Gamma Nu

Chapter of Chi Sigma Iota Professional Honor Society International

Spring 2021 Issue

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Meet Your Future Mental Health Professionals

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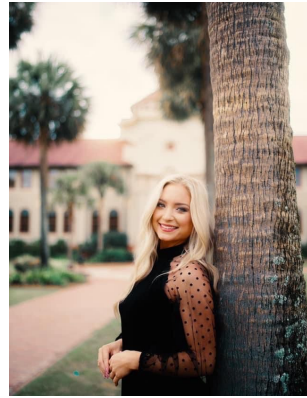Westside Elementary School,
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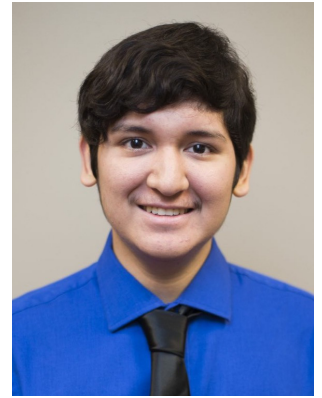tanimmo@valdosta.edu
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Spring New Member Initiation

On February 26th the Gamma Nu Chapter held an an in-person initiation ceremony welcoming it's 16 new members. The organization also held a virtual ceremony on February 28th. These members were chosen based on their academic and professional excellence in counseling. The new members received a certificate and a pin to signify their membership. New members will work towards CSI's mission to promote scholarship, research, professionalism, leadership, advocacy, and excellence in counseling.

New members:
Robin Mitchell, Jerome Walker, Kristin Bryan, Desiree Clark, Jessica Rosete, Bailey Old, Stacy Hodges, Gabrielle Brundidg, Mary Lou Martin, Jessi Salas, Kennedy Strozier, Morgan Adams, Erin Fincannon, Sydney Christian, Belinda Francois, and Alexis Cannon

Pictured from left to right: Jessi Salas, Erin Fincannon, Sydney Christian, Morgan Adams, Alexis Cannon, Kennedy Strozier, and Belinda Francois
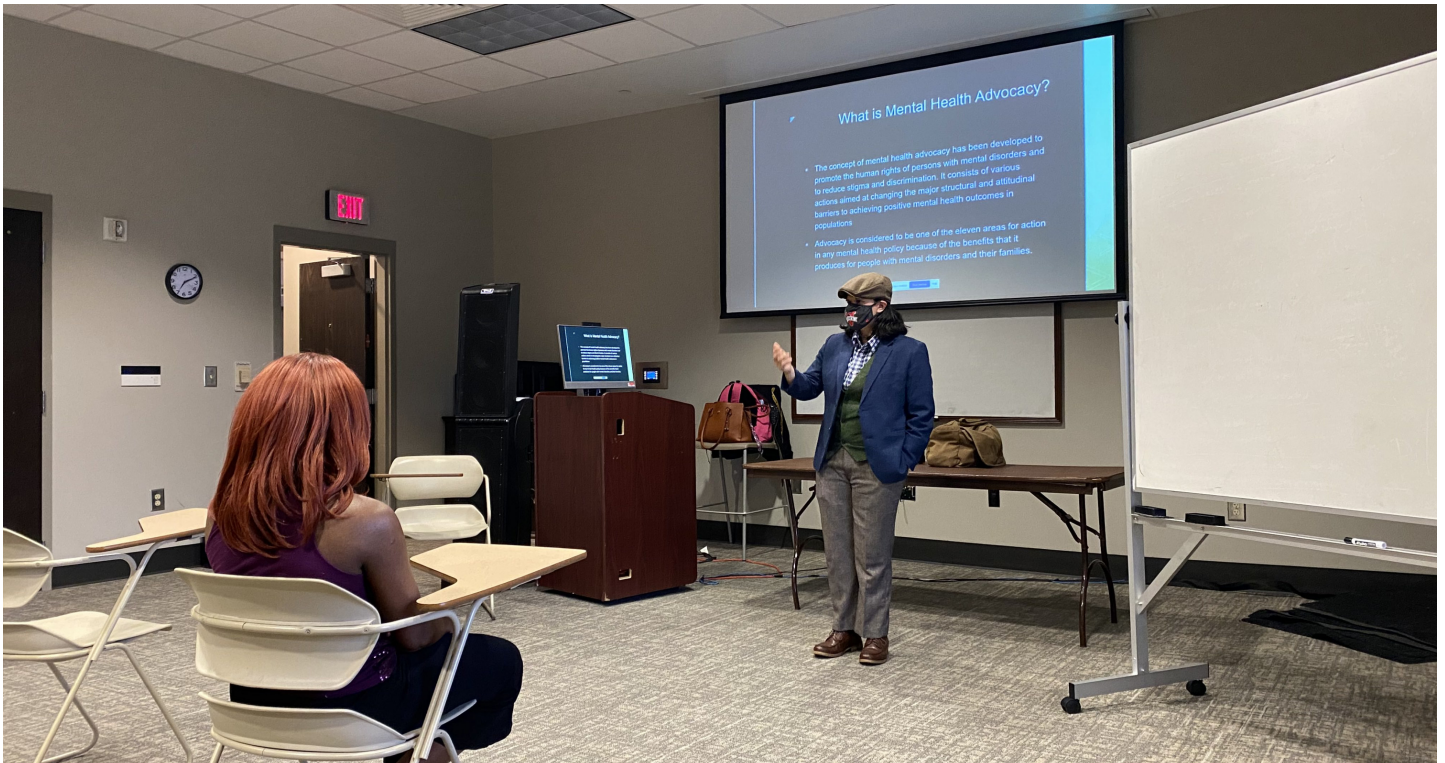
Mental Health Advocacy Workshop

On March 23rd, CSI hosted a mental health advocacy workshop. The event featured guest speaker, Dr. A.J. Ramirez. We had over 20 attendees between in-person and virtual attendance.

The Importance of Advocacy

We were honored to have Dr. A.J. Ramirez as our featured guest speaker. Dr. Ramirez is a lecturer in the Department of Sociology at Valdosta State University and the owner of L.E.A.F. Therapy Services in Valdosta, Georgia.

Dr. Ramirez spoke to attendees about current issues in the mental health advocacy including: cost of services, stigmas, and lack of services. She spoke about the importance of addressing these issues as mental health professionals. Dr. Ramirez's words and passion inspired all of us to begin advocating.

Getting Started

Following Dr. Ramirez's presentation, our very own Kay Cavender, Sydney Christian, and Belinda Francois taught attendees how to contact their state officials and get involved. Participants were instructed on how to contact officials through social media, phone, in-person meetings, emails, and by mail. They were also provided with a sample letter template. We cannot wait to see how participants use this information to begin advocating for the mental health profession.

Mental Health Advocacy and Helping Profession Virtual Research Conference

On April 24th, 2021, CSI hosted the Mental Health Advocacy and Helping Profession Virtual Research Conference. Faculty, graduate students from helping profession programs, and community professionals presented a variety of topics related to mental health, therapeutic interventions, advocacy around the community, and diversity considerations within the mental health professions. Our keynote speaker and sponsor, The Haven, informed attendees about the services they provide around the community, as well as presenting a special presentation pertaining to stalking orders and TPO's.

Individuals who attended the conference and completed the event survey sent out at the end of the conference received a virtual certificate of attendance. We also held a raffle for a gift basket from The Haven in which 100% of donation proceeds went towards the Haven, and in total, we raised $100. Our winner of the raffle was Morgan Adams. We thank all our presenters, speakers, attendees, and CSI members who worked towards making this conference a success. In addition, we give special thanks to The Haven for sponsoring the Mental Health Advocacy and Helping Profession Virtual Research Conference!

Raffle Winner:
Morgan Adams

For more details about The Haven, visit
https://www.valdostahaven.org/

Advice from School and Clinical Counseling Students

01 Words of Wisdom
Karla Charles

A good piece of advice that I would share with fellow mental health professionals is to never give up no matter how challenging your duties may get. It is only a matter of time and before you know it, you will be at the finish line. When I find myself complaining about sleepless nights or heavy tasks, I simply remember that others are being challenged way more than me. Appreciate the opportunity you have been given and complete it!

At the start of graduate school, my self-care was exercising. By the second semester, it was watching Netflix. Entering my program as a second-year student, I realized that I no longer had the time to practice those self-care activities due to school, family, and two jobs. I had no time for self-care. Family and religion are one of my biggest values, therefore, I have learned to make those values a part of my self-care. They help me spend quality time away from work and school and devote time to my emotional health. One thing that has helped me throughout the program is a very close friend of mine that is with me at all times, my planner. It reminds me of everything. It allows me to plan my weeks ahead of time and even finish tasks earlier than the expected deadline. I have strictly been using my planner for a year now, and without it, I know I would be in front of my supervisors and professors at this moment asking for deadline extensions. Or, rushing through an assignment the night before the deadline. My planner has also helped me remember and organize my self-care practices with my family. I use my planner to complete the majority of my tasks before the weekend to spend time in my self-care practices which is my family. If I do not have my planner on me, I use the Notes application to write last-minute tasks or smaller tasks on a note I have labeled as "To Do List." When I finish a task, I check the bubble circle to show everything I have completed that day. Another small piece of advice is to just ask! The worst thing that they can say is no.

Advice from School and Clinical Counseling Students

Room to Grow: Dealing with Imposter Syndrome
Jessi Salas

02

"I feel like I don't know what I am doing."
"I should know this by now."
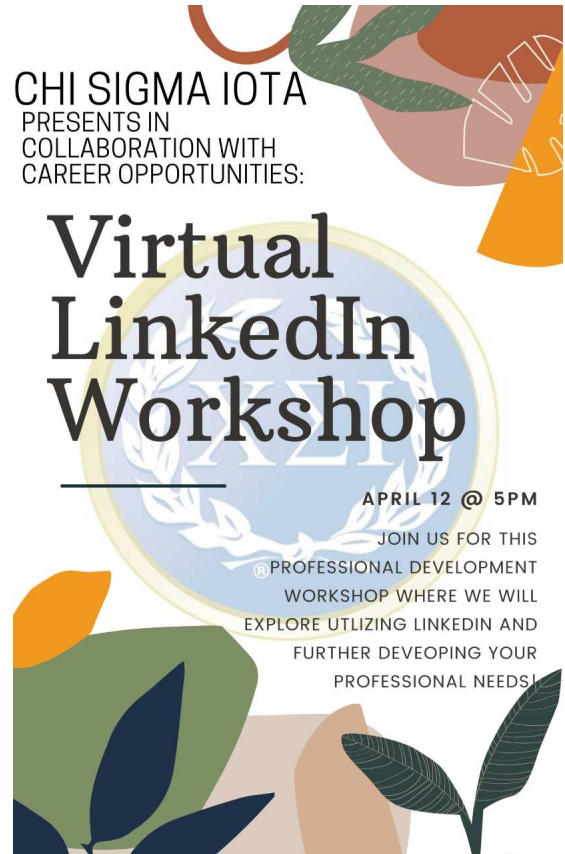"I shouldn't be where I am now."

The previous statements are examples of what counseling students may often think to themselves at times. Doubting one's own abilities, knowledge, and skills is a phenomenon known as imposter syndrome. For as long as I can remember, before I had decided to apply to the Clinical Mental Health Counseling program here at Valdosta State University, I had second thoughts about heading straight into graduate school, as I was just graduating with my bachelor's degree during the spring of 2020. I did not feel ready for graduate school, and I felt like an "imposter" who was simply faking it until I made it.

Last semester in our Counseling Skills class, one of our professors asked the whole class if they had or were currently experiencing imposter syndrome. In unison, the whole class raised their hands. However, even our professor raised her hand, and admittedly, this surprised me. I was under the impression that with time, the imposter syndrome would completely dissipate. As bad as it may sound, I came to the realization that imposter syndrome may linger around for years or even the remainder of your career. Granted, it is likely that imposter syndrome may decrease in intensity, but not completely disappear. Is there a positive side to this? I believe so. The simple fact that one may experience imposter syndrome may signify that one is aware of their limitations and acknowledging one's deficiencies can enable them to take small steps in improving their abilities. Dealing with imposter syndrome may involve seeking more training, reading the literature, and seeking supervision. I am certain that as we begin our careers as counselors, that there is always room to grow.

Virtual LinkedIn Workshop

On April 12th the Gamma Nu Chapter held a virtual LinkedIn Workshop in collaboration with the Valdosta State University's Career Opportunities Department. During the workshop, attendees received valuable information about the power of social media and the effect it can have on future employment opportunities. Attendees also learned about what they should, and should not, share on their professional LinkedIn profiles. The office of Career Opportunities also shared some helpful resources on how to check if your headshot/picture is appropriate. For more information on resources available through Career Opportunities, visit: https://www.valdosta.edu/student/student-services/career-services/student-resources.php

CHI SIGMA IOTA
PRESENTS IN COLLABORATION WITH CAREER OPPORTUNITIES:

Virtual LinkedIn Workshop

APRIL 12 @ 5PM
JOIN US FOR THIS PROFESSIONAL DEVELOPMENT WORKSHOP WHERE WE WILL EXPLORE UTLIZING LINKEDIN AND FURTHER DEVEOPING YOUR PROFESSIONAL NEEDS!

Thank You to Our CFAs!

We want to thank our Chapter Faculty Advisor's (CFAs), Dr. Cakmakci and Dr. Montague for all their support this year. Both advisors have been an integral part of our chapter's success. We appreciate their continued assistance, and all the ideas they have brought to the chapter.

Dr. Cakmakci

Dr. Montague

End of the Year Celebration

On April 25th the Gamma Nu Chapter gathered in the Student Union Ballroom to celebrate everything we have accomplished this year at our End of the Year Celebration. This semester, our chapter grew by sixteen members. These members include clinical mental health students, school counseling students, Educational Specialist students, and our Forsyth cohort. We also celebrated the nine events put on by the chapter this year. We are proud of the work we did for CSI and the mental health profession.

Later in the celebration, the chapter's current board members passed on the torch to Gamma Nu's 2021-2022 board members: Sydney Christian (President), Jessi Salas (Vice President), Belinda Francois (Director of Finances), Jerome Walker (Director of Administration), Bailey Old (Communications Director), and Morgan Adams (Event Coordinator). The new officers declared their commitment to perform their duties, and the new president, Sydney Christian, gave her first remarks.

In celebration of a successful year and to further foster community engagement, Gamma Nu collected donations for the Child Advocacy Center. Members donated snacks and juice boxes which will be provided to the children attending the center.

COUNSELOR EDUCATION STUDENT WORK AND RESEARCH

A Review of Psychedelic-Assisted Psychotherapy: Implications, Issues and Future for

Counseling

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RSCH 7100: Research Methodology in Education

Dr. Huzeyfe Cakmakci

November 5, 2020

Abstract

Currently, standard pharmacological interventions and standard psychotherapies are limited in efficacy. There is currently a need to develop more efficient interventions concerning the field of mental health, and recent research has shown that psychedelic-assisted psychotherapy may be a promising alternative to the current treatments that are available. Psychedelic-assisted psychotherapy has been shown to efficiently treat social anxiety, substance abuse, depression, posttraumatic stress disorder and even distress arising from terminal illness. This study reviewed, examined and discussed the implications of psychedelic-assisted psychotherapy to the field of counseling. Despite the fact that more research is required to maximize and enhance the benefits of psychedelic-assisted psychotherapy, this treatment appears to be a promising intervention for many individuals, which may have a future place within the field of counseling.

Keywords: psychedelic-assisted psychotherapy, anxiety, depression, addiction, terminal illness, counseling

A Review of Psychedelic-Assisted Psychotherapy: Implications, Issues and Future for

Counseling

For thousands of years, powerful psychoactive agents known as psychedelics (also known as psychedelics) have been utilized for therapeutic purposes to facilitate changes in perception and alter states of consciousness (Hoffmann, 1980). In the 1950s, hallucinogens such as LSD were researched and proposed to be a biological framework to understand psychotic illnesses such as schizophrenia (Oram, 2018). In addition, psychodynamic oriented researchers realized that LSD unlocked the unconscious mind, which gave rise to what would be referred to as "psycholytic" therapy (Oram, 2018). Unfortunately, with the advent of the Controlled Substances Act of 1970, much research into the application of many controlled substances, including psychedelics, has been severely limited and restricted (Andreae et al., 2016). However, many literature reviews and clinical randomized trials have found promising results of psychedelics combined with psychotherapy (referred to as psychedelic-assisted psychotherapy) in treating mental disorders, substance abuse and even distress resulting from terminal illness (Agin-Liebes et al., 2020; Ot'alora et al., 2018; Wheeler & Dyer, 2020). These findings could not come at a better time, as current interventions such as conventional antidepressants and standard psychotherapies are limited in efficacy, as some mental illnesses such as posttraumatic stress disorder are difficult to treat (Ot'alora et al., 2018).

This purpose of this literature review is to summarize much of the literature surrounding psychedelic-assisted psychotherapy and determine the issues concerning this intervention, as well as the implications of psychedelic-assisted psychotherapy for the field of counseling. This literature review provides overviews of past research that investigated the use of psychedelic-assisted psychotherapy for mental illness, substance abuse, and for distress

experienced by individuals who are considered terminally ill. Throughout the literature review, the following research question was proposed: What are the benefits, drawbacks, and implications of psychedelic-assisted psychotherapy for both clients and counselors? Furthermore, the paper concludes by discussing limitations and themes seen within the literature, as well as discussing the significance of psychedelic-assisted psychotherapy for the counseling field. Within the literature review, articles that were included discussed the use of all types of psychedelics (e.g., MDMA, psilocybin, LSD, ayahuasca, ketamine) that were paired with psychotherapeutic interventions. Fort the purposes of this review, articles that did not combine psychedelics with psychotherapy were excluded because of (a) the potential harm that could result from psychedelic use without psychotherapeutic intervention, and (b) this review focuses more so on the implications that psychedelic-assisted psychotherapy has for the counseling profession.

History and Overview of Psychedelics in Psychotherapy

Perhaps one of the most well-known psychedelics, known as LSD-25 or lysergic acid diethylamide, has a deep history within the field of psychotherapy. Originally created by Hoffman in 1938, LSD-25 was synthesized as a circulatory and respiratory stimulant (1980). A few years passed, and Hoffman discovered the potent effects of LSD on his consciousness through accidental consumption, which resulted in a vivid, dreamlike state that also resulted in visual hallucinations (Hoffman, 1980). After Hoffman's profound experiences with LSD, experiments began to take place with animals and biological research (Hoffman, 1980). The first experiments on human beings was carried out on both healthy research participants and clients who had schizophrenia (Hoffman, 1980). Hoffman (1980) noted that LSD within psychotherapy could be utilized within a psychoanalytic framework which could result in

bringing suppressed memories to appear again within the consciousness of a client. In addition, the integration of LSD and psychotherapy appeared to result in improved rapport with the psychiatrist who administered the substance and could lead to enhanced suggestibility while under the influence of LSD (Hoffman, 1980). However, with the advent of the Controlled Substances Act of 1970, most the stigma that continues to surround the use of psychedelics stems from the association of psychedelic use by the counterculture, which was characterized by a sizable majority of the youth questioning the societal norms beginning in the 1950s (Barber, 2018).

Brief Psychopharmacology of Psychedelics

Hallucinogens can be classified into five categories: classical psychedelics (e.g., LSD, psilocybin, DMT), entactogens (e.g., MDMA), dissociatives (e.g., ketamine, nitrous oxide, DXM), atypical hallucinogens (e.g., salvinorin A, ibogaine, THC), and deliriants (e.g., datura, atropine). Classical psychedelics appear to exert their effects on the serotonin 2A receptor, which is why they are referred to as serotonergic agonists (Garcia-Romeu, Kersgaard, & Addy, 2016). Entactogens are monoamine releasers and reuptake inhibitors, while dissociatives exert their effects on the NMDA receptors, which are known as NMDA antagonists (Garcia-Romeu, Kersgaard, & Addy, 2016). Atypical hallucinogens affect several different neurotransmitter systems, such as salvinorin A which affects the kappa opioid receptor, while deliriants (also known as anticholinergics) exert their effects on the acetylcholine receptors (Garcia-Romeu, Kersgaard, & Addy, 2016). While these classes of hallucinogens have significantly different mechanisms of action, they appear to share some similarities with regards to how they can temporarily alter states of consciousness, as well as

inducing changes in cognition, affect, perception and somatic sensations (Garcia, Kersgaard, & Addy, 2016).

Psychedelic-Assisted Psychotherapy for Mental Illnesses

Social Anxiety

Within this randomized, double-blind study, Danforth et al. (2018) investigated the effects of MDMA-assisted psychotherapy on autistic adults to reduce social anxiety. While standard psychotherapy approaches to reduce social anxiety in autistic adults shows limited effectiveness, it was hypothesized that MDMA-assisted psychotherapy would significantly reduce social fear and avoidance. The results indicated that the MDMA experimental group shows significantly greater improvement in social anxiety than the placebo group. The article concludes that MDMA-assisted psychotherapy demonstrates rapid and stable improvement in social anxiety symptoms among autistic adults.

Posttraumatic Stress Disorder

In addition to social anxiety, psychedelics such as MDMA can be utilized to treat posttraumatic stress disorder. Ot'alora et al. (2018) examined the efficacy of MDMA-assisted therapy for individuals with posttraumatic stress disorder (PTSD). Posttraumatic stress disorder is a psychiatric condition which consists of panic, reliving traumatic events, anxiety, negative emotions, and hyperarousal (Ot'alora et al., 2018). Unfortunately, standard psychotherapies and pharmacological interventions show limited efficacy, which presents a case for new treatments that could alleviate or completely diminish symptoms of PTSD. Within the beginning of the article, the author suggests that based upon previous theories from trauma theorists about the need for emotional engagement when processing traumatic

experiences, being under the influence of MDMA throughout psychotherapy could assist clients in remaining emotionally connected while working with these difficult experiences (Foa, 2007; Jaycox et al., 1998, as cited by Ot'alora, 2018).

Further within this study, twenty-eight individuals with chronic posttraumatic stress disorder were included within this study, and they were placed into two active dose groups (100 and 125 mg) and one low dose group (40 mg) of MDMA during 8-hour psychotherapy sessions (Ot'alora et al., 2018). Afterwards, there was a 12-month follow-up assessment for PTSD symptoms. The results found that there was a significant reduction in symptoms of PTSD, with 76% of participants no longer meeting PTSD diagnostic criteria (Ot'alora et al., 2018). In fact, there were improvements in depression, sleep quality and dissociation, which suggests sustained gains even after active treatment (Ot'alora et al., 2018). In addition, there were no serious adverse effects after the treatment, with the most frequent side effects including tight jaw, anxiety, fatigue, and insomnia, but these symptoms later subsided (Ot'alora et al., 2018).

Moreover, there is even a study which compares current pharmacological interventions with psychedelic-assisted psychotherapy. Within this review, Feduccia et al. (2019) compares MDMA-assisted psychotherapy with two antidepressants approved for posttraumatic stress disorder, which are sertraline and paroxetine. The study included patients with PTSD, which is a psychiatric disorder associated with increased suicide risk, substance abuse, depression and decreased cognitive and psychosocial functioning. The results indicated that MDMA-assisted therapy was superior in terms of efficacy, with an effect size of 0.9, which was double that of paroxetine and triple that of sertraline. In addition, it was revealed that MDMA-assisted psychotherapy was safer and had less side effects than those of existing medications

such as sertraline and paroxetine. The authors conclude that MDMA-assisted psychotherapy has great potential in treating patients who suffer from PTSD.

Treatment-Resistant Depression

Fortunately, psychedelic-assisted psychotherapy shows promise in treating treatment-resistant depression. Wilkinson et al. (2017) conducted an open-label trial that combined cognitive behavioral therapy (CBT) with ketamine, an NDMA receptor antagonist. Previous research has indicated that ketamine has rapid, significant antidepressant effects when delivered through both intravenous and intranasal means (Lapidus et al., 2014). For this reason, Wilkinson et al. (2017) contended that cognitive behavioral therapy would extend the pre-existing benefits of ketamine for treatment-resistant depression. Within this study, 16 participants were included in a 12-week session treatment intervention that combined ketamine with CBT. For half the individuals that responded to the ketamine, CBT appeared to produce antidepressant effects that were longer lasting. Wilkinson et al. (2017) concludes that CBT may assist in maintaining the antidepressant effects of ketamine in treatment-resistant depression and suggests that randomized controlled trials should investigate the antidepressant effects of this combination of treatments.

Major Depressive Disorder

Within a randomized, controlled study, 27 participants with a major depressive disorder diagnosis were included in two sessions of psilocybin-assisted psychotherapy (Davis et al., 2020). Participants who were included within this study were aged 21 to 75 years with a major depressive disorder diagnosis, did not currently utilize antidepressant medications, and did not have a history of psychotic disorders. Out of the 27 participants, 24 of participants

completed the intervention. Depression severity was measured utilizing the GRID-Hamilton

Depression Rating Scale (GRID-HAMD) and the Quick Inventory of Depressive

Symptomatology-Self Rated (QIDS-SR), and then comparing baseline results to intervention

results. Davis et al. (2020) concluded that that the integration of psilocybin and psychotherapy

displays efficacy in treating major depressive disorder, which extends the therapeutic uses for

not only treatment-resistant depression, but also major depressive disorder.

Psychedelic-Assisted Psychotherapy for Substance Abuse

Substance Abuse Disorders

In addition to utilizing psychedelic-assisted psychotherapy for mental illness, there has

been research indicating the benefits of psychedelic-assisted psychotherapy for substance

abuse. Within a qualitative study, Argento et al. (2019) explored the impact of ayahuasca-

assisted therapy on addiction and other substance abuse issues with 11 adult Indigenous

participants at a ceremonial retreat in Canada. Participants were asked to participate in group

talk therapy sessions, as well as breathing and meditation exercises during the day leading up

to the ingestion of the ayahuasca. Before drinking the ayahuasca, the participants were invited

to share their insights about traumatic life experiences, psychological and emotional

problems, including substance abuse problems. Afterwards, semi-structured interviews were

conducted following the retreats at a 6-month follow up. A thematic analysis was conducted,

and the results indicated that participants reported diminished substance use and cravings. In

addition to this, the participants experienced enhanced spiritual and nature connection.

Argento et al. (2019) concluded that ayahuasca-assisted therapy has significant therapeutic

potential and provides insight into the importance of enhanced connectedness and relevant

themes in the treatment of substance abuse.

Tobacco Use Addiction

With regards to tobacco use addiction, Johnson, Garcia-Romeu, and Griffiths (2017) completed an open-label pilot study in which they followed up with 15 participants with heavy smoking behaviors who would smoke an average of 19 cigarettes per day. The participants had no history of severe mental illness and underwent a 15-week combination treatment which consisted of CBT, mindfulness training, and guided imagery for smoking cessation, as well as a high dose of psilocybin (30 mg/70 kg). Smoking biomarkers, self-reported measures, and questionaries concerning persisting effects and mystical experiences were utilized to measure outcomes related to the effects of psilocybin-assisted psychotherapy on smoking cessation. After a 12-month follow-up, 10 participants were confirmed as being abstinent from smoking, while long-term follow-ups indicated that 9 participants remained smoking abstinent. These findings suggest that psilocybin-assisted psychotherapy, when structured in a treatment program, could possibly be an effective treatment for long-term smoking habits, and could even be utilized for other addictions.

Alcohol Use Disorder

Dakwar et al. (2020) examined the effectiveness of ketamine combined with motivational enhancement therapy for adults with alcohol dependence. Within this randomized controlled pilot trial, 40 participants were randomly assigned to an intravenous administration of ketamine or midazolam in combination with motivational enhancement therapy. Abstinence of alcohol was measured through urine testing over a period of 21 days after ketamine infusion, and the results indicated that ketamine combined with psychotherapy significantly increased the likelihood of abstinence of alcohol in individuals, and also delayed the time to relapse when compared to midazolam. In addition, it was revealed that the

ketamine infusions were tolerated well, with little to no adverse effects. Dakwar et al. (2020) concludes that a single ketamine infusion combined with psychotherapy can result in positive clinical outcomes for individuals with alcohol use disorder and suggests integration of ketamine infusions with psychotherapy to maximize benefits.

Psychedelic-Assisted Psychotherapy for Distress from Terminal Illnesses

Cancer-related distress

Within a double-blind, placebo-controlled, crossover study conducted by Ross et al. (2016), 29 patients with cancer-related depression and anxiety were randomly assigned a single-dose of psilocybin (0.3 mg/kg) or niacin along with psychotherapy. The participants filled out several scales such as the Beck Depression Inventory (BDI) and the State-Trait Anxiety Inventory (STAI), along with self-report measures of depression and anxiety related to death. It was found that psilocybin in combination with psychotherapy led to immediate, significant reductions in anxiety and depression within cancer patients. This suggests that psilocybin is a promising alternative for antidepressants for individuals with cancer-related psychological distress.

Long-term AIDS-related distress

Within a single-arm, open-label, pilot study, Anderson et al. (2020) examined the safety, feasibility, and efficacy of psilocybin-assisted group therapy for men who were long-term AIDS survivors. 18 participants underwent seven weeks of individual and group psychotherapy, along with one individual psilocybin administration session. The results indicated that there were zero psilocybin-related serious adverse events. In addition, there were significant improvements in mood, anxiety, depression and demoralization throughout

and after the treatments, lasting even months after the single dose of psilocybin. Anderson et al. (2020) concluded that psilocybin-assisted group therapy may be an effective means of reducing demoralization in older men who were long-term AIDS survivors.

Ethical Considerations

With the advent of psychedelic-assisted psychotherapy, there are a couple of ethical concerns that may arise. For one, there are concerns, mainly within the field of psychiatry, that may extend to the counseling profession as well, such as the issue of skepticism on utilizing controlled substances which are associated with the use of other illicit substances (Johnson, 2018). The use of psychedelic substances in uncontrolled settings can lead to anxiety and result in dangerous behavior (Johnson, 2018). This can especially be a problem for individuals who have psychotic disorders or are predisposed to psychotic disorders, who are at risk of being harmed by the use of these substances (Johnson, 2018). However, this could be a further reason to place criteria on whether a client is eligible for psychedelic-assisted psychotherapy. Understandably so, many studies already include an exclusion criterion for participants in psychedelic-assisted psychotherapy research trials, generally excluding anyone with a history of psychosis or schizophrenia (Ross et al., 2016; Danforth et al., 2018; Dakwar et al., 2020; Anderson et al., 2020). Therefore, it appears that if psychedelic-assisted psychotherapy were to become approved for certain psychiatric disorders, individuals with a history of psychotic disorders who would likely face psychological harm would be excluded accordingly.

Another ethical consideration that should be considered within the practice of psychedelic-assisted psychotherapy, is the possibility of adverse effects from some certain psychedelic substances. While some studies show that psychedelic substances such as psilocybin

were tolerated with little to no serious adverse effects (Ross et al., 2016; Anderson et al., 2020), other studies take the stance that utilizing some psychedelic substances in psychotherapy may ultimately do more harm than good (Parrot, 2014). For example, past research also suggests that there is "serotonin neurotoxicity" associated with MDMA use in studies with animals, and that there is evidence of serotonin neurotoxicity in past users of MDMA (McCann, Eligulashvili, & Ricaurte, 2000). There are also indications of brain damage in chronic ketamine users, based on multi-modal imaging studies conducted by Lin (2018). Therefore, there should be caution in specifying whether some psychedelic substances can be utilized safely for a certain period of time throughout psychedelic-assisted psychotherapy.

Implications for Counseling Practice

Considering the fact that there is plenty of empirical support for psychedelic-assisted psychotherapy, the question now is the following: How does this involve the counseling profession? While counselors would not actually administer the drug itself, depending on the circumstances later in the future, they may be responsible for providing the psychotherapeutic intervention itself. However, psychedelic-assisted psychotherapy would require the counselor to have some knowledge of how the treatment works and possible side effects for clients, which raises questions on the required training for this new treatment approach. Fortunately, there are now proposed directions for the structuring of psychedelic-assisted psychotherapy, such as new competencies being proposed and a framework being proposed for psychedelic-assisted psychotherapy (Phelps, 2017; Sloshower et al., 2020). Therefore, it may be of benefit to the counseling field to devise methods of incorporating certain theoretical orientations into psychedelic-assisted psychotherapy. In addition, it would be beneficial for counselors to develop further competencies for the training of therapists who would provide psychedelic-

assisted psychotherapy. According to Curtis (2020), mental health counselors should consider the necessity for medical consultation being readily available, having a solid knowledge of relevant psychopharmacology, negative incident prevention, and requiring new counselors to work alongside those who already have some experience. Some established routines for psychedelic-assisted psychotherapy include having preparatory psychotherapeutic sessions prior to administration of the psychedelic and including the client in follow-up sessions, as well as establishing rapport and trust between the client and the counselor (Curtis, 2020).

Limitations

Throughout much of the literature, there were some limitations. For one, many of these studies had small sample sizes and some of studies were open-label studies, which may be more vulnerable to possible confounds in the research process. Another significant limitation within the literature, is the lack of minorities included within the studies. Most studies were composed of Caucasian males, which may be a major problem since results may not generalize to other populations. Finally, another key limitation found within the literature consists of how many research designs lack a highly robust structure. For this reason, future research should conduct more randomized, double-blind studies with more vigorous experimental designs. Moreover, further research may want to devise ways to incorporate specific theoretical orientations, such as cognitive behavioral therapy, into psychedelic-assisted psychotherapy. In addition, it may be worthwhile for future research to investigate which specific psychedelics work for certain psychiatric conditions.

Conclusion

All things considered, it is evident that psychedelic-assisted psychotherapy has potential benefits for certain mental disorders such as treatment-resistant depression, anxiety and PTSD, distress associated with terminal illness, as well as potential use for substance abuse disorders. Before considering the psychedelic-assisted psychotherapy approach on a wider scale, there are ethical implications that must be addressed soon by all mental health professionals, such as the potential harms and benefits of such a therapeutic intervention, the current research and legality of this approach, as well as the implications this approach has for the counseling profession specifically. Already, one author has suggested that psychedelic-assisted psychotherapy could be considered a new paradigm shift in the field of psychiatry, as it has started to mark a shift in the approach and the way that mental health professionals view mental health and new interventions for the treatment of certain psychological disorders (Schenberg, 2018). This of course, may concern the counseling profession one day, and such a significant topic cannot be ignored for too long.

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Importance of School Counselors for Students in Foster Care

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Abstract

Throughout my life I have always held a special place in my heart for those who are involved in the foster care system in America. Once I began this program toward becoming a school counselor, my eyes became even more open to the problems that students within the foster care system face each and every day. I feel like school counselors can make a major impact on the lives of students in foster care, from helping them deal with trauma and emotional and behavioral issues they may be facing, to preparing them for life once they age out of the foster care system and graduate from school. In this literature review, I use several different articles and studies which help to describe the problems that these students are facing, different kinds of methods that are proving to be effective, and various ways that school counselors can positively impact the lives of these students. Overall, I have found just what I thought I would that school counselors are making a difference and students who are and have been in foster care are becoming better equipped to be functioning, productive, and thriving adults in today's world.

Importance of School Counselors for Students in Foster Care

As a school counselor, it is important to realize the different populations of students that exist within school systems. One particular population, that may be overlooked at times, are students who come from foster care. These students carry with them baggage that other students may not have, and that others may not even be aware of. For those who may be unfamiliar with foster care we should begin by clarifying that foster care serves as a hopefully temporary placement for children outside of their original home (DeGarmo, 2015).

Foster Care

In today's world, it is a sad reality that more and more children are entering into foster care systems each year and are leaving their original family unit. This being said, these students face many challenges and obstacles that other students may not even be aware of. Dr. Sandra Altshuler describes this problem in her article *A Reveille for School Social Workers: Children in Foster Care Need Our Help!* (1997). With this in mind, this particular article is over 20 years and the problem has only grown since then. However, it is important to begin here so that we can get a firm understanding of what exactly is happening to these students. Dr. Altshuler describes the fact that these children face struggling in school more so than others because of their specific needs such as ethnicity, race, socioeconomic status, and even special needs (Altshuler, 1997). Students who are in foster care do not have a typical family unit and they face challenges that others, in their same classroom, do not face. This being said, these students are met with a series of sudden changes including separation from the life that they know and are familiar with. Even if their home life is filled with abuse and neglect and countless other issues, it is what is known and comfortable to them and when they enter into the foster care system they are quickly moved to an unknown, and possibly frightening, new place.

In 2019 in the United States, there were over 400,000 children within the foster care system, but it is important to realize that there are countless reasons that children are placed into the foster system. These issues can include the child is not safe in their home, the child could be facing abuse, the parents or guardians may be incompetent and unable to care for the child, or the child may be facing some sort of medical or behavioral issue that is beyond the range of care that the original parent or guardian can provide (Barnow, et. al, 2015). Children are therefore removed from their family unit in order and in hopes for them to have a better life, however, that is unfortunately not always the case. There are flaws that exist within the foster care system and youth and children may wind up facing hardships within their foster homes, such as some form of abuse or neglect (Lane, 2017). In fact, many students in the foster care system who face other issues such as behavioral issues may have an even more difficult time being placed. When placing children, it is important for child need factors to be considered in the help-seeking process for students who are in foster care (Zima, et. al, 2000). This being said, it is important to remember that even though foster care is meant to be a temporary fix, with the hopes that children will one day be able to return to their family of origin, all precautions must be taken in order for the child to be able to thrive no matter where they are placed. Another important consideration to be made is for foster students who identify as LGBTQ. These students often are at a completely different level of risk in the foster care system and they desperately need their school counselors to step up and collaborate with all involved parties on their behalf in order to make sure that these LGBTQ youth are being taken care of in an appropriate and healthy manner (Beck, et. al, 2018).

In light of these issues that students are facing, it is easy to understand how this can lead to these students facing many difficulties in adjustment, performance, and even development and

may even contribute to more issues in the future (DeGarmo, 2015). These particular students'

struggles with school are demonstrated through low test scores, achievements, and school

performance compared to their peers and standard scores (Altshuler, 1997). In light of these

issues, it is obvious that these students who are in foster care are struggling to reach success in

their schools, but they are also facing many struggles outside of the school system. These issues

include their living situation, the factors of why they are currently in foster care, and countless

emotional problems that often go unnoticed (Altshuler, 1997). However, this provides an area for

school counselors to intervene and offer help and support to these students.

Individual and Group Counseling

School counselors also offer counseling both to individual students and to students in a

group, and Dr. Altshuler makes the point that counseling can be very beneficial for students who

are in the foster care system (Altshuler, 1997). Students who are in foster care can benefit from

counseling by working with the school counselor to create goals and plans to achieve those goals

as well as working with teachers to figure out what specific needs the student has and figuring

out a way to address those needs, whether they be behavioral or emotional (Altshuler, 1997).

Counseling can be very beneficial because it can provide a place for students to discuss the many

things that are bothering them, but can also serve as a place where they can come to learn about

different societal norms and expectations so that they are better prepared to flourish (Altshuler,

1997).

Providing guidance to students in foster care is just one step towards better achievement,

another way that school counselors can assist is to reach out to the foster parents and invite them

to be an active participant in the educational success of their foster student (Altshuler, 1997).

There are many times where the focus is solely on the student, that the foster parents get

forgotten. However, they play a key role in the success of the student so school counselors should collaborate with them and work toward truly including them and integrating them in working to best meet the needs of the student.

When offering counseling for those in, or recently aged out, of foster care, it has been proven that group counseling, specifically group career counseling interventions, are effective because group members tend to benefit from the support of likeminded individuals and also the increased opportunities to learn from their peers (Stevenson, 2017). In group sessions, career counselors can assist clients with self-exploration and help guide foster youth by introducing them to a great deal of job opportunities based on possibilities that the group may be interested in. This is effective in group counseling because it opens up individuals' ideas and options to others, as opposed to individual counseling where a youth may tend to limit their options (Stevenson, 2017). Another aspect of group counseling to certain individuals, it is important for the counselor to try and encourage students to open up about barriers and challenges that they have faced (Stevenson, 2017). This will allow for student to hear and learn about others' experiences that may be similar to their own and will therefore allow them to understand that others feel the same way and they are not alone in their thoughts and beliefs. So many students have a semi-closed view of their possibilities, especially students who are coming from an oppressed background. Therefore, it will be helpful for the counselor to open up a discussion where different options are offered and new viewpoints are available for the student to consider, This can be a game-changer for students in the foster care system because it will serve to widen their possibilities and encourage them to not to just settle for the bare minimum.

Advocacy

One final way that school counselors can assist is by truly being an advocate for students who are in foster care. This was previously briefly mentioned, but so often students who are in foster care are widely not understood and therefore they seem to fall through the cracks far more often. When school counselors stand up and advocate for these students, work towards educating the school systems and the foster parents about what they need to succeed and how this can be achieved, these students have a greater chance of actually succeeding than before (Altshuler, 1997). This means that school counselors will have to work hard to become educated and informed about the many issues, problems, and circumstances that these students are facing, but when they do, they will begin to empower these students like never before (Altshuler, 1997).

In the article, *Addressing the Needs of Foster Children within a School Counseling Program,* Dr. Anne M. Geroski dives into the specific and individual needs that students who are in the foster care system seem to face. Dr. Geroski describes the fact that these students face a level of trauma that many other students may never ever face, and it revolves around the specific, unfortunate life circumstances that these students face. Dr. Geroski begins with discussing "pre-placement trauma" which points to the behavioral problems that these students face because of the possible abuse or neglect they may have experienced that led them to being placed into a foster care system (Dr. Geroski, 2000). Once these students are removed from their family of origin, these problems begin to present themselves in the form of behavioral issues. These behavioral issues stem from being mistreated and may result in the child acting out simply to get attention since that is all they know (Dr. Geroski, 2000). Dr. Geroski also points out that many students who have experienced neglect in their past may demonstrate a failure to thrive and this can appear through poor health and weight and even depression (Geroski, 2000). Another way

neglect is demonstrated is when students are having trouble making any real academic progress and they seem to have low performance throughout their education (Geroski, 2000).

Dr. Geroski then moves on to discussing how students may demonstrate "placement trauma" when they are moved from their original home and placed into a new and unknown environment (Geroski, 2000). These students are having to adjust to basically a whole new world, and this may be accompanied by several different emotions including helpless (Geroski, 2000). With all of this in mind, these emotional and behavioral disturbances begin to show up at school and these students who are in foster care have been known to be more disruptive than students who are not in foster care and have a greater chance of not succeeding or even failing than others (Geroski, 2000).

Dr. Geroski also brings up the fact that many students are beginning to notice their differences and the leaves them feeling minor and possibly even alienated from other students (Dr. Geroski, 2000). Here, school counselors can offer much needed assistance. Dr. Geroski points out that school counselors can offer individual counseling to these students and can also aid in introducing the student to the school and checking in on the student on a regular basis to make sure that their adjustment is going smoothly (Geroski, 2000). Just as Dr. Altshuler pointed out, Dr. Geroski states that school counselors can work with foster care students in dealing with both their emotional and behavioral issues. Dr. Geroski then provides a case study to point out just how effective school counseling can be for these particular students (Geroski, 2000).

In addition to individual counseling, Dr. Geroski discusses the importance of group counseling in which issues such as the "pre-placement trauma" and "placement trauma" can be addressed. Dr. Geroski brings up the fact that small groups are effective ways to allow for students to learn and grow beside other individuals who may be facing similar or even the same

issues that they are facing (Geroski, 2000). Dr. Geroski goes on to say that students who are working with their fellow classmates on similar issues may help to ease the feelings of loneliness and isolation that they may be experiencing (Geroski, 2000).

Aging Out

We need to remember that foster care is meant to be temporary, however, the reality is that many children never do return to their original family unit and because of that, they continue to face challenges and hardships as they grow older and "age out" of foster care. It is shocking to know that "within four years of aging out: 70% will be on government assistance, 50% will be unemployed, 50% will experience homelessness, 25% will not have completed high school, and less than 12% will ever earn their college degree" and on top of that, "many foster youth aren't prepared to be independent and don't have the skills or resources needed to access the opportunities that could launch them into employment" (iFoster). These statistics are shocking, but also demonstrate the level of work that needs to be done in order to help these youth and young adults.

Many children in the foster care system begin to experience issues that go beyond just their time in school, which is what happens to these students when they "age out" of the foster care system? The article, *Caregivers, School Liaisons, and Agency Advocates Speak Out about the Educational Needs of Children and Youths in Foster Care* provides a more detailed look at the exact needs that these children need once they become too old to stay within the foster care system. Many youth and children face higher crime rates, jail time, and even homelessness because of the lack of support system and a place to call home once they are too old to be supported by foster families (Zetlin, Weinberg, and Shea, 2010). The authors of this article and study lay out a groundwork for how to address the needs of these students and it begins with key

influencers in the lives of these students to come together and discuss the issues that they witness within the lives of these students. This study took four focus group sessions to hear stories about addressing the needs of foster care systems and these groups contained caregivers, school liaisons, and agency education advocates (Zetlin, Weinberg, and Shea, 2010). These group sessions lasted around an hour and they were asked questions relevant to their particular area of interaction with the students while also discussing concerns, needs, problems, and even recommendations (Zetlin, Weinberg, and Shea, 2010). The conclusion of this study reinforced information already discussed; students in the foster care system face a plethora of academic, social and behavioral problems and there is much needed work to be done in order to confront these challenges (Zetlin, Weinberg, and Shea, 2010). The study also demonstrated that not one single group had the means to solve all of the issues, but if the three groups were to work together, it is possible for more progress to be made and foster care students have a greater chance for a positive outcome (Zetlin, Weinberg, and Shea, 2010). This study only further enhances the idea that each party involved in the life of a foster care student can have great impact, but when all parties work together for the good of the student, there is a greater chance that the student can experience growth and improvement and will reach success.

For children in foster care, once they reach the age of adulthood, they are then expected to be productive and "self-reliant," as we have already mentioned. However, "nearly two-thirds of young adults who live with their parents receive some type of economic support until their early twenties, yet many foster youth lose access to the aid provided by the foster care system once they leave, or age out. In addition, many foster children lack the loving supportive social network that is needed to aid them in their transition into adulthood" (Henig, 2009, p. 572). This being said, it is hard to understand how foster youth are expected to stand on their own feet and

truly support themselves once they age out of the system, however, other young adults may still have support from their family well into their early adulthood. These students, who were hopefully once provided support by their foster family, may now receive no support whatsoever and have to be completely dependent on their selves. However, as we have discussed earlier, many foster youth are limited on the knowledge they have about possibly employment and career opportunities that are available (Henig, 2009), and therefore, these foster youth wind up failing instead of succeeding simply because they do not have the information nor the support that is needed in order to succeed.

In a study done by Regina Williams, Stanley Baker, and ClarLynda Williams-DeVane, they look at the *Effects of Customized Counseling Interventions on Career and College Readiness Self-Efficacy of Three Female Foster Care Youth,* (2018). In this study, they take three participants who were enrolled in a "life-skills development program" and evaluate how the program aided them in their transition from the foster care program to adulthood (Williams, Baker and Williams-DeVane, 2018). The study examined each participant's customized goals and their specific characteristics and the results demonstrated that foster students who are involved and informed about career readiness opportunities are better equipped to succeed once they age out of the foster care system (Williams, Baker and Williams-DeVane, 2018).

Overall, it is evident that in order for these students to not only succeed, but to also thrive once they have aged out, that they critically need access to resources, social support, tangible support (such as education, employment, housing, transportation, and health care), perceived emotional connectedness and access to counseling resources (Packard and Benuto, 2020).

Study of Success

The study *Defining Success: The Perspective of Emerging Adults with Foster Care Experience,* written by Brianna Anderson and Amanda Williams seeks to provide information about how students within the foster care system are when they begin to emerge into adulthood. This study seeks to understand what it means for these students to be able to make it in the real world and not only to make it, but even to possible be considered thriving. This study took three focus groups to discuss and examine what it meant for them to be successful. Overall, the study demonstrated that whatever the participants'' perceptions were had great impact on their outcomes. Anderson and Williams note that when working with individuals in the foster care system is important to develop a definition of success that is specifically tailored to the individual in order for actual progress to be made (Anderson and Williams, 2018).

Career Counseling

Taking a look at career issues that adults who have aged out of the foster care system face, it is important to note that "More than 17,000 emerging adults 'age out' of the United States Welfare system annually; many make this transition without family and economic support" (Packard and Benuto, p. 52). Taking it a step further, students who are aging out the faster care system face struggles with finding a safe place to live, obtaining insurance and even struggle with finding a decent employment opportunity. These individuals also struggle once they find employment for it to pay enough for them to actually rise above the poverty level and therefore, they tend to continue to rely public assistance throughout their life (Henig, p. 570). These young adults "find themselves homeless, jobless, without healthcare, and left to fend for themselves" (Henig, 2009). As a counselor, knowing that these youth face more difficulties than

the average student will aid in guiding counseling. It is also beneficial to be aware that they require a greater and different kind of support than other students.

Many of these students who are aging out of the foster care system tend to be more vulnerable to stress and adversity, and this can be attributed to their past experiences of abuse and neglect (Packard and Benuto, 2020). That being said, it is critical for school counselors to provide support to these individuals while they are still in school because they may be more prone to believe that they only have their selves to rely on since all other support systems that they have had may have been faulty and unreliable(Packard and Benuto, 2020). On top of most individuals having to navigate adulthood without support from others, students and youth who were previously in foster care struggle to finish school, and then when they do age out of the system, they struggle to build a healthy and strong lifestyle. (Packard and Benuto, 2020). This being said, there is a great need for career counselors who can provide support and guidance to these young people as they attempt to navigate life in the real world.

When offering career counseling to those who have been in foster care it is important to realize all of the many situations and hardships they have faced. For most students involved in the foster care system, they face many obstacles such as homelessness, failures, financial challenges, and even involvement with the police. (Stevenson, 2017). However, these obstacles begin at an early age and they come from a very real place stemming from the traumatic events they face early on (DeGarmo, 2015). These individuals are in dire need of someone to stand up for them and offer them positive support and much needed resources, which is critical as they attempt to face life on their own. For these students and young adults, the place where they are most likely to find this critical support and access to resources could be at school.

In general, school counselors are expected to help students with a variety of problems; from behavioral and mental issues, to preparing students for their next steps, and being supporters offering help and assistance wherever it is needed most. When working with students in foster care, school counselors can step into the role of career counseling for many students. When offering career counseling to students who are foster youth one must remember that students who are involved in foster care are more likely to have low goals for their education path, low ideas and goals for gaining employment, and even report even lower statistics when it comes to making plans about their future and careers (Stevenson, 2017). This is an area that school counselors can make an impact in and can focus on working with these students, both individual and in group counseling, to collaborate with them in setting realistic goals and then assisting these students with making plans to enable them to reach their goals.

Within the need of career counseling, foster youth face a myriad of issues that compared to their companions, and they may need assistance with. Students in foster care may not be aware of possible employment opportunities. They may also be lacking in self-confidence and therefore limit themselves on what employment opportunities they believe are possible" (Stevenson, 2017). They may have "a strong self-protection orientation that contributed to an overall lack of future orientation" (Stevenson, p. 77). Every single experience that a foster youth has, then influences how they move forward in life, and this is why these students struggle with believing in themselves and having an open mind to the opportunities that await them. So many of these students have experienced various forms of trauma and upsets in their life, that it is difficult for them to imagine a life where they can truly thrive. This is why it is important for school counselors to work alongside them and build up their self-beliefs and their ability to participate

in self-advocacy, so that they truly know what is it out there and come to believe that they have the ability to reach their goals rather than just settling.

When thinking about these students' already low self-confidence, it is important to take a step back and think about the life experiences that have contributed to these beliefs. Many students involved in the foster care system are students who come from both racial and ethnic minority groups and they are also more prone to facing financial hardships (Stevenson,2017) Because these students come from a group marked with a low socioeconomic status, they tend to envision fewer occupational opportunities than students who are from higher economic classes" (Stevenson, 2017). Because of this, many foster students may have the belief that jobs are simply there to make ends meet and they may set lower goals for themselves as a result.

As a school counselor who is offering career counseling, one must understand that it will not be as simple as offering training and possible career opportunities. Rather, the counselor must take into account the full picture of the foster youth and what motivates or even limits their behaviors. Knowing that foster youth may come from a lower socioeconomic standing informs counselors that the student may only be looking at potential jobs within their range of familiarity. It is the counselor's job to expose the student and to open up their mind to take into account the endless opportunities and to help aid prepare them, so they have the ability to reach those opportunities. However, it is important for the school counselor to remember that the family unit also contributes a role in influencing one's career decisions.

Postsecondary Education

There have been studies completed to try and figure out if there is a correlation with the services that foster care students receive and whether or not they participate in postsecondary education. For example, in the study *Factors Associated with Postsecondary Engagement for*

Youth Leaving Foster Care: An Analysis Using the National Youth in Transition Database, authors Amy Salazar, John Horn and Michael Cleveland seek to understand the factors that contribute to foster students achieving postsecondary education. The study examined over 1800 students and looked at over 30 different factors that could have some effect on the students' experience (Salazar, Horn, and Cleveland, 2019). The results demonstrated that there was a positive correlation between foster youth who were involved in services that assisted them in their transition, but not all (Salazar, Horn, and Cleveland, 2019). However, the main thing the study demonstrated was that youth who had some sort of supportive adult who was invested in the students' well-being and success, did report a higher chance of succeeding in postsecondary education (Salazar, Horn, and Cleveland, 2019).

In the article *Foster Youth Who Have Succeeded in Higher Education: Common Themes,* author Thomas Lovitt interviews eight different former students in foster care who have go on to succeed in higher education. Lovitt looks into 15 major themes that the students reported and then examines qualities that were shared. Overall, the students shared having an influential person present in their lives who encouraged them and supported them on their educational path. Secondly these specific students reported having supportive homes and supportive foster parents and third they had relating experiences that they shared with others, which encouraged them to continue pressing forward (Lovitt, 2008). Lovitt did point out that some students mentioned that their school counselors were not really of much help to them (Lovitt, 2008), but after reading the entire article, one can see how an effective school counselor could make an impact. School counselors can be that influential person in the lives of foster students, and they can also provide students with a place to share their experiences with others and know that they are not alone, that others are going through the same thing. School counselors can also work hard at advocating on

behalf of the students to make sure that they are placed in supportive foster homes with good foster parents who truly care about the overall wellbeing of the student. The more educated and better prepared the school counselor is, to deal with all things from trauma to life transitions, the better equipped they will be to offer support and guidance to their students (Myers, 2020).

Role of School Counselors

Dr. Altshuler points out the fact that school counselors, or in the time the article was written school social workers, can aid in making the environment more accepting by working to make the school more aware and including of multicultural and diverse students (Altshuler, 1997). School counselors can provide workshops and education for teachers, administrators, and even students in order to create an environment that is welcoming to all and acknowledges that everyone has different pasts and different struggles, but that each person is also here to try and reach the same goals (Altshuler, 1997). Dr. Altshuler also points out the need for school counselors to really use their networking skills and to become involved in working alongside social workers in the foster care system (1997). When school counselors are reaching out to student's social workers, they will become more educated and be better prepared to cater to the student that is in foster care and also to advocate on their behalf than if they attempted to do it all on their own.

Another way that school counselors can offer assistance is through working hard to retrieve a student's IEP, which is their Individual Education Plan, from their previous school if they have recently transferred. Dr. Altshuler brings up the fact that many times students who are in foster care move around quite a lot, but sometimes their IEPs do not move with them and this makes their transition into a new school even more difficult (Altshuler, 1997). However, if

school counselors work hard to retrieve the student's IEP, they can offer the student much needed guidance and assistance to help the student do their very best in the new school system.

Counseling is desperately needed when it comes to youth and children in foster care. There have been several research studies conducted that look at current foster care systems and the level of support that is being offered and research shows that counseling is an effective strategy for all youth because of the level of support that is offered (Workforce Strategy Center, 2000). For example, counseling can function to help in providing basic needs, that are unfortunately not being met for these youth who are in the foster care system (Barnow, et. al, 2015). Counseling has been proven time and time again that it is effective, in fact, in the article *Transition from Care: Status and Outcomes of Youth Who Age Out of Foster Care,* author Thom Reilly points out that those who are involved in counseling and receiving services to teach and support them report being more content with their current situation and better prepared to handle life once they age out of the system (Reilly, 2003). This in itself demonstrates the benefits of counseling for those coming out of foster care. There have been instances where foster youth have reported receiving some assistance from their social workers (Lane, 2017), but overall, more support is actually needed in order for these individuals to thrive, and school counselors can offer this as well as preparing the students to stand on their own.

Overall, it is apparent that children, youth, and young adults within the foster care system face a plethora of hurdles that they must overcome in order to be successful in today's world. Foster youth generally come from less supportive family structures and they have less education and information available to them about opportunities in the future. School and career counselors are then so vital to these individuals in providing them with counseling to help them work through the complications in their lives and help position them for a life full of achievement.

School counselors can serve as supportive adults, safe people and places, as well as advocates that work on behalf of the good of the students. This is not an easy process, but school counselors are making a difference and just need keep fighting one day at a time.

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Suicide Assessment

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Suicide Assessment

The following paper synthesizes information from related literature on the topic of

suicide assessment in times of a crisis state. In doing so, the nature of a crisis state of suicidal

ideation and its impact will also be reviewed. Following this review, a variety of response

protocols, interventions, and services/programs will be presented. The paper will conclude with

research implications and reflection.

The Crisis

When considering initial crisis reactions, Kanel (2018) notes that it is typically the mental

health professionals that intervene when an individual presents life-threatening behavior (threats

of suicide, homicidal ideation, significantly disabled, or other presentations of severe psychotic

decompensation). Initial responses to a suicidal crisis state can vary depending on the severity

and can range from the use of suicide risk assessments and crisis planning to involuntary

hospitalization for emergency psychiatry. This primary objective in any situation is to ensure

safety. The presence of suicidal ideation is frequently screened for in clinical mental health

settings such as intake assessments, during a mental status exam, and other instances at the

clinician's discretion. Common aspects identified in assessing for suicidal ideation include

determining the frequency and duration of thoughts, initial onset and most recent occurrence, any

history or presence of intent, plan, means, or rehearsal behaviors. Another important

consideration is if the individual is oriented to person, time, place, and circumstance. This

information can be collected through both formal and informal assessments.

A formal diagnosis may also be expected during or following an initial response to a

suicidal crisis state. Some suicidal assessments, such as the Collaborative Assessment and

Management of Suicidality (CAMS) include a DSM-5 diagnosis and rational section (Jobes,

2012). Meanwhile, other assessments such as the Brief Symptom Inventory (BSI) provide data

that can be used as supporting documentation for a clinical diagnosis (Derogatis, 1975). Suicidal

behavior is included in diagnostic criteria for symptoms of major depressive episode and

borderline personality disorder but has also been noted in the literature for occurring in

"schizophrenia, substance use disorders (particularly with alcohol), and personality and anxiety

disorders" (Oquendo et al., 2008, p. 01). Furthermore, of those who complete/attempt suicide,

10% may not be identified with any psychiatric illness (Oquendo et al., 2008). These are all

important factors to consider when providing a clinical diagnosis during or following an initial

response.

Issues/Problems Associated with the Crisis

Kanel (2018) explains that it is important to be aware of typical signs of suicidal behavior

because the individual will not always openly communicate their intent. This can present

difficulty with accurately performing suicide assessments. Some assessments will not utilize all

suicidal assessment questions if the individual denies current ideation (Kanel, 2018). Oquendo

(2008) references the Mental Status Exam's assessment of present conditions and notes how a

denial of suicidality can result in an underestimation of risk because the following questions such

as suicidal history may not be explored. However, the collection of additional information such

as risk history can be vital. Parra-Uribe et al., (2017) note that a previous suicidal attempt is the

strongest predictor for reoccurring suicidal behavior and ideation. In the Parra-Uribe et al.

(2017) survival analysis of the risk of re-attempts and suicide death after a suicide attempt,

20.1% of individuals who attempted suicide once, reattempted on at least one other occasion

with 1.2% dying by suicide completion during the second attempt. This suggests that

underestimation of risk is an issue that can occur when assessing the crisis state. Crisis workers

will need to keep this consideration in mind when selecting and performing assessments both in response to a crisis state and with ongoing care.

The Impact Associated with the Crisis

Parra-Uribe et al., (2017) refer to suicide and suicide attempts as "a major economic burden worldwide" (p. 1). Kanel (2018) cites the significant impact of suicide seen in the United States such as the 42,000 deaths by suicide and $44 billion in cost, both seen annually. Occurrence can also vary by population with White Americans having the highest rates at (14.7 per 100,000), followed by American Indians and Alaska Natives at (10.9 per 100,000) (Kanel, 2018). Due to the severe nature of this crisis, ripple effects from suicidal behavior and completion can expand beyond immediate friends and family. The National Alliance on Mental Illness (NAMI) references a 2016 study in which one out of five individuals who experienced a completed suicide refer to it as causing "major life disruption". Even with these measurable impacts on populations, financial burdens, and trauma from ripple effects, research has not presented a single instrument that can accurately predict suicide risk without a significant amount of error (Kanel 2018).

While newer assessments such as the Nelson & Shrivastava (2010) Scale for Impact of Suicidality-Management, Assessment and Planning of Care (SIS-MAP) take on additional perspectives (i.e., assessment of protective factors) that are not traditionally found in older assessments, complete prevention cannot be guaranteed. Kanel (2018) noted that the emergency nature of this crisis state can often leave counselors with little time for formal assessments and thus a reliance on their clinical judgment. This can be challenging because as Harmer et al., (2020) points out, there is not a consistent and universally accepted definition of suicidal ideation, there are no "typical" suicidal thoughts or victims, and that characteristics of suicidal

ideation (such and magnitude and frequency) can dramatically fluctuate. From this, we can also

see possible impacts on performing suicide assessments in crises. These impacts highlight the

importance of having a formal response protocol to create a unified response in crisis situations.

Valdosta State University Counseling Center's Response Protocol

As a Clinical Mental Health Counseling Student, The Valdosta State University

Counseling Center is where I do my internship. This school and counseling center is a part of and

governed by the University System of Georgia (USG). The American College Counseling

Association (ACCA) is a professional association for mental health professionals working with

higher education settings. Both the USG and ACCA provide support and guidance for college

counseling center governance and best practices. However, university counseling centers have

primary autonomy in developing their policy, procedures, and response protocols.

To meet the high volume of students seeking counseling services, in Fall 2020 the VSU

Counseling Center restructured their intake process to a triage model that assessed and assigned

services based on risk level (i.e., routine, emergent, urgent). The general process for receiving

services starts with a student contacting the center and getting scheduled for a "brief phone

assessment". During this phone assessment, the student is being triaged and the counselor will

recommend them services (i.e., individual or group counseling, crisis walk-in, outside referral,

psychoeducational workshops, etc.). If the triage is deemed routine, the student will be scheduled

for an intake in the next 2 – 3 weeks. If it is emergent, they will be scheduled for an emergent

intake within the week. If they are deemed urgent high risk, they will be scheduled for a crisis

appointment that day or if they are low risk for a crisis walk-in in the next 1 – 3 days. An urgent

triage is the most common occurrence for a student to present in a suicidal crisis state. However,

they can also walk in at random or be referred by faculty or the university's Behavior

Intervention Team (BIT). Once the student in crisis has been identified, the response protocol goes into effect.

The first step is to get them to the counseling center for their crisis appointment. The student is asked to verbalize if they can be safe until their appointment that day. If not, they are asked to immediately come to the counseling center and sit in the lobby. This is a safe space under the supervision of the front staff. Students may be walked over by friends, faculty, or staff. If the student refuses, a courtesy office will be sent for a wellness check. Once the student is seen for their crisis appointment, the center utilizes the Jobes (2012) Collaborative Assessment and Management of Suicidality (CAMS).

The CAMS is an interactive assessment and suicide-specific brief intervention in which the patient is considered the "co-author of their personal treatment plan (CAMS-care, 2020). The CAMS can be used in the initial suicide assessment and ongoing treatment monitoring. The initial session (used during the crisis appointment) is broken into four sections and a crisis response plan. For Section A, the client self-reports feelings of psychological pain, stress, agitation, hopelessness, and self-hate and then ranks the categories in order of importance. Section B is completed by the clinician and involves assessing the severity and magnitude of suicidal ideation, such as frequency and duration of thoughts, determination of a current plan, preparation, or rehearsal, history of suicidal behaviors, as well as other influential factors like substance abuse, significant loss, sleep problems, etc. Following section B, a crisis response planning activity is completed. The plan outlines six steps that the client can take to increase awareness of warning signs and safety actions in the event of recurring suicidal thoughts. The client keeps a copy for reference after the crisis appointment. Flowing crisis planning, the counselor works with the client on section C, the initial treatment plan. Self-harm potential is

automatically included in a CAMS treatment plan with specific goals & objectives and

interventions of a minimum four-week process. Additional treatment areas should be based on

information collected in sections A and B. Section D is completed by the clinician as a post-

session evaluation. This includes results from a Mental State Exam, a DSM-5 Diagnosis, a

review of the client's overall suicide risk level, and case notes. Based on information collected,

the counselor must use clinical judgment as to if hospitalization is needed. If so, the student is

presented with voluntary or involutory hospitalization options. If hospitalization is required, the

student will continue with weekly counseling services following their discharge. If

hospitalization is not warranted, the student will continue with weekly counseling sessions

following the CAMS treatment plan.

Intervention

There are a variety of assessments and interventions that can be used with individuals in

this crisis state. One benefit to using CAMs is that is both an assessment and intervention tool.

Interventions may be predetermined in an agency's response protocol or based on a counselor's

clinical judgments. Harmer et al., (2020) emphasized selecting an assessment that incorporates

identifying the characteristics and impact of both current and prior suicidal ideation. Additional

recommendations for agencies by Harmer et al., (2020) include reviewing personal and family

medical history for risk factors, screenings of suicide ideation should be via a brief, standardized,

and evidence-based screening tool, and counselors should review screening results before the

client leaves. Hayes (2017) provides the following examples of assessments and interventions

that can be used in this crisis state: Granello (2010) IS PATH WARM, The Suicide Probability

Scale by Cull & Gill (1992), Adult Suicidal Ideation Questionnaire by Reynolds (1991), & Beck

Hopelessness Scale by Beck & Steer (1993).

Another applicable intervention would be the ABC Model of Crisis Intervention presented by Kanel (2018). The ABC model is an intervention that can be used to develop and reach short-term crisis goals. The ABC Model utilized in a three-stage approach (Developing and Maintaining Rapport, Identifying the Problem, & Coping). One of the initial goals of implementing this model is determining the precipitating event. In the first stage of the intervention, it requires the development of a therapeutic alliance using rapport building and attending behaviors. The combined use of open and close-ended questions will help gather the needed information to identify said precipitating event and the client's specified meaning to it. Once identified, the counselor works with the client to explore the emotional distress and understand the current cognitions. In stage two, the use of therapeutic interaction will work to help reframe the event or thoughts and better cope while using validating statements, educational statements, empowering statements, and reframing statements (Kanel, 2018). The third stage includes exploring current coping efforts as well as introducing new positive ones.

Parra-Uribe et al. (2017) note that most individuals who complete suicide were not seeking mental health services. This poses the question, how can counselors provide intervention to those not seeking it? The National Alliance on Mental Illness reports that positive areas of impact can include working to decreasing mental health stigma, increase community support and engagement, and helping people obtain access to mental health resources. These are actions or interventions both counselors and general individuals can do to increase support for those experiencing a suicidal crisis state. There are also a variety of preventive programs and services that can be utilized.

Services and Programs

Harmer (2020) references back to 2013 when the World Health Organization (WHO) reported the rising suicide rates and declared it a global public health crisis. This was a big milestone in governments taking mental health more seriously. Now in 2021, we have programs and services that can be identified at the national, state, regional, and university levels. At VSU funding for expanded mental health services called "Hope Connect" provides a wide variety of 24/7/365 mental health services. This includes virtual appointments available with VSU Counseling Center Staff or free referral to the local community, a mental health chatbot, a wellness hub app, free psychiatric referral services, internet-based behavioral treatment, and a 24/7 crisis support line. These services are new and thus one method for them to be more useful in the future by increasing marketing efforts across campus.

At the local level, Legacy Behavior Health Services is a state-funded agency through the Georgia Department of Behavioral Health and Developmental Disabilities that provides a variety of intervention services as well as programs. Examples include behavioral health assessments, physician services, individual, group, or family counseling, crisis intervention, DUI & Family Violence Classes, and much more. At the state level, a prominent service is the Georgia Crisis and Access Line (GCAL). Calling this 24/7 emergency line provides access to immediate crisis services where professionals will provide phone intervention services, dispatch a mobile crisis team, help individuals in finding an open crisis or detox bed, connect individuals with urgent appointment services, and help locate a state-funded non-emergency provider in their area. Lastly, at the national level is the Substance Abuse and Mental Health Services Administration who provides a variety of suicide prevention information and other helpful resources to behavioral health professionals and the general public. They oversee the National Suicide Prevention Lifeline, maintain an online suicide prevention resource center, and publish a variety

of advisories, brochures, guides, and reports related to mental health. Any of these shared

programs of services can be a valuable resource to a client during a crisis state or following

stabilization.

In addition to services and programs for clients, counselors should also be aware of

services specifically for them that can help them be more effective in the future. The Substance

Abuse and Mental Health Services Administration has compiled a detailed list of available

practitioners training some free and some at various price points. Examples include Providers

Clinical Support System (PCSS) (a national training and clinical mentoring project developed to

train health professionals to provide effective, evidence-based, medication-assisted treatments to

patients with opioid use disorder), The Suicide Prevention Resource Center (SPRC) (a virtual

learning lab), and the Mental Health Awareness and Training Grant (MHAT) (provides training

for community members and first responders on how to appropriately and safely respond to

individuals with a mental disorder.

Research Implications

As previously noted, a lack of a universal definition for suicidal ideation appears to have

an impact on the literature and development of assessments. Future studies should strive to unify

a standard baseline for ideation and its components (such as frequency, durations, rehearsal,

preparation, etc.). Second, clinical judgment is often referred to in literature when completing

assessments and making clinical decisions. However, literature on the nature and assessment of

clinical judgment is limited outside the scope of ethical codes and best practices. The profession

could benefit from a more thorough review of this concept. Third, Kanel (2018) references studies

showing that "… clinicians may be reluctant to use objective suicide assessment tools because

they may see them as having limited usefulness or that they might be inaccurate in predicting

suicide risk" (p. 72). However, with more support and funding continuous research into new assessments (such as the CAMS), interventions can be developed to address these concerns and increase usefulness.

Reflection

Researching suicide assessments and the suicidal crisis state was very insightful. Many aspects of the literature overlapped, and it also brought to light other considerations such as formal diagnosis during or following an initial response to a suicidal crisis state, the process for collecting additional risk history during assessments, and methods for reaching those not seeking mental health services when in a crisis state. A specific concept that stood out to me was when Harmer (2020) explained that existing evidence supports the ability to reduce suicide but requires collaboration between policymakers and healthcare professionals in a comprehensive systemic approach. This reminds me of the importance of advocacy work both on an individual client level and on a systemic level. As a rising professional, I hope to contribute to the advocacy work in the mental help profession and support literature and research that address the implications presented earlier. The future of the profession and suicide prevention is rooted in advocacy and continued research. I plan to use this information at my site by being more aware of best practices and possible impacts of assessments when working with a client in a crisis state.

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Emotional Dissociation: Literature Review

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Table of Contents

Abstract

Work-life balance for education counselors has been receiving increasing academic attention. Education counselors are known for being a source of support for so many, but there are increasing concerns regarding their own wellbeing and how that might affect their ability to perform their job. Throughout the research process, there were a plethora of themes that always seemed to recur. This was primarily regarding causation and implications. In other words, much of the literature found similar stressors that impeded the work-life balance. Furthermore, much of the consequences of these stressors show up numerous times. However, the crux of the matter is that, across the literature examined, there was a lack of resolution. Of the literature explored, very few gave any sort of suggestions to ameliorate the negative consequences experienced by education counselors. Thus, the implications for this topic are wide open. There is a great deal of work that needs to be done regarding how to address the concerns addressed in the work-life balance of education counselors.

The Literature

The majority of sources explored revealed similar backgrounds. Many of the sources examined came from the same academic journals as the *Professional School Counseling,* the *Journal of School Counseling,* and the *Professional Psychology: Research and Practice.* There were others which made their way into the literature resulting from academic work. However, these were the ones that I saw recur the most even though I did not choose an article from it. In other words, throughout the process, these journals popped up in the majority of scholarly searches. Most of the literature was the result of academic work at a college or university among education counselors. The results came from higher education, many of them were department

heads or program coordinators with student assistants who were either doctoral candidates or graduate students. Though one essay from an undergrad student was examined, the sources used for it were beneficial to examine not only for further reading, but also to see what type of literature was being used for academic papers on the matter. In other words, different themes on this topic were explored in an academic setting by various individuals. This process was interesting to see which ideas were recurring from the distinct results. Nine of the ten sources I would deem as creditable. The nine were all published within a credible journal associated with a college or university.

Not only did various journals recur, but within the literature examined I found authors citing the works of others included in this literature review. There does seem to be some piggybacking, but more so on a foundational level than anything. This presumes that there is a general understanding and agreement on the foundations in this field, which is a strength because others are using it as a base to contribute their own findings. Several of the authors mentioned like Leinbaugh and Rupert can be found in the works cited of other sources explored.

Synthesis

There were a few commonalities within the literature. "Self-care," "wellbeing," and "burnout" were some of the most recurring terms used. Burnout was more commonly conceptualized not only with the definition but also the implications associated with burnout among education counselors. Self-care and wellbeing are widely discussed throughout the literature, but there seemed to be an uncertainty as to what both of those terms imply. Even though this is a shortcoming in this field, there is also major room for further work to be done. For example, Sangganjanavanich and Balkin (2013) found a lapse in research as to what "self-care" and "wellbeing" means from their study later discussed, even though it does not

address coping mechanisms or strategies, it also identifies that the required training from The Council for Accreditation of Counseling and Related Educational Programs does not seem to be working. The articles chosen examine self-care and wellbeing but does not provide very much explanation as to what the commonalities means. One reason to explain this shortcoming is because everyone cannot be grouped into the same categories. In other words, there is not going to be a single method of implementation of "self-care" that leads to "wellbeing" every time. However, I posit that is a good thing in terms of literature because there are many different angles to address it.

The majority of discussion regarding "wellbeing" often only includes a balance of professional work and life coupled with physical and mental health. Rupert and Dorociak (2019), acknowledge that self-care behaviors, or lack thereof, can be attributed to counselor's personal and professional well-being. Their study consisted of 422 counselors and Rupert examined 5 key factors to explore: professional support, professional development, life balance, cognitive awareness, and daily balance and provided several methods in which counselors could make efforts to mitigate hardships related to their work. For example, within professional development, Rupert posits that staying current in professional knowledge, connecting with professional organizations, and participating in professional activities that promote development can prevent depersonalization of clients when counselors face stress. This, of course, serves as a win-win scenario because constructive client relationships are fostered, competent services are continued, and the counselor maintains a positive disposition of themselves and their work. This article holds a great deal of value for my aims because it lists different activities and strategies that counselors can seek for different areas, they are struggling in. For example, the article from Friedman suggests meditation. This is still a great idea, but it will not work for everything. In this

light, the most easily and lucid aspect to discuss is physical health. Exercise is the least ambiguous means of combatting burnout and promoting self-care because it is tangible and easier to assess than mental wellness. The health effects associated with physical exercise is also highly documented with more research to support than one could ever examine. Also, physical exercise is applicable to all education counselors. In other words, singular aspects to promote mental wellness are not going to "work" or be "effective."

Resolution of Ambiguities

Across the literature, the majority of topics were addressed in a broad context. Given the nature in which the contexts were presented, I do not think that the ambiguity of the language used is a shortcoming. Yes, the key words are presented ambiguously, but that leaves room for further research to further develop definitions in more specific contexts. Generally speaking, education counselors are addressed as a whole, but there many ways to break this down. In regard to the ambiguous language, I would suggest that new research efforts can strengthen key terms and the ambiguous language. However, each new conceptualization might be dependent upon the context chosen. Meaning, the three key terms addressed in the beginning of the synthesis, appeared in the vast majority of the literature, so there needs to be more clarity as to what they mean. The reason is because they are normally all connected. There is a relationship between these terms. "Self-care" is important to maintain a healthy "wellbeing" which is necessary to reduce the chances of "burnout." They follow a sequential order, and since there is a cause and effect relationship, there needs to be a general understanding of these terms.

History

In terms of academic literature, this is a relatively new topic considering many foundational sources came during the early and mid-2000s. Evident in the literature explored,

there is a good majority of literature currently being published that are using many of the same

foundations. Perhaps the reason for the broad framework is because there has not been a very

large window to prove "self-care" methods that promote overall "wellbeing." Thus, the last 20

years have shown plenty of opportunities to acknowledge these issues with education counselors.

However, since it is relatively new, it is reasonable to understand why there are still many fields

to be explored. For instance, different areas could be explored depending on the range of students

that an education counselor works with. Such as, different measurements could be taken for an

education counselor who works in an elementary school compared to one in a college. There are

different contexts depending on the age range as well as other factors like public versus private

school. The core of the matter is that there are many new realms in which emotional

disassociation can be ameliorated.

Methodology

In the literature examined, most researchers used different types of surveys that range

from qualitative accounts to Likert scales. However, there were more specific measurements for

larger surveys like the one found in Heather Fye's study (2020). For her data, she used more

complex instruments like the Perceived Stress Scale (PSS) which is a 14-item inventory, the

Brief COPE which is a 28-item inventory, the Job Satisfaction Survey (JSS) which is a 36-item

inventory, the Role Questionnaire (RQ) which is a 14-item inventory, and the Counselor Burnout

Inventory (CBI) which is a 20-item inventory (Fye, 2020). Some of these resurfaced in other

sources as well. For example, Sangganjanavanich and Balkin, used the JSS in their study in

addition to the MBI-ES which is a 22-item self-report scale to measure burnout (2013). Other

researchers collected data from larger bodies of work like Baggerly and Osborn in their 2006

study. They collected data from a 154-item survey via the Florida School Counselors Survey 2000.

One of the strongest aspects of the methods examined is that participants were broken down into different demographics. There was essentially a subcategory for just about any characteristic one could think of. For example, in some surveys like Baggerly and Osborns (2006), education counselors were separated by things like age of children taught, gender, the counselors age, and ethnicity. These categories were also found in other studies, but some like Leinbaugh et al. (2003) added other measures like what major did the education counselor graduate with, what was their highest level of education, and what type of license they had: professional counselor license, psychologist license, or social work license. Overall, the demographics and underlying characteristics examined give this field its expanse potential. Examining the participants surveyed also provides a wide spectrum and possibilities of specific topics to focus on. For example, multiple sources found that newer education counselors were more susceptible to burnout. Thus, one scenario could be first-year education counselors, but that can even be broken into three of four more subcategories. The methodology is arguably the strongest aspect of emotional disassociation for education counselors. There might be typical thoughts by an individual, but a quick glance at the participants used in the literature illustrates the vast possibilities in terms of narrowing down to specific areas within education counseling.

This was one of the areas, though, where some differing perspectives were constructed. Albeit certain characteristics in some studies provide more or less reasons to be susceptible to burnout, job dissatisfaction, and depression, Sangganjanavanich and Balkin (2013) found that demographic backgrounds play no significant role in an education counselor's emotional state. The conducted a study of 220 full time education counselors. However, they introduce and

elaborate on "burnout" in a general setting, general education, and in higher education. The Council for Accreditation of Counseling and Related Educational Programs requires a self-care strategy, but the authors note how there is still an imbalance between career development and the personal wellness in education counselors. This is good that there is some area of discourse because that means it can be further explored and more research can be done on the matter. In fact, that is one of the more difficult components of this field; much of the literature coincides with one another.

Criticism of Methodology

Even though I assert the methodology is a primary strength that enables many new possibilities for research efforts, there are still areas of concern. Though certain demographics are examined, I believe there could be deeper variables which could be more or less difficult to account for. The amount of areas of concerns provide serious implications involved though, so less researchers might be willing to consider them. Certain variables that should receive some attention would be items related to affluence, the local poverty rate, the school's graduation rate (for high school and colleges), standardized test scores (for grade schools) and the community's crime rate, and cultural differences. These are just a few, but there are reasonable connections that can be made. For many education counselors, some of their unexpected duties transcends their expectations in the world of academia. The conditions mentioned above could all serve as a legitimate factor regarding some as broad as the local standard of living. It would be reasonable to theorize that poorer districts with higher poverty rates, higher crime rates, lower standardized test scores, and lower graduation rates would result in an atmosphere that increases stressors for education counselors. Similarly, the opposites in that scenario could be legitimately theorized to

alleviate those stressors. These might not necessarily constitute "criticism" of the methodology, but there is certainly more in the equation than poor organizational structures.

Furthermore, many educators soon learn that their students might require different needs than what an educator was anticipating providing. Much of this stems from implications of transference which involves students bringing problems to school with them from home. My theory postulates these factors are necessary to explore whether or not one wants to link them to stressors for educational counselors. Those are all very real factors to consider, and education counselors should be equipped with the development and skills in order to curtail their effect. The American Counseling Association (ACA) and the Council for Accreditation of Counseling and Related Educational Programs (CACREP) both assert that an education counselor's professional and personal wellbeing are paramount to the not only the individual counselor, but also students and individuals they are providing services to, it is not an either-or-option. If a counselor's personal and professional wellbeing is deteriorating, then it will inevitably translate to those they are counseling. The same applies conversely. If a counselor is attuned to their immediate stressors and is properly managing their physical, mental, and professional wellbeing, then they will be a competent counselor and their work is going to be more positive. The crux of the matter is an education counselor's work is an indication of their own wellbeing, and from the factors presented thus far in the literature I believe there are many left out or not explored that do play a significant role in an education counselor's overall wellbeing.

Significance

As presented throughout various junctures, the significance of this field is ever-present but is lacking resolutions. Education counselors are essentially always going to face the problems being explored in regard to the work-life balance, self-care, wellbeing, and burnout. In other

words, education counselors are always going to be susceptible to these inevitabilities within their work. There is a formidable foundation of literature that brings attention to the problem, but very few present legitimate and specific solutions to the problems presented. As mentioned, this is a relatively newer area of exploration in the academic world. There is still much work that needs to be done in a plethora of different areas. Emotional dissociation also includes many facets not discussed in the literature reviewed. Certain components from my web map were briefly mentioned, but there was little depth to certain factors like personal life and motivation. Furthermore, the most recurring theme across all the literature examined was that organizational issues were mostly responsible for many different outcomes like career dissatisfaction, burnout, and depression.

This is certainly no decree asserting that individuals need to accept a certain amount of responsibility, but it is interesting that most of the primary issues identified were connected with organizational rules, duties, and ambiguity. For comparison, education counselors in public schools suffered from these issues more so than private counselors. The literature provides a number of avenues to take regarding organizational restructuring within school systems for education counselors. One implication is improved transparency of work duties. Many who were surveyed elaborated on the fact that they were being asked to do too many things that were not initially outlined. In fact, Baggerly and Osborn found that the school level worked at (i.e., primary, elementary, middle, or high school) did not play a significant effect on education counselors and their tendencies of burnout, depression, or job dissatisfaction (2006). However, the most significant factors were time spent on appropriate duties, inappropriate duties, self-efficacy of appropriate and inappropriate duties, and supervision or lack of supervision. For example, Baggerly found that 60% of Florida school counselor respondents reported that the

time they spent on standardized tests hinders their responses to urgent needs of the students or teachers. The uprise of the frustration of school counselors hindered by the chance to provide appropriate duties leads to the question of impacting their career satisfaction (2006). This might seem like a bit to ascertain however; these factors paint an extremely simple picture. Education counselors prefer to perform duties that are expected of them because they have prepared for them. Thus, they are confident in their abilities to perform those duties. On the other side of the spectrum, it is reasonable to conclude that education counselors do not like unexpected or inappropriate tasks because they feel as if they are not as capable of performing them.

Governing Bodies

An interesting avenue that could be a new area of research is the current state of governing bodies in the field. Baggerly and Osborn, as well as Sangganjanavanich & Balkin, take the time to mention governing bodies like the American Counseling Association (ACA) and the Council for Accreditation of Counseling and Related Educational Programs (CACREP). These both require self-care strategies, but the authors note how there is still an imbalance between career development and the personal wellness in education counselors. Sangganjanavanich & Balkin assert that wellness issues are receiving more and more attention, but there is a discrepancy in the perception of what constitutes personal wellbeing (2013). They also conclude that there is a gap in the realistic expectations that take place.

These two governing bodies yield another stance to address emotional dissociation because they establish standards that trickle down in the organizational frameworks of the schools. In other words, it would be much more effective to direct efforts towards these two governing bodies and allow new standards to trickle down instead of trying to get every school to implement new approaches or trainings. This could be an interesting take on this topic. Much of

the literature states that most of the problems education counselors face is related to organizational doings. However, one could aim their efforts towards the governing bodies because one could argue that schools are merely attempting to adhere to whatever guidelines and requirements they must follow. This might be a daunting task, but it would certainly garner some attention.

An aspect that can be linked to the governing bodies could be professional development availability. Both governing bodies posit that counselor education programs integrate a wellness concept in their curriculum and facilitate the professional and personal development of counselors who are in training (Sangganjanavanich & Balkin, 2013). That might be outlined in their beliefs and visions, but the literature suggests not only that these terms are ambiguous and relative, but also there are not as many opportunities for professional and personal development. Careers in academia present several stressors such as teaching, research, and different forms of service. Education, especially in higher contexts, has also been raising expectations in general, so it is reasonable to see that when education counselors are being asked to exceed expectations, they are less likely to pay attention to their individual needs. Thus, governing bodies could arguably take more strides to increase transparency of their language as well as facilitate further professional and personal development. Whether or not someone will present this in research is more than likely just a matter of time.

Conclusion

In summation, emotional dissociation among educational counselors presents a plethora of thought-provoking aspects of merit. Though it is relatively new, there is a strong foundation in which researchers are, and can, contribute their different findings. There are several recurring themes which shine through like "burnout," "self-care," "wellbeing," job dissatisfaction,

depression, self-efficacy, and job duties (appropriate and inappropriate). After reading through each article, the majority of the literature presents well-thought out methodologies and includes an array of demographics and other considerations, but there are variables, although provocative, that need more research. Overall, I have apprehended that the underlying-relational themes result in implementing a generous amount of individualized "self-care" to competently maintain a healthy "wellbeing" to reduce the chances of "burnout". However, there are many general consensuses on the causation of overall wellbeing for education counselors such as organizational duties and structures, but there is a lack of resolutions. Organizational structures have received most of the blame for the weight put on education counselors. Governing bodies play a large role in the culture of education counselors too and can use their trickle-down effect to better prepare education counselors as well as ensuring continued professional and personal development. There is much left to explore in this field, and I posit many of the concerns addressed will be addressed not on the basis of "if" but "when?"

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