

# SACES NEWSLETTER VOLUME 18 | ISSUE 1 | FALL 2022

THEME: SUPERVISION – ADVANCING THEORY AND PRACTICE OF COUNSELOR SUPERVISION

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### FROM THE PRESIDENT



Happy Holidays SACES members!

It is fortunate to have this opportunity to write this letter during a time of reflection on that by which we are thankful. It is from a place of pure appreciation and celebration that I frame this fall letter.

Many announcements and congratulations are due. Our very own Newsletter Editor, Isabel Farrell, has been elected as incoming President Elect. Our newest elected secretary, Joe Campbell, has served SACES for years and we are ecstatic about his appointment into leadership. Elections remind us of the importance of leadership within our professional organizations. As an executive committee, it is a trait we wish to foster as we lead our profession towards betterment in advocacy efforts for those we serve. I am beyond thankful for those that have given their time and service towards our organization. We would not be able to accomplish such amazing feats without our member leaders.

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While many thanks have been given to those that aided with the 2022 Conference, I wish to acknowledge our 2022-2024 Emerging Leaders. These incredible group of individuals went above and beyond, ensuring conference attendees were supported and comfortable in their surroundings. Furthermore, these individuals participated in a workshop regarding leadership, participating in important dialogue regarding the counseling profession and beginning their own journey towards professional leadership. I am both encouraged and excited to see this new group of leaders emerging into our profession, inspired by their insights and visions for the future.

Without a doubt, the SACES 2022 Conference was a wonderful success. While success can be defined by profit margins, I believe it speaks more to the energy felt in each presentation, opportunity to socialize, and incredible conversation and

collaboration related to the work we do. This success is attributed to all of you, both volunteers and attendees, for contributing to the spirit of SACES. I am so grateful to all and look forward to increasing the ways these successes can further benefits for our SACES members. These changes can be seen already as the SACES EC voted to double funding for research grants. The proposals awarded reflect meaningful and a high caliber of research that will lead to the betterment of our profession and those we serve.

As our executive committee heads into our strategic planning season, I want to welcome feedback from our members in what we can do for you. Where is further support needed? What initiatives do you want to see us working towards? We will be hosting our town hall via zoom for all members to engage in with an open form for conversation. Our goal is to increase transparency to best meet the needs of our members. We look forward to hearing from you and working towards a vision of SACES by which we all can be proud!

Warmest regards,

Hannah Bowers

2022-2033 SACES President

### 2022 – 2023 SACES LEADERSHIP

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Multicultural Counseling

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### **Meet the Fall 2022 Guest Editor**



John J. S. Harrichand, Ph.D., LPC-S, LMHC, NCC, CCMHC, ACS, CCTP (he/him/his) is a Canadian of Chinese and East Indian ancestry, an immigrant to Canada and the son of immigrants, who was born and raised in Guyana, South

America. He is a proud International Faculty in the US and an Assistant Professor in the Department of Counseling at The University of Texas at San Antonio. Dr. Harrichand's scholarship centers on

counselor education leadership, development, and burnout; cross-cultural counseling and minority populations (i.e., LGBTQIA+, immigrants, refugees, international students, sex-traffic survivors); clinical supervision and gatekeeping; and ethical, professional, and social justice advocacy using qualitative and quantitative methodologies. He is a recipient of the CSI Journal of Counselor Leadership and Advocacy Outstanding Article Award, AMCD Young Emerging Leader Award, AADA President's Outstanding Service Award, and TCA Professional Writing Award.

https://orcid.org/0000-0002-3336-2062

### **Meet the Fall 2022-2023 Graduate Assistant Editor**



Zobia Akhtar is a Graduate Student in the Counseling Program at Wake Forest University. She completed her BA in Psychology from the Lahore University of Management and Sciences. She decided to pursue a career in counseling after observing the stigma surrounding mental health in Pakistan. She wishes to gain a deeper understanding of stigma and learn how she can play her part by becoming a therapist. Currently, she is an intern at the Advocacy, Recovery, Compassion & Healing (ARCH) team at Atrium Health.

## Teaching and Supervision in Counseling Latest 2022 Issues

Our editorial team is excited to share with you all Volume 4, Issue 2 of Teaching and Supervision in Counseling (TSC). In this issue are four empirical and conceptual articles pertaining to counselor education and supervision, as well a special section on suicide risk assessment and intervention in school counselor education and practice. Links to each article are below. As an open access journal, all of these articles are freely available. We hope you find this scholarship useful to your work!

### 2022 Volume 4, Issue 2

Empathy-In-Teaching as a Multidimensional Disposition in Counselor Education by Eric Baltrinic and Melissa Luke

https://trace.tennessee.edu/tsc/vol4/iss2/1/

Veterans in Counseling Programs: Military Service and the Counselor Training Process by Crystal D. Hahn, Carl R. Price, and Claudia G. Interiano-Shiverdecker

https://trace.tennessee.edu/tsc/vol4/iss2/2/

Motivation, Belonging, and Support: Examining Persistence in Counseling Programs by Alisa Houseknecht and Jacqueline M. Swank <a href="https://trace.tennessee.edu/tsc/vol4/iss2/3/">https://trace.tennessee.edu/tsc/vol4/iss2/3/</a>

Cross-Cultural Distance Dialogues in Counselor Education: Collaborative Pedagogy by Sarah N. Baquet and Jehan Hill

https://trace.tennessee.edu/tsc/vol4/iss2/4/

### \*Special Section\*

Introduction to the Special Section: Suicide Risk Assessment and Intervention in School Counselor Training by Lucy L. Purgason (Special Section Guest Editor), Christian D. Chan (TSC Associate Editor), and W. Bradley McKibben (TSC Editor) <a href="https://trace.tennessee.edu/tsc/vol4/iss2/5/">https://trace.tennessee.edu/tsc/vol4/iss2/5/</a>

Suicide Intervention in Schools: If Not School Counselors, Then Who? by Laura Gallo and Carrie A. Wachter Morris

https://trace.tennessee.edu/tsc/vol4/iss2/6/

School Counselors' Vital Role in Suicide Intervention: A Response to Gallo and Wachter Morris by Carolyn Stone https://trace.tennessee.edu/tsc/vol4/iss2/7/

Validating School Counselor Professional Identity: Response to 'Suicide Intervention in Schools' by Donna M. Gibson

https://trace.tennessee.edu/tsc/vol4/iss2/8/

A Wrap-Around Approach to Suicide Prevention in Schools: It's Not Just School Counselors by Tahani Dari and Jan Gay

https://trace.tennessee.edu/tsc/vol4/iss2/9/

Multi-Tiered Systems of Support (MTSS) for Suicide Prevention and Intervention: Considerations for School Counseling Preparation by Emily Goodman-Scott, Jennifer Betters-Bubon, and Rebecca Pianta

https://trace.tennessee.edu/tsc/vol4/iss2/10/

School Counselor Suicide Response: A Final Rejoinder by Carrie A. Wachter Morris and Laura Gallo

https://trace.tennessee.edu/tsc/vol4/iss2/11/

### Have a manuscript to submit?

TSC invites manuscript submissions for consideration in upcoming issues of the journal. Manuscripts submitted to TSC fall within one of four categories: teaching, clinical supervision, mentorship, and current issues and topics relevant to the Southern Region of ACES. More information about these categories can be found on the journal's aims and scope page at

https://trace.tennessee.edu/tsc/aimsandscope.html

Articles may be empirical, conceptual or theoretical, or based on current issues, with an emphasis on empirical research. Articles must be scholarly, grounded in existing literature, and have implications for the counseling profession including, but not limited to, counselor education, supervisory practice, clinical training, pedagogy, mentoring, or advocacy and public policy. All manuscripts are submitted to a blinded peer-review

process. Additionally, a goal of TSC is to provide mentoring to graduate students in the area of peer review and writing. Accordingly, graduate students are encouraged to submit manuscripts to TSC.

Submission guidelines for manuscripts can be found at <a href="https://trace.tennessee.edu/tsc/policies.html">https://trace.tennessee.edu/tsc/policies.html</a>

Manuscripts can be submitted to <a href="https://trace.tennessee.edu/cgi/submit.cgi?context=tsc">https://trace.tennessee.edu/cgi/submit.cgi?context=tsc</a>

If you have any questions, please contact Dr. Bradley McKibben, TSC Editor, at <a href="mailto:tscjournal@saces.org">tscjournal@saces.org</a>

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### **The TSC Editors**



W. Bradley McKibben (he, him, his), PhD, RMHCI (FL), NCC is the Editor for TSC. He is an Associate Professor at Jacksonville University. Dr. McKibben's research interests pertain to clinical supervision; specifically, he has studied the supervisory relationship, influences of attachment

strategies, counselor development, and multicultural considerations in clinical supervision. He directs the Clinical Supervision Research Lab in the Department of Counseling, which aims to advance rigorous research and scholarly activity, and to offer premier training opportunities, to elevate and advance the specialty of clinical supervision. Dr.

McKibben has published over 20 journal articles and 4 book chapters, and he has presented at over 40 international, national, regional, state, and local conferences. His work has been nationally recognized with the 2019 American Counseling Association Research Award and the 2018 Journal of Counselor Leadership and Advocacy Outstanding Article Award. Prior to serving as TSC Editor, Dr. McKibben served as the journal's Associate Editor for three years.



Christian D. Chan (he, him, his), PhD, NCC is the Associate Editor for TSC. He is an Assistant Professor in the Department of Counseling and Educational Development at The University of North Carolina at Greensboro, Past-President of the Association for Adult Development and Aging

(AADA), and a proud Queer Person of Color. As a scholar-activist, his interests revolve around intersectionality; effects of oppression and trauma, especially race-based trauma, on counseling, career, and educational pathways; social justice and activism; and communication/socialization of cultural factors in couple, family, and group modalities. Dedicated to mentorship for leaders and scholars, he has actively contributed to over 59 peer-reviewed publications in journals, books, and edited volumes and has conducted over 145 refereed presentations at the national, regional, and state levels.

## **Inclusive Supervision: A Model for Successful Clinical Practice**

Matthew R. Shupp, Ed.D., LPC, NCC, BC-TMH, C-DBT, ACS; Shippensburg University, & Timothy Eng, M.S; University of Central Florida



Matthew R. Shupp (left) & Timothy Eng (right)

Supervision plays an essential role in the preparation of helping professionals across all disciplines and is one of the more common

activities in which mental health professionals engage (Bernard & Goodyear, 2014). As such, various models of supervision have been researched, developed, and employed as "best practices." Yet, very few supervision models exclusively consider the multicultural and social justice components that are embedded within the core competencies of the profession (ACA, 2014). Wilson et al.'s Inclusive Supervision Model (2020) is a new, action-oriented model that addresses what supervisors should do to create more inclusive environments for all staff and to help inform socially just practice. Inclusive Supervision requires supervisors to actively reflect on one's strengths and recognize potential barriers to creating inclusive spaces. This article seeks to inform the reader of the nature, impact, and importance of the tenets of Inclusive Supervision and identify successful strategies and techniques to creating a more inclusive supervisory approach.

Supervision is often learned from personal experience or on the job training, models of good and poor supervision, a course in a continuing education program, and/or continued training and development as a professional. Far less supervision is learned as part of formal graduate training programs (Herdlein et al., 2009; Renn & Jessup-Anger, 2008). An alarming trend, even prior to

COVID-19's impact on our profession, is the attrition of staff within the helping professions. Research has indicated that 50-60% of new professionals leave the field within 5 years (Tull, 2006) and do not return, citing such factors as burnout, salary issues, career alternatives, work/family conflict, limited advancement, loss of passion, and, perhaps most importantly, incongruence with supervisory approaches (Marshall et al., 2016). There is a significant cost and disruption to such attrition, including loss of institutional/agency knowledge, decreased work productivity, and overburdening staff during staffing shortages. Conversely, predictors of commitment to the helping field include overall satisfaction with the nature of their work, communication/transparency in the workplace, renumeration, opportunity for promotion, and supervision received (Allbee, 2019). In other words, effective supervision is one factor that increases staff satisfaction and overall retention to the field.

Literature on the underdeveloped multicultural competence of supervisors has highlighted that harmful behaviors such as stereotyping and unintentional racism can lead to negative experiences in the supervisory relationship and "trickle down" to negatively impact client outcomes (Bernard & Goodyear, 2014). Supervisors who were culturally unresponsive caused emotional distress for supervisees, impacted their ability to disclose, and led them to seek consultation with others to address concerns related to cultural issues (Burkard et al., 2006). The Inclusive Supervision Model informed through multicultural and social justice lenses – seeks to enact values of inclusivity to develop cultural responsiveness and challenge how individuals perceive diversity (Wilson et al., 2020).

The Inclusive Supervision Model contains four primary tenets: Creating Safe Spaces, Cultivating Holistic Development, Demonstrating Vulnerability, and Building Capacity in Others. Each tenet is briefly discussed below.

### **Creating Safe Spaces**

Creating Safe Spaces is the foundational tenet within the model. It is defined as soliciting and openly welcoming feedback from supervisees on their supervisory skills. Supervisors accommodate different learning and personality styles, demonstrate care for staff well-being, and help staff navigate organizational and institutional culture. Inclusive supervisors create environments where all individuals feel comfortable expressing themselves and where all staff feel valued.

### **Cultivating Holistic Development**

Cultivating holistic development involves demonstrating a willingness to learn about the unique identities of supervisees; recognizing, acknowledging, and celebrating aspects of individuals' identities in the workplace (as welcomed by staff) and providing opportunities for staff to share/discuss their identities. Inclusive supervisors support the intersection of those identities with the professional role. Inclusive supervisors successful at cultivating holistic development seek to understand and acknowledge individual's identities and culture and welcome and celebrate cultural identity.

### **Demonstrating Vulnerability**

Perhaps the most important tenet, the act of demonstrating vulnerability, is both a goal and a process. Supervisors successful in this tenet display the ability and willingness to seek out new opportunities to enhance their own knowledge on issues of diversity and, perhaps most importantly, openly acknowledging mistakes or the limits of their knowledge or experience. Inclusive supervisors intentionally seek out constructive feedback on the supervisory process and demonstrate humility and an openness to change. Demonstrating vulnerability requires a willingness

to experience personal discomfort, often needing to acknowledge personal limitations and seeking opportunities to understand one's blind spots.

"Inclusive supervisors create environments where all individuals feel comfortable expressing themselves and where all staff feel valued."

### **Building Capacity in Others**

Lastly, building capacity in others involves encouraging and promoting the development of supervisee's multicultural competence through professional development, training, or informal conversations. Supervisors strong in this capacity model a lived philosophy of inclusion in their daily interactions, hiring practices, and operations, and challenge their staff to recognize areas of privilege or opportunities for inclusion. They actively invite others into conversations about social justice and inclusion, focus professional development on enhancing multicultural competence, and demonstrate and model inclusive practices.

### **Recommendations for Practice**

How can one grow into providing greater inclusive supervisory practices? First and foremost, examining one's own supervisory practices can help foster critical self-awareness (of identities, biases and assumptions), increase an understanding of others, and create more inclusive professional settings. In addition, as an act of self-directed professional development, use the Inclusive Supervision Assessment (Shupp et al., 2018) (a free resource available at https://www.routledge.com/) as both self-reflection and to solicit feedback from others on one's supervisory practices. This practice creates open dialogue around the tenets and ways to strengthen supervision capacity. Next, create a professional development plan inclusive of these growth capacities. Lastly, find innovative ways to elevate supervisees' voices. Ask, "how are you best supervised?" and find ways to operationalize these needs.

### **Considerations for Supervisees**

We encourage supervisees to elevate their voice and take a collaborative approach to the supervisory experience. What must occur in order to create a safe space in which you can be your authentic and whole self? Examine what your supervisor needs to know and must do to fully support you?

To conclude, supervisors' roles are increasingly important in the development of inclusive spaces, the multicultural competence amongst current and aspiring professionals, and the overall retention of staff. Continual self-reflection and self-work on supervisory capacity is necessary at all levels. Building capacity for successful supervision work is a deeply personal commitment and begins with self-examination. Adopting an inclusive supervisory approach may enhance perceived effectiveness and transform your supervisory relationships.

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# **Technology Interest Network**

The Technology and Online CES Interest Network would like to invite you to join our research work group. Anyone who is interested in researching and writing on the topics of technology and/or online education is welcome to join! We are hoping to connect with like-minded colleagues to foster research collaborations. There is a large need for research in this area and collaborating with colleagues can reduce workload and increase motivation! Email <a href="technologyin@saces.org">technologyin@saces.org</a> if you want to join the group. Please include your name, email, phone, and any areas of current research or future interests.

# Moving Beyond Awareness Knowledge, and Skills: The Importance of Providing Counseling Supervisees with Specific Practice in Multiculturally Competent Clinical Interventions

Katie Askren, Ph.D., LPC, NCC; Liberty University



Katie Askren

I he most widely used model for teaching and evaluating counselors' multicultural competence (MCC) is race-based and centers on three domains first developed in 1982 and expanded in 2001 (Sue et al., 1982; Sue, 2001). While researchers have added to these concepts by highlighting differences in the

counselor-client relationship and including social justice actions (Ratts et al., 2016), there remains little focus on teaching and equipping counselors to use specific MCC clinical interventions. Accordingly, Askren (2022) merged the easily measured concepts of awareness, knowledge, and skills in the *Tripartite Model* (Sue, 2001) with the underlying premises of the Multicultural and Social Justice Counseling Competencies (Ratts et al., 2016) to develop a practical guide and measure for increasing counselors' MCC. This Quadripartite Model of Multicultural Competence adds the fourth dimension of *clinical interventions*, connecting intersectionality and cultural humility with experience in broaching, addressing race-based trauma, and using other culturally appropriate interventions (Askren, 2022). In supervision, the zone of proximal development (ZPD) can be considered the difference between a counselor's ability for independent problem-solving compared to augmented problem-solving with supervision and consultation (Eun, 2019). Thus, supervisors must make specific efforts to foster MCC growth within supervisees' ZPD within all domains, including MCC clinical interventions.

### **Intersectionality and Cultural Humility**

In assessing and creating case conceptualizations and treatment plans, supervisors must teach counselors to dive deeper into understanding beyond race and ethnicity. Research supports the formation of numerous socially-constructed identities that fluctuate and merge throughout a person's lifespan (Crenshaw, 1989; Harley et al., 2002; Jones & McEwen, 2000; Ratts et al., 2016). As such, counselors cannot fully identify their client's worldview without gathering specialized cultural information, including the client's family and social experiences and their understanding of power, privilege, and oppression (Crenshaw, 1989; Harley et al., 2002; Jones & McEwen, 2000; Ratts et al., 2016). Moreover, counselors must be trained to accurately assess and account for the impact of their own intersecting identities and cultural influences through cultural humility (Davis et al., 2016; Hook et al., 2013; Sue, 2001; Ratts et al., 2016). Consequently, supervisors must not be afraid to broach uncomfortable topics and openly discuss potential cultural misunderstandings, microaggressions, and biases, helping supervisees create a clear and precise plan for increasing their cultural humility through self-awareness and reflection.

### **Broaching and Increased Culture References**

In addition, counselors must be experienced in broaching to draw out information regarding their client's intersecting identities and experiences with power, privilege, and oppression. Without this training, dominant-culture counselors showed a clear trend toward avoiding cultural topics, feeling overly concerned with being politically correct. In contrast, non-dominant culture clients described an unspoken rule they should not talk about their culture (Santos & Dallos, 2012). At the same time,

both dominant and non-dominant culture counselors-in-training reported feeling fearful and uncomfortable talking about culture (Askren, 2022).

"This Quadripartite Model of Multicultural Competence adds the fourth dimension of clinical interventions, connecting intersectionality and cultural humility with experience in broaching, addressing race-based trauma, and using other culturally appropriate intervention."

In countering their trepidation, note that all types of culturally-related conversations will likely enhance counselors' cultural understanding and foster growth within their ZPD (Day-Vines et al., 2020; Eun, 2019; Hook et al., 2013). In a study where broaching was classified as a basic counseling skill and taught in unison with all other skills, culture references by both counselor and client were increased by more than 300 percent in one day (Askren, 2022). Within one week, participants reported feeling more comfortable discussing culture and more confident using the skill of broaching, indicating they could not imagine using other basic counseling skills without broaching (Askren, 2022). Therefore, supervisors should broach culture with their supervisees and provide them with specific prompts for use in mock counseling sessions and with actual clients. For example:

- "One thing I talk about often with my clients is culture. Tell me about your culture" (Askren, 2022, p. 58).
- "Last time we met, we talked about your culture. What are some things you think are the same or different between us;" (Askren, 2022, p. 59); how will this affect our relationship?
- How do you think your culture affects [presenting problem]?

### Addressing Race-Based Trauma

Many clients face racism and discrimination daily, and even more witness a constant barrage of violent images and race-based trauma via the internet and media (Davis et al., 2016; Hemmings & Evans, 2018). Nevertheless, few counselors learn to address these daily atrocities, and many describe feeling unskilled, ill-prepared, and inadequate (Hemmings & Evans, 2018). By designing broaching prompts to address race-based trauma, supervisors can help counselors increase their confidence and competence in helping their clients process their negative experiences (Day-Vines et al., 2020; 2021). For example:

- Tell me what power, oppression, and privilege mean to you.
- What does it feel like when you see videos of people like you being abused by other culture groups?
- Have you felt oppressed or discriminated against by someone who looks like me or is from my culture?

As counseling supervisors, obligations go beyond the supervisees to every person they will eventually counsel. Counselors must be taught to consider intersecting identities and exhibit cultural humility while providing opportunities to practice broaching complex topics. Correspondingly, supervisors must engage in culture-related discussions and require practice in broaching, acknowledging that a counselor's lack of confidence and skill in MCC clinical interventions may reflect a supervisor's failure to adequately integrate MCC into all areas of learning and practice.

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# Considerations for School Counseling Supervisory Relationships

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Rachel Gilreath (left), Madeline Saunders (middle), & Shanta Jerideau (right)

During this time, programs are faced with challenges including cost, access, and shortage of credentialed school counseling supervisors (Bledsoe et al., 2021). Additionally, with the continued rise of diverse student populations in schools, it is imperative for school counselors to be well-versed in multicultural competencies (Dameron et al., 2020). Current literature is replete with studies confirming the importance of supervisory relationships, however, less is known about specific engagement strategies (Storlie et al., 2019). Our goal with this article is to offer implications to address and minimize these gaps.

"Supervisors ought to take initiative to explore literature and models of supervision that address the unique needs of school counseling supervisees."

Leadership and advocacy through supervisory mentoring, modeling, and training are integral to the development of supervisees (Storlie et al., 2019). School counselors, in particular, are faced with challenges when it comes to engaging in unrelated duties (i.e., proctoring or administering standardized

testing, lunch or bus duties, and other administrative tasks) that result in increased burnout (Fye et al., 2020). Therefore, supervisors must serve as resources to support practicum and internship school counseling students (SCS) in advocating for their role, the profession, and responsibilities to support holistic student development in their assigned schools. In a study conducted by Dameron et al. (2020), researchers found that school counselors who received infused education on multicultural competencies throughout their education had heightened awareness, knowledge, and skills compared to those who received a single multicultural course. Moreover, counseling program leaders and supervisors need to be aware of unique challenges that International School Counseling Students (ISCS) may encounter and pre-establish opportunities for support (Asempapa, 2019; Ng & Smith, 2009). Specifically, ISCS often do not have prior experience within American school systems in relation to their peers and may need support in locating practicum and internship placements (Asempapa, 2019). Mentorship from faculty or SCS peers, both prior to and during field experience, can serve as a supplemental support for ISCS to develop self-efficacy within the supervisory process (Asempapa, 2019). Seek the work of Asempapa (2019) to review more supervision considerations for ISCS, including a culturally sensitive mentoring and supervision model and case example.

Supervisors ought to take initiative to explore literature and models of supervision that address the unique needs of school counseling supervisees (i.e., the School Counselor Supervision Model based on the Discrimination Model; Brown & Carrola, 2020; Brown et al., 2018; Luke et al., 2011). This includes garnering familiarity with both the American

School Counselor Association (ASCA) National Model and the Ethical Standards (ASCA, 2022; ASCA, 2019). Fye et al. (2020) conducted a study in which researchers identified positive supervisory experiences and intentional implementation of the ASCA model as predictors for decreased school counselor burnout. As such, university and site supervisors alike ought to infuse standards as outlined by the ASCA Ethical Standards for School Counselors in supervisory relationships to address supervisee multicultural competency development and ASCA model implementation in practice (e.g., Standards C.i and D.d; ASCA, 2022). ASCA provides a holistic framework for school counselors to utilize with consideration for the many roles they play in the schools (ASCA, 2012). Given the COVID-19 pandemic, the supervisory relationships have shifted greatly in that SCS missed the added benefit of university supervisor site visits, in-person meetings, and collaborative opportunities with site supervisors (Gay & Swank, 2021). Utilizing the structured peer group model developed by Borders (1991) may complement the supervision process as it outlines feedback roles and foci for supervisee engagement (Bledsoe et al., 2019). Additionally, Lambie and Stickl Haugen (2021) described developmental models to be effective in supervising school counselors. Finally, supervisors may also consider providing the Assessment of School Counseling Competencies to evaluate supervisee growth (Lambie & Stickl Haugen, 2021).

The program-site alliance is complex and pivotal to the production of competent, quality professionals (Tribitt & Moody, 2021). Bledsoe et al. (2021) recommended developing a partnership between K-12 school district coordinators and university supervisors. Facilitating school counselor supervision groups across districts or within specific placements is one form of collaboration that may aid in closing the gap for school counseling experience and knowledge that is limited for university supervisors (Bledsoe et al., 2019). In turn, counselor education programs can support school counseling supervisors by encouraging supervision education within their master level

preparation as opposed to exclusively offering these courses at the post-master or doctoral level (Bledsoe et al., 2019). Universities can offer small-scale trainings to school counseling supervisors, as taking full courses may not be cost and time effective; training content may include encouraging supervisors to interview and observe current school counselors and their supervisors (Brown et al., 2018).

Irrefutably, implementation of an appropriate supervision model is paramount to the supervisor-supervisee relationship. Most importantly, it is an overarching measure for gatekeeping, professional development, and navigating the trajectory of learning outcomes.

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# Tailored to Trainees: Implementing the DEP Supervision Model in Counselor Education

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Alexandra Frank (Left), Dennis J. Simon (Middle), & Mark E. Swerdlik (Right)

Supervision is a "signature pedagogy" (p. 2) within mental health professions and plays a formative role in the life of a mental health professional (Bernard & Goodyear, 2014). As such, it is also a necessary element for training new professionals (CACREP, 2016). Section 3 of the 2016 CACREP Standards specifically outlined how accredited training programs should conduct supervision by providing expectations for who should provide supervision, how often students should receive supervision, and what type of supervision students should receive (triadic, group, etc.). While CACREP clearly delineated several requirements regarding supervision, the standards do not define what supervision model articulates best practices and should guide the supervision process. While a variety of supervision models exist, this article will briefly introduce counselor educators to a new-to-them supervision framework one that is well-suited to counselors-in-training receiving supervision in clinical, elementary and secondary school, and higher education settings; one that highlights the unique context in which each supervisee is functioning and centers equity within the supervision framework; and one that is aligned to best-practices within supervision research.

Uniquely appropriate to counselor education, we will describe the DEP Supervision Model (Simon & Swerdlik, 2023; Simon et al., 2014).

# The Developmental, Ecological Problem-solving Supervision Model (DEP)

In their seminal work on clinical supervision, Bernard and Goodyear (2014) suggested that supervision models "provide a conceptual framework for supervisors" (p. 21). The DEP supervision model was designed for school psychology students-in-training (Simon & Swerdlik, 2023) but can be applied to counselors-intraining considering the similarity of higher education to the school setting and a similar emphasis on training new professionals for diverse roles, practice activities, and settings. DEP addresses clinical supervision at all levels of training and experience.

"While CACREP clearly delineated several requirements regarding supervision, the standards do not define what supervision model articulates best practices and should guide the supervision process."

The Developmental component recognizes that professional learning occurs on a developmental continuum. Supervision methods must be adjusted to the developmental level of the supervisee in terms of skills and experience while ensuring client welfare. Significant structuring at the onset of supervision includes a supervision contract, routine formative feedback, and scheduled summative feedback. Multiple supervision methods are necessary because different stages of development require different levels of support and guidance.

Such methods include modeling, direct instruction, co-intervention, observation, consultation, and deliberate practice—all adapted to the supervisees' developmental needs.

The Ecological component asserts that it is impossible to understand individual students, clients, or communities without understanding their interaction with larger environments. Diversity and multicultural responsiveness and social justice advocacy are core skills for professional practice and are explicit supervisory goals. Sometimes changing the system is the vital component of intervention planning. The ecological perspective requires attention to systemic interventions. This entails collaborating closely with peers and colleagues and designing interventions that impact client, community-wide, and/or family practices.

The Problem-solving component involves supervisors teaching systematic case conceptualization and guiding evidence-based intervention planning. The integration of developmental and ecological factors into problem-solving is essential. Rooted in data-based decision making, problem-solving includes linking assessment, intervention, and progress monitoring across all practice activities, simultaneously addressing both individual and systemic factors in all interventions, adapting evidence-based practices to the unique cultural and contextual issues impacting clients, and assessing the need for targeted prevention programs.

# Alignment between the DEP Supervision Model and Counselor Education

Prior to now, counselor educators have yet to explore applications of the DEP model to counselor education. However, DEP is particularly relevant to counselors-in-training given the alignment with the supervision standards set forth by CACREP (2015) and the ethical guidelines outlined by ACA (2014). CACREP indicated that faculty members in counselor education should create "written supervision agreements" that "define the roles and responsibilities... of the supervisor

and student" (section 3.R). ACA charged supervisors with prioritizing multiculturalism (standard F.2.b) and providing ongoing and meaningful feedback (standard F.6.a). DEP is aligned with such requirements by similarly emphasizing multiculturalism and feedback and by providing sample contracts in the text, *Supervision in School Psychology: The Developmental*, *Ecological*, and *Problem-Solving Model*.

While the DEP model is well-suited to counselor education, it is also aligned to current best practices in clinical supervision. Borders (2014) described her work as a task force member compiling best practices in supervision. Endorsed by ACES, the task force's final document consists of "12 sections covering the phases and processes in conducting supervision as well as supervisor training, characteristics, and competent behaviors" (Borders, 2014, p. 153-154; Borders et al., 2014). The stated supervision best practices neatly sync with DEP and provide a strong rationale for counselor educators who are interested in implementing this model with their own supervisees.

# **Using the DEP Supervision Model in Counselor Education**

While multiple supervision models are available to them, counselor educators should consider choosing a supervision model that meets both the needs of their diverse students and is rooted in current best practices in supervision. The DEP supervision model is specifically suited to the task of meeting these dual criteria, particularly given the emphasis on supervisees' developmental levels, integration of social justice practices, and alignment with current best practices within supervision, as defined by ACES (Simon & Swerdlik, 2023; Simon et al., 2014; Borders et al., 2014). Ongoing research should work to validate the DEP model as an evidenced-based practice supervision model specifically within counselor education.

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# Preparing Counselors to Address and Treat Racial Trauma: Recommendations for Counselor Supervision

Warren Wright, M.Ed., LPC, NCC, Jennifer Stover, MA, LPC, CCTP, CSC, & Kathleen Rice, Ph.D., LPC, LCMHC, LCAS, ACS, NCC; Sam Houston State University



Warren Wright (Left), Jennifer Stover, (Middle), & Kathleen Rice (Right)

The COVID-19 global pandemic highlighted the racial inequities Black, Indigenous, and People of Color (BIPOC) experience in America. Specifically, BIPOC communities experienced limited access to vaccines, higher mortality rates, lack of government assistance, and were targets of racially motivated attacks (Litam, 2020; Liu & Modir, 2020). America's history of systemic racism and oppression coupled with the grave complications of the COVID-19 pandemic created a traumatic loss for BIPOC communities (Fortuna et al., 2020). Additionally, it further exacerbated racism-related stressors (e.g., discrimination and microaggressions) which could lead to race-based traumatic stress and racial trauma (Carter, 2007; Comas-Díaz et al., 2019). Race-based traumatic stress refers to the emotional and psychological injury that occurs after experiencing a racist encounter (Carter, 2007) and racial trauma refers to severe stress responses to racism such as hypervigilance, avoidance, nightmares, and somatic symptoms which are similar to Post-Traumatic Stress Disorder (PTSD: Comas-Díaz et al., 2019). Race-based traumatic stress and racial trauma used interchangeably encompass the ongoing

accumulation of experiencing direct or perceived racial discrimination (Comas-Díaz et al., 2019). Though healing the wounds of racial trauma can be difficult, mental health counselors can play a pivotal role in reducing the impact of racial trauma on BIPOC communities.

Clinical supervision can play an integral part in supporting and training counselors to be best prepared to address and treat racial trauma. Pieterse (2018) discussed the importance of attending to racial trauma in supervision to foster positive outcomes for supervisees and their clients. Specifically, supervisors must remember to be reflective of their own racial identity to model racial self-awareness for their supervisees (Pieterse, 2018). Additionally, supervisors must know the context of historical (intergenerational) trauma, racial identity theories, the impact of racial trauma on BIPOC mental health, and clinical interventions for racial trauma (Pieterse, 2018). Hemmings and Evans (2018) study found that 71% of mental health counselors reported working with clients who experienced racial trauma but did not receive any formal training to address or treat racial trauma. Therefore, clinical supervision could be beneficial to best prepare supervisees to be effective and mitigate the impact of racial trauma on BIPOC communities.

"America's history of systemic racism and oppression coupled with the grave complications of the COVID-19 pandemic created a traumatic loss for BIPOC communities."

Trauma-informed and cultural responsiveness have been recognized as significant components within mental health care, further validating the need for clinical mental health counselors to expand their knowledge and competence (Moh & Sperandio, 2022). Trauma-informed care includes: 1) realizing the impact of trauma and how it affects individuals and communities, 2) recognizing the signs of trauma, 3) responding appropriately, and 4) resisting re-traumatization (SAMHSA, 2014). Trauma-responsive practices refer to helping clients focus on the anticipation of potential incidents of trauma (Morales et al., 2021). This includes helping the client armor up with resistance and healing strategies to buffer the impact of future racismrelated incidents. It is important for counselors-intraining (CITs) to be competent and confident in assessing and treating clients affected by racial trauma, but they must also achieve competence in identifying areas of professional growth and know when it is appropriate to refer clients elsewhere for treatment. For example, if the CIT is in a clinical setting not conducive for trauma counseling (e.g., college counseling center), referral could be appropriate. The lack of training in traumainformed and culturally responsive care for counselor educators and supervisors renders negative effects on counselor education programs. Therefore, counselor educators and supervisors should seek additional training and consultation to increase their awareness, knowledge, and skills about trauma-informed approaches (Moh & Sperandio, 2022).

### **Recommendations** for Counselor Educators and Supervisors

- 1. Support CITs to shift their language from "What is wrong with you?" to "What happened to you?" when working with BIPOC clients who experienced racial trauma. This externalizes the problem (i.e., racism) from the client and helps empower them to name racism as harmful (Stover et al., 2022).
- 2. Teach theories and models created by BIPOC scholars that focus on resistance and liberation. Radical Healing (Adames et al., 2022; French et al., 2020), Critical

- Consciousness (Mosley et al., 2021), and Healing Ethno and Racial Trauma (HEART) framework (Chavez-Dueñas et al., 2019). Collectively, these approaches enhance the wellness and overall well-being of BIPOC communities.
- 3. Role-play how to administer assessments with CITs to help them with conceptualization and treatment planning with clients. For example, the Race-Based Traumatic Stress Symptom Scale (RBTSSS) (Carter et al., 2013) and the UConn Racial/Ethnic Stress & Trauma Survey (UnRESTS) (Williams et al., 2018) both provide prompts for the client to share their experiences with racist-related events.
- 4. Implement anti-racist pedagogy (e.g., Critical Race Theory, Critical Consciousness, etc.) into the counselor education curriculum (Williams et al., 2021). This helps teach CITs to actively identify, analyze, and challenge attitudes, behaviors, and structures that strengthen systematic oppression.

Supervisors must take an active role to ensure positive outcomes for their supervisees' clients. Racial self-awareness, trauma-informed, and culturally responsive practices are helpful in healing racial trauma. Therefore, it is imperative for the counseling profession to create a curriculum and training that integrates a trauma-informed approach to best prepare CITs to work with BIPOC clients impacted by racial trauma.

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# **Supervision for Rural School Counselors**

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Allison Fears

School counseling students are equipped with the necessary toolkit to enter a school setting, but there are no standards outlined in CACREP that require programs to address the unique needs of urban, suburban, and rural schools. Current research has focused on urban and suburban

settings and a significant gap in the literature exists for experiences and best practices within rural schools (Grimes, 2020), leaving future school counselors and counselor educators without clear guidance on how to facilitate their role in their unique environment.

Rural schools face greater challenges such as poverty among students, lack of resources, blurred professional boundaries, physical isolation, limited funding for professional development, and decreased staffing when compared to urban or suburban schools (Grimes et al. 2013; Grimes, 2020). Within the school, rural school counselors (RSC) balance multiple roles outside of their traditional counseling role and serve as the primary mental health support for students in the area

(Crumb et al., 2021; Grimes, 2020). Living in rural areas includes diverse challenges, but it also consists of unique experiences that form a sense of community among those who live there. People, especially school counselors, in rural communities hold the potential to develop deep, meaningful relationships with each other which creates a tight-knit community that is not commonly experienced in higher populated areas (Grimes et al., 2013).

Due to limited resources and availability of trained clinical supervisors, RSCs rely on administrative supervision for feedback and support (Morrissette, 2000; Wilson et al., 2018). Administrative supervision is provided across a short period of time and focuses on evaluative performance rather than consulting and supporting the counselor's needs (Morrissette, 2000; Wilson et al., 2018). Wilson et al. (2018) conducted a study on RSC's experiences with supervision and noted that RSCs received little to no supervision due to being the only school counselor in the school, limited funding for outside clinical supervision, and lack of time. A similar study conducted by Duncan et al. (2014) found that 6% of RSCs received individual clinical supervision. Therefore, school counselors lean heavily on other staff members (i.e. social workers, school nurses, teachers, school psychologists) for support and consultation in regards to the mental

health needs of their students while subsequently balancing a substantial amount of job responsibilities (Duncan et al., 2014; Wilson et al., 2018). Another barrier to seeking clinical supervision for RSCs is permeable boundaries. RSCs encounter dual relationships due to high visibility in their environment and struggle with setting personal and professional boundaries (Grimes, 2020; Lonborg & Bowen, 2004). Without adequate supervision, RSCs are challenged in developing a strong professional identity (Grimes, 2020, Wilson et al., 2018).

"Technology can assist in increasing connections despite geographic isolation or distance."

To establish a strong professional identity, it is imperative that RSCs find opportunities to seek clinical supervision. Below are some interventions listed within the literature that address the need and seeks to eliminate or address barriers that exist for RSCs seeking supervision.

### Interdisciplinary Approach

RSCs can network within the community and create a community-asset map of mental health resources and support systems outside of the community that students can refer to help take the sole responsibility off the counselor to provide these interventions (McMahon & Mason, 2018). Community-asset mapping consists of a list of compiled resources that can be used by all stakeholders, specifically designed for students and their families (Griffin & Farris, 2010). Within this approach, RSCs will be able to network and consult with other mental health counselors in a confidential manner, and better assist the mental health needs of their students in a collaborative approach.

### **Technology/Support Groups**

Technology can assist in increasing connections despite geographic isolation or distance. RSCs can also use technology such as video conferencing via encrypted internet servers to communicate with other professional counselors confidentially for clinical supervision and consultation (Wilson et al.,

2018). Another trend presented in the literature is the utilization of peer clinical supervision (Brott et al., 2021). RSCs are limited in peer supervision if they are the only school counselor in the school or district but participating in virtual peer clinical supervision would allow for opportunities to engage in consultation, collaboration, and case conceptualization in an ethical manner (Brott et al., 2021).

### **Supervision Training**

Adequate clinical supervision can help beginning and continuing school counselors who struggle with establishing clear boundaries in a rural environment as well as provide consultation opportunities for the ethical dilemmas that arise (Wilson et al., 2018). School counselors can advocate for free online training supervision models to be incorporated for additional staff members (i.e. administration, social workers, school psychologists) so that more staff members can provide and partake in adequate supervision for RSCs (Swank & Tyson, 2012; Wilson et al., 2018).

### Conclusion

RSCs face a unique set of circumstances and challenges that can present various ethical delimans within their role, and additionally make receiving clinical supervision more difficult. Advocating for suggested interventions is the first step in seeking opportunities for supervision for RSCs, followed by extended research into best supervision practices and experience for rural school counselors. By receiving adequate clinical supervision, RSCs will be able to strengthen their professional identity and better support the needs of their students.

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### **Spring 2023 Newsletter Submission**

We are looking for submissions for consideration in our Fall 2022 issue of the SACES Newsletter. This issue will be an edition about <u>Scholarship - encourage</u>, <u>support</u>, <u>and recognize a diverse range of scholarship and research</u>

Submissions must be between 500 and 800 words (not counting references) and sent electronically as a Word document to newsletter@saces.org. Please include the author's name(s), credentials, affiliation(s), and photo(s) in .jpg, .tif or .gif format.

For questions or more information, please contact the editors at newsletter@saces.org. You can also check out previous newsletter issues available from the SACES website. Contributions are needed by **Sunday, March 5th**.

Isabel Farrell Editor SACES Newsletter

# Relational Cultural Supervision: A Developmentally Appropriate Approach for Master's Students

Jessie Yanson, LMHC, LMFT, NCC, CRC, University of Central Florida & Sabrina Butler, LMHC, CASAC; University of Central Florida



Jessie Yanson (left) & Sabrina Butler, (right)

Within the counseling profession there has been a vast amount of inquiry into the agent of

change in the therapeutic relationship. Study upon study has revealed that the greatest predictor of therapeutic change is the alliance found in the relationship between counselor and client (Ardito & Rabellino 2011; Asay & Lambert, 1999; Lambert & Barley, 2002). Similarly, research has shown that the relationship between supervisor and supervisee is a tool in which supervisees develop skill acquisition and foster psychotherapeutic effectiveness (Lambert & Arnold, 1987). Due to this, it is not surprising that supervision is one of the cornerstones of counselor preparation from master's level development to state licensure requirements (Lenz, 2014). As the profession has changed so too have the various models from which supervisors have begun to implement and offer supervision (Lenz, 2014). While traditional models of supervision offer supervision based on theories of learning and/or as extensions of their theoretical approaches, there is a lack of supervision frameworks that place the relationship at the center of supervisee growth despite research supporting its use and efficacy (Abernathy & Cook, 2011). Relational Cultural Theory (RCT) Supervision is one emerging model that places an emphasis on relationships, cultural considerations, and power dynamics. (Frey, 2013; Lenz, 2014).

As posited by Lenz (2014) RCT supervision can be broken down into two non-linear stages, essential practice, and essential processes, that can be moved through during the entirety of the supervision experience regardless of supervisee stages of development. Essential practices represent the ways in which the supervisory relationship fosters RCT skill acquisition and includes language, conceptualization, and therapeutic techniques (Lenz, 2014). Essential processes represent regular and consistent interactions with supervisees that promote relational development and include moving toward connection, authenticity, fostering mutual empathy, supported vulnerability, working with relational images, building relational resilience, and acknowledging social context during training (Lenz, 2014). The goal of RCT supervision is to model and build growth fostering relationships using vulnerability and mutuality to foster growth within supervision which as a byproduct will create growth fostering relationships in the supervisee's therapeutic spaces. Given this framework we can start to understand how RCT can be integrated into various stages of supervisee development.

As Relational Cultural Supervision is a relatively new model, it is being examined alongside a popular model of supervision, the Integrated Developmental Model (IDM) to demonstrate how RCT supervision can be utilized across all three stages of development seen in Master's level students. The Integrated Developmental Model of Supervision postulates that supervisee development can be broken into three distinct stages (1-3). Each of these stages corresponds with the counselor's developmental level (Stoltenberg, 1997). Within each of these levels, students are assessed based on their awareness (self and other), motivation, and dependency on their supervisor. Additional domains

of competency are assessed throughout development. These levels of development include but are not limited to assessment, skills/interventions, theoretical orientation and conceptualization, and professional ethics (Stoltenberg, 1997, 2005).

A summarization of all three master's student IDM stages and their theoretical RCT supervision counterparts adapted from Lenz (2014) are provided below to allow for demonstration of utilization. Of note, while this is a staged approach, RCT supervision is non-linear and can be moved through organically within all parts of supervision.

Level	Overview of IDM Stage (Stoltenberg, 1997, 2005)	Relational Cultural Theory Approach Adapted from (Lenz, 2014)
Level 1- beginner	<ul> <li>Dependence on supervisor</li> <li>Seeing first clients</li> <li>Lack of skills</li> <li>Self-focused</li> <li>Anxious feelings regarding how to conduct sessions</li> </ul>	<ul> <li>Supervisor and supervisee use of RCT terminology and concepts.</li> <li>Supervisor provides education, modeling, and practice of applying RCT concepts and techniques to client cases.</li> <li>Supervisor is receptive to the emotional journey of the supervisee and communicates effectively how this powerful experience impacts all parties involved.</li> </ul>
Level 2- intermediate	<ul> <li>Has seen several clients- advanced practicum/internship</li> </ul>	<ul> <li>Supervisors share their own developmental experiences and other moments related to</li> </ul>
	<ul> <li>Has experienced some clinical success and failure</li> <li>Developing skills</li> <li>Seeking advanced information (i.e., parallel process, therapeutic rupture)</li> <li>Seeking clinical autonomy from supervisor</li> </ul>	<ul> <li>Supervisor brings their real experience, feelings, and thoughts into the relationship.</li> <li>Supervisor will work with the supervisee to overcome relational barriers.</li> </ul>
Level 3 and 3i-advanced	<ul> <li>Postgraduate, seeking clients full time</li> <li>Primarily independent from supervisor</li> <li>Working on remaining skill deficits</li> </ul>	<ul> <li>Supervisor utilizes the supervisory context to provide opportunities to identify and examine relational images that impact the supervisee's professional efficacy.</li> <li>Meaningful engagement and a commitment to better understanding the supervisee and self.</li> </ul>

Clinical Supervisors, particularly student supervisors, can utilize the Relational Cultural supervision framework to meet the developmental needs of their supervisee's, while paying particular attention to the relationship, power dynamics, and multicultural considerations (Lenz, 2014). This

complex understanding of disconnection, marginalization, power, and privilege can lead to empowerment on the part of the supervisee as well as the clients with whom that supervisee serves. It is well known within the field of counseling that many counselors-in-training find themselves in community mental health agencies working with marginalized communities and individuals facing financial insecurity. As Relational Cultural Theory was born out of a need to recognize marginalization and oppression, the use of RCT supervision fosters empathy, understanding, and recognition of these barriers while centering relational growth (Jordan, 2001; Miller, 1976). Due to this, RCT supervision aligns with the counseling professions values of respect for human dignity, partnership, autonomy, responsible caring, personal integrity, and social justice (American Counseling Association, 2014; Eible, 2015).

Utilizing the RCT supervision framework within the supervisory relationship can create a more self-aware, empowered, and social justice-oriented counselor who is prepared to address the long-standing needs of marginalized clients and communities while attending to the largest known agent of change- the therapeutic alliance.

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# **Promoting Wellness Among Supervisees During Counseling Internship**

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Taheera Blount

When supervisees begin their field placement experiences, oftentimes, they may experience feelings of apprehension, anxiety, nervousness, and inadequacy. This can be attributed to the fact that oftentimes, students have to merge theory into practice during field

experiences, thus these feelings are warranted among supervisees. Hence, it is imperative that counselor education programs emphasize wellness within the learning curriculum and self-care strategies (Council for Accreditation of Counseling and Related Programs [CACREP], 2015). Wellness is defined as, "a way of life oriented toward optimal health and well-being, in which body, mind, and spirit are integrated by the individual to live life more fully within the human and natural community" (Myers et al., 2000, p. 252). As counselor educators, teaching field experience courses such as Practicum and Internship, it is essentially important to encourage students to practice self-care strategies that promote optimal wellness.

Meany-Walen et al., (2016) conducted a single case design that utilized a wellness focused supervision model among mental health counseling practicum students. The results of this study revealed that ongoing wellness interventions are helpful in improving mental health counseling practicum students' overall wellness (Meany-Walen et al., 2016). In another study, Lenz et al., (2014), conducted an exploratory qualitative case study that examined the perceptions of utilizing a wellness model of supervision among counseling interns.

One of the results of this study revealed that participants' experiences resulted in an increased ability to cope and to be resilient and participants shared that they were inspired to adopt a lifestyle of wellness post-graduation. As these two studies indicate, wellness is a key component in the everyday lives of counselors-in-training. Although wellness is mentioned in the 2016 Council for Accreditation of Counseling and Related Educational Program (CACREP) Standards, many counselor educators have noted a lack of specifically how to employ wellness and self-care practices for students (Branco & Patton-Scott, 2020).

Based on the seminal work of Swarbrick (2006), the Substance Abuse and Mental Health Services Administration (SAMHSA, 2016) initiated a Wellness Initiative that focuses on the 8 dimensions of wellness that include the following: (a). physical wellness, (b). intellectual wellness, (c). financial wellness, (d). environmental wellness, €. spiritual wellness, (f). social wellness, (g). occupational wellness, and (h). emotional wellness. As counselor educators, to ensure that wellness is infused within the curriculum, below are useful strategies to promote wellness among supervisees:

1. At the beginning of the semester, preferably by the second class, review and explain with supervisees, the 8 dimensions of wellness as outlined in the booklet, *Creating a Healthier Life: Step-By-Step Guide to Wellness* (SAMHSA, 2016). Within this discussion, explain to supervisees that by being able to maintain wellness as a supervisee and as a future counselor, this practice will help to mitigate counselor impairment including burnout and compassion fatigue.

- 2. Allow supervisees to take a self-care assessment to determine their current practices to self-care.
- 3. Based on the results of the self-care assessment, supervisees will complete the *Ways to Improve* worksheets within the *Creating a Healthier Life: Step-By-Step Guide to Wellness* booklet. Supervisees will identify how they plan on incorporating practices related to each dimension.
- 4. During class each week, supervisees will select a dimension of wellness, they will focus on for the week. As part of supervisees weekly journal entry, students will have to describe their efforts to incorporating self-care practices.
- 5. During class discussions, supervisees will discuss their efforts to incorporate wellness.
- 6. As part of the course assignment requirement, towards the end of the course, supervisees will submit a two-page reflection paper that highlights the benefit of being able to document weekly experiences to practicing wellness, barriers encountered, and plans to maintaining a self-care/wellness plan after the class has ended.
- 7. During the final class, discuss with students how they can promote wellness with the clients they serve.

In conclusion, to ensure that the next generation of counselors are equipped to handle the ever-growing needs of being a practicing counselor, as counselor educators, we have an ethical responsibility to ensure that wellness practices are being infused within the counseling curriculum and training programs (Branco & Patton-Scott, 2020; Burck et al., 2014). It is my hope that the aforementioned

strategies will provide insight as to how to incorporate wellness within your counseling classes.

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