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7

School Counseling in the Aftermath of COVID-19: Perspectives of School Counselors in Tennessee



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School Counseling in the Aftermath of COVID-19: Perspectives of School Counselors in Tennessee

Chloe Lancaster, Michelle W. Brasfield

COVID-19 restrictions adversely affected youth in multiple ways: unhealthy eating habits, increased screen time, reduced physical activity, sleep disturbances, academic delays, social problems, and an overall escalation in their mental health concerns. For students experiencing COVID-19–related distress, symptomology has reportedly persisted beyond school reentry. School counselors are the most accessible mental health professionals in schools and are trained in crisis counseling, yet they face high counselor caseloads and onerous non-counseling duties that compromise service provision. This study used an exploratory survey design to investigate the perspectives of 207 school counselors in Tennessee regarding (a) students' COVID-19–related mental health, academic functioning, and interpersonal skills; (b) interventions school counselors have deployed to support students; and (c) barriers they have encountered.

To answer the research questions, we developed a 64-item survey disseminated electronically to 207 predominantly White female school counselors in Tennessee, the majority of whom worked in Title I schools.

Of the responding Tennessee school counselors, nearly 94% reported negative changes to students' mental health. Depression and suicidality were significant concerns for middle and high school counselors, and substance abuse was significant at the high school level. A large majority (90%) of school counselors also reported negative changes to students' academics. Our results expand previous research by explicitly connecting stalls in students' academic progress to psychological factors. Alongside academics, 87% of school counselors reported negative changes in students' social skills. Although the ability to get along with peers may be uniquely linked to social isolation during lockdown, the increase in all forms of bullying has implications for overall school safety, with victimization and perpetration both positively associated with school violence. The preponderance of school counselors relied on individual counseling, consultation, referrals, collaboration with other school-based helpers, and coping skills instruction, all of which are consistent with crisis-level support. Nonetheless, only 44% of the sample, primarily elementary school counselors, had used small-group counseling, despite its proven efficacy with children exposed to trauma. Our state-level findings resonate with studies that indicate school counselors' non-counseling duties increased during the pandemic while administrator support declined.

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Read full article and references:

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An Examination of Client Bias Toward Overweight, Underweight, and Average-Weight Counselors

Amy Biang, Clare Merlin-Knoblich, Stella Y. Kim

Body weight can inform a client's perception of a health professional's level of authority, trust, and competence. Research on weight bias is necessary for counseling, given that counselor attributes have the potential to be an integral part of a client's decision-making and change process. Attributes of a counselor that may affect client impressions, such as attractiveness or race, illuminate the social influence process of counseling. Weight bias continues to be a product of social influence, and as such, weaves stereotypes into the minds of those who consume the message of weight as a moral indiscretion. As clients seek, build trust with, and consider life changes with a counselor, weight bias should be explored as a potential issue for counselors.

In this study, we examined if client weight bias influences a client's trust in a counselor's competence, willingness to follow a counselor's advice, and desire to select a counselor for therapy. We asked: 1) Does a counselor's weight impact a client's decision to trust, follow advice, and select the counselor? 2) Is there an association between a client's antifat attitudes and weight bias toward counselors? 3) Are there differences in weight bias toward counselors based on the socio-demographics of the clients using their services? and 4) Do participants with eating disorders have similar perceptions of counselors due to weight bias as those without eating disorders?

We conducted a quasi-experimental research design using the revised Physician Weight Survey, a 32-item questionnaire designed to assess client weight bias of counselors perceived as overweight, underweight, or average weight. We performed a one-way analysis of variance using participants' scores across three subscales and overall weight bias, calculated by summing their responses across subscales from the Antifat Attitudes Questionnaire.

Results indicated that clients might use weight to select a counselor, trust the counselor's competence, and follow their counsel. Participants in this study slightly preferred the average-weight counselor to an overweight counselor, with higher weight bias directed at an underweight counselor. Some results indicated increased advice following with an average-weight counselor instead of an overweight counselor, but more surprising results suggested that participants would prefer an overweight or average-weight counselor to an underweight counselor. Participants scored counselors perceived as underweight significantly lower on a client's willingness to select, trust, and follow a counselor's advice than average-weight and overweight counselors. Additionally, participants with eating disorders were not significantly different from participants without eating disorders in weight bias toward counselors in any of the variables. Lastly, people with previous counseling experience had similar levels of weight bias to those who had not worked with a counselor.

Many people see weight as a medical concern instead of a social justice issue. This idea limits the amount of education and training counseling graduate students receive on the topic of weight. Despite years of education and experience, weight bias may rule out working with competent counselors. Weight is a part of intersectional identities, and counselors must train to be sensitive to and inclusive of weight. Counselors should also acknowledge that stereotypes, discrimination, and oppression influence the counseling relationship. Lastly, counselors should not ignore weight bias as a possible stereotype and should be comfortable discussing it with their clients.

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Read full article and references:

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Teen Dating Violence: Examining Counseling Students' Responses to Gendered Vignettes

Kelly Emelianchik-Key, Bridget Glass, Adriana C. Labarta

Teen dating violence (TDV) is pervasive in the United States and affects youth's emotional and physical safety. The consequences of TDV are long-term and often trickle over into future adult relationships, leading to pervasive mental and physical health problems. In teens, gender symmetry is prevalent, which means that both people in the dating relationship experience and perpetrate violence equally, but not necessarily in terms of severity or frequency. Despite the alarming impacts of TDV, research has found that counselors may be unprepared to work with TDV because of gaps in graduate education and continuing education across counseling settings. Counselors may also hold biases concerning perpetrators and survivors, which can perpetuate the stigma associated with TDV. Because TDV is a clinical concern that affects teen clients' safety and other areas of their lives, counselors must be adequately trained and aware of personal biases that may influence the assessment and treatment of abuse survivors.

We conducted a qualitative study to explore how counseling students conceptualize and propose treatment for TDV. First, we developed two identical case vignettes with only one key difference: the gender of the client. Each participant was randomly assigned one of the two cases and was asked to respond to a series of client conceptualization and treatment questions. After analyzing counseling students' responses to various prompts, we found six overarching categories with 19 related themes. The overarching categories included (a) case conceptualization and clinical impressions, (b) diagnostic impressions, (c) relationship considerations, (d) clinical concerns, (e) treatment approaches, and (f) gender bias. The most notable finding of the study was gender bias, with all categories highlighting gender disparities in the treatment of TDV. For example, some counseling students used the term "survivor" to describe the female client, while none used the term to describe the male client.

Our findings highlight the importance of enhanced counselor training and preparation in TDV during graduate school and beyond. Additionally, counselors must engage in self-reflection and explore personal biases and assumptions related to TDV that may negatively impact treatment and perpetuate stigma. Recommendations for enhanced TDV training include an increased focus on (a) trauma-informed and strengths-based treatment approaches; (b) theoretical frameworks to deconstruct TDV stigma, such as feminist theory and conflict theory; (c) case conceptualization and assessment skills; and (d) ethical issues relevant to the treatment of TDV. We conclude our paper by reviewing the limitations of our study and directions for future research to continue bridging research–practice gaps. For example, we encourage counselors and researchers to consider the impact and experiences of TDV on clients with underrepresented gender identities, such as transgender and nonbinary individuals. Overall, our findings illuminate the need for ongoing advocacy and training within the counseling profession to serve adolescent clients better and effectively treat TDV across counseling settings.

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Perceptions and Experiences of School Counselor Trainees on Self-Care Grounded in Mindfulness and Social–Emotional Learning

Kyoung Mi Choi, Jung H. Hyun

The COVID-19 pandemic has significantly impacted our daily lives, including the way we interact, work, and learn. With increased emotional distress and mental health issues among K–12 students, self-care has become a crucial topic in schools and workplaces. At the same time, school counselors also face burnout, fatigue, and other challenges, making self-care more critical than ever before.

Leading counseling organizations, such as the American Counseling Association (ACA) and the Council for Accreditation of Counseling and Related Educational Programs (CACREP), view self-care not only as an individual responsibility but also a professional one. Therefore, prioritizing self-care practices is essential for school counselors to maintain their personal and professional well-being.

Self-care involves engaging in activities or behaviors that promote overall wellness and prevent burnout. Some scholars consider self-care to be the start of personal power and a process of humanization in education that is reciprocal, anti-oppressive, and supportive of collective well-being. Dismantling oppressive ideologies and power structures is also an essential objective in the transformative process of self-care, which involves critical self-reflection, recognition of dehumanization, and reclaiming agency.

Mindfulness-based self-care has emerged as a promising approach for addressing challenges and provides a unique opportunity for school counselors to reflect on their identities within societal and cultural contexts. Additionally, the social-emotional learning (SEL) framework can be helpful in self-care training by outlining specific skills essential for managing stress, fostering well-being, and developing advocacy in both personal and professional contexts.

A study using a transcendental phenomenological approach explored the perceptions and experiences of school counselor trainees participating in a self-care course grounded in mindfulness and SEL. The study included seven students who enrolled in a master’s-level school counseling program and completed a summer self-care course. The findings revealed five key themes, including the transformation process, the importance of self-care in counseling preparation programs, and the empowering effects on graduate students becoming agents of change. Participants experienced a transformation leading to a change in their relationship with their minds, bodies, and emotions. This transformation extended to their relationships with family, friends, students, and colleagues, empowering them to be more engaged with their communities and society.

In conclusion, self-care is crucial for school counselors to maintain their personal and professional well-being, and leading counseling organizations view it as a professional responsibility. Mindfulness-based self-care and the SEL framework provide promising approaches for addressing the challenges school counselors face. The study’s findings reveal the transformative effects of a self-care course grounded in mindfulness and SEL, emphasizing the importance of self-care in counseling preparation programs and the empowering effects on graduate students becoming agents of change.

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Adult Adoptees' Adoption-Related Experiences of Counseling, Loss, and Grief: A Transcendental Phenomenological Study

Marissa Meyer, Elizabeth Wiggins, Gregory M. Elliott

It is estimated that over 100 million Americans are connected to adoption in some manner. Given the rise of adoption in the United States and the counseling needs of adoptees, counselors are likely to encounter an adult adoptee or adoption-connected client during their career. Although counseling-related research has explored the experience of youth who have been adopted, little has been done to prepare counselors to work with adoptees who have entered adulthood. Gaining a deeper grasp of the impact of adoption on adult adoptees' mental health and potential distress in adulthood is an important consideration for counselors.

One important aspect of exploring adult adoptees' experiences with mental health and counseling is understanding how they experience and process feelings of loss and grief related to their adoption. For years, researchers have explored the impact of adoption, notably during childhood and adolescence, with an emphasis on social adjustment and mental health compared to non-adoptees. Yet, research is limited concerning the experience of adult adoptees and how they process grief and loss throughout their lifetime. What we do know is that loss is a predominant theme in the lives of adoptees, and it often is not fully acknowledged until middle adulthood. This may be because loss is too complex for children to comprehend fully. As adoptees developmentally transition from childhood into adulthood, their perception of adoption and their identity formation likewise evolve.

In addition to adult adoptees' experiences with grief and loss, there is a need for a greater understanding of how counselors can prepare to work with people who have been adopted. Adoption has been shown to have an impact on mental health, including higher rates of depression, anxiety, and relationship-related issues. Adult adoptees need someone who understands their experiences and helps them explore the impact adoption has on their lives. When counselors are prepared to address the topic of adoption, clients report higher levels of therapeutic satisfaction. Counselors working with adoptees may benefit from treating a client's adoptee status as an area of multicultural diversity and studying the relevant literature to help develop competence.

Driven by a desire to understand more about the experiences of adult adoptees and a passion to prepare counselors to work with this population, we launched a transcendental phenomenological research study. We interviewed seven adult adoptees regarding their lived experiences of growing up as an adoptee and how this shaped their perception of loss, grief, and counseling in relation to their adoption. Our study revealed helpful information about how the participants integrated their adoption story into their life narrative and whether loss, grief, and working with a counselor were significant integration factors. As a result, six themes emerged, including ambivalence toward loss and grief, how one's adoption story was impactful, issues with connection, identity curiosity, relational distrust, and involvement with counseling. In our article, we discuss these findings and identify implications for counselors working with adoptees.

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Read full article and references:

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A Phenomenological Exploration of Counselors-in-Training's Experiences of Microaggressions From Clients

Corrine R. Sackett, Heather L. Mack, Jyotsana Sharma, Ryan M. Cook, Jardin Dogan-Dixon

The cultural experiences and backgrounds of clients and counselors impact the counseling relationship, counseling process, treatment selection, and outcomes. Microaggressions occur in the counseling process, as they do in everyday life, yet there is little literature about how counselors-in-training (CITs) experience microaggressions from clients or how they may respond to clients who may perpetuate microaggressions against them in a therapeutic setting. CITs with marginalized identities are often uncertain of whether or how to respond to microaggressions in counseling sessions in a way that is not harmful to the counseling relationship. Therefore, in this study, we explored CITs' experiences of microaggressions from clients in the counseling process. We utilized a constructivist hermeneutic phenomenological approach, which is reflective and focused on the lived experiences of participants. By specifically focusing on CITs' experiences of microaggressions from clients, we gained insight into these experiences and offered implications for CITs, counselor educators, and supervisors in navigating this phenomenon in the counseling process.

Participants consisted of six CITs from CACREP-accredited counselor education programs in the United States with specialty areas in either clinical mental health or school counseling. The participants were either currently enrolled in, or had completed, practicum or internship in their program. All participants reported having experienced at least one microaggression from a client, targeted at one or more marginalized identities of the CIT. We conducted two interviews with each participant to understand their experiences.

Interviews with participants revealed the following themes: (a) internal reactions; (b) attempts to contextualize, (c) prevalence of microaggressions, (d) navigating microaggressions, and (e) seeking support. The first theme, internal reactions, embodied what was happening internally with CITs as they experienced microaggressions in the counseling process. This theme included subthemes and experiences of being caught off guard, feeling discomfort, and imposter phenomenon. The next theme encompassed CITs' perspectives that microaggressions are part of their lives and ongoing experiences, and in some cases the CITs described feeling a bit numb to microaggressions. The next theme indicated how CITs navigated, or thought about navigating, microaggressions with clients. These responses ranged broadly from fear of responding genuinely to letting it go, attempting to redirect, directly responding, and avoiding. The final theme, seeking support, captured participants' experiences (or lack thereof) of seeking and finding support from their sites, university supervisors and faculty, and families and peers.

The findings from this study provided insight into how CITs experienced microaggressions from their clients and how they chose to handle those situations. CITs responded to microaggressions from clients in varied ways, including the degree to which they discussed their experiences, and with whom, and not responding at all. In the CITs' decision-making process, they considered their position of power in the counselor role, the impact of response on the counseling relationship, the intentionality of clients' microaggressions, and their own emotional well-being. We hope this manuscript enriches the understanding of client-based microaggressions and we offer implications for CITs, counselor educators, and supervisors.

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