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FROM THE EDITOR

One of the hallmarks of the profession of counseling is that counselors work in many different settings. We have counselor educators and supervisors who provide direction to not only agency and private practice counselors, but to counselors who work in school settings. In that vane, Dr. Shawn Bultsma increases our knowledge about the need for better supervision for beginning school counselors in the K-12 setting. While supervision of school counselors has been taking place for years, Dr. Bultsma demonstrates that the need for focused supervision that takes into account the special setting of the school needs to increase, especially for new professionals.

An emerging setting in professional counseling and supervision is Second Life (SL). SL is the electronic world of computer programs that allow counselors, clients, and students to meet in a cyberworld where avatars interact in place of the real person. Cutting edge work is being done that allows groups to meet in the "Cloud" who each individual member never leaves his or her home, clients in rural areas are able to meet counselors in the "big city" without crossing miles of roads to make their appointment, and classrooms are being set up where instructor and students meet on the "net" to interact. Tomeka McGhee and her colleagues walk us through this emerging frontier.

Posttraumatic stress syndrome (PTSD) is most commonly associated with soldiers and war, but Kelsey Beals and Dr. David Scott remind us that PTSD also inhabits the world of children and teenagers. They briefly review the literature about this disorder and offer basic information for clinicians of all types to consider when working with children and teens.

The Michigan Journal of Counseling continues to strive to be the best premium for your membership in the Michigan Counseling Association. And I thank the editorial board for their time and efforts to work with authors to insure you have a quality journal. Your feedback and submissions are greatly encouraged and appreciated.

Best wishes,

Perry C Francis

Supervision Experiences of New Professional School Counselors

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Abstract

This qualitative study examined the supervision experiences of 11 new professional school counselors. They reported that their supervision experiences were most often administrative in nature; reports of clinical and developmental supervision were limited to participants whose supervisors were licensed as professional counselors. In addition, participants' descriptions of supervision focused primarily on concerns with their own behavior as new professionals, and they frequently confused the process of supervision with activities that were more characteristic of mentoring and evaluation. Recommendations for the practice of school counselor supervision for new professionals are included, along with suggestions for future research.

Traditionally, professionals in the mental health field have been permitted to regulate themselves under the ethical condition that they place the welfare of the general public above their own interests (Bernard & Goodyear, 2004). The counseling profession has used the practice of supervision to monitor the welfare of those served by assessing the performance and professional competence of both trainees and new professionals (Bernard & Goodyear, 2004).

Consideration of the practice of supervision in school settings had been limited until the past two decades, during which a growing body of research informed the applied practice of supervising school counseling trainees who were enrolled in master's degree programs (Baker, Exum, & Tyler, 2002; Cigrand & Wood, 2011; Getz, 1999; Henderson, 1994; Nelson & Johnson, 1999; Peterson & Deuschle, 2006; Roberts & Morotti, 2001; Stickel, 1995; Studer, 2005, 2006; Wood & Rayle, 2006). Studer (2006) noted that attention to the practice of supervision for school counselor trainees has ensured that individuals with whom

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the trainee works are not negatively affected. However, Studer also commented that discussion of using supervision to support new school counseling professionals continues to receive little attention. This concern was also identified by Moyer (2011), who noted that the limited material about school counselor supervision is rapidly becoming outdated. This study addresses this inadequacy by documenting the supervision experiences of 11 new professional school counselors.

Background

Henderson (1994) and Studer (2005, 2006) have documented the shortage of competent professional school counselors who are trained and/or certified to provide supervision in schools. Studer (2006) noted that formal training in the practice of supervision is generally limited to specialist and doctoral programs rather than master's degree programs. As a result, the supervision of new school counselors is most often provided by professional school counselors and/or principals who have had no formal training in supervision.

An additional concern is that professional school counselors who have been trained in supervision received training in supervision theories, models, and modalities that were designed and implemented for use in clinical settings, such as mental health agencies and private practices. Until recently, these supervision training experiences failed to address the unique application of supervision in school settings (Getz, 1999; Henderson, 1994; Studer, 2006). Studies focusing on post-degree supervision of professional school counselors have documented the underutilized practice of school counselor supervision in schools and included recommendations for the practice and delivery of supervision for school counseling professionals who have completed their formal educational training. Samples of these recommendations include peer supervision (Agnew, Vaught, Getz, & Fortune, 2000; Borders, 1991; Crutchfield & Borders, 1997), peer consultation (Benshoff & Paisley, 1996), group supervision (Crutchfield et al., 1997; Gainor & Constantine, 2002), and clinical supervision (Henderson & Lampe, 1992; Sutton & Page, 1994). Several authors have focused their work specifically on theories, models, and modalities of supervision that attempt to address the practice of supervision for professional school counselors (Borders, 1989; Getz 1999; Nelson & Johnson, 1999; Page, Pietrzak, & Sutton, 2001; Peace, 1995; Protivnak, 2003).

While it is critical that school counselors develop counseling skills as part of the delivery of a comprehensive guidance and counseling program (American School Counselor Association [ASCA], 2010), the responsibilities of school counselors also include the development of skills in individual student planning, guidance curricula, and system support. As Devlin, Smith, and Ward (2009) concluded, few supervision models meet the complex needs presented by school counselors. On its own, clinically focused supervision does little to inform these additional areas of responsibility. Without supervision that addresses the development of all the skills they need, new school counselors might unwittingly overlook areas of their work that are not addressed by supervisors who provide clinical supervision (Borders, 1994; Roberts & Morotti, 2001).

This lost opportunity for adequate professional development has poten-

tially negative outcomes for new professional school counselors because they depend on support from other professionals to meet the complex needs of their students (Stoltenberg, McNeill, & Delworth, 1998). These complex needs can quickly overwhelm new school counseling professionals, leading to anxiety, fear of appearing incompetent, feelings of inadequacy in meeting students' needs, and burnout (Moyer, 2011; Portman, 2002). For new school counselors who function in isolation, the process of induction into the profession has been described as "sink or swim" (Matthes, 1992, p. 248).

Supervision is intended to help new professional school counselors maintain ethical standards of practice by facilitating their socialization into the profession following the completion of their formal training (Bernard & Goodyear, 2004). However, as demonstrated by the "sink or swim" analogy reported by Matthes (1992), new professional school counselors who do not receive any supervision — or only supervision of their counseling skills — are often isolated. Yet they are expected to assume the same responsibilities as their more experienced peers, with little to no support or supervision (Wilkerson, 2009). They are often left on their own to socialize themselves into the profession without appropriate guidance or supervision to help ensure ethical standards of practice.

Using supervision to protect the welfare of those served and to assure appropriate delivery of services and interventions has become the standard in counselor preparation programs that are accredited by the Council for Accreditation of Counseling and Related Educational Programs (CACREP, 2009). However, no similar guidelines exist in the ethical standards adopted by ASCA (2010) to inform the supervision of professional school counselors who have completed their formal education and are beginning their work as professionals. Students served by new professional school counselors could face negative outcomes if these counselors are not adequately supervised as they provide services and interventions to effectively respond to and meet students' counseling needs (Bernard & Goodyear, 2004). If students' needs go unmet, the profession of school counseling risks failure to fulfill its charge of self-regulation that protects the welfare of students.

As this review of the literature indicates, the practice of school counselor supervision has been informed by numerous factors: (a) the limited formal training of school counselor supervisors, (b) the use of supervision models that limit school counselor supervision to a focus on clinical skills, (c) the failure of supervision models to address the full scope of school counselor practice, (d) reports of isolated school counselors who receive minimal supervision, (e) documentation of increasingly complex student needs that pose challenges for school counselors, and (f) a lack of professional guidelines in the ASCA ethical standards to inform the supervision of new school counselors. This study was conducted to examine the ways in which these findings affect the supervision experiences of new school counselors, if at all.

Method

Since the objective of this study was to gather data about the supervision experiences of new school counselors, phenomenological inquiry was utilized to examine the essence of these experiences. The semi-structured inter-

view was selected as the means to collect data. Rubin and Rubin (2005) have noted that semi-structured interviews offer some structure and focus needed to address the participants' experiences, while allowing them to become conversational partners during the interview. Participants have the opportunity to influence the direction of the interview by changing the subject, guiding the pace, or indicating that the interviewer is asking the wrong questions. Questions planned for the qualitative interviews used in this study were open-ended in design, as recommended by Hatch (2002).

When all of the interviews were completed, inductive analysis was used to search for patterns of meaning in the data by moving from a focus on specific content to the formation of broader statements about the phenomena under investigation (Hatch, 2002). Accordingly, inductive analysis was used to identify common themes or threads among participants' descriptions of their supervision experiences. As recommended by Hatch (2002), the data were reviewed to identify frames of analysis. Domains were created based on semantic relationships discovered within and across the frames of analysis, and salient domains were assigned codes. The interviews were reread, a master outline was created that demonstrated the relationships within and among domains, and data excerpts were identified that supported the domains identified in the outline.

Relevant to this study, the investigator has been a professional school counselor, with 10 years of experience in the field. These experiences may have affected the study design and interpretations of the data. However, since researcher bias was anticipated as a limitation of this study, the investigator sought to maintain the trustworthiness of the data through continuous and systematic bracketing of his biases, values, and interests, as recommended by Creswell (2003).

Participants

Since phenomenological inquiry requires participants to describe their everyday lived experiences of the phenomenon being studied, it was crucial that participants in this study were carefully selected to ensure that they had experienced the phenomenon being investigated. In an attempt to understand the supervision experiences of professional school counselors at all three school levels (i.e., elementary, middle/junior high, and high/senior high), a minimum of three new school counselors from each of the three levels within public schools in Michigan were sought. Participants were solicited using a criterion sample method of potential participants who were known to the investigator through professional contacts, and 14 were selected for an initial interview. Those who had a master's degree in some other aspect of counseling (e.g., community counseling) and had returned for further education to become professional school counselors did not qualify as participants.

During the interview process, three of the participants indicated that their supervision experiences were deficient because they were not formally assigned a supervisor as new professionals. These three participants were removed from the study.

Participant Demographic Information

*ESC = Endorsed as a School Counselor on a Teaching Certificate; SCL = School Counselor License;

*LLPC = Limited License Professional Counselor

| Pseudonym | Gender | Age | Race/Ethnicity | Years in profession | Grade level | Employment status as school counselor | Case-load | License/Certification | Follow comprehensive guidance |
|-----------|--------|-----|--------------------|---------------------|-------------|---------------------------------------|-----------|-----------------------|-------------------------------|
| Jillian | Female | 44 | Caucasian | 2 | 9 | Full time | 325 | SCL, LLPC | No |
| Lena | Female | 39 | Caucasian | 2.5 | 6-8 | Full time | 340 | ESC, LLPC | Yes |
| Danielle | Female | 26 | Caucasian | 2 | 9-12 | Full time | 280 | SCL, LLPC | No |
| Olivia | Female | 32 | Hispanic | 1.5 | 9-12 | Full time | 280 | SCL, LLPC | No |
| Margie | Female | 35 | Caucasian/Hispanic | .5 | 9-12 | Full time | 251 | ESC | No |
| Ben | Male | 31 | Caucasian | 1 | K-5 | Part time | 180 | ESC | No |
| Jackie | Female | 27 | Caucasian | 1 | 9-12 | Full time | 400 | ESC | No |
| Pamela | Female | 31 | Caucasian | 1.5 | K-8 | Part time | 350 | SCL, LLPC | Yes |
| Grace | Female | 31 | Caucasian | 3 | 6-8 | Full time | 300 | ESC | Yes |
| Elaine | Female | 49 | Caucasian | 1 | 6-8 | Full time | 490 | ESC | Yes |
| Carol | Female | 26 | Caucasian | 1 | K-5 | Full time | 1100 | SCL, LLPC | No |

Procedures

All interviews were face-to-face and took place in the school offices of each participant. Interviews ranged in length from 27 minutes to 53 minutes, with an average of 42 minutes. After each semi-structured interview was completed, the investigator listened to each audio recording. These recordings were then transcribed by a professional transcriber. All identifying information was omitted from the transcripts and replaced by pseudonyms. The investigator listened to the recordings again as all transcripts were checked for accuracy. Following the transcription of each interview, participants were asked to review the transcripts of their interview to make any revisions or clarify any responses. A second reading followed this participant review, during which time the investiga-

tor bracketed initial reactions to the data in the margins of the transcripts. These bracketed notes included assumptions, preconceptions, and preliminary interpretations of the interview transcript.

Analysis

Fraenkel and Wallen (2009) have noted that researchers who use phenomenological inquiry assume that there is a commonality to how individuals understand and describe similar experiences. In their text on research in education, these authors indicated that this commonality is referred to as the “essence of the experience” (p. 429). Analysis of the data in this study included searching each participant’s statements for those that appeared to be particularly meaningful in describing his or her supervision experiences. As explained by Fraenkel and Wallen (2009), this method is marked by a constant interplay between the researcher and data as the researcher clusters these data into themes or common aspects of the participants’ experiences.

To facilitate the analysis process, the investigator uploaded each of the 11 transcripts and 11 audio files into Transana, a software package designed to assist with the qualitative data analysis process. The investigator then used inductive analysis to identify frames of analysis or units of meaning. As each transcript was read, individual clips were identified that contained a unit of meaning or piece of information that described supervision experiences reported by the participants. In keeping with the process described by Fraenkel and Wallen (2009), these units of meaning formed the essential structure of participants’ supervision experiences as they were clustered into themes, ultimately leading to the narrative description of the phenomena reported in the following section.

Results

When the 11 participants of this study described their live supervision experiences, it emerged that supervision was provided by LPCs, building principals, licensed or endorsed professional school counselors, social workers, or teachers (in the form of administrative supervision). Although some of the participants described their supervision experiences positively, the combined descriptions demonstrated that these experiences were deficient in quality and/or missing critical elements. Five themes ultimately emerged from the supervision experiences reported by the participants: (a) quality of supervision experiences, (b) supervision types, (c) role confusion, (d) structure of supervision, and (e) focus of supervision.

Quality of Supervision Experiences

Only one participant described the quality of her supervision experiences as good. This comment was made by Grace, who stated: “I had a really good supervisor. I felt that she gave really valuable feedback.” No other participants described their supervision experiences as good or even satisfactory.

This deficiency in quality was reflected in the following comment by Jillian, in which she indicated that the supervision she received was lacking because she was not sure what to ask for from her supervisor: “. . .it is sort of as-

sumed that I already know how to do this or something. . . . and sometimes, I don’t even know what to ask for because I’m not aware it’s going to come up.” Jackie expressed a similar concern, but focused more on assumptions and oversights made by the person who was supervising her when she stated: “A lot of supervision is just. . . a lot of it’s surface. . . sometimes they don’t even think to fill me in on something because they all know what it is.”

Ben indicated that the quality of his supervision experiences was related more to the limited amount of time during which he could meet with his supervisor. He commented: “The way my position was set up was not conducive to getting supervision I would like to have gotten.”

Pamela was assigned a mentor whom she considered to be the individual available to provide her with supervision. She described a deficiency in the character of her supervisor that created less than satisfactory supervision experiences: “One thing is I guess I would have liked my supervisor/mentor this past year to be a little bit better of a listener.”

Supervision Types

As they discussed their supervision experiences, all of the participants in this study described one or more of the three supervision types that were first reported in the literature by Barret and Schmidt (1986): (a) administrative, (b) clinical, and (c) developmental.

Administrative supervision. Administrative supervision includes a focus on the tasks of the job that are not specific to the role of counseling. This type of supervision provides support with the daily administrative activities professional school counselors need to perform. When supervision experiences were described by the participants, they were most often described as administrative in nature rather than clinical or developmental.

Margie commented that she found it very helpful when her supervisors were “. . . very clear and concise about what things you have to do versus things that can be put off on the back burner, you know, organization, time.” Related to these specific directions, Jackie reported: “I go to my colleagues, my experienced colleagues, which in essence I guess are my supervisors, more for advice.” This description of supervision was similar to Pamela’s need for information to help with planning. She described the following regret: “A couple of things that I had wished that my mentor had gone over a little bit more were some of the school traditions.”

As new school counselors needed to know specific details about their new positions, supervisors used administrative supervision to provide this information. Ben indicated: “You know, just being new, I don’t know everything, and I need to know procedures for the building.” Grace indicated what her supervisors were really intentional about: ““Okay, this is what we do here. . . . this is what happens in December.””

As Anne observed, administrative supervision also helps new professional school counselors socialize themselves into the culture of the school: I had no idea of the workings of the school. I’m not a teacher, and so I didn’t have any grasp of how the school operates and . . . what a school counselor actually does in reality. My first supervisor was really

helpful in saying, 'You know what? You're gonna spend a lot of time on registration and class enrollment and dual enrollment; and these are the types of things you'd better learn, like right now.' So she was helpful . . . just teaching logistics of the job.

Clinical supervision. Clinical supervision involves the supervision of supervisees' clinical counseling skills. In this study, the only comments discussing clinical supervision experiences came from the four participants who were currently engaged in supervision to meet the requirements of their LLPC credential (i.e., Jillian, Lena, Pamela, and Carol). Jillian described clinical supervision experiences when she shared: "But anything that's related more clinically, you know, to things that come up with kids, probably more personal/social kinds of things, I think we take more time to sit down during that hour and kind of go over." Pamela commented: "I guess my weakness would be one-on-one counseling. I think that's something that can only come with experience. And so I would ask for advice."

Lena sought supervision to inform her of effective resources to assist in her work with students: ". . . here's a good resource for ADHD, and here's a good resource for autism." In describing her confidence in her counseling skills, Carol indicated that she used clinical supervision "if a situation that I haven't encountered comes up. This year, I had kids removed from Protective Services. . . . 'What do I do in this situation?'"

Developmental supervision. Developmental supervision includes supervision activities that focus on the professional growth and development of the supervisee. This supervision type was described the least by the participants. Only two of the participants (Jillian and Lena) described supervision experiences that included a developmental focus. Jillian stated: "I'm still learning, and it's nice to be able to go to somebody else." Lena said that she used supervision to increase her knowledge as part of her commitment to development. She commented: "One of my goals . . . is to become more knowledgeable about professional needs or kids that need special things in the way of accommodations or whatever, because I feel that's the part that's lacking in our training."

Role Confusion

When analyzing the data, the investigator identified two roles that were often confused with supervision: mentoring and evaluation. When asked to describe what their supervision experiences looked like, several of the participants' comments highlighted this confusion. Jillian described the complexity of this confusion:

You got a supervisor who is also your co-worker. They're kind of your mentor and kind of above you in that way, but yet you're trying to have this equal relationship working together. . . . just trying to figure it all out is sometimes hard.

Role confusion was inferred from Anne's report because the role of mentor and supervisor were categorized together. Anne was assigned an individual who was not trained as a professional school counselor to mentor and supervise her, and those establishing the assignment did not appear to under-

stand the role of either activity.

Pamela described a similar confusion about understanding the difference between a supervisor and mentor:

Even teachers can be considered supervisors or mentors. . . . And the only problem with that is you have 60 different people trying to guide you in what you should be doing. . . . it's better to have a supervisor, a mentor, that can understand a little bit about what you're going through.

The confusion expressed by Jackie was not around the specific roles of supervisor and mentor as expressed by others; her confusion stemmed from her difficulty understanding the differences between the purpose of supervision and evaluation:

I'm not sure there is a difference between supervision and evaluation. I think maybe supervisors are more directive. If somebody's supervising, they're either giving me instructions, guiding me in what I need to be doing . . . where an evaluator is more looking at what I'm doing and then offering feedback. It's confusing.

Structure of Supervision

Five participants described how their supervision was structured — the frequency of supervision sessions and the degree of formality of the supervision. These descriptions varied between two formats: (a) weekly supervision that was more formal and structured, and (b) supervision provided as needed that was less formal and structured. None of the participants mentioned a formal agreement or contract that included a description of what the supervision would look like. The degree of structure appeared to be subject to the need for supervision expressed by the individual participants. Time for supervision also appeared to influence whether or not supervision was provided. One participant, Ben, described that he met with his supervisor two or three times, but then it got busy and they stopped meeting.

Regular, formal supervision was described by Jillian and Grace. Jillian reported: "We kind of set aside like an hour a week." Grace stated: "We do meet regularly. My partner and myself [sic] meet with administration and talk about issues on a regular basis; so we are proactive in that sense."

Descriptions of less-structured supervision came from Pamela and Carol. Pamela said, "We had to meet at least two hours every month for the whole year. . . . they weren't all just like one-hour meetings. . . . It was more as I needed it." This was also expressed by Carol:

It's basically on an as-needed basis. We don't have a set weekly meeting just because of my schedule and her schedule . . . that would never be possible. We do try to do, you know, working lunches once a month or so, and talk about things; and we keep each other updated on e-mails, phone calls, that sort of thing.

Focus of Supervision

Supervision literature has identified the area of self/other awareness as an indicator of a counselor's level of development (Stoltenberg et al., 1998). As participants of this study described their experiences with supervision or their perceived supervision needs, their focus fell into one of the following three sali-

ent domains described in the literature: (a) focus on self, (b) focus on both self and others, and (c) focus on others.

Focus on self. Beginning counselors often focus on their own needs rather than on the needs of their clients (Stoltenberg et al., 1998). Consistent with this notion, 9 of the 11 participants in this study described the impact their supervision experiences had on the needs for their development as it related to “self,” rather than on how these experiences and needs affected “others” (e.g., students, parents, or colleagues). Margie reflected: “A supervisor should provide a good leadership role, just a professional, mentor kind of role. You know, someone who can also critique you but not put you down.”

Focus on both self and others. Four of the participants described a focus on both self and others when describing supervision experiences. Focusing on self and others is an indicator of a counselor who is advancing in their development as they use a focus on self to inform their work with others. Elaine identified a focus on her own needs to inform her work with students: “If you are doing something that might not necessarily be to the benefit of students, it would be good to know before it becomes an ingrained practice, you know, or a habit.”

Focus on others. A focus on others is described as an indicator of counselor development in which the counselor moves beyond a focus on his or her own needs, demonstrating a greater concern for the needs of others. However, a focus that is limited to consideration of others indicates room for development since a focus on self is as important in the work of counselors. This focus was least reported among the participants in this study. Grace reflected this focus as she described her supervision: “Sometimes we’d focus on student concerns; and there might be a student that there’s an ongoing concern . . . and I want to keep them up to date.”

Discussion

The new professional school counselors participating in this study clearly described supervision experiences of poor quality. These descriptions of supervisory experiences are consistent with reports of several researchers who have concluded that the practice of school counseling supervision is lacking in the field (Borders & Usher, 1992; Portman, 2002; Roberts & Borders, 1994; Usher & Borders, 1993).

The results of this study also point to a discrepancy in the field of counseling that has not been discussed in supervision literature. Those who practice counseling in private practice and agency settings are required in most states to pursue post-graduate supervision for a prescribed number of hours on the job (e.g., Michigan Department of Community Health [MDCH], 2003). No such requirements are expected of new professional school counselors. In fact, to date there have been no studies that have advocated for similar requirements for school counselors or called on the profession of school counseling to recommend mandating supervision experiences for new professional school counse-

lors. Consequently, the profession of school counseling may be failing in its duty to protect the welfare of those served by these new professionals. Although such requirements cannot ensure that every new school counselor receives adequate supervision, they could emphasize the importance of this activity to the work of these new professionals.

Recommendations for Practice

Three recommendations from this study are intended to inform the practice of new school counselor supervision: (a) provide new school counselors with administrative, developmental, and clinical supervision; (b) encourage new school counselors to participate in professional development activities; and (c) advocate for professional school counselor associations to develop supervision guidelines or standards for the practice of supervision.

Provide three types of supervision. Participants in this study indicated that their supervision experiences were primarily administrative in nature; they also needed clinical and developmental supervision. Unless those who provide professional school counselors with supervision understand this, it is anticipated that supervision will continue to be primarily administrative in nature and confused with the process of evaluation. This may be particularly problematic for new school counselors who are provided administrative supervision by building principals who have limited understanding of the roles and responsibilities of professional school counselors.

Encourage professional development activities. In an effort to meet the developmental needs of new school counselors, administrators should support their participation in professional development activities, such as joining professional associations, attending conferences, and fostering opportunities for networking. Professional school counselor associations could serve as an important training resource. They could provide all school counselors with supervision resources as they communicate appropriate school counseling roles and advocate for supervision that meets the needs of any professional school counselors who receive supervision. In addition, professional organizations could help those providing professional school counselors with supervision to understand the differences among types of supervision and learn supervision activities that facilitate effective administrative, clinical, and developmental supervision. As leaders and members of these organizations continue to advocate and educate others about the roles of the professional school counselor, it is anticipated that the supervision experiences of these professionals will reflect supervision that supports professional school counselors in their work while protecting the welfare of those served.

Advocate for supervision guidelines and standards. Since many counselor educators are involved in professional school counselor organizations, they could urge school counseling associations to develop supervision guidelines or standards of practice that encourage new professionals to pursue supervision. Such a position could reduce the number of new counselors who are left to sink or swim. Counselor educators might also advocate for profes-

sional school counselor organizations to develop guidelines and standards of practice directed toward those who provide supervision.

Conclusions

The descriptions of supervision experiences supplied by the 11 new professional school counselors in this study add to the existing literature by indicating how supervision for new school counselors is lacking. In addition to protecting the welfare of those served by professional school counselors, greater attention to the practice of supervision for new professional school counselors could provide support for their socialization into the school counseling setting once their training is complete. Finally, effective supervision practices are needed to ensure that the welfare of students with increasingly complex needs is protected as the continued growth of new professional school counselors is encouraged and supported. In light of these conclusions, suggestions for future study include examining differences in supervision experiences according to supervisors' credentials and type of supervision training, and exploring and developing best practices for new professional school counselor supervision.

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Second Life: Implications for Counselor Education

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Abstract

Virtual world technology is becoming an invaluable tool. Increasingly, institutions of higher learning are using virtual world technology to facilitate education and communication. Second Life (SL) is a three dimension virtual world which demonstrated usefulness for the counseling profession. This article seeks to elucidate the potential of SL for programs that facilitate counselor education, training and preparation. Implications for counselor education and future research are discussed.

Virtual world technology offers an environment for web-based learning, e-business, web play, and course management (i.e. vehicle for class discussions) (Childress & Braswell, 2006; Gaimster, 2007). Virtual world technology has also been commonly associated with video games like SIMS, Everquest and for social community web pages like Twitter, Pinterest, Facebook and MySpace (Skiba, 2007). In addition, virtual world technology offers many opportunities for students in higher education to expand their knowledge beyond the classroom. Because virtual world software offers a continuous, multiplayer, 3-D environment, it provides students opportunities for research and experiments (Jencius, 2009; Skiba, 2007). Virtual worlds are simulated environments in which users interact as graphic avatars. Second Life (SL) is one of the most currently recognized public virtual worlds (Jencius, 2009). The purpose of this article is to illustrate the potential of SL for programs that facilitate counselor education, training and preparation.

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What is SL actually? SL is web-based software developed by Linden Research, Inc. (Linden Lab), a company located in California. SL was launched in 2003 (Bell, Pope, & Peters, 2008; Descy, 2008; Geck, 2008; Jencius, 2009; Skiba, 2007). SL was created for Massive Multiplayer online gaming (MMOG). SL is a huge online computer simulated environment that allows a person to enter as a resident, move around, and interact with other residents known as avatars. The three dimensional virtual world is designed, built and owned by residents (Bell, Pope, & Peters, 2008; Jencius, 2009; Kelton, 2008; Skiba, 2007). Avatars are computerized three dimensional characters that interact within SL (Liao, 2008). Thus, a resident can develop a personality with real life characteristics in SL (Bessiere, Fleming, Seay, & Kiesler, 2007; Descy, 2008).

Second Life can also be used for training within the environment (Trotter, 2008). SL is becoming a widely used tool for communication and for gaining (real world) simulated virtual experience (Goral, 2008; Guest, 2007). Virtual world technology such as SL serves a global audience offering many languages without communication boundaries (Bell, Pope, & Peters, 2008). Although English is the official language of SL, there are areas for groups who speak Chinese, French, German, and Japanese. SL has been used recently as an educational tool, as a virtual library, for psychology and medical (nursing) education, and professional recruitment (Descy, 2008; Olsen, 2000).

Second Life provides opportunities for students in higher education to expand their knowledge beyond the classroom. Because of the increase in use of computer technology over the past years in higher education, the number of distance education offerings, online classes and virtual campuses is growing (Foster, 2007; Goral, 2008; Harasim, 2000; Robbins-Bell, 2008; Trotter, 2008). As early as 2005, courses on many college campuses have been incorporating SL (Childress & Braswell, 2006). Currently, SL has a program for educators to use in their classes; designed specifically for higher education (Childress & Braswell, 2006). Over thirteen million members, including colleges and universities (e.g., Harvard, Stanford, Cambridge, Princeton, Pepperdine, Drexel, Ball State, and Stanford) navigate through and inhabit the SL community. Recently, as many as 250 universities and colleges have designed virtual campuses within Second Life (Goral, 2008). Likewise, many universities (e.g., Pepperdine and Princeton) are working within the virtual world of SL to promote technological education and are on the Second Life education listserv known as SLED (Descy, 2008). According to Trotter (2008), the higher education community is thriving in the SL virtual world. Many educational institutions are creating campuses in SL to enhance the students' learning experiences (Bugeja, 2008; Descy, 2008; Foster, 2007). Furthermore, virtual worlds are gaining notoriety as a pedagogical stage (Jencius, 2009).

For the profession of counseling, SL has been used in many capacities (e.g., to facilitate life coaching, peer support, support groups and advocacy) (Jencius, 2009; Young, 2007). Further, it has experienced a range of success using various virtual types (Jencius, 2009). Concerns surrounding various issues (e.g., confidentiality not being guaranteed, shallow encounters, obtaining informed consent, verifying client and counselor identity authenticity, and consumer protection and enforcing state licensure laws) are still being addressed for virtual counseling practice. Contextual issues continue to include the appeal

of internet counseling, efficiency, employment compatibility, privacy, text-reliance attraction, the nature of the psychological disorder, cost, and risk (Patrick, 2007; Yee, Bailenson, Urbanek, Chang, & Merget, 2007).

Practice implications continue to influence the future of online counseling in the form of the development of standards of competency, certification models, and the proliferation of research (Patrick, 2007). The benefits and challenges of a virtual technology medium, like SL, are not isolated to counseling and clinical practice of psychotherapy. Just as SL provides counselors-in-practice a means of interacting with clients and delivering treatment, it has the potential to expand learning and generate new learning experiences for counselors-in-training. Therefore, Second Life can be used clinically in training and skills development for students who are in need of practice in the virtual world in preparation for real world experiences. As an increasingly popular tool in education and counseling, programs that prepare, train and educate future counselors have begun to explore SL as an instructional technology for student training. Finally, this article will address the potential uses for Counselor Education programs in Second Life.

Counselor Education and SL

As counselor education programs equip individuals for working in a multiplicity of environments, it is essential that the integration of virtual worlds, such as Second Life (SL), be explored. Users of SL rather quickly find that it has no geographic boundaries and serves global users, making it universally accessible and useful. The creators of SL purport education as a core function (Trotter, 2008) and even provide discounted fees to educators who use it. Counselor education programs potential for benefit in SL is limited only by their inability to charter new technological territory. Various counseling professionals are currently utilizing SL to host meetings/activities/events, to create simulated experiences, to facilitate campus program recruitment, host virtual campus tours, and for marketing (i.e. center for Counselor Educators in SL [CESL] sl.counseloreducation.org) (Jencius, 2009). Once a presence is established, programs can utilize their space for communication, to mirror and expand the traditional classroom, and for collaboration (Lebel, Olshtain, & Weiss, 2005). The potential within the SL virtual world is vast. Consider the following potentialities.

Counselor Education Programming

The process of applying to graduate programs in counselor education can involve certain steps. Applicants may find this process challenging when programs are a great distance away from their locality. Program websites that contain electronic forms, email contact capability, and other tools (i.e. faculty pictures, and program handbooks) make the application process less challenging. The program marketability and capacity for recruitment thereby has the potential to draw in a great number of potential students beyond that of the local population. For this purpose counselor training programs could develop virtual campuses in SL. The low cost of a virtual world in SL could also make it possible for counselor education programs to market their programs to students that might only be reached through more costly advertising methods. As a communi-

cation tool, virtual campuses could be utilized for program recruitment within the SL community by establishing an island for the department where interactive tours could take place. Ohio University has found that the creation of their virtual campus has greatly benefited them from a marketing perspective (Goral, 2008). These initiatives can be extremely beneficial to colleges or universities who may not have the national visibility they desire. Berger (2008) illustrates this approach by noting that the Office of Undergraduate Admissions at Case Western Reserve has started inviting admitted and prospective students to a virtual campus that includes various representatives of the school and surrounding community.

Conducting initial screening and selection interviews could also be accomplished in SL. Interviews for admission consideration can be done in SL before a more formal face-to-face interview is considered and conducted. Screening interviews in SL could cut down the cost of applicants having to travel for an initial interview. Hewlett-Packard recently participated in a job fair held within SL along with Verizon and Microsoft and noted the cost savings advantage of eliminating travel cost (Athavaley, 2007). Hypergrid Business also notes that in today's economy, having a budget to cover travel expenses is not plausible so virtual interviews are often used for recruitment and hiring (Korolov, 2010). Screening interviews in SL have the potential to allow admission committees to make screening decisions before offering face to face interviews. Screening interviews in SL could also provide more applicants with more information upon which to make their decisions about entering a counselor training program. Inherently limitations exist, but this approach has the potential to enhance counselor education programming. Expanding upon this concept, prospective students could dialog with current counselor education students in the process applying to a program. In addition to potential recruitment opportunities, Gaimster (2007) points to the fact that virtual worlds can be used as powerful tools to develop creative approaches to learning.

Learning and Skill Development

Constructivist learning theory is highlighted within SL capability. Constructivist learning is fostered when students are placed in contact with others, in an immersive environment that challenges them to create, construct and figure out approaches and strategies for themselves (Reicherzer, Dixon-Saxon, & Trippany, 2009; Skiba, 2007). As academia begins to welcome net generation learners, it is becoming increasingly more important to enhance instruction with technology to increase sustainability of the learner's engagement. SL can be an important aspect in the continuum of learning methods available to the instructor (Cheal, 2007). The active learning that is fostered within SL challenges more traditional approaches to teaching (e.g., lecture method), which can result in a passive learning audience (Cheal, 2007). Because the SL environment is more relaxed it can also foster a greater rapport among students and the instructor. The environment can allow (for example) an introverted personality to become more functional for engaging easily in communication as a course participant (Markham, 1998). Individual students may find it easier to express themselves because of the capacity to utilize an avatar to represent them (Bessiere, Flem-

ing, Seay, & Kiesler, 2007).

Berger (2008) found that some students felt the online environment freed them from debilitating shyness and allowed them to express themselves more comfortably than they could in a traditional classroom. Positive social and academic interactions have the potential to impact the student's confidence and academic performance (e.g., levels of emotional dependency students have on their instructors) (Gaimster, 2007). Furthermore, Jarmon, Traphagan, and Mayrath (2008) noted that the diverse interaction of students within the SL media are more likely to experience positive contact and a shared understanding due to the elimination of geographical barriers and reduction in social anxiety which promotes ease of disclosure. Educators can utilize the immersive elements of virtual worlds to create dynamic interactive learning environments, but only if they adopt additional pedagogies. Simply holding a lecture in SL is not going to transform the student experience. Although getting students involved in an authentic learning situation that is emotionally engaging might allow students to learn cooperatively and deepen questioning and reflection (Gaimster, 2007; Reicherzer, Dixon-Saxon, & Trippany, 2009). Engaging in this environment will require educating users about norms, structure, and boundaries in order to help users build confidence and feel comfortable. Students' technical skills can also be a factor in how quickly or to what degree students adapt and benefit from interactions in a virtual world (Petraou, 2010). Additional learning based examples are also discussed in the literature.

When a traditional learning environment is supplemented with a more experiential learning environment similar to what SL provides, it offers students a unique and flexible environment for distance learning (Skiba, 2007); thus contributing to student engagement. The possibilities for facilitating learning with SL extend beyond your typical hybrid course because of its three dimensional capabilities. Kinesthetic learners may be some of the greatest benefactors of these teaching methods. Because of the ability to use simulation, experiential learning is enhanced, allowing individuals to practice skills and try on new ones (Skiba, 2007). Kinesthetic learners are often isolated when traditional teaching methods are solely employed. Having the ability to simulate learning opportunities provides for experiential exploration of concepts that learners have been hard pressed to have.

One such example noted by Graham (2007) of the potential that lies within SL has been demonstrated by the University of California Davis. University of California Davis developed a simulation that allows medical students to experience the effects of schizophrenia on perception. Additionally, students participated in simulated role plays with their cohorts and their professors, where they utilize and demonstrate necessary counseling skills. In an initial basic skills course or along with a counseling practicum, a virtual clinic/facility could be created and established in SL (i.e. like The Counseling Center in SL: slcounseling.org). Doctoral or advanced level (skilled) students could act as clients, while the entry level students could represent the (practicing) counselors. Faculty supervisors could provide setting variance by alternating between residential clinical settings, outpatient community settings, university counseling centers, etc. Simulation would mirror an actual environment where the student might later provide services. Faculty supervisors and instructors could review

and monitor sessions and provide supervision and feedback.

The use of SL in this capacity could enhance experiential learning, allowing students to practice skills, try new ideas and learn from mistakes (Skiba, 2007). The opportunity to simulate counseling interactions allows for student skills demonstration, evaluation and remediation of practice before the student has to apply the skills in a real environment; such as in a practicum or in an internship. Students with various cultural backgrounds would have opportunities to explore cultural issues. The more opportunity the student has to reinforce knowledge of skills, and enhance their skills in counseling, the greater the likelihood that the student will enter the practicum environment with more confidence and competence. This could also translate to fewer student mistakes made over time in future real life practice. Students would have increased experiences to make mistakes in a less harmful environment; as well as more experiences with corrective evaluation in supervision. These experiences would also provide counselor educators opportunities in class to teach students about internet, online or web counseling (e.g., client interaction, treatment, ethical considerations, and practice implications) (Gregg & Tarrier, 2007; Manhal-Baugus, 2001; National Board of Certified Counselors, 1997). Educating students about virtual counseling ethics and the potential benefits and hazards related to counseling in a virtual world would benefit students learning. Some instruction on these issues could also take place in SL.

Collaboration and Consultation

Student experiences with project based assignments within SL supports demonstration of learning; similar to that which is involved in developing the counselor education program portfolio. Student experience with this learning involves developing collaborative and consultative skills in completing programs of study and research. Based on a scholar/practitioner model of education, counselor education students are expected to engage in collaboration as they matriculate through programs of study. This collaboration does not have to be limited to the physical campus where the student is enrolled. SL could provide a venue for collaboration with students across counties and throughout the world. This would provide a mechanism to engage students in cooperative activities with other students. Additionally, co-teaching/presenting on special topic areas could provide collaboration skill development opportunities for students. This could be accomplished by hosting a virtual counseling in-service, meeting, lecture series or conference, as well as conducting some aspects of research in SL.

Virtual worlds offer tremendous opportunities for experimentation and research. SL could be considered particularly useful for doctoral students who conduct higher education research (Skiba, 2007). Because there is a paucity of literature on SL as a useful tool for research in general and collaborative research in particular, possibilities for future research are currently unlimited (Manghani, 2007). Research studies have not yet explored a comparison of the effects on learning in a traditional classroom environments and the SL environment. A paucity of research exists on the effects of the learning environment on communication and student engagement in counselor education. The compari-

son of retention rates for traditional learning environment as opposed to ones that uses immersion learning strategies in a virtual world (such as SL) have also not been studied fully. In addition, future research in the area of SL has the potential to inform how we preparing future counselor educators to teach via distance or using web-based applications (Lebel, Olshtain, & Weiss, 2005).

Discussion

Virtual worlds and proliferating online communities are projected to grow exponentially (Jarmon, Traphagan, & Mayrath, 2008). Futurists even anticipate that programs similar to that of SL will become the preferred platform for cooperative learning (Childress & Braswell, 2006). Students are becoming increasingly more technologically savvy and respond well to technology enhanced learning (Diehl & Prins, 2008; Graham, 2007; Jarmon, Traphagan, & Mayrath, 2008). Demands for distance education and more flexible class schedule options increases as student diversity continues to increase. Developing remote access to education benefits institutions of higher education and faculty, not only students. Boulos, Hetherington, and Wheeler (2007) propose educators are interested in widening access to education for geographically remote students and non-traditional learners. It goes without saying that there are obvious and necessary considerations in forging into these uncharted technological territories. Goral (2008) warned that schools could be taking on enormous risks for liability because SL is largely an “anything goes” world. Utilizing restrictions and limitations within SL will be critical to intercepting potential legal and policy issues. Despite these concerns, SL has gained popularity as a virtual world for learning. SL is currently being used by over 250 institutions of higher learning for various purposes. Many of these respected institutions are exploring the potential uses of this new virtual territory. SL has demonstrated potential for facilitating learning for students with a diversity of learning styles like kinesthetic learners who commonly struggle with traditional modes of education.

Proactively understanding the potential SL has for enhancing pedagogy and learning is a worthy endeavor for counselor education. As an instructional technology tool, SL could offer future counseling students additional educational opportunities to develop counseling skills while learning in a counselor education setting. Students could have experiential learning opportunities without doing real harm to clients thus enabling students to explore and practice interventions that they may not otherwise try. Despite the promise that SL offers, “several campuses reported low faculty interest in learning a new technology” (Eaton, Guerra, Corliss, & Jarmon, 2011). Navigating new technological systems, especially three-dimensional environments, oftentimes come with a steep learning curve and are not for the faint at heart. Dedicated faculty who are not easily dissuaded who can accommodate time into an often busy schedule is necessary. Thus, finding time, money and technical support is necessary to entertain the possibilities of using SL with students. Yet, another challenge is peaking the interest of student motivation. Eaton et al. (2011) suggest that presenting students with the reasons for the technology use is key to motivation and seeing the relevance of its use when the learning curve for use is high.

Counselor Educators facilitate learning opportunities for counselors-in-

training. Through simulated counseling practice, counselor educators can further assist in the development of student counseling competency. Competency development can include working with clients whose problems are related to virtual world use. Because some counseling is being conducted in SL, we know that the challenges include counseling clients with a) internet addictions, b) disrupted marriages because of internet use, c) virtual trauma or exposure, d) cyber bullying, and e) introversion or isolation (Dell, 2007; Young, 2007; Young, Griffin-Shelley, Cooper, O’Mara, & Buchanan, 2000). As people increasingly engage with virtual worlds they may experience a break from reality and identify more with the virtual world than they do with real world interactions (Dell, 2007). This could potentially complicate diagnosis of some disorders that identify delusions or hallucinations (Yellowlees & Cook, 2006).

The opposite side of assisting in the development of student counseling competency is the evaluation of that competency. Traditional classroom learning activities are usually faculty-developed. Virtual world learning activities are typically student-developed which gives freedom to demonstrate competency in the learning objective in as unique a way as the learner (de Freitas, Rebolledo-Mendez, Liarokapis, Magoulas, & Poulouvassilis, 2010). Counselor training programs and faculty must evaluate the efficacy of virtual-based learning against that of traditional classroom learning (Freitas, et al., 2010). Two issues arise based on this information. One, this may require using a comparable set of evaluative measures to accommodate the differences in traditional and virtual learning. Second, the authors further note that where traditional classrooms may utilize Constructivist models of learning (i.e., “building upon existing knowledge”), a model of learning for virtual worlds may best utilize Situative approaches (i.e., a more social approach) (p. 73). The utilization of different approaches necessitates different forms of evaluation. This means the determination of student competency of a course’s objectives may look different depending on the medium of learning activity. As well, this means that counselor educators may need to learn and adopt alternate teaching approaches to best facilitate learning specific and unique to virtual environments. For online counselor training programs that shift may not be as daunting. Nevertheless, for traditional classroom programs, it may seem insurmountable in light of the other faculty concerns aforementioned. This is critical in that if one is to design effective pedagogical interventions with new instructional technology thorough and detailed instructional planning must be implemented (Mayrath et al., 2011).

Conclusion

We have drawn from existing professional literature to offer suggestions that emphasized three areas of usefulness of SL for counselor preparation, training and education (i.e. programming, learning and skill development, and collaboration and consultation). These suggestions include the use of SL 1) as a marketing tool to recruit potential counseling students over greater distances; 2) to create more opportunities to develop counseling skills and educate students about potential benefits and hazards related to counseling in a virtual world; and 3) to facilitate collaborative and consultative learning activities with other students.

Counselor educators need to know the students they teach in order to teach them more effectively. Technology is very much a part of who the next generation counselors are and will be. Being inclusive and responsive to future students includes examining the usefulness of virtual worlds (i.e. SL) for enhancing the preparation, training and education of the future counseling workforce. We need to be aware of the risks associated with this new territory. But there is no less of a need to enter it, be a part of defining how to use it safely and fairly; to effectively teach our students and help them serve our amazingly diverse clientele.

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Neglect, Physical and Sexual Abuse:

A Look at Posttraumatic Stress Disorder in Children and Adolescents

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Abstract

This article focuses on Posttraumatic Stress Disorder that is largely overlooked in the counseling field and literature, specifically in children and adolescents. Etiology, treatment options, and the course in which the disorder manifests itself holds great importance in understanding the grave effects these traumatic events have on youth. This article is the beginning attempt to begin to understand how children exhibits symptoms of PTSD in order to work collaboratively with those involved in the child's life before it develops into a chronic maladaptive state.

Alternatively known as "shell shock" or "combat neurosis", Posttraumatic Stress Disorder (PTSD) has long been around, but has not always been recognized as a disorder in the world psychiatric classifications. With PTSD being identified with war, the idea that other traumatic events could cause detrimental symptoms was often disregarded. This belief was especially geared towards children and adolescents. Although the idea of PTSD symptoms being present in youth was thoroughly examined, nothing concrete was commenced until Terr (1979, 1983) conducted a study examining a group of children who were kidnapped and held hostage. These outcomes provided support that children and adolescents could develop PTSD. The four-year follow up study that took place in 1983 examined how the severity of the incident and children's posttraumatic symptoms interacted with the individual's history. This study led to the groundbreaking notion that PTSD symptoms can be present in children and adolescents as well as developing an initial understanding of the effect trauma can have on this population

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According to the American Psychiatric Association (*DSM-IV-TR*), "Posttraumatic Stress Disorder (PTSD) is characterized by the re-experiencing of an extremely traumatic event accompanied by symptoms of increased arousal and by avoidance of stimuli associated with the trauma" (APA, 2000, pp. 468-469). Although there are minimal studies available regarding Posttraumatic Stress Disorders, it is known that this disorder is highly prevalent in a wide range of settings, most commonly those related to sexual abuse (Stien, Zungu-Dirwayi, Van Der Linden, & Seedat, 2000). With the enormous personal and societal costs PTSD takes from individuals and their families, the disorder must be examined from a multifaceted perspective.

In the United States an immense number of children are involved in traumatic events in the early years of their lives. Approximately 5.5 million children are involved in some sort of maltreatment case every year (Hamblen & Barnett, 2010). Of these traumatic events reported in 2009, 78 percent were due to neglect, 18 percent were due to physical abuse, 10 percent to sexual abuse, and 8 percent to psychological abuse (Gaudiosi, 2009). These percentages total more than 100 percent because children who were victims of more than one type of maltreatment were counted for each type of maltreatment they experienced (Gaudiosi, 2009). These statistics show the intense reality of abuse in the United States. With many of these cases resulting in the diagnosis of PTSD or posttraumatic symptoms, the awareness of the treatments available, course the disorder takes, and diversity issues are critical issues for mental health professionals.

To be a child or adolescent diagnosed with PTSD, there is a list of criteria that must be met. The child or adolescent must have experienced, witnessed, or been confronted with an event or events that involved actual or threatened death, serious injury, or physical integrity of self or others (*DSM-IV-TR*, 2000). In children, PTSD manifests in responses of disorganized or agitated behavior and possible feelings of intense fear or helplessness (*DSM-IV-TR*, 2000). Frightening dreams often occur along with distressing recollections associated to the traumatic event. The child or adolescent will experience persistent avoidance of the stimuli associated with the traumatic event and often might have difficulty concentrating (i.e., in school) and have exaggerated startled responses (*DSM-IV-TR*, 2000). There are three main risk factors that enhance the likelihood of a child or adolescent developing PTSD after a traumatic event. These factors include the severity of the traumatic event, the parental reaction to the traumatic event, and the physical proximity to the traumatic event (Birmaher, Brent, & Benson, 1998). The awareness of these risk factors is important to families and loved ones so they are able to be supportive, understanding of the symptoms, and even participate in the therapy process.

Although the symptoms and warning signs of PTSD in children are definite, the onset of when PTSD occurs can fluctuate. A study of 200 adolescents who survived the sinking cruise ship, *Jupiter*, provides support for this idea. There was a reported incident of PTSD in 51 percent of the survivors and most cases manifested within the first few weeks (Dyregrov & Yule, 2006). Although delayed onset was less common, it was still present in the study. The time of the onset provided no connections with other factors, such as severity of the

symptoms present.

The diagnosis of PTSD in children and adolescents is parallel to that of adults. Even with these similarities, there are many factors related to any individual, adult or youth, that can enhance or decrease the probability of the occurrence of traumatic events that possibly cause PTSD symptoms. An interesting topic to look at is PTSD in children and adolescents that are lesbian, gay, bisexual, and transgender. Due to these individuals' distinctive characteristics, they are often ostracized and ridiculed for being different than the norm. D'Augelli, Grossman, and Starks (2006) conducted a study, "exploring the relationship between lesbian, gay, and bisexual youths' histories of victimization based on their sexual orientation, their gender atypicality in childhood and their current mental health, especially trauma-related symptoms" (p. 1). In the study, the adolescents (mean age was 17) were asked about sexual, verbal, and physical violence related to one's sexual orientation. Verbal sexual orientation violence (SOV) involved being name called, teased, or threatened. Physical SOV was assessed by inquiring if the adolescent had ever been punched, kicked or beaten with fists or weapons due to their sexual orientation. Finally, adolescents were asked about sexual SOV with questions about rape or sexual abuse because of their sexual orientation (D'Augelli et al., 2006).

A battery of tests were used to fully evaluate the participants in the study. The Brief Symptom Inventory (BSI), the Global Severity Index (GSI), and the Trauma Symptom Checklist (TSC) were the three tests used to inquire about current mental health problems in the adolescents. PTSD was evaluated by using the Diagnostic Interview Schedule for Children (DISC). Data gathered from the study showed that three fourths of the participants reported verbal SOV, 11 percent reported physical SOV and 9 percent reported sexual SOV (D'Augelli et al., 2006). While interviewing these adolescents, males reported significantly more sexual orientation violence of all types. Of both the females and males that experienced sexual SOV in this study, the majority of them reported being victimized by a friend or an acquaintance. Although there was no significant correlation between knowing the abuser and the diagnosis of PTSD, it is possible the prior relationship could be a contributing factor to the symptom of isolation during the onset of PTSD. Although this was a small sample size compared to the amount of children and adolescents in the LGBT community, the percentages are still disturbing. According to the study, out of the total 517 youth participants, 9 percent (n=48) met the Diagnostic Interview Schedule for Children (DISC) criteria for a diagnosis of PTSD (D'Augelli et al., 2006). Although all types of sexual orientation violence contribute to traumatic symptoms in an individual, all youth diagnosed with PTSD reported more experiences with sexual SOV than any of the others (D'Augelli et al., 2006).

With the still relevant marginalization of gay, lesbian, bisexual and transgendered individuals, awareness must be made to the significant feelings of hopelessness and isolation that will continue to increase during these individuals' adolescent years. Abuse and neglect often add chronic stress to LGBT individuals' lives. Between the volatile peer relationships take and the disappointment often expressed by parents, these individuals are at-risk for deterioration in many aspects of their lives.

There is still much research that needs to be conducted to better understand the multiple aspects of how SOV is related to a diagnosis of PTSD. Also noteworthy in the study is the significant association between sex and verbal SOV. More specifically, a male that had been called a "sissy" while growing up experienced significantly more verbal SOV than other males throughout their adolescent years (D'Augelli et al., 2006). Interestingly, there was no significant association with females being called gender-altering names such as "tomboys" and verbal SOV. Despite the fact that females often did not experience more verbal SOV, females have a diagnosis of PTSD three times more often than males (D'Augelli et al., 2006). This finding has been corroborated through many studies. One of the contributing studies was Kilpatrick, Ruggiero, Acierno, Saunders, & Resnick's (2003) investigation on interpersonal violence in adolescents. In this study, roughly twice the percentage of girls than boys met criteria for PTSD, with females reporting 6.3 percent and males reporting 3.7 percent.

Common co-morbidities among youth with PTSD are major depressive episodes, substance abuse and substance dependence (Kilpatrick et al. 2003). In a national survey of adolescents looking at exposure to interpersonal violence, PTSD was more likely to be co-morbid than were major depressive episodes, substance abuse and substance dependence (Kilpatrick et al., 2003). With this information, it is important for mental health professionals to be knowledgeable about the treatments available and what is most holistically effective in therapy with youth.

Treatment

In an ideal situation, prevention would be preferred over treatment when dealing with any psychological disorder. Because that is not always possible with traumatic events, early intervention is key in the treatment process. In intervening early it is possible to stimulate family communication around the events that have taken place and thus clarify any misunderstandings, prevent family secrets, and foster a good recovery environment for the children as well as for the family (Dyregroy & Yule, 2006). Not only does early intervention help foster relationships within the family, but if the incident(s) are left untreated PTSD may run a chronic course for at least five years in more than one third of children who develop this disorder (Smith, Yule, Perrin, Tranah, & Dalgleish, 2007). This state of constant distress, shame, and negative self-attribution will take a toll on the daily functioning of any individual who has experienced something traumatic and may adopt maladaptive behaviors. Along with the impairment of daily functioning, the individual may develop depressive symptoms, suicidal ideations and various other personality changes the longer the disorder is disregarded (Dyregroy & Yule, 2009). Treatment options are varied among individuals. Medication along with preventative and remedial approaches provide a comprehensive method in coping with these experiences.

Medication

Incorporating medication along with psychotherapy when dealing with PTSD can be effective, especially because of the high co-morbidity rate PTSD has with depression and other disorders. Because the chemicals in the brain affect the way one feels, medication is an option to help balance those chemi-

cals. The largest trials showing efficacy have been with selective serotonin reuptake inhibitors (SSRIs) (Stein et al., 2000). Medication such as Prozac and Zoloft are examples of SSRI's that are used frequently in the public. Specifically to children and adolescents, there has been limited research on the use of medication for PTSD symptoms. A study comparing the effects of citalopram (an SSRI) in children and adults is one of few in the literature. In this study, both children and adults showed significant reductions in measures of PTSD symptoms after the eight-week trial (Seedat et al., 2002). Krystal et al. (2011) found that newer antipsychotic medications (such as risperidone) were no more effective in treating PTSD in veterans than placebo. Although proven to be helpful with core symptoms, some research indicates the importance the combination of psychotherapy with medication for treatment of PTSD to be fully effective. Clearly, more research is needed to determine effective psychopharmacological treatments for children and adolescents. Additionally, the complexity of medication and children and adolescents requires caution.

Psychotherapy

An aspect to fully consider when in treatment is the familial influences on the children and adolescents. In addition to the social influences parents have on their children, there may also be inherited dispositions that have been passed down through generations (Dyregrov & Yule, 2006). This highlights the importance of family involvement in the treatment process. Family members often cope with the traumatic event through avoidance and deflection in hopes of protecting the child. These actions prohibit the whole family from processing and working through the experience.

Although family involvement is important in getting the dynamics back into place after a traumatic event, Cognitive Behavioral Therapy (CBT) has proven to be a beneficial therapy when working with children and adolescences that suffer from PTSD (Smith et al. 2007). A variety of different methods within the realm of CBT have been used when dealing with PTSD and have proven to be critical in the treatment process (Dyregrov & Yule, 2006). More specifically, Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) has become more widespread in the treatment of PTSD in children. TF-CBT is a conjoint child and parental approach for children and adolescents, ages 3-18, who have experienced extreme emotional and behavioral impediments due to traumatic life events (National Crime Victims Research & Treatment Center, 2010). This approach incorporates trauma-sensitive interventions with cognitive behavioral, family, and humanistic principles and techniques.

TF-CBT is especially useful in dealing with children and adolescents who have been sexually abused. According to Cohen, Deblinger, Mannarino, and Steer (2004), using TF-CBT reduced PTSD, depression, and the total number of behavioral problems compared to a child-centered treatment approach for children who were sexually abused. Learning new coping skills to help process their thoughts and feelings is one aspect of TF-CBT that helps open groundwork for progress to be made. According to Dyregrov and Yule (2006), "twice as many children ages 8 to 14 years receiving the child centered treatment still met the criteria for PTSD compared to those who received Trauma-Focused Cognitive Behavioral Therapy" (p. 180).

There has been much debate and research on alternate approaches to be used with children and adolescents suffering from traumatic events. One alternate approach used is Eye Movement Desensitization and Reprocessing (EMDR). Like other types of therapy, EMDR makes an effort to alter the way an individual reacts to traumatic memories. Studies have shown that EMDR may help lessen the PTSD symptoms, but research also suggests that the eye movements are not a necessary part of the treatment (Hamblen & Barnett, 2010).

Although there are other options out there, TF-CBT provides empirical evidence in helping children and adolescents with their disorder. The TF-CBT approach effectively treats PTSD and is reported to be more effective than Client Centered Therapy in reducing abuse-related attributions and shameful feelings (Cohen et al., 2004). The elements in TF-CBT encourage individuals to recognize relationships between their thoughts and learn how to cope with them in a healthy manner. There are also often joint parent-child sessions to allow the child and parent to share and discuss the traumatic event with one another (Cohen et al., 2004).

A key component of the TF-CBT approach with PTSD is that it is recommended to help treat acute posttraumatic reactions in children and adolescents as well. With this information, it is unnecessary to wait for the onset of PTSD to occur. Treatment can begin immediately after the event if necessary. The benefit of being able to start therapy early brings in the early intervention positive qualities to diminish the possibility of chronic symptoms.

CBT is not just bound to the individual approach when dealing with PTSD. It has also been proven beneficial in a group setting of children with PTSD or PTSD symptoms. Game-Based Cognitive Behavioral Therapy (GB-CBT) is a productive approach when working with a group of youth who have been victim to sexual abuse. GB-CBT was designed to address the potential behavioral problems and symptoms typically associated with child sexual abuse and works to enhance children's knowledge of abuse and self-protection skills (Springer & Misurell, 2010). With the knowledge that most youth isolate themselves from friends and family after a traumatic experience, the interaction with other peers could be helpful in allowing them to gradually work their way back to their original baseline behaviors. Kaduson and Scheafer (2006) emphasized that enhanced feelings of safety and empowerment must also be incorporated in the approach in which the therapist interacts with the children. Along with this, the therapists' consistent portrayal of respect, acceptance and faith is of great importance to keep a positive group dynamic. If the environment provides these characteristics, these consistent positive interactions could stimulate their desire to accept the role in the family.

Conclusion

An inestimable number of components that trauma is comprised of can bring a negative impact on any individual. With children and adolescents suffering from PTSD being a relatively new concept, great efforts have been made in attempt to understand PTSD and how to prevent it from turning into a chronic maladaptive state.

Suffering from PTSD can affect a person in numerous ways throughout the United States. Whether it is a friend, family member, or a personal experience, enduring the pain and impairment of daily routines can lead to a helpless and hopeless thought process. This cycle can continue to create damaging effects and prohibit the growth made during adolescence. Studies show that up to 43 percent of boys and girls go through at least one trauma and of those children and adolescents who have experienced a trauma, 3-15 percent of girls and 1-6 percent of boys develop PTSD (Hamblen & Barnett, 2010). Being cognizant of what PTSD is and the signs it possesses can be crucial to the early treatment intervention that would help the child or adolescent reestablish normalcy. Also, understanding the way in which this disorder establishes itself within an individual can be very helpful. Although there is much room for growth, overall there has been great progress in the discovery of PTSD since its recent recognition in the DSM-IV-TR as a psychiatric illness.

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