements can be easily accessed through an Internet search. Students also might write an informed consent document and/or personal disclosure document. Instructors are encouraged to locate any related state statutes and share them with students. A classroom discussion might follow or the state statutes can be compared to the ACA ethical codes.

## TOPIC: COUNSELING IN A MULTICULTURAL SOCIETY

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### Supplemental Reading

- Arredondo, P., Toporek, R., Brown, S. P., Sanchez, J., Locke, D., C., Sanchez, J., & Stadler, H. (1996). Operationalization of the multicultural counseling competencies. *Journal of Multicultural Counseling & Development, 24*, 42–78.
- Hays, D. G. (2008). Assessing multicultural competence in counselor trainees: A review of instrumentation and future directions. *Journal of Counseling & Development, 86*, 95–101.
- Jencius, M., & Duba, J. D. (2002). Creating a multicultural family practice. *The Family Journal, 10*, 410–414.
- Johnson, A. G. (2005). *Privilege, power and difference* (2nd ed.). Columbus, OH: McGraw-Hill.
- Neville, H. A., & Carter, R. T. (2005). Race and racism in counseling psychology research, training, and practice: A critical review, current trends, and future directions. *The Counseling Psychologist, 33*, 413–418.
- Ponterotto, J. G. (1988). Racial consciousness development among White counselor trainees: A stage model. *Journal of Multicultural Counseling and Development, 16*, 146–156.
- Tatum, B. D. (2003). *Why are all the Black kids sitting together in the cafeteria? A psychologist explains the development of racial identity*. New York: Basic Books.
- Villalba, J. A. (2009). Addressing immigrant and refugee issues in multicultural counselor education. *Journal of Professional Counseling: Practice, Theory & Research, 37*, 1–12.

### Websites

- The Online Teacher Resource  
[http://www.teach-nology.com/litined/multicultural\\_education/](http://www.teach-nology.com/litined/multicultural_education/)  
There are various ERIC documents that include topics related to multicultural counselor education and supervision. There are other documents related to multicultural education with youth and children that may benefit some of the school counseling students.
- Do You Speak American?  
<http://www.pbs.org/speak/education/>  
This website contains various curricular units and addresses how language is patterned and how it can vary among various ethnic groups. For example, Spanish and Chicano, as well as African American, English are reviewed. Free resources, instructional tools, discussion questions, as well as student activities are provided.
- University of Maryland Diversity Database  
<http://www.inform.umd.edu/EdRes/Topic/Diversity/Specific/Religion/Bibliographies/>

This University of Maryland diversity database provides an exceptional bibliography of various religious texts and resources.

## Learning Activities

The following activities are taken from Burke, M. (2010). *Cultural foundations in-class activities: Social categorization, social perception and stereotyping*. Unpublished manuscript.

- **Categorinary.** This activity allows students an opportunity to discuss identification (including stasured identities), the social construction of differences, and categorization and how these concepts relate to stereotypes, stereotype threat, and identity development. The class is divided into teams and each selects a card with a word on it. Each team must draw a picture that *suggests* the word printed on the card. The pictures cannot contain any numbers or letters. Once drawings are complete, the other teams try to guess the word the drawing is intended to represent. Examples of the words on the cards include any of the following: *superintendent of a school district; teacher; CEO; secretary; a Native American/American Indian; a chef; and/or scientist.*

In a follow-up discussion, each team discusses how they came to a decision regarding what to include in each picture. This activity illustrates how humans are reflexive in that we can categorize, classify, or name concepts/people in particular ways in relation to other social categories or classifications. Furthermore, there is a discussion about how people categorize themselves, others, and groups using concepts and language to make sense of their social environment and how this can invoke meanings in the form of expectations with regard to others' and one's own behavior.

- **Who are your friends?** Among the people that we trust and to whom we are closest, we each gather opinions about others and ourselves and filter these ideas through a perceptual framework. In this activity, students list the names of 10 people with whom they have engaged socially over the past year. The worksheet contains codes that represent categories such as (a) friends (P), family (F), other (O), such as colleagues; (b) different race/ethnicity (E), socioeconomic group/social class (\$), political party identification/affiliation (PP) and religion from me (R); (c) more than a 5 years older than I am (A); and (d) lives more than 10 miles away from my home (L).

Next to each name, the student must list each category that is applicable to each person listed. Once this is complete, the student inventories the total number for each category. Afterward, the student derives a code, which is the three highest categories. Upon completion, each student conveys his or her code by placing a mark/dot on the board (in which a column represents each category). Subsequently, the class discusses the results (which typically indicate that we associate ourselves/have group membership with people who are



very similar to us) and how we tend to interact with others who provide information about which to make judgments and reinforce perceptions (including social identity theory).

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## TOPIC: ETHICAL, LEGAL AND PROFESSIONAL BEHAVIOR AND PRACTICE (COMPETENCE AND MALPRACTICE, CONFIDENTIALITY, RECORDS, AND TECHNOLOGY)

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### Supplemental Reading

- Daniels, J. A. (2001). Managed care, ethics, and counseling. *Journal of Counseling & Development, 79*, 119–122.
- Granello, P. F., & Witmer, J. M. (1998). Standards of care: Potential implications for the counseling profession. *Journal of Counseling & Development, 76*, 371–380.
- Kaplan, D. M., Kocet, M. M., Cottone, R. R., Glosoff, H. L., Miranti, J. G., Moll, E. C., . . . Tarvydas, V. M. (2009). New mandates and imperatives in the revised ACA code of ethics. *Journal of Counseling & Development, 87*, 241–256.
- Peluso, P. R. (2003). The ethical genogram: A tool for helping therapists understand their ethical decision-making styles. *The Family Journal, 11*, 286–291.
- Remley, T. P., Herlihy, B., & Herlihy, S. B. (1997). The U.S. supreme court decision in *Jaffee v. Redmond*: Implications for counselors. *Journal of Counseling & Development, 75*, 213–218.
- Schlossberger, E., & Hecker, L. (1996). HIV and family therapists' duty to warn: A legal and ethical analysis. *Journal of Marital and Family Therapy, 22*, 27–40.
- Shaw, H. E., & Shaw, S. F. (2006). Critical ethical issues in online counseling: Assessing current practices with an ethical intent checklist. *Journal of Counseling & Development, 84*, 41–53.
- Welfel, E. R., Danzinger, P. R., & Santoro, S. (2000). Mandated reporting of elder abuse/maltreatment of older adults: A primer for counselors. *Journal of Counseling and Development, 78*, 284–292.

### Websites

- The Layperson's Guide to Counselor Ethics  
<http://www.counseling.org/Resources/CodeOfEthics/TP/Home/CT2.aspx>  
Although this brief PDF file is written for clients, it captures the responsibilities and rights of both clients and counselors. The document provides a backdrop for what information all counselors should be communicating to their clients during the first counseling session.

- Private Practice Pointers for ACA Members  
<http://www.counseling.org/Counselors/TP/PrivatePracticePointersMembers/CT2.aspx>  
Robert Walsh and Norman Dasenbrook provide information about a list of private practice topics including but not limited to informed consent, the Health Insurance Portability and Accountability Act (HIPAA) requirements, managed care and insurance companies, and starting a private practice. ACA membership is required to access this site.
- Professional Ethics in Counseling  
[http://www.joburbank.com/Professional\\_Ethics\\_in\\_Counseling\\_Notes.htm](http://www.joburbank.com/Professional_Ethics_in_Counseling_Notes.htm)  
This website is a compilation of notes in outline form related to the following topic areas: central concepts, ethical governance and enforcement, moral principles, legal concerns in various phases of counseling practice, recommended business practices, and ethical climate. The outline captures the most salient legal, ethical, and professional issues in counseling. For visual learners especially, the outline provides order and organization.
- “Transporting Confidential Clinical Records in Laptops: Heads up to Psychotherapists & Counselors” by Ofer Zur & Jeffrey Barnett  
<http://www.zurinstitute.com/laptoptheftandconfidentiality.html>  
This article is part of an online course on confidentiality for continuing education. It is a brief selection that outlines, in bullet form, general practice guidelines related to handling electronic documents, as well as the related ethical codes. The information is clear, concise, and specific.
- “Duty to Warn and Protect Against Self-Destructive Behaviors and Interpersonal Violence” by Danica G. Hays, Laurie M. Craigen, Jasmine Knight, Amanda Healey, & April Sikes  
<http://www.jsc.montana.edu/articles/v7n11.pdf>  
This article is most fitting for school counseling students. The first section of the article is a review of self-destructive behaviors, as well as interpersonal concerns typically found among children and adolescents. The second section of the article moves the reader to consider when reporting is necessary. Self-reflective questions are provided, along with tables organizing the continuum of danger related to self-destructive behaviors and interpersonal violence.
- *Tarasoff v. The Regents of the University of California Supreme Court of California, 1976*  
<http://www.doctorm.com/docs/tarasoff.htm>  
Though students may read summaries about the *Tarasoff* case in their textbooks, this brief article gets right to the point in describing the facts of the case, as well as the court reasoning and decision.

- Online Therapy Institute: Bringing Together Technology and Mental Health  
<http://www.onlinetherapyinstitute.com>  
DeeAnna Madfes and Kate Elize Larnia have constructed one of the best sources for online counseling and supervision ethics and practice. This is a must-see for all counseling students.
- SecondLife®  
<http://www.counselortech.net>, <http://SL.CounselorEducation.org>  
Dr. Marty Jencius, former chair of the American Counseling Association Cybertechnology Committee, provides information, as well as communication for counselor educators who are using or interested in using SecondLife® for pedagogical use in classes and training.

## Learning Activities

Discuss the relationship among ethical codes (American School Counselors Association [ASCA], ACA), moral principles, and personal ethics.

- Upon presenting the relevant materials, review the following: (a) your state's statute related to the duty of a mental health professional to warn intended victims of potential threat or violence; (b) the *Tarasoff* case; The Regents of the University of California Supreme Court of California, 1976; and (d) the Kaplan et al. article noted in Supplemental Reading.
- Based upon the ACA ethical codes, the following discussion questions may be posed: (a) How do you understand privileged communication? Provide an example. (b) What will you do to assure the protection of clients and others? What will you include in your informed consent document to be sure that clients understand this from the beginning of the counseling relationship?

## Vignettes

- *Ethics in bartering.* Sam and Candy sought marital counseling about one year ago after their 13-year-old son, Jimmy, was killed in a tractor accident on their family farm. He was Sam and Candy's only child. Sam and Candy were apprehensive about seeking marital counseling for several reasons. They live in a small, rural community and did not want the "secret to be known." Also, they have struggled financially and were afraid that they could not afford the sessions or the gas to drive to and from town to the therapist's office. The couple's health insurance plan did not cover mental health benefits. However, Sam's younger sister encouraged him and Candy to seek help. Sam and Candy were both overwhelmed with grief and decided that it could not hurt to try. After a helpful first session with their therapist, Marilyn, both Sam and Candy decided that they wanted to continue therapy until they thought that they could carry on with their

grief on their own. Around the 4-month mark, Marilyn, Sam, and Candy discussed how therapy was progressing thus far. The couple agreed that they were making progress; however, Candy's grief was still affecting her mood daily, which consequently was impacting how the two partners interacted. Sam told Marilyn that he understood how hard this was on Candy, but he "needed to get back on track with his life and his marriage." He "missed Candy desperately." Marilyn continued to help Candy and Sam process their grief, while also attending to the marital relationship. About 2 months later, Sam and Candy mentioned that they were really struggling financially. Candy lost her part-time job at the local grocery store due to its closing. They told Marilyn that therapy had been "unbelievably helpful." They were not ready to terminate and were hoping that Marilyn "could make arrangements." Sam, a well-respected "handyman" in his small community, could fix any household item or automobile. He told Marilyn that he would be willing to contract work if she would like. The couple also offered to pay Marilyn with any vegetables that were in season.

- *Ethics in boundaries.* Kevin began seeing Rich and Patricia about 2 months ago. Rich and Patricia came to Kevin because, as Patricia put it, "they were on the verge of divorce." Over the 2 months Kevin has been aware of his growing attraction to Patricia. He also believes that she has similar feelings toward him due to her constant eye contact, physical closeness when walking to and from the chairs in the office, and the tone of voice that she uses with Kevin. When scheduling appointments with Kevin over the phone, Patricia has mentioned several times that she "wishes Rich was like you." Because of Kevin's desire to become involved intimately with Patricia, he finds himself losing concentration during therapy sessions.
- *Ethics in documentation.* Mrs. Jones brought her eight-year-old son Matt to counseling because she was worried about how quiet he had become since her divorce to Mr. Jones. Mr. Jones recently got married again. He was living with his new wife and her 3 teenage sons. Matt felt very intimidated every time he visited his father. Matt was the identified client on record. Mrs. Jones would usually come to counseling with Matt. On some occasions she allowed Mr. Jones to take Matt to his regularly scheduled counseling appointments when she was called into work. Often the counselor met with Mrs. or Mr. Jones and Matt briefly before spending the rest of the session individually with Matt. On rare occasions, the counselor would meet with Mrs. or Mr. Jones alone to briefly discuss Matt's progress privately. About 3 months into the counseling relationship, Mrs. Jones began talking about how her own psychological condition was affecting Matt's behavior. She spoke about how she felt very hurt and betrayed by Mr. Jones. She also expressed her concerns about his ability to console Matt. She asked for this information to be kept confidential from Mr. Jones. The counselor had made brief notes about these conversations in Matt's progress notes; and was considering opening up a new and separate file on Mrs. Jones. However, before the counselor did so, Mr. Jones came to the next appointment with Matt and asked to see his records.

## TOPIC: PROFESSIONAL COUNSELOR AS SCHOLAR PRACTITIONER: YESTERDAY AND TODAY

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### Supplemental Reading

- Aubrey, R. F. (1977). Historical development of guidance and counseling and implications for the future. *Personnel & Guidance Journal, 55*, 288–294.
- Jencius, M., & Finnerty, P. (2009). Counselors and social networking. *Counseling Today, 52*, 26–27.
- Magnuson, S., Wilcoxon, S.A., & Norem, K. (2003). Career paths of professional leaders in counseling: Plans, opportunities, and happenstance. *Journal of Humanistic Counseling, Education, & Development, 42*, 42–52.
- Myers, J. (1992). Wellness, prevention, development: The cornerstone of the professional. *Journal of Counseling & Development, 71*, 136–139.
- Myers, J. E., Sweeney, T. J., & White, V. E. (2002). Advocacy for counseling and counselor: A professional imperative. *Journal of Counseling & Development, 80*, 394–402.
- West, J. D., Osborn, C. J., & Bubenzer, D. L. (2003). *Leaders and legacies: Contributions to the counseling profession*. New York: Brunner-Routledge.
- West, J. D., Osborn, C.J., Bubenzer, D. L., Paez, S. B., & Desmond, K. J. (2006). Leadership and the profession of counseling: Beliefs and practices. *Counselor Education and Supervision, 46*, 2–16.

### Websites

- Role in ACA  
<http://www.counseling.org/Students/RoleInACA/TP/Home/CT2.aspx>  
This website provides a list and accompanying information about the various ways in which students can become involved in the counseling profession, particularly in the American Counseling Association.
- ACA-Related Organizations  
<http://www.counseling.org/Students/RelatedOrgs/TP/Home/CT2.aspx>  
This website provides a list of ACA's related organizations, including direct links to each.
- Current Issues  
<http://www.counseling.org/PublicPolicy/PositionPapers.aspx>  
The most current and high-priority federal policy issues related to the counseling profession are described here, along with links for advocating for any given issue. Students can practice advocating at the legislative level by visiting and engaging in this site.

- Journals  
<http://www.counseling.org/Publications/Journals.aspx>.  
All of the American Counseling Association–related journals are listed on this website. Counselor educators who require students to pull from counseling-related literature might refer students to this site.
- Conducting a Literature Review  
<http://fcpe.adelphi.edu/library/>
- Conducting a Literature Review in Education and the Behavioral Sciences  
<http://www.kumc.edu/SAH/OTEd/jradel/effective.html>
- Effective Presentations  
<http://www.research.ucla.edu/era/present/>  
These websites provide information, as well as helpful tips about how to construct literature reviews, write formal papers, as well as conduct presentations. Students who struggle with writing and presenting will benefit from these resources.

## Learning Activities

The first author constructed the following assessments and rubrics located as appendixes at the end of the chapter “Professional Counselor as Scholar Practitioner Self-Assessment and Conducting Formal Presentations: Criteria and Guidelines” (see Appendixes A and B for complete assessments). Students may compare self-assessments conducted at the beginning and end of the course.

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# TOPIC: INTRODUCTION TO COUNSELING THEORIES

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## Supplemental Reading

- Dryden, W. (1994). Reason and emotion in psychotherapy: Thirty years on. *Journal of Rational-Emotive and Cognitive-Behavior Therapy*, 12, 83–99.
- Ellis, A. (1997). Extending the goals of behavior therapy and of cognitive behavior therapy. *Behavior Therapy*, 28, 333–339.
- Ford, J. G. (1991). Rogers’s theory of personality: Review and perspectives. *Journal of Social Behavior and Personality*, 6, 19–44.
- Joyce, D. P. (1995). The roles of the intervenor: A client-centered approach. *Mediation Quarterly*, 12, 301–312.



- Kelly, E. W., Jr. (1997). Relationship-centered counseling: A humanistic model of integration. *Journal of Counseling & Development, 75*, 337–344.
- Laungani, P. (1997). Replacing client-centered counseling with culture-centered counseling. *Counseling Psychology Quarterly, 10*, 343–351.
- Stolorow, R. D. (1992). Closing the gap between theory and practice with better psychoanalytic theory. *Psychotherapy, 29*, 159–166.
- Tobin, S. A. (1991). A comparison of psychoanalytic self psychology and Carl Rogers's personality centered therapy. *Journal of Humanistic Psychology, 31*, 9–33.

## Websites

- North American Society of Adlerian Psychology  
<http://www.alfredadler.org/>
- National Association of Cognitive–Behavioral Therapists  
<http://www.nacbt.org/>
- Beck Institute for Cognitive Therapy and Research  
<http://www.beckinstitute.org>
- Association for the Advancement of Gestalt Therapy  
<http://www.aagt.org/>
- American Psychoanalytic Association  
<http://www.apsa.org/>
- The William Glasser Institute  
<http://www.wglasser.com/>
- Solution-Focused Brief Therapy Association  
<http://www.sfbta.org/>

## Learning Activity

Students are divided into groups of three and assigned a particular theory. The groups will role-play a client (see vignette below) and counselor using a particular theoretical orientation. The third person in the group acts as a moderator during the exercise to introduce the approach and comment during the exercise regarding what theoretical principles and techniques are being used.

## Vignette

Larry is a 50-year-old Caucasian male. He used to work at a factory as a floor manager monitoring 400 other employees. He is currently doing some side jobs while looking

for a full-time job. Larry is recently divorced after being married for 14 years. Larry describes himself as being shy. He also reported to you that while growing up, he was called “fatso” by his parents and four siblings. Larry says that he continues to hear this message even to this day. Since his divorce, the client has found out that his wife was cheating on him. He reported to you that he always knew that she lied to him about finances and her whereabouts; however, he never thought it went to this extent. He described his ex-wife as manipulative and emotionally abusive to him. Despite his continuous efforts to forgive her for her lies, she persisted in doing so. In addition, Larry told you that his wife would always say to him, “You are good for nothing and will never amount to anything.” Larry continues to hear this message. Larry also uses Bible verses and scripture to defend why he should be remorseful of this failed relationship. Larry sought counseling because he feels depressed and anxious all of the time. For example, he feels sad, alone, and “good for nothing.” He reported to you that when he even thinks about taking a position that requires some degree of independence, he begins breathing heavily and shaking. He told you that he does not feel he will ever “amount to anything.” Despite his depressed feelings and anxiety, Larry wants to move on with his life. He told you that he wants to find a full-time position in the machine industry, while also increasing his social life. Based on any given theoretical orientation, consider the following: (a) your initial thoughts about the client; (b) the client’s concerns; and (c) possible treatment goals.

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## TOPIC: THE COUNSELING PROCESS: SKILLS, ASSESSMENT, DIAGNOSIS, AND TREATMENT

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### Supplemental Reading

- Brown, L. S. (2007). Empathy, genuineness and the dynamics of power: A feminist responds to Rogers. *Psychotherapy: Theory, Research, Practice, Training*, 44, 257–259. Retrieved from <http://www.choixdecariere.com/pdf/5671/59-2010.pdf>.
- Dennin, M. K., & Ellis, M. V. (2003). Effects of a method of self-supervision for counselor trainees. *Journal of Counseling Psychology*, 50, 69–83.
- Myers, J. E., Sweeney, T. J., & Witmer, J. M. (2000). The wheel of wellness counseling for wellness: A holistic model for treatment planning. *Journal of Counseling & Development*, 78, 251–263.
- Myers, J. E., & Sweeney, T. J. (2008). Wellness counseling: The evidence base for practice. *Journal of Counseling & Development*, 86, 482–493.
- Skovholt, T. M. (2005). The cycle of caring: A model of expertise in the helping professions. *Journal of Mental Health Counseling*, 27, 82–93.
- Sullivan, M. F., Skovholt, T. M., & Jennings, L. (2005). Masters therapists’ construction of the therapy relationship. *Journal of Mental Health Counseling*, 27, 48–70.

## Websites

- Internet Mental Health  
<http://www.mentalhealth.com>  
This website provides extensive information about mental health disorders and diagnosis.
- PsyWeb.com  
<http://www.psyweb.com/Diagnosis>  
This website provides advanced diagnostic criteria with a descriptive flow-chart used in making a mental health diagnosis.
- WebMd: Better information. Better health  
<http://www.webmd.com>  
This website provides additional information on mental health diagnosis. Information is provided regarding the use of psychiatric medications.

## Learning Activities

Discuss the differences and similarities between and among the following: schizoid personality disorder and schizotypal personality disorder; Asperger's and autism; compulsions and obsessions; delirium and dementia; and/or hypochondria, somatoform disorder, and factitious disorder.

Visit the following website <http://www.drugpolicy.org/reducingharm/saferinjecti/> ("Safe Injection Rooms"). Although this practice is not permitted in the United States, it offers a backdrop for a discussion about the role that mental health workers can play in the midst of client drug use.

## Vignettes

- *George and Kay*. A couple just came into your counseling practice. George has narcissistic personality disorder and is married to Kay, who has developed a generalized anxiety disorder. They dated for 6 months and have been married for 2 years. George lost his job unexpectedly about 2 weeks ago. Based on your knowledge of these diagnoses, suggest (a) reasons why the couple may have sought counseling and (b) what your interventions will be.
- *Hilary's treatment plan*. Hilary presents with symptoms that meet the criteria for a diagnosis of panic disorder with agoraphobia. She reported that her first panic attack occurred after her boyfriend broke up with her. After that, she began to attend to bodily sensations and worried constantly about having another panic attack. Develop one treatment goal with two objectives based on cognitive-behavioral and reality therapy.

## TOPIC: CHILDREN AND VULNERABLE ADULTS (OLDER PERSONS, PERSONS WITH DISABILITIES)

Topics related to counseling specialty areas can be weaved throughout the curriculum and schedule of the course. However, counselor educators might find the following source a helpful resource when formulating an introduction to this broad topic:

LoPresit, R. L., & Zuckerman, E. L. (2004). *Rewarding specialties for mental health clinicians: Developing your practice niche*. New York: Guilford Press.

### Supplemental Reading

- Duba, J. D., & Magenta, M. (2008, October). End-of-life decision-making: A preliminary outline for preparing counselors to work with terminally-ill individuals. *The Family Journal*, *16*, 384–390.
- Kenel, M. E. (2005). Personal strengths and the aging process. *Human Development*, *26*, 5–11.
- Oaklander, V. (2001). Gestalt play therapy. *International Journal of Play Therapy*, *10*, 45–55.
- Schwiebert, V. L., Myers, J. E., & Dice, C. (2000). Ethical guidelines for counselors working with older adults. *Journal of Counseling & Development*, *78*, 123–129.
- Watts, R. E., & Broaddus, J. L. (2002). Improving parent–child relationships through filial therapy: An interview with Garry Landreth. *Journal of Counseling and Development*, *80*, 372–379.
- Welfel, E. R., Danzinger, P. R., & Santoro, S. (2000). Mandated reporting of elder abuse/maltreatment of older adults: A primer for counselors. *Journal of Counseling and Development*, *78*(2), 284–292.
- Werth, J. L., & Crow, L. (2009). End-of-life care: An overview for professional counselors. *Journal of Counseling and Development*, *87*, 194–202.
- White, J., Flynt, M., & Jones, N. P. (1999). Kinder therapy: An Adlerian approach for training teachers to be therapeutic agents through play. *Journal of Individual Psychology*, *55*, 365–382.

### Websites

- American School Counselor Association  
<http://www.schoolcounselor.org/>  
This website is the main site for the American School Counselor Association and provides extensive information on working with children and adolescents in a school setting.
- The Association for Adult Development and Aging  
<http://www.aadaweb.org/>

- U.S. Department of Justice Americans With Disabilities Act  
<http://www.ada.gov/>

This website discusses the impact of federal law upon providing appropriate services to children and adolescents with disabilities or any condition that affects the learning environment. This directly applies to certain mental health disorders that apply to children and adolescents in the public school arena.

## Learning Activities

Discuss and provide an example of an ethical dilemma when working with clients or students (or parents) who are disabled.

## Vignette

- *Ethics in end-of-life care*. Taken from: Duba, J. D., & Magenta, M. (2008). End-of-life decision-making: A preliminary outline for preparing counselors to work with terminally-ill individuals. *The Family Journal*, 16(4), 384–390. Jamie came to you because he could “not take the pain any longer.” Jamie explained that he was trying to deal with the loss of his mother to cancer a month ago. He reported having nightmares about his mother. In his dreams, he saw her hunched over, without hair, and looking “monstrous.” He was frightened of the dreams and they made him feel guilty. In addition to the grief that Jamie was experiencing, he was struggling with his sexual identity. He mentioned that his mother was the only one who understood what he went through as a homosexual male in a rather intolerant community. He thought that she had provided him with enough support and insight so that he could live out his life successfully without her. Without her, he felt as if he could no longer be who he wanted to be. Over the course of about 7 months, with weekly sessions, you had helped Jamie grieve the loss of his mother, while also encouraging Jamie to get involved in “safe” organizations again. Two weeks before therapy was terminated, Jamie told you that he just started dating again. Two years later, Jamie sought therapy again. This time he came with symptoms of depression and thoughts of killing himself. He informed you that he has AIDS and that his doctors have informed him that he only has between 6 and 8 months to live. You continued to see Jamie for an additional 4 months until Jamie began canceling appointments. It was obvious from his appearance when he did make his appointments that he was losing his energy and zest for life. He looked fatigued, feverish, and flushed each time you met with him. Jamie was going to the doctor twice a week for pain shots and checkups, which affected his ability to maintain sessions with you. Appointments were difficult to schedule and he was consistently sedated. A week ago Jamie came in to see you. He told you that he was “ready to go” and his partner supported him. He wanted to use therapy to reflect on his life

and how he will say goodbye to his father, his partner, and his friends. He is particularly interested in discussing how he might go about informing his family and friends of his decision to kill himself.

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## TOPIC: COUPLE AND FAMILY COUNSELING

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### Supplemental Reading

- Adams, S. (2010). Who is my client? Maintaining paperwork when the client changes. *The Family Journal, 18*, 70–72.
- Bass, B. A., & Quimby, J. L. (2006). Addressing secrets in couples counseling: An alternative approach to informed consent. *The Family Journal, 14*, 77–80.
- Brock, G. W., & Barnard, C. P. (1999). *Procedures in marriage and family therapy* (3rd ed.). Needham Heights, MA: Allyn & Bacon.
- Duba, J. D., & Watts, R. E. (2009). Therapy with religious couples. *Journal of Clinical Psychology, 65*, 210–223.
- Duba Onedera, J. (Ed.). (2008). *The role of religion in marriage and family counseling*. New York: Taylor & Francis.
- Glasser, W., & Glasser, C. (1995). *Getting together and staying together*. New York: HarperCollins.
- Long, J., & Andrews, B. V. (2007). Fostering strength and resiliency in same-sex couples: An overview. *Journal of Couple & Relationship Therapy, 6*, 153–165.
- Love, P. (2001). *The truth about love*. New York: Fireside.
- Patterson, J., Williams, L., Grauf-Grounds, C., & Chamow, L. (1998). *Essential skills in family therapy: From the first interview to termination*. New York: Guilford Press.
- Peluso, P. R. (2007). *Infidelity: A practitioner's guide to working with couples in crisis*. New York: Taylor & Francis.
- Thomas, G. (2000). *Sacred marriage*. Grand Rapids, MI: Zondervan.
- Watkins, K., & Baldo, T. D. (2004). The infertility experience: Biopsychosocial effects and suggestions for counselors. *Journal of Counseling & Development, 82*, 394–402.

### Websites

- International Association of Marriage and Family Counselors  
<http://www.iamfconline.com/>  
Students should be introduced to the related ACA division by visiting this website. Various resources and information about membership are provided.
- Association for Lesbian, Gay, & Transgender Issues (LGT) in Counseling  
<http://www.algbtic.org/>  
Students wishing to specialize in LGT issues will find the resources and information about membership provided on this website helpful. In addition, a link to join the organization's listserv is provided.



- The American Association of Sexuality Educators, Counselors and Therapists  
<http://www.aasect.org/>  
Students interested in specializing in sex therapy might find the following website helpful. Further, students might benefit from understanding what course requirements are necessary for AASECT certification prior to graduating.
- The John Gottman Institute  
<http://www.gottman.com/>  
Dr. John M. Gottman is one of the most prolific researchers/authors in marriage, couples, and family therapy. Information about the Gottman Institute, his research, as well as training opportunities are provided. In addition, Gottman's published research abstracts and articles are located on the website.

## Learning Activity

Construct a three-generational genogram. Synthesize the information based on any given counseling theory.

## Vignettes

- *Ethics in dual relationships*. Taken from: Greenwalt, B. C., & Duba, J. D. (2005). Paper presented at the Kentucky Association of Marriage and Family Therapist Ethics Workshop. Emily Andrews is an active member of the small rural community that she has lived in over the last 30 years with her husband and children. In fact, she has belonged to her church's social committee for the last 10 years. She has been on this committee longer than anyone else. Her work in organizing the church's social engagements is well known even in the community at large. Emily also maintains a full-time private practice as a licensed marriage and family therapist on the outskirts of town. During her last 5 years of full-time practice, she has typically seen persons who were not involved in her church. If a member from her church sought her services, she referred them to three other helping professionals in town. This process has so far worked well for her. Emily began seeing Anna and Ted Smith regularly for marriage therapy about one year ago when they moved her from a larger city to be with Anna's dying mother. The stressors of care-giving, moving to a foreign area, and trying to find new jobs were taking a toll on Anna and Ted's marriage. Due to Emily's encouraging the couple to become active in extracurricular activities, Anna and Ted found a church in town and started attending it regularly. Emily was not aware that Anna and Ted were attending the same church because they attended different services. Per Emily's request for extra help on the social committee, as well as a lack of volunteerism, the pastor of the church agreed to appoint members prior to the

next social committee meeting. He promised Emily that she could be assured that the newly appointed members would be at the next scheduled meeting. In the meantime, Anna and Ted were appointed by the pastor and enthusiastically agreed to be active on the committee. While Emily was in the middle of assigning tasks to social committee members, Anna and Ted arrived late.

- *Ethics in couples counseling documentation.* You are seeing Mr. and Mrs. Smith as a couple. You like to be flexible in your approach to working with couples. Sometimes you like to see them together and then see them individually and then back together. There are other times where you see the couple together through the entire therapy process. In this case, you see them as a couple and individually. One of the issues in therapy was differing styles of parenting in addition to the issues related to their relationship. While therapy is still ongoing, Mr. Jones files for divorce. Mr. Jones wants custody of the children. His attorney contacts you wanting records of all of the sessions, both individual and conjoint. How would you frame informed consent to cover both conjoint and individual sessions? Is seeing couples both together and individually a potential minefield that outweighs any therapeutic benefit?
- *Risk of harm?* You have been seeing a couple for a year. The husband, in private, without the wife present, told you he was HIV positive and was not going to tell his wife. A few months later they separated. The wife requested their records in regards to obtaining custody of their children. The husband did not give his permission for her to gain access. What do you do?
- *Case of consent.* A man in counseling frequently brings his wife to therapy and asks the therapist to see his wife alone or insists that his wife should be in therapy with him. Neither signed an informed consent for treatment. Does either the husband's or the wife's behavior constitute consent?
- *To report or not report.* A female client whom you are seeing in couples therapy states in front of her husband that she has been having thoughts of killing him since his extramarital affair. How do you proceed with this revelation? What questions do you ask her about her thoughts? How do you assess the seriousness of her thoughts? Is this reportable? To whom would you make the report? How would you document this?

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## TOPIC: GROUP COUNSELING

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### Supplemental Reading

- Debiak, D. (2007). Attending to diversity in group psychotherapy: An ethical imperative. *International Journal of Group Psychotherapy*, 57, 1–12.
- Fieldsteel, N. D. (2005). When the therapist says goodbye. *International Journal of Group Psychotherapy*, 55, 245–279.

- Flahive, M. W., & Ray, D. (2007). Effect of group sandtray therapy with preadolescents, *Journal for Specialists in Group Work*, 32, 362–382.
- Gerrity, D. A., & DeLucia-Waack, J. L. (2007). Effectiveness of groups in the schools. *Journal for Specialists in Group Work*, 32, 97–106.
- MacNair-Semands, R. R. (2007). Attending to the spirit of social justice as an ethical approach in group therapy. *International Journal of Group Psychotherapy*, 57, 61–66.
- McKenna, K. Y. A., & Green, A. S. (2002). Virtual group dynamics. *Group Dynamics: Theory, Research, and Practice*, 6, 116–127.
- Page, B. J. (2003). Introduction to using technology in group work. *Journal for Specialists in Group Work*, 28, 7–8.
- Shapiro, E. L., & Ginzberg, R. (2002). Parting gifts: Termination rituals in group therapy. *International Journal of Group Psychotherapy*, 52, 319–336.
- Smokowski, P. R., Rose, S. D., & Bacallao, M. L. (2001). Damaging experiences in therapeutic groups: How vulnerable consumers become group casualties. *Small Group Research*, 32, 223–251.
- Veach, L. J., & Gladding, S. T. (2007). Using creative group techniques in high schools. *Journal for Specialists in Group Work*, 32, 71–81.
- Ward, D. E. (2006). Classification of groups. *Journal for Specialists in Group Work*, 31, 93–97.

## Website

- Association for Specialists in Group Work  
<http://www.asgw.org>

This website provides information regarding group counseling within the context of the American Counseling Association. The *Journal for Specialists in Group Work* is the official publication of this organization.

## Learning Activity

As a group leader, how would you respond in each of the situations? (a) A member discloses how excited she is over a current affair and wonders if she should stay with her current partner. (b) A chronically depressed man talks about suicide as his way out of a hopeless situation. (c) A member from a different culture says he is having difficulty in the group because he is not used to speaking so openly about family problems. (d) Imagine that you are leading a group that does not seem to want to get beyond the stage of “playing it safe.” Members’ disclosures are superficial, their risk-taking is minimal, and they display a variety of resistances. What might you do in such a situation? How do you imagine you’d feel if you were leading such a group? There are important differences between effective and ineffective confrontation. How would you explain this difference to group members? Think about how you might respond to a person who had been in your group for some time and who said: “I don’t see why we focus on negative things so much. All we do is talk about problems. Sometimes I just don’t feel like even saying anything because I’m sick of talking about bad things.”

## Vignette

- *Charles*. A counselor is facilitating a group of juveniles who are referred by the court. Group counseling is part of their treatment following release from detention. In a particular session, Charles reveals that he went to visit his child over the weekend. Charles is not married to the child's mother. The parents of the mother have a restraining order keeping Charles away from their daughter and the child. Charles really wants to have a relationship with the baby and hopes to one day actively participate as a father. Charles has been doing well in his aftercare. As the group counselor, what are your responsibilities both to Charles and to the group when information is revealed in group that has potential legal consequences?

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## TOPIC: SCHOOL COUNSELING

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### Supplemental Reading

- American School Counselor Association (2005). *The ASCA National Model: A framework for school counseling programs* (2nd ed.). Alexandria, VA: Author. <http://asca2.timberlakepublishing.com/files/EthicalStandards2010.pdf>.
- American School Counselor Association. (2004). The role of the professional school counselor. Retrieved from <http://www.schoolcounselor.org/content.asp?contentid=240>.
- Birdsall, B. A., & Miller, I. D. (2002). Brief counseling in the schools: A solution-focused approach for school counselors. *Counseling and Human Development*, 35, 1–10.
- Rowell, L. L. (2006). Action research and school counseling: Closing the gap between research and practice. *Professional School Counseling*, 9, 376–384.
- Simcox, A. G., Nuijens, K. L., & Lee, C. C. (2006). School counselors and school psychologists: Collaborative partners in promoting culturally competent schools. *Professional School Counseling*, 9, 272–277.
- Studer, J. R., Oberman, A. H., & Womack, R. H. (2006). Producing evidence to show counseling effectiveness in the schools. *Professional School Counseling*, 9, 385–391.
- Walsh, M. E., Barrett, J. G., & DePaul, J. (2007). Day-to-day activities of school counselors: Alignment with new directions in the field and the ASCA national model. *Professional School Counseling*, 10, 370–378.

### Websites

- American School Counselor Association  
<http://schoolcounselor.org>  
This website is the source of information regarding school counseling in K–12 schools in the United States. There are links to state organizations. Links are provided to various supplemental activities and sources that provide information for school counselors. The site describes the ASCA National Model and information for implementing the model in schools.

- Educational Trust  
<http://edtrust.org>

This is the website for the Educational Trust, which is a nonprofit national organization recognized by colleges of teacher education as the paramount organization for tracking teacher education in the United States. The Educational Trust also is actively engaged in transforming counselor education for school counselors. This site describes this effort and identifies the principles of school counselor education in the 21st century.

## Learning Activities

- Students are asked to survey a sample of school teachers, students, and parents in order to identify their needs, both academic and social/emotional. Then students determine counseling goals and plans for achieving those goals using individual and small group counseling as well as classroom guidance activities.
- Students interview school counselors with questions regarding theoretical orientation, student issues, professional needs, and various counseling techniques used in a school setting.

## Vignettes

- *High school.* A high school student comes to see the counselor. The student reveals that her uncle touched her inappropriately. She does not want you to tell because it was only one time and she respects her uncle. What are the limits of confidentiality? Discuss why students have a need to tell the counselor personal items that will require a report to social services or law enforcement only to then ask the counselor not to break confidentiality.
- *Elementary school.* An elementary student tells you that he is receiving threatening messages on his Facebook page. How do you address the issue of cyberbullying? What is the responsibility of school officials regarding Internet activities that might not happen during school but involve students?

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## TOPIC: COUNSELING SUPERVISION

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### Supplemental Reading

Bilot, J., & Peluso, P. R. (2009). The use of the ethical genogram in supervision. *The Family Journal, 17*, 175–179.

- Lampropoulos, G. K. (2003). A common factors view of counseling supervision process. *The Clinical Supervisor, 21*, 77–95.
- Milliren, A., Clemmer, F., & Wingett, W. (2006). Supervision: In the style of Alfred Adler. *Journal of Individual Psychology, 62*, 89–105.
- Montgomery, M. J., Hendricks, C. B., & Bradley, L. J. (2001). Using systems perspectives in supervision. *The Family Journal, 9*, 305–313.
- Parker, S. (2009). Faith development theory as a context for supervision of spiritual and religious issues. *Counselor Education & Supervision, 49*, 39–53.
- Pearson, Q. M. (2001). A case in clinical supervision: A framework for putting theory into practice. *Journal of Mental Health Counseling, 23*, 174–183.
- Pearson, Q. M. (2006). Psychotherapy-driven supervision: Integrating counseling theories into role-based supervision. *Journal of Mental Health Counseling, 28*, 241–252.

## Websites

- Association for Counselor Education and Supervision  
[http://www.acesonline.net/ethical\\_guidelines.asp](http://www.acesonline.net/ethical_guidelines.asp)  
 Students should be introduced to the related ACA division by visiting this website. Various resources and information about membership and opportunities for student involvement are provided.
- Supervision Models  
<http://www.cyc-net.org/cyc-online/cyc01-0101-supervision%20models.html>  
 This web-based article provides a brief review of the developmental, integrated, and orientation-specific models of counseling supervision.
- Clinical Supervision (PowerPoint)  
<http://www.neiu.edu/~jkedward/ppt/800/>  
 This online PowerPoint presentation was written by Dr. Jeffrey Edwards from Northeastern Illinois University. It might be used as a supplemental reading source for students.
- A Sample Contract for Supervision  
[http://www.theaca.net.au/docs/Supervision\\_Sample\\_Contract.pdf](http://www.theaca.net.au/docs/Supervision_Sample_Contract.pdf)  
 This sample supervision contract provides a review of the essential responsibilities and expectations of both counseling supervisors and supervisees.

## Learning Activity

Develop a supervision contract or compare and contrast supervision models.

## TOPIC: CAREER COUNSELING

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### Supplemental Reading

- Aueback, A. J., & Gale, W. G. (2009). The economic crisis and the fiscal crisis: 2009 and beyond. Retrieved from [http://www.brookings.edu/~media/Files/rc/papers/2009/0219\\_fiscal\\_future\\_gale/0219\\_fiscal\\_future\\_gale.pdf](http://www.brookings.edu/~media/Files/rc/papers/2009/0219_fiscal_future_gale/0219_fiscal_future_gale.pdf)
- DeVaney, S. B., & Hughey, A. W. (2000). Career development of ethnic minority students. In D. A. Luzzo (Ed.), *Career counseling of college students: An empirical guide to strategies that work* (pp. 233–252). Washington, DC: American Psychological Association.
- Florida, R. (2002, May). The rise of the creative class. *Washington Monthly*. <http://www.washingtonmonthly.com/features/2001/0205.florida.html>.
- Toffler Associates. (2008). *Creating adaptive organizations*. Manchester, MA: Author. Retrieved from <http://www.toffler.com/images/ta-create-adaptive-orgs-0810.pdf>

### Websites

- National Career Development Association  
[http://associationdatabase.com/aws/NCDA/pt/sp/Home\\_Page](http://associationdatabase.com/aws/NCDA/pt/sp/Home_Page)  
This website provides many resources and information about an extended list of topics including but not limited to career development, occupational and employment trends, job search instructions, current salaries, trade and professional associations, the military, education (e.g., College Navigator), distance education, financial aid, and job search instructions. In addition, various self-assessments are provided free of charge. Finally, the website includes information about NCDA membership, the upcoming conference, and opportunities for student involvement.
- Congressional Budget Office: Employment and Labor Markets  
<http://www.cbo.gov/publications/collections/collections.cfm?collect=16>  
This website offers a thorough review of various congressional policies that may impact the job market and employment. Counselors who will do any career counseling should be aware of this website and the information it provides.

### Learning Activities

- Watch *Shift Happens* <http://www.youtube.com/watch?v=pMcfLYDm2U>. Conduct a group discussion regarding the implications of technological advancement as related to matters of work, job training, labor market, etc. Also discuss occupational opportunities and the economy locally, statewide, nationwide, and globally in the context of solutions and implications for

your role as a counselor/educator. You are encouraged to use outside reading (cited) to support your responses.

- Search and review the university's career services center website. Then compare and contrast with a career services center at another university of your choice.
- Complete a self-assessment from the NCDA website; share experiences with class.

## Vignette

- *A career genogram.* Based on the following vignette, students should construct a career genogram for client “Jane.” *Family Background:* Jane is the oldest of three siblings. She is 21 years old. Her younger sister is 19, and her brother is 16. Jane’s mother and father have been married for 27 years. Her father has been a machinist for the last 28 years. Mrs. Doe works part-time as a massage therapist. She did not work outside of the home when the three children were in elementary school. Jane describes herself and her siblings as very good, motivated, and involved students. She does not believe that there is any competition among her siblings; but perhaps each one of them keeps the other one going. That is, there is a message to “always try your very best” and “never give up.” Jane appreciates these messages. She feels good about herself when she is achieving. However, Jane describes her father as “not very understanding.” She recalls numerous times when her father had become frustrated with her because of her struggles with friends, boyfriends, or school-related issues, especially throughout high school. The message that she receives from her father whenever she is upset is that she “is too sensitive.” She agrees with him; however, she wishes he was more supportive. There is not much emotional support among her siblings, although Jane believes this is because of how they were raised. Jane feels very supported by her extended family, particularly by her grandmothers. *Extended Family:* Mrs. Doe’s mother worked at a business firm and worked full-time throughout Mrs. Doe’s childhood. Mrs. Doe’s deceased father worked as a furniture upholsterer. She is the middle daughter of five siblings. The oldest four children are each one year apart. The oldest child, Evan, completed high school and has been working for the city’s transportation division ever since. The next child, Amy, holds a master’s degree and is a fourth-grade school teacher. The fourth daughter, Caroline, also graduated from college and is a registered nurse. The fifth child, Justin, 10 years younger than Caroline, went into the military, graduated from college, and is now an engineer on a military base. Jane is “somewhat close” to her mother’s family of origin. She is especially close to her two aunts. Jane is the second oldest cousin. Her oldest cousin is pursuing a college degree at a state school. Jane’s maternal grandmother shows excitement about her grandchildren’s academic pursuits. Mr. Doe’s parents both worked full-time until they retired. His father was a printer and worked until he was in his mid-70s. His mother was a grammar school teacher. Mr. Doe is the youngest of three children. The oldest child,



Sarah, is five years older than him. She received a master's degree and is an administrator at a private all boys' high school. Keith, 2 years older than Mr. Doe, is a "staff engineer" at an elementary school. He is in charge of the janitorial department. He never went to college. All three of Jane's older cousins are going to or have completed college. Her oldest cousin recently graduated from Stanford and one of her other cousins is attending a reputable university. Jane's paternal grandmother has played a large role as supporter in all of the grandchildren's educations. That is, she has attended every grandchild's graduation, recitals, and award ceremonies since preschool. *Presenting Problem and Related Background:* Jane is in her last semester of undergraduate school. She will have completed a degree in business in 3½ years. Lately she feels "hopeless," "confused," and "depressed." Her parents seemed to be becoming very frustrated with her depressed mood. She has become estranged and distant from her parents because of this, which seems to make the relationship dynamics even worse. After struggling for many months, Jane told her parents that she wanted to seek professional counseling. By saying that she wanted counseling, she felt as if she was sending the message that was confirming what her family already thought of her. However, she believed that counseling could help. Mrs. Doe told Jane that Mr. Doe was very concerned about what messages he would send to his employer with Jane receiving mental health services. Jane internalized this and felt even more depressed. Jane was very excited about coming to counseling. Although she never received counseling before, she knew that she would be supported. Jane and her mother arrived at the office early to complete paperwork. When the counselor asked Jane to join him, Mrs. Doe waited suspiciously. The counselor asked Jane what brought her in. Jane told the counselor that she was depressed and confused about where to go after she graduated from college. She thought about applying to law school. In fact, she had recently attended orientations at two different institutions. She told the counselor that another option was to pursue a master's in business, while taking some classes in art. Jane thought that she might even consider teaching in high school. She expressed excitement in her voice and said, "This is what I would really like to do." Jane was apprehensive about the potentially low salary, compared to one as a lawyer. She was also concerned about how her father might react.

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## TOPIC: CONSULTATION

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### Supplemental Reading

Caplan, G. (1995). Types of mental health consultation. *Journal of Educational & Psychological Consultation*, 6, 7–21.

- Dinkmeyer, D., Jr., & Carlson, J. (2005). *Consultation: Creating school-based interventions* (3rd ed.). Philadelphia, PA: Brunner-Routledge.
- Doerries, D. B., & Foster, C. A. (2001). Family counselors as school consultants: Where are the solutions? *The Family Journal*, 9, 391–397.
- Keys, S. G., Bemak, F., Carpenter, S. L., & King-Sears, M. E. (1998). Collaborative consultant: A new role for counselors serving at-risk youths. *Journal of Counseling & Development*, 76, 123–133.
- Kurpius, D. J., & Fuqua, D. R. (1993). Fundamental issues in defining consultation. *Journal of Counseling & Development*, 71, 598–600.
- Mendoza, D. W. (1993). A review of Gerald Caplan's theory and practice of mental health consultation. *Journal of Counseling & Development*, 71, 629–635.
- Moe, J. J., & Perera-Diltz, M. (2009). An overview of systemic-organizational consultation for professional counseling. *Practice, Theory, & Research*, 37, 27–37.
- Parker, R. J. (1991). What is really the problem? A simulation to train beginning consultants. *Counselor Education & Supervision*, 31, 81–89.

## Website

- **Mental Health Consultation**  
[http://www.strengtheningfamilies.net/images/uploads/program\\_tools/04\\_Mental\\_Health\\_REV4.pdf](http://www.strengtheningfamilies.net/images/uploads/program_tools/04_Mental_Health_REV4.pdf)  
 This 10-page pdf document describes how mental health consultation fits as a component of early childhood education. Roles of mental health consultants, program examples, and challenges are addressed.

## Learning Activity

Construct a consultation outline/guide to any given scenario based on the following lead: Pretend that you were asked to consult with teachers at a nearby school. The teachers were having difficulty with a particular issue concerning their students. Develop an outline based upon the following: (a) the issue or concern; why the consultees need your help; three specific, measurable goals for the consultation project; (b) the roles of everyone involved, including who the consultant, consultee, client/s; and stakeholders; and (c) how the relationship with the consultee will be developed and maintained, including how confidentiality will be maintained; how the roles of the participants will be agreed upon; and how closure will be attained.

## Vignette

- *Consultation in the schools.* You have been asked by Mrs. Evans, a school principal at a local elementary school, to help design a parent education program. This program would include weekly parent group discussions that would allow parents to discuss and understand the affective and cognitive aspects

of dealing with their children. Mrs. Evans is consulting with you regarding important factors, issues, and points important to the parent group structure.

- If you are the consultant, who or what group will be identified as the consultee, client(s), and stakeholders? Provide support for your answers.
  - Consider interprofessional collaborations or relationships that will need to be formed to make this possible. Who and what relationships will be needed?
  - As a mental health consultant working in this capacity, what basic counseling skills and portions of particular counseling theories will it be important for you to incorporate into interactions with others?
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## COURSE ASSIGNMENTS

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### Literature Research Project (50 Points)

Students should choose a topic to research that is related to the field of professional counseling. To prepare for this project, the following guidelines should be followed: (a) locate, study, and incorporate at least seven professional and peer-reviewed journal articles published no more than 5 years ago and (b) conduct interviews with two different mental health professionals who have at least 5 years of licensed experience in the field, as well as in the given topic area. Interviews can take place face-to-face or via e-mail. Proof of interviews must be included and reference to interviewees should be incorporated appropriately within the outline. The project will be graded on the following:

1. Topic Chosen (12 points)
  - a. Clarity of topic
  - b. Timeliness and relevance to current counseling and mental health practices
  - c. Degree to which topic will contribute to the knowledge base of readers
  - d. Innovativeness and novelty
2. One- to Two-Page Comprehensive Outline (20 points)
  - a. Information and subtopics are organized through a thorough synthesis of the resources available
  - b. Each topic and related subtopics are supported with multiple, relevant, and current references (any given subtopic should not be a summary of one source)
  - c. Material matches title (clear and focused)
  - d. Interview references are relevant to the topic and are incorporated appropriately to support any given subtopic
  - e. Applicability of outline as a guide from which to write the manuscript with ease, efficiency, and clarity
3. Reference Page (8 points)
  - a. Includes at least 15 references (7 of which are professional and peer-reviewed journal articles published no more than 5 years ago)

- b. Correct APA format and spelling
4. Class Presentation of Research (10 points)
  - a. Ability to summarize the research in a thoughtful, reflective, and knowledgeable manner
  - b. Evidence of thought and conceptualization of topic provided through reflection question
  - c. Ability to answer one final question from the audience about the topic in a thoughtful, reflective, and knowledgeable manner

## Publication Manuscript for Counseling-Related Newsletter (100 Points)

The following criteria should be adhered to when writing the article: (a) formatting of document, including *Publication Manual of the American Psychological Association* (6th edition) format, writing form, and six-page limit; (b) throughout the paper, the topic remains consistently directed at the given audience population mentioned in the beginning of the document (i.e., marriage and family counselors); (c) the relevance or the importance of the topic to potential readers is clearly spelled out (i.e., in the introduction, the importance of the topic is clear); (d) the focus of the topic is clear and easily comprehended (i.e., the body of the article is focused and addresses objectives); and (e) subject matter is innovative and up to date. The paper must include at least six references, all of which are dated within the last 5 years. Three references must be peer-reviewed journal articles.

## Poster Presentation (or Final Exam) (45 Points)

The final exam will be a contribution to a mini-conference. The mini-conference will be made up of a series of poster sessions on professional issues and practice in the field of marriage and family and/or mental health. (Topics should be related to the profession and field rather than to client issues.) Members of the counseling program (i.e., faculty, peers) will be invited. Each student will prepare a poster on a particular topic of interest and professional relevance. The topic addressed in the publication manuscript can be used pending approval of the instructor. Poster sessions may feature a demonstration or information. The posters should be mounted on 36 × 48-inch, free-standing presentation board; standard-size boards are available at places such as Staples, Office Max, or Office Depot. Possible topics might include but are not limited to any of the following: confidentiality/informed consent, dual relationships, ethical concerns facing professional counselors, marketing counseling services, managed care, counselor licensure, legislative issues, ethics in group work, technology. Evaluation will be based on the following:

1. Poster presentation proposal that adheres to the following criteria:
  - a. Two paragraphs that each address the following; the entire document should be at least 300 words typed in the APA's *Publication Manual* format: (15 points)

- b. Summary of the topic, specifically related to its relevance and application to the counseling profession
  - c. Summary of how the topic and related information will be disseminated and illustrated on the poster. For example, how will all of the elements noted in (b) be shown on the poster?
2. Poster presentation will be graded on the following: (10 points each)
- a. Topic's relevance to the field of professional counseling
  - b. Applicability of information presented
  - c. Quality of poster (visual display; creativity)
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## TENTATIVE COURSE OUTLINE

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<i>WEEK</i>	<i>TOPIC</i>
Week 1	Mental health counseling in America or in the 21st century
Week 2	Introduction to ethics and legal issues in the counseling profession
Week 3	Counseling in a multicultural society
Week 4	Ethical, legal, and professional behavior and practice (competence and malpractice, confidentiality, records, and technology)
Week 5	Professional counselor as scholar practitioner: Yesterday and today
Week 6	Introduction to counseling theories
Week 7	The counseling process: Skills, assessment, diagnosis, and treatment
Week 8	Counseling children, vulnerable adults (older persons, persons with disabilities)
Week 9	Couples and family counseling
Week 10	Group counseling
Week 11	School counseling
Week 12	Counselor supervision
Week 13	Career counseling
Week 14	Consultation
Week 15	
Week 16	

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## CONCLUSION

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What a pleasure this course is to teach! First, it is typical that students who take this course are rather new to the counseling program. Thus, they are particularly excited and motivated to learn about the course material, as well as the counseling profession in general. In addition, the dreaded doldrums of mid-semester are easily combated with

the swift pace and constant shifting of topics throughout this course. Secondly, the variety of course topics provides the instructor with an assortment of delivery opportunities. For example, whereas one topic may be best presented through a classroom activity, another might be best introduced by a guest presenter. This is a fabulous course for counselor educators who value creativity, resourcefulness, and originality.

Indeed, this is a course packed with information and potential. Consequently, such a course can also be quite overwhelming for the novice counselor educator. We suggest reminding students at the beginning of the course that much of the information will be addressed in further detail along their course of study. On the other hand, it is in the best interest of the instructor to go into each class period with just a few objectives while also saving time for discussion. In addition, it is helpful to schedule periodic check-ins with the class regarding any questions students may have about anything covered up until that point. Finally, instructors are urged to be patient with themselves, enjoy the process (while relishing the “ah hah” moments), and, above all, join the students on a journey of personal and professional discovery!

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## APPENDIX A

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### Professional Counselor as Scholar Practitioner Self-Assessment

Instructions: In the last month, how often has the following been true for you? (0) Never, (2) Sometimes, (3) Often, (4) Always. For each question, choose the best response and write the affiliated number besides the statement.

#### Consumer

- \_\_\_ I apply and adhere to appropriate ethical codes and moral principles when consuming and using information.
- \_\_\_ I illustrate interpersonal competence and relationship skills when I am consuming information from others (i.e., interacting with experts in the field, using proper etiquette when networking). These persons would also say that I have competent interpersonal skills.
- \_\_\_ I conduct self-checks or self-evaluations about how my own subjectivity impacts my conceptualization of information (i.e., personal values, culture, experiences).
- \_\_\_ I am consistently open to self-examination and feedback from others about how one is processing and conceptualizing information. That is, I do not take offense to constructive feedback.
- \_\_\_ I am adaptable and will consume current information even if it is not terribly interesting to me.

- I regularly consume new and up-to-date information, as well as current research and developments in the field.
- I properly summarize, evaluate, and synthesize information that will help inform practice (as a clinician, academic, or consultant/administrator).
- I can locate evidenced-based and scholarly information.

### **Disseminator**

- I apply and adhere to appropriate ethical codes and moral principles when disseminating information through any medium.
- I am sensitive to diversity (i.e., ethnicity, cultural, religion, gender, socio-economic status, sexual orientation, disability) when disseminating and sharing information.
- I illustrate interpersonal competence and relationship skills when sharing information with others (i.e., genuineness, empathy, making eye contact with participants). These persons would also say that I have competent interpersonal skills.
- I am aware and accepting of possible areas of growth when disseminating information through any given medium (i.e., presenting information that is culturally sensitive, maintaining a comfortable disposition when presenting in front of an audience, patience with journal editors, ability to avoid distractions).
- I disseminate information that is appropriate for the given venue (i.e., school counseling conference, counselor education, and supervision-related journal).
- I am open to self-examination and feedback from others (e.g., presentation participants) throughout the process of preparing to disseminate (writing a manuscript) and during the actual dissemination (presentation). That is, I do not take offense to constructive feedback.
- I apply feedback related to how I am disseminating information.
- I conduct self-checks or self-evaluations about how my own personal subjectivity (i.e., personal values, culture, experiences) impacts my goal or purpose for disseminating any given type or topic of information.
- I am adaptable and will disseminate information needed by the profession even if I am not terribly interested in it.
- I reference authors and the creators of information appropriately when disseminating information that I have adopted or adapted from secondary sources.
- I contribute to the field through the dissemination of information in various contexts (i.e., presentation, publication).
- I publish in scholarly venues.
- I write presentation proposals.
- I conduct professional presentations.

### **Advocate**

- I apply and adhere to appropriate ethical codes and moral principles when advocating for clients, the counseling field, or related issues.

- \_\_\_ I am sensitive to diversity (i.e., ethnicity, cultural, religion, gender, socioeconomic status, sexual orientation, disability) when advocating for any given cause or persons.
- \_\_\_ I illustrate interpersonal competence and relationship skills when advocating for any given cause or persons. These persons would also say that I have competent interpersonal skills.
- \_\_\_ When advocating for any given cause, I follow an advocacy theory or process supported by research.
- \_\_\_ I adhere to the mission of the professional counseling field when advocating for any given cause or persons (i.e., following code of ethics, working from a wellness perspective).
- \_\_\_ I conduct self-checks or self-evaluations about how my own personal subjectivity impacts my goal or purpose for advocating for any given cause or persons.
- \_\_\_ I show professional responsibility by staying abreast of current legislative efforts related to the field.
- \_\_\_ I show professional responsibility by participating in advocacy activities (e.g., writing legislators) related to current legislative efforts.
- \_\_\_ TOTAL SCORE

0–29: A score in this range indicates that your ability to incorporate an appropriate level of awareness, knowledge base, and skill when consuming or disseminating information and advocating for any given cause is poor. You could benefit from reviewing the criteria and standards associated with these tasks as well as seeking mentorship and one-on-one supervision.

30–59: A score in this range indicates that your ability to incorporate an appropriate level of awareness, knowledge base, and skill when consuming or disseminating information and advocating for any given cause is poor to average. You could benefit from reviewing the objectives of these tasks, as well as continuing to practice ways of strengthening your knowledge and skill base and increasing your awareness.

60–89: A score in this range indicates that your ability to incorporate an appropriate level of awareness, knowledge base, and skill when consuming or disseminating information and advocating for any given cause is moderate at best. You could benefit from consulting with a supervisor or peer about ways in which to strengthen your abilities to consume and disseminate information, as well as participating in advocacy activities.

90–120: A score in this range indicates that your ability to incorporate an appropriate level of awareness, knowledge base, and skill when consuming or disseminating information and advocating for any given cause is strong. There is always room to grow. You could benefit from continued practice and continued openness to the process.

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## APPENDIX B

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### Conducting Formal Presentations: Criteria and Guidelines

- Oral Presentation
  - Evidence of a thorough conceptualization of the material being presented
    - Ability to translate the information into practical applications
  - Illustration of genuineness and honesty
    - Ability to be sincere when unable to answer questions from audience
    - Proper citing of original resources and references
  - Evidence of creativity in presenting (i.e., media, role-plays, participation from audience)
  - Ability to promote audience involvement
    - Leads and maintains discussions during any presentation activities
    - Use of provocative questions, media, questionnaires, handouts
  - Illustration of quality presentation mechanics
    - Presence with audience
    - Maintenance of eye contact
    - Efficient use of time allotted
    - Program title or abstract matches content of presentation
- Resources and Materials
  - Information is applicable to audience
  - Information matches current trends and is relevant to present-day concerns and interests within the field of counseling and mental health
    - Topic fits with today's societal, cultural, and legislative trends
  - Information can be supported by current research studies or literature reviews
  - Resources and references are relevant and match presentation content
- Relationship with Copresenters
  - Maintained consistent communication with copresenters throughout preparation process
  - Shared jointly in the division of presentation preparation labor
  - Contributed a fair share to preparation and in actual presentation
  - Exhibited a sense of professionalism with copresenters
  - Offered creative ideas and suggestions during presentation preparation

*Note.* Reprinted with permission from Duba (2009).

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- Duba, J. (2009). *Professional counselor as scholar practitioner self-assessment*. Unpublished manuscript, Department of Counseling and Student Affairs, Western Kentucky University, Kentucky, USA.
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