

CLINICAL SUPERVISION OF REHABILITATION COUNSELORS AND THE USE  
OF TECHNOLOGY

by

Paul J. Bourgeois

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As members of the Dissertation Committee, we certify that we have read the dissertation prepared by Paul J. Bourgeois, titled Clinical Supervision of Rehabilitation Counselors and the Use of Technology and recommend that it be accepted as fulfilling the dissertation requirement for the Degree of Doctor of Philosophy.

\_\_\_\_\_ Date: August 7, 2015  
Linda Shaw

\_\_\_\_\_ Date: August 7, 2015  
Michael Hartley

\_\_\_\_\_ Date: August 7, 2015  
Betul Ozkan-Czerkowski

Final approval and acceptance of this dissertation is contingent upon the candidate's submission of the final copies of the dissertation to the Graduate College.

I hereby certify that I have read this dissertation prepared under my direction and recommend that it be accepted as fulfilling the dissertation requirement.

\_\_\_\_\_ Date: August 7, 2015  
Dissertation Director: Linda Shaw

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## DEDICATION

This dissertation is dedicated to my parents.

For their endless love, support, and encouragement.

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## ABSTRACT

Each of the following three articles offers a distinct thesis regarding the clinical supervision of rehabilitation counselor students and the use of technology. While the research questions and perspectives in each of the articles are different from one another, the articles are similar in that they all examine the same course, more specifically, clinical practicum in rehabilitation counseling. The focus of the first article (Chapter 2), “Content Analysis of Rehabilitation Education/Rehabilitation Research, Policy and Education: 1995-2015”, was to conduct a content analysis of *Rehabilitation Education* (later renamed *Rehabilitation Research, Policy, and Education* [RE/RRPE]) to determine publication trends. Additionally, the authors wanted to ascertain how often articles were written in RE/RRPE focusing specifically on the use of technology in the training and supervision of rehabilitation counseling graduate students. The second article found in Chapter 3 is titled “A Selected Review of Clinical Supervision Practices as Documented in Rehabilitation Counseling Syllabi”. It examines a select group of practicum courses and their corresponding syllabi offered in graduate rehabilitation counselor education programs. The review includes the definition and objectives of practicum, and a review of the current methods utilized in conducting supervision, especially the use of technology and distance modalities. The third article (Chapter 4) titled “Rehabilitation Counseling Practicum – Interviews with Selected Faculty Supervisors” looks at the perspectives of rehabilitation counseling faculty in relation to the current and future uses of technology and distance modalities in the training and supervision of counseling students during their practicum fieldwork experiences.

## CHAPTER 1: INTRODUCTION

### Explanation of the Problem and Its Context

Clinical supervision is a key component to the training and development of counseling professionals, and has been labeled the signature pedagogy and an indispensable component in preparing counseling professionals for clinical practice (Kozina, Grabovari, De Stefano, & Drapeau, 2010; Luke & Gordon, 2011). According to Holloway (1992), professional counselor education depends on the supervisory process during fieldwork experiences in order to “facilitate the development of the student from the novice to the autonomously functioning professional” (p. 177). Correspondingly, the Council on Rehabilitation Education’s (CORE) *Accreditation Manual for Masters Level Rehabilitation Counselor Education Programs* (2010), requires that students enrolled in a practicum experience complete a minimum of 100 hours of supervised rehabilitation counseling, including one hour per week of individual and 1 ½ hours per week of group supervision by a program faculty member or qualified individual, and have their performance/counseling skills evaluated in the form of a written progress review. More specifically, students are required to obtain at least 40 hours direct counseling experiences with people with disabilities and conduct interviews that will be reviewed by a supervisor.

Although there is no dispute about the importance of clinical training and practicum experiences, there has been little recent inquiry that has examined the pedagogy of clinical supervision and/or practicum in rehabilitation counselor education. In addition, advances in technology and its use in the supervision process have received little attention in the rehabilitation counselor education literature. Because of the

continuing evolution of CORE standards, with the most recent update in 2010, it is important to understand existing practices and experiences provided to students enrolled in rehabilitation counseling practicum.

The current study seeks to explore and understand the: (1) types of current practicum experiences being provided and (2) current types of technologies used to facilitate student/supervisor interactions. More specifically, the author will explore the following areas: emphasis of the practicum, clients/consumers, settings, methods of instruction (including technology used), supervision strategies, make-up of the class, sequence of courses, and supporting documentation.

### **Three Studies on the Clinical Supervision of Rehabilitation Counselors and the Use of Technology**

Each of the following three articles offers a distinct thesis regarding the clinical supervision of rehabilitation counselor students and the use of technology. While the research questions and perspectives in each of the articles are different from one another, the articles are similar in that they all examine the same course, more specifically, clinical practicum in rehabilitation counseling. The focus of the first article (Chapter 2), “Content Analysis of Rehabilitation Education/Rehabilitation Research, Policy and Education: 1995-2015”, was to conduct a content analysis of *Rehabilitation Education* (later renamed *Rehabilitation Research, Policy, and Education* [RE/RRPE]) to determine publication trends. Additionally, the authors wanted to ascertain how often articles were written in RE/RRPE focusing specifically on the use of technology in the training and supervision of rehabilitation counseling graduate students. The second article found in Chapter 3 is titled “A Selected Review of Clinical Supervision Practices as Documented

in Rehabilitation Counseling Syllabi”. It examines a select group of practicum courses and their corresponding syllabi offered in graduate rehabilitation counselor education programs. The review includes the definition and objectives of practicum, and a review of the current methods utilized in conducting supervision, especially the use of technology and distance modalities. The third article (Chapter 4) titled “Rehabilitation Counseling Practicum – Interviews with Selected Faculty Supervisors” looks at the perspectives of rehabilitation counseling faculty in relation to the current and future uses of technology and distance modalities in the training and supervision of counseling students during their practicum fieldwork experiences.

In the present section, I describe the organization of the dissertation and introduce the purpose of each of the three articles. An overview of the results from each of the articles will be provided in the final chapter. Like a traditional dissertation, this three-article dissertation contains five chapters. However, unlike the traditional format, chapter one begins with an introduction to the articles including a review of the relevant literature, chapters two through four follow with three self-contained articles, and chapter five ends the dissertation with a conclusion highlighting the most significant results from each of the three articles and an overall discussion of the significance.

Each of the three articles follows roughly the same organization with sections for the introduction, literature review, methods, results, and discussion. Each of the method sections contains subsections on data collection and data analysis. Chapters two and three utilize content analysis chapter four utilizes qualitative interviews.

### **Purpose of the Three Articles**

The purpose of the research in the first article, “Content Analysis of Rehabilitation Education/Rehabilitation Research, Policy and Education: 1995-2015” was to systematically examine the literature related published in RE/RRPE to the use of technology in the training and supervision of graduate counseling students. The overarching research question for the first article was: 1) *what are the publication trends of RE/RRPE related to the use of educational technology and distance education in rehabilitation counselor education?*

The purpose of the research in the second article, “A Selected Review of Clinical Supervision Practices as Documented in Rehabilitation Counseling Syllabi”, was to explore current supervisory practices and related documentation pertaining to clinical practicum in select rehabilitation counseling graduate programs. In addition, this study was designed to determine the degree of syllabi alignment with the Council on Rehabilitation Education accreditation standards for rehabilitation counseling graduate programs. The research questions for the second article were: 1) *What are the current clinical supervision practices of selected programs as documented in rehabilitation counseling syllabi?* and 2) *What types of technology or distance modalities are utilized to facilitate the training and supervision of graduate rehabilitation counselor students during practicum experiences?*

The purpose of the research in the third article, “Rehabilitation Counseling Practicum – Interviews with Selected Faculty Supervisors”, was to explore the perspectives of rehabilitation counseling faculty related to the current and future use of technology in the training and supervision of graduate rehabilitation counseling students.

The research questions for the third article are: 1) *What kinds of technology do rehabilitation educators currently use to train and supervise students?* and 2) *What are the pro/cons of technology use?*

## **Review of the Literature**

**Rehabilitation Counseling Practicum.** For many years in rehabilitation counselor education, training has involved not only traditional didactic coursework, but has also included hands-on opportunities for students to apply what they have learned in the classroom by performing the role of a rehabilitation counselor in practical settings. Rehabilitation counselors typically develop the knowledge, skills, and attitudes necessary for professional practice through pre-service preparation in the form of a practicum fieldwork experience (Maki & Delworth, 1995). These experiences include working directly with clients while being observed by other students and closely supervised by rehabilitation counseling faculty. As noted above, the CORE accreditation requirements define the various components to be included in a rehabilitation counseling practicum experience.

The initial *Accreditation Manual* (1978) included practicum with all other courses in the “Academic Program” section. Practicum was defined as:

C.10.11 – Practicum in Rehabilitation Counseling – Supervised individual interviewing and counseling with disabled persons, participation in case conferences, client staffing, plan development, client evaluation, referral, case recording, and caseload management.

In 1991, according to Dalgin, Bruch, and Barber (2010), revisions to the *Accreditation Manual* provided procedural direction to the practicum experience and

gave specific recommendations including 100 clock hours of practicum experience, written expectations and procedures specified in a manual or other separate document, and an evaluation process of student performance. In total, the *Accreditation Manual for Masters Level Rehabilitation Counselor Education Programs* has undergone four revisions, occurring in 1991, 1997, 2004, and 2010 toward a goal defined by Shaw and Kuehn (2009) as ensuring the continued relevancy of the accreditation standards in rehabilitation counseling practice.

Currently, in addition to the required client and supervision hours specified above, Section D: Clinical Experience of the *Accreditation Manual for Masters Level Rehabilitation Counselor Education Programs* (2013, p. 38) states that

D.1 – Practicum students shall have experiences that increase their awareness and understanding of the differences in values, beliefs, and behaviors of individuals who are different from themselves.

D.1.1 – If practicum experiences are provided off-campus, there will be direct and periodic communication throughout the semester between the site supervisor and the faculty (e.g., site visits, conference calls, video-conferencing, electronic communication). Practicum activities shall be documented in logs, progress reviews, and summaries. The program faculty member responsible for practicum supervision must be a CRC.

D.1.2 – Written expectations, procedures, and policies for practicum will be distributed to students and supervisors. This will include the policy that the practicum is a prerequisite to the supervised rehabilitation counseling clinical internship experience.

D.1.5 – In states that have specific practicum supervision requirements for counselor licensure, the program shall make the required supervision experiences consistent with the licensure requirements available to those students desiring to qualify for licensure.

D.1.7 – There shall be a written procedure for responding to students who do not demonstrate satisfactory practicum knowledge or clinical skills.

D.1.8 – The individual supervision of five students shall be considered equivalent to the teaching of one course.

According to Stude (1998), several purposes are served by the practicum experience in training novice rehabilitation counselors. Stude indicated that first, and perhaps most important, students are given the opportunity to apply classroom learning to real-life situations. This includes the testing of theoretical counseling approaches as well as the application of didactic learning in a practical setting. Next, students are given the opportunity to engage in interviewing and counseling sessions with clients with disabilities. Stude noted that this interaction, in the intimacy of the interview or counseling session, gives the student the chance to begin the desensitization process necessary in viewing persons as individuals rather than as persons with disabilities. Third, and described in detail below, the clinical supervision process and the opportunity for students to interact with a supervisor, is one of the greatest benefits of the practicum experience. Lastly, the clinical experiences afforded to students through the practicum give the student the opportunity for personal contact with cultural diversity. Stude explained that dealing with real clients in clinical settings exposes students to individuals

who are ethnically and culturally different from themselves and has the potential for facilitating introspection and sensitivity.

The Commission on Rehabilitation Counselor Certification (CRCC, 2014) *Scope of Practice Statement* identifies the requirements, in terms of knowledge and skills, required for the provision of effective rehabilitation counseling services to persons with physical, mental, developmental, cognitive, and emotional disabilities. Students entering rehabilitation counselor education programs must acquire a knowledge base and demonstrate skills in the following clinical practice areas, outlined in the *Scope of Practice Statement*: assessment and appraisal; diagnosis and treatment planning; career (vocational) counseling; individual and group counseling treatment interventions; case management, referral, and service coordination; program evaluation and research; interventions to remove environmental, employment, and attitudinal barriers; consultation services; job analysis, job developments, and placement services; and the provision of consultation about and access to rehabilitation technology.

In order to develop competence in these practice domains, Maki and Murray (1997) suggested a best practices approach to clinical preparation of rehabilitation counseling trainees. The authors recommended a core group of practicum experiences including: (a) prepracticum, (b) community-based practicum on a part-time basis, and (c) community-based internship on a full-time basis. The clinical preparation at the prepracticum level focuses on the development of basic counseling skills in a laboratory or university-based setting. Experiences in a laboratory setting should be designed for students to develop a personal philosophy of counseling and the knowledge and skills that are viewed as requisite to counseling clients with disabilities within an agency. These

experiences might include lectures, demonstrations, and clinical examples to train students for community-based interactions. The prepracticum experience prepares rehabilitation counselors in training for a subsequent community-based practicum, which should include working in an agency for up to 12 hours per week for a full semester. Lastly, students complete a clinical internship that involves working full-time for one semester in a community agency placement. The practicum and internship experiences should include concurrent university based instructions, clinical guidance and supervision.

**Clinical Supervision.** Clinical supervision is an integral part of the process by which competent rehabilitation counselors and other mental health professionals are trained. Within the counseling field, no clear and concrete definition of supervision exists and thus definitions have been stated in several ways (Tromski-Klingshirn, 2006).

According to Bernard and Goodyear (2004):

“clinical supervision should occur when a senior member of a profession supervises a junior member, the relationship is evaluative, occurs over time, provides opportunities for the supervisee to develop skills under their supervisor’s monitoring, and acts as a gate-keeping function for the profession” (p. 8).

Clinical supervision has also been defined as an “intensive, interpersonal focused one-to-one relationship in which one person [supervisor] is designated to facilitate the development of therapeutic competence in the other person [supervisee]” (Loganbill, Hardy, & Delworth, 1982, p. 4). In a working definition of clinical supervision, Milne (2007) claims that the functions of supervision include quality control, maintaining and facilitating the trainees’ competence and capability, and helping trainees’ to work

effectively with clients. The word “supervise” literally means “to watch or direct (someone or something) (Webster, 2014). Thus, in general, a supervisor is one who watches or directs the work of another with responsibility for the quality of that work.

Many disciplines in the mental health field, such as psychology, counseling, and social work, have required clinical supervision in the training of competent clinicians. Historically, these disciplines have used psychological theories that largely directed clinical work with client populations, and adapted them to the practice of supervising trainees. According to Bernard and Goodyear (1998), these differing psychological theories (psychodynamic, person-centered, behavioral, etc.) have served as the basis for supervisors to draw from in their work with supervisees. Despite the lack of a concrete definition of clinical supervision, and variations in therapeutic orientation, supervision of student trainees remains one component considered vital to the training of future clinical practitioners (Kozina et al., 2010).

**Previous Examinations of Rehabilitation Counselor Training Practica.** Over the past 20 years, several researchers have examined rehabilitation counselor preparation programs in an effort to better understand the types of practicum experiences being provided to student trainees. Typically these examinations have been shaped in one of two ways – surveys on practicum design and implementation, and document analysis of practicum syllabi and fieldwork manuals.

***Herbert and Ward (1989).*** Herbert and Ward (1989) conducted a national survey of CORE-accredited rehabilitation counseling programs to determine supervisory practices used in master’s level practica during January and December 1988. The survey was distributed to all CORE-accredited rehabilitation counseling programs that were

listed in the National Council on Rehabilitation Education (NCRE) *Membership Directory* (1988-1989). The NCRE Research Committee evaluated the initial form of the researcher's survey, with the final form distributed to 64 rehabilitation counseling programs that offered counseling practica. Each university graduate program coordinator/director received a research packet containing several copies of the survey, and were asked to distribute the survey to all university and/or agency personnel responsible for providing practicum supervision. Ultimately, survey responses from eligible programs were obtained from 55 programs, representing an 86% response rate.

The researchers sought to answer the following questions: (a) what are the personal and professional characteristics of practicum supervisors?, (b) what program characteristics typify rehabilitation counseling practica?, and (c) what modifications are needed to improve practicum training? In their study, Herbert and Ward defined *practicum* as "the preinternship experience that is offered in developing basic counseling skills" (p. 164).

*Supervisor characteristics.* In their study, Herbert and Ward found that most respondents were males (73.4%), predominately white (87.1%), with an average age of 44.8 years. The surveyed supervisors averaged 11.5 years working as rehabilitation educators, 11.3 years working as professional counselors, and 10.2 years teaching master's counseling practicum. The overwhelming majority of practicum supervisors surveyed worked in university settings (87.2%). The majority of respondents had attained the rank of full professor, with nearly 75% receiving training in counselor supervision.

According to Herbert and Ward, on average, the respondents typically supervised nearly seven trainees, with an average weekly expenditure of 4.5 hours in individual supervision, 2.0 hours in group supervision, 1.8 hours reviewing case notes and other written documentation, and .88 hours giving practicum lectures and class presentations. Interestingly, the authors found that supervisors devote approximately 75 minutes per week to each supervisee, consisting of 40 minutes of individual supervision, 20 minutes of group supervision, and 15 minutes to review case notes of the supervisee and client counseling interactions. Lastly, Herbert and Walker found that 91.3% supervisors were satisfied or extremely satisfied with the counseling supervision they provided to supervisees.

*Program characteristics.* Herbert and Ward determined that the average practicum lasted 17.3 weeks with students providing services to a wide variety of clientele. The clientele included persons who were emotionally impaired, physically disabled, chemically dependent, mentally retarded, non-disabled, sensory impaired, neurologically impaired, head injured, and stroke clients. A review of training sites and the extent to which each site is used by practicum supervisees indicated that no particular training site was preferred over any other type of training site. The authors found that state/federal rehabilitation agencies, nonprofit rehabilitation centers, drug/alcohol treatment centers, university counseling centers, and mental health clinics were the most common training sites used by practicum supervisees.

It was interesting to note that 100% of rehabilitation counselor supervisors indicated that the primary rehabilitation services that should be provided by trainees involved individual counseling. According to the authors, the central practicum activity

focused on developing individual counseling skills, with 90% including individual counseling in their practicum experiences. Other services provided by trainees in their practicum experiences included job seeking skills training, vocational testing, job development/placement, group counseling, work adjustment training, psychological testing, family counseling, and instructional seminars.

In terms of particular supervisory techniques, verbal feedback concerning supervisee performance for each client was cited being used most often, with 92.6% of respondents incorporating this method in their evaluation of supervisees. To a lesser extent, written feedback, and standardized rating scales or checklists were also used in the evaluation process. Practicum grades were determined by the use of supervisor's ratings of supervisee's counseling, outside assignments, peer ratings, written examinations, and/or client/consumer ratings.

*Recommendations to improve practicum.* Herbert and Ward received nearly 80 narrative comments related to improving practicums in their survey. The authors classified the responses into two categories – administrative/policy change issues and technique/program content changes. In terms of administrative policy recommendations, the most notable theme was associated with the need to develop written supervisory standards approved by CORE. Issues included specifying supervisor/supervisee training requirements, establishing minimum standards for practicum site supervisors, identifying the number of contact hours required and procedures used to assess counselor competency, developing an ethical code for supervisors, and delineating supervisor responsibilities that exist in prepracticum.

The second major response category concerned specific techniques or content areas that were perceived as necessary in order to improve the practicum experience. According to Herbert and Ward, this category contained a wide variety of responses, including recommendations to provide more counseling experience in working with groups, families, nondisabled persons, substance abuse issues, clients with AIDS, sexuality problems, cross-cultural concerns, and ethical conduct practices. In addition, several respondents to the survey believed that greater emphasis on live supervision and supervisor-supervisee role play experiences were needed to facilitate counseling skill development. Lastly, the need to develop written training materials and videotapes of various clinical situations, counseling techniques, and counseling theoretical orientations were also identified.

**Stude (1998).** Stude (1998) completed a selected review of seven practicum courses offered in graduate rehabilitation counselor education programs located on the on the west coast of the United States. According to the author, programs were chosen for their representation of three states and the availability of practical travel arrangements. Stude visited each campus in an effort to review material describing program requirements related to practicum, review the syllabi and/or practicum manual utilized in conjunction with the practicum course, and discuss with practicum instructors and program coordinators about objectives of and methods used in conducting the practicum. The author also observed at least one practicum session at each of the institutions visited. Visits to the seven programs resulted in observations regarding emphasis, clients/consumers, settings, methods, supervision, class make-up, and sequence of courses.

*Emphasis of the practicum.* According to Stude, all of the courses observed emphasized helping students develop interviewing and counseling skills. Counseling skills as applied to rehabilitation settings, basic listening skills, goal setting, problem solving, personal issues that might affect counseling, and incorporating professional ethics into counseling practices were all included in this general domain.

*Clients/consumers.* Clients/consumers for individual counseling sessions were obtained in one of three ways in Stude's study. Two programs reviewed placed students in client/counselor dyads and triads for the purpose of role playing interview/counseling sessions; three programs utilized audio/video taped interview counseling sessions conducted by the student in field placements or on the job, which were replayed and evaluated in class; and two programs assigned clients to students in a university-operated community counseling center.

*Settings.* According to Stude, there was considerable variability in the setting utilized for the practicum. In four of the programs reviewed, the author found that the practicum was conducted in a regular classroom, with students observing each other role playing interview/counseling sessions or reviewing audio/video taped session brought in from outside the classroom. In the other three programs evaluated by Stude, a "reasonably sophisticated" settings was used which included counseling booths equipped with two-way mirrors and audio/video taping capabilities.

*Methods of instruction.* In all programs reviewed, methods of instruction varied between didactic and participatory experiences. This included mini-lectures during which theoretical counseling concepts were applied to practical situations, role-playing dyads or triads, and actual interviewing/counseling sessions with clients/consumers

volunteering for the experience. In all of the programs evaluated by Stude, audio/video taped feedback was an important aspect of the course. The emphasis was placed on interactive feedback in which students were encouraged to share their perceptions and observations regarding their own skills as well as the skills of other class members.

*Supervision.* In all of the programs reviewed, overall the course instructor provided supervision of interview/counseling sessions conducted by students. According to Stude, this generally included group supervision, observations of role playing in the classroom, or evaluation of audiotapes and videotapes replayed in class. In one program, the author noted, university supervisors were hired on a part-time basis to provide weekly supervision for 4-5 students. This supervision consisted of listening to or viewing audio/video tapes with each student for 1 hour each week. The university supervisor then met with the course instructor every 3 weeks to discuss individual student progress.

In three of the courses reviewed, students observing sessions were required to fill out an evaluation form as they observed each counseling session. This written feedback was then given to the student counselor at the conclusion of each session. In all courses evaluated by the author, written as well as verbal feedback was provided by all of the course instructors. Grading ranged from a letter grade to pass/fail or credit/no credit. In all courses, successful completion of the practicum course was a requirement to enter the internship.

*Make-up of the class.* Of the seven courses reviewed by Stude, six restricted enrollment to rehabilitation counseling students. The other course mixed rehabilitation counseling students with students from other counseling disciplines (marriage, family, child counseling; career counseling; school counseling). Three of the courses observed

limited enrollment to 6 students per section, while the other courses included 9, 13, 15, and 21 students, respectively.

*Sequence of courses.* Stude found that four of the seven programs observed offered more than one course that met the definition of prepracticum or practicum. Stude defined practicum as a “laboratory, on-campus experience or a community-based experience (p. 303). For the programs he observed that required more than one course, the sequence included a beginning practicum not associated with a specific field placement and an intermediate and advanced practicum taken in conjunction with field placement and internship experiences.

*Herbert (2004).* Herbert (2004) completed a review of CORE-accredited rehabilitation counseling programs to examine written materials (i.e., course syllabi, student/supervisor handbooks, program description materials) related to supervised clinical work. Using the NCRE *Membership Directory* (2002-2003) the author contacted program or fieldwork coordinators at 85 accredited rehabilitation counseling education programs, ultimately receiving written materials from 59 respondents. In addition to evaluating written materials, Herbert also reviewed existing outcome measures used to assess student competence in rehabilitation counseling practica and internship.

*Supervised practicum.* According to Herbert, programs reviewed offered between 3 and 12 credits for supervised practica, with most (69%) offering 3 credits. In terms of supervised experience, all programs evaluated required the 100-hour minimum hours mandated by the CORE standard. Interestingly, several programs went beyond this minimum standard, with three requiring at least 360 supervised hours (Boston University, University of South Florida, University of Wisconsin-Madison). Herbert noted that the

number of required fieldwork hours was positively correlated with the number of credits given for practicum. For programs that specified a minimum number of direct client hours (18 of 59 programs) the average was 45 hours, with a range from 30-67.5 hours.

The author also evaluated supervisory approaches. According to Herbert, supervisors were more likely to involve both individual and group supervision (57%) than individual supervision alone (7%). The remaining 36% of programs examined did not report any preferred supervisory approach. In total, weekly supervision entailed an average of 70 minutes for individual supervision and 106 minutes for group supervision. Nearly all programs reviewed (93%) used audio or videotape recordings of student-client interactions. In regards to frequency, 43% of programs reviewed fewer than one client-student tape per week, 22% reviewed at least one tape per week, and 29% reviewed more than one tape per week.

Evaluation of the supervised practica occurred on various levels in the programs reviewed. Herbert indicated that on-site supervisors were more likely to evaluate student performance than university faculty members (65% vs. 35%), with 52% of programs requiring students to conduct evaluations of their individual practicum supervisors, field sites, or both. In regards to student performance, the results of Herbert's review clearly showed that case review was the preferred method. Every program with practicum information (n = 41) cited this approach as a way to monitor student-client interactions and document the case management process.

***Dalgin, Bruch, and Barber (2010).*** Dalgin et al. (2010) conducted a survey of all master's degree rehabilitation counseling programs that were institutional members of NCRE as of 2008. The authors sought to determine the processes and practices used in

practicum and document the types of supervision provided, training settings, activities related to rehabilitation skill development, written documentations used during practicum, and the use of microskills training. In addition, the authors explored any changes to practicum experiences that were affected by the implementation of the 2004 change in CORE standards. Dalgin et al. developed a 45-item survey, which was field tested with three rehabilitation counselor educators, all of whom teach practicum within their respective programs. The final survey consisted of six major areas: program information, processes of practicum, field experiences, on-campus experiences, counselor training centers, and supervision.

*Required practicum hours.* Results of the author's survey indicated that 81% of respondents were not impacted by the 2004 change in CORE standards requiring 40-hours of direct client contact and services to persons with disabilities. The remaining 19% of programs suggested that the 2004 standard changed the way practicum is conducted. Dalgin et al. specified that the predominant change for affected programs was ensuring that the 40 direct hours were specific to contact with persons with disabilities.

*Practicum components.* Due to CORE standards, there was consistency for several practicum elements, Dalgin et al. noted. For example, the majority of programs included a written program manual (98%), course syllabus (96%), and formal orientation meetings (85%). Other components were not found to be as common across the programs surveyed. Forty percent of programs required criminal background checks, practicum textbooks or required reading was reported by 54% of respondent and 50% required students to sign-off after reading the CRCC Code of Ethics.

The majority of programs surveyed (96%) listed having a community based field placement component, with some programs using on-campus counseling centers or specific counseling training centers for use in obtaining the required direct contact hours. Only 23% of surveyed programs reported using a counselor training center or on-campus facility where practicum students have the opportunity to meet with clients under faculty supervision. Programs most frequently reported using field sites including state/federal vocational rehabilitation agencies, community mental health programs, and other community rehabilitation providers. Other field placements included substance abuse treatment centers, veteran's associations, centers for independent living, rehabilitation hospitals, and one-stop careers centers.

*Practicum sequence.* According to Dalgin et al., the majority (83%) of survey respondents reported a required microskills training course prior to the practicum. Another 3% of programs reported incorporating the microskills course concurrently with practicum. All of the programs requiring the prepracticum experience indicated using role-play exercises to enhance learning. In addition, 83% used videotapes and 47% used audiotapes to record and review these interactions.

*Practicum activities.* Dalgin et al. asked survey participants to indicate how often students are provided with opportunities for specific rehabilitation counselor skill development. The authors used a scale of "always", "sometimes", and "never". The majority of programs (77%) reported that practicum students "always" have an opportunity to provide individual counseling. Other activities in the "always" category, such as group counseling (11.5%), vocational/career counseling (55.8%), job

development and placement (17.3%), vocational assessment (13.5%), and case consultation (50.0%) were less consistent.

*Written documentation skills.* The authors reported that there appeared to be little consistency across programs, in terms of written documentation. The authors noted that most programs (60%) “always” provide students opportunities to use intake forms, while only 40% indicated “sometimes” students have this opportunity. In addition, 77% of responding programs in the authors investigation “always” provided students with opportunities to complete a written case note.

*Supervision.* Dalgin et al. indicated that almost all of the responding programs (96%) provided individual faculty supervision and group supervision (98%). In terms of class size, the authors noted that group supervision with five or less students was reported by 66% of programs, while 32% reported conducting group supervision with five or more students. One interesting point noted by Dalgin et al. was that their data indicated that the majority of practicum supervisors are not regularly reviewing practicum students’ counseling work via videotapes. When asked how many videotapes are required to be submitted for review within the practicum semester, the respondent of 52% of programs reported none were required. Similarly, when survey respondents were asked how many audiotapes were required to be submitted for review during supervision, nearly half (46%) reported none.

## **Summary**

While these studies are important, their relevance to current practice is dated. Outside these efforts, there has been no recent study regarding supervised clinical practicum practices in rehabilitation counselor training. In addition, with the pace

technology advances and is being incorporated into training strategies in the counseling field, it is important to frequently reexamine these modalities and assess their efficacy and future use. According to Herbert (2004), obtaining current information about practice and policies associated with supervised practica may assist rehabilitation counselor educators in evaluating whether changes as applied to their programs are required. In addition, Herbert writes that given that recently enacted accreditation standards will apply to programs seeking accreditation, analysis of current practice provides an indication of the extent to which programs are in compliance with the clinical experience component.

This dissertation offers three distinct perspectives on practicum, clinical supervision, and the use of technology in rehabilitation counselor education programs. It explores the past use of technology, the current use of technology, and the potential future use of technology in the training and supervision of rehabilitation counseling graduate students. It is intended to contribute to our current understanding regarding the methods and practices of the rehabilitation counseling practicum, especially related to the use of technology and distance modalities. This research is needed given that the most recent practicum syllabi analysis (Herbert, 2004) is dated and other practicum examinations (Dalgin et al., 2010) add little to our understanding of the recent and future impact of technology in the training and supervision of rehabilitation counseling students. This research explores both the definitions and objectives of practicum and a review of the methods utilized in conducting these experiences as recorded by formal documentation and perspectives of faculty coordinators. The specific methods, results, and conclusions of each of the three papers included in the study are presented in the following chapters of this dissertation.

**CHAPTER 2: CONTENT ANALYSIS OF REHABILITATION  
EDUCATION/REHABILITATION RESEARCH,  
POLICY AND EDUCATION: 1995-2015**

**Abstract**

The author conducted a content analysis of the articles published between the years of 1995-2015 in Rehabilitation Education/Rehabilitation Research, Policy, and Education. The author coded a total of 46 articles related specifically to distance education into six content categories. These categories included pedagogy/teaching strategies, accessibility, clinical supervision, hybrid instruction, student expectations/perceptions/experiences, and ethical issues. Findings address the frequency of article topics and suggestions for future contributions to the journal.

The popularity of online or distance learning continues to rise in higher education. Online learning environments are designed to deliver coursework to students who may not physically be at a specific site; rather, students and instructors communicate with one another through the use of technology (Motycka, St. Onge, & Williams, 2013). The acceptance and use of e-learning stems from its many advantages, such as 24/7 accessibility, anytime-anywhere learning, ease of update of information, and self-directed learning (Tan & Hung, 2003). Like many other fields, counselor education programs are increasingly integrating technology into the training and supervision of students (Luke & Gordon, 2011). This is not only due to the benefits of online learning in general, but is also due to the increased use of technology by practicing counselors in recent years (Bourgeois & Pedani, 2015a). When entering an increasingly technical workplace, graduating counselors are expected to possess a minimum set of technology skills. Online learning and the use of technology are considered important components of the instructional process, and today's college curriculums are charged with preparing students for work in the 21<sup>st</sup> century (Boboc & Vonderwall, 2012). Not surprisingly, a study by Nelson, Nichter, and Henriksen (2010), found that almost half of 127 counselor education programs surveyed had either totally or partially integrated distance learning into their programs. Despite the pervasive use of technology and online learning, the empirical evidence on the effectiveness of these modalities in rehabilitation counselor education programs is unclear.

Traditionally, supervision and observation of novice rehabilitation counselors has occurred with face-to-face in-person meetings (Chapman, 2006; Kanz, 2001). Rehabilitation counseling supervisors have relied on face-to-face supervision to teach

counseling skills, with simulated counseling sessions, role plays, and live supervision being integral components to this training (Rockinson-Szapkiw & Walker, 2009). In-person clinical supervision has progressed through one-way mirror, audio, and video observation as the media of choice when supervising pre-service counselors (Nelson et al., 2010). More recently, Web 2.0 technologies have found a place in the training and clinical supervision of counselors. Web 2.0 refers to the second generation of the Internet that utilizes the web as a platform to facilitate collective intelligence, contribution, and collaboration (Rockinson-Szapkiw & Walker, 2009). Examples of these technologies include learning management systems, podcasts, virtual worlds and simulations, blogs, wikis, and collaborative conferencing software.

The use of technology comes with many challenges, both clinical and ethical. Lund and Shultz (2015) argue that professional guidelines addressing distance supervision and the use of technology need to be general enough to adapt to new technological advances while still providing clear and consistent guidance for practice. New and expanded guidelines on the ethical use of technology, including supervision, can be found in the latest edition of the CRCC Code of Professional Ethics for Rehabilitation Counselors. The specific inclusion of such guidelines reflects both a growing interest in technology and distance education and the need to discuss the proper use of technology in rehabilitation counselor education (Lund & Shultz, 2015). Therefore, it is important to learn about the extent to which and the ways in which rehabilitation researchers and educators are addressing both these ethical guidelines and clinical challenges.

Just as individuals are encouraged to assess themselves on a regular and ongoing basis, periodic self-reflection can be beneficial for the counseling profession (Blancher, Buboltz, & Soper, 2010). For many professionals, *Rehabilitation Education* (later renamed *Rehabilitation Research, Policy, and Education* [RE/RRPE]) is considered the voice of rehabilitation counseling education. RE/RRPE is the official journal of the National Council on Rehabilitation Education (NCRE), a professional organization of rehabilitation educators. NCRE was formed in 1955 and has grown to represent over 100 institutions of higher education and 400 individual members (NCRE, 2015). NCRE advocates for up to date education and training and the maintenance of professional standards in the field of rehabilitation (NCRE, 2015). The journal features original quantitative and qualitative research articles, articles addressing disability policy, the education of rehabilitation professionals, and the provision of rehabilitation services (Springer, 2015).

For decades, the content RE/RRPE has mirrored the changes in the rehabilitation counseling profession. As professional and educational definitions and roles have changed, the boundaries for potential topics of interest have expanded. One of the most revealing ways discern the specific topical areas considered important by rehabilitation counselor educators and professionals is to examine what they publish. According to Mondello and Pederson (2003), a critical examination of the literature in a given field can help determine what is on the cutting edge, considered valuable, or esteemed. In addition, such an inward look at publication trends can help to reveal the future of the field.

### **Purpose of the Study**

The purpose of this study was to conduct a content analysis of *Rehabilitation Education* (later renamed *Rehabilitation Research, Policy, and Education* [RE/RRPE]) to determine publication trends. Due to the increased use of technology and distance learning in rehabilitation counselor education programs, the author wanted to ascertain how often articles were written in RE/RRPE focusing specifically on the use of technology in the training and supervision of students. This journal was chosen because of the direct impact it has on preparing rehabilitation counselors and rehabilitation counselor educators, and providing research related to best practices in rehabilitation counseling education. Consequently, the study addressed the following two questions: 1) *what are the RE/RRPE publication trends related to the use of educational technology and distance education in rehabilitation counselor education?* and 2) *what articles appearing within RE/RRPE can help to inform the use of technology in practicum and/or internship supervision?*

### **Methodology**

A qualitative content analysis was used to examine RE/RRPE from 1995 through 2015. In professional counseling journals, many scholars have used this methodology to analyze and identify themes, trends, submissions patterns, and topic areas (Evans, 2013). The primary intent of a content analysis is to gather text and analyze themes presented in text(s) (Krippendorff, 2013). Research has shown that content analysis is beneficial with three types of research inquiries (Neuman, 2003). First, content analysis is regarded as a way to uncover themes in text that may be missed through causal observations. Second, content analysis is effective when a significant amount of text needs to be reviewed.

Lastly, content analysis supports a separation between the researcher and the content. There are three approaches to qualitative content analysis: conventional, directed, and summative (Hsieh & Shannon, 2005). For this content analysis, the researcher used a summative approach. The summative content analysis format was a good fit for this investigation given the breadth of this study and the number of articles to be reviewed. The summative content analysis uses the counting of keywords by using a quantitative approach initially, with an end goal of exploring the usage of the words or themes as indicators in an inductive process (Evans, 2013). The researcher used the following steps for the summative content analysis: (a) preparing the data, (b) defining the unit of analysis, (c) developing categories and a coding scheme, (d) testing the coding scheme, (e) coding all text from RE/RRPE, (f) assessing the coding consistency, (g) drawing conclusions from the coded data, and (h) reporting the findings (Zhang & Wildemuth, 2009).

### **Steps of the Content Analysis**

The first step of the content analysis was gathering all the tables of contents for RE/RRPE issues from 1995-2015. Using university libraries and interlibrary loans, the researcher obtained all tables of content of RE/RRPE published during the 20-year investigation period. Based upon a review of the literature and personal knowledge of online practices in rehabilitation counseling, the researchers brainstormed a list of potential keywords related to technology and distance education and cross-checked the list for consistency and to make sure all possible terms were included.

After the keywords and terms were developed, each RE/RRPE issue's table of contents was reviewed both in print and electronically, covering titles of articles

published from 1995 through 2015. In the initial review of the RE/RRPE articles titles, the following keywords were used: distance, hybrid, online, blended, digital, technology, technology-enhanced, web-based, electronic, e-learning, internet-based, computer, software, cyber, and information technology. After review of the titles was completed, the body of each article was examined to determine whether the content or emphasis of the article was focused on the use of technology or distance education. Using Evans (2013) model, a decision was made to only include articles where 50% or more of the content of the article addressed distance education and educational technology issues. For example, the word *accessibility* was found in many article titles but the articles were not related to distance education or instructional technology. However, after review, if half of an article's content related to distance education or instructional technology and use the word *accessibility* in the title, it was included in the analysis.

Next, the researcher developed potential themes by independently reviewing the articles. Consistent with the method of open coding and the concept of data reduction, the researcher and an independent coder identified themes. While the researcher made no initial attempt to anticipate predetermined categories, during the article review process the researchers observed patterns naturally developing from one article to the next. Each article was categorized, and the two coders reached agreement on the themes and placements of the articles. The 50% guideline described earlier was applied to articles that seemed to fall into more than one theme.

After the categorization of the articles was complete, the researcher became interested in the number of empirically based articles published in RE/RRPE related to educational technology and distance education. Consequently, during the process of

developing themes and reviewing each of the included articles, the researcher also noted whether the article was descriptive (practical or conceptual) or empirical (quantitative or qualitative).

To determine inter-rater reliability, the percentage of agreement of coding responses for each of the two coders was calculated using one year of published articles from RE/RRPE. The year was selected using a random number chart. Each coder coded all articles for that year and then met and discussed their general impression of the articles. The percentage of agreement between the coders was calculated at 90% and determined satisfactory to proceed.

### **Results**

During 1995-2015, 561 articles were published in RE/RRPE. Using the 15 keywords, the researchers conducted a content analysis of the title of RE/RRPE article and found 46 titles containing the designated keywords. Regarding keyword frequency, Table 1 provides a graphic representation of the findings. This equated to 8% of articles published by RE/RRPE that had a focus on distance education and instructional technology in rehabilitation education. Out of the 46 published articles in RE/RRPE during the designated time period, several themes emerged: pedagogy/teaching strategies, accessibility, clinical supervision, hybrid instruction, student expectations/perceptions/experiences, and ethical issues. Table 2 displays the themes identified in article in RE/RRPE related to the use of educational technology and distance education.

*Pedagogy/teaching strategies* was the most frequently published distance education/instructional technology article topic for the 20-year time span, accounting for

41% (n = 19) of the articles coded. Articles in this category described approaches used by rehabilitation counselor educators to incorporate technology into their teaching strategies. Articles in this category ranged in topics from general applications and instructional strategies of distance technology in rehabilitation education to teaching specific courses with the use of technology, such as vocational assessment or career development.

*Accessibility* accounted for the second largest percentage (15%, n = 7). Articles in this category focused on accessibility and usability of electronic and information technology. Articles in this category ranged in topics from general issues related to universal design and disability inclusiveness to specific strategies to making learning management systems more accessible for adult students with learning disabilities.

The other topics composed the remaining 45% of the articles published, each accounting for 10% or less of the articles coded. They included *clinical supervision* (10%, n = 4), *hybrid instruction* (10%, n = 5), *student expectations/perceptions/experiences* (10%, n = 4), and *ethical issues* (5%, n = 2). Articles in the *clinical supervision* category typically described considerations for clinical supervision using technology. For example, most articles focused on suggestions for technology utilization for clinical supervision and specific approaches to technology use and supervision used in particular programs. Articles in the *hybrid instruction* category focused specifically on the use of technology and distance modalities to support both on- and off-campus learners in rehabilitation education. Articles in the *student expectations/perceptions/experiences* category focused specifically on the student considerations regarding technology and distance education. Several of the articles in this category described coping strategies and stressors of rehabilitation counseling

students using technology and distance modalities in their graduate programs. Articles in the *ethical issues* category described general ethical issues associated with computer technology and distance education. One article focused specifically on implementation and accreditation issues in the development of distance learning programs in rehabilitation counselor education. In addition, five articles (10%) were unable to be classified into the previous six categories. These were articles that looked at a variety of distance education/technology issues, and did not meet the 50% rule for category classification.

Distance education/instructional technology articles were also coded into “article types”. Practice and conceptual articles accounted for the largest percentage of articles (70%, n = 32) published in RE/RRPE during the 20-year time span. Research articles accounted for the second largest percentage (24%, n = 11), and other articles such as editorials and commentary accounted for the smallest percentage (6%, n = 3). Of the articles identified as research, survey methodology was the most frequently utilized (55%, n = 6). Qualitative methodology accounted for 45% of the articles published (n = 5). Table 3 displays the article types identified in article in RE/RRPE related to the use of educational technology and distance education.

### **Clinical Supervision & Technology Articles**

As noted, a primary goal of this study was to determine the extent of the literature related to the use of technology for clinical supervision of rehabilitation counseling graduate students. Over the 20-year investigation period, a total of four articles were found that met inclusion criteria (Table 4). All four articles were descriptive in nature

and addressed a variety of issues and considerations for implementing technology for clinical supervision.

Stebnicki and Glover (2001) reported on the characteristics, advantages, and limitations of providing clinical supervision online. At the time, email communication was the primary technology available for clinical supervisors to interact with students at a distance. Stebnicki and Glover (2001) described the many advantages of using email communication for supervision including:

- (a) ongoing access to the supervisor and other group members each sharing their expertise in between face-to-face supervision sessions which provides a strong sense of ongoing support, (b) the ability for all participants to respond to critical issues in a timely and convenient manner with an emphasis on brief and precise communication, (c) increased opportunities for equal participation among supervisees in clinical case discussion online and a decrease in misunderstanding nonverbal communication when compared to face-to-face, and (d) supervisees have time to case-conceptualize or process certain clinical issues and respond online after face-to-face supervision meetings (p. 286).

Stebnicki and Glover also described several disadvantages of using email communication for supervision. These included difficulty coming to consensus with certain clinical issues because students tended to take more extreme positions and express more intense emotions than face-to-face interactions, and that clinical supervisors require more standardized procedures, such as increased planning time, in order to facilitate supervision sessions.

Overall, Stebnicki and Glover offered several recommendations for clinical supervisors who choose to facilitate clinical supervision using computer-mediated communication approaches during a practicum course. The authors highlighted the need for clinical supervisors to (a) develop clear guidelines, (b) manage class preparation appropriately, (c) engage in training in the use of new technology, (d) consider web-page design, and (e) be sensitive to individual needs of supervisees.

Shultz and Finger (2003) addressed issues and methods in the provision of distance-based clinical supervision and described one rehabilitation counselor education program's approach to distance-based clinical supervision. The authors highlighted several considerations for programs or practitioners considering the use of technology for distance supervision. These considerations included cost, required technology for students, confidentiality, accessibility, and technical support personnel/needs. At the time (2003), the study of clinical supervision for distance-based rehabilitation counselor education programs was in its infancy. The authors make an early argument that providing clinical supervision at a distance enables participants to engage in all of the traditional activities associated with face-to-face clinical supervision. At the same time, the authors concede that the distance approach requires empirical data that provides evidence to support its validity.

Byrne and Hartley (2010) addressed methods and issues in the use of digital recording technologies and one rehabilitation counselor education program's approach to integrating such technology into traditional and distance supervision practices. The author's give background information on the digital recording technology and how its use can help to provide better clinical supervision to rehabilitation counseling students. Both

concerns and benefits of the technology were discussed. Potential concerns such as informed consent and confidentiality were discussed, in addition to data storage and privacy. Despite the noted concerns, the authors described in great detail to potential benefits to using digital recording technology. This technology has become increasingly portable, meaning the ability to record in multiple settings and the recordings are easy to view. By streamlining and uploading digital recordings, clinical supervisors can immediately access student recordings from virtually any location. Lastly, the authors describe how digital technology can be tailored to universal design principles, making the rehabilitation counseling curriculum more accessible to people with disabilities.

In addition to outlining the advantages and disadvantages of digital recording technology, Byrne and Hartley (2010) also described implementing such technology at one rehabilitation counselor education program. The authors detailed the many programmatic considerations including the compatibility of digital recordings, storage of digital recordings, destruction of digital data, and technological competence and support. Overall, the authors concluded “the surface has only been scratched with regard to infusing emerging digital technology into clinical supervision” (p. 64).

Lund and Schultz (2015) addressed ethical and clinical considerations when implementing distance supervision. In their descriptive study, the authors outlined many concerns rehabilitation counselors should be aware of including evidence-based practice, competency, confidentiality, informed consent, and access to supervision. Despite the growing popularity, the authors suggest that there is little empirical evidence to support distance supervision as an equivalent and empirically supported means of providing clinical supervision. The authors recommend future research focusing on client and

supervisee outcomes is needed in order to move distance supervision forward as an evidence-based and ethically sound way of conducting clinical supervision.

### **Discussion**

This study was designed to examine trends in the content of Rehabilitation Education (later renamed Rehabilitation Research, Policy, and Education) over a 20-year period related to educational technology and distance education. In conducting this content analysis, the researcher was surprised at the scarcity of literature in RE/RRPE focused specifically on the use of technology by rehabilitation counselor educators. The researcher had anticipated that there would be a greater number of empirically based studies given the increased use and focus on technology and distance education (Morrisette, Bezyak & Ososkie, 2012). Overall, only 8% (n = 46) of the articles analyzed examined the use of technology or distance modalities in the training of rehabilitation counselors. It is more surprising that only 4 of those 46 articles (9%) focused specifically on the use of technology in supervising rehabilitation counseling students during fieldwork experiences given the increased attention to such issues at professional conferences noted by the researchers. Outside of these efforts, there has been no recent study in RE/RRPE regarding supervised clinical practicum and the use of technology in rehabilitation counselor training. As Lund and Shultz (2015) noted, the empirical evidence supporting the use of distance supervision is also rather limited. This is consistent with the results found in this study. All four articles identified as focusing specifically on the use of technology in supervising rehabilitation counseling students were identified as practical/conceptual pieces. This lack of research in this area raises concerns about potential ethical issues regarding competency, informed consent, and

evidence-based practice that should be considered when rehabilitation counselor education programs are developing their guidelines for distance supervision and the use of technology.

Overall, the findings suggest that there tends to be a much higher percentage of practice/conceptual pieces, perhaps reflecting the fact that new theories or constructs related to the use of technology and distance modalities in rehabilitation education are still emerging and being evaluated and reformulated. This seems supported by the fact that the highest percentage of articles fell under the practice/conceptual category (70%). Articles identified as practice/conceptual pieces typically described potential issues for rehabilitation counselor programs related to the use of technology or individual descriptions of technology practices of specific programs. These articles may also reflect rehabilitation educators' perceptions about what is on the cutting edge or is considered valuable with regard to technology and distance modalities. Clearly, there is a need for rehabilitation counselor education research on the use of technology for supervision. In addition, with the pace at which technology advances and is being incorporated into training strategies in the counseling field, and the need to consider these changes in the continuing evolution of CORE accreditation standards, it is important that researchers frequently reexamine these modalities and assess their efficacy and future use.

### **Conclusion**

The rapid growth of technology and distance education has made the use of such modalities appealing and increasingly popular feature for many rehabilitation counseling programs. As the popularity of online or distance learning continues to rise in higher education, it is especially important to be mindful and critically examine the literature in

related to its efficacy and use. This study was designed to examine RE/RRPE during the past 20 years in order to gain insight into areas of emphasis related to the use of technology in rehabilitation counselor education. Based on the researcher's review, RE/RRPE has published 46 articles in the past 20 years with a range of topics that addressed the field of rehabilitation counseling and rehabilitation counselor education. Although this study involved only one journal and consequently the results cannot be generalized to the whole body of literature, the results of this analysis provide an explicit look into the values and professional beliefs of the discipline of rehabilitation counseling around the topic of technology and distance modalities as reflected by the editors and the individual authors of RE/RRPE. In the past 20 years, it seems that the field may place a high value in pedagogical and teaching strategies and accessibility issues related to the use of technology.

There is a need for this study to be replicated and compared to another in a number of years to examine the direction and extent of this field's scholarly involvement. Additionally, there is a need for further critical examination of other closely related journals. This analysis must be discussed in the context of its limitations. First, it is important to remember that the researchers developed the keywords and content categories. It is quite possible that another group of researchers may devise different keywords and content categories. By pre-selecting the keywords, the author may have limited the number of articles by missing important keywords and by extension important potential articles that describe the topic of interest. Second, the author only coded each individual article into one content category. This process may not have accurately accounted for secondary and tertiary data included in these articles. Third, the researcher

also coded all of the articles based, in part, on their personal experiences. Although the inter-rater consistency was satisfactory, there is a possibility that another group of research might code the same articles somewhat differently to obtain a somewhat different distribution of articles among the content categories. Lastly, the examination was limited only to articles published in RE/RRPE. By focusing on one particular journal, the author had only a narrow view of the extent of the literature related to clinical supervision and the use of technology. Future examinations should take into account other important related journals such as *Counselor Education and Supervision*, *Journal of Counselor Preparation and Supervision*, and *The Clinical Supervisor*. Reviewing journals such as these will provide a better-rounded analysis of the state of the literature on the topic.

In summary, the researcher believes that the results of this study provide an informative look at the values and professional beliefs of the rehabilitation counseling field on the topic of technology and distance modalities as reflected by contributing authors and editors of the journal. Awareness of the direction and emphasis of publications in RE/RRPE regarding professional concerns and current issues can be of benefit to the readers of the journal. The results generated by this content analysis suggest a need for an increased emphasis on empirical evaluations of the effectiveness of various approaches using technology and may serve to provide direction to potential researchers. Given that only four articles were identified that focused specifically on the use of technology and distance supervision, future researchers have the opportunity to center on a variety of research topics that need address in this area. As Lund and Shultz (2015) noted in their recent publication, many ethical issues regarding competency, informed

consent, and evidence-based practice should be considered. More research on comparing client and supervisee outcomes between distance and face-to-face supervision, the supervisor-supervisee relationship, and access to distance-based supervision are also in need of further research consideration.

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**Table 2.1: Frequency count of articles associated with each keyword by 5-year periods**

Keyword	1995-1999	2000-2004	2005-2010	2011-2015
Distance	5	5	4	5
Hybrid	0	0	0	0
Online	0	2	1	2
Blended	0	0	1	1
Digital	0	0	1	0
Technology	1	1	1	0
Technology-enhanced	0	0	0	0
Web	1	0	2	0
Electronic	0	1	1	0
E-learning	0	2	0	0
Internet-based	2	1	0	0
Information technology	0	1	0	0
Cyber	1	1	0	0
Computer	1	1	0	0
Software	0	0	0	0
Total Articles	12	15	11	8

**Table 2.2: Frequency and percentages of articles representing main distance education/instructional technology themes**

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Pedagogy/Teaching Strategies – 19 Articles (42%)

Accessibility – 7 Articles (15%)

Hybrid Instruction – 5 Articles (10%)

Not Classified – 5 Articles (10%)

Student Expectations/Perceptions/Experiences – 4 Articles (9%)

Clinical Supervision – 4 Articles (9%)

Ethical Issues – 2 Articles (5%)

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**N = 46 Articles**

**Table 2.3: Frequency and percentages of research type among distance education/instructional technology articles**

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Practice/Conceptual – 32 Articles (70%)

Research – 11 Articles (24%)

    Survey Methodology (6 Articles, 55%)

    Qualitative Methodology (5 Articles, 45%)

Other – 3 Articles (7%)

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**N = 46 Articles**

**Table 2.4: Description of Clinical Supervision & Technology Articles**

<b>Year</b>	<b>Title</b>	<b>Authors</b>	<b>Research Questions/Objectives</b>	<b>Descriptive/ Empirical</b>	<b>Outcomes</b>
2001	E-supervision as a complementary approach to face-to-face clinical supervision in rehabilitation counseling: Problems and solutions	Mark A. Stebnicki Noreen M. Glover	Report on characteristics, advantages, and limitations of providing clinical supervision online.	Descriptive	<p>Need for:</p> <ul style="list-style-type: none"> <li>Developing clear guidelines for use of email supervision</li> <li>Awareness of time-management issues</li> <li>Training faculty supervision in the use of new technology</li> <li>Web-page design for practicum supervisees</li> <li>Planning supervision sessions</li> <li>Being sensitive to individual needs of supervisees</li> </ul>

<b>Year</b>	<b>Title</b>	<b>Authors</b>	<b>Research Questions/Objectives</b>	<b>Descriptive/ Empirical</b>	<b>Outcomes</b>
2003	Distance-base clinical supervision: Suggestions for technology utilization	Jared C. Shultz Curt Finger	Address issues and methods in the provision of distance-base clinical supervision.  Description of one rehabilitation counselor education program's approach to distance-based clinical supervision	Descriptive	Considerations:  Cost  Required technology for students  Confidentiality  Accessibility  Technical support personnel/needs
2010	Digital technology in the 21 <sup>st</sup> century: Considerations for clinical supervision in rehabilitation education	Andrew M. Byrne Michael T. Hartley	Address methods and issues in the use of emerging digital recording technologies.  Illustration of how digital recording technology can be integrated into traditional and distance clinical supervision	Descriptive	Considerations:  Compatibility of digital recordings  Storage of digital recordings  Destruction of digital data  Technological competence and support  On-campus recording  Community-based recording

Year	Title	Authors	Research Questions/Objectives	Descriptive/ Empirical	Outcomes
2015	Distance supervision in rehabilitation counseling: Ethical and clinical perspectives	Emily M. Lund Jared C. Shultz	Examine the ethical and nonethical principles that rehabilitation counseling programs should consider when implementing distance supervision	Descriptive	Considerations:  Evidence-based practice  Competency in supervision  Informed consent  Confidentiality  Access to supervision  Supervisor-supervisee relationship

**CHAPTER 3: A SELECTED REVIEW OF CLINICAL SUPERVISION  
PRACTICES AS DOCUMENTED IN REHABILITATION COUNSELING  
SYLLABI**

Clinical supervision during practicum is a key component in the training and development of counseling professionals, and has been labeled the signature pedagogy and an indispensable component in preparing counseling professionals for clinical practice (Kozina, Grabovari, De Stefano, & Drapeau, 2010; Luke & Gordon, 2011). Clinical supervision and training is also mandated by the Council on Rehabilitation Education's (CORE) *Accreditation Manual for Masters Level Rehabilitation Counselor Education Programs* (2010).

*The Oxford English Dictionary* (6<sup>th</sup> Edition, 2007) identifies the syllabus as a concise statement or table or headings of a discourse; the subjects of a series of lecture; a list of contents; an abstract; a summary; also a statement or outline of the subject covered by a course for teaching. Because the course syllabus is considered a learning contract between the instructor and the students, syllabi are an excellent source of information about what is being taught in clinical practicum courses and how it is being taught. Content analysis of course syllabi is a method that has been used to study a variety of counselor education issues: multicultural competency training (Pieterse et al., 2008, Priester et al., 2008), spirituality training (Cashwell & Young, 2004), and addictions training of rehabilitation counselors (Toloczko et al., 1998).

Over the past 20 years, researchers have used syllabi review to better understand the types of practicum experiences being provided to student trainees (Herbert, 2004; Stude, 1998). Herbert (2004) completed a review of 59 CORE-accredited rehabilitation

counseling programs to examine written materials (i.e., course syllabi, student/supervisor handbooks, program description materials) related to supervised clinical work. According to Herbert, additional information by educational programs is needed to help clarify supervision practices, procedures, and assessment outcomes. Herbert (2004) also indicated that a general conclusion of his work was that there were more differences than similarities among rehabilitation counselor education programs her reviewed.

In addition, like many other fields, counselor education programs are increasingly integrating technology into the training and supervision of students (Luke & Gordon, 2011). This is not only due to increases in the use of online learning in general, but is also due to the increased options and sophistication of the technology available to practicing counselors in recent years. Graduating counselors are expected to possess a minimum set of technology skills when entering an increasingly technical workplace. Today's college curricula are charged with preparing students for work in the 21<sup>st</sup> century, and online learning and the use of technology are considered important components of the instructional process (Boboc & Vonderwall, 2012). Not surprisingly, a study by Nelson, Nichter, and Henriksen (2010), found that almost half of the 127 counselor education programs they surveyed had either totally or partially integrated distance learning into their programs. Despite the pervasive use of technology and online learning, the empirical evidence on the use of these modalities in rehabilitation counselor education programs, and especially its use for clinical supervision, is unclear. The approach and technology used to train and supervise students is left to the discretion of each individual program.

While studies like Herbert's (2004) are important, their relevance to current practice may be dated. Outside these efforts, which occurred in the very early years of the incorporation of distance technology into supervision practice, there has been no recent study regarding supervised clinical practicum practices in rehabilitation counseling training. According to Herbert (2004), obtaining current information about practice and policies associated with supervised practica may assist rehabilitation counselor educators in evaluating whether changes in their programs are required. In addition, Herbert writes that an analysis of current practice provides an indication of the extent to which programs are in compliance with the clinical experience component of accreditation standards, which undergo continual revision and updating.

### **Purpose of the Study**

The purpose of this study was to explore current supervisory practices and related documentation pertaining to clinical practicum in select rehabilitation counseling graduate programs. In addition, this study was designed to determine the degree to which syllabi are aligned with the Council on Rehabilitation Education (CORE) accreditation standards for rehabilitation counseling graduate programs. . The research questions for the study were: 1) *What are the current clinical supervision practices of selected programs as documented in rehabilitation counseling syllabi?* and 2) *What types of technology or distance modalities are utilized to facilitate the training and supervision of graduate rehabilitation counselor students during practicum experiences?*

### **Methodology**

A content analysis was conducted on the nine syllabi included in the study. The primary intent of a content analysis is to gather text and analyze themes presented in

text(s) (Krippendorff, 2013). According to Neuman (2003), research has shown that content analysis is beneficial with three types of research inquiries. First, content analysis is effective when a significant amount of text needs to be reviewed. Second, content analysis supports a separation between the researcher and the content. Lastly, content analysis is regarded as a way to uncover themes in text that may be missed through causal observations. There are three approaches to qualitative content analysis: conventional, directed, and summative (Hsieh & Shannon, 2005). The summative content analysis uses the counting of keywords by using a quantitative approach initially, with an end goal of exploring the usage of the words or themes as indicators in an inductive process (Evans, 2013). The summative content analysis format was a good fit for this investigation because the researchers were interested in identifying keywords included in the practicum syllabi. According to Hsieh and Shannon (2005), researchers often report using this type of content analysis approach in studies that analyze manuscript types in a particular journal or specific content in textbooks.

The summative content analysis uses the counting of keywords by using a quantitative approach initially, with an end goal of exploring the usage of the words or themes as indicators in an inductive process (Evans, 2013). In addition, the summative approach to qualitative content analysis goes beyond mere word counts to include latent content analysis (Hsieh & Shannon, 2005). This refers to the process of interpreting content. Hsieh and Shannon (2005) indicated that in this analysis, the focus is on discovering underlying meaning of the words or the content. The researchers were interested in not only looking at identifying keywords in practicum syllabi, but also the meaning behind those words and how they give meaning to practicum experiences of

rehabilitation counseling graduate students. The researchers used the steps of summative content analysis identified by Zhang and Wildemuth (2009): (a) preparing the data, (b) defining the unit of analysis, (c) developing categories and a coding scheme, (d) testing the coding scheme, (e) coding all text from the syllabi, (f) assessing the coding consistency, (g) drawing conclusions from the coded data, and (h) reporting the findings.

### **Steps of the Content Analysis**

After obtaining institutional review board exemption, the author collected syllabi for clinical practicum courses from a convenience sample of rehabilitation counselor education graduate programs. The author selected 14 Master's level programs in rehabilitation counselor education (RCE) located on the east and west coast of the United States for the purpose of reviewing the practicum syllabi of the various programs. The programs were chosen for their representation of seven states and inclusion in Regions 1 and 9 of the National Council on Rehabilitation Education (NCRE). Department heads of selected programs, listed in the *CORE Master's Programs in Rehabilitation Counselor Education (2013-2014 Academic Year)*, were contacted and solicited to participate in the study. The author then requested the contact information of the fieldwork coordinator and/or faculty member responsible for practicum experiences. Faculty members were contacted by email and asked to provide an electronic copy of their syllabus. The author was able to collect syllabi from four faculty members using this method, for a response rate of 29%. To increase the sample size, the author purposefully selected an additional five programs based on personal relationships with rehabilitation counseling faculty members at those institutions. As a result, nine total syllabi were reviewed for the purpose of this study. Syllabi were collected from institutions representing both large

state universities and small public or private colleges located in four geographic regions of the United States.

Next, the researcher brainstormed a list of potential categories related to typical syllabi content and terms related to technology and distance education. Based upon a review of the research, combined with prior exposure to a wide variety of syllabi, the researcher selected categories in the syllabi that they felt reflected current clinical supervision practices and also addressed the research question for the study. These categories also represented commonly used syllabi sections. The following categories were used: (a) required readings, (b) course description, (c) course objectives/goals, (d) supervision practice, (e) evaluation, (f) technology used, and (g) assignments. The researcher then crosschecked the list for consistency and to make sure all relevant terms were included. After the categories were developed, each syllabus was reviewed both in print and electronically. Next, the researcher identified and quantified words or terms in the syllabi that were used to describe each of the content categories. The focus of this step was to determine the essential terms and descriptors used to define the content categories. Ultimately, the researcher was interested in identifying how the syllabi used these terms and the frequency of these terms used to relay information about the categories to students.

Multiple and independent coding and data auditing were used to reduce potential researcher bias. To determine inter-rater reliability, the percentage of agreement of coding responses for each of the two coders was calculated using one practicum syllabi. The coders then met and discussed their general impression of the syllabi. Using the seven predetermined categories the researchers independently coded all nine syllabi. The

coders then compared analyses, identified discrepant coding, and negotiated final coding decisions. The percentage of agreement between the coders was calculated at 90% and determined satisfactory to proceed. In addition, the role of researcher bias in the interpretation of the content was minimized because terms were pulled directly from the course syllabi.

## **Results**

A content analysis of all nine syllabi was completed for each of the seven identified categories. Review of the course syllabi provided information about the focus and demands of courses available around the country for clinical practicum in rehabilitation counseling. Analysis of each syllabus produced a research protocol that summarized (a) required readings, (b) course description, (c) course objectives/goals, (d) supervision practice, (e) evaluation, (f) technology used, and (g) assignments. Course numbers, titles, and times were also obtained. On the basis of these materials, the researcher was able to assess the range and focus of requirements that are demanded of rehabilitation counseling students in the courses, and the variety of learning experiences to which students are exposed.

### **Required Readings**

Table 1 lists the required texts that are most frequently mentioned in syllabi of CORE-accredited rehabilitation counseling practicum courses. It seems there are a large variety of texts and other documents used, with one of the most common ( $n = 33\%$ ) being Codes of Professional Ethics.

### **Course Description**

In the Course Description category, 41 codes were identified. Table 2 presents the frequency and percentage of sub-themes in the course description category. Examples of the most frequently mentioned sub-themes in the syllabi included “100 hours” (55%), “skills” (44%), “experiences” (44%), and “practice approaches” (44%). Because of the wide variety of sub-themes identified, the researchers grouped the sub-themes into three overall themes. These included “professional development”, “practice skills”, and “logistics”. Examples of codes included in the “professional development” theme included professional behavior and activities, standards of professional conduct, ethical and legal standards, and professional growth and development. Examples of codes included in the “practice skills” mirrored CRCC’s Scope of Practice description. These included case management, group counseling, assessment, treatment planning, and conducting counseling sessions. Examples of codes included in the “logistics” theme reflected many of the CORE standards for clinical practice. These included 100 total hours of practicum experience, 40 hours of direct client service, and individual and group supervision requirements.

### **Course Objectives/Goals**

In the Course Objectives/Goals category, 96 codes were identified. Table 3 presents the frequency and percentage of codes in the course goals/objectives category. Examples of the most frequently cited sub-themes in the syllabi include “ethics” (88%), “basic counseling skills” (66%), and “diversity” (66%). Because of the wide variety of codes identified, the researchers grouped the codes into three overall themes. These included “rehabilitation philosophy”, “professional behavior, relationships, and

orientation”, and practice skills”. Examples of codes included in the “rehabilitation philosophy” theme echoed CRCC’s description of the philosophy and approach to be used by rehabilitation counselors. These included autonomy, inclusion, advocacy, empowerment, and reinforcing client change. Codes contained in the “professional behavior, relationships, and orientation” theme included confidentiality, ethical and legal standards, role and function, and understanding relationships between counselors. Examples of the “practice skills” theme in course objectives/goals also mirrored CRCC’s Scope of Practice description. These included treatment planning, interviewing, career counseling, evidence based practice, case management, and evaluation and assessment.

### **Supervision Practices**

In the Supervision Practices category, 25 codes were identified. Table 4 presents the frequency and percentage of codes in the Supervision Practices category. Examples of the most frequently mentioned codes in the syllabi include “group supervision” (88%), “individual supervision” (77%), “clinical supervisor supervision” (55%), and “instructor supervision” (44%). Because of the wide variety of sub-themes identified, the researchers grouped the sub-themes into two overall themes. These included “structure” and “activity”. Examples of the codes included in the “structure” theme related to logistical components of providing supervision. Most codes in this category mirrored CORE requirements for clinical supervision. These included one hour per week of individual supervision and one and a half hours per week of group supervision. Examples of codes included in the “activity” theme described activities used in the practicum course to relay course content and provide supervision to students. These included audio/video

technology to review work with clients, student evaluations of recorded sessions, using reflection journals to supplement supervision, and discussing professional codes of ethics.

### **Evaluation**

In the Evaluation category, 53 codes were identified. Table 5 presents the frequency and percentage of codes in the Evaluation category. Examples of the most frequently mentioned codes in the syllabi include “audio recordings” (88%), “mastery of skills” (44%), “case study” (44%), and “acting professionally” (33%). Because of the wide variety of sub-themes identified, the researchers grouped the sub-themes into three overall themes. These included “evaluation of submitted materials”, “evaluation of skills”, and “grading”. Codes contained in the evaluation of written materials category included case study, weekly journals, and time logs. Codes contained in the evaluation of skills included audio recordings, acting professionally, mastery of counseling skills, and implementing skills consistently. Codes contained in the grading category included pass/fail and A-F grading scale.

### **Technology Used**

In the Technology Used category, 10 codes were identified. Table 6 presents the frequency and percentage of codes in the Technology Used category. Examples of the most frequently mentioned codes in the syllabi include “Blackboard” (44%) and “webcam” (22%). Codes were placed in two sub-themes – hardware and software. Codes included in the hardware subtheme included webcam, headset, and high speed Internet. Codes included in the software subtheme included Blackboard, Adobe Connect, OmniJoin, and Microsoft office.

## **Assignments**

In the Assignments category, 30 codes were identified. Table 7 presents the frequency and percentage of codes in the Assignments category. Examples of the most frequently mentioned codes in the syllabi include “audio or video recordings” (44%), “personal journal” (44%), and “case presentation” (33%).

## **Discussion**

### **Research Question 1: What are the current clinical supervision practices of selected programs as documented in rehabilitation counseling syllabi?**

As noted by Kozina et al. (2010), supervision of student trainees remains one component considered vital to the training of future clinical practitioners. This statement was shown to be true based on the researchers’ analysis of selected practicum syllabi. Group supervision was the primary supervision approach used as reflected in the syllabi examined for this study. Both group supervision and audio/video recordings were noted respectively in 88% of the syllabi examined. Results from the current study also indicated that the majority of programs (77%) provide individual supervision. This typically included feedback presented by the instructor or site supervisor to individual students based upon the review of audio or video taped recordings of counseling sessions. However, there was variability in terms of who was responsible for providing this individual supervision. For example, the majority of programs (55%) relied on the practicum site supervisor to provide the individual supervision. Only 45% of syllabi analyzed indicated that the faculty member was responsible for supervision. The rationale for this practice could be largely based on the individual program preferences rather than accreditation requirements. As Herbert (2004) noted, CORE standards allow

programs to provide either supervision method to monitor student performance and provide supervision. Standard D.1.3 highlights the fact that supervision can be provided by a program faculty member or a qualified individual working in cooperation with a program faculty member. Individual supervision is time intensive given the preparation time and direct contact with students, and as Herbert described, time demands placed on rehabilitation educators could account for the majority of programs relying on practicum site supervisors to complete this task.

These results are also consistent with several CACREP program-specific investigations that indicate on-site supervisors are the primary person responsible for individual supervision. Akos and Scarborough (2004) found that 66% of programs evaluated in their study listed on-site supervisors as the sole person responsible for student supervision. CACREP standards clearly delineate that site supervisors must meet minimum qualifications, including: (a) a minimum of a master's degree in counseling or a related profession with equivalent qualifications, including appropriate certifications and/or licenses, (b) a minimum of two years of pertinent professional experience in the program area in which the student is enrolled, (c) knowledge of the program's expectations, requirements, and evaluation procedures for students, and (d) relevant training in counseling supervision (CACREP, 2009). Unfortunately, no such minimum qualifications for site-supervisors in CORE accredited programs exist. In other words, it is difficult to determine whether or not site-supervisors associated with CORE accredited programs are qualified and adequately trained to provide supervision to students.

**Research Question 2: What types of technology or distance modalities are utilized to facilitate the training and supervision of graduate rehabilitation counselor students during practicum experiences?**

The types and degree of technology and distance modality use varied across the clinical practicum syllabi. However, almost all of the syllabi examined indicated the use of learning management systems such as Blackboard, Desire2Learn, and Moodle. These learning management systems were used for a variety of purposes including a method of presenting course policies, procedures, and assignments. Many of the syllabi examined included online activities such as quizzes and discussion boards. Online quizzes are a common means to determine if students have obtained the content knowledge of required readings and could demonstrate competency. Online discussion forums seemed to be used to encourage contact and aid in the interaction amongst students and instructors. In addition, these discussion forums can be used by students for personal reflection and to relate personal experiences during their practicum to text chapters and competencies of the class.

It was evident that instructors used learning management systems in a variety of ways. In addition to online quizzes and discussion forums, learning management systems were also used as a means to post multimedia clips and link students to online video conferencing software. Several of the program syllabi indicated that the sole means of contact was via video conferencing. Several types of software were identified including Skype, Adobe Connect, Webex, GoToMeeting, Blackboard Collaborate, and OmniJoin. These online courses typically included a technology requirements section in the syllabus, describing to students the required hardware and software they would need to

access and participate in the course. The majority of these online courses described the need for regular access to a computer with preferably a high-speed Internet connection, word processing, webcam, and a headset with a microphone.

### **Conclusion**

In addition to documenting the purpose, direction, expectations, and grading for clinical practicum courses, syllabi provide useful information for evaluation purposes because they often describe the knowledge and skills that will be acquired through successful completion of the course activities. These data suggest that rehabilitation counseling clinical practicum courses emphasize skill development by students and the use of counseling interventions in course descriptions, course objectives, and assignments. At the same time, it seems a typical clinical training experience in rehabilitation counseling is difficult to discern, given the variability regarding assignments, supervision, and technology requirements. Considering the limited empirical base of comparative studies on approaches to practicum, Herbert's (2004) question, "what is the best way to deliver supervision", still remains unanswered. There is little evidence to suggest that much has changed since Herbert's 2004 study. Faculty are still encouraged to review written material, such as course syllabi, to better serve students, on-site supervisors, and faculty members. As Herbert suggests, input from each constituent to critically evaluate current syllabi in an important first step to make sure student expectations are clearly delineated.

There are several limitations to the use of syllabi to assess skills that are developed in clinical practicum courses. Thoroughly evaluating a curriculum is certainly a complex undertaking and syllabi provide only limited data with which to assess the

knowledge and skills that students develop as they complete a course. The use of syllabi as data sources relies on the assumption that a course syllabus accurately reflects what occurs in the classroom. It may be that actual practices or emphases are being presented in the class but are not reflected in the syllabus. It is also possible that the use of syllabi as a data source for gathering evidence of technology integration resulted in some limitations. It is possible that instructors include limited information about the use of technology as an instructional tool in their syllabi. Further examinations of actual class meetings and activities as well as assessing what students do outside of class would provide further insight into the knowledge and skill development of students and the use of technology during practicum. In addition, the study could have profited from a larger sample size of course syllabi. Similarly, studies with more syllabi from other institutions would help further document and refine our knowledge in this area. These more thorough evaluations would provide added data about the curriculum and course content in addition to student knowledge and skill acquisition. As Dalgin et al. (2010) implies, organizing the practicum experience takes considerable time and focus. There is still hope that focused intentional practicum design will aide in the development of future rehabilitation counselors who are prepared for the internship experience and later work as knowledgeable and effective professionals skilled in the competencies outlined in the CORE accreditation standards.

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**Table 3.1: Frequency and percentage of ‘required readings’ codes in practicum syllabi**

<b>Code</b>	<b>Frequency</b>	<b>Percentage</b>
None	1	11
Benjamin, Alfred. <i>The Helping Interview</i> , 3 <sup>rd</sup> Edition, Boston: Houghton-Mifflin	1	11
Blackwell, Terry L., Case, Jan C., Barros-Bailey, Mary and Waldman Ashley K. (2009) Special Issues in Rehabilitation Counselor Ethics in Disasters, <i>Journal of Applied Rehabilitation Counseling</i> , 40(1), 14-26.	1	11
Fauman, Michael A. <i>Study Guide to the DSM-IV-TR</i> , Washington DC and London, England: American Psychiatric Publishing, Inc.	1	11
First, Michael B., Frances, Allen J., & Pincus, Harold Alan. <i>DSM-IV-TR Guidebook</i> , 4 <sup>th</sup> Edition, Washington DC, American Psychiatric Publishing, Inc.	1	11
Ivey, Allen E. and Bradford-Ivey, Mary. <i>Intentional Interviewing and Counseling</i> , Pacific Grove, California: Brooks/Cole Publishing. (Purchase)	3	33
Tarvydas, Vilia, M. and Cottone, R. Rocco. (2000) The Code of Ethics for Professional Rehabilitation Counselors: What We Have and What We Need, <i>Rehabilitation Counseling Bulletin</i> , 43 (4), 188-196.	1	11

The" Counseling" Practicum" and" Internship" Manual:" A" Resource" for" Graduate" Counseling" Students"	1	11
Duncan, B, Miller, S., & Sparks, J. (2004). <i>The heroic client</i> . San Francisco: Jossey-Bass.	1	11
Miller, W. & Rollnick, S (2002). 2nd ed. <i>Motivational Interviewing</i> . New York: Guilford.	1	11
Guterman, J.T. (2006) <i>Mastering the Art of Solution-Focused Counseling</i> , Alexandria, VA: ACA	1	11
Reich, J.W., Zautra, A. & Hall, J. (Eds.) (2010). <i>Handbook of adult resilience</i> . NY: Guilford (chapters on ER)	1	11
Monk, G., Winslade, W., Crocket, K. & Epston, D. (Eds.) (1997). <i>Narrative therapy in practice: The archaeology of hope</i> , San Francisco, CA: Jossey-Bass (chapters on ER)	1	11
Code of Ethics	3	33
Fieldwork Manual	2	22
Brian N. Baird, <i>The internship, Practicum and Field Placement Handbook, A Guide for the Helping Professions</i> , Prentice- Hall, Latest Edition.	2	22
Okun, B.F., & Suyemoto, K.L. (2013). <i>Conceptualization and treatment planning for effective helping</i> . Belmont, CA: Brooks/Cole.	1	11
Boylan, J.C., Malley, Reilly, E.P. (2010). <i>Practicum and Internship: Textbook for Counseling and Psychotherapy</i>	1	1

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**Table 3.2: Frequency and percentages of ‘course description’ codes in practicum syllabi**

<b>Code</b>	<b>Frequency</b>	<b>Percentage</b>
Knowledge	1	11
Skills	4	44
Experiences	4	44
Effective rehabilitation and MH counseling	1	11
Throughout life span	1	11
Practice approaches	4	44
Safe setting	1	11
Specific instructor duties (skills training)	1	11
Specific instructor duties (constructive feedback)	1	11
Specific instructor duties (provide suggestions to facilitate change)	1	11
Specific instructor duties (teach professional conduct)	1	11
Ethics	3	33
Conduct counseling sessions	2	22
Individual supervision	1	11
Group supervision	3	33
100 hours	5	55
40 direct	3	33
1h individual supervision	1	11
Audio and video tapes	1	11
1.5h group supervision	1	11
Discourse and discussion	1	11
Counseling style	1	11
Role playing	1	11
Tapes	1	11
Intakes	2	22
Assessment	2	22
Diagnosis	2	22
Group counseling	1	11
Plan development/treatment planning	1	11
Case management	1	11
Placement	1	11
Supervised	1	11
Procedures	1	11
Confidentiality	2	22

Documentation	1	11
Evaluation	1	11
Attendance	1	11
Professional behavior and activities	2	22
Documentation	1	11
Theories	1	11

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**Table 3.3: Frequency and percentage of ‘course objectives’ codes in practicum syllabi**

<b>Code</b>	<b>Frequency</b>	<b>Percentage</b>
Listening skills	2	22
Attending skills	1	11
Reflecting skills	1	11
Clarifying skills	1	11
Responding to nonverbal cues	1	11
Congruence of affect	1	11
Tolerating ambiguity	1	11
Silence	1	11
Assist client in self-evaluation	1	11
Reinforcing client change	2	22
Self-reflection: projection	1	11
Self-insight	3	33
Self-understanding	2	22
Suicide assessment	3	33
Accepting feedback	1	11
Giving feedback	1	11
Developing effective client relationships	1	11
Developing appropriate goals for clients	1	11
Developing appropriate goals for self	1	11
Ethics	8	88
Professional conduct	2	22
Interviewing for internship	1	11
Completing class assignments and attending class	1	11
Managing recordings and assignments	1	11
Acting as rehabilitation counselor	1	11
Diversity	6	66
Understand professional role and conduct	4	44
Understand relationships between counselors	3	33
Learn about the profession (standards, organizations, credentials)	2	22
Theories	4	44
Aware of professional issues	1	11

Understand case conceptualization	3	33
Understand assessment	2	22
Understand psychopathology	1	11
Evidence based practice	1	11
Understand diagnostic process	1	11
Understand diagnostic criteria	1	11
Self-care	1	11
Record keeping	4	44
Knowledge of community services	3	33
Intake	2	22
Treatment planning	1	11
Measure outcomes of programs	1	11
Diagnosis	2	22
Inclusion	2	22
Advocacy and public outreach	2	22
Autonomy for clients	2	22
Recognize influence of family	1	11
Understand stressors	1	11
Career counseling	3	33
Articulate counseling philosophy	1	11
Confidentiality	2	22
Basic counseling skills	6	66
Understand importance of supervision	1	11
Importance of environment	1	11
Counseling procedures	1	11
Stages of counseling interview	2	22
Peer supervision	1	11
Self-knowledge	1	11
Understand individual differences	1	11
Interviewing and communicating	1	11
Empathy	1	11
Supervised	1	11
100 hours	1	11
40 hours direct	1	11
Understand agency	1	11
Consent	1	11
Large group supervision	1	11
Small group supervision	1	11
Individual supervision	1	11

Documentation	1	11
Evaluation	1	11
Professional identity	1	11
Life span	1	11
Group counseling	1	11
Medical aspects	1	11
Rehab services	2	22
Philosophy of rehab	1	11
Legislation	2	22
Difference between certification, licensure, and accreditation	1	11
Social issues	1	11
Empowerment and choice	1	11
Autonomy	1	11
Individualized rehab plans	1	11
Termination	1	11
Family	1	11
Assessment	4	44
Research to practice	1	11
Implications of disability	1	11
Medical aspects of disability	1	11
Case management	4	44
Outreach (vocational and community)	1	11
Informed consent	1	11
Barriers for PWD	1	11
Job development and job placement	2	22

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**Table 3.4: Frequency and percentage of ‘supervision practices’ codes in practicum syllabi**

<b>Code</b>	<b>Frequency</b>	<b>Percentage</b>
Group supervision	8	88
Individual supervision	7	77
Class seminars	2	22
Clinical supervisor supervision	5	55
Instructor supervision	4	44
Triadic supervision	1	11
Documenting supervision hours	2	22
Student evaluation done during supervision	1	11
1 hour per week individual	3	33
1.5 hours of group supervision	1	11
Using rehab literature	2	22
Assigned meeting times	1	11
Discuss progress towards goals and objectives	1	11
Audio/video technology to review work with clients	3	33
Point deduction for missing supervision meeting	2	22
Student evaluation of recorded sessions	2	22
Using reflection journals to supplement supervision	2	22
Specific questions addressed during supervision	1	11
Peer supervision	2	22
Using case review for supervision	3	33
Discussion professional codes and ethical conduct	2	22
Online discussion forum	1	11
Video conferencing	1	11
Face to face supervision	1	11

**Table 3.5: Frequency and percentage of ‘evaluation’ codes in practicum syllabi**

<b>Code</b>	<b>Frequency</b>	<b>Percentage</b>
Pass fail	2	22
A-F	4	44
60 hours supervision and non direct hours	2	22
40 hours direct client hours	2	22
16 hours group (maximum	1	11
Attendance	4	44
Active participation	1	11
Readings	1	11
Caseload of 4	1	11
Audio recordings	8	88
Self-review and critique of sessions	1	11
Paperwork	1	11
Master skills	4	44
Implement skills consistently	1	11
Act professionally	3	33
Develop skills (progress or improve as counselor	1	11
Individual supervision	1	11
Group supervision	1	11
Weekly journal	3	33
Time logs	3	33
Weekly evaluation	1	11
End of the semester evaluation	1	11
Self-care plan	1	11
Intake interview report	1	11
Vocational assessment report	1	11
DSM case write up	1	11
Program evaluation report	1	11
Resources rolodex	1	11
Weekly synopsis	1	11
Case files	1	11
Final report for each client	1	11
Case study	4	44
Develop procedures for meeting with clients	1	11
Gather information from clients	1	11
Understand information from client	1	11

Understand affect	1	11
Understand difference between cognitive and affect	1	11
Establish safe environment	1	11
Understand self	1	11
Understand counseling relationship	1	11
Demonstrate empathy	1	11
Theory	1	11
Open to feedback	1	11
135-150 Hours	1	11
50 direct	1	11
Two meetings with faculty	1	11
Evaluation from supervisor	1	11
Participation	1	11
Quizzes	1	11
Article critique	1	11
Self-evaluation	1	11
Skill practice	1	11

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**Table 3.6: Frequency and percentage of ‘technology used’ codes in practicum syllabi**

<b>Code</b>	<b>Frequency</b>	<b>Percentage</b>
RSA Videoconference site	1	11
Blackboard	4	44
Typhon group	1	11
Adobe connect	1	11
Microsoft office	1	11
Adobe Flash	1	11
Adobe reader	1	11
Webcam	2	22
Headset	1	11
OmniJoin	1	11

**Table 3.7: Frequency and percentage of ‘assignments’ codes in practicum syllabi**

<b>Code</b>	<b>Frequency</b>	<b>Percentage</b>
Site evaluation	1	11
Supervisor evaluation	2	22
Supervisor evaluation of student	1	11
Faculty supervisor evaluation of student	1	11
End of semester paperwork	2	22
Audio or video recordings	4	44
Self-care plan	1	11
Intake interview report	1	11
Vocational assessment report	1	11
DSM case write up	1	11
Program evaluation report	1	11
Resources rolodex	1	11
Practicum activity log	2	22
Personal journal	4	44
Case presentation	3	33
Mini in-service	1	11
Self-evaluation of counseling skills	1	11
Weekly self-evaluation	1	11
Student evaluation of practicum experience	1	11
Supervision	1	11
Documentation	1	11
Introduction	1	11
Online discussions	1	11
Site presentation	1	11
Ethics presentation	1	11
Quizzes	1	11
Article critique	1	11
100 hours	1	11
Peer evaluation	1	11
Internship portfolio	1	11

## **CHAPTER 4: REHABILITATION COUNSELING PRACTICUM – INTERVIEWS WITH SELECTED FACULTY SUPERVISORS**

For many years in rehabilitation counselor education, training has involved not only traditional didactic coursework, but has also included hands-on opportunities for students to apply what they have learned in the classroom by performing the role of a rehabilitation counselor in practical settings. Rehabilitation counselors typically develop the knowledge, skills, and attitudes necessary for professional practice through pre-service preparation in the form of a practicum fieldwork experience (Maki & Delworth, 1995). These experiences include working directly with clients while being observed by other students and closely supervised by rehabilitation counseling faculty.

According to Stude (1998), several purposes are served by the practicum experience in training novice rehabilitation counselors. Stude indicated that first, and perhaps most important, students are given the opportunity to apply classroom learning to real-life situations. This includes the testing of theoretical counseling approaches as well as the application of didactic learning in a practical setting. Next, students are given the opportunity to engage in interviewing and counseling sessions with clients with disabilities. Stude noted that this interaction, in the intimacy of the interview or counseling session, gives the student the chance to begin the desensitization process necessary in viewing persons as individuals rather than as persons with disabilities. Third, the clinical supervision process and the opportunity for students to interact with a supervisor, is one of the greatest benefits of the practicum experience. Lastly, the clinical experiences afforded to students through the practicum give the student the opportunity for personal contact with cultural diversity. Stude explained that dealing with real clients

in clinical settings exposes students to individuals who are ethnically and culturally different from themselves and has the potential for facilitating introspection and sensitivity.

The last two decades have witnessed a steady growth in the use of technology in higher education. There seems to be an increasing awareness that counselor educators must monitor technological advancements to best serve the needs of a diverse student population. The need for this increased awareness stems both from accreditation and ethical mandates (CORE, 2013; CRCC, 2010) and from research that indicates that counselor education programs have been making substantially greater use of distance learning. Most often, individual programs are left to determine the most appropriate instructional methods and learning technologies to utilize in the facilitation of student interaction and training. There has been little recent inquiry that has examined the pedagogy of clinical supervision and/or practicum in counselor education. In addition, advances in technology and its use in the supervision process have received scant attention in the counselor education literature (Bourgeois & Pebdani, 2015a). In addition, Bourgeois and Pebdani (2015b) found that a typical clinical training experience in rehabilitation counseling is difficult to discern, given the variability regarding assignments, supervision approaches, and technology requirements. Overall, there is a notable lack of information or misinformation about the use of technology in rehabilitation education programs. This may serve as a barrier to some rehabilitation counselor educators from using new and helpful approaches to instruction, especially given the increase in distance programs across the country. Further, having an understanding of the advantages and disadvantages of certain types of technology could

also educate rehabilitation educators who are considering implementing such technology and learning strategies. Lastly, because of the continuing evolution of CORE standards, with the most recent update in 2010, it is also important to understand existing practices and experiences provided to students enrolled in counseling practicum courses and incorporate needed standard revisions to ensure the quality of coursework taught in distance formats and with new instructional technologies.

### **Purpose of the Study**

The purpose of this study was to explore the perspectives of rehabilitation counseling faculty in relation to current supervisory practices and pedagogical strategies used in the clinical practicum. This study was also designed to examine faculty perspectives related to the current and future use of technology in the training and supervision of graduate rehabilitation counseling students. This study examined the views and experiences of eight faculty members from eight unique institutions across the United States. The research questions for study were: 1) *What kinds of technology do rehabilitation counselor educators currently use to train and supervise students?* and 2) *What are the perceptions of rehabilitation counselor educators regarding the pro/cons of technology use?*

### **Methodology**

To conduct the overall investigation, the researcher used a semi-structured interview approach to obtain the greatest possible depth and breadth of data from participants. According to Bernard (2006), in situations where you won't get more than once chance to interview someone, semi-structured interviewing is best. Semi-structured interviewing is based on the use of an interview guide with a written list of questions and

topics that need to be covered in a particular order. Semi-structured interviews have also been well documented as a method of inquiry for use with faculty members (Ambrose, Huston, Norman, 2005; Salazar, 2009; Zhu, 2004). The qualitative interviews served to (a) extract factual details about the types of current practicum experiences being provided at these institutions, (b) determine the current types of technologies used to facilitate student/supervisor interactions, and (c) reveal faculty perspectives on the use and effectiveness of technology in teaching/supervising rehabilitation counseling graduate students during the practicum experience. Qualitative methods were used to investigate selected issues in great depth with careful attention to detail (Patton, 2002). Using semi-structured interviews allowed the researcher the opportunity to study unique differences and similarities among faculty members in their integration of technology and approach to practicum. This approach was used to allow the emergence of unanticipated relevant issues and attitudes, while still ensuring adequate coverage of key topics with all participants.

### **Participants and Procedures**

After obtaining institutional review board exemption, the researcher selected a convenience sample of 14 Master's level programs in rehabilitation counselor education (RCE) listed in the *CORE Master's Programs in Rehabilitation Counselor Education (2013-2014 Academic Year)*. Program directors were contacted and solicited to provide the contact information of the fieldwork coordinator and/or faculty member responsible for practicum experiences. Faculty members were contacted by email and asked to participate in the study. The author was able to interview four faculty members using this method, for a response rate of 29%. To increase the sample size, the author purposefully

selected an additional four participants based on personal relationships with rehabilitation counseling faculty members at those institutions. In total, participants were a sample of eight rehabilitation counseling faculty (five men, three women) ranging from adjunct to full professor, teaching in eight different colleges and universities across the United States. Participants were all faculty members responsible for teaching a section of clinical practicum within the last year. Participants represented both large state universities and small public or private institutions.

The primary author constructed questions for use during the interviews. The development of the interview protocol was based upon the research questions for this study, related to the use of technology for practicum instruction and supervision, and the relevant literature on the topic. A total of 10 questions were included in the interview protocol (Appendix A). Questions one through three were intended to elicit descriptive information about participants and their experience using instructional technology. For example, “what experience do you have using instructional technology or distance modalities in supervising and/or training rehabilitation counseling graduate students?” Questions four through seven were intended to extract rich contextual information about the pedagogical aspect of technology use in training and supervising students during practicum. For example, “how does technology affect your instruction, regarding time spent preparing for class or your interaction with students?” Questions eight through nine asked about the advantages and disadvantages of technology use. Question 10 allowed participants to reflect on current and future uses of technology in training and supervising students during practicum. For example, “what is changing in what rehabilitation counselors educators are doing in the next 12-24 months, in terms of technology use?”

After attaining informed consent from participants, the first author conducted all interviews, which ranged from 30 minutes to 1.5 hours. Interviews were digitally recorded with participant permission, files were transferred to a computer, and later transcribed verbatim via the use of an installed media player and word-processing software. The verbatim data provided direct quotations that illuminated participant perspectives and were easily extracted for inclusion in the discussion. Anonymity issues were addressed by the removal of identifying information, masking identities within the interview content, and the use of pseudonyms where appropriate. Sampling continued until the author made a subjective decision that because no new information was being provided, saturation had been reached (Charmaz, 2008).

### **Data Analysis**

The author used a multi-step process for data analysis. Labuschagne (2003) explained that a qualitative analysis of data involves the non-numerical organization of data in order to discover patterns, themes, forms, and qualities found in transcripts. The first author checked the interview transcripts for accuracy. Consistent with the method of open coding and the concept of data reduction, two coders (the first and second authors) independently identified initial themes in the participants' responses. While the researcher made no initial attempt to anticipate the participants' responses and predetermine categories, during the interview process the first author observed patterns naturally developing from one interview to the next. The natural emergence of the broad patterns suggested that coding the data into specific themes and categories was a logical and effective method of data analysis (Labuschagne, 2003).

Auerbach and Silverstein (2003) provided a basic and useful description of the process and suggested visualizing the coding process as a “staircase, moving you from a lower to a higher level of understanding” (p. 35). The staircase model proved useful as the researcher moved through the process of organizing the text of the interviews and discovering the patterns within the responses. As the meanings unfolded and were interpreted in relationship to the research questions, the particular passage was assigned a code. Using the theory of constant comparison, researchers moved through the text, they continuously reading, reviewing, and comparing the list of existing codes with the participants’ responses. If the code applied to a specific response, the researcher assigned the specific code to the passage. If the text did not meet any existing code, then another code was generated and assigned to that response. In line with the description of constant comparison provided by Pope et al. (2000), each item was checked and compared, and assigned an existing code or a new code was established. After several iterations, key themes and categories arose from the codes.

Emerging from this process, multiple organizations of the data were developed that allowed the author to focus at the level of an individual case, a thematic code, and an overarching theme. The authors independently coded all eight cases and then compared analyses, identified discrepant coding, and negotiated final coding decisions. Using the process described above, the author developed a summary of key findings, selected illustrative quotes, and reflected upon the identified themes and their relationship to the study’s research questions.

## **Results**

The faculty members discussed a variety of issues during the interviews. Initially, 22 codes (Table 1) emerged from the analysis of the interview transcripts. From the 22 codes, five themes emerged and were analyzed to gain an understanding of the experiences of faculty members teaching a rehabilitation counseling practicum course.

Those themes were:

Logistics – Codes in this theme related to the specific technology and equipment used by participants and the reasons why they used that technology.

Pedagogy – Codes in this theme related to pedagogical aspects or instructional strategies of the participant’s technology use. In addition, codes in this theme were associated with course preparation.

User-end knowledge – Codes in this theme related to technological knowledge of both faculty members and students. Comfort level, training, and awareness of available technology were also included in this theme.

Pros/Cons – Codes in this theme related to the advantages and disadvantages of technology use.

Changes in the field – Codes in this theme related to recent changes in rehabilitation counselor education and the impact of technology use. Current and future changes were addressed in this theme.

### **Results Related to First Research Question**

The first research question in this study was “What kinds of technology do rehabilitation educators use to train and supervise students?” Based on the analysis of data collected from participants, it was concluded that faculty members vary in their

levels of technology use and implementation. Participants were asked to describe the experiences they've had using instructional technology or distance modalities in supervising and/or training rehabilitation counseling graduate students. Most of the participants were able to describe in detail the types of technology they use in their teaching and supervision of students during practicum. In terms of course offerings, participants described a range of formats, including full online, hybrid, and face-to-face. An important note emphasized by several participants was that their institutions definition of an online course means a course has greater than 50% of the course delivered online. For many, this meant that a traditional 15-week course labeled as online could require several face-to-face meetings. Depending on the format of the course offerings, there was variability in terms of the types of technology used.

The results indicated that while all faculty members used at minimum basic instructional technology (email and learning management systems), for many, their use primarily focused on tools that helped them manage their class and replace existing technology, such as copying machines and overhead projectors. As evidenced in a participant's response: "We're really not very sophisticated. We use email and we use the telephone. We also use Moodle, our online classroom software." All of the participants used a learning management system, such as Moodle, D2L, Blackboard, or Canvas to distribute course materials that would otherwise have been distributed as hard copies. Email was the most frequently adopted application as a means of communication with students. Using emails or messenger functions to support communication was frequently cited as an important teaching tool. According to one participant: "Email is an incredibly valuable communication tool. I can communicate electronically with my students from

different locations and also students communicate with their peers to discuss different topics in a dynamic learning environment. It's a good teaching tool". A general take-away was that asynchronous technologies, such as email and other messaging tools, seem to provide more frequent and timely interactions among students and faculty.

Several respondents used more sophisticated types of synchronous technology such as videoconferencing to provide distance supervision to their practicum students. Typically, the faculty members using more advanced technologies were those who taught their course in a fully online environment. One such participant described using "various technologies such as Blackboard (learning management software). In particular, for the web conferencing aspect we used a bunch of things such as Collaborate. We also use Skype premium, which is where you can do group Skyping with people rather than just one-to-one. In the past, I've also used WebEx for that particular aspect of group supervision." Other video conferencing systems common among the participants included Adobe Connect, GoToMeeting, and OmniJoin. Participants used video conferencing software in place of the traditional face-to-face meeting and discuss of practicum issues.

The availability of training in particular technology also seemed to be an important factor in the type and extent of technology used in teaching and supervision. Participants noted that in order for them to implement and successfully use technology in their teaching and supervision, the end user needed to know how the technology worked and how it could be used. Training and user development seemed to be an important aspect to the success and failure of technology implementation and use. Having the necessary support network and training opportunities for faculty was very important to the participants. Most participants in the study indicated that they participated in a host of

training activities that afforded them some knowledge and skills that could be used in teaching online or implementing technology in the classroom. These training activities included workshops, one-on-one assistance from institutional information technology professionals, and assistance from colleagues. One participant noted that:

I received some training from the center on technology enhanced learning here on campus and they provided the training and showed us how to use all the equipment. There's also a centralized coordination of all of the online classrooms on campus and the instructional design person who created the classrooms also was available for consultation. That also made me feel more comfortable with using equipment and any adaptations two classrooms they would provide us with an update and help us feel confident and using the technology.”

Another participant indicated that:

The other thing that I have done, it's not specifically training but it results in learning, as we have an instructional technology department here on campus and they have graduate programs. So we partnered with them. There's a professor down there that I'm a friend with and they had a class on problem-based learning. As we were talking, I said I have case studies we can use. And we came in, and talked to those folks a little bit about the rehabilitation process and what goes on. And then their students would take that stuff and worked to develop meaningful educational modules. Just in that process of collaboration I learned a ton about adult learning theory and process and case studies of using technology.

The author's data analysis of faculty member's responses also identifies pedagogical strategies and the impact of technology on classroom instruction.

Pedagogical strategies mainly refer to the understanding of the processes and methods including practices through which teaching and learning are conducted, managed, and assessed (Shulman, 1986). It was concluded that the common opinion among the participants that the use of technology may change some aspects of teaching, communicating with students, planning, and course administration. One participant described the interplay between technology and pedagogy perfectly:

The fundamental number one rule of distance education of any kind is you do not start with technology. You start with pedagogy. You have to have the pedagogy lined up and figured out and then you go to the technology that you have access to then you problem solve. If you do it the other way around, your teaching becomes more centered on the gadgets and not on the teaching process. When I'm looking at an activity my first thought is pedagogy. What stage am I in of the learning process? Am I in the stage where I'm presenting new content? Am I engaging in guided exercise? Am I helping them to engage in independent practice? It's all of those kinds of things that lend themselves to a very solid model of instruction or adult learning theory. That's where I start, and then I turn around and say how can we do this.

Several participants in the study noted that they utilized technology to reach students locally, nationally, and internationally. In addition, participants frequently expressed that the use of technology was a means to expand their audience base to reach nontraditional students who might not otherwise have access to educational opportunities. Many participants noted that their universities are located in remote areas, hindering their opportunities to attend courses in person. Participants identified the expansion of their

universities' distance education offerings as a method for attracting both nontraditional and geographically dispersed students to the university. One respondent indicated, "most of our students are working and have families. We can be more efficient by offering distance classes to many of our students". Most participants acknowledge the significance of technology and distance education. Their sentiments were well summarized by one participant's response: "Is not going away. It's kind of like when rock'n roll came in and people were like it's just a fad. It's going to stick around for a while. Technology is not a fad."

### **Results Related to Second Research Question**

The second research question in this study was "What are the pros/cons of technology use?"

**Pros.** Participants identified a range of issues related to the factors that motivate them to integrate educational technology in their teaching, supervision, and overall learning process. Perhaps the most evident theme contained within the responses to this question was access to information. When course content and activities are provided online, students do not need to be concerned about accessing course materials. Several respondents noted that their students truly appreciate the ability to access content and complete assignments during their most productive times. One participant indicated "students are able to have a high degree of control over when and where they engage with course materials and activities and are able to reflect on the material before responding to discussion". This participant used a discussion board approach for students to reflect on key course concepts and considered it to be an excellent way to cultivate critical thinking in a structured discussion.

Several participants also suggested that integrating educational technology into their teaching helped to enhance student-to-student and student-to-faculty interaction. The participants felt students and faculty using technology to collaborate encourage participation on both ends. One participant described herself as an introvert, and felt she was better able to connect with students on a personal level using discussion boards and email. It seems that more communication tools were also used in these online and distance formats than in traditional classes, which appears to be the primary difference between traditional and alternative formats. Other participants suggested that using synchronous technology such as web-conferencing fostered more participation from students than in the typical face-to-face classroom. More specifically, these participants described less inhibition from students in contributing to class discussion in an online environment.

Several participants also suggested that integrating educational technology into their teaching enabled a more student-centered approach. In other words, these participants felt using technology and distance modalities better accommodated students with multiple learning styles. Participants described using a variety of modalities such as web conferencing, instant messaging, and other interactive tools to present course content. Regardless of the preferred learning style of students, these participants explained that they could develop “something for everyone”.

**Cons.** The participants interviewed identified a range of issues that might hinder their wide and effective use of technology as a part of their instruction. A common issue concerning the participants was workload and time management. There was an agreement among most that utilization of technology requires time to rethink, restructure, and re-

engineer a course to adapt it for delivery. Findings related to the planning and design of technology use report that advanced preparation and organization is key for the successful integration of technology-mediated instructional activities. A common remark among study participants concerned the intense work involved in designing and delivering an online course. Compared with traditional courses, this requires more development and design time for instructors. One participant explained that “A rule of distance education and technology use is structure and order. So you set up ahead of time. If you go into distance education and you try to make changes on-the-fly or shift things around or whatever you’re in trouble.” Some study participants also explain that designing an online course required more time from the instructor because it involved organizing content, presenting information that addressed different learning styles, and providing lecture notes in advance. The perception of workload may have been affected by the non-stop nature of online teaching, constant feedback and clarification, and higher expectations from learners. In many cases, participants described rearranging their daily routines so that they could become more accessible to their students who expected instantaneous responses. Although most faculty experiences in planning instruction indicated that preparation time begins long before the class starts, many participants indicated that during the course of recurring online teaching experiences, they spend less time preparing for distance courses compared to face-to-face environments.

Another issue that affected the implementation and use of technology was specifically related to the support of the institution. Several challenges included unspecific policies and procedures related to the technology adoption process and lack of leadership. Most respondents indicated they would be more likely to use technology if

they had departmental and peer support, and more programs in place to attract and motivate them to use technology. One participant explained, “The potential is there for more technology use. We are a traditional school, as they [the administration] perceive us. And so a lot of the online stuff, the computer, FaceTime, satellite, whatever, we just didn’t have the opportunity to get as far along with some of that.” Many of the respondents from smaller schools echoed this sentiment. Other respondents noted that adopting technology was found to be stressful and difficult with little organizational support. According to one participant, “if institutions are serious about faculty using technology, administrators must seek ways to provide effective leadership for faculty”. Some participants complained about the lack of incentives for incorporating educational technology tools in their instruction. They indicated that using technology in teaching consumes more time than traditional teaching. Failure to compensate faculty members for this additional workload probably will decrease faculty satisfaction and willingness to use it.

### **Conclusion**

Technology continues to be a key feature of institutional initiatives in higher education. The contribution of this study is in the extension of knowledge on how rehabilitation counseling faculty members use educational technology and distance modalities and the many benefits and challenges of its implementation. As demonstrated by the findings presented in the current study, faculty members are willing to use technology in their practicum courses. This is an important finding given the argument of some counselor educators that the use technology and distance education does not facilitate the highly interpersonal interaction needed to teach clinical skills and supervise

students (Rockinson-Szapkiw & Walker, 2009). Despite this conception, some rehabilitation counselor educators have taken advantage of the latest technologies available to deliver quality practicum courses with the use of technology.

Participants reinforced the idea that online and distance technology components help to extend the classroom beyond the physical walls of their campuses. This could be critically important for nontraditional and rural students completing their fieldwork requirements. In addition, many more students seem to be pursuing fieldwork placement sites beyond the communities of their campuses. Some students may want a specific type of practicum training not available in close proximity to their university. In order to keep pace with the type of trainings rehabilitation counseling students want to experience, even universities that rely on face-to-face supervision because most of their students are local, have to at least consider a blended approach to practicum supervision. Doing so would expand opportunities for students. Facing an increasingly difficult job market, rehabilitation counselor education programs need to consider incorporating distance supervision into their face-to-face curriculums.

Many participants also felt that students become more engaged with their instructors and classroom, as well as the material in online settings, which seems to promote improved learning. However, it is clear that for online learning and the use of instructional technology to be successful, proper support and training regarding technology use in their practicum courses is often needed.

Distance education will likely continue to influence the rehabilitation counselor education process. While it will likely not completely replace traditional on-campus programs, distance based education will continue to expand as a pedagogical approach

(Shultz & Finger, 2003). Shultz and Finger (2003) stress that it is essential that technology never overshadow sound curriculum development and pedagogy as the driving force in an education program. Future researchers and practitioners should focus on the interplay between curriculum content, pedagogy, and the use of technology.

This idea is the basis for Mishra and Koehler's (2008) *technological pedagogical content knowledge* (TPACK) framework. Mishra and Koehler (2008) claim that good teaching with technology must include these three core components. They argue that the relationships between each of these components are equally important, and the interaction between them accounts for the wide variations seen in educational technology integration. Koehler and Mishra (2005) contend that merely bringing technology to the classroom is not enough to ensure its effective use. Instead, it is the way teachers use technology that leads to effective results. Similar to the relationship between the "what" and "how" of teaching, Koehler and Mishra suggest that technology is a knowledge system in itself, and teachers must understand how it fits in the larger scope of the educational process. Future researchers and practitioners can use Mishra and Koehler's TPACK as a framework to evaluate technology integration in rehabilitation counselor education programs and as a starting point to assess its pedagogical strengths and effectiveness.

While this study is not an exhaustive exploration of faculty experiences and perspectives of technology use in practicum courses, this study provided several pieces of noteworthy information, and shows that further research in this area could be worthwhile. One limitation of the study was that only eight faculty members were interviewed, and while they were in agreement on most areas, it is possible that an atypical group was

chosen from the population of rehabilitation educators. The opportunistic sampling may have resulted in a select group of participants who are not representative of all rehabilitation counseling faculty who use technology for practicum instruction and supervision. The study could have benefited from a larger sample size of participants. Similarly, studies with more participants in other institutions would help further corroborate and refine our understanding in this area. For example, data collected from other members of the college and university communities, such as students and administrators, may help build a fuller and deeper understanding of the use of technology in the training and supervision of students in rehabilitation counselor education programs.

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**Table 4.1: List of themes and associated codes resulting from interview analysis**

<b>Theme</b>	<b>Associated Codes</b>
Logistics	Technology used Equipment Technology choice/freedom Support of administration Functionality Accessibility Confidentiality/security concerns
Pedagogy	Pedagogical strategies Course preparation
User-end knowledge	Technology training Comfort level User knowledge of technology Awareness of available technology
Pros/Cons	Advantages Effectiveness Students working out of state Proximity of students to campus Limitations of online learning Barriers/challenges Managing barriers/challenges
Changes in the field	Recent changes Change for the future Programs internationally

## Appendix A

### Interview Questions

The key questions for this evaluation are as follows:

1. What experience do you have using instructional technology or distance modalities in supervising and/or training rehabilitation counseling graduate students?
2. What prompted you to use the technologies that you currently use in your class?
3. Did you receive any help or training in order to implement these technologies? If so, what?
4. In your opinion, what factors make a particular technology more useful to students than others?
5. How does technology affect your instruction? Regarding time spent? Regarding interaction with students?
6. What are your perceptions about the effectiveness of instructional technology or distance modalities in supervising and/or training rehabilitation counseling graduate students?
7. Are there any technologies that you would like to start using in your class?
8. What are the barriers/challenges to technology use experienced by you and your colleagues?
9. What is different today in terms of technology use than what rehabilitation counselor educators were doing 3 years ago?
10. What is changing in what rehabilitation counselor educators are doing in the next 12 months? 24 months?

## CHAPTER 5: CONCLUSION

The three articles in this dissertation are intended to contribute to our understanding of clinical practicum and the use of technology by examining previously published literature, current course syllabi, and faculty perspectives. This chapter revisits the research problem and presents the overall project conclusions and implications.

As discussed in Chapter 1, clinical supervision and counseling practicum are integral components to the training of competent counselors. Although there is no dispute about the importance of clinical training and practicum experiences, there has been little recent inquiry that has examined the pedagogy of clinical supervision and/or practicum in rehabilitation counselor education. In addition, advances in technology and its use in the supervision process have received little attention in the rehabilitation counselor education literature. Because of the continuing evolution of CORE standards, with the most recent update in 2010, it is important to understand existing practices and experiences provided to students enrolled in rehabilitation counseling practicum.

The first article of the dissertation was intended to systematically examine the literature published in RE/RRPE related to the use of technology in the training and supervision of graduate counseling students. The researcher evaluated all 561 articles published in the journal between 1995 and 2015. A qualitative content analysis was used to examine RE/RRPE with the primary intent of analyzing publication themes presented in the text(s). Using 15 keywords, the researcher identified all articles published in RE/RRPE that primarily focused on the use of instructional technology or distance education. Using Evans (2013) model, only articles where 50% or more of the content of the article addressed distance education and instructional technology issues were included

in the results. Using this model, the researcher identified 46 total articles that had a primary focus on distance education and instructional technology in rehabilitation education. During the process of reviewing each of the included articles, the researchers also noted whether the article was descriptive (practical or conceptual) or empirical (quantitative or qualitative). Out of the 46 published articles in RE/RRPE during the designated time period, several themes were identified by the researcher:

pedagogy/teaching strategies, accessibility, clinical supervision, hybrid instruction, student expectations/perceptions/experiences, and ethical issues.

The second article of the dissertation was intended to explore current supervisory practices and related documentation pertaining to clinical practicum in select rehabilitation counseling graduate programs. Using a convenience sample of nine practicum syllabi, a content analysis was conducted with the goal of exploring the usage of the words or themes apparent in the text of the syllabi. Based upon a review of the research and prior exposure to a wide variety of syllabi, the researcher selected seven content categories in the syllabi that he felt reflected current clinical supervision practices and also addressed the research question for the study. The researcher then identified and quantified words or terms in the syllabi that were used to describe each of the content categories. Review of the course syllabi provided information about the focus and demands of courses available around the country for clinical practicum in rehabilitation counseling.

The third article of the dissertation was to explore the perspectives of rehabilitation counseling faculty related to the current use of technology in the training and supervision of graduate rehabilitation counseling students. Using a convenience

sample of nine rehabilitation counseling faculty members, a semi-structured interview approach was used to (a) extract factual details about the types of current practicum experiences being provided at these institutions, (b) determine the current types of technologies used to facilitate student/supervisor interactions, and (c) reveal faculty perspectives on the use and effectiveness of technology in teaching/supervising rehabilitation counseling graduate students during the practicum experience. Using a model of open coding and the theory of constant comparison, the researcher organized the text of the interviews and discovered patterns within the responses. The faculty members discussed a variety of issues during the interviews and the researcher was able to identify five themes that emerged from the participants' responses.

### **Closing**

The overall investigation explored the use of technology and distance education in rehabilitation counselor training programs across the United States. This study adds to the knowledge base of rehabilitation counseling from the perspective of researchers and educators. The evaluation of RE/RRPE provides an informative look at the values and professional beliefs of the rehabilitation counseling field on the topic of technology and distance modalities and an awareness of the direction and emphasis of publications. The researcher interpreted the findings in the first study to indicate that there is a need for an increased emphasis on empirical evaluations of the effectiveness of various instructional approaches and supervision strategies using technology.

The results of the second study help to illustrate current supervisory practices and related instructional approaches pertaining to clinical practicum in select rehabilitation counseling graduate programs. The data suggests that rehabilitation counseling clinical

practicum courses emphasize skill development by students and the use of counseling interventions in course descriptions, course objectives, and assignments. At the same time, it seems a typical clinical training experience in rehabilitation counseling is difficult to discern, given the variability regarding assignments, supervision, and technology requirements.

The results of the third study capture the lived experiences of rehabilitation counseling faculty responsible for practicum instruction and supervision. The interview data provides an in-depth investigation towards what rehabilitation counselor educators perceive related to the current use of technology in the training and supervision of graduate rehabilitation counseling students. Currently, online supervision of practicum students is in a stage of infancy. Based on the findings increased training and institutional support along with pedagogical strategies specific to the use of technology for practicum is necessary for online instruction and supervision for practicum to progress.

Clinical supervision will remain a key component to the training and development of counseling professionals. At the same time, the popularity of online or distance learning continues to rise in higher education. Given the training guidelines set forth by the Council in Rehabilitation Education, and the rising trend of online counseling programs, it is important to continually evaluate the methods by which future counselors are being trained, supervised, and evaluated in an online environment. Moving forward, rehabilitation counselor educators must focus on an intentional fieldwork design, especially when incorporating technology, that will aide in the development of future rehabilitation counselors who are prepared for work as knowledgeable and effective professionals.

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