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A DESCRIPTION OF GROUP SUPERVSION IN INTERNSHIPS: A NATIONAL STUDY OF PROGRAMS ACCREDITED BY CACREP

by

Robert Powell

A dissertation submitted to the Graduate College in partial fulfillment of the requirements for the degree of Doctor of Philosophy Counselor Education and Counseling Psychology Western Michigan University August 2013

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A DESCRIPTION OF GROUP SUPERVISION IN INTERNSHIPS: A NATIONAL STUDY OF PROGRAMS ACCREDITED BY CACREP

Robert Powell, Ph.D.

Western Michigan University, 2013

Counselor Education programs that are accredited by The Council for Accreditation of Counseling and Related Educational Programs (CACREP) must provide group supervision for students during their internship experience. To gain an understanding of what is currently taking place in group supervision during a student's internship experience in CACREP-accredited counselor education programs, descriptive and qualitative data were collected utilizing an online survey. To capture a profile of who is teaching group supervision as well as their qualifications and experience, the researcher gathered demographic data from 62 participants. All participants in the study had taught group supervision in a CACREP program within the last two years. The researcher found that more often than not full-time faculty was teaching group supervision. The researcher also gathered descriptive data across a number of the 2009 CACREP standards for conducting group supervision. The results indicated the following: (a) group supervision ranged from 1

to 3 hours (μ = 2) and was held weekly (83%), (b) instructors followed a scripted syllabus (62%), (c) on average there were 7.7 students in each group, (d) groups were structured by specialization (50%), and (e) ½ of group time was dedicated to planned material and ½ was dedicated to being flexible in order to meet students' immediate needs in supervision (48.7%). Although the participants were also asked to complete some open-ended questions in the study, few participants responded to these questions. This researcher sought to provide CACREP programs with a glimpse of how the standards are being applied in group supervision. Given the size of the sample, it is important for more research to be conducted to develop a strong profile of who is teaching and how group supervision practices are taking place within internships in CACREP-accredited programs nationally.

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ACKNOWLEDGMENTS

First and foremost I would like to acknowledge God, for always giving me hope!

I would like to dedicate this dissertation to my mommy and dad who shared my vision and dream and never let me give up; and to my boys, Rob, Christian and Noah who are my life.

Special acknowledgment goes out to Sonia who believed in me even when I didn't! She always encouraged me to keep working, to keep my research a top priority in my life, and made the dark nights bearable!

Judy stood by me when others wouldn't take a chance. If not for her care and guidance, I would not have my life and future back. She stood by me through all 10 years of this degree and what life had in store for me.

Billy, Vicky, Lesia, and Mel provided a shoulder to cry on, a listening ear to complain to, and a pat on the back when I needed bolstering.

Dr. Carla Adkison-Bradley for changing my life forever.

Dr. Stephen Craig and Dr. Mark Orbe for their patience, kindness, understanding, and wisdom.

Dr. Julie Meredith Davis, my editor, who taught me how to think like a scholar, navigate the academic culture, write better; she kept me on task and never, ever gave up on me!

Dr. Suzanne Hedstrom, my chair, is truly my Hero. She was willing to stand up for me against all others and she helped me overcome insurmountable obstacles both professionally and personally, even at her own great sacrifice! I know for a fact that I

Acknowledgements -- continued

never ever would have completed this journey without her. She held my hand when I was scared, had my back when I was mad, comforted me when I was grieving, and understood my plight when I thought nobody did. Dr. Suzanne taught me how to fight with kindness, to do the right thing in the face of evil, and to believe in myself. I thank God for Suzanne my Guardian Angel!

Robert Powell

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CHAPTER I

INTRODUCTION

Background of the Problem

The primary goal of educators who teach in counselor education programs is to prepare counseling professionals to effectively and ethically practice counseling in their chosen venue (e.g., agency, school, private practice settings). The process of accomplishing this task includes classroom instruction, in-house clinical training opportunities, field experiences, and supervision of clinical experiences. In short, counselor educators are charged to work toward fostering the development of sound counseling skills in trainees, which in turn prepares them to promote and foster positive change within their clients (Whiston & Coker, 2000). Broadly, counseling skills are defined as verbal and nonverbal skills that enhance a helping professional to establish good rapport with a client, while simultaneously working with clients to help client resolve life issues and concerns. Through clinical instruction, trainees are provided opportunities to integrate classroom learning and develop counseling skills. The most critical components of the clinical instruction received by students are the supervised practica and internships (Council for Accreditation of Counseling and Related Educational Programs [CACREP], 2009). Therefore, a major focus of counselor education is the professional development of clinical skills in practica and internships. Students leave the classroom environment filled with historical, theoretical, and clinical case study knowledge feeling ready but apprehensive about incorporating what they

know into practice. During the initial practicum, students receive support to engage in the counseling process with their clients. Upon successful completion of the practicum, students finish their clinical training by engaging in a internship experience. It is not until trainees successfully finish their clinical training in the internship experience, however, that they are deemed ready to enter professional practice.

As stated above, typically, the clinical aspect of the program is divided into two phases: (a) practicum, and (b) internship, with the practicum being phase one. Practicum is defined as a "supervised clinical experience intended to enable the student to develop basic counseling skills and integrate professional knowledge" (CACREP, 2009, p. 59). Practicum is the first opportunity the trainee has to apply the knowledge and skills obtained from coursework with real clients (Bradley & Fiorini, 1999). Students select practicum and internship experiences based on their areas of specialization, and these experiences serve as the initial pre-graduation professional placement opportunities (CACREP). In the second and final phase of clinical training, the internship experience is designed to allow students to further integrate their knowledge from the classroom into the therapy room. In this experience, students have the opportunity to further develop and refine their clinical skills with real clients in a structured supervised manner. In short, the practicum and internship (i.e., clinical training) experiences are excellent opportunities for the trainees to integrate classroom and clinical knowledge into chosen specialties.

During the internship experience, students are expected to engage in an oncampus group supervision experience. It is this group supervision experience that is the point of interest for this researcher. Many Counselor Education programs have a number of specialty areas housed within the department (e.g., school, clinical mental health, substance abuse). Although students seek internship positions in their area of specialty, when they engage in group supervision they are at times in supervision with colleagues who are in other specialty areas. Given this, it seems important to understand how supervisors manage the group during supervision to ensure that their students develop in their area of specialty as well as professional counselors.

Group Supervision during Internship

Group supervision in the internship experience is the final forum for supervised clinical training prior to completion of the graduate program. Group supervision is so important to the entire process of training that CACREP mandate that students from accredited programs receive group supervision in both their practicum and internship experiences. CACREP (2009), nationally recognized for setting standards for colleges and universities to follow in the preparation of professional counselors, counselor educators, and student affairs professionals, directs that 1½ hours of group supervision be conducted by Counselor Education faculty on a weekly basis throughout practicum and internship. During practicum, students are provided more structured, individual and/or triadic supervision, as well as 1½ hours of group supervision with program faculty. Although the same 1½ hour group supervision requirement is held for students engaged in their internship experience, the focus of the supervision changes. When progressing through clinical supervision, the trainee goes from a more controlled practicum environment to a less structured internship placement. Group supervision shifts from a more faculty-directed structure to a more collegial/collaborative structure, which aids in the progression of trainees from student to professional. The natural consequence

of this transition for students in their clinical training experience is that group supervision during the internship becomes the last critical forum for faculty input and oversight.

Group supervision during internship is very important in the clinical training of future counselors. However, there is a gap in the knowledge regarding how group supervision in CACREP-accredited programs is being facilitated. Specifically, little is known about the mechanics of the group supervision process and the way in which specializations and immediate needs of each student are addressed (Holloway & Johnston, 1985; Prieto, 1996). Therefore, to provide a first step towards filling this gap and informing the counselor education field, it was proposed that an analysis of current group supervision internship practices be undertaken. In analyzing the current practices, the hope was to proffer to those who are in the profession a glimpse of how CACREP expectations for group supervision in internship are being met. The researcher hoped to gain a better understanding of how group supervision is being conducted on campus in internships.

Statement of Problem

It is expected that new counselors are competent upon graduation to apply the most current knowledge and empirically validated effective change principles to the successful resolution of a range of client problems. The new professionals are entrusted with the responsibility of promoting the welfare of clients, while simultaneously being mindful of protecting the clients from harm. With this responsibility, the new professionals have a significant ethical, societal, social, and moral duty to provide the most effective treatments (Sexton, 2000). Preparing counseling professionals for such duties places a large responsibility on the facilitators of training (i.e., faculty and field

supervisors) for the profession's next change agents (i.e., counselors across specializations). In preparing competent counselors, it is important to understand how faculty facilitators are evaluating and determining competency. Although CACREP (2009) expects performance evaluations after both practicum and internship experiences, it does not specify the factors that determine skill acquisition nor does it address how to ensure counselors are held accountable for their performances (Ametrano & Stickel, 1999). How knowledge and competence benchmarking is practiced has been left to individual counselor education programs (Holloway, 1982). Clearly, without delineated standards, it is not known whether there is a benchmark of knowledge or competence across CACREP programs for graduating competent counselors. Specifically, by not knowing what is taking place in group supervision during the students' internship experiences, it is impossible to say with certainty that uniformity of expectations exists.

It is impossible to know if the needs of students are actually being met in group supervision. In fact, there is some research to support the notion that perceptions of being ill equipped or undertrained is a primary concern for counseling graduates (Gross, 2005). For example, Gaubatz and Vera (2006) surveyed faculty and students to identify their perceptions of the prevalence of professionally deficient students. Results indicated that 90% of second year master's level counseling students identified 21% of their peers as being professionally deficient. On the other hand, their faculty identified only 8.9% of students as deficient and offered remediation to as few as 5.8% of trainees. The findings of this study highlight the concern that both students and faculty acknowledge that deficient students are graduated without remediation from their programs. It has been estimated that as many as 10% of trainees in master's level programs are poorly or

marginally suited for clinical work upon completion of their internships (Gaubatz & Vera, 2002). In addition, Hays and Chang (2007) found that a portion of practicing master's level counselors who graduated from CACREP programs felt inadequately prepared to address basic issues like power and control in the therapy room. These counselors admitted to failing to discuss their reactions to clients in supervision. This presents a problem for the new professionals and the facilitators of the group supervision process that needs to be addressed. Nonetheless, CACREP does not provide clear guidelines for counselor education clinical training via group supervision to ensure that counseling students are getting adequate clinical supervision.

Expectations and the weight placed on clinical training and, more specifically, the internship experience, by the mental health professional community is high. Bernard and Goodyear (2004) reported that many students refer to their actual clinical experience in the mental health disciplines as the most important element of their training. If students are not carefully prepared throughout their internship for the clinical experiences they are encountering, there is a potential for current and future harm to both the clients the students are serving or will serve and the students themselves. The harm to clients that may result from inadequately trained counselors may include premature termination, misdiagnosis, or biased treatment (Diala, Muntaner, Walrath, Nickerson, & LaVeist, 2001; Lambert, Bergin, & Collins, 1974). Counselor who lack awareness about their level of competency may become vulnerable to their own inadequacies. Ultimately, if counseling students cause harm to clients as a result of incompetence or negligence, legal repercussions may ensue against both the student and the institution entrusted with their preparation (Bradley & Fiorini, 1999). Ideally, counselor educators should be providing

effective group supervision during internship to ensure effective clinical training and to graduate sound counseling students. As stated earlier, however, the CACREP guidelines for proffering effective group supervision are unclear.

An underlying assumption is that the group supervisor monitors and evaluates the clinical work of the students who are engaged in the internship process. The monitoring and evaluating of clinical work encompass both the counselors' development and the quality of clinical services the counselors-in-training are providing to their clients. Although counseling competencies may have been identified by individual programs, there are no national standards for the internship experience that specifically delineate the competencies necessary for the student to pass the internship and graduate. In other words, it is unclear what competencies the students must be able to illustrate prior to being granted their diplomas and, more importantly, enter the field as practicing professional counselors. Given the lack of uniform competency expectations, it seems that the supervisors of the group component of supervision (perhaps in collaboration with the field supervisors) should offer expectations for a grade and other evaluations, while simultaneously being cognizant of the trainee's level of competency and their own gate keeping responsibilities (Pitts et al., 1990). Completion of the internship experience asserts that a counselor is ready to work directly with clients. If gone undetected, the incompetence of graduating students may continue in an unsupervised setting (Woodard & Spiegel, 1999). If faced with challenging clients, these graduated students may struggle to gain knowledge and understanding to facilitate the counseling process; sadly, there is a possibility that the struggling graduates are unaware that they are incompetent, a fact that

can have far-reaching consequences to those they are attempting to serve in the community.

Although there is a plethora of literature on individual supervision, the group supervision literature often remains either conceptual or based on practitioner observations (Enyedy et al., 2003). Even though Riva and Cornish (2008) offer guidance for faculty by suggesting group supervision topics such as diagnosis, intake assessment, legal issues, clinical skills, group process, ethical and legal issues, and crisis intervention, nothing in the literature provides evaluative or remediation rubrics, self-reporting protocols, multicultural considerations, and specialized training. There appears to be the beginnings of extant group supervision literature in counseling psychology, providing works that can contribute to clinical training (e.g., Coleman, Kivilghan, & Roehlke, 2009; Holloway, 1992; Starling & Baker, 2002). However, there is a paucity of writing in counselor education about the application and process of group supervision in the counselor education field.

CACREP counseling standards have evolved to address the need for program faculty to provide group supervision during the internship experience. However, when to provide group supervision, how it should be structured, and what components should be incorporated into this aspect of the training experience remain arbitrary and elusive at best for individual programs and faculty. Models for group supervision have emerged, yet they lack validation of their content and processes (Holloway, 1982; Prieto, 1996). Examining these models empirically in future research could: (a) better inform the profession about group supervision for counselor trainees during their internship experience, and (b) be a step toward greater consistency in clinical training. In a final

attempt to monitor student competency, group supervision during the internship experience is when CACREP faculty should be ensuring that effective training and evaluation is taking place. However, little is known as to how faculty are maximizing this final opportunity to graduate competent counselors; given that there are students who are reaching this final stage of clinical training and are deficient (Hays & Chang, 2007; Gaubatz & Vera, 2006), there is a need to survey faculty about their practices of conducting group supervision.

Purpose of Study

The importance of understanding group supervision in internship in CACREP programs may be looked at from three perspectives: (a) student, (b) faculty, and (c) client. First, if counseling trainees are not clear about expectations for demonstrating competency, do not have a sense of efficacy about their competency to provide services, and do not receive feedback that addresses competency, there is a potential for the trainees to be less than competent and to harm the clients being served. Second, to address the need for developing competent and efficacious counselors (a process that should occur during the student's capstone experience of internship), it is important for faculty to understand current practices for group supervision in clinical training in order to guide supervision of students toward successful outcomes (Sexton, Whiston, Bleuer, & Walz, 1997). Third, there is an ethical obligation to ensure that current and future clients are not being harmed. In order to maximize student competencies, programs should ensure that: (a) students are being properly trained, (b) gatekeeping (including remediation and dismissal) is taking place, and (c) graduating counselors have met an acceptable standard of competence.

The question of how to best train counselors to be competent clinicians is an important one (Whiston & Coker, 2000). Group supervision, one specific component of clinical training that occurs in CACREP-accredited programs, may take different forms. In order to fulfill the needs of students and meet CACREP requirements, programs seeking accreditation agree to provide appropriate clinical instruction which includes group supervision during practicum and internship (Meyers & Smith, 1995). Practicum and internship experiences are the most salient times that faculty are required to supervise and develop the clinical skills of students. Although one of the specific CACREP requirements is that faculty utilize group supervision to facilitate and foster the development of clinically sound counselors, how the counselor education programs articulate this process varies by program. Unfortunately, at the national level, there is a paucity of knowledge about what counseling programs are requiring during the internship process. Additionally, there is an equally scant amount of knowledge about how CACREP-accredited programs are implementing group supervision.

In reviewing the ways that internship group supervision is taking place by program faculty on campuses, some trends emerge which are reflected in the literature and are articulated in the CACREP guidelines. Research and CACREP guidelines suggest that quality counseling internship programs should:

- a) focus interns on their chosen areas of specialization (e.g. school counseling, clinical mental health counseling, addictions, marriage, couple and family, and gerontology) (CACREP, 2009);
- b) assist the interns in developing the skills of self-awareness to combat transference and counter-transference (Hayes, 2001; Prieto, 1998);

- c) stay consistent by using treatment manuals in clinical training which support evidence based practices (Sexton et al., 1997);
- d) focus on developing multicultural counseling competencies through: (1) internship policies which reflect a programmatic emphasis on multiculturalism,
 (2) the infusion of multicultural awareness within the group supervision, and (3) the creation of multicultural opportunities within the internship placement (Constantine & Gloria, 1999);
- e) have an established gatekeeping mechanism whereby faculty in consultation with field supervisors will be able to identify interns showing competency deficiencies, character defects/flaws, and lacking in professional conduct, who are then either remediated or terminated from the program (Gaubatz & Vera, 2006; Pitts, Miller, Poidevant, & Meyers-Arvin, 1990);
- f) have weekly 90 minute mandatory faculty-facilitated group supervision meetings throughout the internship (CACREP, 2009); and
- g) teach competencies around five topics: (1) diagnostic skills development, (2) legal and ethical issues in counseling, (3) clinical skills, (4) group counseling, and (5) crisis intervention (Boylan, Malley, & Reilly, 2001; Hayes, 2001; Riva & Cornish, 2008).

It seems pertinent that the group supervision component during the internship experience be structured and taught based on these recommendations. To date, however, there is no research or literature to inform counselor educators about what is taking place in group supervision during internship. Hence, the primary purpose of this study was to examine what is taking place in group supervision during the internship experience in

CACREP-accredited counselor education programs, which may guide the faculty toward improving clinical training in internship toward graduating competent counselors, and meeting CACREP mandates and guidelines. This study could be an impetus or beginning step in enhancing field experience group supervision particularly with: (a) development of more effective clinical training, (b) efficacious clinicians, and (c) timely remediation for those counselors who do not meet the CACREP standards for competency. This study can assist in developing a better understanding of group supervision practices in clinical training programs.

Research Questions

To understand what is currently taking place in group supervision during the students' internship experiences within the 622 CACREP-accredited counseling programs in the United States, the following research questions were pursued:

Research Question 1

What characteristics describe supervisors of on-campus group supervision for counselors-in-training during their internship experience within CACREP-accredited programs (e.g., demographics, full-time or part-time employment status)?

Research Question 2

What emphasis does group supervision place on areas of specialization and immediacy of students' needs? To address this question a number of factors are considered: (a) whether supervision groups are organized by specialization; (b) if supervision groups are not organized by specialization, degree of focus on students' area of specialization (25%, 50%, etc.); and (c) degree of focus on planned materials and/or supervisees' immediate needs. In an attempt to understand how group supervision is being taught specifically to

meet students' individual need (i.e., specializations, different developmental levels), three subquestions were answered: (a) How do faculty ensure students' individual needs are met in group supervision? (b) How are evaluation and gatekeeping needs addressed? and (c) How are students with deficiencies handled?

Research Question 3

How is group supervision conceptualized theoretically and operationalized via methods and subject area? To address this question, a number of factors are considered: (a) theoretical underpinning of group supervision; (b) methods utilized to conduct group supervision; (c) frequency of interns' specialization areas addressed in group supervision; (d) frequency of essential counseling/clinical skills addressed in group supervision; and (e) what is considered best practices in the facilitation of group supervision.

Research Question 4

How do faculty members go about teaching group supervision? To address this question there are a number of subquestions that need to be acknowledged: (a) How does faculty conduct or engage in the group supervision process with their students? (b) What innovative and creative ways is group supervision being taught? and (c) How is technology being utilized?

As indicated earlier in this chapter of the dissertation, the researcher hopes that findings in this study will be a first step to informing the field as to what is occurring in the internship group supervision process in CACREP-accredited programs. By better informing counselor education internship supervisors, it is hoped that findings will assist in further developing how group supervision is being developed and facilitated, which in turn could assist in the development of more competent and efficacious counselors.

Definition of Terms

In this section, concepts and terms relative to the present study are defined.

Definitions of supervisor, supervisee, clinical supervision, internship, and group supervision are offered. Methods of providing group supervision are also discussed.

Clinical training is conceptualized as general instruction related to clinical skills provided either in structured classroom settings or during practice oriented experiences such as practicum and internship experiences (Whiston & Coker, 2000).

Clinical supervision is a training and evaluative process of the trainee. It extends over time and enhances the professional functioning of the participants. Supervision monitors the quality of counseling offered to clients and serves as a gatekeeping mechanism through which successful candidates enter the counseling profession (Bernard & Goodyear, 2004). It is an intervention provided by a more senior member of the profession to a more junior member or members of the same profession (Bernard & Goodyear). For the purposes of this study, methods of instruction included in the clinical internship experience will be considered the techniques that group supervisors are using to conduct their supervision group.

Counseling supervisor is defined in the Association for Counselor Education and Supervision (ACES) Ethical Guidelines for Counseling Supervisors definition of terms as "a counselor who has been designated within their university or agency to directly oversee the professional clinical work of counselors (i.e., trainees). Supervisors also may be persons who offer supervision to counselors seeking state licensure and so provide supervision outside of the administrative aegis of an applied counseling setting" (ACES, 1993). In this study, the researcher is defining counseling supervisor utilizing the ACES

definition in that the supervisor has been "designated within their university" and directly "oversees the professional clinical work" of the counselors-in-process seeking their master's degree (ACES, 1993).

Supervisee, is defined in the (ACES) Ethical Guidelines for Counseling Supervisors definition of terms, as "counselors-in-training in university programs at any level who are working with clients in applied settings as part of their university training program" (ACES, 1993).

Internship, as defined by CACREP (2009), is a post-practicum, supervised "capstone" clinical experience in which the student refines and enhances basic counseling development begun at a student level. This development integrates and authenticates professional knowledge and skills appropriate to the student's program and provides the foundation for successful postgraduate professional placement.

Group supervision is defined as a tutorial and mentoring relationship between a member of the counseling profession and more than two counseling students occurring at the same time (CACREP, 2009). Bernard and Goodyear (2004) define group supervision as a regular meeting of a group of trainees with a designated supervisor, to monitor the quality of their work. Another critical component of group supervision is to further the trainees' understanding of themselves as counselors, of the clients with whom they work, and of service delivery in general. Trainees are aided in achieving these goals by their supervisor and by the feedback from and interactions with other trainees. For the purposes of this study, group supervision will be defined as master's level counselor education and evaluation by a member of faculty in a group setting during internship.

Overview of Remaining Chapters

In Chapter II, the literature review on clinical training and group supervision will be presented. Given the limited body of empirical research on teaching group supervision, special attention is given to research driven models and methods used in individual supervision. Conceptually, these individual supervision approaches are applied to or shown how they are being used in group supervision. The necessity for ethical considerations and multicultural supervision will also be explored. This chapter concludes with an integration of these topics and expands on the necessity for effective methods of group supervision. In Chapter III, the research methodology utilized in the study will be discussed. Chapter IV will present the results of the analysis, and in Chapter V the results will be interpreted, discussion of their implications will be undertaken, and recommendations for future research will be offered.

CHAPTER II

REVIEW OF THE LITERATURE

The purpose of this chapter is to examine the literature pertaining to group supervision within internship for counselors. The literature review will begin with an extensive history of counseling, which includes a discussion on the evolution of counseling standards. After this, a discussion about group supervision will be presented, followed by a discussion of models and theories of group supervision. Methods of group supervision and the role of clinical training and outcomes will also be reviewed. The role of multiculturalism within the realm of supervision will also be explored. Finally, ethical considerations for both the student and counseling supervisor will be discussed.

Historical Context of CACREP Standards

The birth of the counseling profession began in the realm of vocational and educational guidance in the early twentieth century. Within these contexts, clinical and field studies in the counseling literature were first introduced in 1924 by the National Vocational Guidance Association. At this time in the counseling field, clinical training and field work were deemed important for preparing trained specialists in vocational guidance (Allen, 1924). Although there is some mention for the need for clinical field training in early literature, the area of training counselors by incorporating field experiences into their program of study did not truly begin to flourish until the 1950s; it was during this period of time that researchers began to put a greater emphasis on school and rehabilitation counselors receiving practicum and field work experience (e.g.,

Tooker, 1957). Tooker suggested that practicum would not only provide school counselors the opportunity to practice the application of their skills, but this type of experience would also give the supervisor tangible evidence of the counselors' potential. From a rehabilitation specialty perspective, Cantrell (1958) not only agreed with Tooker, but also suggested that one-fifth of counselor educational programs should provide opportunities for application of concepts within the realm of agencies and institutions.

It was with the passage of the National Defense Education Act (NDEA) of 1958 that the school guidance profession began to flourish and the immediate need for 2 year graduate training programs became critical (Dugan, 1960). With the development and expansion of counselor education programs under the NDEA, the counseling field began to benefit from contributions in both theory and practice. The high demand for trained counselors brought about a need for specificity in counselor education. According to McDaniels (1967), the high demand made the following possible: (a) development of improved methods; (b) professionally supervised counseling experiences, particularly in counseling practicum (ACES-ASCA, 1966) and internships (Schmidt, 1960); and (c) utilization of groups as training modalities. During this rapid growth era, the use of group counseling experiences and group supervision also began to surface in counselor education (Dreikurs & Sonstegard, 1966; Raines, 1966).

The responsibility for the care of the mentally ill was a central issue that was becoming evident in counselor training at the turn of the 20th century, for the care of the mentally ill was housed in local jurisdictions (i.e., almhouses). At this time, however, there was an assumption in the field that local care in these jurisdictions was substandard

and fostered dependency. As a result, a trend toward centralization of care for long-term mental illness (e.g., insane asylum) began, which shifted the financial burden to state and federal funding sources. The insane asylum was widely regarded as a progressive and necessary means of taking responsibility for the mentally ill. By the 1940s, however, these institutions began to lose their social and medical legitimacy, for there were allegations of inadequate care and patient abuse. Enthusiasm for community mental health facilities received momentum and the field of psychiatry began to break away from the state institutions (NMHIC, 2008). In 1946, the National Mental Health Act (NMHA) was passed. To carry out the goals of the NMHA, a cadre of specialists were needed, a group that was in short supply and heavy demand. The creation of a talent pool--the engineering of a mental health workforce-was an important feature of the act, a feature that was to forever change psychology in America. The recognition of the acute shortage of mental health professionals was in direct proportion to the recognition of mental illness in America (Baker & Benjamin, 2005). By 1959 over 1,400 clinics were in operation and the use of psychotropic drugs became widespread. With the growing trend toward community clinics during the 1960s, an attack on the legitimacy of institutional care began. The presumption was that outpatient psychiatric clinics could identify early cases of mental disorders and serve as alternatives to mental hospitals. In 1963, the Community Mental Health Act (CMHA) was passed with the purpose of providing community-based care as an alternative to institutionalization (NMHIC, 2008). With the passage of laws such as NMHA and CMHA, state mental hospitals lost funding and consequently patient care was absorbed into the local communities. Hence, there was an increased need for mental health workers and agencies (Gladding, 2004). However,

specified training for community and agency counselors, as opposed to school and rehabilitation counselors, did not become noteworthy until ten years later (Stadler & Stahl, 1979). Due to the increased demand for community mental health counselors and the sudden increase in the number of school counselors, there was an immediate need for training standards within the counseling profession.

The aforementioned issues led to a call for standards in Counselor Education, a call that began in the late 1960s and early 1970s (Boy, 1967; Forster, 1977; Stripling, 1978). As a response to the NDEA influences, the Association for Counselor Education and Supervision (ACES) initiated a plan for a uniform way of preparing counselors. In 1959, Robert Stripling, the "father of counselor preparation standards" (Haight, 2003), began to draft standards of practice that evolved into what is now known as CACREP standards. He contended that such practice should include working directly with school age children and parents, but also would allow for professional relationships with school and community agency personnel (Wittmer, 1994).

In 1964, the first set of standards was proposed for secondary school counselors (Swain, 1968). This standard, however, was not very extensive, as the required 60 hours of practicum were spread over two years (Patterson, 1967). These standards were to be practiced and evaluated over the next 3 years by ACES members in their "home" programs (Swain, 1968). In 1967, ACES adopted a set of revised standards which included an outline for a 60 hour practicum over the course of 9 months to assure optimum professional development (Patterson, 1967) and sparked a debate over the need for all encompassing standards that would include other counseling contexts (Boy, 1967). Although the 1967 standards recommended internship, it was optional. If internship was

offered, however, then systematic supervision by both secondary school and counselor education staff was expected (National Committee for Standards for the Preparation of Secondary School Counselors, 1967). Given the newness of the idea that there was a need for systematic supervision, the idea of "standardizing" the way in which supervision was conducted across programs was not even a consideration.

In the early seventies, researchers recognized extensive overlapping in the standards for the preparation of secondary school counselors, elementary counselors, and student personnel workers (Stripling, 1978). In 1971, ACES formed a Commission on Standards and Accreditation to create a comprehensive document covering all subspecialties that would serve the whole counseling profession (Forster, 1977). Based on this commission, the 1973 ACES standards were developed to encompass all previous standard statements for school settings (Stahl & Havens, 1978). In 1976-78 the ACES commission recommended an integration of its standards to apply to the community mental health counseling field (Stadler & Stahl, 1979).

The 1973 ACES Standards resulted in three separate, exclusive, stand-alone, supervised experiences: (a) pre-practicum laboratory, (b) practicum, and (c) internship (ACES 1977). Pre-practicum laboratory included laboratory experiences for both observation and participation in specific activities throughout the preparatory program. Practicum experiences encompassed a minimum of 60 clock hours of actual contact with individual clients and groups over a 9 month period. Supervision comprised a minimum of one hour of individual and one hour of group supervision per week. Internship, on the other hand, was defined as a post practicum experience that provided actual on-the-job training; this training should include all activities that a regular employee would be

expected to perform, and continue for a minimum of 300 hours. Supervision, although not defined by a specific structure, was to be provided by qualified staff in the field placement setting; moreover, it was deemed important that counselor education faculty were to provide opportunities for in-service education to field supervisors while maintaining a close cooperative relationship (ACES, 1977). Although faculty time was to be allocated for internship oversight, there was no mention of supervision for students engaged in the internship experience. In other words, during this time there was no mention of on-campus group supervision. By 1979, the American Personnel and Guidance Association (APGA), which was the forerunner of the American Counseling Association (ACA), established standards for clinical instruction, standards that varied very little from those put forth in the original 1973 ACES standards (Wittmer, 1994).

None of the previously mentioned standards were used for official accreditation decisions until 1979. The 1979 APGA standards were used by the ACES National Committee on Accreditation to accredit the first four counselor education programs. By 1981, the APGA accepted all of the ACES programs accredited thus far and CACREP was officially incorporated as an independent organization for the purpose of monitoring, revising, and implementing the Standards for Preparation in Counselor Education (Bobby & Kandor, 1994). From 1981-1985, CACREP standards reveal the exact wording for internship as the 1979 APGA standards described (CACREP, 1985). According to Vacc (1985), the newly established CACREP accreditation process created a trend toward more master's level counselor education programs establishing internship classes, while others increased clock hours to comply with the 600 hours CACREP had established as a minimum. However, the direct supervision of counseling students continued to be by the

field supervisor (CACREP, 1985). Although the first few years of CACREP brought about many suggested changes in preparation standards, the first major changes in internship supervision since the inception of standards was not introduced until the 1988 standards.

In 1988, CACREP standards distinguished between the standards that were important for individual supervision and those necessary for group supervision. However, there was still no distinction between standards for onsite and on-campus supervision (CACREP, 1988). Finally, the 1994 CACREP standards specified that while on internship the master's level counseling student is expected to be supervised by both a qualified onsite supervisor and a program faculty member (CACREP, 1994) on-campus. This distinction was among the first that specifically clarified the direct role faculty were to play in the internship training and evaluation of the novice counselors prior to graduation.

In an attempt to understand the training experience students have during internship, it is important to distinguish between supervision of practicum and supervision during internship. With practicum, students are provided more structure and supervision by an instructor of their program; students' sessions are reviewed by the instructor and the students receive individual (or triadic) supervision about their client interactions. In short, although a practicum setting may in some cases be in the field, the responsibility for training and supervision remains the program's responsibility. When launching into internship, however, the trainee goes from a more controlled environment into a less structured field placement. During the internship experience, students rely on the field supervisor's guidance to assist in their immediate supervision rather than relying

on their former faculty members. Therefore, group supervision during the students' internship experiences become the final opportunity for program faculty to directly train and evaluate the competency of their master's students prior to graduation. This makes understanding the development of group supervision in counselor training programs significant. Thus, what follows is a description of the way in which group supervision evolved in counselor training programs.

Group Supervision

For over 80 years, the need for integration of knowledge and field work has been voiced by counselor educators. As early as the 1967 ACES standards for school counselors, practicum was distinguished from internship by mandating practicum and recommending internship, although optional (ACES, 1966; Batdorf, 1973). By 1973, the ACES standards diversified to be applied to all counseling domains and were the first set of standards that specified the inclusion of 1 hour of group supervision for trainees in practicum. During the 1980s, group supervision became widely practiced and, according to Holloway and Johnson (1985), was considered by many training programs not only as an economical use of supervisory time but also as an opportunity for peer review, peer feedback, and personal insight. Most references to group supervision approaches have included three components: (a) case presentation, (b) didactic information, and (c) interpersonal dynamics of the group. Moreover, there has also been an emphasis on the importance of peer support and feedback (Bernard & Goodyear, 2008). In 1987, ACES published a handbook of counseling supervision that included a description of group supervision (Borders & Leddick, 1987); however, it was not until the 1988 CACREP standards that individual and group supervision were distinguished for internship

(CACREP, 1988). Yet, the responsibility for supervision and frequency of group supervision were not delineated until the 1994 CACREP standards. With these standards, master's level counseling students were expected to be supervised by both a qualified on-site supervisor 1 hour weekly and receive 1½ hours per week of group supervision by a program faculty member (CACREP, 1994).

CACREP (2009) defines supervision as a form of instruction in which a supervisor monitors the students' activities in internship, facilitates learning and skill development experiences, and monitors the quality of services offered to clients. "Group supervision is a tutorial and mentoring relationship between a member of the counseling profession and more than two counseling students" (CACREP, 2009, p. 59). Since group supervision standards have become mandated in clinical training by CACREP, and there are 216 institutions with CACREP-accredited programs, the use of group supervision is widespread in training professional counselors (Prieto, 1996). Torres-Rivera, Phan, Maddux, Wilbur, and Garrett (2001) assert that group supervision is the most widely used method of delivering supervision to counselors in training. Its growing use highlights the need for a better understanding of group supervision.

Beginning group supervision research for counselor educators focused on interand intrapersonal awareness (Riva & Cornish, 1995). These process groups were
prevalent during the 1960s and early 1970s but were found to have little effect except as
they related to professional identities and roles (Holloway & Johnston, 1985; Prieto,
1997). However, their historical contributions to current practices in supervision are
significant (i.e., group process variables). In short, one could argue that these early
groups were fundamental in grounding the counselor education field in understanding

what students needed in group supervision to foster development and competence as a professional. Today, the most frequent goal for group supervision is skill development and this includes integration of supervisee's skills, knowledge, and attitudes. Typically, the focuses for group supervision include a varying degree of attention to: (a) case conceptualization, (b) didactic information, (c) interpersonal process material, and (d) personal growth.

Potential Benefits of Group Supervision

The unique advantages of group supervision to counselors-in-training are expounded upon in the literature (Bernard & Goodyear, 2004; Gilligan & Crutchfield, 2001; Hawkins & Shohet, 1989; Hayes, 2001; Prieto, 1998; Riva & Cornish, 2008). Beyond the benefits for skill acquisition and personal development, professional identity (Crutchfield et al., 1997) has also been an important result of group supervision. Numerous scholars assert that some of the positive benefits for students unique to group supervision include: (a) vicarious learning, (b) varied perspectives and feedback from peers, (c) less dependency on the supervisor, and (d) exposure to a greater number of clinical cases (e.g., Bernard & Goodyear; Gilliam & Crutchfield; Hawkins & Shohet; Hayes; Prieto; Riva & Cornish). Gilliam and Crutchfield further contend that students are likely to benefit from experiencing a variety of: (a) counseling perspectives, and (b) personal and multicultural perspectives. They also contend that it is important for students to: (a) acquire the ability to give as well as receive feedback appropriately, and (b) learn about group process. By engaging in group supervision, students may learn about group dynamics, which in turn could help them in future group work (Tebb, Manning, & Klaumann, 1996). Bernard and Goodyear suggest that students can also try

out new ideas in a group setting, as this setting can provide a safer environment for students to explore issues without being under the direct focus of supervision.

Supervisors may realize benefits of group supervision by providing economies of time, money, and expertise (Hawkins & Shohet, 1989). For instance, despite the need for adequate supervision for school counselor trainees, there are limited supervision opportunities for school counselor trainees (Roberts & Borders, 1994). Group supervision is an effective means of providing clinical supervision to several school counselor trainees concurrently (Borders, 1991) as well as counselors in all specializations.

When advocating for internships in the early 1970s, Batdorf (1973) stressed the importance of internship in developing professional identity due to the incongruence that existed between the idealized professional role which emerged from the on-campus portion of a training program and the various realized roles inevitably encountered in the field. Group supervision provides support and encouragement, as well as enhanced professional identities and development; this is especially true with students who are beginning to counsel in specialty areas (Crutchfield et al., 1997). The socialization function of group supervision can also assist in both personal and professional development. Support and modeling provide unique opportunities for group members and the supervisor to impact professional identity (Bernard & Goodyear, 2004).

The benefits of group supervision have been noted in other fields as well, such as nursing, social work, and gerontology. Saarikoski and colleagues (2006) noted that within the nursing field, group supervision can help to address fears and anxieties that these professionals experience about their ability to deal with the unfamiliar emotional and psychological demands of practice. Bogo and McKnight (2006) agreed that group

supervision for social workers was an efficient use of time and a forum where social workers could learn from each other. Sharing common challenges serves to normalize reactions to stressful work environments experiences, as well as alleviate isolation through connection and support between social workers.

Potential Limitations of Group Supervision

Often the benefits of group supervision are touted, with less attention being given to the limitations that are inherent in a group supervision experience. Scholars have stated that some of the limitations of group supervision that might hinder supervisees' learning may include: (a) performance anxiety in trainees (Christensen & Kline, 2000; Hayes, 2001), (b) competing or scapegoating among each other (Bernard & Goodyear, 2008; Ellis & Douce, 1994; Hayes), (c) different roles members assume within group dynamics (Hayes), (d) fear of expressing personal insights (Borders, 1991; Hayes), (e) failure to provide constructive feedback (Hayes; Linton & Hedstrom, 2006), and (f) the dual role of evaluation and supervision (Hayes).

Enyedy and colleagues (2003) used empirical means to classify the phenomena that hinder supervisee learning in group supervision. Between-member problems such as personality conflicts and differing developmental levels can be a source of negative group supervision experiences (Enyedy et al.; Linton & Hedstrom, 2006). Although diversity can lend a rich experience for group members, the composition of the internship group may foster negative group supervision experiences.

Student characteristics that may hinder group supervision include students' anxiety, other perceived negative effects, and sexual attraction (Ellis & Douce, 1994; Enyedy et al., 2003). Anxiety is a necessary condition for individual learning and the

developmental process of group supervision; however, student anxiety can undermine the development of effective group supervision when students are unwilling or afraid to share (Christensen & Kline, 2001). Bernard and Goodyear (2008) address the structure and process of group supervision prohibiting supervisees' abilities to get their needs met. For instance, Bernhard and Goodyear argue that if groups are heterogeneous with a mix of specializations, the supervisees may not be able to address unique phenomenon to their specialty. In addition, if the group members vary in skill level, the more skilled members may not get what they need (Bernhard & Goodyear). As Aronson (1999) pointed out, though, it is the group supervisor's responsibility to ensure that all supervisees perceive that they are getting what they need from the group process; if needs are not met, the supervisees' feelings and reaction in group supervision can inhibit student disclosure (e.g., embarrassment, anxiety, and even shame) (Linton & Hedstrom, 2006; Tebb, Manning, & Klaumann, 1996) which in turn may diminish opportunities for learning. Fleming and colleagues (2010) state that the degree of safety a student feels in group supervision can encourage open and supportive behaviors.

Although there has been discussion of benefits, issues, and recommendations in the psychology and counselor education literature, it remains either conceptual or based on practitioner observation because empirical evidence does not exist (Enyedy et al., 2003; Prieto, 1996). Existing literature for group supervision is often conceptualized from an individual supervision lens, with an integration of what has been learned from groups and group dynamics.

Theory and Models of Group Supervision

Group supervision is becoming a frequent form of educating and training those preparing for the counseling field (Prieto, 1996; Riva & Cornish, 2008; Stoltenberg, McNeil, & Delworth, 1998). Several models (e.g., structural, developmental, systemic peer group, case presentation) and theories (e.g., contextual, constructivist, psychoanalytic, humanistic, interpersonal process) of group supervision are present in the literature. Wilbur and colleagues (1994) identified some common modalities of supervision groups: (a) the task process, which may be a combination of didactic and case conceptualization material; (b) the psychoprocess, which seems to parallel the intrapsychic growth expected in the interpersonal group; and (c) the socioprocess modality, which parallels the interpersonal relationship growth expected in the interpersonal process group. From Prieto's perspective, however, group supervision has historically been conceptualized and implemented from an interpersonal process or therapy based approach; this approach, however, was found to be ineffective (Prieto, 1996). Although certainly relevant to the counseling field, therapy-based approaches to group supervision failed to attend to the beginning counselors' levels of competency or efficacy (Prieto).

Approaches that attend more readily to the issue of the beginning counselors' levels of competency and efficacy include: (a) the Constructivist Theory (Fleming, Glass, Fujisaki, & Toner, 2010), (b) Developmental Supervision (Stoltenberg, McNeil, & Delworth, 1998), and (c) Systemic Peer Group Supervision (Borders, 1991). Hence, what follows is a discussion of the theoretical lens (i.e., Constructivist) and two models (i.e.,

Developmental, Systemic) that seem most relevant to gaining a basis for the research questions asked in the study.

Constructivist Theory

Nelson and Neufeldt (1998) advocated for a constructivist approach to counselor education, in which meaning is determined through a social context. In this view, supervisors become participants along with the learners in the process of constructing meaning in a given situation (Granello, 2000). The physical and social context within which the learning occurs is an integral part of the learning activity (Sexton et al., 1997). Granello (2000) goes on to argue that contextual theorists tout the most effective way to transfer learning is to actively participate in the new situation, making internships ideal learning experiences in that students are in a setting where they are most likely to practice.

Constructivist interpretation provided the foundation for a grounded theory model for group supervision. Fleming and colleagues (2010) utilized grounded theory to develop a model of group supervision process which highlights the fluid, dynamic nature of supervision and the impact that safety has on group functioning and student learning. Factors found to promote safety are: (a) group cohesion, (b) fluid leadership, (c) ongoing discussion of group process, (d) openness to supervision, and (e) expression of vulnerability. On the other hand, factors found to threaten safety are: (a) unresolved conflicts, both internal and external, (b) emotional reactivity of supervisees, and (c) individual experiences. One important finding in the Fleming and colleagues study was that individuals could experience the same group in different ways, based on their abilities to manage anxiety and develop strong supportive relationships with peers. In

conclusion, the researchers recommended that group supervisors be mindful of the need for supervisees to have individual engagement, emotional support, and an opportunity to reflect on the field experience within the group supervision environment. For Fleming and colleagues, these factors are important considerations to consider throughout the group supervision process.

Activities that foster the learning environment described as optimal by Fleming and colleagues (2010) include observation of therapy sessions, case presentation, and didactic situations. The way in which these activities are carried out is often about the level of safety the beginning counselors are experiencing in the group, a level of safety that Fleming and colleagues would assert is fostered and developed by the group supervisor and the members of the group. Certain group and individual factors could either threaten or enhance learning outcomes depending on the way safety is managed.

Developmental Model

During the past three decades, models of counselor development have been a prominent feature of the supervision literature (e.g., Bernhard & Goodyear, 2004; Stoltenberg, et al., 1998). For instance, developmental models of supervision began to surface in the 1950s but interest exploded in the 1980s (Bernard & Goodyear). According to Stoltenberg, counselors develop in stages of expertise and capacity for assuming responsibility within a particular context. The basic tenants of developmental models of supervision are that students continue to grow at their own pace with differing needs and styles of learning. The major objective during developmental supervision is to discover personal needs and focus on whatever it takes to maximize students' strengths and minimize liabilities (Russell-Chapin & Ivey, 2004).

Hayes (1990) instructs group supervisors to take into account the multiple realities to be seen by looking through a variety of developmental lenses with their supervisees. The skill level of individual group members and the progression of relevant professional concerns are important considerations in group supervision. The developmental dynamics of the group, the cognitive complexity of the supervisee, and the interaction of all these elements with one another must also be taken into account. Hayes encourages group supervisors to consider supervision occurring in three domains, each of which consists of different developmental levels. At any particular moment, the supervisors must consider the level of cognitive complexity of the supervisees, the developmental level of the group, the level of training of the group members, and the interactive effects of these variables with one another.

Haber and colleagues (2009) suggested that the practice of supervision can inclusively address theory, application of techniques, personal issues, and intuitive decisions. These dimensions have been referred to as the Head (theory), Hands (techniques), Heart (use of self), and Nose (intuition). The functions of head, hands, heart, and nose provide a framework for considering the developmental tasks of the intern.

Systemic Peer Group Supervision

Borders (1991) developed the Systemic Peer Group Supervision (SPGS) model to address unproductive and problematic peer group supervision approaches. According to Linton and Deuschle (in press), the SPGS model offers a structure to address the following goals: (a) to involve all group members in the supervision process; (b) to help members give objective feedback; (c) to develop cognitive counseling skills; (d) to adapt

to the skill level of counselors; (e) to provide a framework for supervising counseling sessions; (f) to teach approaches for self-monitoring; and (g) to provide a systemic procedure that counselors at all levels can employ. With a structured peer group model, "structured" denotes that there is a group supervisor facilitating and that peer feedback is key (Borders; Startling & Baker, 2000). Research seems to support the presence of a facilitative (vs. directive) role for a group supervisor who sets appropriate structure, helps create a safe and trusting environment, encourages peer involvement, and helps generalize learning and its application (Christensen & Kline, 2001; Startling & Baker, 2000).

Borders (1991) outlines six steps in a SPGS session that supervisors guide students through. In step 1, supervisees ask questions to the group for feedback about their performance in a video or audio tape counseling session. In step 2, group members are assigned tasks and roles for responding to the presenter's questions. With step 3 the presenters show their videos, and in step 4 group members present feedback from their particular task or role. Then in step 5, the supervisor facilitates a feedback conversation. Finally, in step 6, the supervisor summarizes feedback received and the presenter's evaluation of the feedback. With a systemic structured approach to case presentations and group member feedback, productivity can be enhanced.

Methods of Group Supervision

Ultimately, group supervision will be ineffective if methods are not meeting the students' needs, are used poorly, and/or are not accomplishing the desired outcome (Bernard & Goodyear, 2008). Some of the more commonly used group supervision methods are described in the following sections.

Audio and Video Taping

ACA (2005) ethical standards advises supervisors of the ethical importance of reviewing actual work samples via audio/video tapes along with case notes as a regular part of ongoing supervision. Permission to utilize tapes for training purposes should be detailed to clients before they are used in the training process according to ACA (2005) informed consent guidelines.

Interpersonal Process Recall

Kagan and Kagan (1997) observed that if individuals are video recorded while they are relating to one another and are then shown the recording immediately after the interaction, they are able to recall thoughts and feelings with considerable detail and depth. If a remote controlled stop-start switch is given to the individuals so that they can stop and start the playback at will, they generally verbalize a wealth of understanding about their underlying motives, thoughts, and feelings during the interpersonal transaction. Kagan and Kagan also found that more information about underlying feelings could be elicited if the persons viewed the videotape with the help of a supervisor or someone specifically trained in encouraging the viewer to verbalize and elaborate on that which is recalled during the viewing. While using this method during group supervision, students may elicit feedback from varied perspectives.

Peer Feedback and Support

Although there are models for peer group supervision (e.g., Chaiklin & Munson, 1983; Lewis et al., 1988), the use of peer feedback can be one of many interventions utilized in all types of group supervision. A safe environment for giving and accepting peer feedback can result in advantages and disadvantages for the counselor-in-training.

One such advantage may be to help counselors remain reflective about their work and options beyond their own framework. Another advantage is receiving support from peers who often have similar experiences and feelings while interning in the field. One disadvantage may be an inability to integrate feedback due to interpersonal dynamics taking place within the group (Fleming et al., 2010).

Role Plays

Students indicated that role plays were critical because of the affective impact of being both the counselor and the client during practice sessions (Furr & Carroll, 2003).

Role plays may also allow for practice specifically unique to specialization situations.

Case Presentations

Case presentation guidelines are often developed to assist students in structuring their information to present to their group for feedback. Bernard and Goodyear (2008) stressed the importance of developing ground rules concerning case presentations if the group is to serve any consistent purpose. Ground rules such as openness and respect can be established if supervisors are clear about their expectations regarding confidentiality, individual responsibilities of each member, and level of participation.

Wilbur and colleagues (1994) devised a structure that both assists supervisees in identifying personal issues and develops a classroom framework for case presentations to occur. The steps for a presentation in a structured group supervision model include: (a) a plea for help, (b) question period, (c) feedback or consultation, (d) a time for reflection on feedback, (e) supervisee responses, and (f) further discussion.

Parallel Process

As a psychoanalytic concept, parallel process suggests that two relational units can have similar (parallel) rules, roles, and operating procedures. The relational atmosphere in the supervisory relationship similarly influences the tenor in the therapeutic relationship with the supervisee and his or her client. A "top-down" influential process would be when a supervisor-supervisee relationship fosters the same dynamics with his or her client (Haber et al., 2009). Williams (1995) also suggested that parallel processes could be influenced by a "bottom-up" process, where the client may create a dynamic with the counselor who then recreates the same dynamic with the supervisor.

Live Observation

ACES (1993) advocates that supervisors review supervisees practice with clients via live observation (Standard 2.06). Montalvo (1973) defined live supervision as the process by which someone guides therapists while they work. The person supervising watches the session, usually behind a one-way mirror, and intervenes to guide the therapists' behavior at the moment the action is happening. Jordan (1999) declares that live supervision is one of the most impactful training tools in that it provides the most "direct and immediate guidance and intervention" (p. 86). Stoltenberg, McNeil, and Delworth (1998) suggest that the "hands-on" approach of live supervision effectively supports the combination of various levels of competency in novice clinicians.

Reflecting Teams

Reflecting teams are an extension of previous work on the development of more effective models of group supervision. While researching Norway's model of interactive

supervision, Tom Andersen (1991) highlighted the unique approach of reflecting teams to live supervision. This format challenged many of the methods used in earlier perspectives and approaches to counselor supervision. In this process, a group of counselors observe (usually behind a one-way mirror) a counseling session. During a break, the counselorclient system changes places with them. The members of the reflecting team discuss their perceptions and ideas about the session while the therapist and client(s) watch. According to Andersen and Jensen (2007), asking clients to comment on the opinions of the professionals is a nontraditional approach. Following this, the therapist resumes the therapy session, discussing what they have heard. Prest, Darden, and Keller (1990) declare that a reflecting team can contribute valuable assistance in alleviating "stuckness" in the client(s), the client(s)-counselor, and client(s)-counselor-supervision systems. The model also provides the counselor with useful information about the "use of self" process. In the process, the traditionally hierarchical supervisory process is intentionally suspended so that the supervisor temporarily takes a lateral position. It might be said that the supervisory process becomes a "non-hierarchical hierarchy."

Clinical Training and Outcomes/Competencies

When studying field supervision as a medium for clinical training, the question arises as to how to best train counselors to be competent clinicians. Freeman and McHenry's (1994) study of counselor educators teaching in CACREP-accredited master's-only programs reported that teaching clinical skills is their highest goal for supervision. Sexton (2000) noted that after counselors have been trained, they are assumed competent to apply the most current knowledge and most advanced principles toward the successful resolution of a range of client problems. Therefore, counselor training programs are

expected to graduate counseling students with competencies of empirically effective counseling strategies for specific populations. To ensure these competencies, the methods used in training counselors must be empirically driven as well.

Russell-Chapin and Ivey (2004) declared that it is the ethical and professional responsibility of counselors to understand what makes counseling effective. Internship should be an opportunity for interns to apply their clinical training with empirically based interventions and develop effective therapeutic relationships with real clients. Field supervision can provide an opportunity to support and teach interns practical approaches to evidence-based counseling. Although counselor skill development usually begins in early practice courses, skill acquisition becomes more complex during practicum and internship. According to Orlinzky and colleagues (1994), more complex skills such as experiential confrontation and interpretation have clear empirical support. Lambert and Ogles (1997) stated that modeling had more influence than rehearsal and feedback. Thus, group supervision provides an excellent opportunity to address client and field experiences and model alternative empirically driven skills.

Pertaining to counseling theory, the use of treatment manuals in clinical training (Sexton et al., 1997) and group supervision could provide for more effective counseling interventions and treatment provided to clients in outcome studies. This is important to the group supervision process because it assures that students are at least informed about these empirically driven modalities, treatment strategies, and interventions; this knowledge in turn aids the student in gaining competency and efficacy as a clinician. In short, treatment manuals may enhance novice counselors' skills by training them to use different treatment approaches (Beutler, Machado, & Neufeldt, 1994).

Multicultural Supervision

Multicultural counseling competence refers to counselors' attitudes/beliefs, knowledge, and skills in working with individuals from various cultural groups (Sue, Arredondo, & McDavis, 1992). Attention to multicultural issues in counselor education programs has been necessitated by the growing diverse population (U.S. Census Bureau, 2010), especially in the school systems in large urban cities across the United States (Constantine et al., 2001). In fact, both CACREP (2009) and the ACA's Code of Ethics (2005) have mandated that supervisees examine cultural issues that might affect their counseling and/or supervision process.

The overarching purpose of providing multicultural supervision to counselors-intraining is to foster the development of the counselor's cultural sensitivity, which is achieved by enhancing the counselor's cultural awareness and competence (Christiansen et al., 2011). Multicultural supervision is not only about working with persons of visible racial or ethnic groups; in addition, it is a constant and dynamic force in all supervisory interaction. Bernard and Goodyear (2008) cautioned that if multicultural supervision is not defined broadly, counselor educators will forget to check out their assumptions often and consequently they will be awkward, if not incompetent, when cultural differences are significant. Borders (2006) states that the critical role of the supervisory relationship is to create a safe, trusting, challenging, and open environment for supervisees to openly dialogue about difficulties in clinical work. One of the challenging dialogues emphasized is the introduction of cultural variables into the supervisory experience. Borders reminds counselor educators about the supervisor's need to assess and manage self-perceptions,

particularly in terms of how often multicultural discussions are initiated in group supervision.

Of primary concern for counselor educators is the counselors' unawareness of multicultural competency deficiencies. Sue and Sue (2003) noted that the unexamined cultural assumptions of White counselors might cause them to view the behaviors and values of members of other cultural groups as deviant, rather than simply different from their own. Such perspectives could potentially lead counselors to over-diagnose the client's struggles as pathological, rather than understanding that the client's behaviors are in fact normative for other cultural groups (Sue & Sue). Noteworthy to the proffering of multiculturally competent group supervision is that when counselors are aware of their multicultural deficiencies, their perceptions have led to a feeling of unpreparedness when working with those of other of different ethnicities (Alderson, 2004; Heppner & O'Brien, 1994). For example, Hays, Dean, and Chang (2007) surveyed practicing counselors who held at least a master's degree. These participants reported a sense of inadequate preparedness for addressing power issues that may be a dynamic when counseling clients of an ethnicity different than their own. Interns reported fewer hours devoted to training in the area of multicultural competencies and therapeutic issues when compared with their training directors (Magyar-Moe et al., 2005). This discrepancy may lead to counselors feeling as though they have not had ample training in multicultural issues and/or potent enough training to effectively address differing cultures with clients. Cultural misunderstandings or communication problems between clients and clinicians may prevent minorities from using services and receiving appropriate care (U.S. Department of Health and Human Services, 2001). The relevancy for multicultural

concepts infused throughout group supervision continues to be predominant throughout the literature.

For school counselor trainees, supervision groups that address multicultural issues may complement the contemporary focus on multicultural issues in many school counselor programs (Constantine, 2001; Hobson & Kanitz, 1996). Over the past few decades, multicultural counseling competence has represented an important goal for many school counselor education programs in order to prepare trainees to work effectively with diverse cultural populations (Holcomb-McCoy, 2001). Although previous research has found that school counselors and school counselor trainees with higher levels of formal multicultural counseling education (e.g., coursework and workshops) reported greater amounts of self-perceived multicultural counseling competence (Constantine, 2001), little research has examined the role of multicultural supervision in increasing school counselor trainees' self-reported multicultural counseling competence. There is also an absence of research that has explored the impact of receiving multicultural counseling supervision on aspects of counselor trainees' demonstrated multicultural counseling competence.

A common approach to teaching group supervision is the use of case conceptualization. Gainor and Constantine (2002) suggested that one aspect of demonstrated multicultural counseling competence is the ability to identify and integrate cultural factors into conceptualizations of the etiology and treatment of clients' presenting concerns (i.e., multicultural case conceptualization ability). These conceptualizations may become increasingly complex as counselor trainees make associations between and among hypothesized etiologies of presenting concerns and, accordingly, integrate these

data into treatment plans (Constantine & Gushue, 2003). Conceptualizing clients from a multicultural perspective indicates that counselor trainees are aware of and can integrate information about various cultural factors into clients' presenting issues and, subsequently, identify an appropriate treatment plan for working with clients based on this information (Constantine & Ladany, 2000). Hence, receiving multicultural supervision presumably would affect these trainees' multicultural case conceptualization ability.

Allison and colleagues (1996) found that the only factors that predicted counselors' self-perception of multicultural competency when in practicum and internship experiences were: (a) a cross-cultural caseload (e.g., socioeconomic status, sexual orientation) and (b) an ethnically diverse caseload, particularly when the ethnicity is different than the counselor's. Therefore, it seems that clinical training should include more cross-cultural counseling experiences, rather than attempting to match the client and counselor identity (Whiston & Coker, 2000). Although the advantages of receiving individual multicultural supervision have been extensively documented (e.g., Constantine, 1997; Duan & Roehlke, 2001; Ladnay, Inman, Constantine, & Hofheinz, 1997), there also may be several advantages to using group supervision formats to address multicultural issues with counselor trainees. For example, supervision groups can provide support and encouragement to these trainees and may enhance their clinical skills and promote their personal and professional development (Wilbur, Roberts-Wilbur, Hart, Morris, & Betz, 1994). Moreover, supervision group members may serve as resources to each other by serving as sounding boards, challenging repetitive therapeutic strategies, and supplying meaningful interpretations of therapeutic processes (Agnew et al., 2000).

Students' perceived inability to integrate all of the knowledge gained in clinical and multicultural issues (Heppner & O'Brien, 1994) may lead to ethical issues and dilemmas as well.

Ethical Considerations of Group Supervision

Both individual supervision and group supervision are based on the premise that students are not skilled enough to handle a wide range of clients autonomously (Bernard & Goodyear, 2008). Ethically, students should be fully informed of the evaluative process while participating in internship group supervision (ACES, 1993; Ladany et al., 1999). To ensure ethical supervisory responsibilities for evaluation of competencies, it is important that the counselor educator prepare trainees by providing full disclosure of expectations, methods and frequency of evaluation, and the field instructor's role in the evaluation process, both verbally and in writing (Ladany et al.). The ethics of supervision include the group supervisor's responsibility to ensure that the students are learning the helping process and they are graduating competent counselors. Supervisors should not endorse a supervisee for completion of an academic training program if the supervisee is impaired in any way that would interfere with the performance of counseling duties. The presence of any such impairment should begin a process of feedback and remediation wherever possible (ACES, 1993).

Student Perceptions of Preparedness

Throughout counselor education history, counseling students' expectations for clinical training have remained consistent. The significant relevance of practicum and field work to students from the NDEA institutions was highlighted 10 years after its passage in 1958. Delaney and Moore (1966) studied students' expectations of practicum

supervisors where they verified that students expected to be trained in counseling and counseling techniques in their master's programs. In 1978, Walton found that one of students' most positive influences in their graduate work was their practicum. However, if students are not prepared for internship and their postgraduate counseling experiences, both the clients and students could be harmed. The harm to clients may include premature treatment termination, misdiagnosis, or biased treatment (Diala et al., 2001).

Insufficiently educated counselors are vulnerable to their own inadequacies, as they could misperceive their competency levels and overestimate their effectiveness and efficacy.

The perception of being ill equipped or undertrained has been a concern for counselors once graduated and practicing.

Students often do not discuss problematic situations they experience in their field sites. Although the counselor education field lacks research in this area, parallels can be drawn from the psychology literature. For example, Gross (2005) studied doctoral clinical psychology programs in the United States and Canada. In this study, students stated that their unwillingness to discuss concerns resulted from: (a) fear of negative reprisal, (b) fear of creating a difficult situation at their site, and (c) a keen awareness of faculty members holding dual or multiple roles that would make reporting problems difficult for the student. Clearly, this lack of discussion is a problem because students who do not share challenges miss gaining new perspectives and developing a more nuanced understanding of how and why their concerns impact them. Not only is an accurate self-perception of competency levels critical to ethical supervisory experiences, but an accurate perception of the necessity for supervision is critical as well.

Borders and Brown (2005) caution that master's students do not yet have the experience and professional maturity needed to understand the complex levels and nuances of counseling supervision. In fact, at graduation they may be at a developmental level where they question the value of supervision for themselves (Borders & Brown). For ethical supervisory concerns, effective group supervision experiences should ensure not only students' accurate perceptions of their competencies but also the necessity for ongoing postgraduate supervision.

Counselor Competencies

Group supervision in internship may be the last opportunity for faculty to directly teach and supervise the counseling student. While knowledge and skill development is an on-going process that occurs throughout students' coursework, there is a tacit assumption that students are ready for internship at the end of their coursework. It is important to consider what coursework is required prior to the start of the internship experience.

Crether (2008) suggested that it would be best if all coursework is required prior to beginning internship or students should have successfully completed at least all core specialty courses, skills and techniques, and practicum. There is an urgent need to include mandatory exposure of interns to all areas, cognates, and skills required for all the current counselor functions (Bradley & Fiorini, 1999; Lazovsky & Shimoni, 2007) and continue to integrate learned knowledge and skills throughout group supervision during internship.

Current scholars indicate that in addition to academic ability, counselor educators must also assess students' personal characteristics and clinical skills (e.g., Lumadue & Duffey, 1999). With the assumption that the student is ready for internship, there is also an expectation of counseling competencies and personal qualities to perform counseling

in the field. There is, however, the real possibility of supervisory conflict, as a group supervisor has the dual role of supervisor and evaluator (ACA, 2005; Border et al., 2002). As a result, it is important that group supervisors monitor personal qualities and competency levels closely.

While gatekeeping is an on-going process that occurs at admission and through evaluation of student performance in class and in the field, there is also an assumption that the ultimate locus of gatekeeping is in practicum and internship (Miller & Koerin, 2001). Group supervision may serve as the last opportunity for gatekeeping and regulating who is legitimized to enter the world of counseling (Neufeld, 2008). Effective group supervisors, to some degree, control the access of impaired, unethical, or incompetent counselors to clients, thereby protecting clients who are likely to be at a highly vulnerable stage of their lives (Bhat, 2005; Huprich & Rudd, 2004). ACES (1993) ethical guidelines warn that supervisors should not endorse a supervisee for certification, licensure, or graduation if the supervisor believes the supervisee is impaired in any way that would interfere with the performance of counseling duties. As evidenced by the ACES Ethical Guidelines for Counselor Educators and Supervisors (2005), the ACA Code of Ethics (2005), and literature that addresses the necessity to identify deficient counseling students, the need to maintain and oversee the formalized gatekeeping procedures is well supported (Lumadue & Duffey, 2001). Equally important, however, is the obvious need for more attention to the gateslipping phenomenon occurring in counselor education programs (Gaubatz & Vera, 2006). For example, Gaubatz and Vera (2002) elicited counselor educators' views on the rates at which marginal students are graduated without remediation. Although faculty reported that their programs intervened

with 55% of their students with deficiencies, it was estimated that there were up to 70 students with deficiencies currently enrolled in CACREP master's programs and 263 students with deficiencies currently enrolled in non-CACREP programs yearly. Not only are there ethical implications for supervisors to provide gatekeeping, but the liabilities to the group supervisor should also be taken into consideration (Gaubatz & Vera, 2002).

Effective gatekeeping will not only protect clients from harm but can also minimize liability to both the new counselors and the university that graduates them. Potential liability to the university was pointed out by Frame and Stevens-Smith (1995), with a case against Louisiana Tech University that was initially filed against the counselor and the clinic for which the counselor worked. The case further expanded when the institution that trained the counselor was sued. The rationale for this case was that a university has an obligation to the public to ensure that a person graduating with a degree is competent in the area in which the degree is bestowed. Therefore, internship group supervisors should be cognizant of skill levels, the need for remediation, and their ethical responsibilities. Finally, if a group supervisor recognizes the need for a supervisee's remediation, a clearly articulated plan of action regarding concerns should be developed in the form of a contract with the student, the group supervisor, and the field site supervisor (Kaslow et al., 2007). Trolley (2008) suggested that taking a proactive remedial stance, such as encouraging outside support and counseling, is fundamental to effective remedial strategies.

While teaching group supervision, the instructor should continue to form a clear understanding of the students' capabilities and skill levels. This can prove challenging when students begin to rely on the field supervisor's guidance to assist in their immediate

supervision. This may create a dynamic that does not allow or provide for practical immediate intervention guidance or timely evaluation and feedback. According to Miller and Koerin (2001), necessary and helpful feedback from field site supervisors may not always take place due to: (a) developing alliances, (b) attending to the students' maturational needs, or (c) hesitancy of being judgmental. Ultimately, it is the responsibility of the counselor educator to ensure that interns are receiving adequate supervision and needed remedial action at their field sites (Ellison, 2008). Pitts and colleagues (1990) stressed the importance of the internship coordinator informing all parties of the problem(s) that may be involved in coordinating the remedial action, and Neufelt (2008) stressed that the responsibility for timely, clear, and documented feedback is the responsibility of the university supervisor.

Through the history of counseling and counselor education, the recognition of best practices for clinical training has evolved into what is now known as CACREP standards. The recognition for classroom integration and practical application brought about the development of internship. Although group supervision came into practice only in the 1980s, it is now recognized as an effective and efficient means for clinical training. The 1988 CACREP standards began to mandate group supervision in internship, yet there are no guidelines for how to do so. It is legally and ethically imperative that counselor educators utilize effective approaches for clinical training and graduate competent counselors. To date, there has not been an understanding of how CACREP-accredited counselor education programs are meeting the group supervision in internship mandate. With research providing a snapshot of what is taking place in group supervision, it is

hoped that counselor educators will gain additional knowledge for structuring and conducting internship supervision.

CHAPTER III

METHODOLOGY

As indicated in Chapter I, the researcher's aim was to gain an understanding of what was taking place in CACREP-accredited counseling programs during the internship group supervision experience. Descriptive and qualitative data were collected to develop a profile of who was teaching group supervision, how group supervision was being taught, and how individual needs were being met. In an attempt to develop a "snapshot" of what was currently taking place in group supervision during internship in CACREP-accredited counselor education programs, the researcher gathered demographic data of faculty teaching group supervision and acquired data as to how group supervision was being taught with regard to choice in content, counseling skills, and methods being utilized. In addition, focus was placed on how individual student needs were being met.

In this chapter, the researcher outlines the mixed methodology that was utilized in the study. Given that this study was a mixed design study, the researcher begins with a discussion about the research design. Incorporated in this section is a broad overview of the differences between quantitative and qualitative methodologies, a discussion about the limitations of utilizing each of the chosen methods, and the specifics about the actual quantitative and qualitative methods utilized in the study. The next section of this chapter outlines how the researcher attends to his potential biases. Then there is a description of the process used to recruit participants for the study. Then there is a brief discussion about the informed consent process. Next, the researcher outlines the measures utilized in the study and explains the research procedure. The next section specifically addresses the

areas of interest studied in the dissertation. Following this section, there is a section that addresses the risks, benefits, and protection for the participants of the study. This section is followed by a section that addressed the foreseeable limitations of the research design. The next section is a brief discussion about the data analysis process for both the quantitative and qualitative data gathered in the study. The researcher concludes the chapter with a brief summary of the chapter.

Research Design

This was an exploratory online survey study with a mixed method design. The study was both descriptive and qualitative in nature. The fundamental philosophical difference between quantitative and qualitative research leads to two very different and yet complementary research design paradigms. For instance, quantitative research uses mathematics (i.e., statistical analysis) to determine results, while qualitative research depends on verbal or written communications to determine findings. Another difference is that while quantitative research is deductive (i.e., theory drives construction of hypotheses to be tested), qualitative research is inductive (i.e., data drives construction of theory). The goal in quantitative research is the discovery of truth in order to explain and predict human behavior. The goal of qualitative research is to describe a phenomenon (Heppner et al., 1999).

Quantitative and qualitative paradigms each has its usefulness, depending on the phenomenon under investigation and the researcher's particular area of inquiry. In short, unlike quantitative methodologies that rely on variance questions to produce empirical results, qualitative research employs process questions. Process questions are those which: (a) explore the meaning of activities and events to the participants and their lives,

(b) query the impact social and physical settings have on the activities and events in people's lives, or (c) question the process that transpires between the activities and events in the lives of participants and the resulting outcomes (Maxwell, 2005). In short, qualitative researchers suspend judgment on an issue, preferring to analyze the data as presented from the perceptions of the participants (Silverman, 2005).

Overview of Qualitative Methodology

Over the past 20 years, researchers have placed a greater emphasis on developing alternatives to purely quantitative research modalities; the impetus for this desire is the hope that there are modalities of research that can more completely capture the complexity of human behavior and experience (Heppner, Kivlighan, & Wampold, 1999; Morrow, 2005; Morrow & Smith, 2000; Morse, 1994). Qualitative methodologies are one of the paradigms that researchers have focused on in this endeavor (Bogdan & Biklen, 2002; Hoshmand, 1989; Polkinghorne, 1994). It seems logical to explain the qualitative research design by comparing it to its well known counterpart, quantitative research design. After making a distinction between the two paradigms, qualitative research will be defined explicitly. Then, because it is important to acknowledge limitations in methods used in research, a brief discussion about the limitations of utilizing a qualitative methodology will follow. Finally, the researcher will offer specific support for using content analysis to capture the overarching themes that appear in the qualitative data.

Defining qualitative research. Qualitative research "involves understanding the complexity of people's lives by examining individual perspectives in context" (Heppner et al., 1999, p. 235). It is, on an intellectual basis, found in disciplines (e.g., linguistics, philosophy, and literature) that focus inquiry on the "attributions of meaning" and so

qualitative research can be viewed as offering a linguistic and symbolic representation of the world (in contrast to the mathematical representation offered by quantitative research; Heppner et al.). Shank (2002) defined qualitative research as "a form of systematic empirical inquiry into meaning" (p. 5). Therefore, qualitative research seeks to make meaning of the phenomenon under investigation using language as a form of systematic empirical inquiry.

Qualitative strategies, regardless of their particular process question, have several commonalities (Bogdan & Biklen, 2002; Miller & Salkind, 2002). First, data are gathered within a natural setting. The researcher interviews participants suited for the particular issue of concern (Miller & Salkind) and serves as the primary instrument for data analysis. In this way, the researcher becomes the filter through which the data are understood and conveyed (Hesse-Biber & Leavy, 2006). Second, qualitative research is descriptive (Creswell, 1998). Researchers within this framework ask questions to describe and extrapolate information related to the study (Creswell, 2003). Third, the outcome of an experience as well as the process employed to maneuver through the experience is examined. Qualitative researchers seek to understand how rather than just what. Fourth, inductive analysis is required because researchers draw conclusions from the presented data rather than gathering data to uphold a preconceived hypothesis (Maxwell, 2005). Finally, the perspectives of the study's participants supersede those of the researcher (Erickson, 2005), and in fact, the researcher strives to understand an issue from the framework of the participant.

Limitations to Qualitative Research

Several limitations to qualitative research have been provided. First, because of the small number of participants utilized in qualitative studies, the results offer a depth and richness of the experience under investigation at the expense of generalizability (Hesse-Biber & Leavy, 2006). Next, because the researcher's role is that of involved investigator, it is understood that the data will be analyzed through the lens of the investigator, along with his biases (Heppner et al., 1999). The issue of minimizing researcher bias is addressed in the section title Attending to Researcher Bias. Other limitations include: (a) results may not replicate across research teams, (b) the research process is very labor intensive, and (c) qualitative methodologies are seldom standardized and so each researcher may use different methods without attending to reliability of judgment (Hill, Williams, & Thompson, 1997; Nutt-Williams & Hill, 2001). Perhaps one of the most significant limitations to qualitative methods is the low regard with which qualitative methods have been viewed by many in the academic research community. The prevalent attitude toward qualitative methodologies creates difficulties regarding publication of such studies (although this is slowly changing); as a result-many researchers may choose not to use qualitative methods, despite the benefits of doing so (Hesse-Biber & Leavy).

Quantitative Component: Descriptive Statistics

Due to the fact that the researcher for this study was simply attempting to get a picture of who was teaching group supervision, how it was being taught, and the way in which individual students needs were being met, it seemed logical to capture some descriptive statistics. With descriptive statistics the goal is simply describing what the

data shows. By using descriptive statistics in this study, the data collected from the survey were proffered to the reader in a manageable form, primarily through the use of tables.

Specifically, descriptive statistics is the term given to the analysis of data that helps describe, show, or summarize data in a meaningful way such that, for example, patterns might emerge from the data. One way to describe data is through measures of central tendency: these are ways of describing the central position of a frequency distribution for a group of data. The central position of the data can be described using a number of statistics, including the mode, median, and mean.

Qualitative Method Germaine to Current Study

Qualitative content analysis is one of numerous research methods used to analyze text data (e.g., phenomenological, grounded theory). Research using qualitative content analysis focuses on the characteristics of language as communication with attention to the content or contextual meaning of the text (Budd, Thorp, & Donohew, 1967; Lindkvist, 1981; McTavish & Pirro, 1990; Tesch, 1990). Given the nature of the current study, this approach to the data captured qualitatively made sense. By using a qualitative content analysis the researcher was able to go beyond merely counting words to examining language intensely for the purpose of classifying large amounts of text into an efficient number of categories that represent similar meanings (Weber, 1990). These categories can represent either explicit communication or inferred communication. The goal of content analysis is "to provide knowledge and understanding of the phenomenon under study" (Downe-Wamboldt, 1992, p. 314). In short, content analysis is a research tool used to determine the presence of certain words or concepts within texts or sets of texts.

Researchers quantify and analyze the presence, meanings, and relationships of such words and concepts, then make inferences about the messages within the text (Shank, 2002).

Attending to Researcher Bias

Given that the researcher initially planned to conduct a purely quantitative study, he recognizes that having examined prior research thoroughly gave him an idea of the type of information he was going to find in the qualitative data. Thus, to ensure that he minimized his bias, he met with his chair and discussed his ideas. When working on developing the qualitative questions, he purposefully made the questions broad and openended to allow the participant's voice to be expressed without clouding the response with his bias. Moreover, given that the open-ended questions were placed in a survey the researcher was not able to lead participants to particular responses.

In the initial analysis of the qualitative data, the researcher was careful not to infer meaning from the words provided by the respondents. While this seemed like a good idea at the time, this approach led to a limited, concrete analysis that was literal in nature. Thus, in a second analysis, a team was utilized to verify that thematic inferences that were being made were not impacted by the researcher's preconceived ideas of what he would find in the data.

Participant Recruitment

The participants for this study consisted of the on-campus instructors who were providing internship supervision in the 622 CACREP-accredited master's level counseling programs in 216 institutions in the United States. To be considered for participation, the supervisors must have been the instructors of record in a CACREP-

accredited counseling program for the group supervision aspect of the internship experience within the last year. It was anticipated that each institution would have between one and four current group supervision sections and one supervisor per section. The targeted number of participants for this study was between 10 and 20% of the total number of CACREP-accredited programs which allowed for a minimum of at least one instructor per program. Therefore the total number of anticipated participants would be between 60 and 120.

In order to contact the greatest number of potential respondents, the following two methods were used to secure as high of a response rate as possible: (a) reaching out to the CESNET listserve and (b) contacting department chairs. It is important to note, that the most successful method of recruitment included placing a call for help with CESNET, which is the listserve for counselor educators. The other method included a number of steps. In order to recruit faculty who had taught group supervision to students during their internship experience, An internet search of each of the 216 institutions that had one or more master's level CACREP-accredited counseling programs was conducted. The goal was to identify the department chair and ascertain his or her phone numbers and e-mail address. Second, each chair was contacted by e-mail using a letter of introduction (see Appendix A). This letter described the nature of the research project, as well as its goals and aims; moreover, in the letter the researcher requested the names, phone numbers, and e-mail addresses of the current instructors providing, as well as the most recent instructors who provided, on-campus group supervision to counseling interns. After 5 days, the chairperson of the department was contacted by phone to request the names and e-mail addresses of the current or recent faculty teaching on-campus internship group

supervision. Those not responding to the first request within 5 days were resent the email request for participation and again given a link to the survey. Those still not responding to the request within another 5 days were contacted by phone (see Appendix B). Third, current and recent on-campus internship supervisors were contacted via e-mail requesting their participation in an online survey (see Appendix C). Whether contacted through department chair information or through CESNET, all participants were sent a link to SurveyMonkey which directed the participants to the survey introduction, the informed consent explanation and agreement button, and the actual survey (see Appendices D and E). Data were anonymously collected by SurveyMonkey, and survey respondents were provided with a response thanking them via SurveyMonkey.

Informed Consent

As discussed above, the researcher attained informed consent from the participants prior to beginning the survey on SurveyMonkey. In other words, the consent information form was viewed and read by potential participants, and they clicked on an "I agree" button at which time they were allowed access to the survey. The consent form (see Appendix D) outlined: (a) the purpose and background of the study, (b) privacy and confidentiality, (c) risks to participants, (d) anticipated direct benefits, (e) potential benefits to the field, (f) research procedures, (g) non-participation alternatives, (h) costs and compensation for participation, and (i) ways to address any questions. Identification of the investigators and their contact information was provided.

Research Instrument

After consent was attained, participants were directed to the survey on SurveyMonkey (see Appendix E). This survey included some basic demographic

information and the specific questions that were under investigation in this research. The consent information and the survey took approximately 20-30 minutes to complete. Participants could take the survey at their convenience for both time and location. The survey was hosted by SurveyMonkey where the instrument was easily accessed and navigated, while anonymity was protected. The availability for participation was open for approximately one month.

Development of Instrument

In an effort to ensure construct validity of the instrument, portions of the survey were created utilizing the CACREP 2009 guidelines that pertained to providing group supervision to students during their internship experience. In developing questions that were not addressed by the CACREP standards, the researcher relied on the relevant literature to create the questions. Prominent themes were uncovered and incorporated within the instrument. Tenets of the Delphi Model were incorporated (Doughty, 2009; Pulford, Adams, & Sheridan, 2009) by soliciting feedback on the survey from faculty teaching group supervision. The feedback was implemented and the dissertation committee approved the final version of the survey. The survey utilized categorical questions; participants were also able to write in answers when a category did not include an appropriate response. In addition, open-ended questions were offered to allow participants to comment in greater depth and to ascertain more broad qualitative descriptions.

The survey instrument was designed to include questions that developed a profile of who was teaching group supervision in internship, how group supervision was being structured, how group supervision was being taught, how individual student needs were

being met, and how faculty was experiencing group supervision. Given these areas of interest in group supervision, the four broad questions developed to address these issues were as follows:

- Who was conducting group supervision? The first part of the survey gathered
 demographic information of the respondents including gender, ethnicity, employment
 status (full-time, part-time, or Ph.D. student), and years of experience in supervision,
 group supervision, and counseling.
- 2. How was group supervision in internship constructed? The second part of the survey asked the size of the group supervision, how long the group supervision lasted, if syllabi were standardized or if there was flexibility in teaching, and if the group was composed based on specialty.
- 3. How was group supervision in internship being implemented? This section of the survey explored which model undergirds group supervision in the counseling internship experience; what methods were supervisors utilizing during group supervision; what content was included in group supervision; and what counseling skills were supervisors focusing on for student development.
- 4. In an attempt to continue understanding how group supervision was being taught specifically to meet individual needs (i.e., specializations, different developmental levels), two subquestions were asked: (a) How did faculty ensure student individual needs were met in group supervision? (b) How were deficits in student's skills handled?

By collecting this information the researcher was able to develop a profile of who was teaching group supervision in internship, learn more as to how group supervision was being structured, how group supervision was being taught, and how student

individual needs were being met. In addition to the categorical questions just described, open-ended questions afforded the respondents opportunities to expound on their categorical answers.

Areas of Interest

Broad Question 1

The demographics of the supervisors were of interest to this researcher. Who was conducting the supervision? What characteristics described supervisors of on-campus internship group supervision within CACREP-accredited programs? A profile of who was providing group supervision was developed from demographics that included gender, ethnicity, employment status, training in group supervision, and experience in supervision, group supervision, and counseling. A distribution of frequencies for the sample was compiled, which provided both totals and percentages of all responses in each category.

Broad Question 2

How was group supervision of the counseling internship experience structured? What emphasis did group supervision place on areas of specialization and immediacy of student needs? In order to acquire specificity as to how group supervision was being planned for, additional questions were asked such as: (a) Are supervision groups organized by specialization? (b) For supervision groups not organized by specialization, what degree of focus was on student area of specialization? and (c) How was group supervision facilitated relative to planned materials and/or supervisee immediate needs?

CACREP (2009) mandates that students are offered the opportunity for a supervised internship that is appropriate for their specialized program area.

Understanding how programs address specialization needs during internship was assessed by determining if internship was set up by specialization and to what degree specialization needs were met. A distribution of frequencies for the sample was compiled, providing both totals and percent of all reported responses in each category.

Broad Question 3

The critical knowledge determined by this study was elicited by asking: What methods were used during group supervision? It is important to understand how group supervision was conceptualized theoretically and operationalized via methods, skills, and subject area. In order to understand these practices, questions were asked such as: (a) What theoretical basis undergirds group supervision of counseling interns? (b) What methods were being used to conduct group supervision? (c) How frequently were subject areas being addressed in group supervision? and (d) How frequently were essential counseling/clinical skills addressed in group supervision?

Researchers have shown that there are subject areas and skill development which need to be of central focus in any counselor internship training program (Akos & Scarborough, 2004; Hayes, 2001; Riva & Cornish, 2008), and CACREP-accredited programs should ensure that the focus of these subject areas and skills are covered during the internship period (CACREP, 2009). To date, there is no empirical support that these content areas or skills are being covered in internship group supervision and there is no empirical evidence showing that one or more of these areas are preferred more often or considered to be best practices.

Respondents were given questions that include lists of current theories, methods, essential counseling/clinical skills, and content areas. In each of the questions,

participants were asked to indicate all that apply. A distribution of frequencies for the sample was compiled, providing both totals and percent of all reported responses in each category.

Broad Question 4

How did faculty members who teach group supervision create, engage, and facilitate a supervision course that incorporates the CACREP-mandated competencies for their students? To address this question there were a number of subquestions that needed to be acknowledged: (a) How did faculty conduct or engage in the group supervision process with their students? (b) What innovative and creative ways were used in teaching group supervision? and (c) How was technology being utilized? In an attempt to continue understanding how group supervision was being taught specifically to meet individual needs (i.e., specializations, different developmental levels), two subquestions needed to be answered (a) How did faculty ensure students' individual needs were met in group supervision? and (b) How were students with deficiencies handled?

Risks and Benefits, and Protections for Subjects

Prior to launching the survey on SurveyMonkey, the survey and related documents (Appendix A through E) were sent to a small number of researchers and faculty experienced in having taught internship supervision for a quasi-validation of the questions being used and suggestions were incorporated to modify the survey. After doctoral committee approval, all materials (Appendix A through E) were presented to the Western Michigan University Human Subjects Institutional Review Board (HSIRB) for review and approval (Appendix F). There was little, if any, foreseeable risk for respondents reviewing options during the taking of the online survey. However, taking

the survey may have resulted in perception of how group supervision "ought" to be developed based on the participant's review of options during the taking of the online survey. The only foreseeable cost would have been the time it took for participants to complete the survey. Privacy, confidentiality, and management/storage of data, which included keeping all data on an encrypted thumb drive met HSIRB standards. Once in compliance with the HSIRB, the researcher began soliciting potential participants and launched the survey on SurveyMonkey. Thus, the data collection portion of this study was begun.

The benefits to subjects participating in this research were sharing of their experiences in the survey. This in turn may have inspired them in developing pedagogy for group supervision in internship. Benefits to the counseling field could have included:

(a) informing best practices for group supervision as a forum for clinical training, (b) understanding how programs were implementing CACREP mandates, (c) establishing how program specialization and student needs were being addressed in internship group supervision, and (d) developing a snapshot as to who was teaching supervision in internship in counselor education programs.

Limitations

This research was intended to be an initial investigation into group supervision provided by faculty (e.g., full-time, part-time, PhD student) for master's students in internship. Due to the exploratory nature of this study, this study was limited in several ways.

- 1. Because the participants for this research were recruited from CACREP-accredited counselor education programs, the results may not be generalized beyond this particular population.
- 2. Because the instrument was developed to assess how group supervision was being conducted in CACREP-accredited counseling programs, the results did not determine the impact that group supervision has with internship students.
- 3. The survey was designed as a self-report measure and there was not corroborating data to validate that the information provided was accurately reported.

Data Analysis

To analyze the descriptive data captured in this study, the researcher utilized the analysis function that is built into SurveyMonkey. This was the most expeditious process, for the statistics being captured were merely descriptive in nature. Thus, this was a straightforward process in SurveyMonky.

Analyzing the qualitative data for this study from a content analysis paradigm included a number of steps. First, the qualitative data were downloaded from SurveyMonky by question. In an effort to gain a broad understanding of the qualitative data, the researcher initially reviewed each piece of data in a line by line fashion. He circled common words and made notes of overarching ideas present in each of the eight open-ended questions. He then utilized SurveyMonky to create categorical names for the information that emerged in the data. Although this gave the researcher some basic information, it did not provide the richest analysis of the data. Thus, utilizing a team (which included his chair and his editor) the researcher and the team analyzed the data across all eight questions, rather than analyzing within each question. The goal of this

process was to come to consensus about overarching themes that emerged in the qualitative data. These themes are addressed in Chapter IV of this document. Note, the later analysis was conducted post-defense at the request of the dissertation committee.

Chapter Summary

In this chapter the researcher discussed the way in which this study was conducted. He gathered data through an online survey that asked information from instructors teaching group supervision during internship in CACREP-accredited master's counselor education programs. The study gathered qualitative and quantitative information on: (a) who was teaching, (b) how group supervision was structured, (c) the group composition for supervision, (d) how group supervision was being taught, (e) how student individual needs were being met, and (f) what participants considered to be best practices. In Chapter IV the results from data collection are reported. In Chapter V an interpretation of the data collected is discussed, limitations are provided, and future research is suggested.

CHAPTER IV

RESEARCH FINDINGS

As indicated in Chapter I, the researcher's aim was to gain an understanding of what was taking place in CACREP-accredited counseling programs during the internship group supervision experience. To this end, descriptive and qualitative data were collected. In an attempt to develop a "snapshot" of what was currently taking place in group supervision during internship in CACREP-accredited counselor education programs, the researcher gathered demographic data about the faculty teaching group supervision, information on how group supervision was structured and delivered, and how specialization and individual student needs were being addressed. In an effort to capture additional information about what is happening in CACREP-accredited programs, eight open-ended questions were incorporated into the survey. Initially, the researcher planned to analyze the responses in the data by addressing the content of each question individually. Although this method provides some specific information, it does not offer a thematic description of what is occurring in group supervision. Therefore, the researcher added an additional step to the data analysis process. This step includes capturing themes across the eight open-ended questions. These themes are provided in the qualitative section of the results.

The results are outlined in this chapter as follows. First, the researcher reports the findings from the quantitative portion of the survey, which is delineated as follows: (a) program variables, (b) demographic variables, (c) years of experience, (d) training in

providing group supervision, (e) group supervision structure, (f) meeting student needs (g) models of supervision, (h) methods of supervision, (i) subject areas included in group supervision, and (j) addressing clinical/counseling skills. Second, the findings from the qualitative data are presented thematically across all eight questions. Third, additional findings that rose to the level of a specific category but not to the level of a theme emerged from five of the eight open-ended questions. These findings are presented as categories within the themes. The categories delineated help to enhance the primary theme. Finally, given that some of the participants provided concise responses that are descriptive of ideas specific to three of the open-ended questions, the researcher felt it was important to include a section that addresses these responses.

Program Variables

The participants in the study were asked to provide information regarding the number of CACREP-accredited programs offered and how many full-time faculty were employed in the department. Overall, 62 participants (100%) provided the information requested in this section. The number of CACREP-accredited programs offered rangedfrom 1-5 (M=2). The number of full-time faculty in the department ranged from 2-24 (M=7).

Demographic Variables

A profile of who was providing group supervision was developed from demographics that included gender, ethnicity, degree attained, and employment status. Descriptive data were collected and the demographic variables are summarized below. Of the 62 participants' in the study, 42 identified as female, 19 identified as male, and 1

identified as transgender. With respect to background, the majority of participants identified as Caucasian (n = 44). In addition, over fifty-percent of the participants indicated that they worked full-time at the institution (n = 37) and that they had a doctoral degree (n = 41), A more complete picture of the demographic make-up of the study is provided in Table 1 below.

Years of Experience

Participants were asked to provide information about how many years they had been providing counseling, individual supervision, and group supervision. With respect to how long individual participants had been providing counseling, participant responses ranged from one to forty-five years (M = 15). With respect to how long individual participants had been conducting individual supervision, participant responses ranged from 1 - 42 year (M = 8). Finally, with respect to how long individual participants had been conducting group supervision, responses ranged from 0 - 42 years (M = 6.3).

Training in Providing Group Supervision

The participants were asked to report the training and preparation they received in providing group supervision. Participants reported a wide variety of types of training and preparation that they received to proffer group supervision. The most common response, however, was having an academic class that included supervision (n = 51). A more complete picture of this information is proffered below in Table 2.

Table 1

Demographic Information

Variable	Number $n = 62$	Percentage (%)
		• • •
Gender:		
Male	19	(30.6)
Female	42	(67.7)
Transgender	1	(1.6)
Background:		
African American	9	(14.5)
Caucasian	44	(71.0)
Hispanic American	5	(8.5)
Asian American	2	(3.2)
Native American	1	(1.6)
Biracial/Multiracial	1	(1.6)
Highest Degree Attained:		
Doctoral	41	(66.1)
Master's	20	(32.3)
Specialist	1	(1.6)
Employment Status		
Full-time	37	(59.7)
Part-time	8	(12.9)
Doctoral Student	17	(27.4)

Table 2

Training and Preparation in Group Supervision

Variable	Number $n = 62$	Percentage (%)
Academic Class for Supervision	42	(67.7)
Academic Class included Supervision	51	(82.3)
Class for Supervision including Group	33	(53.2)
Supervision		

Table 2 – continued

Academic Class for Group Supervision	16	(25.8)
Online Class	4	(6.5)
Practicum in Supervision	37	(59.7)
Self-directed study – reading	21	(33.9)
Workshop or Conference	30	(48.4)
None	0	(0.0)

Group Supervision Structure

To better understand how group supervision of the counseling internship experience was being structured, participants were asked a variety of descriptive and qualitative questions. To begin, participants were asked how many students were in each group, how long each group supervision session lasted, and how often group supervision was conducted. The participants reported that the number of students in each group supervision session ranged from 2 - 22 (M = 7.7) students. The participants reported that the length of each group supervision session ranged from 1 to 3 hours (M = 2). Finally, 83% of the participants reported that group supervision was being held weekly and 17% reported group supervision is being held biweekly.

Meeting Student Needs

In order to understand how student needs were being met, the participants were asked a variety of questions. The first question was about whether participants were asked to follow a standard syllabus. Sixty-two and one half percent of the participants reported that they did follow a scripted syllabus, while 37.5% reported they did not follow a scripted syllabus. The next two questions focused on how group supervision was conducted to address areas of specialization: (a) Are supervision groups organized by specialization? The 39 participants that answered this question responded as follows:

50% reported that groups were not organized by specialization, 40% reported that groups were organized by specialization, and 10% reported that some groups were organized by specialization. (b) For supervision groups not organized by specialization, what degree of focus was on student area of specialization? Of the 50% that did not organize groups by specialization, 27.5% reported that less than 25% of time was focused on specialization, 15% reported more than 25% of time was focused on specialization, and 10% reported more than 50% of time was focused on specialization. Finally, to attend to how the immediate needs of the students were addressed in group supervision, the participants were asked: (c) How was group supervision facilitated relative to planned materials and/or supervisee immediate needs? Due to the fact that the possible responses to choose from for this question contain percentages, the responses for this question are best delineated in table format (see Table 3).

Models of Supervision

To understand the models utilized in group supervision, the participants were asked to check all that apply to the descriptors of what best describes the supervision model that they used for group supervision of their interns. Over 53% of the participants indicated that they integrate more than one model in their process of facilitating group supervision, while 15.2% reported they use a developmental model. To capture a more precise snapshot of the participants' responses, review Table 4 below.

Table 3
Structure of Group Supervision

Variable	Number n = 39	Percentage (%)
100% planned material	3	(7.7)
75% planned material and 25% flexibility to meet immediate needs of supervision	10	(25.6)
50% planned material and 50% flexibility to meet immediate needs of supervision	19	(48.7)
25% planned material and 75% flexibility to meet immediate needs of supervision	5	(12.8)
100% flexibility to meet immediate needs off supervision	2	(5.1)

Table 4
Supervision Models Used in Group Supervision

Variable	Number $n = 39$	Percentage (%)
Integration of more than one	21	(53.8)
Developmental	6	(15.4)
Case Presentation	5	(12.6)
Structured	1	(2.6)
Systemic Peer	2	(5.1)
Does not follow an approach	4	(10.3)

Methods of Supervision

To understand the methods utilized in group supervision, the participants were asked to rate utilization of case conceptualization, role play, audio and/or video, interpersonal process recall, and group process. They were asked to rate how frequently they used the methods on a Likert scale, with responses ranging from I= never to S= always. The participants reported that the most common method utilized in group supervision was case conceptualization. They indicated that group process was the second most common method. Interpersonal Process Recall was the next most common method, and role play was the least utilized method in group supervision of interns. The number and frequency detail by response is reported below (see Table 5).

Table 5

Numbers and Frequency of Methods Employed in Group Supervision

Methods	Nev	rer	Selo	lom	Reg	ularly	Almost A	Always	Alv	ways
	n	%	n	(%)	n	(%)	n	(%)	n	(%)
Case Conceptualization	0		0		12	30	16	40	12	30
Role Play	1	2.5	18	45	12	30	6	15	3	7.5
Audio and/or Visual	2	5	6	15	9	22.5	11	27.5	12	30
Interpersonal Process	3	7.5	4	10	12	30	13	32.5	8	20
Recall										
Group Process in	0		5	12.5	7	17.5	14	35	14	35
Supervision										
Other	1	50	0		1	50	0		0	

Subject Areas Included in Group Supervision

To understand what subject areas were being addressed most often in group supervision, participants were asked to rate how often diagnosis, clinical skills, legal/ethical issues, group dynamics, and multicultural concerns were the subject of

group supervision. Respondents were asked to rate the subject areas on a Likert scale, with responses ranging from I = never to S = always. Given the nature of the responses, it is easiest for readers to capture the data if it is reported in table format. Thus, the participants' responses are reported below (see Table 6).

Table 6

Numbers and Frequency of Subjects Included in Group Supervision

Subjects	Never	Seld		Regu	•		Always		ways
	n (%)	N	(%)	N	(%)	n	(%)	n	(%)
Clinical Skills	0	0		6	15	14	35	20	50
Multicultural Issues	0	3	7.5	15	37.5	11	27.5	11	27.5
Legal/Ethical Issues	0	2	5	20	50	10	25	8	20
Group Dynamics in Supervision	0	9	22.5	17	42.5	6	15	8	20
Diagnosis	0	9	22.5	17	42.5	6	15	8	20
Other	0	1	50	1	50	0		0	

Addressing Clinical/Counseling Skills

To understand how often specific clinical/counseling skills were being addressed in group supervision, participants were asked to rate how frequently they used the following skills: use of self, use of therapeutic relationship, utilization of empirically supported techniques, utilization of observation of students' nonverbal, and utilization of theory integration. They were asked to rate how frequently they used the specific clinical/counseling skills on a Likert scale, with responses ranging from I = never to S = always. Given the complexity of the information ascertained in this section, the participants' responses are provided below (see Table 7).

Table 7

Counseling/Clinical Skills Addressed in Group Supervision

Counseling/Clinical Skills	Never n %	Seldom N %	Regularly N %	Almost Always n %	Always n %
Therapeutic Relationship Observation of Nonverbal Use of Self Theory Integration Empirically Supported	0 0 0 1 2.5	0 3 7.5 2 5 3 7.5 8 20	12 30 11 27.5 13 32.5 19 47.5 14 35	12 30 15 37.5 11 27.5 12 30 13 32.5	16 40 11 27.5 14 35 5 12.5 5 12.5
Methods/Techniques Other	0	1 50	1 50	0	0

Themes and Categories in the Qualitative Data

Initially, in an effort to develop a more thorough "snapshot" of group supervision, faculty members who teach group supervision were asked to answer open-ended questions. These questions pertained to what they considered best practices across the topics of addressing specialization, utilizing specific methods, incorporating clinical/counseling skills, and inclusion of specific subject areas in supervision.

Moreover, group supervisors were asked open-ended questions addressing additional practices for conducting or engaging in the group supervision process with students, how they ensured students' individual needs were met, what innovative and creative ways were used to teach group supervision, how technology was being utilized, and how student deficiencies were being handled. Although a content analysis was conducted initially for each question individually, the data that were gleaned by using a question by question approach did not provide a clear thematic structure to the data. Thus, in an attempt to capture the thematic structure, the data were reanalyzed (using a team approach) across all questions. By using this approach, two overarching themes, one

narrow theme, and a number of categories within two of the three themes emerged. In addition, upon a close analysis there was one issue that participants addressed repeatedly across the questions: specific topics for group supervision. The responses within this area, however, tended to be one or two word responses. Thus, for ease of understanding, the researchers discerned that this was not a theme but merely a broad category within the data. For clarity, each theme is addressed individually and any categories that emerged within themes are presented. Then the findings from the specific category are provided. Finally, after an additional review of the data, it became clear that there was some pertinent information that while informative did not rise to the level of theme or category in three of the open-ended questions. Thus, these findings are reported in a question by question format.

Overarching Theme 1: Creating a Facilitative Environment

As the team analyzed the data across questions it became evident that the participants valued the importance of creating a facilitative environment within group supervision. This theme clearly emerged in five of the eight open-ended questions.

The five relevant questions pertained to (a) best practices for methods, (b) handling students with deficiencies, (c) innovative and creative teaching methods, (d) reflection regarding conducting group supervision, and (e) additional comments regarding the facilitation of group supervision. Moreover, within this theme three categories also emerged (i.e., specific methods, foster safety, and supervisor's use of self in group supervision). It is important to note that in deciding the difference between a theme and a category, the researcher and his team (i.e., chair and editor) felt that theme was the

central idea while the category was necessary to add depth to the theme. What follows is a representation of the participants' words that illustrate the theme and categories.

In this theme, participants' responses about creating a facilitative environment included such statements as "I establish a safe environment for feedback by modeling and gatekeeping"; "focus on safety and development of sharing/comfort rather than anything punitive"; and "...my relationship with supervisees tend to be as egalitarian as possible, warm, nurturing, accepting, honest, and constructive." In order to further highlight the participant responses, the categories below are utilized.

Category: Specific methods. Throughout the data, references were made to specific methods that facilitate the environment present in group supervision. For instance, one participant responded, "I am structured and professional," while another indicated "I have students directly participate in structured group exercises." Quite a range of methods used in the facilitation of group supervision were introduced by participants. Among the many methods mentioned, those utilized by numerous participants included case presentations, peer and instructor feedback, video recordings and/or IPR, using the group itself for group process opportunities, role playing, demonstrations, and highlighting effective behaviors and strengths of supervisees. A participant captured the essence of this category with:

I typically begin with a quick check in with each member. This allows me to discern the order of the cases to process. The students are asked to describe the case, address what they are struggling with and I then open the floor for discussion among the group.

Category: Foster Safety. Creating a safe environment for supervisees was mentioned by several participants. For instance, one participant reported that, "creating a

safe holding environment is critical to [giving] and [accepting] feedback." Quite similarly, another participant noted that it is "important to create a safe holding environment in an attempt or in order to give and receive feedback." When responding to the question asking for additional comments regarding facilitating group supervision, one participant succinctly reported "create safety."

Category: Supervisor's use of self in group supervision. Many supervisors acknowledged their use of self in their supervisory relationships; they also recognized their role as model to their supervisees. For example, one participant indicated that he or she used "self and Interpersonal Theory to demonstrate and engage [students in the supervisory process]." Another noted the "use of self and conduct supervision as a group process," while another participant described him or herself as "a participant throughout and an expert as needed." Perhaps this category can be best illustrated by this participant: "I actively engage with them in the therapeutic process. I model for them best practices."

Overarching Theme 2: Utilizing a Developmental Perspective

As the team analyzed the data across questions it became evident that the participants valued the importance of utilizing a developmental perspective within group supervision. This theme clearly emerged in six of the eight open-ended questions. The six relevant questions pertained to (a) best practices for inclusion of subjects, (b) best practices for methods, (c) best practices for addressing specialization, (d) handling students with deficiencies, (e) innovative and creative teaching methods, and (f) reflection regarding conducting group supervision. Moreover, within this theme two categories also emerged (i.e., meeting students' needs and flexibility). What follows is a description of the theme and categories.

In this theme participants' responses reflected their support and use of a developmental perspective. This theme was evidenced in such statements as "see students at various developmental stages and need to both support and challenge them throughout the experience," and "where they are within their own developmental process and how they can best utilize supervision." In order to further highlight the participant responses, the categories below are utilized.

Category: Meeting students' needs. Many participants' responses reflected their commitment to meeting the needs of the students in their supervision groups. For example, one indicated that he or she was "responsive to student needs and developmental level," and another reported "to focus on both the developmental aspects, including both areas for improvement and growth using case examples and incorporating faculty and group feedback." Another participant reported that "each supervisee receives attention during each supervision meeting." The essence of this category is captured by this participant: "Each supervisee has different needs, which are often based on their developmental level. I believe that we need to work with supervisees at their level (I use the IDM)."

Category: Flexibility. Flexibility in the facilitation of group supervision was endorsed by several participants. For example, one indicated that his or her group supervision has "a general 'format' w/plethora of flexibility." Another noted both "planning subjects and using assignments . . . as well as being flexible of what the supervisee is in need of at the time." Yet another participant recommended that the supervisor "be intentional about addressing all areas and be open to address issues that

may arise." Perhaps this category can be best illustrated by this participant: "Flexibility is crucial because of the individual and group needs in supervision."

Narrow Theme: Promoting Student Initiative

As the team analyzed the data across questions it became evident that the participants valued the importance of promoting student initiative within group supervision. This theme clearly emerged in four of the eight open-ended questions.

The four relevant questions pertained to (a) best practices for inclusion of subjects, (b) best practices for addressing specialization, (c) innovative and creative teaching methods, and (d) reflection regarding conducting group supervision. There were no categories that emerged within this theme. What follows is a description of the theme.

In this theme participants' responses endorsed the importance of promoting student initiative in group supervision. For example, "have students create agenda," and "ask students to plan for their own needs/agenda." Further illustrations are: "students initiate discussions and I facilitate," "letting students choose the various things they want to evaluate," and "allowing students to initiate and then facilitate the discussion." The essence of this theme is illustrated by this participant: "asking group members preferences/empowering them to structure own supervision."

Category: Specific Topics for Group Supervision

As the team analyzed the data across questions it became evident that the participants identified specific topics they thought to be important to the facilitation of group supervision. This category clearly emerged in five of the eight open-ended questions. The five relevant questions pertained to (a) best practices for inclusion of subjects, (b) best practices for methods, (c) best practices for addressing specialization,

(d) innovative and creative teaching methods, and (e) additional comments regarding the facilitation of group supervision.

Many topics for inclusion in group supervision were endorsed by participants; several topics received multiple endorsements. The topics most often recommended included case conceptualization, legal and ethical issues, multicultural issues, and wellness and self-care. The most common responses included statements from participants such as: "it is very important to talk about professional issues" ". . . talking about legal and ethical responsibilities," ". . . integrating key perspectives (multiculturalism, ethics, research, wellness)" and ". . . self care, writing case notes are significant topics."

Qualitative Data Specific to Individual Questions

As indicated at the onset of the previous section about the overall qualitative data, the responses to individual questions did not provide the researcher with a clear thematic structure. Thus, in order to capture the themes an analysis was conducted across questions. While this approach more fully captures the participants' responses in an organized manner, there are some responses that simply did not fit the thematic structure; yet, the responses seem important to report. Thus, as a team (i.e., researcher, chair, and editor), it was decided that reporting relevant findings from a few of the specific questions was warranted. The questions that seem to have the most relevance individually included: (a) addressing specialization (b) technology, and (c) working with students with deficiencies.

Addressing Specialization in Group Supervision

In order to meet each specialization's unique needs, it would make sense that the best practice for addressing specialization in group supervision would be to structure internship supervision by specialization and this was noted by a number of participants in this study. The clearest example of this response was "group based on specialization is best practice, to address specifics of that specialization culture." On the other hand, one participant in particular made a strong case for mixing specialties in group supervision with:

I believe that, regardless of setting, they are all in training to become counselors. So, helping them with their basic counseling skills is of primary importance to me. Then, as they encounter specialized issues, we respond to them accordingly. I think there are pro's and con's to both. I prefer a mix so that students have more of a holistic idea of counseling.

Other types of specific responses included: (a) discuss specialization as the need arises for individual students' in the group and (b) address as a case by case discussion. A good example of both ideas is captured with "providing training in concerns specific to that concentration requires a discussion of different settings in relation to cases individually."

Practices in the Utilization of Technology

When asked to address how technology was incorporated into group supervision, 29 participants' responses were quite specific and fell across three primary forms of technology utilizing: (a) videos, (b) internet (primarily e-mail), and (c) some type of hybrid method of teaching (e.g., Blackboard for posting student readings). Examples of the most frequent participant responses included: (a) using "webinars, teleconferencing, assigning web trainings;" (b) " [using] a blackboard system for assignment submission, etc. Otherwise, [using] standard audio/video recording"; (c) "[reviewing] recordings;

[utilizing] clipping and coding evidence of goal pursuit; (d) [contacting] students via email, and [utilizing] moodle to share resources."

Practices for Handling Student Deficiencies

Of the 30 participants who responded to the open-ended question pertaining to how they handled student deficiencies in group supervision, the most common responses included: (a) provide individual supervision outside of group supervision (b) develop remediation or action plan with the student, and (c) report the student's progress to the chair, director, site supervisor, or advisor. A clear example of handling student deficiencies is evident with ". . . . develop a plan of action with student to address deficiencies. Talking with students individually and also their site supervisor when needed. Providing the student the option of individual supervision opportunities."

Summary

Throughout this chapter, the researcher provided the reader with the findings of the study. In the quantitative section of the chapter, descriptive statistics were provided. With respect to the qualitative data, the researcher along with his team (i.e., chair and editor), reported the findings as follows: (a) thematic structure across questions, (b) categories within the themes, and (c) relevant findings pertaining to three specific openended questions that did not fit clearly into the themes. What follows in Chapter V is a discussion about the findings, implications of the findings, limitations of the study, recommendations for future research, and concluding thoughts.

CHAPTER V

CONCLUSIONS AND DISCUSSION

As indicated in the previous chapters, the purpose of the study was to expand an understanding of what was taking place in CACREP-accredited counseling programs during the internship group supervision experience. This chapter will discuss the results of this study and attempt to develop a better understanding of group supervision practices in clinical training programs. In this chapter, the results will be interpreted, a discussion about the implications of the findings will be provided, and recommendations for future research will be offered.

The introduction section of the CACREP (2009) standards states that programs are not discouraged from incorporating innovative ways of implementing the standards into their program. Although this provides programs with latitude about how best to conduct group supervision, it also provides little knowledge about how supervisors are interpreting, operationalizing, and implementing the CACREP standards in the practice of group supervision across all accredited programs. This information is relevant because there are 622 CACREP-accredited programs housed within 216 institutions nationally (CACREP). Without knowledge of best practices in providing group supervision, the limited number of programs within some institutions creates few options for students seeking specialization training and for meeting all students' individualized needs. Equally important, institutions may not be attaining enough access to useful resources such as: (a) sharing clinical training practices within and outside of institutions, (b) implementing of standards and guidelines within the program while meeting CACREP standards, and (c)

creating forums to meet students' individual needs and specializations. In this dissertation, the researcher's findings serve as a potential resource for programs because a snapshot of who is teaching and how group supervision practices is taking place within internships in CACREP-accredited programs nationally has been provided.

Discussion of Results: Sample Characteristics

To understand the demographics of supervisors teaching on-campus group supervision during students' internship experience, information about faculty characteristics that best describe supervisors within CACREP-accredited programs (e.g., demographics, full-time or part-time employment status) was attained. Additional characteristics such as age, gender, supervision, counseling and supervision, and training experience were gathered on each participant. In this subsection of the dissertation the sample characteristics are discussed.

Demographics

Compared to national demographics for faculty, the gender of the counselor education participants in this study was significantly different than current trends in academia nationally. According to the Women in Academia Report (2012), women faculty in academia are currently at 27%; in this study, however, participants identified as 68.9% female, 28.9% male, and 2.2% transgender. This study confirms Roland and Fontanesi-Seimes' (1996) observation that women faculty are ever increasing in counselor education. Therefore, the findings offer hope that there is movement toward a more equitable representation of faculty members in counselor education programs. With regards to ethnicity, the U.S. Census Bureau (2010) reports 22% of the general population is non-white, although Dinsmore and England (1996) found that 15% of

counselor educators were non-White. In this study, 29% of participants identified as non-White; this may only describe this sample, however. Thus, future research with respect to ethnicity of faculty in CACREP accredited programs nationally is warranted.

Faculty Status

With regards to faculty and staff, programs are accredited by the 2009 CACREP-accredited standards are to have at least three persons whose full-time academic appointments are in counselor education. The employment status of departments within this sample of participating faculty far surpassed minimum CACREP expectations with seven full-time faculty members. Exceeding minimum CACREP standards for faculty proved interesting in that even though there were few different programs in an institution, full-time faculty more than doubled minimum standards. These staffing patterns may reflect student census and demand, infrequent use of adjuncts in the department, and non-CACREP programs housed in the department.

Supervisor Preparation

CACREP (2009) guidelines state that supervisors should have a doctoral degree and/or appropriate counseling preparation, preferably from a CACREP-accredited counselor education program. This study found that compliance with supervisory standards was substantial since 71% of the participants reported that their highest degree was a doctoral degree. CACREP (2009) supervisory standards also state that supervisors should have relevant experience and appropriate credentials/licensure and/or demonstrated competence in counseling. Faculty reported a wide range of experience in counseling from 1-45 years with a substantial mean of 15 years of experience.

Although CACREP (2009) standards dictate relevant supervision training and experience for those who provide supervision to master's level students in a group setting, it does not offer any guidelines for what this specifically should look like.

Compliance with the requirement for supervisory experience was reported frequently by participants. There was a mean of 8 years of experience in providing individual supervision and a mean of 7 years with respect to providing group supervision.

Noteworthy, as far as supervisory training is concerned, participants reported a wide variety of training and preparation to teach supervision and group supervision. Although 84% of participants reported having completed an academic class specifically dedicated to proffering supervision, fewer than 54% reported an academic class for supervision that included group supervision. Moreover, only 26% participated in an academic class for group supervision.

Although the majority of faculty who participated in this study has been formally trained in supervision with some type of group supervision emphasis, 20% of group supervisors reported no academic training in group supervision. To ensure advancement in clinical training for counselors-in-training, perhaps instructors who teach group supervision when students are out on internship should be required to be trained in this modality of supervision. Further recommendations are that instructors teaching supervision classes should be required to include group supervision. Overall, 35% of participants reported not having completed a practicum in supervision. This is also of concern, for according to Borders and Brown (2005) a guided experience in supervision should be mandatory for all group supervisors to ensure proper quality training and effective facilitation of this modality within internships for counselors-in-training.

The vast majority of participants in the study had appropriate credentials, counseling experience, and supervisory experience to provide supervision for internship. Yet, fewer than 54% of faculty in this study had specific academic training in providing group supervision. Given the scarcity of literature of group supervision, development of training curricula for group supervision is encouraged (Christensen & Kline, 2000).

Discussion of Results: Pedagogical Issues

Little is known about the mechanics of the group supervision process and how it is being planned. More specifically, little is known about the way in which specializations and immediate needs of each student are addressed. More globally, not much is known about how students are engaged and successfully developing counseling competencies through pedagogical strategies.

As delineated in Chapter 4, in order to understand how faculty who participated in the study went about teaching group supervision, a number of areas were explored: (a) structure of supervision, (b) innovative and creative methodologies, and (c) technology utilized. The significance of each of these is discussed below.

Group Supervision Structure

CACREP (2009) directs that an average of 1½ hours of group supervision be conducted weekly by counselor education faculty throughout internship and that group supervision for internship should not exceed 12 students. Compliance with these standards pertaining to group size, frequency, and duration were noted in this research. This information supports the notion that the group supervisors participating in this study are following the CACREP guidelines.

Creative/Innovative Engagement

As counselors-in-training near completion of their program, group supervision in internship may shift from a more faculty-directed structure to a more collegial/collaborative structure, aiding the progression of trainees from students to professionals. Rosenberg, Medini, and Lomranz (1982) suggest that group supervisors may focus most on the social interactions within the group, due to the dynamics and the diffusion of their responsibility among trainees. Therefore, the social milieu of a practicum class may encourage both supervisors and trainees to emphasize a collegial and supportive environment (Prieto, 1998). Over half of the participants discussed using their "self" as persons to engage in group supervision citing "joining with them," "creating a laid back, open atmosphere," and describing their role as being "a participant throughout and an expert as needed." Use of self for engagement and facilitation was stressed by participants "to create open dialogue," "actively engage," and to "model best practices," as well as "being flexible and empowering students."

When asked about creative and innovative engagement strategies, a number of the participants who responded to this open-ended question reported empowering students to take a leadership role within their group supervision experience, while others encouraged students to share their feelings, concerns and knowledge gained from field work.

Interestingly, most participants responding to the open-ended question prompt addressing inclusion of specific subject areas in group supervision stressed the importance of being flexible and open while facilitating the group. For instance, participants indicated such things as engaging students "by being flexible and letting them develop the agenda" and letting the "students initiate discussions" while they "facilitate." Some empirical evidence

has supported that a facilitative approach to group supervision may contribute to students' sense of satisfaction with supervision or may even positively influence their development of counseling skills (Graves & Graves, 1973; Prieto & Meyers, 1998).

Technology

CACREP (2009) standards expect that evidence exists for the use and infusion of technology in program delivery as well as the impact incorporating technology has on the counseling profession. CACREP also encourages an opportunity for the student to develop program-appropriate audio/video recordings for use in supervision and to receive live supervision of client sessions. When asked about compliance with this standard in the open-ended questions, many of the participants who responded to this question reported using videos frequently in their supervision meetings. With the intention of creating innovative learning opportunities, a number of the participants who responded to this question reported the use of the internet (e.g., postings, e-mails, Blackboard). The use of technology, is suggested by CACREP (2009); in this study, participants reported using video as a primary means of incorporating technology, while a few also reported attempting to integrate other forms of technology in group supervision. It is hoped that counselor educators continue to move toward meeting technology guidelines and utilize the most up-to-date advances in technology.

Discussion of Results: Student Needs and Specialization

To get a glimpse of what emphasis group supervisors placed on areas of specialization and immediacy of students' needs, several aspects were considered: (a) whether supervision groups were organized by specialization; (b) if supervision groups were not organized by specialization, the degree of focus on students' area of

specialization (25%, 50%, etc.); and (c) the degree of focus on planned materials and/or supervisees' immediate needs.

In an attempt to understand how group supervision is being facilitated specifically to meet students' individual needs (i.e., specializations, different developmental levels), these three questions were answered: (a) how do those providing group supervision ensure students' individual needs are met in group supervision? (b) How are evaluation and gatekeeping needs addressed? and (c) How are students with deficiencies handled?

Individual and Specialization Needs

CACREP (2009) offers guidance that the focus of interns in their internship should be on their chosen areas of specialization (i.e., school counseling, clinical mental health counseling, substance abuse, marriage, couple and family, and gerontology). In the descriptive data, only 50% of participants reported that group supervision is organized by specialization. Given that half of the participants reported their groups were comprised of students from different program areas, it was important to understand how supervision is being planned for with regard to specialty (e.g., school, clinical mental health). This seems especially important as Borders and colleague (2005) found that while participating in group supervision, counselors-in-training with varying skill levels reported leaving feeling disappointed, in contrast to individual or triadic supervision. Thus, flexibility in course planning would seem essential toward meeting each student's chosen specialization and individual needs. Despite the need for flexibility in course planning, in the descriptive data more than 62% of supervisors reported that they are asked to follow a scripted syllabus, and over 27% reported using less than 25% of group supervision time to focus on specializations. In order to better meet student specialization

and individual needs, supervisors will need to recognize the necessity of lending flexibility to standardized curriculum and syllabi.

When examining the qualitative data around best practices for addressing specialization, most of the participants who responded to this open-ended question indicated that they do so on a case by case basis. Others reported that they utilize a checkin process for supervisees and others indicated the utilization of the group process. It seems as though these approaches might rely too heavily on students being aware of their needs and they may not be developmentally at a place to realize their needs clearly. Keeping in mind that this sample was small and this issue is important, it might be necessary to replicate this portion of the study in future research with a larger sample.

Student Deficiencies

To ensure that programs graduate competent counselors, CACREP (2009) evaluation standards suggest that assessment of student learning, performance on professional identity, professional practice, and program area standards take place. Group supervision during internship is the final forum for faculty monitoring, feedback, and remediation. The monitoring and evaluating of clinical work encompass both the counselors' development and the quality of clinical services the counselors-in-training are providing to their clients. All faculty members are encouraged to be aware of the trainees' levels of competence and their own gate keeping responsibilities (Bradley & Fiorini, 1999; Gaubatz & Vera, 2002; Gaubatz & Vera, 2006; Pitts et al., 1990; Woodard & Spiegel, 1999). Although professional responsibilities are clear, if students' concerns were identified in the open-ended question that pertained to this issue most of the participants who responded indicated they would provide individual supervision and a

few indicated that they would develop a remediation plan with the student. These findings corroborate Gaubatz and Vera's (2006) study that found both faculty and students' perceptions that students with deficiencies go unnoticed and are not offered remedial services. Gaubatz and Vera speculate that this may be due to the lack of a more formalized review process.

To train and graduate competent counselors, flexibility in course planning to meet individual and specialization needs is critical in group supervision (Hart & Nance, 2003; Stoltenberg, McNeil, & Delworth, 1998). More importantly, group supervisors must provide effective evaluation, timely gatekeeping, and remediation (Bhat, 2005; Huprich & Rudd, 2004). To meet individual needs and provide a meaningful group supervision experience, supervisors need a vast repertoire of theory, methods, and knowledge of clinical training in group supervision (Borders & Brown, 2005; Riva & Cornish, 2008).

Discussion of Results: Implementation of Group Supervision

To comprehend how group supervision is approached theoretically and facilitated, a number of factors were considered. For instance, participants were asked information about the theoretical underpinning of group supervision. They were also asked to address the methods utilized to conduct group supervision as well as the frequency of essential counseling/clinical skills addressed in group supervision. In addition, they were asked to address what they considered best practices in the facilitation of group supervision. In an effort to attain comprehensive information in this section of the study, the participants were asked to provide both descriptive and qualitative responses. In this subsection of the dissertation each of these factors are discussed.

Models

Several models and theories of group supervision have emerged in the literature (Borders, 1991; Fleming, Glass, Fujisaki, & Toner, 2010; Stoltenberg et al., 1998).

Borders and colleagues (2012) found that supervisees appreciated a variety of theoretical approaches while participating in group supervision. Over half of the participants in the present study emphasized that using more than one theory could enhance the students' case conceptualization skills. This finding is consistent with Borders and colleagues, who found that supervisors integrate of more than one supervision model. Although taking a developmental approach encourages the supervisor to meet students more at their own developmental level (e.g., Stoltenberg et al., 1998), only 15% of the participants in this study identified this as the primary model they utilize in group supervision. Additionally, more than 10% of participants reported not using any specific approach to group supervision. Given the fact that this is such a small sample no inferences about this data can be made. Logically, a developmental approach to group supervision makes some sense; thus, perhaps further research in this area is warranted.

Clinical Training

Clinical training is a key purpose for providing group supervision during internship. CACREP (2009) recommends developing helping relationships by training in counselor characteristics and behaviors that influence helping processes. Ladany, Walker, and Melincoff (2001) stressed the importance of creating a therapeutic alliance in counseling and supervision. The findings from the present study support Ladany and colleagues' findings, for group supervisors indicated that the therapeutic relationship is an important factor in group supervision. Participating in group supervision while practicing

in the field during internship is an excellent forum for students to integrate their skills into practice; integration of clinical/counseling skills into practice was reported by 36% of the respondents practicing group supervision. Hayes (2001) and Prieto (1998) encouraged supervisors to assist the intern in developing the skill of self-awareness to combat transference and counter-transference. In the qualitative data a number of participants indicated that use of self is an important skill for clinical training.

A growing trend in clinical training is to train in evidence based practices and utilization of treatment manuals (Sexton et al., 1997). In an effort to promote evidencedbased treatments, the American Psychological Association published criteria for identifying empirically supported treatments (Rosch & Christopher, 2009). Empirically supported treatments are those treatments that have attained a certain threshold of research evidence. A more rigorous distinction is evidence-based practice in which a treatment intervention is determined to do more good than harm and has undergone a randomized controlled clinical trial process to ensure a solid research design (SAMHSA, 2002). In short, evidence based practice incorporates the best available research coupled with clinical expertise with respect to client characteristics, culture, and preferences (American Psychological Association, 2005). Interestingly, over 50% of the participants in this study indicated that they do not incorporate empirically supported methods/techniques into group supervision. This is of concern to counselor educators because counselor educators are expected to graduate students who are able to incorporate efficacious treatment into their work with clients.

Content

Scholars suggest that group supervisors teach competencies around at least six topics: (1) diagnostic skills development, (2) legal and ethical issues in counseling, (3) clinical skills, (4) group counseling, (5) crisis intervention, and (6) multicultural issues (Boylan, 2001; Hayes, 2001; Riva & Cornish, 2008). Clinical skills are often viewed as the primary goal for counselor supervision (Freeman & McHenry, 1994) and the findings in the descriptive data illustrate that the participants agree with this notion. Moreover, while diagnostic skills seem to be an integral part of clinical skills, this choice in the descriptive data was not as heartedly endorsed as clinical skills. With regards to multicultural competencies, CACREP (2009) recommends that attitudes, beliefs, understandings, and acculturative experiences with diverse populations are offered. In addition, focus should be placed on developing multicultural counseling competencies through the infusion of multicultural awareness within the group supervision, and the creation of multicultural opportunities within the internship experience. In compliance with CACREP standards, respondents in the present study did indicte that addressing multicultural issues is important. This is encouraging given the strident call for multicultural competencies in counselor education (Constantine, 2001; Constantine, & Ladany, 2000; Duan, & Roehlke, 2001; Gainor & Constantine, 2002; Sue & Sue, 2003).

When addressing content in group supervision it is important to consider what students need. As a matter of fact, meeting students' needs by being flexible is an idea asserted by Bernard and Goodyear (2008). The idea of meeting students need is captured as a primary theme in the qualitative data of this dissertation. Moreover, the idea of being flexible is also captured as a category in the data. Although inferences cannot be made, it

is hopeful to see that participants resonate with the ideas espoused by Bernard and Goodyear.

Methods

CACREP (2009) standards specify group supervision structure and some course content; they do not address how course content is to be delivered. Some individual supervision literature discussing methods were adapted for utilization in group supervision and there has been some emergent group supervision literature that has begun to inform group supervisors (ACA, 2005; ACES, 1993; Bernard and Goodyear, 2008; Furr & Carroll, 2003; Kagan & Kagan, 1997; Lewis et al., 1988). Consistent with prior literature (e.g., Bernard & Goodyear; Riva & Cornish, 2008), in the present study case conceptualization was a method often endorsed in both the descriptive and qualitative data. Often group process is used as a method of learning in group supervision and supported by the literature (Hayes, 2001; Prieto, 1998). This method was also often endorsed in both the descriptive and qualitative data. This makes sense, as many counselor education programs require that students engage in direct group experiences.

Both ACA (2005) ethics and CACREP (2009) standards suggest use of video and audio recording for training purposes. The methods of supervision respondents mentioned most frequently in their qualitative comments was the use of Interpersonal Process Recall and the use of video and audio tapes to provide feedback. Feedback is a vital opportunity for students receiving all forms of supervision (Borders, 1991; Kagen & Kagen, 1997). Supervisees report that open and constructive feedback is a great advantage while participating in group supervision (Borders & Brown, 2005); Borders (1991) asserts that group supervisors should not only create an environment and

expectation for constructive feedback from peers, but they should do so in a systematic way. It is encouraging that the participants in this study identified the necessity of providing feedback to students. To provide feedback they reported using video and audio tapes as well as Interpersonal Process Recall.

Internship is the last opportunity that faculty have to assist counselors-in-training in developing clinical skills. Developing a therapeutic relationship and developing a sense of self were reported as the most emphasized clinical skills in the descriptive data. Integrating students' needs with planned subject matter was recommended by respondents in the qualitative data. Although research is scarce on how to conduct group supervision, the literature that does exist seems to be embraced by current group supervisors in internship. In other words, the descriptive and qualitative data that emerged from this study seem to support the methods that are present in the literature.

Implications of the Findings

Participating faculty far surpassed national and counselor education faculty trends in gender and ethnicity with the inclusion of more women and minority faculty. Although this may be indicative of only this sample, it is an area that should continue to be monitored and recognized. Additional optimism stems from the number of full-time faculty members in the department of respondents in the current study, for this number far surpasses CACREP minimum standards. In addition, the vast experience of participants in both counseling and supervision is noteworthy. Participants not only met CACREP standards for relevant experience but far surpassed them.

The CACREP standard for frequency and duration of group supervision for students completing internship was met among this group of participants. How

specializations and the unique individual needs of counselors-in-training are addressed seems quite varied. Participants reported a variety of approaches (e.g., checking in, rotating student leadership, structured peer feedback) to meeting students' needs in the qualitative data. Borders and colleagues (2012) found that supervisees reported feeling disappointed in their group supervision experience. Given this, it seems that further research is warranted surrounding ways to ensure that students have a satisfactory and growth producing group supervision experience.

Of great concern is the lack of supervisory training in group supervision.

Although the vast majority of faculty who participated in the study reported having training in supervision, few reported having had a class in group supervision and many reported not having completed a practicum in supervision. Although it may not be common practice to have a specific practicum in supervision, such training could enhance the experience of providing group supervision. It would interesting to survey group supervisors to see if they believed having such a practicum would have aided them in their initial group supervisory experiences. CACREP recognizes the importance of ensuring that supervisors have relevant training in supervision. To date, no specific guidelines have been developed around the training needed to provide group supervision. It may be helpful to consider developing such guidelines, particularly given the fact that group supervision is such a vital part of the department of counselors-in training.

Of the participants who responded to the open-ended question about addressing student deficiencies, most indicated that they utilize some form of gatekeeping practices. While these findings may be indicative of only the participants in this study, implementing such a practice aids in reducing the chances of graduating incompetent

counselors, causing potential harm to future clients, and decreasing chances of litigious situations (Bradley & Fiorini, 1999). Given the limited data that was gleaned from this study, it is difficult to know how student deficiencies are remediated in CACREP accredited programs. Gaubatz and Vera (2002, 2006) assert that there is a need for consistency across programs when addressing gatekeeping and remediation practices.

Although CACREP recommendations provide latitude with regards to some aspects of clinical training, they do stress the importance of developing helping relationships. In accordance with these recommendations and literature (e.g., Ladany et al., 2001), developing a therapeutic relationship was the most frequently denoted clinical skill in the descriptive data provided by the participants. Another highly valued clinical skill is the use of self, which participants reported using in their relationships with their supervisees. This is similar to the ideas presented by Hayes (2001) and Prieto (1998), who address the importance of using self in counseling.

It is noteworthy that participants in this study reported using empirically supported methods and techniques less frequently than other clinical skills. CACREP standards support the need for incorporating counseling methods and techniques that are research based. Yet, 20% of respondents reported in the descriptive data an infrequent use of use of empirically supported methods and techniques Sexton (1997) reminds the counseling field that methods and techniques must be driven empirically more and more, as is the expectations of the counseling employers.

As to how group supervision is being conducted, the responding supervisors reported at least regularly utilizing methods such as case conceptualization, group process within group supervision, audio and/or video, and Interpersonal Process Recall. These

methods are congruent with extant literature (Kagen & Kagen, 1997; Prieto, 1996; Riva & Cornish, 2008), and should be offered as training areas for supervisors, as well as encouraged as teaching strategies.

By the time counselors-in-training have entered internship, they should have developed their plan of study and field experiences around their chosen specialization. However, at least 50% of the participants reported not organizing group supervision around specializations, but rather attempting to meet individual needs in a mixed group setting. The vast majority also reported having to teach from standard syllabi. Ideally, group supervision in internship should be organized by specializations; however, when resources do not permit, then flexibility should be exercised in syllabi, class structure, and students setting their agenda for learning.

Limitations

Although the size of the current study's sample was representative of more than 10% of estimated numbers of supervisors providing group supervision in CACREP accredited programs nationally, it was still a small representation overall. The majority of participating supervisors was employed faculty, and over one-quarter identified as doctoral students. The wide range of experiences and training may have impacted how participants went about conceptualizing and practicing supervision. It was not possible to discern what best practices were from more seasoned supervisors and what they would have deemed most effective. Even so, answers provided were both informative and applicable.

CACREP (2009) suggests that faculty have earned doctoral degrees in counselor education and supervision, preferably from a CACREP-accredited program, or that they

have been employed as full-time faculty members in a counselor education program for a minimum of one full academic year before July 1, 2013. Participants identified their level of education, training, and employment status; however, it is unknown if their training was from a CACREP-accredited program. Nor was the quality of their training or type of training (i.e., practicum) clear. To place appropriate emphasis on responses, it would be helpful to know if the participants had relevant preparation and experience in their assigned program areas and if they were trained and are qualified according to a particular set of standards.

Recommendation for Future Research

Future research should take a more in-depth look at the experiences of group supervisors, internship site supervisors, and the counselors-in-training. To do so, another qualitative approach may garner more in depth and richer responses to analyze. One approach that would probably capture the essence of what is going on in group supervision more fully is phenomenology. Topics for three distinct studies include: (a) pairing groups supervisors with their group supervisees to capture their respective perceptions of group supervision, (b) interviewing internship site supervisors to capture their experiences of the students receiving group supervision on campus, and (c) conducting focus groups with group supervisors utilizing a semi-structured interview. In each of these studies it will important to create an interview protocol, pilot that protocol utilizing faculty who are providing group supervision, and incorporate the feedback received from the pilot. In addition, the researcher will need to have a number of probing questions designed to capture more in depth responses from the participants. For instance, a broad interview question may be, "describe your experiences of students' willingness to

address cases openly in supervision" and a probing question may be "you indicated that students often feel concerned about judgment when discussing cases; can you provide some examples of ways in which you overcome this hurdle with students." Utilizing the phenomenological approach allows the researcher the opportunity to capture primary themes and perhaps a composite narrative of those who are participating in the study.

It might also be important to compare the group supervision experiences of students who receive group supervision by specialization with those who receive group supervision in a mixed setting to discern if notable differences exist. One way to conduct such a study would be to develop an interview protocol that specifically targets the level of satisfaction experienced in each type of supervision. In an effort to get a sample that is representative of programs nationally, the researcher could consider creating an online chat room that is specific to the research question. In this type of study, the researcher could utilize a phenomenological or narrative qualitative approach.

Future research could also expand upon what has been learned in this study about on-campus group supervision by addressing the research questions from a purely qualitative approach. This allows the researcher to capture a more in-depth picture of the methods, clinical skills, and subject matter that group supervisors utilize when providing group supervision to counselors-in-training while participating in group supervision. For instance, the interview protocol could be designed to capture what current group supervisors see as the best method for teaching group supervision. With respect to clinical training, asking site supervisors "What is the most effective way to help students develop clinical skills in group supervision?" could aid counselor educators in integrating useful interventions into the group supervision process. Considering the importance of

evaluating competencies and integrating remediation processes into group supervision, group supervisors and site supervisors could be asked such questions as: (a) "What are the most important competencies students should possess?" and (b) "How are you measuring students' competencies?" Finally, a study could be conducted with potential employers to examine the competencies they look for in hiring beginning counselors.

Concluding Thoughts

In conclusion, the 2009 CACREP standards provide guidelines for counselor educators who provide group supervision to counselors-in-training. These standards were utilized to develop the online survey participants responded to in this study. This mixed-method study, although primarily descriptive, provides some promising information about the way that group supervision is being taught in the CACREP programs with which they are affiliated. For instance, with regards to CACREP standards for group supervision structure, the descriptive findings from this study support the notion that guidelines are being adhered to in these participants' institutions. Moreover, although the need for student evaluation, gatekeeping, and remediation was recognized by the participants in this study, the responses varied about how best to handle these concerns. Moreover, given the fact that this study had a small sample size and was descriptive in nature no inferences about the data can be made. Thus, more research is warranted in this area.

Appendix A

E-mail to Chairs Seeking Participants

Appendix A E-mail to Chairs Seeking Participants

Sent May 28, 2011

Subject: Group Supervisors in Internship Needed for Dissertation Research

Dear Dr. {LAST NAME},

I hope this e-mail finds you well. My name is Robert Powell and I am a doctoral candidate in the Counselor Education program at Western Michigan University.

My dissertation research is an investigation of the current state of group supervision in internship in master's level CACREP-accredited programs. The study will gather information on who is teaching, how group supervision is structured, the group composition for supervision, and how group supervision is being taught. The survey should take no more than 20-30 minutes. This research is being supervised by my faculty mentor and chair, Suzanne Hedstrom, Ed.D., and it has been approved by the Human Subjects Institutional Review Board at Western Michigan University.

To conduct the study, I need to contact instructors who are currently providing, or who have in the past year provided, on-campus group supervision to counseling student interns. My hope is that you are able to help by providing the name, phone number, and e-mail information of your instructors who meet this criterion, so that I may invite them to participate in the study.

In the next couple of days I will be contacting you via phone to ask you if you are willing to share the name of your internship instructors and their contact information. If you prefer, you may provide the requested information via e-mail (robert.r.powell@wmich.edu).

I know time is valuable and I truly appreciate your consideration in helping me attain contact information of those instructors that meet the criteria. Thank you for your time.

Sincerely,

Robert Powell, MA, LPC Suzanne Hedstrom, Ed.D. Counselor Education and Supervision Western Michigan University e-mail: Suzanne. hedstrom@wmich.edu

Appendix B

Script for Phone Follow-up Call to Chairs

Appendix B Script for Phone Follow-up Call to Chairs

Hello ________, allow me to introduce myself. I am Robert Powell, a doctoral candidate in Counselor Education at Western Michigan University, and I am currently conducting my dissertation research. Specifically, I am studying how group supervision is being conducted during internship. I recently e-mailed you a request for the name or names of the persons responsible for providing group supervision during internship in your program, and I've not yet heard from you.

I am hoping that you will be willing to give me the names of instructor(s) who have taught group supervision within the last year, if convenient, and their phone number and e-mail address.

Thank you

Appendix C

E-mail Invitation

Appendix C E-mail Invitation

Sent May 28, 2011

Subject: A request for help to gather data for an analysis of group supervision in

internships.

Dear Dr. {LAST NAME},

I hope this e-mail finds you well. My name is Robert Powell and I am a doctoral candidate in the Counselor Education program at Western Michigan University.

My dissertation research is investigating the current state of group supervision in internship in master's level CACREP-accredited programs. The study will gather information on who is teaching, how group supervision is structured, the group composition for supervision, and how group supervision is being taught. The survey should take approximately 20-30 minutes. This research is being supervised by my faculty mentor and chair, Suzanne Hedstrom, Ed.D., and it has been approved by the Human Subjects Institutional Review Board at Western Michigan University.

This survey is being sent to you because I obtained your contact information from the CACREP directory or your department's office. I know your time is valuable and I truly appreciate your consideration in submitting the survey.

If you would like to learn more about the study, the consent information and survey are available and can be accessed by clicking on the following link:

https://www.surveymonkey.com/s/W5DNV5B

If you have not taught group supervision in internship during the last year, I would appreciate it if you would please forward this e-mail to the appropriate instructor(s). Again, thank you for your time.

Sincerely,

Robert Powell, MA, LPC Suzanne Hedstrom, EdD Counselor Education and Supervision

Western Michigan University e-mail: Suzanne.hedstrom@wmich.edu

Appendix D

Informed Consent

Appendix D Informed Consent

Western Michigan University

Department: Counseling Education and Counseling Psychology

Principal Investigator: Dr. Suzanne Hedstrom

Student Investigator: Robert Powell

Name of Study: An Analysis of Group Supervision in Internships: A National Study

of Programs Accredited by CACREP

You have been invited to participate in a research project titled *An Analysis of Group Supervision in Internships: A National Study of Programs Accredited by CACREP*. This project will serve as Robert Powell's dissertation for the requirements of the Doctor of Philosophy in Counselor Education. This consent document will explain the purpose of this research project and will go over the time commitments, the procedures used in the study, and the risks and benefits of participating in this research project. Please read this consent form carefully and completely.

The purpose of this research is to study how group supervision is being provided during counseling students' internship experiences. The study will: gather general demographic information to develop profiles of faculty who are providing supervision; attempt to learn how specializations are being addressed in group supervision; identify trends and what is being considered best practices in how group supervision is being conducted; and address the supervisors experiences during counseling internships. The results may better inform instructors providing on-campus group supervision for counseling internships.

There is one requirement for participation in this study. The participants must be currently providing or have recently (in last year) provided on-campus group supervision as part of an internship experience at a CACREP-accredited counseling education program.

Taking the on-line survey should not take more than 20-30 minutes.

When completing the survey you will also be asked to provide general information about yourself, such as gender, ethnicity, teaching status, experience in both teaching and counseling, and training in supervision. Please keep in mind that this study was designed around questions that will develop a "snapshot" of who is teaching group supervision in internship, how group supervision is being structured, how group supervision is being taught, what is being considered best practices in providing group

supervision, and a description of the supervisors experience in providing group supervision.

As in all research, there may be unforeseen risks to the participant. One potential risk of participation in this project is that you may question the purpose and content of the questionnaire. Another potential risk could be questioning theoretical frameworks or methods used for conducting group supervision. If there are any concerns, Robert Powell is prepared to answer any questions that may arise.

One way in which you may benefit by completing survey questions is reflecting on the way in which you provide group supervision during counseling internships and gaining new insights. The results may also better inform instructors teaching counseling internships. The time commitment required for participation in this study is the only cost to you. Although there will not be any financial compensation, the results of the study will be available to you upon request.

All of the information collected from you through SurveyMonkey is confidential and anonymous. That means that your name will not appear on any papers on which this information is recorded. The results from SurveyMonkey will be transported into SPSS aggregately. Once the data are collected and analyzed they will be destroyed.

You may choose to stop at any time during the study for any reason without prejudice or penalty. You will experience no personal consequences if you choose to withdraw from this study. You may choose not to participate or you may withdraw from the study at any time by discontinuing answering questions on the survey and/or not submitting the survey to SurveyMonkey.

If you have any questions or concerns about this study, you may contact either Robert Powell at 517-262-1511 or Dr. Suzanne Hedstrom at 616-742-5069. You may also contact the chair of Human Subjects Institutional Review Board at 269-387-8293 or the vice president for research at 269-387-8298 with any concerns that you have.

This consent document has been approved for use for one year by the Human Subjects Institutional Review Board (HSIRB) of Western Michigan University.

Clicking on the "I agree button" indicates that you have read the purpose and requirements of the study and that you agree to participate.

Appendix E

Online Survey

Appendix E

Online Survey

2. Demographics						
*1	Please indicate which					

*1. Please indicate which of the following best describes your gender:
O Male
O Female
O Transgender
*2. Please indicate which of the following best describes how you personally identify:
O African American
O Caucasian
O Hispanic American
O Asian American
O Native American
O Biracial/Multiracial
Other (please specify
*3. Please indicate highest degree you attained.
O Doctorate
O Specialist's
O Master's
*4. Please indicate which of the following best describes your status at the University:
O Full-time
O Part-time
O Doctoral Student
*5. How many years experience do you have providing counseling?
2. How many years experience as you have providing counseling.
*6. How many years experience do you have providing counselor supervision?
*7. How many years of experience do you have providing group supervision?

*8. What training have you received in providing group supervision? (check all that apply)
Academic class that included supervision
☐ Academic class for supervision
☐ Academic class for supervision that included group supervision
Academic class for group supervision
Online class
Practicum in supervision
Workshop/Conference
Self-directed study - Reading
None
Other (please specify)
*9. How many CACREP-accredited master's programs does your institution have?
*10. How many full-time faculty does your department employ?
10. How many run time faculty does your department employ.
3. Group Supervision Structure
1. Are you asked to follow a standard syllabus for group supervision?
O Yes
O No
2. How many students do you have in each supervision group?

3. What is the length of time for each group supervision session? (e.g., 1.5 hours)
4. How often is group supervision held? (e.g., weekly)
 5. Which of the following best describes the supervision model you use in your group supervision of interns? (select only one) O Developmental Group Supervision
O Structured Group Supervision
O Systemic Peer Group Supervision
O Case Presentation Model
O An integration of more than one supervision model
O I don't follow a specific approach supervision
Other (please identify below)
Please feel free to discuss your model you marked or other models not listed.
6. How is group supervision facilitated to include planned material and/or immediate needs of supervisors?
○ 100% planned material
O 75% planned material/25% flexibility to meet immediate needs of supervisee
O 50% planned material/50% flexibility to meet immediate needs of supervisee
O 25% planned material/75% flexibility to meet immediate needs of supervisee
O 100% flexibility to meet immediate needs of supervisee
Disconfeel free to discouse your recovers
Please feel free to discuss your response
7. Is group supervision provided by specialization? (e.g., all school counselors)
O No – groups are not organized by specialization
O Yes – all groups are organized by specialization
O Yes – some groups are organized by specialization
If yes, what is (are) the specialization(s)

 8. If you offer group super focused on a specialization Less than 25% Over 25% Over 50% Over 75% 		ot organized	l by specializa	tion, how much tin	ne is		
o NA							
9. What do you consider	to be best	practices fo	or addressing s	specialization in gro	oup		
supervision?							
10. Please rate how often	each met	hod below i	s employed in	vour group			
10,110,001,000		21000001011	o compression in	r Jour Browp			
	never	seldom	regularly	almost always	always		
Case Conceptualization	0	0	0	0	0		
Role Play	0	0	0	0	0		
Audio and/or Video	0	0	0	0	0		
Interpersonal Process	0	0	0	0	0		
Recall							
Group Process within	0	0	0	0	0		
Group Supervision							
Other (please identify	0	0	0	0	0		
below)							
Please feel free to discuss	methods	marked or	other methods	not listed			
11. What do you consider	to be be	st practices f	for methods in	n providing group			
supervision?	•						
12. Please rate how often	each sub	ject area is i	ncluded in gro	oup supervision			
	never	seldom	regularly	almost always	always		
Diagnosis	0	0	0	0	0		
Clinical Skills	0	0	0	0	0		
Legal/Ethical Issues	0	0	0	0	0		
Dynamics within Group	0	0	0	0	0		
Supervision							

Multicultural Issues	0	0	0	0	0
Other (please identify	0	0	0	0	0
below)					

Please feel free to discuss subject areas marked or other areas not listed 13. What do you consider best practices for inclusion of subjects in group supervision?							
14. Please rate how frequently each of the clinical/counseling skills listed below are addressed in group supervision.							
	never	seldom	regularly	almost always	always		
Use of Self	0	0	0	0	0		
Therapeutic	0	0	0	0	0		
Relationship							
Empirically Supported	0	0	0	0	0		
Methods/Techniques							
Observation of	0	0	0	0	0		
Nonverbals							
Theory Integration	0	0	0	0	0		
Other (please identify							

Please feel free to discuss counseling skill frequencies or others not listed

Appendix F

HSIRB Approval

WESTERN MICHIGAN UNIVERSITY

Human Subjects Institutional Review Board

Date: April 17, 2012

To: Suzanne Hedstrom, Principal Investigator

Julie Davis, Co-Principal Investigator

Robert Powell, Student Investigator for dissertation

From: Amy Naugle, Ph.D., Chair MW Noug

Re: HSIRB Project Number 12-04-01

This letter will serve as confirmation that your research project titled "An Exploration of Group Supervision during Internship: A National Study of Programs Accredited by CACREP" has been **approved** under the **exempt** category of review by the Human Subjects Institutional Review Board. The conditions and duration of this approval are specified in the Policies of Western Michigan University. You may now begin to implement the research as described in the application.

Please note that you may **only** conduct this research exactly in the form it was approved. You must seek specific board approval for any changes in this project. You must also seek reapproval if the project extends beyond the termination date noted below. In addition if there are any unanticipated adverse reactions or unanticipated events associated with the conduct of this research, you should immediately suspend the project and contact the Chair of the HSIRB for consultation.

The Board wishes you success in the pursuit of your research goals.

Approval Termination: April 17, 2013

Walwood Hall, Kalamazoo, MI 49008-5456 PHONE: (269) 387-8293 FAX: (269) 387-8276

BIBLIOGRAPHY

- Agnew, T., Vaught, C., Getz, H., & Fortune, J. (2000). Peer group clinical supervision program fosters confidence and professionalism. *Professional School Counseling*, 4(1), 6-12.
- Akos, P., & Scarborough, J. (2004). An examination of clinical preparation of school counselors. *Counselor Education and Supervision*, 44(2), 96-107.
- Alderson, K. (2004). A different kind of outing: Training counselors to work with sexual minority clients. *Canadian Journal of Counseling. Special Issue: Innovations in Counsellor Education and Supervision*, 38(3), 193-210.
- Allen, F. (1924). The National vocational guidance association bulletin. Cambridge,MA: Bureau of Vocational Guidance, Graduate Schools of Education, Harvard University.
- Allison, K., Echemendia, R., Crawford, I., & Robinson, W. (1996). Predicting cultural competency: Implications for practice and training. *Professional Psychology:**Research and Practice, 27, 386-393.
- American Counseling Association. (2005) *Code of ethics and standards of practice*.

 Alexandria, VA: Author.
- American Psychological Association. (2005). *Policy Statement on Evidence--Based Practice in Psychology*. Retrieved from www2.apa.org/practice/ebpstatement.pdf
- Andersen, T. (1991). The reflecting team: Dialogues and dialogues about the dialogue.

 New York: W. W. Norton.

- Aronson, M. L. (1990). A group therapist's perspective on the use of supervisory groups in the training of psychotherapists. *Psychoanalysis and Psychotherapy*, *8*, 88-94.
- Association for Counselor Education and Supervision. (1966). Preliminary statement joint ACES- ASCA committee on the elementary school counselor. *Personnel and Guidance Journal*, 44, 659-661.
- Association for Counselor Education and Supervision. (1977). Standards for the preparation of counselors and other personnel services specialists. *Personnel and Guidance Journal*, 56, 596-601.
- Association for Counselor Education and Supervision. (1993). *Ethical guidelines for counselor educators and supervisors*. Alexandria, VA: Author.
- Baker, S., Exum, H., & Tyler, R. (2002). The developmental process of clinical supervisory in training: An investigation of the supervisor complexity model. *Counselor Education and Supervision*, 42, 56-69.
- Barker, D., & Benjamin, L. (2005). Creating a profession: The National Institute of Mental Health and the training of psychologists. In W. Pickren & S. Schneider (Eds.) *Psychology and the National Institute of Mental Health: A historical analysis of science, practice, and policy.*
- Batdorf, R. (1973). A proposed internship model for students in counselor education or supervision. *Counselor Education and Supervision*, 13(4), 273-280.
- Bernard, J., & Goodyear. (2008). Supervision interventions: Group supervision. Fundamentals of Clinical Supervision (4th ed.). Boston, MA: Pearson.

- Beutler, L., Machado, P., & Neufeldt, S. (1994). Therapist variables. In A. E. Bergin & S. L. Garfield (Eds.). *Handbook of psychotherapy and behavior change* (pp. 229-269). New York: Wiley.
- Bhat, C. (2005). Enhancing counseling gatekeeping with performance appraisal protocols. *International Journal for the Advancement of Counseling*, 27(3), 399-411.
- Bobby, C. & Kandor, J. (1994). Understanding the CACREP clinical standards.

 Developing and directing counselor education laboratories. Alexandria, VA:

 *American Counseling Association.
- Bogdan, R. C., & Biklen, S. K. (2002). *Qualitative research for education: An introduction to theory and methods* (4th ed.). Boston: Allyn & Bacon.
- Bogo, M., & McKnight, K. (2006). Clinical supervision in social work. *The Clinical Supervisor*, 24(1), 49-67.
- Borders, L. D. (1991). A systematic approach to peer group supervision. *Journal of Counseling and Development*, 69, 248-252.
- Borders, L. D. (2006). Snapshot of clinical supervision in counseling and counselor education. *The Clinical Supervisor*, 24(1), 69-113.
- Borders, L. D., & Brown, L. L. (2005). *The new handbook of counseling supervision*.

 Mahwah, NJ: Lahaska/Lawrence Erlbaum.
- Borders, L. D., & Leddick, G. (1987). *Handbook of counseling supervision*. Alexandria, VA: American Counseling Association.

- Borders, L. D., Welfare, L. E., Greason, P. B., Paladino, D. A., Mobley, A. K, Villalba, J. A., & Wester, K. I. (2012). Individual and triadic and group: Supervisee and supervisor perceptions of each modality. *Counselor Education and Supervision*, 51 (4), 281-295.
- Boy, A. (1967). Counselor education standards: A reconceptualization. *Counselor Education and Supervision*, 6, 350-352.
- Bradley, C., & Fiorini, J. (1999) Evaluation of counseling practicum: National study of programs accredited by CACREP. *Counselor Education and Supervision*, *39*(2), 110-119.
- Cantrell, D. (1958). Training the rehabilitation counselor. *Personnel and Guidance Journal*, *37*, 382-388.
- CACREP (1985). Accreditation procedures manual for counseling and related education programs. Alexandria, VA: American Association of Counseling and Development.
- CACREP (1988). *Accreditation procedures manual and application*. Alexandria, VA:

 Council for Accreditation of Counseling and Related Programs.
- CACREP (1994). Accreditation standards and procedures manual. Alexandria, VA:

 Council for Accreditation of Counseling and Related Educatational Programs.
- CACREP (2009). *Accreditation standards and procedures manual*, (2008). Retrieved January 23, 2008, from http://www.counseling.org/cacrep/2001standards700.htm.
- Chaiklin, H., & Munson, C. (1983). Peer consultation in social work. *Clinical Supervisor*, 1, 21-34.

- Christensen, T., & Kline, W. (2000). A qualitative investigation of the process of group supervision with group counselors. *Journal for Specialists in Group Work*, 25, 376-393.
- Christensen, T., & Kline, W. (2001). Anxiety as a condition for learning in group supervision. *The Journal for Specialists in Group Work*, 26, 385-396.
- Christiansen, A., Thomas, V., Kafescioglu, N., Karakurt, G., Lowe, W., Smith, W., & Wittenborn, A. (2011). Multicultural supervision: Lessons learned about an ongoing struggle. *Journal of Marital and Family Therapy*, *37*(1), 109-119.
- Constantine, M. (1997). Facilitating multicultural competency in counseling supervision:

 Operationalizing a practical framework. In D. B. Pope-Davis & H. L. K. Coleman (Eds.), *Multicultural counseling competencies: Assessment, education and training, and supervision.* Thousand Oaks, CA: Sage.
- Constantine, M. (2001). Theoretical orientation, empathy, and multicultural counseling competence in school counselor trainees. *Professional School Counseling*, *4*, 342-348.
- Constantine, M., & Gushue, G. (2003). School counselors' ethnic tolerance attitudes and racism attitudes as predictors of their multicultural case conceptualization of an immigrant student. *Journal of Counseling and Development*, 81(2), 185-190.
- Constantine, M., & Ladany, N. (2000). Self-report multicultural counseling competence scales: Their relation to social desirability attitudes and multicultural case conceptualization ability. *Journal of Counseling Psychology*, 47, 155-164.

- Creswell, J. W. (1998). Qualitative inquiry and research design: Choosing among five traditions. Thousand Oaks, CA: Sage.
- Creswell, J. W. (2003). *Research design: Qualitative, quantitative, and mixed methods* approaches (2nd ed.). Thousand Oaks, CA: Sage.
- Crether, H. (2008). How shall I evaluate you? Determining supervisee inexperience, impairment, or incompetence. In L. Tyson, J. Culbreth, & J. Harrington (Eds.), Critical incidents in clinical supervision: Addictions, community and school counseling. Alexandria, VA: American Counseling Association.
- Crutchfield, L., Price, C., McGarity, D., Pennington, D., Richardson, J., & Tsolis, A. (1997). Challenge and support: Group supervision for school counselors.

 *Professional School Counseling, 1(1), 43-46.
- deMarrais, K. (2003). Qualitative interview studies: Learning through experience. In K. deMarrais & S. D. Lapan (Eds.), Foundations for research: Methods of inquiry in education and the social sciences (pp. 51-68). Mahwah, NJ: Lawrence Erlbaum Associates.
- Diala, C., Muntaner, C., Walrath, C., Nickerson, K., & LaVeist, T. (2001). Racial ethnic difference in attitudes toward seeking professional mental health services. *Journal of Public Health*, 1(5), 805-807.
- Dinsmore, J. A., & England, J. T. (1996). A study of multicultural counseling training at CACREP-accredited counselor education programs. *Counselor Education and Supervision*, *36*, 58-77.

- Delaney, D., & Moore, C. (1966). Student expectations of the role of practicum supervisor. *Counselor Education and Supervision*, 6(1), 11-17.
- Dreikurs, R., & Sontegard, M. (1966). A specific approach to practicum supervision.

 Counselor Education and Supervision, 6(1), 18-25.
- Duan, C., & Roehlke, H. (2001). A descriptive "snapshot" of cross-racial supervision in university counseling center internships. *Journal of Multicultural Counseling and Development*, 29(2), 131-146.
- Dugan, W. (1960). The impact of NDEA upon counselor preparation. *Personnel and Guidance Journal*, *3*, 37-40.
- Ellis, M., & Douce, L. (1994). Group supervision of novice clinical supervisor: Eight recurring issues. *Journal of Counseling and Development*, 72, 520-525.
- Ellison, L. (2008). Competence, clinical, oversight, and clarification of roles: Whose job is it anyway? In L. Tyson, J. Culbreth, & J. Harrington (Eds.), *Critical incidents in clinical supervision: Addictions, community and school counseling.* Alexandria, VA: American Counseling Association.
- Enyedey, K., Arcinue, F., Puri, N., Carter, J., Goodyear, R., & Getzelman, M. (2003).

 Hindering phenomena in group supervision: Implication for practice. *Professional Psychology: Research and Practice*, *14*(3), 312-317.
- Fleming, L., Glass, J., Fujisaki, S., & Tonner, S. (2010). Group process and learning: A grounded theory model of group supervision, *Training and Education in Professional Psychology*, 4(3), 194-203.

- Forster, J. (1977). An introduction to the standards for the preparation of counselors and other personnel services specialists. *Personnel and Guidance Journal*, 4, 595-601.
- Frame, M., & Stevens-Smith, P. (1995). Out of harm's way: Enhancing monitoring and dismissal processes in counselor education programs. *Counselor Education and Supervision*, *35*, 118-129.
- Freeman, B., & McHenry, S. (1996). Clinical supervision of counselors-in-training: A nationwide survey of ideal delivery, goals, and theoretical influences. *Counselor Education and Supervision*, 36, 136-158.
- Gainor, K., & Constantine, M. (2002). Multicultural group supervision: A comparison of in-person versus Web-based formats. *Professional School Counseling*. Retrieved on September 13 2008 from FindArticles.com at http://findarticles.com/p/articles/mi_m0KOC/is_2_6/ai_96194760
- Gillam, S. L., & Crutchfield, L. (2001). Collaborative group supervision of practicum students and interns. *Clinical Supervisor*, 20(1), 49-59.
- Gladding, S., & Newsome, D. (2004). *Community and agency counseling*. Columbus, OH: Merrill Prentice Hall.
- Glaser, B. G., & Strauss, A. (1967). The discovery of grounded theory: Strategies for qualitative research. Chicago: Aldine.
- Gross, S. (2005). Student perspectives on clinical and counseling psychology practica.

 Professional Psychology: Research and Practice, 36(3), 22-306.

- Haber, R., Marshall, D., Cowan, K., Vanlandingham, A., Gerson, M., & Fitch, J. (2009). "Live" supervision of supervision: "Perpendicular" interventions in parallel processes. *The Clinical Supervisor*, 28(1), 72-90.
- Haight, D. (2003). Robert O. Stripling. New York: Brunner Routledge.
- Hawkins, P., & Shohet, R. (1989). *Supervision in the helping profession*. Milton Keynes, U.K.: Open University Press.
- Hays, D., Dean, J., & Chang, C. (2007). Addressing privilege and oppression in counselor training and practice: A qualitative analysis. *Journal of Counseling & Development*, 85(3), 317-324.
- Hayes, R. (1990). Developmental group supervision. *The Journal for Specialists in Group Work*, 15(4), 225-238.
- Heppner, M., & O'Brien, K. (1994). Multicultural counselor training: Student's perceptions of helpful and hindering events. *Counselor Education and Supervision*, *34*(1), 4-18.
- Heppner, P. P., Kivlighan, D. M., & Wampold, B. E. (1999). *Research design in counseling*. Boston: Brooks/Cole.
- Hill, C. E., Thompson, B. J., & Williams, E. N. (1997). A guide to conducting consensual qualitative research. *The Counseling Psychologist*, 25, 517-532.
- Hill, G. (1967). The profession and standards for counselor education. *Counselor Education and Supervision*, 6(2), 130-136.

- Hoffman, L. (2007). Practicing "witness": A human art. In H. Anderson & P Jensen, (Eds.). *Innovations in the reflecting process: The inspirations of Tom Andersen*. London, England: Kamac Books.
- Holloway, E. (1982). Characteristics of the field practicum: A national survey. *Counselor Education and Supervision*, 22, 75-80.
- Holloway, E., & Johnston, R. (1985). Group supervision: Widely practiced but poorly understood. *Counselor Education and Supervision*, 24, 332-340.
- Huprich, S., & Rudd, M. (2004). A national survey of trainee impairment in clinical, counseling, and school psychology doctoral programs and internships. *Journal of Clinical Psychology*, 60(1), 43-52.
- Jordan, K. (1999). Live supervision for beginning therapists in practicum: Crucial for quality counseling and avoiding litigation. *Family Therapy*, 26(2), 81-86.
- Kaslow, N., Rubin, N., Forrest, L., Elman, N., Van Horne, B., Jacobs, S., Huprick, S.,
 Benton, S., Pantesco, V., Dollinger, S., Grus, C., Behnke, S., Miller, D., Shealy,
 C., Mints, L, Schwartz-Mette, R., & Van Sickle, K. (2007). Recognizing,
 assessing, and intervening with problems of professional competence.
 Professional Psychology: Research and Practice, 38(5), 479-492.
- Kagan, H., & Kagan, N. (1997). Interpersonal process recall: Influencing human interaction. In C. Watkins (Ed.). *Handbook of psychotherapy supervision*. New York: John Wiley.

- LaRoche, M. J., & Christopher, M. S. (2009). Changing paradigms from empirically supported treatment to evidence-based practice: A cultural perspective.

 *Professional Psychology: Research & Practice, 40(4), 396-402.
- Ladany, N., Inman, A., Constantine, M., & Hofheinz, E. (1997). Supervisee multicultural case conceptualization ability and self-reported multicultural competence as functions of supervisee racial identity and supervisor focus. *Journal of Counseling Psychology*, 44(3), 284-293.
- Ladany, N., Lehman-Waterman, D., Molinaro, M., & Wolgast, B. ((1999). Psychotherapy supervisor ethical practices: Adherence to guidelines, the supervisory working alliance, and supervisee satisfaction. *Counseling Psychologist*, 27, 443-475.
- Lambert, M. & Ogles, B. (1997). The effectiveness of psychotherapy supervision. In C. E. Watkins (Ed.), *Handbook of psychotherapy supervision* (pp. 421-446). New York: Wiley.
- Lambie, G., & Sias, S. (2009). An integrative psychological developmental model of supervision for professional school counselors-in-training. *Journal of Counseling & Development*, 87, 349–356.
- Lazovsky, R., & Shimoni, A. (2007). The on-site mentor of counseling interns:

 Perceptions of ideal role and actual role performance. *Journal of Counseling & Development*, 85(3), 303-316.
- Lewis, G., Greenburg, S., & Hatch, D. (1988). Peer consultation groups for psychologists in private practice: A national survey. *Professional Psychology: Research and Practice*, 9, 81-86.

- Linton, J., & Deuschle, C. (2008). Four models of group supervision. *Journal of School Counseling*, 4(6), 1-27.
- Linton, J., & Hedstrom, S. (2006). An exploratory qualitative investigation of group processes in group supervision: Perceptions of master's level practicum students.

 *Journal of Specialists in Group Work, 31, 51-72.
- Lumadue, C., & Duffey, T. (1999). The role of graduate programs as gatekeepers: A model for evaluating student counselor competence. *Counselor Education and Supervision*, 39(2), 101-109.
- Magyar-Moe, J, Pedrotti, J., Edwards, L., Ford, A., Petersen, S., Rasmussen, H., & Ryder, J. (2005). Perceptions of multicultural training in predoctoral internship programs: A survey of interns and training directors. *Professional Psychology:**Research and Practice, 36(4), 446-450.
- McDaniels, G. (1967). The impact of federal aid on counselor education. *Counselor Education and Supervision*, 6, 263-273.
- Miller, J., & Koerin, B. (2001). Gatekeeping in the practicum: What field instructors need to know. *The Clinical Supervisor*, 20(2), 1-18.
- Montalvao, B. (1973). Aspects of live supervision. Family Practice, 12, 343-359.
- Murphy, S., & Kaffenberg C. (2007). ASCA National Model: The foundation for supervision of practicum and internship students. *The Professional Counselor*, 10(3), 289-297.

- National Committee for Standards for the Preparation of Secondary School Counselors, (1967). Manual for self-study by a counselor education staff. Washington, DC:

 American Personnel and Guidance Association.
- National Mental Health Information Center. (2008). Mental health policy in 20th-century

 America. *Looking ahead and reflecting upon the past*. Retrieved March 12, 2008

 from

 http://mentalhealth.samhsa.gov/publications/allpubs/SMA013531/chapter2.asp.
- Neufeld, P. (2008). How shall I evaluate you? Determining supervisee inexperience, impairment, or incompetence. In L. Tyson, J. Culbreth, & J. Harrington (Eds.), Critical incidents in clinical supervision: Addictions, community and school counseling. Alexandria, VA: American Counseling Association.
- Nutt-Williams, E. N., & Hill, C. E. (2001). Evolving connections: Research that is relevant to clinical practice. *American Journal of Psychotherapy*, *55*, 336-344.
- Orlinsky, D., Gawe, D., & Parks, B. (1994). Process and outcome in psychotherapy. In A.E. Bergin & S. L. Garfield (Eds.), *Handbook of psychotherapy and behavior Change*, pp. 270-378. New York: Wiley.
- Patterson, C. (1967) The practicum requirement in "standards 1967 edition". *Counselor Education and Supervision*, 6(4), 352-354.
- Prieto, L. (1998). Practicum class supervision in CACREP-accredited counselor training programs. *Counselor Education and Supervision*, *38*(2), 113-123.
- Prieto, L. (1996). Group supervision: Still widely practiced but poorly understood.

 *Counselor Education and Supervision, 35(4), 295-307.

- Pitts, J. (1992). Organizing a practicum and internship program in counselor education.

 Counselor Education and Supervision, 31(4), 196-207.
- Prest, L., Darden, E., & Keller, J. (1990). "The fly on the wall" reflecting team supervision. *Journal of Marital and Family Therapy*, 1(3), 265-273.
- Raines, B. (1966). An approach to practicum for the elementary school counselor.

 *Personnel and Guidance Journal, 44, 67-78.
- Ray D., & Altekruse, M. (2000). Effectiveness of group supervision versus combined group and individual supervision. *Counselor Education and Supervision*, 40, 19-30.
- Riva, M., & Cornish, J. (1995). Group supervision practices at psychology predoctoral internship programs: A national survey. *Professional Psychology: Research and Practice*, 26, 523-525.
- Riva, M., & Cornish, J. (2008). Group supervision practices at psychology predoctoral internship programs: 15 years later. *Training and Education in Professional Psychology*, 2(1), 18-25.
- Roland, C., & Fontanesi-Seime, M. (1996). Women counselor educators: A survey of publication. *Journal of Counseling and Development*, 74(5), 490-494.
- Ronnestad, M., & Skovholt, T. (1993). Supervision of beginning and advanced graduate students of counseling and psychotherapy. *Journal of Career Development*, 71(4), 396-405.

- Ronnestad, M., & Skovholt, T. (2003). The journey of the counselor and therapist:

 Research finding and perspectives on professional development. *Journal of Career Development*, 30(1), 5-44.
- Rubin, N., Bebeau, M., Leigh, I. Lichtenberg, J., Nelson, P., Portnove, S., Smith, I. L., & Kaslow, N. (2007). The competency movement within psychology: An historical perspective. *Professional Psychology: Research and Practice*, *38*(5), 452-462.
- Russell-Chapin, L., & Ivey, A. (2004). Your supervised practicum and internship: Field resources for turning theory into action. Belmont, CA: Brooks/Cole.
- Schmidt, L. (1960). Guidance internship training at Indiana University. *Personnel and Guidance Journal*, 2, 577-579.
- Sexton, T. (2000). Reconstructing clinical training: In pursuit of evidence-based clinical training. *Counselor Education and Supervision*, *39*, 218-227.
- Sexton, T., Whiston, S., Bleuer, J., & Walz, G. (1997). *Integrating outcome research into counseling practice and training*. Alexandria, VA: American Counseling Association.
- Stadler, H., & Stahl, E. (1979). Trends in community counseling. *Counselor Education* and *Supervision*, 19(1), 42-48.
- Startling, P. V., & Baker, S. B. (2000). Structured peer group practicum supervision: Supervisees' perception of supervision theory. *Counselor Education and Supervision*, 39, 162-176.
- Stripling, R. (1978). Standards and accreditation in counselor education: A proposal. *The Personnel and Guidance Journal*, *56*, June, 608-611.

- Stahl, E., & Havens, R. (1978). The case for ACES program accreditation. *Counselor Education and Supervision*, 17(3), 180-187.
- Stoltenberg, C., McNeil, B., & Delworth, U. (1998). *IDM supervision: An integrated developmental model for supervising counselors and therapists*. San Francisco: Jossey-Bass.
- Sue, D. W., & Sue D. (2003). *Counseling the culturally diverse: Theory and practice* (4th ed.). New York: Wiley
- Swain, E. (1968). The standards movement in guidance and its importance to the profession. *Counselor Education and Supervision*, 7(3SP), 164-171.
- Tebb, S., Manning, D., & Klaumann, T. (1996). A renaissance of group supervision in practicum. *The Clinical Supervisor*, *14*, 39-51.
- Tooker, E. (1957). Counselor role: Counselor training. *Personnel and Guidance Journal*, *3*, 263-267.
- Trolley, B. (2008). How shall I evaluate you? Determining supervisee inexperience, impairment, or incompetence. In L. Tyson, J. Culbreth, & J. Harrington (Eds.), *Critical incidents in clinical supervision: Addictions, community and school counseling.* Alexandria, VA: American Counseling Association.
- U.S. Department of Health and Human Services (2001). *Mental health: Culture, race,*and ethnicity A supplement to mental health: A report of the surgeon general.

 Rockville, MD: U.S. Department of Health and Human Services.

- U.S. Census Bureau. (2004). Projected births by sex, race, and Hispanic origin for the United States: July 1, 2000 to June 30, 2050. Retrieved May 28, 2011 from http://www.census.gov/population/www/projections/2009projections.html
- U.S. Census Bureau. (2010). Quick facts. Retrieved April 7, 2012 from http://quickfacts.census.gov/qfd/states/00000.html
- Vacc, N. (1985). CACREP accredited programs: Survey results. *Counselor Education* and Supervision, 2, 384-390.
- Walton, J. (1980). NDEA participants prepared for inner-city counseling: A 10-year follow up. *Counselor Education and Supervision*, 20(1), 50-55.
- Whiston, S., & Coker, J. K., (2000). Reconstructing clinical training: Implications from research. *Counselor Education and Supervision*, 39(4), 228-253.
- Wilbur, M., Roberts-Wilbur, J., Hart, C., Morris, J., & Betz, R. (1994). Structured group supervision: A pilot study. *Counselor Education and Supervision*, *33*, 262-279.
- Williams, A. (1995). Visual and active supervision: Roles, focus, techniques. New York:W. W. Norton.
- Wittmer, J. (1994). Evolution of the CACREP standards. In J. Myers (Ed.) *Developing* and directing counselor education laboratories. Alexandria, VA: American Counseling Association.
- Women in Academia Report. (February 23, 2012). The gender gap in STEM faculty may persist for a century. Retrieved April 7, 2013 from http://search.proquest.com.libproxy.library.wmich.edu/pqrl/docview/1038090027/ 13D4600193457DE07BD/1?accountid=15099