

**THE EFFECT OF SUPERVISION TRAINING FOR SCHOOL COUNSELORS ON  
SUPERVISION KNOWLEDGE AND SUPERVISOR SELF-EFFICACY**

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by

Adrienne M. Backer

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## **DEDICATION**

This dissertation is dedicated to my past, current, and future school counseling colleagues, all of whom pour so much of themselves into the work of supporting students, families, communities, and coworkers with consistency, empathy, and compassion. Specifically, this study relied on the passion and commitment of my school counselor participants, who chose to volunteer their time to learn about providing supervision for developing and novice school counselors. Their passion for supporting the growth of school counselors-in-training reflects my own and makes me proud of our profession.

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## Table of Contents

CHAPTER ONE: INTRODUCTION.....	2
Background and Context .....	3
Statement of the Problem.....	4
Professional School Counselor Identity.....	5
School Counseling Practice .....	5
Ethical Standards and Accreditation.....	6
Theoretical Framework.....	8
Purpose of the Study .....	8
Role of the Researcher.....	9
Research Questions.....	9
Research Hypothesis One .....	10
Research Hypothesis Two.....	10
Significance of the Study .....	11
Research Design and Method .....	11
Definitions of Terms .....	12
Ethical Considerations .....	13
Potential Limitations of the Study .....	14
Results.....	17
Conclusion .....	18

CHAPTER TWO: REVIEW OF THE LITERATURE.....	19
School Counseling Supervision.....	20
Post-Graduation Clinical Supervision.....	21
School Counseling Site Supervision.....	25
Supervision Training.....	27
Supervision Training Curricula.....	27
Current Trends in Supervision Training in Counselor Education .....	33
Current Trends in School Counseling Site Supervision Training.....	37
Theoretical Framework.....	41
Social Cognitive Theory .....	42
School Counseling Supervision Knowledge.....	44
Professional Development .....	45
Online Learning .....	51
Gaps in the Literature .....	53
CHAPTER THREE: RESEARCH METHODOLOGY .....	55
School Counseling Site Supervision Training Intervention .....	55
Content Validity.....	57
Treatment Fidelity.....	58
Research Questions.....	59
Research Hypothesis One .....	60

Research Hypothesis Two.....	60
Research Design .....	61
Threats to Validity .....	61
Internal Validity .....	62
External Validity.....	63
Participant Demand Considerations.....	64
Procedure .....	65
Sampling Procedures .....	65
Random Assignment.....	66
Data Collection Procedures.....	67
Effects from Current Pandemic .....	68
Instrumentation .....	69
SST-SC Knowledge Assessment .....	69
Counselor Supervisor Self-Efficacy Scale.....	70
Perceived Stress Scale.....	72
Demographics Questionnaire.....	72
Data Analysis .....	73
Ethical Considerations .....	74
Limitations .....	75
CHAPTER FOUR: RESULTS .....	78

Research Hypothesis One .....	78
Research Hypothesis Two.....	79
Participants.....	80
Demographic Characteristics.....	82
Comparison of Groups on Demographics.....	84
Preliminary Analysis.....	85
Outliers and Missing Data .....	85
Statistical Assumptions.....	86
Comparison of Groups on Baseline Scores .....	86
Reliability of Scales .....	87
Perceived Stress .....	88
Results of the Research Questions.....	89
Descriptive Statistics.....	90
Multivariate Results for Supervision Knowledge.....	90
Multivariate Results for Supervisor Self-Efficacy.....	92
Conclusion .....	94
CHAPTER FIVE: DISCUSSION.....	95
Discussion of Findings.....	95
Research Hypothesis One .....	96
Research Hypothesis Two.....	96

Discussion about the Participants, Interest, and Attrition.....	98
Summary and Discussion of Findings for research Question One .....	100
Summary and Discussion of Research Question Two.....	102
Discussion about Randomized Controlled Trials and School Counseling Research.....	104
Implications for School Counseling .....	105
Implications for Counselor Education .....	107
Limitations .....	109
Threats to Validity .....	110
Recommendations for Future Research.....	113
Conclusion .....	116
References.....	119
Appendix A.....	135
Appendix B.....	140
Vita.....	141

# **THE EFFECT OF SUPERVISION TRAINING FOR SCHOOL COUNSELORS ON SUPERVISION KNOWLEDGE AND SUPERVISOR SELF-EFFICACY**

## **ABSTRACT**

This study investigated the effect of supervision training on participating school counselors' supervision knowledge and supervisor self-efficacy. A randomized experimental research design allowed the unbiased examination of outcomes associated with participation in the *Site Supervision Training for School Counselors (SST-SC)* program. The researcher conducted repeated measures analyses of variance to explore the effect of a seven-week, asynchronous online site supervision training intervention on school counselors' supervision knowledge and supervisor self-efficacy. The results indicated a statistically significant main effect for time for supervision knowledge, with both groups showing an increase in test scores from pre- to post-test, regardless of participation in the SST-SC program. The results also revealed a statistically significant main effect for time for supervisor self-efficacy, with the intervention group showing an increase in test scores over time and the waitlist control group showing no significant change in test scores from pre- to post-test. The results from this study provided insight about the effects of supervision training for school counselors.

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## CHAPTER ONE: INTRODUCTION

The current study examined the outcomes associated with participation in an online site supervision training intervention for school counselors. Specifically, this study investigated the effect of supervision training on participating school counselors' supervision knowledge and supervisor self-efficacy. In this study, I examined the *Site Supervision Training for School Counselors (SST-SC)* program, which was adapted from a previously established university-based supervision training program delivered in a face-to-face context (Merlin & Brendel, 2017). A randomized experimental research design (Campbell & Stanley, 1963) allowed the unbiased examination of outcomes associated with participation in the SST-SC program. More specifically, a pretest-posttest control group design was used whereby participants were randomly assigned to two groups, with one group receiving the intervention and the other group not initially receiving the intervention, thus serving as a waitlist control group (Campbell & Stanley, 1963; Heppner et al., 1992). I recruited participants for the current study via convenience sampling by contacting clinical coordinators at CACREP accredited counselor education programs at universities in various regions in the United States and through membership-based school counseling listservs.

Chapter one introduces the background and context for the current study and includes an overview of the problem under investigation. Additionally, this chapter includes a review of the theoretical framework applicable to the current study. Chapter one also provides the study's purpose and significance and the research questions guiding the study's design and method. The

chapter concludes with definitions of key terminology used in this study, as well as an overview of ethical considerations relevant to the study, potential limitations, and results.

### **Background and Context**

Clinical supervision is an essential component of counselor education training programs and a part of ongoing professional development. Supervision is crucial in promoting counselors' competency and preparing them to work in complex environments (Bernard & Goodyear, 2019; Swank & Tyson, 2012). Supervision in school counseling, as in all mental health professions, is essential to the development of school counseling students, and school counselors who serve as site supervisors play an indispensable role in preparing trainees for the range of experiences they will encounter working in schools (Merlin & Brendel, 2017).

School counseling supervision is unique in its foci, themes, and environment as compared to supervision in other helping professions (Agnew et al., 2000; Peterson & Deuschle, 2006). While many counseling specialties are characterized by an emphasis on mental health or clinical services, school counselors are uniquely trained to work in P-12 educational settings and support students presenting with various social, emotional, academic, and career needs (Dollarhide & Saginak, 2017). Additionally, school counselors work together with educational colleagues, such as administrators and teachers, as opposed to working alongside other helping professionals (Dollarhide, 2003). Moreover, school counselors' specialized work settings and job responsibilities impact their access to and provision of supervision (Page et al., 2001). School counseling supervision is often described in two ways: (a) school counselors receive post-graduation clinical supervision or (b) they provide supervision for school counseling graduate students, serving as a clinical site supervisor.

## Statement of the Problem

The process of supervision in counselor education ideally involves a supervisor who has had coursework or background experience beyond a master's degree that has prepared them to provide effective and ethical supervision services. However, researchers have found that supervisors may not have received specific preparation for providing supervision, though they monitor and oversee the work of supervisees regardless (Bjornestad et al., 2014; Bradley et al., 2010; DeKruyf & Pehrsson, 2011; McCoy & Neale-McFall, 2016; McMahon & Simons, 2004; Nelson & Johnson, 1999; Studer, 2005; Swank & Tyson, 2012). Given that many site supervisors have not participated in specific supervision training and may not have the time or resources to take a graduate-level course in supervision, the responsibility tends to fall on university counseling departments and clinical program directors to provide appropriate training for school counseling site supervisors (McCoy & Neale-McFall, 2016). While a small body of conceptual and empirical literature suggests varying models for providing training for counseling site supervisors, the primary focus is on face-to-face courses offered by universities (e.g., DeKruyf & Pehrsson, 2011; McMahon & Simons, 2004; Merlin-Knoblich et al., 2018). However, several researchers have proposed web-based approaches for site supervision training (e.g., Bjornestad et al., 2014; McCoy & Neale-McFall, 2016), and even fewer offer suggestions for using this format specifically with school counseling site supervisors (e.g., Swank & Tyson, 2012). Moreover, very few quantitative studies exist examining the effectiveness or potential outcomes of such training.

There are several gaps related to school counseling and supervision, including the lack of supervision for school counseling practitioners who desire it; the lack of appreciation for supervision expressed by those who do not want it; and the deficiency in training for school

counselors who serve as supervisors for school counseling students (Dollarhide & Miller, 2006; Herlihy et al., 2002). Furthermore, reasons why appropriate training in supervision is vital for school counselors exist, including the impact of such training on professional identity (Dollarhide & Miller, 2006; Gibson et al., 2012; Moss et al., 2014); the broad benefits of such training for school counseling practice (Agnew et al., 2000); and perhaps most importantly, the ethical obligation and accreditation requirement that those serving as supervisors be trained to do so (ACA, 2014; ACES, 2011; ASCA, 2016; CACREP, 2015).

### **Professional School Counselor Identity**

Before even accounting for the ethical and accreditation guidelines calling for supervision training, it should be noted that participation in supervision, either as a recipient, a trainee, or a supervisor, shores up professional identity (Gibson et al., 2012; Thacker & Diambra, 2019). The converse is also evidence that problems with professional identity in school counseling have been linked to a lack of clinical supervision (Dollarhide & Miller, 2006; Herlihy et al., 2002). In a qualitative grounded theory study, Moss and colleagues (2014) found that transformational tasks, such as participating in training and leadership opportunities, led to increased professional identity development and a shift from burnout to rejuvenation for more experienced counselors. In a profession characterized by role confusion, misaligned responsibilities, and isolation, school counselors benefit from developing a strong sense of professional identity (Gibson et al., 2012).

### **School Counseling Practice**

There are both practical and clinical implications for school counseling practice in levying consistent standards for supervision training (Herlihy et al., 2002; Nate & Haddock, 2014). Nate and Haddock (2014) proposed that infusing supervision training with consistency

and standardization would potentially unify and strengthen the counseling profession. Given the poorly defined roles often assigned to school counselors (Herlihy et al., 2002), it stands to reason that adequate training in supervision has the potential to clarify the range of roles and responsibilities of school counselors and to support school counseling students in mastering those skills and dispositions in preparation to enter the profession. Clinically, school counselors have an ethical and legal need to protect student clients, both through their own work and the school counselors-in-training work they supervise. Thus, adequate training in supervision bolsters clinical competence at all levels of experience (Herlihy et al., 2002; Nate & Haddock, 2014). Both practically and clinically, Agnew and colleagues (2000) proposed that “built-in periodic clinical supervision training (at least annually to be sure new counselors are trained)” (p. 12) would benefit all stakeholders, from school counselors with varying levels of experience to the students and families they serve.

### **Ethical Standards and Accreditation**

When school counseling students step into the field, they expect support and guidance from their site supervisors. While many site supervisors can provide first-rate learning experiences for counseling interns, the fact remains that many of them have not been formally trained to understand the supervisory responsibility that accompanies the experience of taking on an intern (Bjornestad et al., 2014; McCoy & Neale-McFall, 2016). Well-trained supervisors are essential to the success and quality of counseling students’ field experiences (Swank & Tyson, 2012). The American Counseling Association’s (ACA) Code of Ethics (2014) addresses supervisor preparation and states that “[prior] to offering supervision services, counselors are trained in supervision methods and techniques. Counselors who offer supervision services

regularly pursue continuing education activities, including both counseling and supervision topics and skills” (p. 13).

The Association for Counselor Education and Supervision (ACES), a division of ACA, also outlines clear guidelines for supervisors in the ACES’ Best Practices in Clinical Supervision (2011), which directly states that “the supervisor has formal training in clinical supervision” (p. 13). Moreover, the American School Counselor Association (ASCA) also describes formal training in supervision as an essential part of being a competent school counselor. The ASCA Ethical Standards for School Counselors (2016) states that site supervisors “have the education and training to provide clinical supervision... [and regularly] pursue continuing education activities on both counseling and supervision topics and skills” (p. 8). In addition, the Council for Accreditation of Counseling and Related Educational Programs (CACREP, 2015) standards also articulate that clinical supervisors should have “relevant training in counseling supervision” (p. 15, 38, & 44). As defined by CACREP (2015), relevant training in counseling supervision is “training in counseling supervision to be determined by the program (e.g., workshop offered by the institution, graduate supervision course, possession of supervisory credential, etc.)” (p. 44). Despite this, many site supervisors have not received any relevant supervisory training and, thus, may create disadvantages and undue risks for themselves and their students (McCoy & Neale-McFall, 2016). Regardless, counselor education programs depend on site supervisors to take counselors-in-training into their hectic schedules, understanding that most site supervisors do not have the time to take an entire course on supervision. Consequently, despite the various ethical standards and documented best practices related to providing supervision, many school counselors do so without having received formalized training regarding the supervision process,

appropriate supervisor roles, and the developmental and professional needs of school counseling students.

Supervision is a distinct intervention that requires an additional set of skills that are not always interchangeable with clinical skills (Bernard & Goodyear, 2019). Given the implications for professional school counselor identity, school counseling practice, and adherence to ethical and accreditation standards, there is a need for school counseling site supervisors to be trained and empirical studies evaluating the outcomes of such training.

### **Theoretical Framework**

A theoretical framework consists of the theories, constructs, and definitions relevant to the topic of a study and that underlie the research design (Grant & Osanloo, 2016). Bandura's (1989, 1997) social cognitive theory provides a framework for understanding the development of supervisor self-efficacy and supervisory knowledge acquisition. In addition, several authors (e.g., Harland & Kinder, 1997; Joyce & Showers, 1980; Kennedy, 2005) described models and associated outcomes of professional development that guided the development of the supervision training program adapted for the current study, as well as its anticipated outcomes. Finally, an examination of online education provides the relevant terminology and practices for adapting a training program for a virtual context.

### **Purpose of the Study**

The purpose of this study was to examine the outcomes associated with participation in an online site supervision training intervention for school counselors. Specifically, this study investigated the effect of supervision training on participating school counselors' supervision knowledge and supervisor self-efficacy. In the current study, I examined the *Site Supervision Training for School Counselors (SST-SC)* program, which was adapted from a previously

established university-based supervision training program delivered in a face-to-face context (Merlin & Brendel, 2017).

### **Role of the Researcher**

In quantitative research, the role of the researcher is to remain objective, unbiased, and detached from her participants, with the aim of preventing any biases to confound the outcomes of the study. A research design that incorporates strategies to mitigate or prevent threats to internal and external validity aligns with the role of the researcher as unbiased. In the current study, the researcher was both the investigator and the experimenter, which maximized treatment fidelity (Gall et al., 2007). However, I should note that as the researcher, I am also an experienced school counselor who has participated in supervision training, both as a learning practitioner and as a course facilitator. In both of those roles, I have anecdotal experiences of outcomes. While these experiences did not alter or confound the delivery of the training intervention in the current study, nor did they impact the outcomes, they did inform my primary research questions, as well as the design of the intervention.

### **Research Questions**

Despite the empirical support for the efficacy of online learning and, more specifically, the positive outcomes associated with participants' satisfaction and perceived learning via asynchronous online courses (e.g., Means et al., 2009; Reeves & Li, 2012; Soffer & Nachmias, 2018; Swan, 2001), no studies exist examining the efficacy or potential outcomes of counseling supervision training delivered in this manner. Thus, the following research questions guided this study:

1. Is there a statistically significant difference in supervision knowledge (as measured by the Site Supervision Training for School Counselors Knowledge

Assessment [SST-SCKA; Backer, 2021]) among school counselors who participate in the seven-week Site Supervision Training for School Counselors (SST-SC) program when compared to a waitlist control group?

2. Is there a statistically significant difference in supervisor self-efficacy (as measured by the Counselor Supervisor Self-Efficacy Scale [CSSES; Barnes, 2002]) among school counselors who participate in the seven-week SST-SC program when compared to a waitlist control group?

### **Research Hypothesis One**

There will be a statistically significant difference in supervision knowledge (as measured by the SST-SCKA [Backer, 2021]) among school counselors who participate in the seven-week SST-SC program when compared to a waitlist control group.

### ***Null Hypothesis for Research Question One***

There will not be a statistically significant difference in supervision knowledge (as measured by the SST-SCKA [Backer, 2021]) among school counselors who participate in the seven-week SST-SC program when compared to a waitlist control group.

### **Research Hypothesis Two**

There will be a statistically significant difference in supervisor self-efficacy (as measured by the Counselor Supervisor Self-Efficacy Scale [CSSES; Barnes, 2002]) among school counselors who participate in the seven-week SST-SC program when compared to a waitlist control group.

### ***Null Hypothesis for Research Question Two***

There will not be a statistically significant difference in supervisor self-efficacy (as measured by the CSSE [Barnes, 2002]) among school counselors who participate in the seven-week SST-SC program when compared to a waitlist control group.

### **Significance of the Study**

School counselors who provide clinical supervision for school counseling students without completing specific site supervision training should make it a high priority to do so (Herlihy et al., 2002). Most school counselors are not trained in supervision yet are called upon to serve as site supervisors. A novel approach to addressing this problem aimed to promote the accessibility of school counseling site supervision by developing and implementing an asynchronous module-based training intervention. Furthermore, the current approach sought to understand the impact of school counseling site supervision training by testing the effectiveness of that intervention.

### **Research Design and Method**

I utilized a randomized experimental research design (Campbell & Stanley, 1963). More specifically, a pretest-posttest control group design was used whereby participants were randomly assigned to two groups, with one group receiving the intervention and the other group not initially receiving the intervention, thus serving as a waitlist control group (Campbell & Stanley, 1963; Heppner et al., 1992). Randomization serves three primary purposes: (a) it helps to mitigate selection bias by ensuring that the unique characteristics of the participants are spread across the treatment and control groups, (b) it helps to balance the groups with respect to confounding variables, and (c) it provides a basis for statistical analysis whereby the estimation of error effects is unbiased, and the likelihood that error effects and observations are independent is increased (Bhide et al., 2018; Kirk, 1995; Suresh, 2011). Thus, randomization ensures high-

quality evidence because any differences in observed outcomes between the intervention and control groups are likely due to the intervention rather than any other factors (Bhide et al., 2018). I recruited participants via convenience sampling by contacting clinical coordinators in a selection of CACREP accredited counselor education programs at universities in various regions in the United States and through membership-based school counseling listservs.

The randomized controlled trial (RCT) represents the most rigorous and powerful quantitative research method for determining if there is a cause-effect relationship between an intervention and an outcome (Bhide et al., 2018; Gall et al., 2007). While the RCT may be the most robust method to determine the effectiveness of an intervention, several factors, including validity criteria, must be considered to yield valid findings (Bhide et al., 2018; Gall et al., 2007). Thus, the experimental design incorporated several strategies (e.g., allocation concealment, randomization, and consistency of instrument administration) and controls to mitigate or prevent threats to validity (Campbell & Stanley, 1963).

### **Definitions of Terms**

*Supervision* is an essential experience of counselor education training programs and a part of ongoing professional development. Supervision is a relationship between a novice and experienced professional characterized by an intentional balance of hierarchy, evaluation, and support (Bernard & Goodyear, 2019; Borders & Brown, 2005). Counselor supervision serves three main purposes that include facilitating a supervisee's personal and professional development, promoting competencies for effective and ethical counseling practice, and upholding accountability of counseling services and programs for the greater profession and for the clients receiving services (Bradley et al., 2010).

*Site supervision* is critical to the practicum and internship experience, as it provides counseling students with a context for processing counseling experiences, ethical dilemmas, and case conceptualizations (Neyland-Brown et al., 2019). It also provides students with opportunities to make connections between what they have learned in their classrooms with actual practice in the field (Studer & Diambra, 2010). For school counseling students, site supervision provides them with the opportunity to process the experiences unique to P-12 contexts, as well as the various foci and roles of professional school counselors (Agnew et al., 2000; Peterson & Deuschle, 2006).

A complete description of online learning terminology is included in chapter two. However, it should be noted here that *asynchronous online learning* refers to a web-based content delivery platform through which technology is used to facilitate non-synchronous learning with participants in different locations; it is completely online and without synchronous meetings (ACES, 2017; Means et al., 2009). By contrast, *synchronous online learning* refers to instruction delivered through web-based technology with communication occurring simultaneously and characterized by real-time interaction (ACES, 2017; Means et al., 2009).

### **Ethical Considerations**

It is imperative that rigorous ethical principles be applied to RCTs that involve human subjects. For example, careful appraisal of the risks and benefits to participants and society, the procurement of ethical approval from an IRB, and informed consent are essential elements of sound ethical practice (Bhide et al., 2018). Bhide et al. (2018) described the importance of considering and evaluating the ethics associated with utilizing randomization to allocate participants to an intervention group. While it would be unethical to withhold treatment if previous evidence has shown that an intervention is more effective than doing nothing, this

principle applies primarily to medical research. The current study did not involve any anticipated discomforts or risks. It is a possibility that participants who were assigned to the waitlist control group may have experienced feelings of impatience or frustration with the amount of time prior to the start of their participation in the SST-SC program; however, the possibility of a delayed start was explained as a part of the informed consent process.

The informed consent process also included information about participation and confidentiality, and particular care was taken to avoid jargon and instead use language that was familiar to participants. Participation in the current study was completely voluntary, and participants could withdraw from the program and the study at any time. Participants' confidentiality was protected throughout the study, and the data collected was confidential. Participants' names and emails were used for initial recruitment and communication purposes; however, this information was not associated with their responses to any measures used in data collection.

### **Potential Limitations of the Study**

While there are demonstrated gaps related to school counseling supervision training and research (Dollarhide & Miller, 2006; Herlihy et al., 2002), a number of limitations emerged when considering a new approach to this issue. First, though several studies indicated school counselors' desire to participate in supervision (Page et al., 2001; Sutton & Page, 1994), fewer studies revealed their desire to receive training in supervision (DeKruyf & Pehrsson, 2011). Furthermore, state-level surveys have indicated a preference for face-to-face school counseling site supervision training over online training (Walsh-Rock et al., 2017). It is possible that current circumstances (i.e., COVID-19 pandemic, economic uncertainty, and social unrest resulting from the current political climate and systemic oppression), including a worldwide trend toward

conducting business, education, and commerce online, may have impacted school counselors' desire to participate in module-based supervision training.

In addition to considering school counselors' interest in receiving supervision training, and given the 40-year-old unanswered call to address the shortages in school counseling supervision, it should be noted that counselor educators may not see the need to evaluate the outcomes of such training. In a Delphi study aimed at updating a previous investigation focused on the school counseling research agenda, Villares and Dimmitt (2017) found that none of the top-rated research questions fell into the domain for "identifying effective educational and supervisory approaches for preservice SCs" (p. 188), suggesting that these topics are not priorities. The panel, comprised of 29 professional school counselors, school counselor leaders, or school counselor educators, prioritized topics related to student well-being and program outcomes. The researchers speculated that this result may have been due to a desire to "serve the counseling profession and clients more broadly" (Villares & Dimmitt, 2017). As a means of understanding and addressing the minimization of supervision training in school counseling, the current study involved serving the school counseling profession more broadly, including student clients and developing school counselors, by providing a resource and examining outcomes.

Although not necessarily a limitation of the current intervention, an inherent challenge in online education is the ability to infuse experiential learning activities, as well as opportunities for facilitator-student and intra-student engagement (Snow et al., 2018). Thus, the course design included innovative and accessible features for promoting such opportunities. For example, the SST-SC program was housed in Canvas and included discussion boards, reflection prompts, and application activities that promoted both facilitator-student and intra-student engagement.

The current study is needed in that there has only been one study specific to the field of counseling that evaluated the outcomes of supervision training and employed an experimental design (McMahon & Simons, 2004). While RCTs are considered to be the gold standard for evaluating the effectiveness and outcomes of interventions (Moher et al., 2012), there are several limitations that are important to note. The following section will describe the limitations related to the effects of the current pandemic, sampling procedures, instrumentation, and outcome ascertainment.

As previously noted, it is likely that school counselors may be experiencing increased levels of stress as they mitigate the challenges associated with the COVID-19 pandemic in both their personal and professional roles. Increased stress was examined as a potential covariate in the current study, but it may have also prevented school counselors from being interested or available to participate in the SST-SC program. An informal interest survey conducted by the researcher via a posting on ASCA Scene and through personal communications revealed that school counselors were more likely to participate in the training in its current form (i.e., a seven-week asynchronous online format) versus a more condensed or traditional training. However, there is a possibility that the effects of the current pandemic may have negatively impacted accessibility and sampling.

While nonprobability sampling is often more accessible and convenient for researchers, it should be noted that a sample drawn randomly from a population is more desirable (Gall et al., 2007). The primary limitation inherent to convenience sampling is the difficulty in making valid inferences about a population when probability sampling is not used (Warner, 2013). However, it is impossible to generalize the results of an experiment beyond the limits of the study itself (Gall et al., 2007). Issues of external validity were addressed in the current study by seeking a sample

of participants whose demographic characteristics represented school counselors in the United States.

An additional limitation in the current study was the inclusion of an instrument without previous psychometric validation. The SST-SCKA was developed by the researcher for the current study because a pre-existing measure of supervision knowledge was not available. While sound scale and item development procedures (DeVellis, 2017; Kline, 2005) were followed, the inclusion of this measure posed a threat to internal validity (Campbell & Stanley, 1963).

Finally, in considering outcome ascertainment, it is important to note that attrition may have impacted the results of the study and contributed to biased estimates. Particularly given the length of the intervention, along with effects from the current pandemic, it seems likely that attrition may have impacted the viability of the current study.

## **Results**

In this study, I conducted two RM-ANOVAs to explore the effect of a seven-week, asynchronous online site supervision training intervention on school counselors' supervision knowledge and supervisor self-efficacy. The first RM-ANOVA failed to reject the null hypothesis that there would not be a statistically significant difference in supervision knowledge among school counselors who participated in the SST-SC program when compared to a waitlist control group. There was a statistically significant main effect for time, with both groups showing an increase in test scores from pre- to post-test. The second RM-ANOVA rejected the null hypothesis that there would not be a statistically significant difference in supervisor self-efficacy among school counselors who participated in the SST-SC program when compared to a waitlist control group. There was a statistically significant main effect for time, with the intervention group showing an increase in test scores over time and the waitlist control group

showing no significant change in test scores from pre- to post-test. Perceived stress was not a dependable covariate for the outcome variables of interest due to few completed cases (i.e., nonresponse); thus, I removed stress from consideration in this study. The results from the current study provided insight about the effects of supervision training for school counselors.

### **Conclusion**

In chapter one, I provided the background and context of the lack of supervision training in school counseling, as well as the need for more research focused on the outcomes of such training and provided a rationale for the intervention study. In addition, I presented the research questions, briefly described the research design and method, defined several relevant terms, and included ethical considerations and potential limitations of the study. In chapter two, I will provide a review of the literature about school counseling supervision, supervision training, and the theoretical framework providing context for the current study.

## **CHAPTER TWO: REVIEW OF THE LITERATURE**

Chapter two consists of a review of the literature pertaining to school counseling supervision, supervision training, and the theoretical framework providing context for the current study, which was an examination of the outcomes associated with participation in an instructor facilitated asynchronous online site supervision training program for school counselors. More specifically, chapter two outlines the forms of school counseling supervision, including previous research related to post-graduate clinical supervision and school counseling site supervision. This section also highlights the gap in supervision training for school counselors.

This chapter goes on to provide an overview of supervision training that includes sections specific to training curricula, including content topics covered in supervision training in the fields of psychology and counseling, accreditation, and credentialing. This section of chapter two also highlights current trends in supervision training in counselor education, such as doctoral and master's level training and supervision training as professional development. This part of chapter two concludes with a focus on current trends particular to school counseling supervision training, including proposed models for training school counselors in clinical site supervision.

The final section of chapter two provides a theoretical framework that contextualizes the current study in terms of social cognitive theory, school counseling supervision, professional development, and online learning. Social cognitive theory situates the construct of self-efficacy as a viable outcome of participation in supervision training for school counselors. The literature related to professional development and online learning in education provides context for the

training program that I adapted for use in the current study. Finally, chapter two concludes with an overview of gaps in current literature and research related to such training and provides a chapter summary.

### **School Counseling Supervision**

Clinical supervision is an essential experience of counselor education training programs and a part of ongoing professional development. Supervision is an intervention provided by an experienced professional to a novice in the same profession and is characterized by an intentional balance of hierarchy, evaluation, and support (Bernard & Goodyear, 2019; Borders & Brown, 2005). Counselor supervision serves three main purposes that include promoting competency in effective and ethical counseling practice, facilitating a supervisee's personal and professional development, and upholding accountability of counseling services and programs for the greater profession and for the clients receiving services (Bradley et al., 2010).

Scholars have suggested that the unique foci, themes, and environment of school counseling supervision distinguish it from supervision in other helping professions (Agnew et al., 2000; Peterson & Deuschle, 2006). While many counseling specialties are characterized by an emphasis on mental health or clinical services, school counselors are uniquely trained to work in pre-K-12 educational settings and to support students presenting with an array of social, emotional, academic, and career needs (Dollarhide & Saginak, 2017). Additionally, school counselors work together with educational colleagues, such as administrators and teachers, as opposed to working alongside other helping professionals (Dollarhide, 2003). Moreover, the specialized work settings and job responsibilities of school counselors impact their access to and provision of supervision (Page et al., 2001). School counseling supervision is often described in

two ways: (a) school counselors receive post-graduation clinical supervision or (b) they provide supervision for school counseling graduate students, serving as a clinical site supervisor.

### **Post-Graduation Clinical Supervision**

School counselors typically receive their certification or licensure from their state's Department of Education and are not often required to participate in any form of post-master's supervision (Dollarhide & Saginak, 2017). However, school counselors regularly encounter complex situations that involve supporting students with acute needs, responding to crises, and helping with life and death decision-making (Herlihy et al., 2002). For example, school counselors routinely address high-risk and violent behaviors, the effects of school violence, and the consequences of trauma exposure. These tasks require skills that school counseling trainees may not have even practiced, let alone mastered, during their graduate programs. Clinical supervision provides the context for identifying and developing the skills needed to effectively support such complexities (Bernard & Goodyear, 2019). School counselors, however, often work in unsupportive environments without receiving the benefits of clinical supervision (Sutton & Page, 1994).

The literature on supervision for school counseling practitioners consists primarily of program overviews or evaluations (Agnew et al., 2000; Henderson & Gysbers, 2006), state-level surveys (Roberts & Borders, 1994; Sutton & Page, 1994), national surveys (Borders & Usher, 1992; Page et al., 2001), and a more recent content analysis (Bledsoe et al., 2019). Henderson and Gysbers (2006) described a performance improvement system for school counselors that incorporated human resource activities (e.g., evaluation and administrative oversight), counseling supervision, and appraisal of professionalism. The supervision dimension of the model was highlighted as the centerpiece of the system (Henderson & Gysbers, 2006). While this

model was designed to be overseen by guidance department heads, supervision for school counselors is often provided by administrators who have not been trained in counseling (Borders & Usher, 1992; Roberts & Borders, 1994; Sutton & Page, 1994). Further, when delivered by school principals, supervision is tantamount with evaluation and typically based on district or teacher evaluations (Portman, 2002).

Peer group clinical supervision is a form of professional consultation that does not include formal evaluation, nor is it hierarchical in nature (Bernard & Goodyear, 2019). Peer supervision programs offer an alternative to administrative supervision for school counselors (Crutchfield & Borders, 1997); however, there is little evaluative research supporting the outcomes of such programs (Agnew et al., 2000). Agnew and colleagues (2000) presented evaluation outcomes of a long-term peer group clinical supervision program for school counselors that was implemented by a credentialed supervisor and included training in supervision during the first year of the program. Ninety-seven percent of participants in the program ( $n = 29$ ) reported positive gains in counseling skills, an increased perception of professionalism, and personal gains, such as increased confidence, as attributed to their participation in the peer supervision group (Agnew et al., 2000).

Several state-level surveys yielded information about the frequency and type of supervision that school counselors receive. In a study conducted with school counselors in Maine, Sutton and Page (1994) found that 20% ( $n = 99$ ) of the respondents received individual clinical supervision, and 40% ( $n = 198$ ) participated in peer supervision. Sixty-three percent of the counselors ( $n = 311$ ) expressed a desire for supervision and rated taking action with client problems and developing skills and techniques as their most important supervision goals. Similarly, Roberts and Borders (1994) surveyed school counselors in North Carolina about their

supervision experiences and found that 37% ( $n = 62$ ) reported receiving counseling supervision. While the North Carolina school counselors were asked to identify the type of supervision they were receiving (e.g., administrative, programmatic, or counseling), a number of those who specified counseling supervision reported being supervised by their principals. Counselors' main purposes for supervision were meeting state regulations and personal professional development. Of the total sample, 79% ( $n = 133$ ) of the school counselors reported an interest in receiving counseling supervision, and most of them reported that they would prefer to receive counseling supervision from someone with a counseling (versus administrative) background (Roberts & Borders, 1994).

Borders and Usher (1992) conducted a survey of National Certified Counselors (NCCs), 39% of whom were school counselors ( $n = 357$ ). School counselors reported receiving significantly fewer hours of post-graduate clinical supervision than did community mental health counselors or those working in private practice, and 45% ( $n = 161$ ) reported having received no post-degree supervision. School counselors' most frequent reason for receiving supervision was a requirement in their work setting, and the primary goal of supervision, which was common to the entire sample, was increased professional support. While community mental health counselors reported a preference for supervision delivered by licensed clinical psychologists, school counselors reported a preference that their supervisors be other counselors (Borders & Usher, 1992). In a national study conducted specifically with school counselors, Page and colleagues (2001) used an updated version of the survey used by Sutton and Page (1994) with Maine school counselors and assessed supervision type, frequency, and goals. The sample ( $n = 267$ ) included respondents from all 50 states and the District of Columbia. Thirteen percent of the school counselors ( $n = 36$ ) reported receiving individual clinical supervision, while 11% ( $n =$

30) reported participating in group supervision, and 29% ( $n = 78$ ) reported receiving peer supervision. Interestingly, one third of the school counselors indicated that they had no need for supervision. By contrast, 67% ( $n = 180$ ) of the respondents expressed an interest in continuing their current supervision and/or receiving clinical supervision in the future. Finally, 70% ( $n = 188$ ) of the school counselors “described the most desirable clinical supervisor as another school counselor who had specific training in supervision” (Page et al., 2001, p. 146). These findings suggest that while many school counselors do not participate in any form of clinical supervision, the majority of school counseling practitioners are interested in receiving it. Moreover, most school counselors wish to receive supervision from other school counselors who have been received supervision training.

Research has indicated a gap between the post-graduation clinical supervision that school counselors receive and the supervision experiences that they desire (Cook et al., 2012; Luke et al., 2011; Shechtman & Wirzberger, 1999). In particular, school counselors who work in rural settings or are isolated lack access to supervision. Moreover, school counselors report that a primary barrier in access is uncertainty about how to procure clinical supervision, along with limited time release (i.e., time set aside during school hours to participate in professional activities such as trainings or supervision) and inconsistent financing to participate in supervision (Sutton & Page, 1994). The lack of post-degree supervision in school counseling may also be attributed to the notion that supervision is primarily associated with psychotherapy and thus a mismatch for school counseling (Borders & Usher, 1992); the lack of clarity or distinction between administrative versus clinical supervision (Portman, 2002; Roberts & Borders, 1994); a lack of understanding regarding the range of roles and responsibilities of school counselors by those who oversee them (Herlihy et al., 2002; Luke & Bernard, 2006); and the scarcity of

adequately trained school counseling supervisors (Cook et al., 2012; Herlihy et al., 2002). In a content analysis of school counseling supervision literature, Bledsoe and colleagues (2019) echoed these barriers and concluded that “supervision in school counseling seems to be in its infancy” (p. 6).

In considering why supervision has been a neglected issue in school counseling, it is important to consider the fact that some school counselors indicate a lack in interest in receiving supervision. While the majority of Maine school counselors surveyed in the Sutton and Page (1994) study reported an interest in supervision, 37% ( $n = 160$ ) indicated having no need for clinical supervision. Similarly, findings at a national level indicated that while most school counselors were interested in supervision, fully one third were not (Page et al., 2001). In a study of Israeli school counselors’ supervision needs, Shechtman and Wirzberger (1999) also found that some participating school counselors demonstrated less need for supervision; however, the group indicating this were those who had received two years of supervision training. Research does not indicate all of the reasons for some school counselors’ disinterest in receiving supervision, but Shechtman and Wirzberger’s (1999) findings suggest that the outcomes of supervision training may be correlated with a desire for receiving supervision and warrant further investigation.

### **School Counseling Site Supervision**

The roles and responsibilities of school counselors have grown over the course of the development of the school counseling profession. Currently, according to the American School Counselor Association (ASCA, 2019), the functions of school counselors include delivering direct (e.g., instruction, appraisal and advisement, counseling) and indirect (e.g., consultation, collaboration, referrals) student services, as well as performing various administrative and

programmatic functions (e.g., program focus, planning, and assessment; ancillary services). In addition to these responsibilities, school counselors are often also asked to supervise graduate student interns (Bjornestad et al., 2014; McCoy & Neale-McFall, 2016; Nelson & Johnson, 1999). The supervised school counseling practicum and internship experiences are requisite components of a graduate student's preparation. The Council for Accreditation of Counseling and Related Educational Programs (CACREP, 2015) requires both a 100-hour practicum and a 600-hour internship under the supervision of a certified school counselor. Providing supervision is often a presumed obligation for many school counselors and receiving quality supervision is essential to positive field experiences for students. However, school counselors are rarely given any formal supervision training.

Luke et al. (2011) suggested that school counseling supervision is unique in its content, context, and configuration from counseling supervision, in general. Studer (2005) specified that clinical supervision for school counselor trainees aims to improve direct service delivery and unique skills, particularly in the areas of guidance curricula, counseling, consultation, and referral. Even in spite of the foundational necessity of supervision for the development of emerging professional school counselors, research has indicated that school counseling supervision does not occur with consistency or frequency (Luke, Ellis, & Bernard, 2011).

### ***The Gap in Supervision Training for School Counselors***

A major concern in the field of school counseling is the scarcity of qualified supervisors (Herlihy et al., 2002; Nelson & Johnson, 1999). School counselors are relied upon to serve as site supervisors for school counseling students, which poses a significant ethical concern if they have not been formally trained to do so (Herlihy et al., 2002). Moreover, a cycle of insufficient supervision in school counseling is perpetuated by the placement of practicum students and

interns with untrained site supervisors. Those very students, who have received inadequate supervision, then go on to take up the call to serve as supervisors (Herlihy et al., 2002).

While literature includes a number of reasons why clinical supervision is an overlooked issue in school counseling, the paucity of trained site supervisors is less understood. In a qualitative study of school counseling practitioners' experiences with their own supervision, Cook et al. (2012) found that the obstacle most often cited for receiving supervision was a lack of access to trained supervisors. Nelson and Johnson (1999) described the lack of supervisory training for school counselors as occurring for several reasons. Specifically, training in supervision has traditionally been considered more appropriate at the doctoral rather than the master's level, as reflected in the CACREP (2015) standards. Although it seems ideal that school counseling site supervisors would take a course in supervision during their graduate school counseling training, there is often a lack of focus on supervision in counseling departments without doctoral programs (Nelson & Johnson, 1999). Furthermore, there are few opportunities for school counseling practitioners to receive formal training in supervision outside of academic institutions (Herlihy et al., 2002). School administrators also may not understand the value of clinical supervision for school counselors or the ethical imperative to receive training for overseeing school counseling students' field experiences (Crutchfield & Borders, 1997). Thus, school counselors are rarely trained in supervision, even though they are called upon to serve in supervisory roles with school counseling practicum and internship students.

## **Supervision Training**

### **Supervision Training Curricula**

An examination of supervision training curricula must consider relevant scholarship related to the content topics characteristically included in supervision training, accreditation

requirements around supervision training for counselor education programs, and the content areas affiliated with supervision credentialing.

### ***Content Topics***

A number of supervision scholars have offered suggestions for which content topics should be included in supervision training (e.g., Bernard & Goodyear, 2019; Borders et al., 1991; Falender et al., 2004; Inman & Soheilian, 2010; Russell & Petrie, 1994). For example, Russell and Petrie (1994) proposed three domains essential for inclusion in training: theoretical models of supervision, supervision research, and ethical and professional issues. Bernard and Goodyear (2019) suggested that Russell and Petrie's (1994) plan was incomplete and proposed a hybrid of position papers on supervision developed by experts in both counseling supervision (e.g., Borders et al., 1991) and psychology supervision (Falender et al., 2004).

Borders and colleagues (1991) offered a standardized curriculum intended for application in a variety of supervision training programs. While almost 30 years old, this curriculum is still presented in contemporary supervision textbooks (e.g., Bernard & Goodyear, 2019) as a primary source for comprehensive supervision training. The curriculum is organized into seven core content areas, each listing major topics to be covered, as well as learning objectives categorized into three themes: self-awareness, theoretical and conceptual knowledge, and skills and techniques. The core content areas include models of supervision; counselor development; supervision methods and techniques; supervisory relationship; ethical, legal, and professional regulatory issues; evaluation; and executive (or administrative) skills (Borders et al., 1991).

Falender and colleagues (2004) noted historical gaps in supervision training in clinical psychology and proposed the following recommendations as a response. First, training should include a focus on specific knowledge and skill areas, such as knowledge of supervision focus

(i.e., psychotherapy, assessment); models and theories of supervision; professional and supervisee development; ethics and legal issues in supervision; and awareness and knowledge of diversity. Additionally, Falender and colleagues (2004) proposed that attention to supervision skills in 12 categories also be included in supervision training, such as: (a) communication and teaching skills, (b) the provision of feedback, (c) setting boundaries and self-assessment, and (d) flexibility. Finally, Falender and colleagues (2004) also emphasized that training includes supervision of supervision, including observation accompanied by critical feedback.

Bernard and Goodyear (2019) proposed three dimensions of supervision as the necessary content for supervision training: parameters of supervision, supervisee developmental level, and supervisor tasks. In this training framework, parameters of supervision include topics such as evaluation, ethical and legal considerations, supervision models, supervisee individual differences, and supervisory relationship processes. The behaviors of supervisors are described as supervisor tasks in this framework and include organizing supervision, as well as facilitating individual, group, and live supervision. The third dimension included in the framework, supervisee developmental level, suggests that different supervisory environments are needed by individual supervisees and require varying interventions based on the developmental characteristics and needs of supervisees.

Inman and Soheilian (2010) proposed that supervision training include attention to the overt and covert processes inherent to supervision, as well as specific supervision skills and strategies. More specifically, overt processes included setting the environment, attending to clinical skills, and evaluation, whereas covert processes include nondisclosure, countertransference, parallel process, and corrective relational experiences. The skills and

strategies included self-reflective practices, a role shift from counselor to supervisor, appraisal of supervisee skills, and process monitoring.

There are common content areas and strategies across the literature on supervision training, suggesting the idea that supervision training should include certain core content topics. While scholars have recommended a range of content topics, most curricula or frameworks include a focus on supervision models, developmental considerations, evaluation, the supervisory relationship, and ethical and legal issues in supervision (e.g., Bernard & Goodyear, 2019; Borders et al., 1991; Falender et al., 2004; Inman & Soheilian, 2010; Russell & Petrie, 1994). There are a number of proposed strategies associated with supervision training, but many models include an emphasis on incorporating both didactic and experiential learning opportunities, self-reflective practices, and supervision of supervision (Bernard & Goodyear, 2019; Borders et al., 1991; Falender et al., 2004; Inman & Soheilian, 2010; Russell & Petrie, 1994). In other words, literature highlights the core content topics and strategies that are typically included in supervision training programs, providing an outline for the development of such training. Thus, the supervision training program adapted for the current study includes a focus on the content areas and strategies found in the literature.

### ***Accreditation***

While CACREP accreditation is not required for counselor education programs, an institution's adherence to the rigorous set of requirements signifies "a commitment to program excellence" (CACREP, 2015, p. 3) and is a common benchmark for program quality. The standards require that all clinical supervisors, including site supervisors, have been trained in supervision. As defined by CACREP (2015), relevant training in counseling supervision is "training in counseling supervision to be determined by the program (e.g., workshop offered by

the institution, graduate supervision course, possession of supervisory credential, etc.)” (p. 44).

While it seems programmatically advantageous that the standards don’t explicitly instruct how to train site supervisors or what the specific content of such training should include, it could be argued that this ambiguity and flexibility also perpetuates the inconsistency with which supervision training occurs.

CACREP started requiring instruction in supervision for doctoral students in 1988, as a recommendation of the Association for Counselor Education and Supervision (ACES) (Borders & Leddick, 1988). As such, Borders and Leddick (1988) conducted a national survey of counselor preparation programs to summarize the content of syllabi for existing supervision courses in an effort to support programs in adding such courses to their doctoral programs. They found that the subject matter topics characteristically mirrored the contents of the required texts, and most commonly included various supervision models, evaluation, ethical and legal issues in supervision, and facets of the supervisory relationship. While specific supervision techniques were also covered, they were taught with less frequency than the models themselves. With the omission of a few specific topics, the course content reported by Borders and Leddick (1988) reflects contemporary suggestions for supervision training curricula over three decades later (Bernard & Goodyear, 2019).

The 2016 CACREP Standards (2015) outline eleven standards that “represent the foundational knowledge required of doctoral graduates in counselor education” with regard to supervision (p. 35). They include:

- a. purposes of clinical supervision;
- b. theoretical frameworks and models of clinical supervision;
- c. roles and relationships related to clinical supervision;
- d. skills of clinical supervision;
- e. opportunities for developing a personal style of clinical supervision;
- f.

assessment of supervisees' developmental level and other relevant characteristics; g. modalities of clinical supervision and the use of technology; h. administrative procedures and responsibilities related to clinical supervision; i. evaluation, remediation, and gatekeeping in clinical supervision; j. legal and ethical issues and responsibilities in clinical supervision; and k. culturally relevant strategies for conducting clinical supervision (CACREP, 2015, p.35)

These standards reflect and expand upon current recommendations for supervisor training curricula (Bernard & Goodyear, 2019).

### ***Credentialing***

The Center for Credentialing and Education (CCE) offers an Approved Clinical Supervisor (ACS) credential. Eligibility for the credential includes completion of a graduate course in clinical supervision from a CACREP-accredited program or documentation of participation in supervision training that includes specific content areas. The content topics reflect common curricular recommendations for supervision training, as well as the CACREP standards for doctoral-level supervision courses. The ACS training requirements include the following content areas:

1. Roles and functions of clinical supervisors
2. Models of clinical supervision
3. Mental health-related professional development
4. Methods and techniques in clinical supervision
5. Supervisory relationship issues
6. Cultural issues in clinical supervision
7. Group supervision

8. Legal and ethical issues in clinical supervision

9. Evaluation of supervisee competence and the supervision process

(CCE, n.d., Specialized Clinical Supervision Training Requirement section)

While the ACS credential is not required, fifteen states endorse the designation (CCE, n.d.). Nate and Haddock (2014) conducted a national examination of supervisor requirements and found that training regulations varied from state to state and often did not include field experience.

### **Current Trends in Supervision Training in Counselor Education**

#### ***Doctoral-Level Supervision Training***

Most supervision training occurs at the doctoral level (Bernard & Goodyear, 2019). When counseling programs include both master's and doctoral programs, counselors-in-training are often supervised by counselor educators-in-training (Limberg et al., 2013; Thacker & Diambra, 2019). Just as receiving supervision contributes to the professional identity development of counseling students, a parallel process occurs for doctoral students who are learning to be supervisors (Thacker & Diambra, 2019). In a consensual qualitative research study investigating counselor education doctoral students' professional identity development, Limberg and colleagues (2013) found that experiential learning opportunities, such as supervising master's students, had a greater influence than did traditional didactic learning. Thacker and Diambra (2019) proposed that counselor education programs design doctoral-level supervision training to be mutually beneficial for the professional identity development of counseling students, as well as the unique shift in professional identity that occurs for counselor educators-in-training. As such, doctoral-level supervision training often requires counselor educators-in-training to integrate their shifting identities, to develop confidence in their counseling skills, and to embrace the charge to create new knowledge (Dollarhide et al., 2013).

### *Master's Level Supervision Training*

The current CACREP standards (2015) do not require master's level supervision training. However, the core areas representing the essential knowledge required for entry-level counselor education students includes the provision that graduates of accredited programs understand the role of supervision in the counseling profession (CACREP, 2015). Specifically, this standard is required as part of the counseling curriculum for master's students and is characterized as part of students' orientation to the profession and as a facet of ethical practice (CACREP, 2015). This suggests that school counselors who have graduated from CACREP accredited training programs may understand the value of supervision, yet they will not likely have been taught how to serve as supervisors.

While CACREP standards do not require master's level supervision training (CACREP, 2015), several supervision scholars have examined this topic (Bernard, 1992; Swan et al., 2016; Wartinger, 2005). Bernard (1992) provided a conceptual overview of a 15-week master's level peer supervision program that included a 12-hour weekend workshop and weekly individual peer supervision sessions. The supervision workshop components included an orientation to supervision; an overview of a specific supervision model; practice with a particular technique; practice with the process of evaluation; and consideration of ethical and legal issues in supervision. Bernard (1992) reported advantages, disadvantages, and pitfalls resulting from the program. Advantages included that intern supervisors reported increased awareness of counseling dynamics, as well as increased self-awareness. Additionally, the training and use of peer supervisors offered the practicum student supervisees with additional support in a context of reduced threat. That is, when students were receiving peer supervision, the supervisory

relationship was not characterized by hierarchy or the power differential that is typically associated with supervision that is provided by a more experienced member of the profession.

Disadvantages included situations in which the intern supervisor was clinically less advanced than their supervisee; the occurrence of dual or compromised relationships among peers; and the time-consuming nature of providing supervision training, as well as additional supervision of supervision, to master's students. Bernard (1992) also noted pitfalls to avoid if planning peer supervision in master's programs. First, peer supervisors should not be involved in summative evaluation. Second, the instructor must be more guarded when discussing supervisees with intern supervisors than they might be when working with doctoral-level supervisors. Finally, peer supervision dyads should not be placed at the same off-campus practicum or internship sites, which is sometimes difficult to avoid in counseling programs. Bernard (1992) emphasized that although not a direct disadvantage to the intern supervisors who received supervision training, the presented program was "not a solution to the pressing need to train site supervisors in clinical supervision" (p. 141).

While there is a limited amount of literature about master-level supervision training, in the following section, I highlight some topics related to this area of study. Swan et al. (2016) explored the supervision training experiences of five second-year master's students using a mixed methods research design. The training that was provided consisted of bi-weekly group supervision of supervision facilitated by one of the researchers. There were several limitations noted by the researchers, chiefly the small sample size. One of the participants did not complete the post-test measures, which limited data analysis to four cases. In spite of this constraint, the researchers reported significant changes in participants' supervision self-efficacy, but it should be noted that they did not include the effect size. Additionally, beyond noting that semi-

structured interviews were conducted with all five participants and coding was used to determine themes in their responses, there was little description of the qualitative methodology used in the research design or data analysis. In spite of the noted limitations, the researchers reported to have found that participating in the training increased the students' supervision self-efficacy.

Wartinger (2005) conducted a dissertation study regarding counselor educators' perceptions of training master's level school counseling students in the provision of supervision. More than half of the respondents reported that master's level students in their school counseling programs did not receive preparation in supervision. Nearly one-fifth of the respondents reported that their programs did not offer a course in supervision, but incorporated supervision competencies into other areas. Eleven percent of the participants indicated that their program offered either a required or elective course in supervision. Although the findings indicated that supervision training is occurring to some degree in the programs included in this study, the counselor educators surveyed perceived it as relatively unimportant when compared to other school counseling content areas. Moreover, the level of importance accorded to preparation in supervision was remarkably lower than the level of importance accorded to preparation in counseling, large group guidance, program coordination, and consultation.

### ***Supervision Training as Professional Development***

Bernard and Goodyear (2019) suggested that supervision training as professional development or continuing education is “an inadequate mechanism for developing supervisory competence” (p. 290). Nonetheless, DeKruyf and Pehrsson (2011) surveyed school counseling site supervisors in the states of Oregon and Washington and found that the most common training setting was state or national conferences (27% of participants;  $n = 40$ ), followed closely by in-services. In a study conducted with school counselor supervisors in Illinois, Walsh-Rock et

al. (2017) found that respondents received supervision training in workshops (50.9%,  $n = 90$ ), professional conferences (38.6%,  $n = 68$ ), school district in-services (29.8%,  $n = 52$ ), and university courses (28.1%,  $n = 49$ ). Additionally, the Illinois school counselor supervisors reported they relied heavily on professional membership (63%,  $n = 111$ ), professional journals (56.3%,  $n = 99$ ), and regional workshops to maintain supervision skills and knowledge.

## **Current Trends in School Counseling Site Supervision Training**

### ***Context of Site Supervision Training***

Site supervision training for school counselors is typically provided at the district, state, and university levels (DeKruyf & Pehrsson, 2011). Significantly, only 17.6% ( $n = 31$ ) of Illinois school counselor supervisors reported having received supervision training as a part of graduate-level study, while 42.9% ( $n = 76$ ) indicated that their supervision training was provided by their school districts. When asked to rank their preference for type of supervision training, Illinois school counselors had a stronger preference for regional workshops and district-level training over online or university-based training (Walsh-Rock et al., 2017). Similarly, school counseling site supervisors from the states of Oregon and Washington most frequently participated in training provided at the state or district level (DeKruyf & Pehrsson, 2011).

Given the CACREP (2015) requirement that site supervisors be trained in supervision, many universities have developed their own training models; however, studies have shown that university-sponsored site supervision training is often the least-accessed mode of training (DeKruyf & Pehrsson, 2011). Herlihy and colleagues (2002) recommended that school counselors collaborate with counselor educators at universities to provide supervision training for practitioners and potential site supervisors. The assertion continues:

Combining the perspectives of counselor educators who received rigorous preparation in supervision as part of their doctoral studies with counselors who provide supervision and who understand the practical realities of the school counselor role and functions would maximize the efficaciousness of such professional development (Herlihy et al., 2002, p. 59).

Along those lines, the literature focused on proposed models for site supervision training is largely focused on programs developed by universities to train their cooperating site supervisors.

### ***Proposed Models for Site Supervision Training***

Several counselor educators have described research focused on or offered models for site supervision training, using both in-person and web-based approaches (e.g., Bjornestad et al., 2014; DeKruyf & Pehrsson, 2011; McCoy & Neale-McFall, 2016; McMahan & Simons, 2004; Merlin-Knoblich et al., 2018; Swank & Tyson, 2012). The following section provides an overview of various site supervision training models.

**Face-to-Face Supervision Training.** Merlin-Knoblich et al. (2018) described a face-to-face university sponsored school counseling site supervision training, as well as qualitative data about the reported experiences of the participants. Hosted at William & Mary in Virginia, the School Counseling Clinical Faculty Training Program (SCCFP; Merlin & Brendel, 2017) described by Merlin-Knoblich and colleagues included three 4.5-hour training sessions based largely on the ACES (2011) guide to best practices in clinical supervision. Participants received a \$250 stipend for attending the training, as well as continuing education credit, one credit for a graduate-level course, and status as a William & Mary clinical faculty member (Merlin-Knoblich et al., 2018). Findings indicated that participants experienced expanded knowledge of

supervision models, as well as an increase in intentionality when providing supervision to school counseling students (Merlin-Knoblich et al., 2018).

McMahon and Simons (2004) described a supervision training conducted as an intensive four-day program with six hours of training each day. Integrating both didactic and experiential components, the face-to-face training included the following focus areas: “understanding the processes and possibilities of supervision, negotiating supervisory relationships and supervision contracts, roles and functions of supervisors and supervisees, case presentation, processes of group supervision, individual supervision, and counselor development” (McMahon & Simons, 2004, p. 305).

While Merlin-Knoblich and colleagues (2018) employed a qualitative design, McMahon and Simons (2004) utilized a longitudinal experimental design and reported findings that revealed a significant difference between the pre- and post-training results for the experimental group, with differences maintained over a six-month period. The results of the study indicated that the supervision training was associated with increases in participants’ scores related to their development of confidence and self-awareness, theoretical and conceptual knowledge, and supervisory skills and techniques (McMahon & Simons, 2004).

**Online Supervision Training.** While there are only a few web-based approaches to site supervision training described in the literature, the utility and convenience of these approaches stands out in contrast to the noted barriers often in place for site supervisors in accessing formalized supervision training. Bjornestad et al. (2014) noted that while a number of forms of supervision training have been proposed (i.e., face-to-face, web-based), a standard method for preparing counseling site supervisors does not exist, nor is there consensus for what actually constitutes effective supervision training (Milne et al., 2011). Bjornestad et al. (2014) suggested

that online supervision training offered an accessible solution for facilitating standardized supervision training. They pointed out that having such a method would serve a number of purposes, including providing a consistent training format that would meet CACREP (2015) requirements, raising supervisor self-efficacy, and improving outcomes in the educational process for counseling students (Bjornestad et al., 2014). They described a study in which they evaluated the effectiveness of a site supervisor preparation model designed to increase supervisor self-efficacy within various supervisor roles (e.g., teacher, counselor, and consultant) that consisted of a series of online modules, as well as networking sessions (Bjornestad et al., 2014).

McCoy and Neale-McFall (2016) proposed the use of online teaching tools and learning management systems for site supervisor training and offered a set of guidelines for counselor educators in developing web-based training modules. First, McCoy and Neale-McFall (2016) emphasized that online supervision training modules must be content driven, as opposed to a teaching design based on the lure of technological innovations. Further, they suggested that supervision training at least minimally include the following topics: “1) Setting Expectations; 2) The Supervisory Relationship; 3) Defining Supervision (Models & Formats); 4) Information Repository (Procedures/Forms); 5) Space for Discussion and Collaboration; and 6) Optional Topical/Specialty Modules for Continuing Growth and Education” (McCoy & Neale-McFall, 2016, p. 4). McCoy and Neale-McFall’s (2016) suggestions for online units or modules offered a general framework for online counseling supervision training that is potentially adaptable for school counselors.

More specific to online site supervision training for school counselors, Swank and Tyson (2012) outlined a web-based training program consisting of six modules designed to support school counseling practitioners to value supervision and to feel competent and prepared to

supervise school counseling students. To address the need for accessible training, and so as not to exclude potential site supervisors unable to access face-to-face training due to time constraints or scheduling complications, Swank and Tyson (2012) created the online modules based on areas identified from the counseling supervision literature. The modules are as follows: “(a) introduction to the counselor education program; (b) expectations and requirements; (c) supervisor and supervisee characteristics and the supervisory relationship; (d) supervision models, stages, and theories; (e) supervision methods and techniques; and (f) ethical and legal dilemmas” (Swank & Tyson, 2012, p. 43). After completing the modules, participants were required to complete and pass a quiz, after which they received proof of completion, as well as continuing education credit. Swank and Tyson’s (2012) program was designed for participants to work at their own pace, with an estimated completion time of three hours. While this design allows for trainees to adapt the program to their individual needs, it does not allow for interaction between participants, which was noted as a potential limitation related to pedagogical best practices (Swank & Tyson, 2012).

### **Theoretical Framework**

A theoretical framework consists of the theories, constructs, and definitions that are relevant to the topic of a study and that underlie the research design (Grant & Osanloo, 2016). Bandura’s (1989, 1997) social cognitive theory provides a framework for understanding the development of supervisor self-efficacy and the acquisition of supervisory knowledge. In addition, several authors (e.g., Harland & Kinder, 1997; Joyce & Showers, 1980; Kennedy, 2005) described models and associated outcomes of professional development that guided the development of the supervision training program adapted for the current study, as well as its

anticipated outcomes. Finally, an examination of online education provides the relevant terminology and practices for adapting a training program for a virtual context.

### **Social Cognitive Theory**

Bandura's (1986, 1989, 1997) social cognitive theory, which has been used largely in psychology and education, holds that knowledge acquisition and self-efficacy beliefs can be directly related to four types of experiences, including: (a) mastery; (b) modeling and observation; (c) social persuasion; and (d) physiological and affective arousal (Johnson & Stewart, 2008). Mastery experiences arise when individuals encounter and overcome obstacles. Thus, this suggests that mastery can build with increasing experience; however, mastery also develops as a result of learning the subskills associated with competency. As related specifically to supervision skills, Johnson and Stewart (2008) contend that modeling is most powerful via explicit instruction and guided demonstration. Social persuasion refers to the support and encouragement that individuals experience related to a targeted competency. Physiological arousal is often connected with efficacy beliefs related to physically challenging activities, whereas affective arousal can be related to stressful or emotionally provocative situations (Bandura, 1997). While the development of supervisor self-efficacy and the acquisition of supervisory knowledge will not likely involve physiological arousal, affective arousal could be a typical experience of school counselors, both related to day-to-day experiences and to supervision experiences. The hallmark of social cognitive theory is a process called reciprocal determinism, through which personal factors, behavior, and the social environment influence and are influenced by each other (Bandura, 1986, 1997).

### ***Self-Efficacy***

Self-efficacy develops through reciprocal determinism and is a crucial component of social cognitive theory (Bandura, 1997). Perceived self-efficacy is defined as a person's belief in his or her capability to produce various accomplishments (Bandura, as found in Pajares & Urdan, 2006). Specific to counseling, Larson and Daniels (1998) defined self-efficacy as "the degree to which individuals consider themselves capable of performing a particular activity" (p. 180). Self-efficacy has been established as an effective measure of counselor development, as well as a positive indicator of work-related performance in the counseling field (Mullen et al., 2015). Counseling self-efficacy literature has indicated that training interventions can have a positive impact on counseling self-efficacy, as well as with supervision training and supervisory self-efficacy (DeKruyf & Pehrsson, 2011).

### ***Supervisor Self-Efficacy***

While the literature is scant with regard to supervisor self-efficacy, several studies have explored its relationship with supervisory training (e.g., Barnes, 2002; Bjornestad et al., 2014; DeKruyf & Pehrsson, 2011; Johnson, 2009; Johnson & Stewart, 2008; Peed, 2017). In her study exploring the relationships between supervision training, professional experience, professional identity, and site supervisor self-efficacy, Peed (2017) found that school counselors with higher levels of supervision training (i.e., 16 or more hours) and/or more years of professional experience had higher site supervisor self-efficacy and professional identity scores than their counterparts with little (i.e., one to five hours) or no training.

Regardless of the supervision training modality, the primary objective in providing opportunities for this type of education is to promote competence in supervision (Bjornestad et al., 2014). Johnson and Stewart (2008) contended that "supervision-related self-efficacy beliefs are likely to be a critical determinant of supervisory functioning and professional competence"

(p. 229). Barnes (2002) noted that counselor and supervisor self-efficacy is regarded as a crucial determinant of supervisory motivation and action. Furthermore supervisors “with strong self-efficacy beliefs may be more likely to persist when faced with challenging supervision situations” (Barnes, 2002, p. 15). Additionally, Barnes (2002) explained that counseling supervisors’ self-efficacy beliefs related to their supervision functions (i.e., provision of modeling experiences, social influence, and provision of feedback) have the capacity to enhance counselor supervisees’ learning. In spite of an increasing interest in counseling supervision, there is an identified gap in the supervision literature exploring the connection between self-efficacy and supervisory competence (Johnson & Stewart, 2008).

### **School Counseling Supervision Knowledge**

While a standardized curriculum for training supervisors does not exist, experts agree on suggested content areas and approaches for supervision training across counseling disciplines (Merlin & Brendel, 2017). As previously noted, several supervision scholars have offered recommendations for which content topics should be included in supervision training (e.g., Bernard & Goodyear, 2019; Borders et al., 1991; Falender et al., 2004; Inman & Soheilian, 2010; Russell & Petrie, 1994). Similarly, several authors have offered suggestions regarding the content for inclusion in supervision training for school counselors (Merlin & Brendel, 2017; Merlin-Knoblich et al., 2018; Swank & Tyson, 2012). For example, Swank and Tyson’s (2012) online modules for training school counselors to be supervisors were developed based on areas identified from the counseling supervision literature. In addition to information specific to their own school counseling program, Swank and Tyson (2012) identified the following content topics as most relevant for school counseling supervision knowledge: supervisor and supervisee

characteristics and the supervisory relationship; supervision models, stages, and theories; supervision methods and techniques; and ethical and legal dilemmas.

Merlin and Brendel (2017) asserted that supervision training content for school counselors “should include supervision models, counselor development, techniques of supervision, the supervisory relationship, legal and ethical issues in supervision, evaluation, supervision formats, multicultural considerations, and administrative skills needed in supervision” (p. 306-307). Moreover, several studies have examined school counselors’ supervision knowledge and reflect the need for training specific to the content areas previously described (Cigrand et al., 2014; DeKruyf & Pehrsson, 2011; Merlin-Knoblich et al., 2018; Roberts & Morotti, 2001; Smith & Koltz, 2015). For example, studies have indicated that school counseling site supervisors are typically unaware of formal supervision models unless they are included in supervision training (Merlin-Knoblich et al., 2018; Roberts & Morotti, 2001; Smith & Koltz, 2015). Furthermore, school counseling site supervisors are hesitant to conduct adequate evaluation with interns without formal training to do so (Cigrand et al., 2014). DeKruyf and Pehrsson (2011) identified developmental considerations and the supervisory relationship as additional areas of school counseling supervision knowledge that rise as important yet evoke reluctance from school counselors without supervision training.

### **Professional Development**

The need for ongoing off-the-job learning (i.e., undertaken outside of the typical day-to-day working environment) has been recognized within most professions since the 1970s (Eraut, 1994). Moreover, most professional codes of conduct or ethics refer to an obligation to engage in continuing professional development, and some professions, including teaching and school

counseling, require such engagement for continuing certification. As such, participation in professional development is a common practice in educational work contexts.

***Professional Development in Education***

There is a growing body of literature related to continuing professional development (CPD) or in-service education and training (INSET) in education, with a primary focus on the various models and potential outcomes of such for teachers (Harland & Kinder, 1997; Kennedy, 2005). Kennedy (2005) describes nine models of CPD, the typical context of each, and the forms of knowledge that can be developed via each model (also further described in Table 1).

Specifically, Kennedy (2005) contends that depending on the model, CPD supports knowledge acquisition in either transmission, transitional, or transformative forms. A *transmission* view of CPD focuses on preparing educators to perform their professional roles and implement specific strategies and practices, whereas a *transformative* view focuses on supporting educators in promoting policy change and advocating for improved practices. Models of CPD that are *transitional* have the capacity to support either view, depending on their underlying philosophy or framework. Kennedy (2005) argues that educators’ capacity for professional autonomy increases as one acquires knowledge first through transmission and eventually through transformative CPD opportunities.

**Table 1**

*Models of Continuing Professional Development (CPD) (Kennedy, 2005)*

<b>CPD Model</b>	<b>Contexts</b>	<b>Forms of Knowledge</b>
1. Training	Sometimes offered by participants’ institution; often delivered off-site.	Transmission. Skill and competence development; often standards based.
2. Award-bearing	Often delivered and validated by universities.	Transmission. Academic or practical; emphasizes completion of award-bearing academic programs.

3. Deficit	Often regulated by governmental agencies; form of performance management.	Transmission. Addresses perceived deficits; emphasizes individual versus systemic competence.
4. Cascade	Individuals attend training events and disseminate information to colleagues; often used when resources are limited.	Transmission. Skills and knowledge are prioritized over attitudes and values.
5. Standards-bearing	Often regulated by governmental agencies; form of performance management.	Transitional. Emphasizes uniformity, consistency, and common language.
6. Coaching/mentoring	Defined by a one-to-one relationship designed to support CPD; can be hierarchical or collegiate. Emphasizes confidentiality.	Transitional. Coaching is generally skills-based; mentoring is often characterized by one partner having more experience in a field and the other being novice.
7. Community of practice	Similar to coaching/mentoring model but involves more than two people and doesn't emphasize confidentiality. Intentionally not a form of performance management.	Transitional. Based on social learning theory; emphasizes combining individuals' knowledge through practice with the aim of generating new knowledge.
8. Action research	Participants are researchers studying a social situation with the aim of improving practices.	Transformative. Active, process-oriented learning; promotes critical thinking and questioning.
9. Transformative	Combination of practices and conditions to promote a transformative agenda.	Transformative. Emphasizes a balance between new forms of formal knowledge, context-specific advocacy for change, and awareness of influencing power structures.

Joyce and Showers (1980) offered a framework of CPD outcomes comprised of four categories, including (a) general awareness of new skills, (b) organized knowledge of underlying concepts and theory, (c) learning of new skills, and (d) application on-the-job. Based on a longitudinal study conducted with science teachers in the United Kingdom, Harland and Kinder

(1997) offered an extension to the model proposed by Joyce and Showers that described nine potential outcomes of CPD, as well as an outcome hierarchy (also further described in Table 2).

The hierarchy proposed a range of impact on actual on-the-job application, with first order outcomes having a more significant impact on practice and third order outcomes having less influence on practice.

**Table 2**

*Outcomes of Continuing Professional Development (CPD) (Harland & Kinder, 1997)*

<b>CPD Outcome</b>	<b>Description</b>	<b>Outcome Type</b>
Material and provisionary outcomes	Physical resources gained.	3 <sup>rd</sup> order
Informational outcomes	Awareness of contextual or background information, including implications for practice.	3 <sup>rd</sup> order
New awareness	Perceptual or conceptual shift from prior assumptions.	3 <sup>rd</sup> order
Value congruence outcomes	Extent to which personalized conceptions of best practices overlap with CPD providers' messages about best practices.	1 <sup>st</sup> order
Affective outcomes	Emotional experiences inherent to the learning context.	2 <sup>nd</sup> order
Motivational and attitudinal outcomes	Enhanced excitement or motivation to implement the concepts received.	2 <sup>nd</sup> order
Knowledge and skills	Development of deep levels of understanding and reflexivity regarding both content and instruction.	1 <sup>st</sup> order
Institutional outcomes	Collective impact on groups of people and their practice.	2 <sup>nd</sup> order
Impact on practice	Fundamental intention to bring about change in practice.	Intended goal of CPD

Harland and Kinder (1997) highlighted an important finding related to the interrelatedness of the outcomes:

It was found that initial positive affective outcomes (e.g. feeling excited and elated by the new approaches) could sometimes be short-lived without a sense of accompanying enhanced expertise associated with, for example, new *knowledge and skills*. Nevertheless, such outcomes may be a useful, and even necessary, precursor for changing practice: increases in self-confidence as an *affective outcome* may need to go hand-in-hand with increases in a sense of competence in new *knowledge and skills*. (Harland & Kinder, 1997, pp. 74-75).

These findings demonstrate a relationship between self-confidence and a sense of competence. Thus, trainings should be designed to achieve positive affective outcomes in tandem with outcomes related to attaining new knowledge and skills.

### ***Professional Development in School Counseling***

In spite of the assertion that supervision training as professional development or continuing education is insufficient for developing competence in the provision of supervision (Bernard & Goodyear, 2019), the fact remains that school counselors' primary means of accessing new knowledge and skills is via post-graduate professional development opportunities (Howell et al., 2007). Moreover, the scope of tasks and roles assigned to school counselors underscores the need for practitioners to access ongoing professional development in order to stay apprised of current standards and best practices.

**Training Model.** The training model of professional development is universally familiar and is the most common form of CPD for teachers, as well as for school counselors (Kennedy, 2005; Howell et al., 2007). Training models support skill development in order that trainees are

able to demonstrate competence in particular areas. This form of professional development is commonly delivered to a trainee via an expert who has determined the agenda and goals of the training and with the participant taking a primarily passive role. A criticism of training models is often their lack of connection to the contexts in which participants work (Eraut, 1994; Kennedy, 2005). However, in spite of these drawbacks, training models are acknowledged as an effective way of introducing new knowledge, even if decontextualized (Hoban, 2002).

**Coaching/Mentoring Model.** The coaching/mentoring model of professional development has been described by a range of practices based on varying philosophical tenets. Mentoring has often been described as characterized by a relationship in which one participant is more experienced and the other is novice (Kennedy, 2005). In the context of counseling supervision, the novice/experienced practitioner dynamic can be compared in some ways to the supervisory relationship between clinical supervisors and their supervisees (Bernard & Goodyear, 2019; Borders & Brown, 2005). By contrast, the coaching/mentoring relationship has also been compared to clinical supervision and specifically, to models of peer supervision that emphasize a one-to-one relationship (Smyth, 1991). While comparisons have been made between the coaching/mentoring model of professional development for teachers and the supervision relationships inherent to counseling, there is not literature supporting the coaching/mentoring model as a vehicle for training counselors to be supervisors.

**Barriers for School Counselors in Accessing Professional Development.** While there is limited research related directly to professional development in school counseling, a study conducted with Utah school counselors found that the barriers in accessing professional development in general echoed some of those found by researchers examining school counselors' experiences in accessing supervision training (Sutton & Page, 1994). Howell and

colleagues (2007) described participants' three most significant challenges in completing professional development requirements as related to balancing CPD with personal responsibilities, financing CPD experiences, and arranging for leave time to access CPD. Participants also cited finding available trainings and the availability of online programs as barriers to accessing professional development.

### Online Learning

Online learning is a rapidly growing trend across educational contexts, from P-12 education through post-graduate continuing professional development. While quality of instruction and learning outcomes may vary contextually, online learning as an educational platform has been substantiated as equitable, and sometimes even more effective, as face-to-face learning (Means et al., 2009).

**Table 3**

*Online Learning Terminology and Descriptions (ACES, 2017; Means et al., 2009)*

<b>Online Learning Terminology</b>	<b>Description</b>
(a) Asynchronous	Communication occurring over a period of time, not all in the same time or place.
(b) Asynchronous distributed course	Web-based technology used for non-synchronous learning with participants in different locations; completely online and without synchronous meetings.
(c) Blended learning	Face-to-face learning used concurrently with online learning; also described as hybrid learning.
(d) Online course	Majority or all of content delivered online; typically does not include face-to-face meetings.
(e) Online environment	Courses and discussions occurring in an online format via the internet; the technology platform in which instruction occurs.
(f) Online instruction	Teaching in a virtual environment, including strategies specific to the online context; asynchronous or synchronous.

(g) Online learning	Instruction delivered through web-based technology.
(h) Synchronous	Communication occurring at the same time and characterized by real-time interaction.
(i) Synchronous distributed course	Web-based technology used for a simultaneous learning experience with participants in different locations; can include a combination of face-to-face participants, online participants, or both.
(j) Traditional course	Web-based technology is not used, and none of the content is delivered online.
(k) Web facilitated course	Web-based technology is used to facilitate a face-to-face course (i.e., instructional or communication tools include a learning management system (LMS) or web pages to post course information).

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### ***Online Learning in Education***

In a meta-analysis of online learning studies funded by the United States Department of Education, Means and colleagues (2009) found that students in online learning contexts performed better than those who received face-to-face instruction. While the difference in learning outcomes was greater in studies that contrasted blended learning and face-to-face instruction, studies comparing blended and purely online learning resulted in similar student learning outcomes. Another key finding indicated that students' interactions in online environments that prompted learner activity, reflection, or self-monitoring of understanding were effective in enhancing learning outcomes for individuals.

### ***Online Learning in Counselor Education***

As the number of online counseling programs with CACREP accreditation continues to grow, an increasing body of research substantiates that online or remote instruction is at least as effective as traditional instruction (Hartwig Moorhead et al., 2013; Snow et al., 2018). As noted by Snow et al. (2018) in an examination of current practices in online counselor education,

“technology is critical to the advances in remote counselor education” (p. 143). Additionally, the shift to online contexts benefits students by promoting accessibility to learning materials and opportunities (Hartwig Moorhead et al., 2013).

### **Gaps in the Literature**

While the literature points to varying explanations for the lack of significance placed on clinical supervision in school counseling (Dollarhide & Miller, 2006; Herlihy et al. 2002), there is a paucity of literature regarding training school counselors in the provision of supervision services (Wartinger, 2005). Counselor educators have been advocating since the 1970s that school counselors should be trained in supervision if they are to oversee the practicum and internship experiences of students:

Elementary school and secondary school counselors are likely to have scant training in how to be supervisors because counselor education programs have, by and large, omitted such preparation. There may be no available program for the counselor to use. Thus, the do-it-yourself syndrome comes in (Fullmer, 1979, p. 53).

In spite of this nearly 40-year-old call to the field, studies from within the past decade have indicated that the majority of school counseling site supervisors have had little or no training in supervision (DeKruyf & Pehrsson, 2011). Most recently, a content analysis (Bledsoe et al., 2019) concluded that “supervision in school counseling seems to be in its infancy” (p. 6).

Current approaches to school counseling supervision training fail to promote the accessibility of such training and often stop short of investigating the efficacy of the training. In response to the CACREP (2015) requirement that site supervisors be trained in supervision, most universities provide program overviews but fall short of delivering adequate or comprehensive training programs. Moreover, school counselors who work in rural settings or are isolated lack

access to such training and may have limited time release or inconsistent financing to participate in training if it was available (Sutton & Page, 1994).

A recent content analysis of school counseling intervention research focused on articles published in ASCA- and ACA-affiliated journals that reported findings from intervention studies and included implications for school counseling (Griffith et al., 2020). Findings from this study revealed that only two articles reported intervention studies conducted with current school counselors, indicating a gap in examining and reporting the outcomes of interventions designed for practitioners. Moreover, findings suggested that in addition to there being a limited number of published intervention research studies, those that were published lacked a commitment to rigorous methodology. This gap in research underscores the need for studies focused on the efficacy of supervision training interventions for school counseling practitioners.

## **CHAPTER THREE: RESEARCH METHODOLOGY**

The purpose of this study was to examine the outcomes associated with participation in an online site supervision training intervention for school counselors. Specifically, this study investigated the effect of supervision training on participating school counselors' supervision knowledge and supervisor self-efficacy. In this study, I examined the *Site Supervision Training for School Counselors (SST-SC)* program, which was adapted from a previously established university-based supervision training program delivered in a face-to-face context (Merlin & Brendel, 2017).

Chapter Three outlines the methodology for the study. The chapter includes a description of the intervention, defines the research questions and hypotheses, describes the research design and procedures, and provides an overview of the instrumentation and data analyses. The chapter concludes with a discussion of ethical considerations and potential limitations.

### **School Counseling Site Supervision Training Intervention**

Based on the need for accessible and comprehensive site supervision training for school counselors, I adapted an existing university-based program for an asynchronous online context. I developed the *Site Supervision Training for School Counselors (SST-SC)* program to provide a comprehensive and accessible site supervision training program for school counselors. The content and curriculum map employed in the SST-SC is based on the School Counseling Clinical Faculty Program (Merlin & Brendel, 2017) provided to current and future site supervisors for William & Mary school counseling students. The Clinical Faculty Program is a 12-hour, face-to-

face course at William & Mary that spans three days within a semester (Merlin & Brendel, 2017; Merlin-Knoblich et al., 2018). It is often facilitated by counselor education and supervision doctoral students who have also served as school counselors. I have modified the SST-SC (Appendix A) for delivery as an instructor-led asynchronous online training comprised of eight modules that take seven weeks to complete.

The purpose of the SST-SC program is to develop in participants the foundational knowledge, essential skills, and professional dispositions necessary for experienced school counseling practitioners to facilitate supervision for preservice and novice school counselors. The SST-SC program addresses a range of topics that broadly include: (a) the fundamentals of supervision, (b) a developmental framework for supervision, (c) the supervisory relationship, (d) supervision models, (e) supervision interventions, (f) evaluation in supervision, (g) ethical/legal issues in supervision, and (h) personalizing a model for school counseling supervision. The SST-SC program is an asynchronous online training comprised of eight modules completed in a seven-week timespan.

I proposed that a seven-week training course in supervision would increase school counselor participants' supervisory knowledge and supervisor self-efficacy. As described, the face-to-face training on which the SST-SC program was based is delivered as a 12-hour training across three days (Merlin & Brendel, 2017; Merlin-Knoblich et al., 2018). While not specific to school counseling supervision training, McMahon and Simons (2004) described another face-to-face supervision training that was delivered as a 24-hour training over four days. By contrast, Swank and Tyson (2012) delivered a web-based school counseling site supervision training that was comprised of six modules designed to be completed in six hours.

While researchers have not identified a precise threshold for the length of effective professional development models, studies have indicated that impactful professional learning that results in changes in practice does not occur via short, one-time workshops (Darling-Hammond et al., 2017). Professional development programs that have been found to be the most effective typically span weeks, months, and sometimes years, suggesting that sustained duration of professional development yields the most impactful outcomes (Darling-Hammond et al., 2017). Thus, despite the inconsistency in the duration of existing supervision training programs, as well as the limited number of such programs delivered through an online platform, I proposed that a seven-week duration of treatment would yield significant increases in supervisory knowledge and supervisor self-efficacy. Ultimately, these changes will have an impact on school counselor participants' effectiveness as site supervisors for school counseling students.

### **Content Validity**

Content validity refers to the extent to which elements of a program correspond to the construct they are proposed to address (Haynes et al., 1995). Evidence of content validity is often based on the judgment of individuals who represent expertise in the field of study in which the content is situated (Dinnesen et al., 2020). While establishing content validity is most often associated with scale development, it can also be applied to assess educational interventions before their implementation (Dinnesen et al., 2020). Thus, I established content validity for the SST-SC by requesting feedback from an expert review panel comprised of school counselor educators and a school counseling practitioner who has received post-graduate training in supervision.

In establishing the content validity for an educational intervention with preschool children, Dinnesen et al. (2020) utilized an expert review panel comprised of three members

representing educational researchers and practitioners. Kassam-Adams et al. (2015) used an expert review panel with 15 members from five countries to substantiate content validity for an eHealth intervention designed to mitigate the impacts of posttraumatic stress on adolescents who have experienced traumatic events. While the target population nor the content of these interventions is similar to that of the SST-SC, both are examples of using an expert review process for establishing content validity in educational contexts. As such, the expert review panel utilized in the current study was comprised of five school counselor educators and one school counselor. Two of the counselor educators have previously facilitated the William & Mary School Counseling Clinical Faculty Program; one of the counselor educators designed the original program and continues to oversee its facilitation; and two of the counselor educators have expertise in school counseling, with one having implemented a school counseling site supervision training program as a collaboration between two North Atlantic universities. The school counselor who was included in the panel has received post-graduate training in supervision and has subsequently served as a site supervisor for school counseling interns.

### **Treatment Fidelity**

In intervention research, treatment fidelity refers to the considerations made to oversee and support the accuracy of the intervention implementation as it was planned, as well as to ensure that all participants receive the intervention in the way that it was intended and with consistency across participants (Smith et al., 2007). In order to attend to treatment fidelity, I incorporated design features to both monitor and control participants' experience of the intervention. For example, I selected a learning management system (LMS) to deliver the training that allowed for tracking performance and activity within the intervention via course analytics. Monitoring via discussion boards and reflective activities within each module

facilitated additional course interaction for participants, as well as an added layer of oversight for the researcher. In order to maintain consistent pacing and content delivery for all participants, a course schedule was implemented whereby one module was published per week at a pre-determined day and time, with the exception of the first two modules, which were both released at the start of the intervention.

In the current study, the investigator and the experimenter were the same person, which served as an added measure of treatment fidelity (Gall et al., 2007). Gall et al. (2007) described the *investigator* as the person who has designed the experiment and who will interpret the data, whereas the *experimenter* will administer the experimental treatment or intervention and will collect the data. When two different people fulfill these roles, a type of bias can occur whereby the experimenter fails to administer the intervention in the way that was specified by the investigator, which is “experimenter failure to follow the protocol effect” (Gall et al., 2007, p. 395). In the current study, the researcher was both the investigator and the experimenter, which maximized treatment fidelity (Gall et al., 2007).

### **Research Questions**

In spite of the empirical support for the efficacy of online learning and, more specifically, the positive outcomes associated with participants’ satisfaction and perceived learning via asynchronous online courses (Means et al., 2009; Swan, 2001), no studies exist examining the efficacy or potential outcomes of supervision training delivered in this manner. Thus, the following research questions guided this study:

1. Is there a statistically significant difference in supervision knowledge (as measured by the Site Supervision Training for School Counselors Knowledge Assessment [SST-SCKA; Backer, 2021]) among school counselors who participate in the

seven-week Site Supervision Training for School Counselors (SST-SC) program when compared to a waitlist control group?

2. Is there a statistically significant difference in supervisor self-efficacy (as measured by the Counselor Supervisor Self-Efficacy Scale [CSSES; Barnes, 2002]) among school counselors who participate in the seven-week SST-SC program when compared to a waitlist control group?

### **Research Hypothesis One**

There will be a statistically significant difference in supervision knowledge (as measured by the SST-SCKA [Backer, 2021]) among school counselors who participate in the seven-week SST-SC program when compared to a waitlist control group.

### ***Null Hypothesis for Research Question One***

There will not be a statistically significant difference in supervision knowledge (as measured by the SST-SCKA [Backer, 2021]) among school counselors who participate in the seven-week SST-SC program when compared to a waitlist control group.

### **Research Hypothesis Two**

There will be a statistically significant difference in supervisor self-efficacy (as measured by the Counselor Supervisor Self-Efficacy Scale [CSSES; Barnes, 2002]) among school counselors who participate in the seven-week SST-SC program when compared to a waitlist control group.

### ***Null Hypothesis for Research Question Two***

There will not be a statistically significant difference in supervisor self-efficacy (as measured by the CSSE [Barnes, 2002]) among school counselors who participate in the seven-week SST-SC program when compared to a waitlist control group.

## **Research Design**

The researcher utilized a randomized experimental research design (Campbell & Stanley, 1963). More specifically, a pretest-posttest control group design was used whereby participants were randomly assigned to two groups, with one group receiving the intervention and the other group not initially receiving the intervention, thus serving as a waitlist control group (Campbell & Stanley, 1963; Heppner et al., 1992). Randomization serves three primary purposes: (a) it helps to mitigate selection bias by ensuring that the unique characteristics of the participants are spread across the treatment and control groups (b) it helps to balance the groups with respect to confounding variables; and (c) it provides a basis for statistical analysis whereby the estimation of error effects is unbiased, and the likelihood that error effects and observations are independent is increased (Bhide et al., 2018; Kirk, 1995; Suresh, 2011). Thus, randomization ensures high-quality evidence because any differences in observed outcomes between the intervention group and the control group are likely due to the intervention rather than any other factors (Bhide et al., 2018). The randomized controlled trial (RCT) represents the most rigorous and powerful quantitative research method for determining if there is a cause-effect relationship between an intervention and an outcome (Bhide et al., 2018; Gall et al., 2007). While the RCT may be the most robust method to determine the effectiveness of an intervention, there are several factors, including validity criteria, which must be considered in order to yield valid findings (Bhide et al., 2018; Gall et al., 2007).

## **Threats to Validity**

Campbell and Stanley (1963) described two types of validity that must be considered in experimental design. Threats to *internal validity* are factors that inadvertently influence the outcome of an intervention and confound the conclusion that the experimental treatment was

responsible for the outcomes. Threats to *external validity* affect the generalizability of the study's findings to the population being studied. Researchers can mitigate threats to validity by incorporating specific strategies and controls as a part of the experimental design.

### **Internal Validity**

The randomized pretest-posttest control group design controlled for many of the threats to internal validity described by Campbell and Stanley (1963). For example, *history* (i.e. events occurring between measurement periods in addition to the intervention) was broadly controlled for in that events that may have affected the intervention group would have also affected the control group. Further, Campbell and Stanley (1963) noted that participants who experience the intervention individually, as in this asynchronous training, are not subject to the unique issues of *intrasession history* (i.e., events occurring during an intervention session for all participants in the experiment group, such as a fire in the building or an experimenter's deviation from a facilitation guide), thereby decreasing a threat to internal validity.

Additional threats to internal validity include *maturation* (i.e., processes that occur within participants due to the passage of time, such as growing older) and *testing* (i.e., the effects of taking measures as part of the study), which were both controlled for in the research design because they should be manifested equally in the intervention and control groups (Campbell & Stanley, 1963). The effect of *instrumentation* (i.e., the administration and calibration of measures) was mitigated by the careful selection of testing instruments, the delivery of measures at fixed and consistent points in time for both intervention and control groups, and the consistency of instrument administration for both groups (e.g., via Qualtrics survey software [Qualtrics, 2021]). While randomization controlled for *selection* as a threat to internal validity, *experimental mortality* (i.e. loss of participants from either group) can be more difficult to

mitigate as a threat to validity (Campbell & Stanley, 1963). The suggested approach for managing this issue is to collect outcome information for all randomized participants, even if they did not receive the full intervention (Bhide et al., 2018; Campbell & Stanley, 1963).

### **External Validity**

Heppner et al. (1992) describe the unique strength of the pretest-posttest control group design (i.e., the pretest) also as its ironic weakness. While the effect of repeated testing is not a threat to internal validity, the pretest may cause a sensitizing effect that poses a threat to external validity (Campbell & Stanley, 1963; Heppner et al., 1992). In addition, Campbell and Stanley (1963) noted that interaction effects of selection biases and the intervention could jeopardize external validity, particularly in situations where sampling is difficult. In other words, the school counseling practitioners who volunteer to participate in the SST-SC program may have been nonrepresentative of the entire population of school counselors based on the characteristics that compelled them to seek supervision training. Finally, Campbell and Stanley (1963) suggested that the *reactive effect of experimental arrangements* (i.e., the experimental setting and the participant's awareness that they are part of a study) poses the "most prominent source of unrepresentativeness" (p.20).

Campbell and Stanley (1963) noted that while threats to internal validity "are solvable within the limits of the logic of probability statistics, the problems of external validity are not logically solvable in any neat, conclusive way" (p. 17). Logically, it is impossible to generalize the results of an experiment beyond the limits of the intervention study itself (Gall et al., 2007). However, Campbell (1986) went on to suggest that rather than seeking a nationally representative sample, researchers could attend to external validity by selecting a sample theoretically similar to the population. Therefore, I mitigated issues of external validity by

seeking a sample of participants whose demographic characteristics were representative of school counselors in the United States.

### **Participant Demand Considerations**

Participant demand characteristics represent a unique source of bias in an experiment. Demand characteristics refer to aspects of the experimental environment or process that compel participants to respond to the intervention in positive or negative ways based on the inferences they make about the purpose of the study (Kirk, 1995). Kirk (1995) describes several types of subject-predisposition effects that cause participants to respond to the experiment in various ways. For example, the *cooperative-subject effect* refers to participants who, either intentionally or not, respond to measures in a way that supports what they believe the researcher's hypothesis to be. By contrast, the *screw you effect* refers to participants who are predisposed to respond uncooperatively or who may intentionally sabotage an experiment. Participants who are worried or nervous about being evaluated may display *evaluation apprehension* and primarily seek a positive reaction from the researcher. Finally, participants who intentionally attempt to set aside their own aims or inferences about the purpose of the experiment and follow the researcher's instructions have been labeled as *faithful subjects*. In contrast to the other types of subject-predisposition effects, faithful subjects provide data that is unbiased.

In an attempt to decrease the impact of participant demand characteristics on the inferences drawn from the study, I utilized a single-blind procedure. A single-blind procedure limits the information shared with participants about the purpose of the study (Kirk, 1995). By concealing the constructs being measured (i.e., supervision knowledge and supervisor self-efficacy) and withholding the details of the experiment, I aimed to prevent influence as a source of bias in the current study.

## Procedure

### Sampling Procedures

In order to determine the appropriate sample size for the proposed analyses, I conducted an a priori power analysis using the G\*Power program (Version 3.1.9.4) (Balkin & Sheperis, 2011; Faul et al., 2007). Based on an 80% power, an  $\alpha$  of .05, two timepoints, and an anticipated medium effect size, it was determined that a sample size of 24 would be needed in order to perform a repeated measures analysis of variance (RM-ANOVA) examining supervision knowledge. Similarly, based on a 80% power, an  $\alpha$  of .05, three timepoints, and an anticipated medium effect size, it was determined that a sample size of 20 would be needed in order to perform a RM-ANOVA examining supervisor self-efficacy. Prior to recruiting participants, the study was approved by the William & Mary Institutional Review Board. Upon approval, I recruited participants via convenience sampling by contacting clinical coordinators in a selection of CACREP accredited counselor education programs at universities in various regions in the United States. I requested that clinical coordinators share a recruitment letter (Appendix B) with their school counseling site supervisors. The recruitment letter contained a link to a Google Form which served as an initial screening mechanism for school counselors who were interested in participating in the study. To be eligible to participate in the study, participants had to be at least 18 years of age and be employed as a professional school counselor in a U. S. public school. After an initial screening for study eligibility, potential participants were invited to complete the informed consent and a demographics survey. After screening the sample, eligible participants were randomly assigned to the intervention group or a waitlist control group.

Gall et al. (2007) define convenience sampling as the process by which a researcher selects a sample that suits the purpose of the current study and that is convenient (i.e., accessible

to the researcher). Also called an *accidental sample*, a convenience sample includes easily available cases, as opposed to cases which have been randomly selected from a specific population (Warner, 2013). When drawing on a convenience sample, researchers must provide a thorough description of the sample in order to infer a population to which results may generalize; however, it should be noted that the use of a convenience sample may mean that the sample does not actually represent any real-world population (Gall et al., 2007; Warner, 2013). While this is an important consideration that should be clearly communicated to readers of the current study, it is also important to acknowledge that careful sample selection may help to mitigate this issue (Campbell, 1986).

### **Random Assignment**

Random assignment, or random allocation, indicates that each participant has an equal chance of being in either the intervention group or the waitlist control group and is the optimal strategy for ensuring that there is an initial equivalence between groups (Bhide et al., 2018; Gall et al., 2007). Utilizing simple randomization procedures (Suresh, 2011), participants were randomly assigned a participant number using randomizer.org (Urbaniak & Plous, 2020). Using the same randomization tool, each participant number was randomly assigned to either the intervention group or the waitlist control group.

### ***Allocation Concealment***

Allocation concealment is an important feature of an RCT, in that it ensures that participants nor experimenters are aware of which eligible participants will be receiving the intervention and which will be assigned to the waitlist control group until just before the start of the intervention (Bhide et al., 2018). Allocation concealment is particularly important such that biased adjustments to the assignments can be avoided. As part of the initial informed consent, I

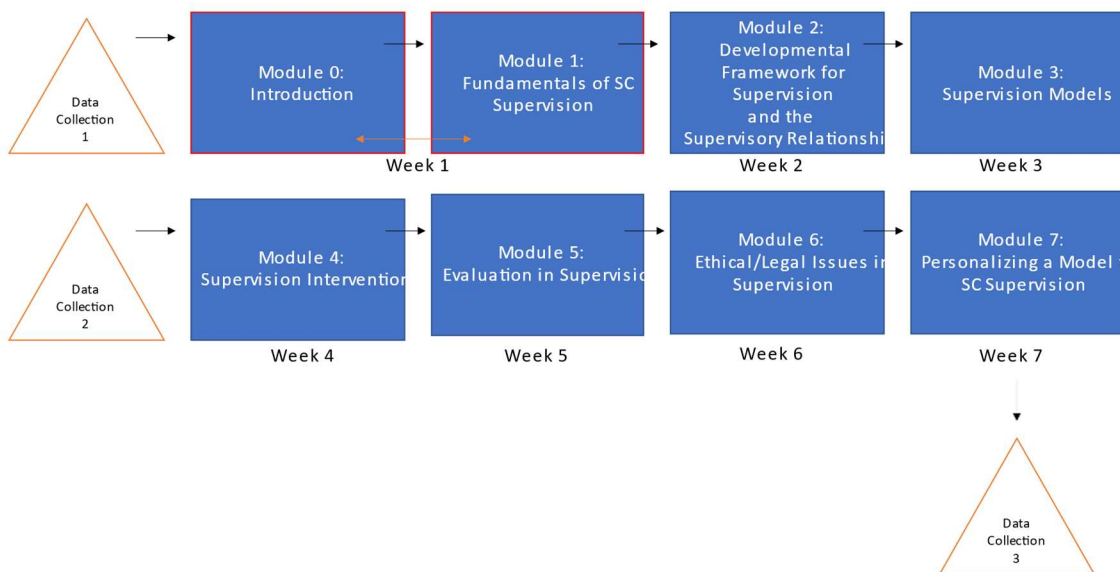
explained the allocation procedures, as well as the intervention timeline for both the treatment group and the waitlist control group.

### Data Collection Procedures

Prior to the start of the SST-SC program for the intervention group, all participants were prompted to complete the SST-SC Knowledge Assessment (SST-SCKA; Backer, 2021), the Counselor Supervisor Self-Efficacy Scale (CSSES; Barnes, 2002), and the Perceived Stress Scale (PSS; Cohen et al., 1983) via Qualtrics survey software (Qualtrics, 2021). The CSSES (Barnes, 2002) and the PSS (Cohen et al., 1983) will be re-administered midway through the study. All of the assessments were then re-administered after the seventh and final week of the study (see Figure 1).

**Figure 1**

*SST-SC Timeline*



## Effects from Current Pandemic

Beginning in March of 2020, the novel *coronavirus* (COVID-19) was declared a worldwide pandemic, and studies have already begun documenting its effects on mental health and stress in the general population (Cooke et al., 2020; Salari et al., 2020). For example, Salari et al. (2020) conducted a systematic review and meta-analysis of research focused on the prevalence of stress and anxiety among the general population during the COVID-19 pandemic, and their findings indicated significant impacts on the mental health of people across various communities. Salari et al. (2020) found that in a total sample size of 9,074 participants, the prevalence of stress was 29.6% ( $n = 2,686$ ), the prevalence of anxiety in a total sample size of 63,439 was 31.9% ( $n = 20,237$ ), and the prevalence of depression in a total sample size of 44,531 was 33.7% ( $n = 15,007$ ). Similarly, in a rapid review and meta-analysis of posttraumatic stress and general stress symptoms during the COVID-19 pandemic, Cooke et al. (2020) found that nearly one out of four adults experienced some form of significant stress due to the circumstances of the pandemic.

There are several major stressors that are likely to contribute to increased levels of stress associated with the COVID-19 pandemic, including uncertain prognoses, limited resources and supplies, unfamiliar public health precautions that may infringe on personal freedoms, extensive financial challenges, and conflicting messages from authorities (Pfefferbaum & North, 2020). In addition, school systems are working to respond to the circumstances in safe ways while also appropriately meeting the needs of both educators and learners. It is likely that school counselors may be experiencing increased levels of stress as they mitigate the challenges associated with the COVID-19 pandemic in both their personal and professional roles. Thus, due to the possibility that stress may have had a confounding effect on the outcomes of participation in the SST-SC

program, a measure of perceived stress was examined as a potential covariate in the data analysis procedures.

### **Instrumentation**

Participants completed several measures at three different points during the intervention (i.e., two of the measures were re-administered midway through the study, adding a third data collection point) and a demographics questionnaire at the start of the study via Qualtrics survey software (Qualtrics, 2021). The measures that were used are the SST-SC Knowledge Assessment (SST-SCKA; Backer, 2021), the Counselor Supervisor Self-Efficacy Scale (CSSES; Barnes, 2002), and the Perceived Stress Scale (PSS; Cohen et al., 1983). The demographics questionnaire and the SST-SCKA were both developed by the researcher.

#### **SST-SC Knowledge Assessment**

The SST-SCKA is a 50-item instrument comprised of two forms with 25 items per form that was developed by the researcher for the current study with responses made via a multiple-choice format. The researcher followed DeVellis's (2017) eight steps for scale development, which include: (a) determining what to measure, (b) generating a pool of items, (c) establishing the measurement format (i.e., multiple-choice), (d) utilizing an expert panel to review the items, (e) deciding upon the inclusion of validation items, (f) administering the items to a preliminary sample, (g) evaluating the items, and (h) optimizing the length of the scale. The items were developed in alignment with Kline's (2005) rules for the development of sound scale items (e.g., one concept per item, brevity and precision of items, positive language).

The items were based on the content and learning objectives for each module of the SST-SC training and informed by the work of Lambie et al. (2010). Specifically, the items were developed for each learning objective related to supervision knowledge, skills, or attitudes. Items

were not developed in association with learning objectives that focused on participant self-reflection or the identification of goals related to personal or professional growth. The distribution of items per module is provided in Table 4.

**Table 4**

*SST-SCKA Distribution of Items*

Module	Number of Items
M0: Introduction	0
M1: Fundamentals of School Counseling Supervision	4
M2: Developmental Framework for Supervision and the Supervisory Relationship	5
M3: Supervision Models	3
M4: Supervision Interventions	5
M5: Evaluation in Supervision	4
M6: Ethical/Legal Issues in Supervision	3
M7: Personalizing a Model for School Counseling Supervision	0
Validation Items:	1
Total Number of Items:	25

Data analysis for the current study included an investigation of the instrument’s internal consistency reliability.

**Counselor Supervisor Self-Efficacy Scale**

The Counselor Supervisor Self-Efficacy Scale (CSSES; Barnes, 2002) is a 39-question instrument that assesses the extent to which counselor supervisors perceive themselves as competent in the various domains of delivering clinical supervision, with responses made on a 10-point Likert-type scale with responses ranging from 1 (*Not confident at all*) to 10 (*Completely confident*). While several instruments have been developed or modified to measure counselor supervisor self-efficacy (e.g., Barnes, 2002; DeKruyf & Pehrsson, 2011; Johnson, 2009; Johnson & Stewart, 2008), some have not been psychometrically validated, while others have not been normed with counselors. Therefore, participants took the CSSES developed by Barnes (2002), as

it was normed on counselors and demonstrates evidence of reliability with strong internal consistency and test-retest reliability.

Barnes' (2002) original research on the CSSSES was conducted with a sample of 287 supervisors affiliated with CACREP-accredited programs and who had provided supervision within the two years prior to the study. The CSSSES demonstrated evidence of reliability with strong internal consistency and test-retest reliability. Specifically, Cronbach's coefficient alpha for the total scale was .97. Alpha coefficients for the six subscales were .94 (Theories and Techniques), .92 (Group Supervision), .90 (Supervisory Ethics), .84 (Self in Supervision), .90 (Multicultural Competence), and .78 (Knowledge of Legal Issues). These alpha coefficients indicate a high level of internal consistency and item interrelatedness within the total scale, and as well as within each subscale. Regarding test-retest reliability, Pearson correlations between the CSSSES total scores at Time 1 and Time 2 were .82, ( $p < .0001$ ), indicating that the CSSSES possesses adequate temporal stability among those who have attained high supervisor development levels and are unlikely to have engaged in self-efficacy enhancing activities.

Murphy (2017) examined the structure of the CSSSES with a new sample of 205 participants and found evidence of strong internal reliability, as demonstrated by a Cronbach's alpha of .96 for the total scale, which was very similar to Barnes' (2002) finding of .97. However, Murphy (2017) did not find support for the six-factor structure of the CSSSES and suggested that further review of the instrument was warranted. While the CSSSES has been used in some studies to establish convergent and divergent validity for other measures (e.g., Barnes & Moon, 2006; Chung, 2009; Williams, 2010; Barker & Hunsley, 2014), Murphy's (2017) study has been the only examination of the structure of the instrument since Barnes' (2002) initial development.

## **Perceived Stress Scale**

The Perceived Stress Scale (PSS; Cohen et al., 1983) is a six, ten, and fourteen item assessment used broadly to measure self-perceived distress. Based on Lazarus' theories of stress and coping (Lazarus & Folkman, 1984), the scale was developed to gather information related to the stress appraisal process, the circumstances that may provoke stress, and the how individuals experience stress (Cohen et al., 1983). The PSS measures respondents' levels of stress during the last month based on Likert-type scales. Mental health issues (e.g., increased stress, anxiety, or depression) resulting from life events have been associated with high scores on the PSS (Cohen & Williamson, 1988).

The validity of the PSS was tested with two groups of college students and a heterogeneous group of individuals from a smoking cessation program (Cohen et al., 1983). The coefficient alphas were .84, .85, and .86 for the three samples respectively. Regarding test-retest reliability, the Pearson correlations for the two college student samples retested after two days were .85 and .55 for the smoking group retested after six weeks. Convergent validity was assessed by comparing the PSS to four other scales, resulting in significant correlations (Cohen et al., 1983). Thus, the ten-item PSS was a psychometrically sound measure of stress in the current study.

## **Demographics Questionnaire**

The researcher created a demographics questionnaire to provide information about participants' background, education, years of experience, supervision experience, and work environment. The demographic information was used to determine if cultural variables (i.e., age, gender, and race) were equally distributed between the intervention group and the waitlist comparison group.

## Data Analysis

Repeated measures analyses of variance (RM-ANOVAs) was conducted to determine if there was a statistically significant difference in supervision knowledge (as measured by the SST-SC Knowledge Assessment) and supervisor self-efficacy (as measured by the Counselor Supervisor Self-Efficacy Scale [Barnes, 2002]) among school counselors who participated in the 7-week Site Supervision Training for School Counselors program and those in a waitlist comparison group. Due to the potential effects of the current pandemic, participants' level of perceived stress was assessed (as measured by the Perceived Stress Scale [Cohen et al., 1983]). The current study utilized the IBM SPSS Statistics software package, v25 (2015) for analyzing and interpreting data using descriptive and inferential statistics. In investigating supervision knowledge, the RM-ANOVA consisted of two continuous dependent variables (i.e., the total scores of supervision knowledge at two time points) and two categorical independent variables (i.e., group status). In investigating supervisor self-efficacy, the RM-ANOVA consisted of three continuous variables (i.e., the total scores of supervisor self-efficacy at three time points) and two categorical independent variables (i.e., group status).

An initial investigation of the data determined if there was any missing data or outliers, as well as if the assumptions for conducting a RM-ANOVA were met. With regard to missing data, it is best practice in RCTs that researchers make every attempt to collect outcome data for all randomized participants (Bhide et al., 2018). Also called *intention-to-treat analysis*, this practice helps to prevent an overestimation of the effect of the intervention. Thus, it was important that the number of missing data was minimized as much as possible, as an increase in attrition could have led to a decrease in the confidence of the findings. The researcher actively followed up with participants who dropped out of the study in order to collect outcome data.

In order to identify the type and form of association among variables and to locate extreme scores, SPSS was also used to generate a scatter plot of the data. The scatter plot was most helpful in determining if the scores were linear or curvilinear, and the direction and degree of the association (Creswell & Guetterman, 2019). As with other linear correlation and regression analyses, the assumptions required for conducting a RM-ANOVA included normality, linearity, and homogeneity of variance (Warner, 2013). It was possible to test for these assumptions using SPSS. An examination of a histogram showed if data were normally distributed as well as if there were any outliers, and a scatterplot revealed if the relationship between the variables was linear (Tabachnick & Fidell, 1983). The most common assessment for homogeneity of variance is Levene's test (Hair et al., 2006).

In addition, it was important to note that the covariate (i.e., perceived stress) should not have been influenced by the intervention; to ensure that this was not the case, perceived stress was measured prior to the start of the SST-SC program for all participants. Moreover, measurement of a covariate should have high reliability. The PSS (Cohen et al., 1983) was selected as a measure of stress in the current study due to its sound psychometric properties.

### **Ethical Considerations**

It is imperative that rigorous ethical principles be applied to RCTs that involve human subjects. For example, careful appraisal of the risks and benefits to participants and society, the procurement of ethical approval from an IRB, and informed consent are essential elements of sound ethical practice (Bhide et al., 2018). Bhide et al. (2018) described the importance of considering and evaluating the ethics associated with utilizing randomization to allocate participants to an intervention group. While it would be unethical to withhold treatment if previous evidence has shown that an intervention is more effective than doing nothing, this

principle applies primarily to medical research. The current study did not involve any anticipated discomforts or risks. There was a possibility that participants who were assigned to the waitlist control group may have experienced feelings of impatience or frustration with the amount of time prior to the start of their participation in the SST-SC program; however, the possibility of a delayed start was explained as a part of the informed consent process.

The informed consent process also included information about participation and confidentiality, and particular care was taken to avoid jargon and instead use language that was familiar to participants. Participation in the current study was completely voluntary, and participants could withdraw from the program and the study at any time. Participants' confidentiality was protected throughout the study, and the data collected was confidential. Participants' names and emails were used for initial recruitment and communication purposes; however, this information was not associated with their responses to any measures used in data collection.

### **Limitations**

The current study was needed in that there has only been one study specific to the field of counseling that evaluated the outcomes of supervision training and employed an experimental design (McMahon & Simons, 2004). While RCTs are considered to be the gold standard for evaluating the effectiveness and outcomes of interventions (Moher et al., 2012), there were several limitations that are important to note. The following section will describe limitations related to the effects of the current pandemic, sampling procedures, instrumentation, and outcome ascertainment.

As previously noted, it is likely that school counselors may be experiencing increased levels of stress as they mitigate the challenges associated with the COVID-19 pandemic in both

their personal and professional roles. Increased stress may not only emerge as a covariate in the current study, but it may also prevent school counselors from being interested or available to participate in the SST-SC program. An informal interest survey conducted by the researcher via a posting on ASCA Scene and through personal communications revealed that school counselors were more likely to participate in the training in its current form (i.e., a seven-week asynchronous online format) versus a more condensed or traditional training. However, there is a possibility that the effects of the current pandemic may negatively impact accessibility and sampling.

While nonprobability sampling is often more accessible and convenient for researchers, it should be noted that a sample drawn randomly from a population is more desirable (Gall et al., 2007). The primary limitation inherent to convenience sampling is the difficulty in making valid inferences about a population when probability sampling is not used (Warner, 2013). However, as previously noted, it is impossible to generalize the results of an experiment beyond the limits of the intervention study itself (Gall et al., 2007). Issues of external validity were addressed in the current study by seeking a sample of participants whose demographic characteristics were representative of school counselors in the United States.

An additional limitation in the current study was the inclusion of an instrument without previous psychometric validation. The SST-SCKA was developed by the researcher for the current study because a pre-existing measure of supervision knowledge was not available. While sound scale and item development procedures (DeVellis, 2017; Kline, 2005) were followed, the inclusion of this measure posed a threat to internal validity (Campbell & Stanley, 1963).

Finally, in considering outcome ascertainment, it is important to note that attrition may have impacted the results of the study and contributed to biased estimates. Particularly given the

length of the intervention, along with effects from the current pandemic, it seems likely that attrition may have impacted the viability of the current study.

## **CHAPTER FOUR: RESULTS**

Chapter four presents the results of a seven-week, asynchronous online site supervision training intervention on school counselors' supervision knowledge and supervisor self-efficacy. The chapter begins with a description of participant demographics, as well as a brief description of the statistical analysis used for the study. This chapter focuses primarily on the results of the statistical analysis, and chapter five presents detailed interpretation of these findings.

The following research questions guided this study:

1. Is there a statistically significant difference in supervision knowledge (as measured by the Site Supervision Training for School Counselors Knowledge Assessment [SST-SCKA; Backer, 2021]) among school counselors who participate in the seven-week Site Supervision Training for School Counselors (SST-SC) program when compared to a waitlist control group?
2. Is there a statistically significant difference in supervisor self-efficacy (as measured by the Counselor Supervisor Self-Efficacy Scale [CSSES; Barnes, 2002]) among school counselors who participate in the seven-week SST-SC program when compared to a waitlist control group?

### **Research Hypothesis One**

There will be a statistically significant difference in supervision knowledge (as measured by the SST-SCKA [Backer, 2021]) among school counselors who participate in the seven-week SST-SC program when compared to a waitlist control group.

### ***Null Hypothesis for Research Question One***

There will not be a statistically significant difference in supervision knowledge (as measured by the SST-SCKA [Backer, 2021]) among school counselors who participate in the seven-week SST-SC program when compared to a waitlist control group.

### **Research Hypothesis Two**

There will be a statistically significant difference in supervisor self-efficacy (as measured by the Counselor Supervisor Self-Efficacy Scale [CSSSES; Barnes, 2002]) among school counselors who participate in the seven-week SST-SC program when compared to a waitlist control group.

### ***Null Hypothesis for Research Question Two***

There will not be a statistically significant difference in supervisor self-efficacy (as measured by the CSSE [Barnes, 2002]) among school counselors who participate in the seven-week SST-SC program when compared to a waitlist control group.

To address these research questions, I conducted two repeated measures analyses of variance (RM-ANOVA) on a sample of school counselor participants ( $n = 57$ ) who completed the SST-SC program ( $n = 25$ ) and in the waitlist comparison group ( $n = 32$ ) to examine the effect of the intervention on supervision knowledge and supervisor self-efficacy. Due to the possibility that stress may have had a confounding effect on the outcomes of participation in the SST-SC program, the ten-item Perceived Stress Scale (PSS; Cohen et al., 1983) was administered to participants at three timepoints during the study (i.e., pre-, mid-, and post-training) to be examined as a covariate in the data analysis procedures.

## Participants

Participants were recruited using convenience sampling by contacting clinical coordinators at twenty Council for Accreditation of Counseling and Related Educational Programs accredited counselor education programs at universities in various regions in the United States (see Table 5). The researcher requested that clinical coordinators share a recruitment letter containing a linked SST-SC program flyer (Appendix C) with their school counseling site supervisors. Notably, a faculty member from a university in New Jersey also posted the recruitment materials on Twitter via the New Jersey School Counselor Association (NJSCA). Additionally, the recruitment letter and flyer were posted on American School Counselor Association (ASCA) Scene and American Counseling Association (ACA) Connect, which are list-servs for the members of the ASCA and ACA respectively. The recruitment letter contained a link to a Google Form which served as an initial screening mechanism for school counselors who were interested in participating in the study. To be eligible to participate in the study, participants had to be at least 18 years of age and be employed as a professional school counselor in a U. S. public school. After an initial screening for study eligibility, potential participants were invited to complete the informed consent and a demographics survey. After screening the sample, eligible participants were randomly assigned to the intervention group or a waitlist control group.

**Table 5**

*Recruitment Locations*

State	Number of Universities
California	1

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Florida	4
Georgia	2
Louisiana	1
Mississippi	1
New Hampshire	1
New Jersey	2
North Carolina	2
South Carolina	1
Virginia	5

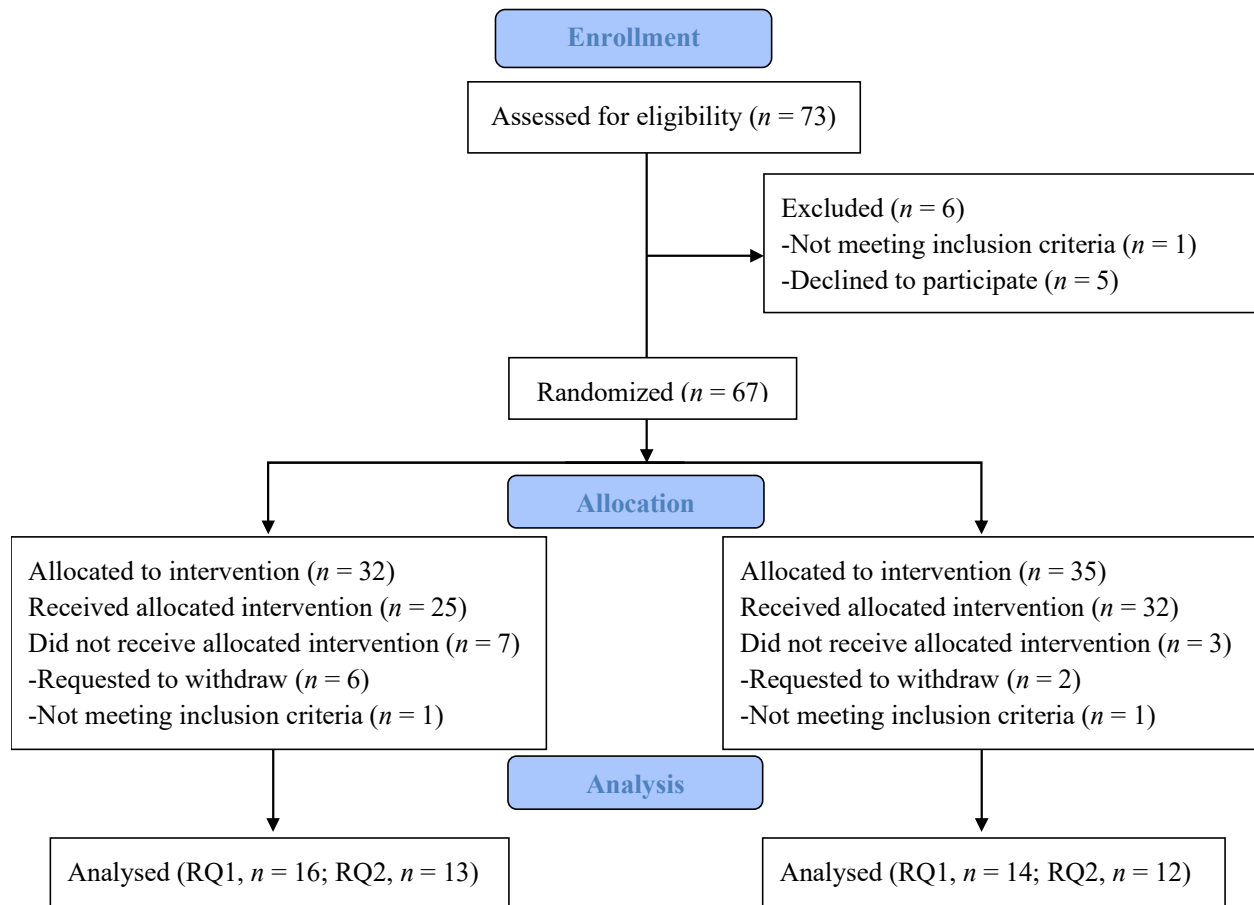
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Seventy-three school counselors completed the initial survey and were assessed for eligibility with 67 participants being selected and randomized into the intervention group or a waitlist control group. To complete the randomization process, I used Research Randomizer (Urbaniak & Plous, 2020). Each participant was randomly assigned a participant number, and all of the participant numbers were then randomly assigned to either group. The intervention group was provided with access to the SST-SC program, which was facilitated using Canvas, an online Learning Management System (LMS). Access was available to each new module of the SST-SC on each Monday of the seven-week intervention, and the assessments were embedded in the program as required tasks in Module 0 (i.e., the pre-test data collection point), Module 3 (i.e., the mid-test data collection point), and at the conclusion of Module 7 (i.e., the post-test data collection point). The waitlist control group was provided with a link through email to complete each set of assessments during the same week that the intervention group completed the assessments. The Consolidated Standards of Reporting Trials (CONSORT) guidelines for

reporting randomized controlled trials recommends including a flow diagram to illustrate participants' progress through the phases of an intervention study (Moher et al., 2012). Thus, Figure 2 provides detailed information about the progress of participants through the screening, randomization and allocation, and analysis process.

**Figure 2**

*CONSORT Flow Diagram*



### Demographic Characteristics

After the screening and allocation process, as well as the withdrawal or exclusion of a number of participants from both groups, fifty-seven school counselors participated in this study.

The total attrition rate was 15% ( $n = 10$ ), with seven participants from the intervention group not receiving the allocated intervention and three participants being removed from the waitlist control group. Eighty-six percent ( $n = 49$ ) of the participants were female and 8% ( $n = 8$ ) were male. In terms of age, 17.5% ( $n = 10$ ) of participants ranged in age from 18 to 30, 31.6% ( $n = 18$ ) ranged from 31 to 40, 28.1% ( $n = 16$ ) ranged from 41-50, 21.1% ( $n = 12$ ) ranged from 51 to 60, and 1.8% ( $n = 1$ ) was 65 years or older. The majority of participants identified as White (71.9%,  $n = 41$ ), 15.8% ( $n = 9$ ) Black or African American, 8.8% ( $n = 5$ ) Hispanic or Latino, 1.8% ( $n = 1$ ) Asian, and 1.8% ( $n = 1$ ) Biracial or Mixed Race.

The study was open to licensed/certified school counselors employed in U.S. public schools, and participants reported working in and holding licensure/certification from 22 states. The largest number of participants (24.6%,  $n = 14$ ) was from New Jersey, followed by Virginia (15.8%,  $n = 9$ ) and New Hampshire (7%,  $n = 4$ ). Participants reported working in suburban communities (47.4%,  $n = 27$ ), as well as rural (29.8%,  $n = 17$ ), and urban (22.8%,  $n = 13$ ) locations. Most participants (42.1%,  $n = 24$ ) reported having a caseload size of between 250 to 400 students, with 36.8% ( $n = 21$ ) reporting a caseload of more than 400 students and 21.1% ( $n = 12$ ) 250 students or fewer. The majority of participants (89.5%,  $n = 51$ ) held a Master's degree (e.g., M.A., MAED, M.Ed., M.S.), while 7% ( $n = 4$ ) held a Doctoral degree (e.g., Ed.D., Ph.D.) and 3.5% ( $n = 2$ ) held an Education Specialist degree (e.g., Ed.S.). In terms of experience, 33.3% ( $n = 19$ ) of participants have been licensed/certified as a school counselor for five or fewer years. Similarly, 35.1% ( $n = 20$ ) of participants have worked as a school counselor for five or fewer years. Additional details about participants' experience are displayed in Table 6.

## **Table 6**

### *Participants' Licensure/Certification and Work Experience as School Counselors*

Years	Licensed/Certified		Worked as a School Counselor	
	<i>n</i>	%	<i>n</i>	%
0-5	19	33.3	20	35.1
6-10	14	24.6	16	28.1
11-15	8	14.0	11	19.3
16-20	6	10.5	4	7.0
21-25	4	7.0	4	7.0
26-30	5	8.8	2	3.5
31-35	1	1.8		

Regarding their experiences of providing supervision, the majority of participants had served as a site supervisor for one or more school counseling students (52.6%,  $n = 30$ ) while a smaller portion (48%,  $n = 17$ ) had not. In addition, most of the participants had not provided post-graduate supervision for other school counselors at the time of the study (82.5%,  $n = 47$ ) with 10 (17.5%) who reported supervising school counselor colleagues. More specifically, 21.1% ( $n = 12$ ) of participants had served as a supervisor for a school counseling student once, 14% ( $n = 8$ ) had served in this role twice, 5.3% ( $n = 3$ ) three times, 3.5% ( $n = 2$ ) four times, 7% ( $n = 4$ ) five times, and 1.8% ( $n = 1$ ) six times. Fewer participants had provided post-graduate supervision for other school counselors, with 5.3% ( $n = 3$ ) serving in this role once, 3.5% ( $n = 2$ ) twice, 5.3% ( $n = 3$ ) three times, and 1.8% ( $n = 1$ ) four times.

### Comparison of Groups on Demographics

In order to determine if the intervention group and the waitlist control group were statistically different regarding their demographic variables, I conducted a Chi-Square Test for Independence using Fisher-Freeman-Halton Exact Test. The two groups showed no statistically significant difference in gender  $\chi^2 (n = 57) = .14, p = .71$ ; age  $\chi^2 (n = 57) = 4.14, p = .37$ ;

race/ethnicity  $\chi^2 (n = 57) = 4.88, p = .23$ ; community type  $\chi^2 (n = 57) = 1.06, p = .65$ ; caseload size  $\chi^2 (n = 57) = .76, p = .70$ ; years licensed/certified as a school counselor  $\chi^2 (n = 57) = 8.29, p = .19$ ; work and licensure/certification location  $\chi^2 (n = 57) = 21.63, p = .29$ ; and experiences serving as a site supervisor for school counseling students  $\chi^2 (n = 57) = .01, p = .93$  or providing post-graduate supervision for school counselors  $\chi^2 (n = 57) = .19, p = .67$ . The only demographic characteristics for which the two groups showed significant differences were their total years of work as a school counselor  $\chi^2 (n = 57) = 10.25, p = .04$  and education/professional training  $\chi^2 (n = 57) = 5.00, p = .05$ .

### **Preliminary Analysis**

#### **Outliers and Missing Data**

An initial examination of the data revealed missing data for each of the scales, as well as several outliers in the intervention group for the SST-SCKA. Tabachnick and Fidell (2007) suggested that a careful analysis of outlying cases might reveal their influence on a variable and thus, inform the decision to remove or retain them. Due to the small sample size and the non-significant impact of removing the cases, the decision was made to retain the outliers. With regard to missing data, Little's MCAR test revealed that data missing completely at random (Pallant, 2020) were scattered throughout cases and variables for the SST-SCKA and the CSSES (SST-SCKA = .75, CSSES = .42, PSS = .07; if  $p \leq .05$ , the data were not missing completely at random). RM-ANOVA utilizes listwise deletion to address missing data, thereby reducing the sample size based on missing cases for each scale (Pallant, 2020; Tabachnick & Fidell, 2007). After this reduction based on missing cases, the total sample size for the SST-SCKA was 30, with 16 participants in the intervention group and 14 participants in the waitlist control group.

The total sample size for the CSSES was 25, with 13 participants in the intervention group and 12 participants in the waitlist control group.

### **Statistical Assumptions**

The assumptions required to conduct RM-ANOVA include: (a) normality; (b) linearity; and (c) homogeneity of variance (Pallant, 2020; Warner, 2013). Tests of normality (i.e., Shapiro-Wilk) indicated that the data were normal with the exception of supervision knowledge post-test scores for the intervention group ( $p = .001$ ). Visual inspection of the histogram and scatterplot for the SST-SCKA, Form B intervention group confirmed that the data were slightly non-normal. While this non-normality was a limitation (Tabachnick & Fidell, 2007), RM-ANOVA is typically tolerant of violations of normality (Pallant, 2020). An examination of scatterplots for each of the dependent variables indicated that the relationship between variables was linear (Tabachnick & Fidell, 2007). Regarding homogeneity of variance, Box's test of equality of covariance was not significant for supervision knowledge ( $p = .03$ ) using a .01 alpha for significance level (Pallant, 2020), nor was Levene's test of equality of error variances. Similarly, Box's test of equality of covariance was not significant for supervisor self-efficacy ( $p = .76$ ), nor was Levene's test of equality of error variances. Thus, it is reasonable to conclude that the assumptions for conducting RM-ANOVA were met with the exception of normality.

### **Comparison of Groups on Baseline Scores**

In order to determine if the intervention group and the waitlist control group were statistically different regarding their baseline scores, I conducted an independent samples t-test. There were no significant differences in scores for the groups on the SST-SCKA, the CSSES, or the Perceived Stress Scale (PSS; Cohen et al., 1983). The findings of the independent samples t-test are provided in Table 7.

**Table 7**

*Baseline Scores for the SST-SC Knowledge Assessment, Counselor Supervisor Self-Efficacy Scale, and Perceived Stress Scale Between Groups*

Scale	<i>t</i>	<i>df</i>	<i>p</i>
SST-SCKA, A	.70	40	.49
CSSSES, 1	-.12	39	.91
PSS, 1	-.07	19	.95

### **Reliability of Scales**

The SST-SCKA is a 50-item instrument comprised of two forms with 25 items per form that was developed by the researcher for the current study. While *testing* as a threat to internal validity (i.e., the effects of taking measures as part of a study) was controlled for in the research design (Campbell & Stanley, 1963), the researcher developed two forms of the multiple-choice test. The relationship between the two forms (i.e., SST-SCK, A and SST-SCKA, B) was investigated using a Pearson product-moment correlation coefficient for both participants in both groups. There was a statistically significant positive correlation between the two forms,  $r = .70$ ,  $n = 14$ ,  $p < .01$ , which is deemed to be a large effect (Cohen, 1988). In order to determine the internal consistency reliability of the scales used in this study, Cronbach's Alphas were attained for each scale. The Cronbach's Alpha for scores on the SST-SCKA Form A was .65 and .84 for Form B. While .84 demonstrated an acceptable level of internal consistency for Form B, .65 falls slightly short of an acceptable level of internal consistency for Form A, which may indicate that the multiple-choice items have very little in common (Considine et al., 2005).

The CSSES (Barnes, 2002) and the PSS (Cohen et al., 1983) were administered at three different times over the course of the intervention. The Cronbach’s Alphas for the CSSES on the three data collection points were .98, .97, and .98, respectively. The Cronbach’s Alphas for the PSS on the three data collection points were .74, .87, and .89, respectively. The internal consistency reliability for scores on both scales ranged from acceptable to strong.

**Perceived Stress**

Due to the possibility that stress may have had a confounding effect on the outcomes of participation in the SST-SC program, the ten-item Perceived Stress Scale (PSS; Cohen et al., 1983) was administered to participants at three timepoints during the study (i.e., pre-, mid-, and post-training) to be examined as a covariate in the data analysis procedures. After listwise deletion, the sample size for the PSS was small ( $n = 9$ ), which made it undependable as a covariate, in spite of the internal consistency of the scale (Pallant, 2020). Furthermore, correlations between stress and the outcome variables of interest did not show any significant relationships at any of the data collection points (see Table 8).

**Table 8**

*Correlations Between Perceived Stress, Supervision Knowledge, and Supervisor Self-Efficacy*

		SST- SCKA, Form A	SST- SCKA, Form B	CSSES, 1	CSSES, 2	CSSES, 3
PSS, 1	<i>r</i>	-.23	-.16	.22	.28	.27
	<i>p</i>	.32	.59	.34	.36	.35
	<i>n</i>	21	13	21	13	14

PSS, 2	<i>r</i>	-.16	-.10	.23	.18	.02
	<i>p</i>	.54	.71	.37	.46	.95
	<i>n</i>	18	16	18	20	17
PSS, 3	<i>r</i>	-.05	-.10	.19	.39	.29
	<i>p</i>	.85	.69	.45	.19	.20
	<i>n</i>	18	20	18	13	21

*Correlation is significant at the 0.05 level (2-tailed).*

### **Results of the Research Questions**

In this study, I examined the effect of participating in the seven-week SST-SC program on school counselors' supervision knowledge and supervisor self-efficacy. I explored whether there would be a statistically significant difference between groups of participating school counselors and those assigned to a waitlist control group on their supervision knowledge as measured by the SST-SC Knowledge Assessment and their supervisor self-efficacy as measured by the Counselor Supervisor Self-Efficacy Scale (Barnes, 2002). The statistical analyses used to examine the mean differences in effects between and within the groups on each of these constructs were RM-ANOVAs. In investigating supervision knowledge, the RM-ANOVA consisted of two continuous dependent variables (i.e., the total scores of supervision knowledge at two time points) and two categorical independent variables (i.e., group status). In investigating supervisor self-efficacy, the RM-ANOVA consisted of three continuous variables (i.e., the total scores of supervisor self-efficacy at three time points) and two categorical independent variables (i.e., group status).

## Descriptive Statistics

Descriptive statistics were utilized to examine the mean and standard deviation of participants' scores on the total scores of each scale. The findings are summarized in Table 9 according to each measure and group.

**Table 9**

*Descriptive Statistics for the SST-SC Knowledge Assessment Test Scores and the Counselor Supervisor Self-Efficacy Scale Test Scores Across Time Periods*

Scale	Group	<i>n</i>	<i>M</i>	<i>SD</i>
SST-SCKA-Form A, Time 1	Intervention	16	15.69	3.11
	Waitlist	14	14.43	2.77
	Total	30	15.10	2.98
SST-SCKA-Form B, Time 2	Intervention	16	17.25	6.86
	Waitlist	14	17.21	3.60
	Total	30	17.23	5.49
CSSES, Time 1	Intervention	13	238.54	40.80
	Waitlist	12	233.33	50.11
	Total	25	236.04	44.61
CSSES, Time 2	Intervention	13	260.92	33.11
	Waitlist	12	226.58	45.46
	Total	25	244.44	42.45
CSSES, Time 3	Intervention	13	299.23	28.16
	Waitlist	12	229.25	49.10
	Total	25	265.64	52.67

## Multivariate Results for Supervision Knowledge

An RM-ANOVA was conducted to compare pre-test scores on the SST-SCKA (i.e., form A) and post-test scores on the SST-SCKA (i.e., form B) for the intervention group and the

waitlist control group, as well as the effect for time on each group. Results from the multivariate test revealed no significant interaction between time and group, Wilk's Lambda = .98,  $F(1, 28) = .47$ ,  $p = .50$ ,  $\eta_p^2 = .07$  (see Table 10). The results indicate that the two groups' scores on the SST-SCKA were not significantly different from each other over time. However, there was a significant main effect for time Wilk's Lambda = .83,  $F(1, 28) = 5.90$ ,  $p < .05$ ,  $\eta_p^2 = .17$ , deemed as a large effect size (Tabachnick & Fidell, 2007), with both groups showing an increase in SST-SCKA scores from pre- to post-test. The main effect comparing the two groups was not significant,  $F(1, 28) = .22$ ,  $p = .64$ ,  $\eta_p^2 = .01$  (see Figure 3). Specifically, the mean pre- and post-test scores for the intervention group were 15.69 ( $SD = 3.11$ ) and 17.25 ( $SD = 6.86$ ) respectively, and for the waitlist control group 14.43 ( $SD = 2.77$ ) and 17.21 ( $SD = 3.60$ ), respectively. Overall, these findings demonstrate that the two groups had a statistically significant change in supervision knowledge over the course of time regardless of group, which may indicate that unknown factors similar in the two groups accounted for the change and not the controlled intervention. These findings may also indicate measurement issues or a measurement error.

**Table 10**

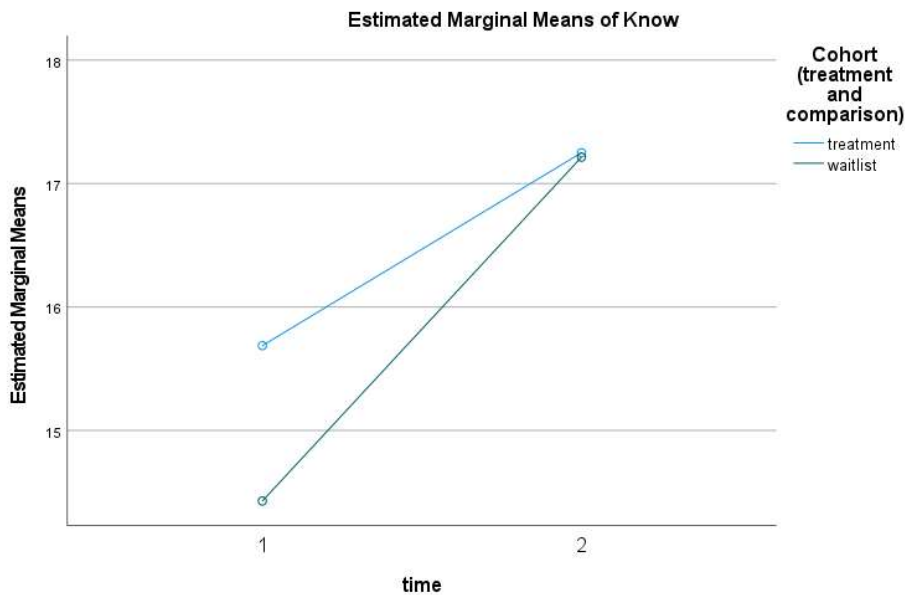
*Main Effects of RM-ANOVA for Supervision Knowledge*

Effect	$\lambda$	$F$	$df1$	$df2$	$p$	$\eta_p^2$
Time	.83	5.90	1	28	.02**	.17
Group	-	.22	1	28	.64	.01
Time*Group	.98	.47	1	28	.50	.07

*Note.* \*\*indicates statistical significance at  $p \leq .05$ .

**Figure 3**

*Plot of SST-SCKA Means Over Time*



### **Multivariate Results for Supervisor Self-Efficacy**

A second RM-ANOVA was conducted to compare pre-, mid-, and post-test scores on the CSSES for the intervention group and the waitlist control group, as well as the effect for time on each group. Results from the multivariate test revealed a statistically significant interaction between time and group, Wilk's Lambda = .45,  $F(2, 22) = 13.36$ ,  $p < .01$ ,  $\eta_p^2 = .55$  (see Table 11). The findings indicate that the two groups' scores were significantly different from each other over time. There was also a significant main effect for time, Wilk's Lambda = .49,  $F(2, 22) = 11.31$ ,  $p < .01$ ,  $\eta_p^2 = .51$ . Furthermore, there was a significant main effect comparing the two groups,  $F(1, 23) = 5.60$ ,  $p < .05$ ,  $\eta_p^2 = .20$ , with the intervention group showing an increase in test scores across the time periods (see Figure 4). Each of these analyses produced a large effect size as noted by the partial eta squared ( $\eta_p^2$ ; Tabachnick & Fidell, 2007). Specifically, the mean pre-, mid-, and post-test scores for the intervention group were 238.54 ( $SD = 40.80$ ), 260.92 ( $SD = 33.11$ ), and 299.23 ( $SD = 28.16$ ), respectively; whereas the mean scores for the

waitlist control group were 233.33 ( $SD = 50.11$ ), 226.58 ( $SD = 45.46$ ), and 229.25 ( $SD = 49.10$ ), respectively. Overall, these findings demonstrated that the intervention group had a statistically significant change in supervisor self-efficacy over the course of time while the waitlist control group did not, indicating that the controlled intervention accounted for the change.

**Table 11**

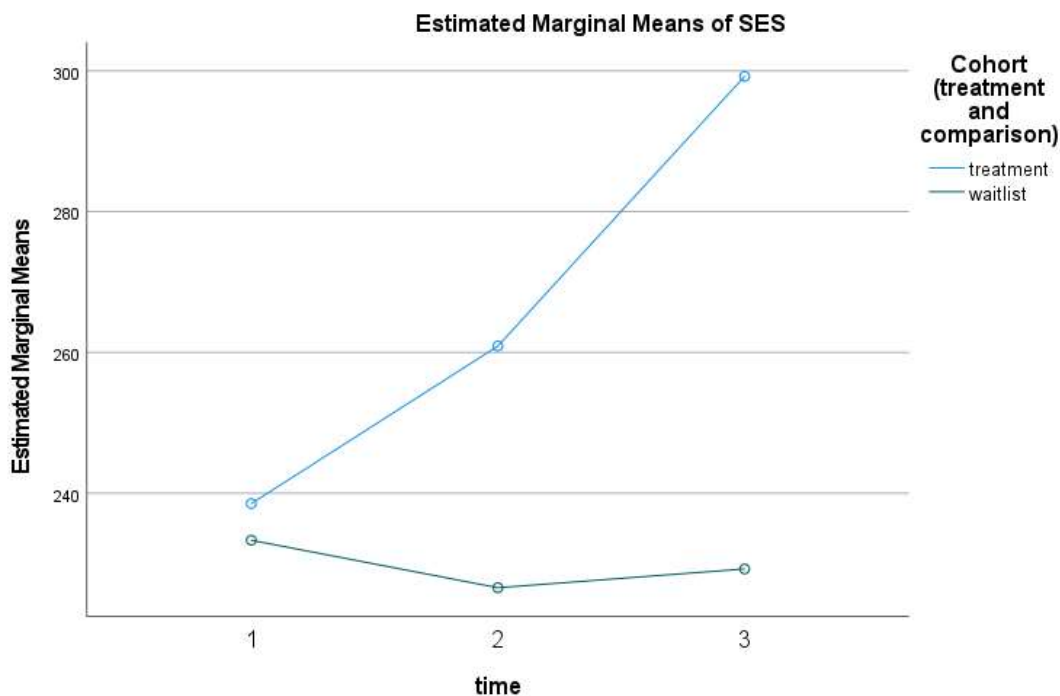
*Main Effects of RM-ANOVA for Supervisor Self-Efficacy*

Effect	$\lambda$	$F$	$df1$	$df2$	$p$	$\eta_p^2$
Time	.49	11.31	2	22	.00***	.51
Group	-	5.60	1	23	.03**	.20
Time*Group	.45	13.36	2	22	.00***	.55

*Note.* \*\*indicates statistical significance at  $p \leq .05$ ; \*\*\*indicates statistical significance at  $p \leq .01$ .

**Figure 4**

*Plot of CSSES Means Over Time*



## Conclusion

Chapter four presented the results of two RM-ANOVAs conducted to explore the effect of a seven-week, asynchronous online site supervision training intervention on school counselors' supervision knowledge and supervisor self-efficacy. In addition, Chapter Four presents the demographic information of the participants and reliability of the measures in this study. The first RM-ANOVA failed to reject the null hypothesis that there would not be a statistically significant difference in supervision knowledge among school counselors who participated in the SST-SC program when compared to a waitlist control group. There was a statistically significant main effect for time, with both groups showing an increase in test scores from pre- to post-test. The second RM-ANOVA rejected the null hypothesis that there would not be a statistically significant difference in supervisor self-efficacy among school counselors who participated in the SST-SC program when compared to a waitlist control group. There was a statistically significant main effect for time, with the intervention group showing an increase in test scores over time and the waitlist control group showing no significant change in test scores from pre- to post-test. Perceived stress was not a dependable covariate for the outcome variables of interest due to few completed cases (i.e., nonresponse); thus, I removed stress from consideration in this study. The statistical analyses described in this chapter provided insight about the effects of supervision training for school counselors. In Chapter Five, the findings from this study will be discussed and interpreted, and the implications for counselor education and school counseling, the limitations associated with the study, and recommendations for future research will be reviewed.

## **CHAPTER FIVE: DISCUSSION**

Chapter five provides a discussion and interpretation of the findings of the research study and the implications of the study for counselor education and school counseling according to the findings. The chapter begins with a description of the findings according to each of the scales utilized in the study. Additionally, Chapter Five includes an overview of the study's limitations and practical implications, and recommendations for future research. A summary of the findings concludes the dissertation.

### **Discussion of Findings**

In this study, I examined the outcomes of school counselors' participation in the seven-week *Site Supervision Training for School Counselors (SST-SC)* program on participants' supervision knowledge and supervisor self-efficacy. The SST-SC program is an asynchronous, online supervision training intervention adapted from a university-based in-person supervision course for local school counselors (Merlin & Brendel, 2017). The SST-SC comprises eight modules designed to be completed in seven weeks. The researcher facilitated the SST-SC program as the instructor in a Canvas learning management system. Participants in the study were randomly assigned to either an intervention group or a waitlist control group. Both groups were administered measures at three time points during the intervention.

The following research questions guided this study:

1. Is there a statistically significant difference in supervision knowledge (as measured by the Site Supervision Training for School Counselors Knowledge

Assessment [SST-SCKA; Backer, 2021]) among school counselors who participate in the seven-week Site Supervision Training for School Counselors (SST-SC) program when compared to a waitlist control group?

2. Is there a statistically significant difference in supervisor self-efficacy (as measured by the Counselor Supervisor Self-Efficacy Scale [CSSES; Barnes, 2002]) among school counselors who participate in the seven-week SST-SC program when compared to a waitlist control group?

### **Research Hypothesis One**

There will be a statistically significant difference in supervision knowledge (as measured by the SST-SCKA [Backer, 2021]) among school counselors who participate in the seven-week SST-SC program when compared to a waitlist control group.

### ***Null Hypothesis for Research Question One***

There will not be a statistically significant difference in supervision knowledge (as measured by the SST-SCKA [Backer, 2021]) among school counselors who participate in the seven-week SST-SC program when compared to a waitlist control group.

### **Research Hypothesis Two**

There will be a statistically significant difference in supervisor self-efficacy (as measured by the Counselor Supervisor Self-Efficacy Scale [CSSES; Barnes, 2002]) among school counselors who participate in the seven-week SST-SC program when compared to a waitlist control group.

### ***Null Hypothesis for Research Question Two***

There will not be a statistically significant difference in supervisor self-efficacy (as measured by the CSSE [Barnes, 2002]) among school counselors who participate in the seven-week SST-SC program when compared to a waitlist control group.

To address this question, the researcher conducted two repeated measures analyses of variance on a sample of all school counselor participants ( $n = 57$ ) in the SST-SC program ( $n = 25$ ) and in the waitlist comparison group ( $n = 32$ ) to examine the effect of the intervention on supervision knowledge and supervisor self-efficacy. After data reduction based on missing cases, the total sample size for the SST-SCKA was 30, with 16 participants in the intervention group and 14 participants in the waitlist control group. The total sample size for the CSSES was 25, with 13 participants in the intervention group and 12 participants in the waitlist control group.

Several characteristics of the study contribute unique findings to the body of literature and research focused on counselor supervision training in general and even more specifically to supervision training in school counseling. First, this is the only existing randomized controlled trial investigating the outcomes of supervision training in counseling. McMahan and Simons (2004) utilized a longitudinal experimental design to examine the outcomes of a counseling supervision training program, but their study did not include a randomized controlled trial. More specific to school counseling, Swank and Tyson (2012) developed an online, six-module site supervision training program for school counselors and required participants to take a quiz upon completion of the program; however, they did not report any outcomes of participation in the training. Brown et al. (2018) delivered two sessions of a four-hour school counseling site supervision training workshop as part of a state-level school counseling conference with 31 participants altogether. Brown et al. utilized a pretest and posttest design to examine the impact of the School Counseling Supervision Model (SCSM; Luke & Bernard, 2006) on school

counseling site supervisors' self-efficacy in providing supervision to school counselors-in-training. While this study was specific to supervision training for school counselors, it was not an experimental design, nor was the training context similar to the current study. In the execution of the current study as a randomized controlled trial, the focus on supervision training specifically for school counselors, and the intervention context, the current study provides novel findings related broadly to counselor supervision training and, more specifically, to supervision training in school counseling.

### **Discussion about the Participants, Interest, and Attrition**

The study was open to licensed/certified school counselors employed in U.S. public schools. Most of the sample's demographic characteristics mirrored those of school counselors who hold membership with ASCA, with most participants identifying as White and female. Specifically, ASCA (2020) reported that over 75 percent of their membership are White and about 87 percent are female, and the sample identified as 72 percent white and 86 percent female. However, in a survey of both member and non-member school counselors seeking to examine the state of the school counseling profession, ASCA (2020) reported that twenty percent of respondents had five or fewer years of experience working as a school counselor, and twenty-two percent had six to ten years of experience. Thirty-five percent of the participants in this study reported having five or fewer years of experience, and twenty-eight percent reported having six to ten years of experience. It is noteworthy that more than one-third of school counselor participants who volunteered to take part in the training had five or fewer years of experience, with the majority of participants having ten or fewer years of experience. This demographic characteristic indicates that while novice and less experienced school counselors do

not constitute the demographic majority in the United States, they were more interested in receiving site supervision training as a part of this study than their more experienced colleagues.

Another finding regarding the participants relates to attrition in the study. When situated within the context of existing site supervision training studies, the SST-SC program's recruitment, participation, and attrition characteristics seem typical in most ways. Gruman and Purgason (2019) noted that counselor educators reported challenges in recruiting university-based site supervision training participants. Noting accessibility as a key feature in their design to deliver site supervision training for school counselors in the context of in-person state-level conferences, Gruman and Purgason (2019) claimed to overcome the difficulty in recruiting interested practitioners by offering training in a short professional development context. The asynchronous online context of the SST-SC program also seemed to compensate for this barrier in recruitment and accessibility in that within a week of limited recruitment, 73 school counselors conveyed interest in participating, and an additional 15 people did not qualify for the study but requested access to the training in future iterations of the course. Despite this initial interest, 57 school counselors participated in the study spread across both groups, representing a total attrition rate of 15%, and only fourteen participants in the intervention group completed the training with complete fidelity (i.e., completed the capstone project and all of the measures).

While delivered in a face-to-face professional development format comprised of four six-hour days of training, McMahan and Simons (2004) reported similar recruitment, participation, and attrition results. While 79 counselors initially expressed interest in their supervision training program, the researchers acquired their control group because 63 counselors were ultimately unable to attend the training but agreed to complete the associated measures, leaving them with 16 people in their intervention group. Ultimately, McMahan and Simons (2004) reported 15

participants in their intervention group and 42 participants in their control group after their study. While Gruman and Purgason (2019) noted that counselor educators reported challenges in recruiting participants for face-to-face university-based supervision training programs, McMahan and Simons (2004) reported robust initial interest in participation regardless of the location-specific in-person context of their training. Notably, the online asynchronous format of the SST-SC program attracted similar initial interest, as well as similar attrition. This finding suggests that factors other than the training context (i.e., face-to-face or online) may contribute as barriers to participation in supervision training for counselors.

### **Summary and Discussion of Findings for research Question One**

The findings from this study indicated that while there was a statistically significant increase in supervision knowledge for participants over the course of the SST-SC program that change occurred for both the intervention group and the waitlist control group. Based on the results of the study, I failed to reject the null hypothesis. The scores on the SST-SCKA increased from pretest scores to the posttest scores for both groups. The pretest scores used Form A of the SST-SCKA while the posttest scores were on Form B. There were several possible explanations for this finding. First, it is possible that there may have been measurement issues that confounded the results. For example, it could have been possible that the SST-SCKA, Form B, which was administered at the second timepoint (i.e., posttest) was easier than the SST-SCKA, Form A, which was administered at the first timepoint (i.e., pretest). This may have resulted in both groups' scores showing a statistically significant increase over time. The use of different forms intended to prevent the internal threat of validity of *testing*, whereby taking a pretest will lead to the participants scoring higher on the posttest due to being familiar with the items (Gall et al., 2007). However, the different forms introduced the threat of *instrumentation* because

participants took a different measure for the pretest and posttest, which may have led to different scores due to changes in the instrumentation (Gall et al., 2007). Second, since the SST-SCKA has limited psychometric testing, an unknown measurement error may have occurred and resulted in the change. Finally, this finding may have indicated that other unknown factors similar in the two groups accounted for the change and not the controlled intervention.

There is no existing literature and research that either mirrors this finding or contradicts it. McMahan and Simons (2004) developed the Clinical Supervision Questionnaire (CSQ) as the measure for their study, and they noted that ten of the 30 items related to theoretical and conceptual supervision knowledge. While scores on the CSQ demonstrated high internal consistency reliability ( $\alpha = .96$ ), the researchers did not examine any subscales as a part of their analysis. That said, the researchers did report a slight but non-significant increase in scores across time for their control group and a significant increase over time for their intervention group. This finding indicates that a slight increase in supervision knowledge could be expected for a control group, but it is not consistent with the significant increase in supervision knowledge for both groups in the current study.

While increased knowledge may stand out as an assumed outcome of professional development training such as the SST-SC program (Harland & Kinder, 1997; Kennedy, 2005), the findings of this study suggest otherwise. Identifying the factors that led both the intervention group and the waitlist control group to show a statistically significant increase in supervision knowledge throughout the seven-week SST-SC program is beyond the scope of the current study. However, literature has suggested that knowledge may not be the best indicator of supervision competence. Gruman and Purgason (2019) designed an experiential site supervision training approach for school counselors modeled after the work of Kolb and Kolb (2017) that

was "designed to capitalize on the professional experience of participants" (p. 254). While researchers suggest that school counselors receive less training in supervision than their clinical colleagues (DeKruyf & Pehrsson, 2011), they are not blank slates regarding knowledge related to supervision (Gruman & Purgason, 2019).

School counselors bring important expertise and dispositions to their roles as practitioners and supervisors even if they may not have received any formal training in providing supervision (Borders & Brown, 2005; Gruman & Purgason, 2019). For example, Brott et al. (2016) found that even novice school counseling site supervisors displayed important dispositional attributes in their roles as supervisors, such as encouragement, patience, flexibility, and relationship-building skills. Authors suggest that specific supervision knowledge may not be the best indicator of readiness to lead and mentor school counselors-in-training through the complex roles of professional school counselors, but rather, what might be more important is a site supervisor's ability to perform the work and model this for supervisees (Gruman & Purgason, 2019; Ockerman et al., 2013).

### **Summary and Discussion of Research Question Two**

The findings in the study revealed a statistically significant increase in supervisor self-efficacy over time for the intervention group but *not* for the waitlist control group, which provides evidence that participation in the SST-SC program accounted for the change. Based on the results of the study, there is evidence to reject the null hypothesis. The finding is consistent with previous studies indicating that supervision training impacts supervisor self-efficacy (i.e., Brown et al., 2018; DeKruyf & Pehrsson, 2011; McMahan & Simons, 2004; Peed, 2017). As previously noted, Brown et al. (2018) utilized a pretest and posttest design to examine the impact of training based on the School Counseling Supervision Model (Luke & Bernard, 2006) on

school counseling site supervisors' ( $n = 31$ ) self-efficacy in providing supervision to school counselors-in-training, as well as whether years of supervisor experience factored into supervisor self-efficacy after such training. Findings indicated a statistically significant improvement ( $t [30] = 9.31, p < .001$ ) in post-training supervisor self-efficacy with a large effect size (Cohen's  $d = 1.67$ ). Brown et al.'s (2018) findings did not indicate a statistically significant difference among participants with varying levels of supervision experience. However, descriptive statistics showed that participants with fewer than ten years of experience as site supervisors scored almost five points higher at the end of the training when compared to more experienced participants. Based on the findings of the current study, one can draw a logical conclusion similar to Brown et al.'s (2018) claim that less experienced school counseling site supervisors may experience greater increases in supervisor self-efficacy than those with more experience after receiving training in supervision. Demographic data from the current study revealed that the majority of participants had fewer than ten years of experience as school counselors and less experience providing supervision for school counseling students and showed a statistically significant increase in supervisor self-efficacy after participating in the SST-SC program.

In an investigation of the training needs of school counseling site supervisors in the Pacific Northwest of the United States, DeKruyf and Pehrsson (2011) examined the relationship between supervisor self-efficacy and supervision experience. The primary researcher developed the Site Supervisor Self-Efficacy Scale (DeKruyf, 2007) as a measure for the study and found that school counseling site supervisors who had received a higher number of supervision training hours also averaged high supervisor self-efficacy scores. DeKruyf and Pehrsson's finding provides some indication that more training in supervision predicts a higher sense of self-efficacy in providing supervision for school counseling students than less training predicts.

Similarly, Peed (2017) found that school counselors with higher levels of supervision training (i.e., 16 or more hours) had higher site supervisor self-efficacy scores than their counterparts with little (i.e., one to five hours) or no training. Concerning the current study, DeKruyf and Pehrsson's (2011) and Peed's (2017) findings may support the length of the SST-SC program. The SST-SC program is delivered in eight modules released over seven weeks; thus, it is longer than any other site supervision training interventions represented in the literature.

The present findings also parallel McMahan and Simons' (2004) finding that training in supervision leads to increased supervisor effectiveness. The CSQ (McMahan & Simons, 2004) contained eight items related to confidence and self-awareness, and while they did not examine subscales as part of their analysis, the results revealed a statistically significant increase in participants' scores from pretest to posttest for the intervention group. McMahan and Simons' (2004) study focused on counselors in Australia who participated in an intensive face-to-face supervision training program, thereby differentiating it from the SST-SC program in several ways. However, the researchers demonstrated that supervision training provided to professional counselors could make a difference and may help address the criticism that counselors in supervisory positions are untrained for those roles.

### **Discussion about Randomized Controlled Trials and School Counseling Research**

The current study is the only existing randomized controlled trial investigating the outcomes of supervision training in counseling. As previously noted, one of the findings indicated that participants' SST-SCKA scores showed a statistically significant increase over time for both the intervention group and the waitlist comparison group. The finding underscores the advantages of utilizing research designs that include control groups. For example, if the current study did not have a comparison group, one may have drawn the conclusion that the

intervention group's increase in supervision knowledge scores was due to the controlled intervention. This finding emerged as an important takeaway from this study, as much for indicating the value of randomized control trials (RCTs) in research designs as for the implications related to supervision knowledge as a construct.

In a recent content analysis of school counseling intervention research, Griffith et al. (2020) found that only two articles reported intervention studies conducted with current school counselors, indicating a gap in examining and reporting the outcomes of interventions designed for practitioners. Moreover, Griffith et al.'s results indicate that in addition to there being a limited number of published intervention research studies, published works of this kind lack a commitment to rigorous methodology, such as an RCT. A gap in school counseling research using intervention designs underscores the need for scholars to utilize robust research designs with the goal of examining outcomes for school counseling practitioners and stakeholders.

### **Implications for School Counseling**

In the current study, I examined the outcomes associated with participation in the SST-SC program. School counselors in the intervention group who participated in the program showed a statistically significant increase in supervisor self-efficacy over the course of their participation in the program. This finding suggests several implications for school counseling practitioners. First, there are few opportunities for school counseling practitioners to receive formal training in supervision outside of academic institutions (Herlihy et al., 2002), and the SST-SC program is an accessible way for school counseling practitioners to engage in supervision training. Additionally, the SST-SC program could serve as a model for supervision training for state-level or national school counseling associations seeking to provide professional development opportunities for school counseling practitioners.

Moreover, the findings of this study demonstrated that participation in supervision training led to increased supervisor self-efficacy. Self-efficacy has been described as a positive indicator of work-related performance in the counseling field (Mullen et al., 2015). Thus, one can draw the logical conclusion that school counselors who experience increases in their supervisor self-efficacy may also experience positive impacts in other areas of their school counseling practice, such as service delivery or the provision of consultation.

Thirty-five percent ( $n = 20$ ) of participants in the current study had five or fewer years of experience working as a professional school counselor, almost half of them did not have any experience providing supervision for school counseling students, and eighty-three percent ( $n = 47$ ) had never provided post-graduate supervision for other school counselors. Researchers have demonstrated that novice school counselors seek induction and mentorship experiences, yet these opportunities are often not available for new school counseling practitioners (Curry & Bickmore, 2012; Bickmore & Curry, 2013). The fact that most of the school counselors who volunteered to engage in the SST-SC program and participate in the study were novice school counselors might reflect their desire for support couched in the context of professional development. While this indication may not be true for this particular group of novice school counselors, the results validate the implication that the SST-SC program may have served as a substitute induction program for some participants. The findings indicated that supervisor self-efficacy increased significantly over time for participants in the intervention group. Since increased supervisor self-efficacy has been associated with motivation, persistence, and self-reflection (Barnes, 2002), it may be possible that novice school counselors experience outcomes from supervision training that mirror those provided through induction programs. However, this implication underscores

the need for increased accessibility to induction, mentoring, and professional development opportunities for new school counseling practitioners.

### **Implications for Counselor Education**

Several implications related to counselor education based on the findings of this study exist. Providing supervision training using the SST-SC program or a similar option for school counseling practitioners offers many advantages for counselor education programs. Counselor education programs may benefit from providing supervision training opportunities for school counselors for several reasons. First, the Council for Accreditation of Counseling and Related Educational Programs (2015) requires that site supervisors have training in supervision. Counselor education programs depend on school counselors' willingness to train and mentor school counselors-in-training despite the likelihood that their job is already demanding, and they may not have the time or ability to access an entire graduate course on supervision (Cervoni & DeLucia-Waack, 2011). Moreover, the specialized work settings and job responsibilities of school counselors impact their access to and provision of supervision (Page et al., 2001). Therefore, providing an accessible site supervision training opportunity such as the SST-SC program would fulfill the CACREP (2015) requirement and remove potential barriers that school counselors may face in accessing supervision training.

Second, the results from this study affirmed previous findings, indicating that participation in site supervision training increases school counselors' supervisor self-efficacy. When placed in the context of school counseling students' fieldwork experiences, the implication is that site supervisors with higher perceived self-efficacy related to a particular supervision task are more likely to perform it well, whereas those with lower supervisor self-efficacy are more likely to perform it poorly or to avoid it altogether (DeKruyf, 2007). Johnson and Stewart (2008)

contended that supervisor self-efficacy is a crucial determining factor of supervisors' professional competence. Barnes (2002) noted that counselor and supervisor self-efficacy is regarded as a critical determinant of supervisory motivation and action. For example, supervisors possessing strong self-efficacy beliefs "may be more likely to persist when faced with challenging supervision situations" (Barnes, 2002, p. 15).

Moreover, counseling supervisors' self-efficacy beliefs about their supervision functions, such as providing feedback and modeling experiences, have the capacity to enhance counselor supervisees' learning and support their development as counselors-in-training. Self-efficacy has been established as a positive indicator of work-related performance in the counseling field (Mullen et al., 2015). Thus, training school counselors in a way that enhances their supervisor self-efficacy will also enhance their overall performance as site supervisors (Steward, 1998). There are clear benefits for counselor education programs in utilizing competent and effective site supervisors, such as ensuring quality fieldwork experiences for students and matriculating school counselor candidates who are better prepared to take on their professional roles.

In a qualitative study examining the experiences of school counselors who participated in a university-based face-to-face site supervision training program, Merlin-Knoblich et al. (2018) found that participants reported increased motivation to supervise school counseling students after receiving training in supervision. Supervisor self-efficacy may be a factor of motivation (Baggerly & Osborn, 2006; Bandura, 1997); thus, if universities offer training such as the SST-SC program to school counseling practitioners, they may increase participants' motivation to serve as site supervisors for their school counseling students' fieldwork experiences. Given the asynchronous online format of the SST-SC, universities with both face-to-face and online school counseling programs have the potential to increase their pool of available site supervisors.

Finally, counselor education programs may want to consider incorporating supervision training at the master's level, even though current CACREP standards (2015) do not require master's level supervision training. However, CACREP (2015) characterizes an understanding of the role of supervision in the counseling profession as essential knowledge for entry-level counselor education students. Specifically, this standard is described as part of students' orientation to the profession and as a facet of ethical practice (CACREP, 2015). This suggests that school counselors who have graduated from CACREP accredited programs may understand the value of supervision, yet they will not likely have been taught how to serve as supervisors.

Although research has indicated that supervision training is occurring to some degree in master's level counselor preparation programs, some counselor educators perceive it as relatively unimportant when compared to other school counseling content areas (Wartinger, 2005). However, given that school counseling literature suggests that novice school counselors experience challenges such as isolation and lack of access to valuable induction programs, one could draw the logical conclusion that school counseling students entering the field as new professional would benefit from peer supervision programs (Thomas, 2005). Training master's level school counseling students in supervision may serve to prepare novice school counselors to take on the challenges of the profession by equipping them to engage in peer supervision as a form of support and professional development.

### **Limitations**

In the current study, I utilized an experimental research design that employed a RCT (Campbell & Stanley, 1963). More specifically, a pretest-posttest control group design was used whereby participants were randomly assigned to two groups, with one group receiving the intervention and the other group not initially receiving the intervention, thus serving as a waitlist

control group (Campbell & Stanley, 1963; Heppner et al., 1992). Despite the study's design as a RCT, several limitations emerged that included threats to validity, issues related to sampling, and unexplored extraneous variables.

### **Threats to Validity**

While the research design controlled for most threats to validity (e.g., history, intrasession history, maturation, testing), several issues emerged related to treatment fidelity, instrumentation, and experimental mortality.

### ***Treatment Fidelity***

In intervention research, treatment fidelity refers to the considerations made to oversee and support the accuracy of the intervention implementation as it was planned, as well as to ensure that all participants receive the intervention in the way that it was intended and with consistency across participants (Smith et al., 2007). Despite the controlled context of the intervention (i.e., program delivery through Canvas), as the course facilitator I was not able to control for the amount of time that each participant committed to the program every week, nor was I able to compel participants to move through the program at exactly the same rate. While I was able to monitor participants' progress through the program by seeing their weekly contributions to tasks such as discussion boards, activities, and reflections, I was not able to force participants to complete every task, nor was I able to accurately assess how much time participants spent completing each task or engaging with program content.

This noted limitation related to program facilitation may have had an unknown effect on the outcome variables. For example, the capstone project of the program involved completion of a personalized model of school counseling supervision. Participants received a program completion certificate noting their fulfillment of eight professional development hours if they

submitted the capstone project, but even with this contingency, some participants opted not to complete the project even though they may have demonstrated consistent engagement in the intervention across the previous modules. Ancillary analyses indicated that completion of the capstone project appears to have increased supervisor self-efficacy for those who completed it more than for those participants in the intervention group who did not complete it, yet not all participants in the intervention group completed it.

### ***Instrumentation***

The SST-SCKA was an instrument that I developed for use in this study to assess participants' supervision knowledge over time. I followed DeVellis's (2017) recommended steps for scale development, and the items were aligned with Kline's (2005) rules for the development of sound scale items. Furthermore, I took steps to ensure content validity, such as utilizing an expert review panel to procure feedback on the extent to which the items reflected the content domains and then revised the scale accordingly (DeVellis, 2017). However, a notable limitation of the current study is this instrument's lack of evidence around construct validity. In addition, while the use of different forms intended to prevent the internal threat of validity of *testing*, the different forms introduced the threat of *instrumentation* because participants took a different measure for the pretest and posttest (Gall et al., 2007). Despite that the measures were administered consistently to both groups at all timepoints, the lack of psychometric validation for the SST-SCKA posed a threat to internal validity (Campbell & Stanley, 1963).

### ***Experimental Mortality***

Experimental mortality refers to the loss of participants from either group (Campbell & Stanley, 1963). In the current study, attrition emerged as a limitation. The total attrition rate was 15% ( $n = 10$ ), with seven participants from the intervention group not receiving the allocated

intervention and three participants being removed from the waitlist control group. The suggested approach for mitigating experimental mortality is to collect outcome information for all randomized participants, even if they did not receive the full intervention (Bhide et al., 2018; Campbell & Stanley, 1963). I made multiple attempts to collect outcome data from all participants, but I ceased in contacting participants who requested that their participation in the study be completely terminated. Personal contact with these participants indicated that job stress, personal factors, or an underestimate of commitment accounted for the attrition.

### ***Sampling***

Another limitation was related to sampling. The current study utilized convenience sampling, which may mean that the sample did not actually represent any real-world population (Gall et al., 2007; Warner, 2013). While the sample did mirror the demographic characteristics of school counselors who hold membership with ASCA, it did not represent the diverse gender or racial/ethnic characteristics of all school counselors in the entire population. While careful sample selection and the use of a control group mitigated this limitation (Campbell, 1986), it would be useful to investigate the effect of the intervention on outcome variables for a stratified random sample of U.S. school counselors in future studies.

### ***Extraneous Variables***

In the context of the current study, it is important to consider extraneous variables that were not measured but may have acted as covariates for the outcome variables of interest. For example, a more accurate measure of perceived stress or additional considerations such as burnout, turnover intention, or job satisfaction may have had a confounding effect on participants' scores for supervision knowledge or supervisor self-efficacy. Variables such as grade level or work roles may have also emerged as covariates if they had been captured.

My motivation for collecting data regarding participants' levels of perceived stress was based on the possibility that the effects from the current pandemic may have had a confounding effect on the outcomes of the study. While data were not sufficient to examine perceived stress as a covariate, the fact that the study was conducted amidst the throes of a global pandemic emerged as a limitation none-the-less. Studies have documented the effects of the COVID-19 pandemic on mental health and stress in the general population (Cooke et al., 2020; Pfefferbaum & North, 2020; Salari et al., 2020). Thus, one can draw a logical conclusion that the effects of the pandemic likely had an unknown impact on motivation and learning for participants.

### **Recommendations for Future Research**

In reflecting on the outcomes of the study, I have identified recommendations for future research that will extend the findings and advance the research on site supervisor training. First, there is a need to replicate the study to verify the findings and evaluate the SST-SC program using other methods. While I have presented the benefits that utilizing a control group design had for this study, this research design may have limited the potential sample size. Future studies could examine the effect of supervision training using a pretest, posttest design with a larger sample or a single case or longitudinal/time series design. In addition to alternative research designs, different analyses may provide more in-depth information about the outcome variables of interest for individual participants. For example, a mixed model or growth curve analysis could reveal changes over time for individual participants that have the potential to inform the design of the supervision training and implementation moving forward.

I did not examine perceived stress as covariate in this study, but there is reason to believe that the effects of the current global pandemic may have a pervasive impact across populations (Cooke et al., 2020; Salari et al., 2020). In addition, the typical array of stressors that school

counselors face on a daily basis (Kim & Lambie, 2018) may have an impact on their experiences of participating in professional development such as supervision training. Future studies should attempt to capture perceived stress more accurately, either as a covariate with outcome variables of interest or as an outcome variable on its own. A larger sample size might have supported perceived stress as a viable covariate in the current study, so future studies with more participants may reveal valuable information about the impact of stress on school counselors' professional development experiences.

Particularly in light of the limitations posed by the SST-SCKA as a heretofore unexamined measure of supervision knowledge, future studies should focus on establishing construct validity for this assessment. In addition, scores on the SST-SCKA should be compared to other measures in an attempt to establish discriminant and convergent validity (DeVellis, 2017). If additional data is captured using the SST-SCKA, an exploratory factor analysis could be conducted to discover the factor structure and to examine the internal reliability of the measure.

In addition to the constructs that were examined as outcome variables in this study, future studies could focus on additional outcome variables of interest. For example, Peed (2017) found that school counselors with higher levels of supervision training had higher professional identity scores than their counterparts with little or no training in supervision. Additional research is needed to examine professional identity development as an outcome variable resulting from supervision training. An intervention study with a control group design may reveal increases in professional identity scores that support Peed's (2017) findings.

Merlin-Knoblich et al. (2018) found that participants in a face-to-face site supervision training program for school counselors reported increased intentionality in how they approached

supervision, in how they enacted supervision behaviors, and in how they planned for supervision sessions. Researchers could seek to replicate this finding through additional qualitative studies. Merlin-Knoblich et al. (2018) also found that participants' motivation to supervise increased after completing the training program. Capturing data related to school counselors' motivation to serve as site supervisors may inform the manner in which supervision training is designed and implemented. Specifically, some of the participants in Merlin-Knoblich et al.'s (2019) study reported that receiving certain resources as a part of the training (e.g., an assemblage of supervision literature compiled as a manual) increased their desire to apply newly acquired knowledge and skills in supervision.

To that end, a careful examination of the individual components (i.e., modules, content topics) and learning activities (i.e., discussion boards, reflection prompts, self-assessments, case scenarios, application activities) of the SST-SC program may provide insight as to which parts of the training have the most impact on outcome variables. For example, future studies could examine the relationship between completion of the SST-SC program capstone project and supervisor self-efficacy or motivation to supervise. Additionally, researchers could conduct a qualitative case study focused on participants' experiences with the SST-SC learning activities to examine their impact on learning or other constructs, such as professional school counselor identity.

The SST-SC program was designed to be delivered over a seven-week timespan. Regardless of research that indicated more training in supervision predicts a higher sense of self-efficacy in providing supervision for school counseling students (DeKruyf & Pehrsson, 2011), future research is needed to examine the outcomes of a condensed or shorter version of the SST-SC program. While attrition is an expected reality of research, it could be possible that a shorter

intervention may retain a greater number of participants, as well as indicate similar outcomes. For example, a three-hour suicide gatekeeper training that combined experiential and didactic learning activities yielded positive gains in self-efficacy and skill development for participants (Pasco et al. 2012). Regardless of the specific length, literature suggests that supervision training opportunities should be both accessible and brief (DeKruyf & Pehrsson, 2011; Gruman & Purgason, 2019).

Additionally, future studies comparing the outcomes of supervision training delivered online, such as the SST-SC program, and in face-to-face contexts may provide important information about the accessibility needs of participants, as well as the impact of delivery format on outcome variables. For example, future studies could include an exit survey to investigate the causes of attrition. This type of investigation might contribute valuable information about barriers to participating in supervision training.

### **Conclusion**

In this study, I examined the outcomes associated with participation in an online site supervision training intervention for school counselors. Specifically, the current study investigated the effect of supervision training on participating school counselors' supervision knowledge and supervisor self-efficacy. I examined the SST-SC program, which was adapted from a previously established university-based supervision training program delivered in a face-to-face context (Merlin & Brendel, 2017). I utilized an experimental research design utilizing an RCT (Campbell & Stanley, 1963), which allowed the unbiased examination of outcomes associated with participation in the SST-SC program. More specifically, a pretest-posttest control group design was used whereby participants were randomly assigned to two groups, with one

group receiving the intervention and the other group not initially receiving the intervention, thus serving as a waitlist control group (Campbell & Stanley, 1963; Heppner et al., 1992).

I conducted two RM-ANOVAs on a sample of all school counselor participants ( $n = 57$ ) in the SST-SC program ( $n = 25$ ) and in the waitlist comparison group ( $n = 32$ ) to examine the effect of the intervention on supervision knowledge and supervisor self-efficacy. After data reduction based on missing cases, the total sample size for the SST-SCKA was 30, with 16 participants in the intervention group and 14 participants in the waitlist control group. The total sample size for the CSSES was 25, with 13 participants in the intervention group and 12 participants in the waitlist control group.

Several characteristics of the study contribute unique findings to the body of literature and research focused on counselor supervision training in general and even more specifically to supervision training in school counseling. The findings from this study indicated that while there was a statistically significant increase in supervision knowledge for participants over the course of the SST-SC program, that change occurred for both the intervention group and the waitlist control group. There were several possible explanations for this finding; thus, requiring additional research related to supervision knowledge as an outcome variable associated with supervision training for school counselors.

In addition, findings in the study revealed a statistically significant increase in supervisor self-efficacy over time for the intervention group but not for the waitlist control group, which provides evidence that participation in the SST-SC program accounted for the change. This finding is consistent with previous studies indicating that supervision training impacts supervisor self-efficacy (i.e., Brown et al., 2018; DeKruyf & Pehrsson, 2011; McMahan & Simons, 2004; Peed, 2017). While there were several limitations associated with the study, the combined

findings indicate implications for school counseling and counselor education and future research directions.

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## Appendix A

### Site Supervision Training for School Counselors (SST-SC)

The purpose of the *Site Supervision Training for School Counselors (SST-SC)* program is to develop in participants the foundational knowledge, essential skills, and professional dispositions necessary for experienced school counseling practitioners to effectively facilitate supervision for pre-service and novice school counselors. The SST-SC program addresses a range of topics that broadly include: (a) the fundamentals of supervision, (b) a developmental framework for supervision, (c) the supervisory relationship, (d) supervision models, (e) supervision interventions, (f) evaluation in supervision, (g) ethical/legal issues in supervision, and (h) personalizing a model for school counseling supervision. The SST-SC program is an asynchronous online training comprised of eight modules to be completed in a seven-week timespan.

#### Overall program objectives:

By the end of the program, participants will be able to:

1. Describe the conceptual frameworks of counseling supervision.
2. Explain developmental principles in the supervision process.
3. Compare various supervision models.
4. Develop a clear and concise model of school counseling supervision.
5. Apply effective supervision strategies and interventions.
6. Demonstrate culturally responsive supervision practices.
7. Analyze ethical and professional behavior of school counselor trainees.
8. Evaluate supervisee counseling skills, professional dispositions, and school counselor competencies.

#### Instructional Strategies:

- Readings
  - Weekly reading related to module content topics
  - Weekly reading specific to school counseling supervision models (M1-M5)
- Lecture
- Student-Course Interaction

- Discussion Board

### **Evaluation Methods:**

- Formative Assessments (ungraded)
  - Discussion Board Posts
  - Knowledge Checks
- Summative Assessment (ungraded)
  - Personalized Model of School Counseling Supervision

## **Curriculum Outline**

### **Module 0: Introduction**

M0 Content Topics:

- Welcome!
- Introduce Yourself (prompt for upload)
- Program Origins
- Navigating the Program
- Tech Requirements and Support Resources

M0 Learning Objectives:

1. Describe the origins of the SST-SC program.
2. Navigate the SST-SC program.
3. Initiate their participation in the SST-SC program.

Reading/Instructional Material: N/A

### **Module 1: Fundamentals of School Counseling Supervision**

M1 Content Topics:

- Experiences in Supervision (reflective prompt for discussion board)
- 2016 CACREP Requirements for SC Practicum and Internship Students
- Basic Assumptions and Purposes of Counseling Supervision
- Common Supervisor Tasks
- Successful and Unsuccessful Multicultural Supervisory Behaviors

M1 Learning Objectives:

1. Analyze positive and negative supervision experiences.
2. Recognize the training requirements for school counseling graduate students.
3. Articulate the basic tenets and tasks of supervision.
4. Identify successful and unsuccessful multicultural behaviors in supervision.
5. Acknowledge the importance of attending to multicultural considerations in supervision.

Reading/Instructional Material:

- *Self-Assessment of Supervision Competency* and Reflection Questions

- *Supervising School Counselors-in-Training: A Guide for Field Supervisors* (Studer, 2005)
- *ASCA National Model: The Foundation for Supervision of Practicum and Internship Students* (Murphy & Kaffenberger, 2007)

## **Module 2: Developmental Framework for Supervision and the Supervisory Relationship**

### M2 Content Topics:

- Depicting Supervisee Development (activity to complete and upload)
- Supervisee Developmental Stages
- Matching Your Supervisory Approach to Your Supervisee's Developmental Level
- Effective and Ineffective Supervisory Relationships
- Supporting Supervisees' Anxiety and Resistance

### M2 Learning Objectives:

1. Distinguish the common stages of supervisee development.
2. Discriminate appropriate supervisory environments for the developmental levels of supervisees.
3. Apply their understanding of supervisee development to identifying appropriate strategies for supporting the needs of supervisees.
4. Interpret the characteristics of effective and ineffective supervisory relationships.
5. Apply their understanding of effective supervisory relationships to identifying appropriate strategies for supporting supervisees' anxiety and resistance.

### Reading/Instructional Material:

- *Supervising Evaluation Practicum and Intern Students: A Developmental Model* (Brown, 1985)
- *An Integrative Psychological Developmental Model of Supervision for Professional School Counselors-in-Training* (Lambie & Sias, 2009)

## **Module 3: Supervision Models**

### M3 Content Topics:

- Psychotherapy-Based Supervision Models
- Developmental Models of Supervision
- Process Models of Supervision
- School Counseling Supervision Models
- Cultural Differences and Supervision Dynamics (reflective prompt for discussion board)

### M3 Learning Objectives:

1. Summarize the broad functions of supervision models.
2. Distinguish various types of psychotherapy-based, developmental, and process supervision models.
3. Compare various school counseling supervision models.

### Reading/Instructional Material:

- *The School Counseling Supervision Model: An Extension of the Discrimination Model* (Luke & Bernard, 2006)
- *School Counselors as Supervisors: An Integrated Approach for Supervising School Counseling Interns* (Nelson & Johnson, 1999)

#### **Module 4: Supervision Interventions**

##### M4 Content Topics:

- Promoting Skill Development
- Promoting Conceptualization
- Promoting Reflection
- Broaching in Supervision
- Broaching Scenarios (reflective prompt for discussion board)

##### M4 Learning Objectives:

1. Select supervision interventions to promote skill development.
2. Recognize supervision interventions to promote client/student conceptualization.
3. Choose supervision interventions to promote personal/professional reflection.
4. Analyze the challenges and benefits of broaching in supervision.
5. Apply their understanding of broaching to various school counseling supervision scenarios.

##### Reading/Instructional Material:

- Resources / Samples of Supervision Interventions
- *Broaching as a Strategy for Intercultural Understanding in Clinical Supervision* (Jones et al., 2019)
- *A Model of School Counseling Supervision: The Goals, Functions, Roles, and Systems Model* (Wood & Rayle, 2006)

#### **Module 5: Evaluation in Supervision**

##### M5 Content Topics:

- Justification for Evaluation
- Obstacles to Valuable Evaluation
- Suggestions for Valuable Evaluation
- Formative and Summative Evaluation
- Gatekeeping in Supervision
- Supervisor Professional Growth (reflective prompt for discussion board)

##### M5 Learning Objectives:

1. Acknowledge their role as evaluators in supervision.
2. Recognize the potential obstacles to valuable evaluation.
3. Discern the forms/functions of formative and summative evaluation in supervision.
4. Explain the role of gatekeeping in supervision.
5. Assess areas for professional growth related to facilitating

the supervisory relationship and identify steps and supports/resources needed to begin the work toward improvement.

Reading/Instructional Material:

- *Supervisees' Perspectives of Power Use in Supervision* (Murphy & Wright, 2005)
- *A Model for Supervising School Counseling Students Without Teaching Experience* (Peterson & Deuschle, 2006)

## **Module 6: Ethical/Legal Issues in Supervision**

M6 Content Topics:

- Ethical Codes and Their Functions
- Ethical Topics in Supervision
- Ethical Scenario (reflective prompt for discussion board)

M6 Learning Objectives:

1. Identify the ethical/legal issues in supervision.
2. Apply their understanding of ethical codes and functions to ethical dilemmas and/or topics in school counseling supervision.
3. Explain the purpose of creating a professional disclosure statement for use with supervisees.

Reading/Instructional Material:

- *Legal and Ethical Issues in School Counselor Supervision* (Herlihy, Gray, & McCollum, 2002)
- *Best Practices in Clinical Supervision* (Association for Counselor Education and Supervision, 2011)

## **Module 7: Personalizing a Model for School Counseling Supervision**

M7 Content Topics:

- Considerations for Developing a Personal Model of Supervision
  - Goals of Supervision
  - Supervision Interventions
  - Formative and Summative Evaluation
  - Ethical Considerations
  - Cultural Considerations

M7 Learning Objectives:

1. Apply their understanding of the various components of school counseling supervision to the formulation of a personal model for school counseling supervision.
2. Analyze the components of existing supervision models and evaluate their contextual utility for application in their work with school counseling students.
3. Synthesize existing supervision models to create a personal model for school counseling supervision.

## Appendix B

Hello School Counselors,

You are being invited to participate in a **FREE online school counselor site supervision training program**. The [Site Supervision Training for School Counselors \(SST-SC\) program](#) training is seven weeks long and includes self-paced online learning activities. The purpose of the training program is to develop in school counselors' the foundational knowledge, essential skills, and professional dispositions necessary for experienced school counseling practitioners to facilitate supervision for pre-service and novice school counselors.

The SST-ST program addresses a range of topics that broadly include: (a) the fundamentals of supervision, (b) a developmental framework for supervision, (c) the supervisory relationship, (d) supervision models, (e) supervision interventions, (f) evaluation in supervision, (g) ethical/legal issues in supervision, and (h) personalizing a model for school counseling supervision. The SST-SC is based on William and Mary's School Counseling Clinical Faculty Program, which is the supervision training provided to current and future site supervisors for William & Mary school counseling students.

The aim of this project is to evaluate and examine the effectiveness of the SST-SC program. As a part of your participation in the program, you will be asked to complete a series of questions about supervision and your experiences at a number of points moving through the training and after its completion. Your participation in this study is *important* and will help contribute to the research on school counseling site supervision training programs.

**You are eligible to participate if you:**

- Are at least 18 years of age
- Are certified as a school counselor in a U.S. state, federal district, or territory
- Are employed as a professional school counselor in a U.S. public school

This project was found to comply with appropriate ethical standards and was exempted from the need for formal review by the College of William and Mary Protection of Human Subjects Committee (phone 757-221-3966) on 2021-01-10 and expires on 2022-01-10.

You may report dissatisfaction with any aspect of this study to Dr. Thomas Ward, the Chair of the Protection of Human Subjects Committee by telephone (757-221-2358) or email ([tjward@wm.edu](mailto:tjward@wm.edu)).

**If you are interested in participating in the program, [sign up here](#). If you would like more information, please feel free to contact the researcher at [ambacker@email.wm.edu](mailto:ambacker@email.wm.edu) with any questions or concerns.**

Kind regards,

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## **Vita**

Adrienne M. Backer was born on May 24, 1978 in Littleton, New Hampshire. She earned her Bachelor of Arts degree in Art History from Boston University in May 2000. She went on to earn her Master of Education degree in Counselor Education with a School Counseling K-12 concentration from Plymouth State University in May 2010. After serving as a school counselor for eight years in Berlin, New Hampshire, she sought the opportunity for broader impact on the field of school counseling by pursuing a path in higher education. She earned her Doctor of Philosophy degree in Counselor Education and Supervision from William and Mary in August 2021.