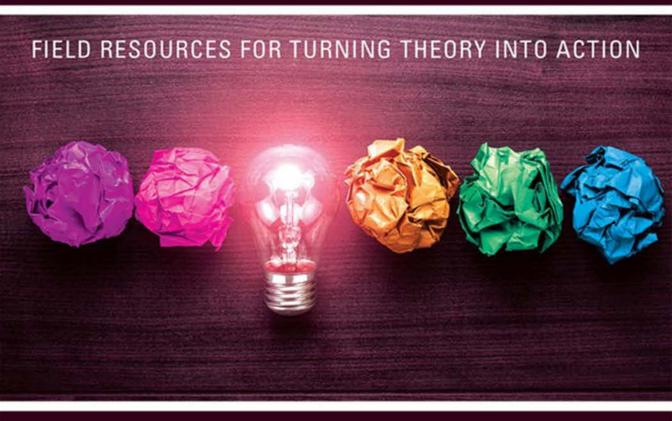
# SUPERVISED PRACTICUM AND INTERNSHIP



LORI A. RUSSELL-CHAPIN, NANCY E. SHERMAN,

AND ALLEN E. IVEY



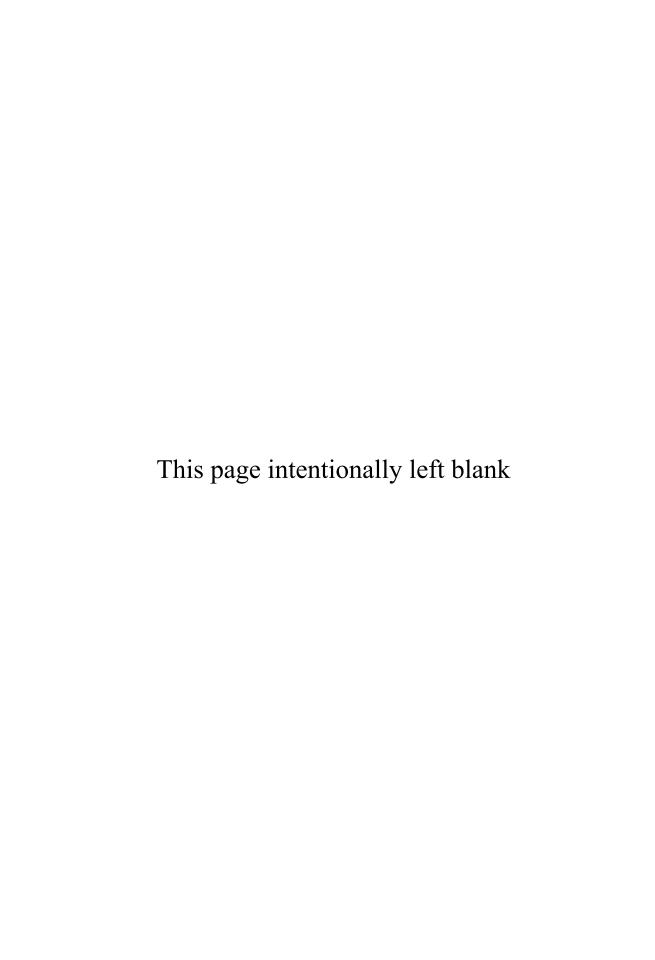
# YOUR SUPERVISED PRACTICUM AND INTERNSHIP

Your Supervised Practicum and Internship is a complete, up-to-date guide to everything a graduate student in the helping professions needs for a successful practicum, internship, or field experience. This helpful resource takes students through the necessary fundamentals of field experience, helping them understand the supervision process and their place in it. The authors fully prepare students for the more advanced or challenging scenarios they are likely to face as helping professionals. The new edition also interweaves both CACREP and NASW standards, incorporates changes brought by the DSM-5, and places special focus on brain-based treatments and neurocounseling. Your Supervised Practicum and Internship takes the practical and holistic approach that students need to understand what really goes on in agencies and schools, providing evidence-based advice and solutions for the many challenges the field experience presents.

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# YOUR SUPERVISED PRACTICUM AND INTERNSHIP

# Field Resources for Turning Theory into Action

**Second Edition** 

Lori A. Russell-Chapin Nancy E. Sherman Allen E. Ivey



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# CONTENTS

Acknowledgments	xiv
CTION I: TTING STARTED: YOU, SUPERVISION, AND THE SETTINGS	1
Furning Theory into Practice: Abilities Needed to Grow Overview 4 Goals 4 Before You Start 4 Why was This Text Created 5 Lori 5 Nancy 6 Allen 7 The Need for This Text: Lori's First Client Memory 8 For You, the Student 9 Goal of This Text 9 Book Features 9 Chapter Topics 10 A Guide 11	3
The Guest House 11  Key Concepts: Needed Abilities for a Successful Field Experience 12  Neurocounseling and Self-regulation Skills 12  Self-regulation 13  Practical Reflection 1: Neurological Dysregulation Risk Assessment 14  Practical Reflection 2: Breathing Demonstration 18  Risk-taking 18  Practical Reflection 3: Identifying Fears and Concerns 19  Goal-setting 19  Practical Reflection 4: Establishing Professional Goals 20  Feedback 21  Practical Reflection 5: Corrective Feedback 22	
	CTION I: TTING STARTED: YOU, SUPERVISION, AND THE SETTINGS  Gurning Theory into Practice: Abilities Needed to Grow Overview 4  Goals 4  Goals 4  Geore You Start 4  Why was This Text Created 5  Lori 5  Nancy 6  Allen 7  The Need for This Text: Lori's First Client Memory 8  Gor You, the Student 9  Goal of This Text 9  Book Features 9  Chapter Topics 10  A Guide 11  The Guest House 11  Key Concepts: Needed Abilities for a Successful Field Experience 12  Neurocounseling and Self-regulation Skills 12  Self-regulation 13  Practical Reflection 1: Neurological Dysregulation Risk Assessment 14  Practical Reflection 2: Breathing Demonstration 18  Risk-taking 18  Practical Reflection 3: Identifying Fears and Concerns 19  Goal-setting 19  Practical Reflection 4: Establishing Professional Goals 20

vi Contents

2

Respect 22	
Power 22	
Practical Reflection 6: Power Differentials 23	
Multicultural Issues 24	
Practical Reflection 7: Multicultural Concerns 24	
Positive Resources and Personal Strengths 25	
Practical Reflection 8: Emphasizing Your Personal Strengths 25	
Other Key Issues for the Success of Your Field Experience,	
Practicum, and Internship 26	
Practical Reflection 9: Analyzing Past Transference and	
Countertransference Issues 28	
Summary and Personal Integration 28	
Practical Reflection 10: Integration 29	
Summary List of Resources 29	
Reviewing and Analyzing Cases: Microcounseling Supervision	32
Overview 33	
Goals 33	
Key Concepts: Microcounseling Supervision 33	
The Brain and Its Functions 34	
Head Map of Functions 34	
Practical Reflection 1: Intentional Skills and Brain Functions 36	
Practical Reflection 2: An Intentional Imagery Exercise 37	
The Microcounseling Supervision Model 38	
The Three Components of Microcounseling Supervision 40	
Reviewing Microcounseling Skills with Intention 40	
Practical Reflection 3: Reviewing Skills with Intention 41	
Classifying Skills with Mastery 41	
Practical Reflection 4: Classifying Skills with Mastery 42	
Processing Supervisory Needs 45	
The Counseling Interview Rating Form (CIRF) 45	
Scoring the CIRF 46	
Supervisory Process 47	
Practical Reflection 5: Summarizing and Processing Skills 47	
Uses of the CIRF 47	
Case Presentation 48	
Practical Reflection and Self-assessment 6: Establishing Your	
Counseling Skills Baseline 49	
Practical Reflection 7: Understanding Microcounseling	
Supervision 49	

CONTENTS vii

	Summary and Personal Integration 50  Practical Reflection 8: Integration 50  Resource A: Glossary of CIRF Skills 50  Resource B: Microskill Classification: Transcript of Rachel and Lori 54  Resource C: Counseling Interview Rating Form 57  Resource D: Counseling Interview Rating Form 60  Resource E: Counseling Interview Rating Form 63	
3	Becoming Effective as a Supervisee: The Influence	
	of Placement Setting	67
	Overview 68	
	Goals 68	
	Key Concepts: You and Supervision 68	
	Self-regulation Skill of Sleep Hygiene 69	
	Practical Reflection Self-regulation Skill 1: Sleep Hygiene 70	
	Determining Which Supervision Style Works Best for You 70	
	Developmental Styles of Supervision 71	
	Practical Reflection 2: Preferred Maturity Dimensions 72	
	Practical Reflection 3: The Best Fit Supervisory Styles 73	
	You and Your Supervision Setting 73	
	School Settings 73	
	Primary, Middle, and High Schools 74	
	Practical Reflection 4: Current Supervisory Expectations 76	
	The Case of Stephen 76	
	Practical Reflection 5: School Counseling Supervisory Needs 80	
	Colleges and Universities 80	
	Community Agencies 82	
	Private Practice 84	
	Hospital-based Treatment Programs 87	
	Practical Reflection 6: Influences of Field Experience Settings 88	
	Collecting and Sharing Needed Information 89	
	Practical Reflection 7: Student Practicum/Internship Agreement 90	
	Evaluation of Your Work in the Placement Setting 91	
	Practical Reflection 8: Evaluation Concerns 91	
	Summary and Personal Integration 92	
	Practical Reflection 9: Integration 92	
	Resource F: Supervisory Style Inventory 92	
	Resource G: Author's CIRF Quantification of the	
	Case of Stephen 94	
	Resource H: Student Practicum/Internship Agreement 97	

viii Contents

	Resource I: Practicum/Internship Contract 98	
	Resource J: Adult Informed Consent Form 100	
	Resource K: Child Informed Consent Form 100	
	Resource L: Release of Confidential Information 101	
	Resource M: Site Supervisor's Evaluation of Student	
	Counselor's Performance 101	
4	Continuing Self-improvement: Major Supervision Model Categories  Overview 107	107
	Goals 108	
	Key Concepts: Finding the Supervision Match for You 109	
	Practical Reflection 1: Self-regulating What You Eat and Why 111	
	Developmental Models of Supervision 112  Practical Reflection 2: Developmental Model Crowth Arrage 112	
	Practical Reflection 2: Developmental Model Growth Areas 113  Theory observes Systemsisian Models 113	
	Theory-specific Supervision Models 113  Practical Paractical 3: Theorytical Orientation, 114	
	Practical Reflection 3: Theoretical Orientation 114 Social Role Models of Supervision 114	
	Practical Reflection 4: Role and Focus Needs 115	
	Integrated Models of Supervision 115	
	A Supervision Digital Recording Method: Interpersonal Process Recall 116	
	Practical Reflection 5: Needed IPR Questions 117	
	Supervision and the Case of Rachel 117	
	Developmental Supervision and the Case of Rachel 117	
	Theoretically Oriented Supervision and the Case of Rachel 118	
	Social Role Supervision and the Case of Rachel 119	
	Integrated Supervision and the Case of Rachel 119	
	Interpersonal Process Recall and the Case of Rachel 119	
	Practical Reflection 6: Your Favorite Supervision Model 119	
	Practical Reflection 7: You and Your Supervision Perceptions 120	
	Summary and Personal Integration 120	
	Practical Reflection 8: Integration 120	
	Resource N: Microcounseling Skills Used in Different Theoretical Approaches	121
	Resource O: Supervisee Perception of Supervision 122	
5	Conceptualizing the Client: Diagnosis and Related Issues	126
	Overview 126	
	Goals 127	
	Key Concepts: Client Case Conceptualization and the Investigative	
	Nature of Counseling 127	
	Confidentiality 129	

contents ix

Humble Guest 129
Cautiousness 130
Exercise, the Brain, and Decision Making 130
Practical Reflection 1: Physical Exercise Plan 132
Case Conceptualization Methods 132
Using the Interview Stages to Conceptualize Cases 133
Practical Reflection 2: Stages of the Interview 134
Adding the DSM-5 to the Case Conceptualization 134
Diagnosing Using the DSM-5 134
Personality Disorders 137
Practical Reflection 3: DSM-5 Strategy and Conceptualization 138
Developmental Assessment 138
Practical Reflection 4: Your Preferred Developmental Orientation Style 140
Goals and Treatment Plans 141
Case Presentation Guidelines 141
Narrative Case Presentation about Rachel 142
Practical Reflection 5: Case Presentation Additions 144
The Case of Rachel: Case Conceptualization with the Stages of the
Interview, Clinical Diagnosis, and Developmental Assessment 144
Stages of the Interview 144
DSM-5 Diagnosis 144
Developmental Assessment 145
Goals and Treatment for Rachel 145
Summary and Personal Integration 146
Practical Reflection 6: Integration 147
Resource P: Microskills Hierarchy 147
Resource Q: Case Presentation Outline Guide 148
SECTION II:
KNOWLEDGE NEEDED TO GROW: ISSUES
IN PROFESSIONAL PRACTICE 151
6 Becoming a Culturally Competent Helping Professional:
Appreciation of Diversity in Action 153
Overview 154
Goals 154
Key Concepts: A Continuum for Multicultural Development 155
Skin Temperature Control 155
Practical Reflection 1: Skin Temperature Control 157
Cross-cultural Dimensions in Counseling 157

X CONTENTS

The Multiplicity of Multicultural Understanding 158
The RESPECTFUL Cube: Individual Culture and
the Ownership of Privilege 159
Practical Reflection 2: Examining Your Multicultural
Self and Environment 161
Intersectionality Within the Cube 162
Privilege and Power 162
Practical Reflection 3: Privilege and You 163
You and Multicultural Competence 163
Practical Reflection 4: Examining Your Cultural
Beliefs about Helping 164
Attitudes and Beliefs Guidelines 164
Knowledge Guidelines 165
Practical Reflection 5: Influential Experiences Impacting
Your Cultural Identity 166
Practical Reflection 6: Stereotype Development 167
Skill Guidelines 167
Practical Reflection 7: Proactive Experiences in Multicultura
Development 168
Models of Racial Identity Development 168
Practical Reflection 8: Racial Identity Development 170
An Example Approach for Enhancing Diversity Appreciation:
A Diversity Simulation 170
Practical Reflection 9: The Albatross Simulation 172
Example Interview: The Case of Darryl 172
The Case of Darryl 173
The Case of Darryl: A Multicultural Perspective 178
Practical Reflection 10: Response to the Case of Darryl 178
Summary and Personal Integration 178
Practical Reflection 11: Integration 179
Resource R: Counseling Interview Rating Form 179
Resource S: Author's Quantification of CIRF Summarization and
Processing Skills of the Case of Darryl 182
Resource T: The Case of Darryl with Skill Identification 186
Working with Ethics, Laws, and Professionalism:
Best Practice Standards

7

Overview 194 Goals 194 193

CONTENTS xi

	Key Concepts: Standards of Care 194  Heart Rate Variability 196  Practical Reflection 1: Breathing Through Your Heart 197  Ethics and Ethical Behaviors 197  Practical Reflection 2: Ethical Behavior 199  Code of Ethics 199	
	Practical Reflection 3: Comprehending Your	
	Profession's Code of Ethics 199	
	Case Notes, Record Keeping, and HIPAA Information 200	
	Practical Reflection 4: Writing Concise Case Notes Focusing	
	on HIPAA Compliance 201	
	The Process of Referring Clients to Other Practitioners 202	
	Practical Reflection 5: The Referral Process 202	
	Utilizing Case Law 202	
	Confidentiality and Duty to Warn 203	
	Exceptions to Confidentiality 203	
	Privileged Communication 204	
	Practical Reflection 6: Understanding Case Law 205	
	Professionalism and Professional Behaviors 205	
	Practical Reflection 7: Recognizing Professional Behaviors 206	
	Professional Organizations 206	
	Ethical and Professional Behaviors: The Case of Darryl 207	
	Practical Reflection 8: Dilemmas in the Case of Darryl 207	
	Summary and Personal Integration 207	
	Practical Reflection 9: Integration 208	
	Resource U: Web Addresses for Professional	
	Organizations and Codes of Ethics 208	
	Resource V: ACA Code of Ethics and Standards of Practice 209	
8	Counseling Research Outcomes: Discovering What Works  Overview 212  Goals 212	211
	Key Concepts: Practicing Evidence-based Counseling 212	
	Self-regulation Skills of Neurotherapy and Neurofeedback 212	
	Practical Reflection 1: Your Brain Wave Type 213	
	A Brief History of Counseling Effectiveness and Change 215	
	Types of Outcome Research 216	
	Practical Reflection 2: Beginning to Practice Outcome Research 217  Descriptive Research 217	
	Description Instantin DIT	

xii CONTENTS

	Overetitative Decima 217	
	Quantitative Designs 217	
	Program, Client, Counselor, and Supervision Evaluations 218	
	Meta-analysis 219	
	Qualitative Designs 220	
	Practical Reflection 3: Selecting the Most Efficient	
	Research Type for You 221	
	Efficacy Research 221	
	Research Criteria for Clinical Efficacy Levels 222	
	Research Practitioner Models 223	
	Scientist/Practitioner Model 223	
	Practical Reflection 4: Clarifying Your Strengths and Liabilities 223	
	Teacher/Scholar Model 224	
	Practical Reflection 5: Choosing Your Best Fit Scholarly Function 225	
	Summary and Personal Integration 225	
	Practical Reflection 6: Integration 226	
	Resource W: Indirect Evidence: Methods for Evaluating the	
	Presence of Nontherapy Explanations 226	
9	Staying Well: Guidelines for Responsible Living	229
	Overview 229	
	Goals 230	
	Key Concepts: A Balanced Lifestyle With Proportion, Not Equity 230	
	Harmonics 231	
	Practical Reflection 1: How Harmonics Influence You 233	
	Rules for Responsible Living 233	
	Practical Reflection 2: Clarifying Your Values 234	
	Practical Reflection 3: Assessing Your Locus of Control 235	
	Physical Health 236	
	Emotional Well-being 236	
	Intellectual Enrichment 236	
	Life Work Satisfaction 236	
	Social Effectiveness 237	
	Spiritual Awareness 237	
	Practical Reflection 4: Your Lifestyle Assessment Score 237	
	Practical Reflection 5: Wellness and You: Setting Personal Goals 239	
	Summary and Personal Integration 239	
	Practical Reflection 6: Integration 239	
	Resource X: Rotter's Locus of Control Scale 239	
	Resource Y: The Lifestyle Assessment Survey, Form C 243	
	Resource Y.1: Therapeutic Lifestyle Changes Inventory 246	
	f	

10 Becoming a Professional Helper: Advocacy for Clients, Self, and the Profession 255 Overview 256 Goals 256 Key Concepts: Advocacy and Its Relationship to the Ten Essential Principles for Helping Professionals 256 Mindfulness 257 Practical Reflection 1: The Best Cookie Ever 258 Advocacy for the Client 258 Advocacy for Self 258 Advocacy for the Profession 259 Practical Reflection 2: Your Advocacy Efforts 260 Ten Essential Chapter Principles for Helping Professionals 260 1. Transferable Skills, Abilities, and Principles 260 Practical Reflection 3: Looking Back and Comparing Feelings 260 2. Creative Interchanges Through Core Interviewing Skills 261 3. The Path of Right Action 261 4. Flexibility in Growth 261 5. Telling the Entire Story 262 6. Universal Communication Skills 262 7. Risk Management and the World of Counseling 263 8. Evidence-based Best Practice 264 9. Helping Self and Others 264 Practical Reflection 4: Writing New Goals for Your Professional Life 265 10. Where Am I Now and Where Do I Need to Go? 265 Summary and Personal Integration 266 Practical Reflection 5: Integration and Lessons Learned 266 Resource Z: Chi Sigma Iota Advocacy Themes 266 Resource Z.1: Advocacy Competencies 267

Index of Names 271
Index of Subjects 273

### ACKNOWLEDGMENTS

### Lori

This book continues to be a labor of love. Being a member of the helping profession is a calling for me! As I have developed and grown as a person and clinician, it has been fun to share many of my observations and ideas with others in the profession. But even more importantly are the people who have influenced me by their generosity, compassion, and dedication not only to the field of counseling but to life in general. This book is dedicated to all those people in my life who are mentors and role models to me. These people epitomize the concept of "richly living" by taking risks and generating new options.

Thank you to:

My husband, Ted, whose love and friendship have provided me with support but challenged me towards mastery

Our children, Elissa and Jaimeson, who keep me mindful of the moment

My client, Chris, who lost her life but faced her fears

Our editor, Anna, whose wisdom, foresight, and clarity have been so appreciated My mentor, Allen Ivey, who has inspired me and countless others to be passionate about the counseling field and especially the area of neuroscience and neurocounseling

My colleague, Nancy Sherman, who has taught and presented with me for the past 22 years

My parents, Helen and Bill, who modeled for me that life is about constant growth

My students whose dedicated quest for knowledge, skills, and self-growth is a tribute to the helping professions!

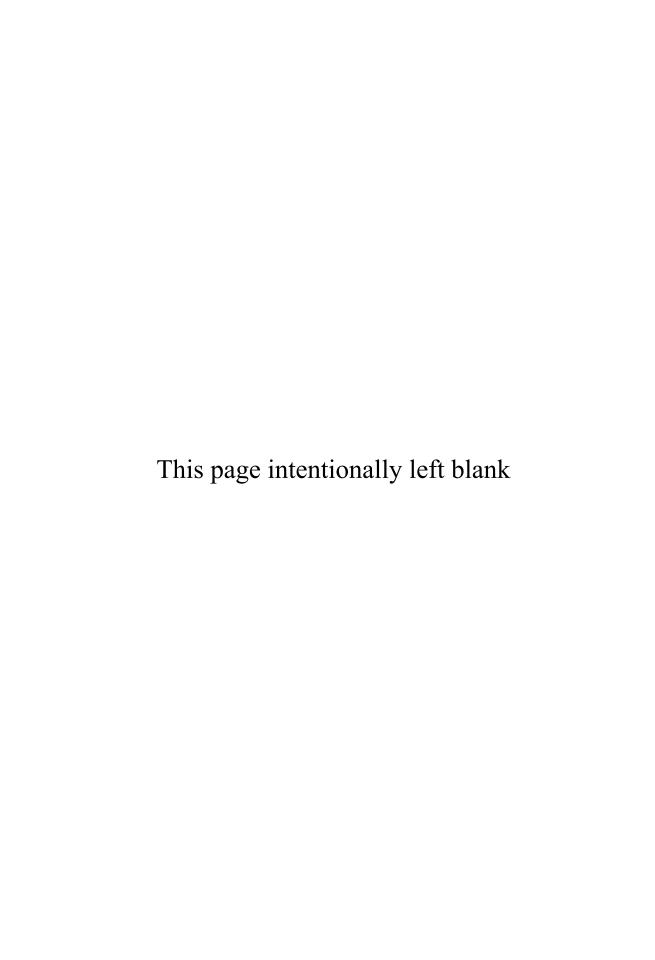
### Nancy

I would like to acknowledge and thank just a few of the people who have inspired and nurtured my personal and professional growth.

Lori Russell-Chapin, who hired me, mentored me, inspired me, and befriended me for life.

Evan Sherman-Hayes, who gave me the opportunity to live my most important role, that of mother to him.

Patrick Hayes, my husband, who has supported me all the way!



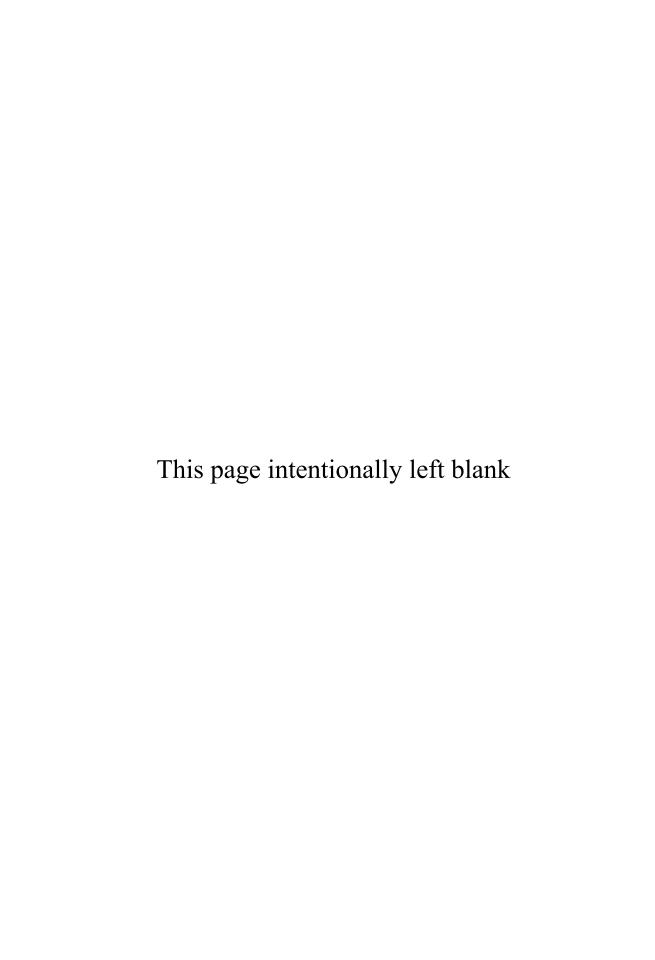
### Section I

## GETTING STARTED

### You, Supervision, and the Settings

By the time you have completed Section I and the first five chapters you can expect to:

- IDENTIFY YOUR STRENGTHS AND AREAS FOR IMPROVEMENT TO ENSURE A SUCCESSFUL FIELD EXPERIENCE.
- PRESENT AND ANALYZE YOUR COUNSELING SESSIONS USING THE COUNSELING INTERVIEW RATING FORM AND MICROCOUNSELING SUPERVISION.
- UNDERSTAND THE DIMENSIONS OF EFFECTIVE SUPERVISION AND THE INFLUENCE YOUR PLACEMENT SETTING MAY HAVE ON SUPERVISION.
- LEARN ABOUT THE MAJOR SUPERVISION MODEL CATEGORIES AND THE IMPORTANCE OF A SUPERVISION QUESTION.
- CONCEPTUALIZE YOUR CASE STUDIES USING THREE STAGES OF THE COUNSELING INTERVIEW, FORMAL DIAGNOSIS, AND DEVELOPMENTAL ASSESSMENT.



### TURNING THEORY INTO PRACTICE

### Abilities Needed to Grow

The field experience takes courage—it facilitates growth most effectively if you allow yourself to become the person whom you truly are and want to be!

### **O**VERVIEW

GOALS

BEFORE YOU START

Why This Text was Created

THE NEED FOR THIS TEXT: LORI'S FIRST CLIENT MEMORY

FOR YOU, THE STUDENT

GOAL OF THIS TEXT

BOOK FEATURES

CHAPTER TOPICS

A Guide

THE GUEST HOUSE

KEY CONCEPTS: NEEDED ABILITIES FOR A SUCCESSFUL FIELD EXPERIENCE

NEUROCOUNSELING AND SELF-REGULATION SKILLS

PRACTICAL REFLECTION 1: NEUROLOGICAL DYSREGULATION RISK ASSESSMENT

PRACTICAL REFLECTION 2: BREATHING DEMONSTRATION

RISK TAKING

PRACTICAL REFLECTION 3: IDENTIFYING FEARS AND CONCERNS

GOAL-SETTING

PRACTICAL REFLECTION 4: ESTABLISHIG PROFESSIONAL GOALS

**FEEDBACK** 

PRACTICAL REFLECTION 5: CORRECTIVE FEEDBACK

RESPECT

Power

PRACTICAL REFLECTION 6: POWER DIFFERENTIALS

MULTICULTURAL ISSUES

PRACTICAL REFLECTION 7: MULTICULTURAL CONCERNS

POSITIVE RESOURCES AND PERSONAL STRENGTHS

PRACTICAL REFLECTION 8: EMPHASIZING YOUR PERSONAL STRENGTHS

OTHER KEY ISSUES FOR THE SUCCESS OF YOUR FIELD EXPERIENCE,

PRACTICUM AND INTERNSHIP

PRACTICAL REFLECTION 9: ANALYZING PAST TRANSFERENCE AND

Countertransference Issues

SUMMARY AND PERSONAL INTEGRATION

PRACTICAL REFLECTION 10: INTEGRATION

SUMMARY LIST OF RESOURCES

### Overview

This first chapter introduces you, the student, to the style and format of the entire book. Each chapter focuses on the concept of "praxis," turning theory into practical skills. You will address eight abilities that you must practice in order to get the most out of your field experience. Those necessary abilities are understanding and working on the following: neurocounseling/self-regulation, risk-taking, goal-setting, feedback, respect, power, multicultural issues, and available resources.

### Goals

- 1. Learn about the text format and function from the authors' viewpoints.
- 2. Analyze how neurocounseling and self-regulation skills may be integrated into your field experience.
- 3. Focus on personal and professional issues that you will encounter frequently throughout your field experience.
- 4. Discover and list fears and concerns that may interfere with effectively completing your field experience.
- 5. Understand the dynamics of power throughout the field experience.
- 6. Identify at least four goals that need to be accomplished by the end of the field experience.

### **Before You Start**

We welcome you to one of the most exciting and, certainly, most personally involving courses in the helping field. Working with clients, their families, and the community is what it is all about. The field experience, practicum, or internship all give you a chance to show what you can do. It is a place you can test out those theories and see if they really work.

Feedback is said to be the breakfast of champions. We recommend that you use the many resources available to you to gain as much information about your-self and your work as you possibly can. We provide a large number of resources in this book. But seek feedback from your colleagues and supervisors. Having others look at your work can be challenging, but it is here that you can grow the most. We suggest that you use your practicum, internship, or field experience as a foundation for your entire professional life. It is vital that you listen carefully to clients so that you can help them grow; you, too, will grow if you listen equally carefully to those supporting your development.

Each of us would like to share some thoughts about how to use this book and the importance of the field experience, internship, and practicum.

### Why was This Text Created?

### Lori

I have been teaching graduate level practicum and internship courses for the past 28 years. These field experience courses are my very favorite classes, as I have the great pleasure of watching all of you, the novice counseling trainees, transform into skilled helping professionals. It is a time of immense personal change and growth.

The difficulty of this class for me was that I have never found the exact text-book that could assist you and me through this exciting but scary experience. I often used supplemental texts and individual monographs, but again there was no book that focused on all the essential areas of the field experience.

As I began creating many of my own tools, I became aware that so much of what I believe about the helping profession came from the work of Dr. Allen Ivey. I bravely decided to ask Dr. Ivey and his wife, Dr. Mary Ivey, to travel to Bradley University to be guest speakers at one of our alumni events. That was the beginning of this textbook, as Allen and I began to brainstorm enthusiastically about the needs of a field experience book that would integrate all aspects of the field experience from developmental concerns to ethics to conceptualization to supervision!

Of course discovering colleagues with whom I work directly that have complementary counseling beliefs and skills is also a blessing. Dr. Nancy Sherman and I have worked together for the past 21 years, and it is exciting and energizing to collaborate with Nancy on this project as well.

The most amazing experience for me is how much my counseling skills have continued to improve since the first edition of this book. In 2010 a colleague and I began the development and implementation of a new Center for Collaborative Brain Research among my institution, Bradley University, a large local

hospital, OSF Saint Francis Medical Center, and the Illinois Neurological Institute. Since that time seven cutting edge brain research projects have been completed and disseminated. At the same time I became trained in neurofeedback (NFB), a noninvasive brain-based intervention using a computerized software system and an electroencephalogram (EEG) to modulate dysregulated brain waves. I decided I needed to know much more about the brain and the body, so I took an anatomy and physiology course. That was very helpful, and then I began studying for my board certification in neurofeedback (BCN).

All of these experiences truly changed how I conduct counseling today. I want to share much of that with you readers in this book.

### Nancy

As a colleague of Lori's also teaching Practicum/Internship courses at Bradley University, I have used the original version of this book since it was published. Students always comment on the usefulness, practicality, and wisdom of the text.

It could almost be a self-guided journey through practicum and internship! I say *almost* because the most important relationships I have had in my professional counseling career have been those with my various supervisors, the good, the bad, and the ugly. I am honored to share some of the wisdom I have gained from the past 25 years as a doctoral intern, counselor, and counselor educator with you through this revised text.

Unlike Allen and Lori, I saw my first client without the benefit of a counseling degree. I had completed a master's degree in College Student Personnel and, after a successful career in student affairs, moved to a small town in Ohio to help bolster my partner's career. Without a job of my own, I volunteered as an advocate for a women's help center for victims of domestic violence and sexual assault. When funding became available for a professional counselor position, the director of the agency asked me to apply even though I explained my lack of training in counseling.

Regardless, I was hired and with supervision from my social worker supervisor I saw my first client. As I was listening to her horrific story of domestic violence and sexual assault the only way I could think to respond was to share some of my family's experiences! My intention was to let her know she was not alone and that others have survived these crimes, to instill some hope. I don't remember if it helped as I had intended, but I do remember going to my supervisor and processing the experience. I learned valuable lessons about how to help clients experiencing extreme emotions as well as not making the session about me. I have since learned the value of appropriate counselor self-disclosure! I think I did many things "wrong" in that position but with the help of a skilled,

experienced supervisor my clients did get better. That job also led me to the decision to pursue a PhD in counselor education realizing that counseling and not student affairs was my future.

As part of my doctoral education, I completed a yearlong internship in clinical psychology at a children's hospital and a community mental health center. Besides an intense learning experience in psychological testing and diagnosing and treating people with mental disorders, I also learned that my place was in professional counseling with a developmental, wellness focus and not the medical model I was using at the time. That experience was, however, very helpful for teaching courses in assessment, DSM diagnoses, and similar aspects of clinical mental health counseling.

### Allen

I'll just share one personal story as we begin. My first practical experience in counseling was as an intern in the counseling center at Tufts University under the wise guidance of Alvin Schmidt, director. I certainly was inexperienced in a professional role and felt more than a bit awkward. How would I survive my first interview?

Luckily for me, Schmidt had a ready smile and was completely supportive and confident that I would be up to the job, even though he had no evidence for that fact. That first interview was neither particularly good, nor particularly bad, but reviewing it with him made an immediate difference.

I learned that it was okay to make mistakes and that I could learn and grow from them. I learned from Alvin Schmidt, the person, that relationship is key and the nature of the person who is the counselor or therapist is as important as book knowledge. Not all of you will have the patient mentor that I enjoyed, but there is something to learn from the feedback offered by all supervisors.

Theory is vital, but it is people like you and me who take it into practice.

Growing as a person and as a therapist is one of the goals of this text.

We are going to share some ideas, but it is you who will use some of them and make them work.

Schmidt also taught me something the books at that time did not cover.

I found it critical that I learn the ways of his agency, the counseling center, as quickly as possible. Forms, reports, and ethical standards were an important part of the job. I also discovered it was important to meet and know faculty members and administrators in the Tufts community. We tend to learn counseling and therapy in isolation, but it is practiced in a community context. If we are to be effective, we need to be community members and tailor our work to community needs.

Multicultural issues are an important part of the context of counseling.

We define culture broadly to include race and ethnicity, gender, socioeconomic status, sexual orientation, ability/disability, age, spirituality, and other relevant factors such as language (bilingual ability is an asset not a liability) or experience of trauma (a person who experienced rape, AIDS, cancer, loss of parent, or war has entered a special culture). Each community agency exists within a cultural setting, unique to itself. I suggest that you spend some time going beyond the immediate agency setting and learning about the community within which you work.

Let us now turn to what we have to share with you. We've enjoyed and profited from being supervised and supervising others. After you have completed work with this text, we'd enjoy hearing from you and obtaining your feedback. Please note the feedback form at the close of this book. Keep in touch and let us grow together. We welcome your feedback and suggestions, letting us know how you experienced this book.

### The Need for This Text: Lori's First Client Memory

It was my first day as a new counselor working in a mental health clinic in western United States. I was 25 years old, and I was ready! Now I could truly make a difference in the world! Trying to remember all the skills I was supposed to do was intimidating, but I felt confident. I had dressed professionally. I still remember what I was wearing, a brown shirtdress and matching shoes! I arrived early to work and I was just waiting patiently. Finally it was nine o'clock in the morning.

My client's intake form had been placed in her file. In walked Rachel. She was a tall woman and from her information she was 71 years old. Before I could say "hello," before I could attempt to talk about confidentiality, and before I could speak of the counseling process, Rachel began to pace in the room and silently stare at me. She would not sit down in any of the available chairs in my office. She continued to walk around the office, carefully observing me from top to bottom. Finally Rachel snorted, "Honey, what could you possibly have to offer me? You are a child with very little life experience, and you will never be able to help or understand my problems!"

I was stunned, of course. I do remember thinking: did any of my professors or supervisors tell me what to do when this happens? I decided to be silent, not as an intentional skill, but because I did not know what else to do! Then I recalled some concept called resistance. I decided to just go with it. Rachel continued to rant, and finally there was a small lull, so I responded, "Rachel, you are probably correct. I have not lived as long as you, and I don't have as much life experience as you. All I can do is listen to you and see if a counseling relationship develops. How does that sound to you?" Fortunately for Rachel

and me, that intentional response was one that worked! That was 32 years ago, and I remember it like yesterday.

### For You, the Student

Your Field Experience Resource Guide: Turning Knowledge into Action will be about you and your first clients too. The primary focus of this book is to offer you a comprehensive foundation and guide for your practicum and internship field experiences. It will be about your personal student journey as you progress and evolve through the final aspects of your graduate education.

### Goal of This Text

The teaching philosophy of the entire book uses the concept of "praxis," turning theory into practice. You will be able to integrate all aspects of the field experience through practical application of the two book case studies, exercises, practical reflections, individual assessments, goal-setting, and other available online resources through Routledge.

**Praxis**: A teaching approach allowing theoretical material to integrate into practical and relevant skill and techniques.

### **Book Features**

First, and foremost, this book is filled with resources to guide you through your field experience. Each chapter has practical reflections and examples of resources you can utilize from instruments assessing your supervision style to forms assisting you in analyzing your interviewing skills. In addition, each chapter will offer a necessary self-regulation skill for you and your clients. Throughout the textbook, there will be a special emphasis and focus on neurocounseling, bridging brain and behavior, and brain-based concepts and techniques. We will discuss more on neurocounseling later in the chapter.

The book has been developed into two modules. Section I, Getting Started: You, Supervision, and the Settings, has five chapters that address vital areas of supervision, the need for feedback, and the essentials of client conceptualization, diagnosis, and treatment. You will learn more about Rachel throughout Section I, as Rachel and her story will be the first of the two case studies presented in this book.

Section II, Knowledge Needed to Grow: Issues in Professional Practice, has five chapters, and in these chapters you will concentrate on areas that concern all helping professionals such as multicultural competencies and ethics and the law. Additionally this section will help you focus on your well-being as a helping

professional, learn about the importance of outcome-based research on supervision, and evaluate your counseling skills.

The second case study you will work with in Section II is about a young man named Darryl. He was referred to Lori years later in her counseling career, as he was having difficulty keeping his job, his marriage was failing, and he stated that he just could not keep it together. The following is Lori's memory:

By that time, I was teaching in a university setting and counseling in a private practice one day a week. I had just terminated with one client, so an opening was available. Once again I was prepared to conduct an initial intake session when Darryl took one look at me and began talking in tongues. I had little idea of what to do, so I listened respectfully. When Darryl finished, he curled up into a fetal position on my floor. Once more, I thought did any of my professors prepare me for this?! One of my first instincts was to call security for help, but I calmed myself down and moved to the floor with him! Darryl remained in that dissociative position for 45 minutes. When he finally sat up, I was still sitting on the floor with him. He inquired about the session, and I told him what I observed. We processed our first session. Darryl asked to leave but wanted to set up another appointment! I set up another appointment for Darryl, and then I called my supervisor for an appointment that was sooner than a week away! You will learn more about Darryl throughout Section II.

### **Chapter Topics**

Each book chapter will take a topic that is critical to your success in field experience and supervision and present material that can have direct and practical application to your practicum and internship. In Chapter 1, Turning Theory into Practice: Abilities Needed to Grow, you are introduced to eight practical abilities necessary for a successful field experience. These abilities allow you as a novice helping professional to address fears and concerns of beginning a field experience and the chapter provides a frank discussion of self-regulation, risk-taking, goal-setting, feedback, respect, power, multicultural issues, and available resources.

Chapter 2, Reviewing and Analyzing Cases: Microcounseling Supervision, provides a basic supervision model that teaches you a general vocabulary for reviewing microcounseling skills with intention, classifying those same skills with mastery, and summarizing your counseling interview style with an individualized supervision session. The Microcounseling Supervision Model teaches you the needed information to actively listen to counseling tapes and provide the corrective feedback needed to grow in your field experience.

Chapter 3, Becoming Effective as a Supervisee: The Influence of Placement Setting, introduces you to dimensions of effective supervision and the influences that your chosen placement setting may have in your field experiences.

In Chapter 4, Continuing Self-Improvement: Major Supervision Model Categories, you will be introduced to additional supervision models that will help you continue to grow in your field experience. The final chapter in Section I is Chapter 5, Conceptualizing the Client: Diagnosis and Related Issues. This chapter assists you in conceptualizing your client's case and diagnosing using the DSM-5 if necessary.

Chapter 6, Becoming a Culturally Competent Helping Professional: Appreciation of Diversity in Action, focuses on issues surrounding diversity and the manner in which your racial identity has developed. In Chapter 7, Working with Ethics, Laws, and Professionalism: Best Practice Standards, ethics are differentiated from professionalism, and landmark case laws are presented. Chapter 8, Counseling Research Outcomes: Discovering What Works, outlines the effectiveness of counseling with outcome research and your evaluation of your progress to date. The final two chapters, Chapter 9, Staying Well: Guidelines for Responsible Living, and Chapter 10, Becoming a Professional Helper: Advocacy for Clients, Self, and the Profession, bring closure to your field experience by helping you assess your personal wellness and any areas of impairment and emphasizing the importance of advocacy efforts for your clients, self, and the profession.

### A Guide

Please use this book as a resource guide to assist you on the adventures of becoming a skilled helping professional. Your efforts will not go unnoticed, and you will be rewarded with added confidence, wisdom, and continued curiosity about counseling and personal growth! Drs. Nancy Sherman, Allen Ivey and I will assist you through this exciting journey! The following poem by Rumi sets the stage perfectly for your challenges and growth to come.

### The Guest House

This being human is a guest house.

Every morning is a new arrival.

A joy, a depression, a meanness, some momentary awareness comes as an unexpected visitor.

Welcome and entertain them all!

Even if they're a crowd of sorrows, who violently sweep your house empty of its furniture, still, treat each guest honorably.

He may be clearing you out for some new delight.

The dark thought, the shame, the malice,

meet them at the door laughing, and invite them in.
Be grateful for whoever comes, because each has been sent as a guide from beyond.

(Barks, 1995)

# **Key Concepts: Needed Abilities for a Successful Field Experience**

Educators are always looking for methods that assist you to "realize more and memorize less" (Albertson, profiled in Bailey, 1986). The following sections emphasize just that. If you focus on each of the presented abilities, you will more easily realize and internalize what you need to gain from your field experience.

There are eight essential abilities that will be examined to assist you in getting started in your field experience. A successful beginning to your field experience rests in your ability to self-regulate, take risks, set goals, and examine yourself openly. After classes and theory, you will find yourself facing clients. And, your counseling practice will be reviewed by others—this itself is risk-taking and requires a solid self-concept.

Feedback from others on your performance will prove invaluable, but is often challenging. Respect for yourself and others will enable you to hear supportive and corrective feedback. Power differentials underlie all classroom and agency work. Understanding how power issues play out will likely be helpful in your comfort in your field experiences. Also, multicultural issues are present in all field experiences and your awareness and ability to consider these constantly is essential. Finally, discovering available resources that can assist you in staying healthy is crucial to the overall success of your field experience.

### Neurocounseling and Self-regulation Skills

The emphasis on self-regulation and the understanding of how neurocounseling impacts your work as a counselor will be the first skills and abilities discussed. Neurocounseling is a relatively new concept that has emerged in the counseling field (Russell-Chapin & Jones, 2014). A definition of neurocounseling is traditional counseling that integrates physiology and the brain into its tenets and understanding that many mental health symptoms have physiological and brain-based underpinnings. Even the number of neuroscience related presentations at the American Counseling Association (ACA) Conferences has tripled from 2008 to 2013 (Russell-Chapin & Jones, 2014). At the 2015 ACA Conference there were a record number of 15 neurocounseling

and Neuroscience Learning Institutes and educational sessions. A new Neurocounseling Interest Network was approved by ACA's Governing Council and in September of 2014 a monthly column was created for the *Counseling Today* magazine called Neurocounseling: Bridging Brain and Behavior (Russell-Chapin & Jones, 2014). A new movement in the counseling world has begun!

This exponential, almost daily, new information gained about the brain and its functions is overwhelming and abundant. Neuroimaging capabilities have allowed access to the innermost regions of the brain. We know the brain is a three-pound organ with 100 billion neurons, is plastic, and has neurogenerative functions. The brain loves challenges, and those challenges help build new neuronal pathways.

We have known for years that counseling helps people because counselors can hear new beliefs and thoughts and see changes in behaviors. Now through neuroimaging and neurocounseling research, we know that counseling changes the brain through positive plasticity (Russell-Chapin & Jones, 2015).

**Neurocounseling**: Integrates physiology and the brain into counseling tenets and understanding that many mental health symptoms have physiological and brain-based underpinnings.

### Self-regulation

Our brain functions on electrical and chemical processes. The entire electrical output is between 30 and 40 watts. That is about the same wattage that is needed for one light bulb in our home. The cortex, thalamus, and brain stem create the electrical activity. The cortex contains 97% of the brain's 100 billion neurons. The thalamus, a subcortical structure, is the mechanism responsible for the rhythm of neuronal firing and generation of the brainwave frequencies (Thompson & Thompson, 2003). We will talk about the different brainwave categories in another chapter.

**Self-regulation**: An individual's ability to intrinsically alter and control many physiological functions.

According to Chapin and Russell-Chapin, "The delicate and intricate symphony of the brain's electro-chemical processes is what determines its current state of healthy brain regulation" (2014, p. 20). We know there are many variables that disrupt this balance and brain regulation and often create many of the psychological and physical problems that you and your clients bring into the counseling arena. You already know many of the factors impeding

brain health and a dysregulated brain. To better understand what may cause dysregulation, take your first practical inventory presented in this book. It is called the Neurological Risk Assessment (Chapin & Russell-Chapin, 2014, pp. 9–10) and will explain for you and your clients possible causes of brainwave dysregulation.

Practical Reflection 1: Neurological Dysregulation Risk Assessment  Answer the following screening as honestly as you can. If you don't know the answer, you may want to ask a parent or relative. Tally the number of potential sources of dysregulation for you. What surprises you the most?		
		Neurological Dysregulation Risk Assessment
Name (or Child's Name):	Age: _	_ Date:
Current Problem, Symptom, or Complaint:		
Please read each potential source of neurological cate whether or not it may be a risk factor for you		
1. <b>Genetic Influences</b> : Grandparents, parents, health or learning disorders (including atterity disorder), post-traumatic stress disorder, canxiety disorder, substance abuse, personalic chological disorders (bipolar or schizophren	ntion deficient depression ty or oth	cit hyperactiv- n, generalized
Yes No		
2. <b>Pre-natal Exposure:</b> Maternal distress, psychological alcohol or substance abuse, nicotine use, of environmental toxins including genetically cides, petrochemicals, xenestrogens in plastic mercury), and fluoride, bromine, and chlorides. No	r possible modified cs, heavy	e exposure to foods, pestimetals (lead/

3.	<b>Birth Complications:</b> Forceps or vacuum delivery, oxygen loss, head injury, premature birth, difficult or prolonged labor, obstructed umbilical cord, or fetal distress.
	Yes No
	<del>_</del> _
4.	<b>Disease and High Fever:</b> Sustained fever above 104 degrees due to bacterial infection, influenza, strep, meningitis, encephalitis, Reyes Syndrome, PANDAS, or other infections or disease processes.
	Yes No
5.	<b>Current Diagnosis:</b> Of mental health, physical health, alcohol abuse, substance abuse, or learning disorder.
	Yes No
6.	<b>Poor Diet and Inadequate Exercise:</b> Diet high in processed food, preservatives, simple carbohydrates (sugar and flour), genetically modified foods, foods treated with herbicides, pesticides, and hormones, low daily water intake, high caffeine intake, and lack of adequate physical exercise (20 minutes, 7 times a week).
	Yes No
	<del></del>
7.	<b>Emotionally Suppressive Psychosocial Environment:</b> Being raised or currently living in poverty, domestic violence, physical, emotional, or sexual abuse, alcoholic or mentally unstable family environment, emotional trauma, neglect, institutionalization, and inadequate maternal emotional availability or attachment.
	Yes No
8.	<b>Mild to Severe Brain Injury:</b> Experienced one or more blows to the head from a sports injury, fall, or auto accident (with or without loss of consciousness), or episodes of open head injury, coma, or stroke.
	Yes No

9.	<b>Prolonged Life Distress:</b> Most commonly due to worry about money, work, economy, family responsibilities, relationships, personal safety and/or health causing sustained periods of anxiety, irritability, anger, fatigue, lack of interest, low motivation or energy, nervousness, and/or physical aches and pains.
	Yes No
10.	<b>Stress Related Disease:</b> Includes heart disease, kidney disease, hypertension, obesity, diabetes, stroke, hormonal and/or immunological disorders.
	Yes No
	<u> </u>
11.	Prolonged Medication Use, Substance Use, or Other Addictions: Including legal or illegal drug use, substance abuse, or addiction (alcohol, drugs, nicotine, caffeine, medication, gambling, sex, spending, etc.) and overuse of screen technologies (cell phones, video games, television, computers, internet, etc.).
	Yes No
	<del>_</del> _
12.	<b>Seizure Disorders:</b> Caused by birth complications, stroke, head trauma, infection, high fever, oxygen deprivation, and/or genetic disorders, and includes epilepsy, pseudo-seizures, or epileptiform seizures.
	Yes No
	<u> </u>
13.	<b>Chronic Pain:</b> Related to accident, injury, or a disease process, including back pain, headache and migraine pain, neck pain, facial pain, and fibromyalgia.
	Yes No
	<u> </u>
14.	<b>Surgical Anesthesia, Chemotherapy, and/or Aging:</b> Can cause mild cognitive impairment, insomnia, and depression and be related

to emotional trauma, loss and grief, chronic illness, physical decline, reduced mobility, physical, social, and emotional isolation, and decreased financial security.

Yes No

**Scoring and Interpretation:** Total Number of "Yes" Responses \_\_\_\_\_

In general, the greater the number of "yes" responses, the greater the risk of significant neurological dysregulation. However even one severe "yes" response could cause significant neurological dysregulation and result in serious mental, physical, or cognitive impairment (Chapin & Russell-Chapin, 2014, pp. 8–10).

There are self-regulation skills that can be practiced to assist in re-regulating the brain. There are other interventions such as counseling, neurotherapy, and neurofeedback that we will discuss in Chapter 8.

For now research has demonstrated that human beings can control much of their sympathetic and parasympathetic nervous system (Chapin & Russell-Chapin, 2014). Helping you new counseling students learn about personal self-regulation skills will directly influence how you teach and counsel your clients. You will also be healthier yourselves. Throughout this text and integrated within each chapter, you will have the opportunity to read and practice several of the self-regulation skills. The skills being emphasized will be diaphragmatic breathing, use of imagery, sleep hygiene, gut/brain connection and nutrition, exercise, skin temperature control, heart rate variability, neurotherapy and neurofeedback, harmonics, and mindfulness training.

The first self-regulation skill for Chapter 1 is the practice of diaphragmatic breathing. This may sound a little silly, but most people do not breathe correctly. Runners, singers, and musicians may have been trained to breathe well, but the average person just breathes automatically, and many are shallow breathers or chest breathers.

The diaphragm is a dome-shaped, inspiratory muscle that contracts and flattens when breathing. This muscle is located underneath the superior thoracic cavity (Marieb, 2012, p. 20). The benefit of this type of breathing improves the functioning of the brain through better absorption of glucose and oxygen. In turn, this will improve overall daily performance and often reduce anxiety, as the body begins to relax.

Typically normal breath rates are between 12 and 15 breaths per minute. According to Schwartz and Andrasik (2003) children two to five years old breathe more often, about 25 to 30 breaths per minute, five- to twelve-year-olds, 20 to 25 times per minute, and older than twelve, 15 to 20 times per minute. For clients to learn the relaxation response, the breathing cycle needs to be between four and six breaths per minute (Russell-Chapin, 2016, in press).

**Diaphragmatic breathing:** Focused breathing through the diaphragm to assist in relaxation and better absorption of glucose and oxygen.

Another way to visualize and practice this rhythmic breathing is counting slowly to five while inhaling through the nose and then exhaling to the count of five through open, pursed lips. That equates to six cycles of a ten count for one minute or six cycles per minute. Imagine "smelling roses" while inhaling, and "blowing out candles" while exhaling. An additional bonus of this skill is that with relaxation also comes increased skin temperature, which brings on greater relaxation. We will discuss more of skin temperature control later in the text.

### **Practical Reflection 2: Breathing Demonstration**

Continue journaling with each practical reflection exercise. Begin to focus on your breathing. How do you naturally breathe? Read again the paragraph above on diaphragmatic breathing. Practice breathing through your diaphragm. One way to visually see this pattern is to lie down on the floor or on your bed. Place a fairly large book over your diaphragm. As you breathe in through your nose to the count of 5, you should be able to push that book and see it rise. When you exhale to the count of 5, you should be able to see the book go down. Practice this for at least eighteen cycles or three minutes. If you don't want to use a book, then just place your hand on your diaphragm, and push it out when exhaling. What did you notice as you practiced diaphragmatic breathing? Write it down here.

### Risk-taking

Another very important ability that needs to be examined is taking risks during class and with your clients. There is an old saying: you will get out of this course what you put into it! Practica and internships are some of the most challenging,

demanding, and essential courses in your graduate education. Not only must you "turn theory into practice," but each of you must face individual fears and be willing to take risks as a budding counselor and as a valued peer supervisor to your classmates. This takes courage!

**Risk-taking:** Assessing personal anxiety and fears and courageously changing old ways to facilitate new behaviors.

Carl Jung (1954) once stated that one cannot be courageous unless one has been afraid and fearful! What a great statement. One of your first challenges in field experience then is to face your fears and take calculated professional and personal risks. For example, in this course, each of you may be required to demonstrate your counseling skills through video recordings, case presentations, simulations, and portfolio demonstrations. Showcasing your skills takes courage in itself. Insecurities are heightened, and you want to do well in front of your professor and peers.

Try to remember an important distinction: when others are offering feed-back about your work, their comments do not reflect upon you, the person, only on your skills. If this dichotomy is recognized, then you will desire the feedback even more, as it helps you to grow without the insecurities of approval.

Practical Reflection 3: Identifying Fears and Concerns
Right now, continue your reflective journal for this chapter. First jot down your fears and concerns about your field experience. These feelings and thoughts do not have to be shared with anyone. However, the more you are willing to share, the sooner you will begin to experience the concept of universality. Almost everyone in this class will have similar thoughts and feelings.

### **Goal-setting**

Once you begin this course, you must decide "what exactly do you want out of this experience." Some students say they just want to complete the requirements

with as little work as possible and jump through the necessary hoops. However, those students who see their field experience as a powerful opportunity for growth will thrive! This kind of structured, organized, small group supervisory opportunity will not be as easily accessible again in your professional life. Seize this time with optimism, and watch yourself change and grow as you never thought possible!

Decide what you want out of this course and set, at least, four tangible and measurable goals for yourself. Begin thinking about your prioritized goals for the field experience. Be sure to share with your classmates. Publicly stating your goals will offer additional motivation and investment to achieve your desired outcomes. As you accomplish these goals, get into the habit of periodically setting new and additional goals.

The importance of goal-setting seems to have the support of all helping professions. Not only does it strengthen the supervisee and supervisor relationship, but it offers specific and objective strategies to guide you through the learning process. You, your instructor, and supervisor will want to set your goals during one of your first supervisory sessions. Be sure to set short-term and long-term goals, reviewing and evaluating the goals through the field experience (Curtis, 2000).

For example, here are four sample goals that can help direct your field experience.

- 1. Even though I'm here a short time, I'd like to be able to become part of the total community of this service agency or school system. By the end of the first three weeks, I will have read the service directory with agency rules and guidelines, and I will introduce myself to three new co-workers each week.
- 2. I'd like to learn how to take corrective feedback positively. Too often, I fear hearing what others say. By the end of the first nine weeks, with my supervisor, I will work to learn to use the feedback as a mechanism for change, not personal attacks.
- 3. To increase my skill confidence, I will practice one new counseling skill every week and discuss with my supervisor its effect and outcome.
- 4. I will be prepared for my individual supervision session with structured Supervision Questions explaining my supervision needs.

# **Practical Reflection 4: Establishing Professional Goals**

Now begin your list of goals for this field experience. Courageously describe the outcome goals that you know you must learn to be a competent helping professional. These goals may have some similarity to others

, ,	be individualized to meet your differing wo short-term and two long-term goals.

#### **Feedback**

As you think about your goals, review your strengths and liabilities and "pick the brains" of your university instructor, your on-site supervisors, and your classmates who each bring wisdom and expertise for their input. Use this time constructively. Challenge yourself and your classmates to become the best helping professionals that you can.

The only way this challenge can take place, though, is to promise that constructive feedback will be offered. Constructive or corrective feedback is aimed at assisting you in changing some aspect of a particular skill.

**Feedback**: A communication skill offering perceptions, observations, and information that the receiver may use to facilitate change.

Please remember, too, that when asked for, feedback is best received! Ask for specific feedback during your individual and class supervisory sessions. It must and should be your responsibility as a supervisee to request what you need and want. Do not leave that up to others. Very little will be gained, if you leave your needs to others.

Also, very little will be gained if you offer only positive and vague feedback to yourself and your peers. We often hear students say comments such as, "You were wonderful with that client. I am so impressed with your skills." Those words are nice to hear, but they will not help anyone grow and improve.

Please offer feedback that is constructive and very specific. In the next section, we will offer an example of one method of assisting you with constructive feedback using a form that can be used with videos or live supervision. For now, though, remember the 80/20 rule of offering feedback. Make sure that 80 percent of the given feedback is positive and stated first, and then the remaining 20 percent of constructive feedback can be heard. Demonstrating your skills is scary, as most of us do want approval from others. With the 80/20 method, you will receive needed support and have the courage to move forward.

Practical Reflection 5: Corrective Feedback	
What corrective feedback do you need at this moment in your field ex rience? Ask for corrective feedback.	pe-

# Respect

Many of you have been with your professors and classmates for several courses. Some relationships have developed if you have taken risks and built necessary trust. If you are honest with your needs, fears, and concerns, the odds are that your fellow students will follow suit. Basic assertiveness at its best is asserting your thoughts, feelings, and ideas. Showing mutual respect, the underpinnings of assertiveness, will allow your field experience to flourish and produce extremely beneficial results. Practice the guideline that assertion breeds assertion, non-assertion breeds non-assertion, and aggression breeds aggression.

In your beginning theory class, you learned that empathy, unconditional positive regard, and congruent behaviors assist clients in building rapport and trust (Rogers, 1957). These same components are necessary for helping you and your classmates engage in trusting relationships and environments. Use your active listening skills and nonjudgmental actions with clients as well as your teachers, supervisors, and peers.

#### **Power**

Another often unspoken ability that is needed is that of personal and professional power. One definition of power is the ability to influence others due to the nature of the situation. There are many different layers of power in the helping professions. There is a power differential between counselor and client, counselor and supervisor, and counselor/student and professor. Each layer has its unique feature. In the varying combinations, one member of the dyad comes to the other party because of expertise and skills that the former does not yet possess. Seeking guidance, wisdom, and knowledge from another places you in a disadvantaged position with power. Knowledge is power, and this power needs to be used cautiously and carefully.

**Power**: The ability to influence the behaviors of others through direct or indirect maneuvers.

In the counseling relationship, the counselor has the power from the beginning because the client is in a vulnerable state and is seeking help and relief. It is your job as a helping professional to lessen and eradicate that power through listening nonjudgmentally and allowing the client to solve individual concerns and make personal decisions.

There is a parallel process in counseling and supervision. You enter into the supervisory relationship seeking guidance and wisdom. One large difference, though, is the fact that your supervisor and instructor, unlike counselor and client, do have an evaluative aspect to their job responsibilities. Because of evaluation and grading duties, faculty do have some power over your behaviors and attitudes as a student.

**Supervision**: A structured approach to assist differing developmental and competency levels of helping professionals with a more experienced professional.

We all use power every day, and power can have healthy consequences and negative consequences. There are certain power skills you can utilize as a student to level out the playing field. As a student and counselor-in-training, the most important power skill you must utilize is to ask for what you need and clarify concerns. If you have the courage to do so, the odds are you will get what you desire, particularly if you believe your supervisor is using her/his power unfairly.

All the abilities discussed in this chapter are interwoven together in a collaborative fashion. Developing and using these abilities may be risky, but for the outcome of your field experience it will be riskier not to use these abilities. All of the abilities described in this chapter are so essential if your field experience is to be successful, your supervisory relationship is to prosper and grow, and you are to grow and polish your counseling skills.

Pı	ractical Reflection 6: Power Differentials
ately. What action	when a helping professional used power inappropri- a could you have taken to display the appropriate use of arification of personal needs?

#### **Multicultural Issues**

Another essential ability is the understanding of multicultural issues. The term "multiculturalism" has become increasingly inclusive over the years. Whereas once it referred specifically to ethnic/racial differences, multiculturalism encompasses language, race/ethnicity, spiritual orientation, gender, sexual orientation, and many other factors. Cultural issues have become so broad that many now state that all counseling is multicultural and list the following factors as important potential components in the individual or group sessions (Ivey, Pedersen, & Ivey, 2001, pp. 2–3):

- Family context
- Social systems context
- Demographic context
- Status context
- Life experience context.

Culture is made up of all these issues and more. You and each of your clients bring unique cultural experiences to the session. If your client is going through a divorce and you have never had that experience, you are engaged in a cross-cultural encounter even though you and your client may be similar on all other issues. There is a culture of cancer survivors, a culture of Iraq veterans, a culture of those who have immigrated to another country, a culture of survivors from recent natural disasters.

The field experience will test your ability to understand and be empathic with others. There are those who say, "If you haven't been there, you can't understand." There is no question that if you have not been addicted to cocaine, you likely cannot fully understand the issues your client faces. At the same time, your difficult life experiences will be helpful and your empathic understanding, listening, and demeanor will make an important difference in the life of your client.

Understanding the process of change allows you to guide others through the system with your own special and unique orientation to the world, even if you have not gone through that particular problem. As you become more deeply immersed in the field experience, continue to sharpen your understanding and awareness of the infinite multicultural issues underlying all helping.

#### **Practical Reflection 7: Multicultural Concerns**

When have you experienced being judgmental of another culture? Discuss the many varying dimensions of that experience.


# Positive Resources and Personal Strengths

A final ability that will prove invaluable to you is learned optimism. In your beginning skills course, you began to appreciate the importance of the positive asset search (Ivey, Ivey, & Zalaquett, 2014). Drawing out the client's strengths, especially during painful and discouraging times, allows your client to regain personal power and focus on the concerns with a sense of renewed strength. Your client can remember that life has been better and not so difficult. If your client survived and surpassed other trying times, then this experience can also be surpassed as well.

As with your clients, you, too, are entering a somewhat scary and vulnerable field experience. Use the skill of the positive asset search to reframe your challenges in your internship. We believe it is true that you can find strengths in your weaknesses and weaknesses in your strengths! Your optimistic attitude will allow the entire field experience to blossom.

By now you are beginning to know and understand yourself well. What are your strengths? Remember back to another time in your life, when you were challenged and feeling insecure. Look at those resources to see which ones can generalize to your situation now. Perhaps special friends or family got you through, or you noticed that regular exercise regulated your stressors. Some of you may find that spiritual resources guided you. No one resource is the answer. We believe it is true that you can find strengths in your weaknesses and weaknesses in your strengths. Your optimistic attitude will allow the entire field experience to blossom.

<b>Practical Reflection 8: Emphasizing Your Personal Strengths</b>	
Write down some of your personal strengths. Which of these strengths assisted you through a major transition and a difficult challenge during another period in your life? How are you utilizing these same resources currently in your field experience?	

# Other Key Issues for the Success of Your Field Experience, Practicum, and Internship

Appreciating this time in your professional journey is paramount to your success. Here are a few additional resources that will help your field experience be successful.

**Scheduling appointments.** To enjoy weekly supervision, first schedule weekly appointments that are set at regular times. This method assures you and your supervisor that your weekly obligations are important to you. Do not assume your supervisor will arrange for these meetings. Supervisors are very busy with other duties; your supervision is just one extra responsibility.

Owning defensiveness. You must not allow your insecurities to get in the way of receiving feedback. Early on in one of your first supervision sessions, as your supervisor is offering suggestions, you may find yourself thinking, "I know what I like, and I like what I know. Stop offering me other ideas to confuse me!" At that moment begin to recognize and own any personal defensiveness. It is critical that you try not to be defensive. Try to turn your resistance into receptiveness to your supervisors' and peers' feedback. When you feel yourself shutting down, getting hurt or angry about someone's comments, and being generally inflexible, try to respond with "Please tell me more so I can better understand the intention and reasoning behind this." It is not easy to do, but remember there is a multitude of methods for counseling others! The more flexibility you learn, the more you will enjoy counseling clients who are different than you are and the more helpful you can be to a diverse population of people.

**Resistance:** Conscious or unconscious action designed to protect a client or supervisee from uncomfortable material or situations.

Understanding change. This next situation will eventually happen to you, as it has occurred with every person in the counseling profession and every person in the world! Sometimes you will just feel stuck in the counseling session. Theories and techniques do not work, and you feel as if you don't comprehend any of the needed conceptual ideas for your client. Remember that change can be a difficult journey. It is, however, one of the few constants in the world, so it is important that you understand about the change process, for you as well as your clients. Most of us do not like change. It goes against the status quo, and often our bad situation or techniques are just fine, as at least they are familiar. Another Carl Jung paraphrase comes to mind (1954), "If something is not working, don't keep doing the same thing!" If you follow his sage advice, whenever you feel stuck or confused, remember to experiment with another technique or theory. We think the confusion is a healthy place to be. If you are

confused, you are not stuck. You are moving to another place, the stagnation has left, and the change process has begun.

An example of the change process is illustrated in a story about a small boy named Sam. He lived with his very strict father whom Sam feared very much. One day Sam and his friends were playing baseball in the front yard, and Sam hit the ball into the neighbor's side window, shattering it into little pieces. The children scattered away in all directions knowing they were all in big trouble. Sam tried to think what to do. He knew his father would be furious, as he had told the children not to play ball in the front yard. Sam could not force himself to tell the truth to his father. His fear of his father's punishment was greater than the pain of telling the truth and facing the future consequences.

Very few of us are willing to change, not our clients or ourselves, until the fear of the unknown is less than the current pain! That can be stated in the opposite way, as well, by stating that you will not change unless the current pain is greater than the fear of the unknown. So anytime you begin to struggle in your field experience, sit down and face your pain and fears. Decide what you can do to move to the next phase. This would be a great topic for your individual supervision sessions!

Needing a personal counselor. The topics of supervision will vary greatly. You have been encouraged to ask for what you want and pick the brains of your supervisors. Sometimes, though, you need to let the supervision process unfold naturally. Sometimes, you won't even know what it is you need or want. That, too, is all right. Sometimes you may need to talk about yourself and not the client. If you let that happen, your client will indirectly benefit, as you have allowed yourself to deal with factors in your life that may be interfering with your role as a counselor. We are not suggesting that you engage in counseling with your supervisor. That is crossing an ethical boundary of dual relationships, but you can deal with immediate concerns. If there is more to the issue, please allow your supervisor to refer you to a helping professional or find a counselor for yourself. Every person can benefit from personal counseling. Your field experience is a very stressful time, so personal counseling would serve you as a useful tool and resource.

*Transference and countertransference.* There is another way you can tell if you may need counseling during your practicum and internship. If you think your supervisor is "the best thing since cut grass" or "he must be the best supervisor in the entire world" or "she doesn't understand anything about this case," you may be experiencing the phenomena of transference. This also may be occurring if you are thinking about your supervisor frequently.

**Transference**: Passing personal characteristics of significant others in past relationships onto a therapist, supervisor, or others.

Sometime during your field experience, you may be asked whether you like all your clients all the time. Many students new to the helping professions will hesitate and answer, "Yes!" It is truly healthy to like and even dislike clients. You don't have to like someone to work with them. However, liking a client too much or disliking clients too much may be particularly dangerous transferential issues. When this happens to you, and it will, be sure to discuss it with your supervisors.

Be cautious of extreme emotions during the supervisory process. This intense experience and an often deep supervisory relationship are rich and fertile ground for personal growth and unfinished business with others. Your supervisor may be the one person who can help you to deal with old issues. From several decades of providing counseling services, it seemed as if every time we had unfinished business in our lives, it would walk right into our offices! It is then that we know it is time to enter into personal counseling.

Don't be afraid to seek counseling when you need it the most! The flip side of this coin is, of course, countertransference. You may sometimes find that your supervisor has issues too. That should be of no surprise to you, as everyone does. If you do feel that your supervisor is placing unfair expectations on you or placing emotions onto you that are not yours, please have the courage to address that with him or her. Often it will be the immediacy you need to assist you both in growing. If this doesn't work, contact your university supervisor or vice versa.

**Countertransference:** A phenomenon where a person in authority transfers personal qualities of significant others from the past onto subordinates.

Practical Reflection 9: Analyzing Past Transference and Countertransference Issues	
Discuss with your classmates any times you now realize may have been transference or countertransference issues?	
·	

## **Summary and Personal Integration**

This chapter emphasizes the importance of getting started correctly by identifying fears and concerns that may interfere with your progress. Eight needed

abilities and skills were addressed to assist you in growing during your field experience:

- neurocounseling, self-regulation, and diaphragmatic breathing
- risk-taking
- goal-setting
- feedback
- respect
- power
- multicultural issues
- optimism and available resources.

Each of you came to your field experience with unique skills and expertise. Try not to compare your strengths with those of others but focus on your current strengths and resources. Take a deep breath—you are just getting started, remember? Seriously, continue to practice your breathing!

Practical Reflection 10: Integration	
Identify at least one major ability from Chapter 1 that will have the most impact on your personal growth during your field experience.	

## **Summary List of Resources**

**Resource A:** Glossary of CIRF Skills

Resource B: Microskill Classification: Transcript of Rachel and Lori

**Resource C:** Counseling Interview Rating Form

**Resource D:** Counseling Interview Rating Form

**Resource E:** Counseling Interview Rating Form

**Resource F:** Supervisory Style Inventory

Resource G: Author's CIRF Quantification of the Case of Stephen

**Resource H:** Student Practicum/Internship Agreement

**Resource I:** Practicum/Internship Contract

**Resource J:** Adult Informed Consent Form

**Resource K:** Child Informed Consent Form

**Resource L:** Release of Confidential Information

**Resource M:** Site Supervisor Evaluation of Student Counselor's Performance

**Resource N:** Microcounseling Skills Used in Differing Theoretical Approaches

**Resource O:** Supervisee Perception of Supervision

**Resource P:** Microskills Hierarchy

**Resource Q:** Case Presentation Outline Guide

**Resource R:** Counseling Interview Rating Form

**Resource S:** Author's Quantification of CIRF—Summarization and Processing Skills of the Case of Darryl

**Resource T:** The Case of Darryl with Skill Identification

**Resource U:** Web Addresses for Professional Organizations and Codes of Ethics

Resource V: ACA Code of Ethics and Standards of Practice

**Resource W:** Indirect Evidence: Methods for Evaluating the Presence of Nontherapy Explanations

**Resource X:** Rotter's Locus of Control Scale

**Resource Y:** The Lifestyle Assessment Survey, Form C **Y.1** Therapeutic Lifestyle Changes Inventory

**Resource Z:** Chi Sigma Iota Advocacy Themes

**Z.1** Advocacy Competencies

#### References

Bailey, A. (1986). Faculty leaders in profile. Change, July/August, 18, 24–32, 37–47.

Barks, C. (1995). *The Essential Rumi*. San Francisco: HarperCollins. Reprinted by HarperCollins Publisher, Inc.

Chapin, T. & Russell-Chapin, L. (2014). Neurotherapy and Neurofeedback: Brain-based Treatments for Psychological and Behavioral Problems. New York, NY: Routledge.

Curtis, R.C. (2000). Using goal-setting strategies to enrich the practicum and internship experiences of beginning counselors. *Journal of Humanistic Counseling, Education and Development*, 38, 194–205.

Ivey, A., Pedersen, P., & Ivey, M. (2001). *Intentional Group Counseling*. Pacific Grove, CA: Brooks/Cole.

Ivey, A.E., Ivey, M.B., & Zalaquett, C.P. (2014). *Intentional Interviewing and Counseling* (8th edn). Pacific Grove, CA: Brooks/Cole.

Jung, C.G. (1954). The Practice of Psychotherapy, vol. 16. London: Routledge and Kegan Paul.

Marieb, E.N. (2012). Essentials of Human Anatomy and Physiology (10th edn). San Francisco: CA, Pearson.

Rogers, C. (1957). The necessary and sufficient conditions of therapeutic personality change. *Journal of Consulting Psychology*, 21, 95–103.

Russell-Chapin, L. (2016, in press). The power of neurocounseling and self-regulation. In J. Edwards, S. Young, & H. Nikels (eds.), *The Handbook of Strength-based Practices: Finding Common Factors*. New York: Routledge.

Russell-Chapin, L. & Jones, L. (2014). Neurocounseling: Bridging brain and behavior. September, *Counseling Today*, American Counseling Association.

- Russell-Chapin, L. & Jones, L. (2015). Neurocounseling: Bringing the brain into clinical practice. *Fact Based Health*, 2/3/2015, http://factbasedhealth.com/neurocounseling-bringing-brain-clinical-practice/
- Schwartz, M.S. and Andrasik, F. (2003). *Biofeedback: A Practitioner's Guide* (3rd edn). New York, NY: Guilford.
- Thompson, M. & Thompson, L. (2003). *The Neurofeedback Book*. Wheat Ridge, CO: Association for Applied Psychophysiology & Biofeedback.

# REVIEWING AND ANALYZING CASES

# Microcounseling Supervision

Perhaps most excitingly, we are uncovering the brain basis of our behaviors—normal, abnormal and in-between. We are mapping a neurobiology of what makes us us.

-Robert Sapolsky

#### OVERVIEW

#### **G**OALS

**KEY CONCEPTS: MICROCOUNSELING SUPERVISION** 

THE BRAIN AND ITS FUNCTIONS

HEAD MAP OF FUNCTIONS

PRACTICAL REFLECTIONS 1: INTENTIONAL SKILLS AND BRAIN FUNCTIONS PRACTICAL RELFECTION 2: AN INTENTIONAL IMAGERY EXERCISE

THE MICROCOUNSELING SUPERVISION MODEL

THE THREE COMPONENTS OF MICROCOUNSELING SUPERVISION

PRACTICAL REFLECTION 3: REVIEWING SKILLS WITH INTENTION

PRACTICAL REFLECTION 4: CLASSIFYING SKILLS WITH MASTERY

PRACTICAL REFLECTION 5: SUMMARIZING AND PROCESSING SKILLS

#### USES OF THE CIRE

CASE PRESENTATION

PRACTICAL REFLECTION AND SELF-ASSESSMENT 6: ESTABLISHING YOUR COUNSELING SKILLS BASELINE

PRACTICAL REFLECTION 7: Understanding Microcounseling Supervision

#### SUMARY AND PERSONAL INTEGRATION

PRACTICAL REFLECTION 8: INTEGRATION

RESOURCE A: GLOSSARY OF CIRF SKILLS

RESOURCE B: MICROSKILL CLASSIFICATION: TRANSCRIPT OF RACHEL AND LORI

RESOURCE C: COUNSELING INTERVIEW RATING FORM

RESOURCE D: COUNSELING INTERVIEW RATING FORM

RESOURCE E: COUNSELING INTERVIEW RATING FORM

If you take what your client gives you, you will rarely be lost in the counseling process. If you do get lost, attend, attend, and attend!

—Lori Russell-Chapin

#### Overview

Reviewing counseling interviews and analyzing case presentations are essential teaching strategies for every helping profession educational program. This chapter assists you in reviewing those basic microcounseling skills that are used in some fashion in every theoretical orientation and counseling interview. This chapter focuses on a type of supervision called Microcounseling Supervision that provides a vocabulary guide and constant examination of personal counseling style. You will examine and practice using the Counseling Interview Rating Form (CIRF). The CIRF is an instrument that can be utilized for qualitative and quantitative feedback from counseling interviews. Other methods of supervision will be presented later in the text, but Microcounseling Supervision is presented first as a foundation for listening to counseling interviews and reviewing necessary skills.

Also with the advances in neuroscience and neurocounseling, counseling educators and students need to understand the implications of using intentional counseling skills with their clients and their clients' brains. Each counseling skill presented in this chapter has an impact on a particular function in the brain. These will be discussed here.

#### Goals

- 1. Correlate neurocounseling and neuroscience brain functions to the counseling interview and skills.
- 2. Deliver constructive feedback to others and appreciate the importance of individual constructive feedback.
- 3. Label and identify which counseling skills are being used during one of your recorded counseling interviews using the Counseling Interview Rating Form (CIRF).
- 4. Use the CIRF to quantify and qualify other students' video recordings.
- 5. Identify the three basic components of the Microcounseling Supervision Model.
- 6. Plan and deliver a concise case presentation.

# **Key Concepts: Microcounseling Supervision**

Two of the most important learning strategies in your field experience are reviewing video recordings of counseling sessions and analyzing case presentations.

Obtaining feedback from your classroom supervisor, on-site supervisor, and your peers about your sessions and case presentations are crucial to your personal development and growth as a new counselor and helping professional. This feedback is essential not only for your personal growth but also to the growth of your clients. In this chapter, a method for providing personal feedback is presented using the Microcounseling Supervision Model (MSM) and the corresponding Counseling Interview Rating Form (CIRF). Before we thoroughly investigate the MSM and analyze intentional skills, you also need to imagine how every intentional skill you learn has a correlating intentional location and function in your brain and that of your client.

#### The Brain and Its Functions

When you strategize what intentional skills will bring about the best response for your clients, we now want you to also enlarge this strategy to include neurocounseling, bridging brain and behavior, that was discussed in Chapter 1.

The authors of this textbook encourage every counseling student to take another anatomy and physiology course or review the one you had as an undergraduate. The reason we want you to take a new course, though, is that so much new information has been discovered about the brain. In Chapter 2 we will briefly discuss several important aspects of the brain and the corresponding functions. These functions will allow you to see where each of your many counseling skills is directly working. This understanding will make you a much more efficient and capable counselor.

You will remember that the brain is divided into three major components: the forebrain, midbrain, and hindbrain (Carter, 2014). Although they communicate with each other, communication can be local, regional, and global. The forebrain handles complex reasoning. The midbrain coordinates our sleep, motor coordination, breathing, and reflexes. The hindbrain acts as a relay station between the forebrain and the hindbrain through our eyes and ears (Chapin & Russell-Chapin, 2014).

# **Head Map of Functions**

Each of these brain components can be separated into more specific brain locations and functions. Neurofeedback, another type of neuromodulation, is an intervention that Lori, one of the authors, uses to assist clients with training the dysregulated aspects of the brain. Neurofeedback (NFB) is a noninvasive method that trains the brain to use needed brainwaves for particular tasks using the principles of operant and classical conditioning (Chapin & Russell-Chapin, 2014). Sensors are placed on the head using a format called the 10–20 System.

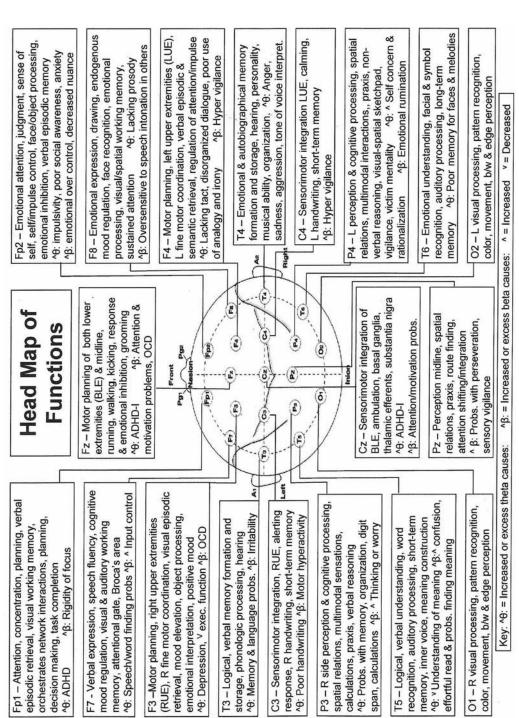


Figure 2.1 Head Map of Functions illustrates the 10-20 System of brain site location used in EEGs as well as brain functions (Anderson, 2010). © 2015 John S. Anderson. Permission granted by John S. Anderson

**Neurofeedback**: A noninvasive neurotherapy technique, biofeedback for the brain, that regulates the dysregulation in the brainwaves through an EEG amplifier and a computerized software program. Neurofeedback (NFB) uses the principles of classical and operant learning to condition and train the brainwaves. NFB is another self-regulating intervention.

Figure 2.1 shows this 10–20 System, and it also labels the specific locations and functions of the brain. Carefully read through the Head Map of Functions as these descriptions and functions will be the same places that many of our counseling skills will activate.

**Head Map of Functions**: This map labels the locations and functions of the human brain using the 10–20 System of Classification.

# Practical Reflection 1: Intentional Skills and Brain Functions After reading the Head Map of Functions, list three intentional counseling skills you know you use with clients. What location of the brain do you think you are engaging? Explain.

In Chapter 1 you were introduced to the importance of self-regulation skills for you and your clients. The first self-regulation skill to practice was diaphragmatic breathing. Each chapter self-regulatory skill will build upon the next, and by the end of the book, you will have a greater appreciation for neurocounseling and the need for self-regulation. A bonus is that you will feel healthier!

The second self-regulation skill being introduced in Chapter 2 is the use of imagery for yourself and your clients. One of the goals of self-regulation is the concept of brainwave state flexibility (Kershaw & Wade, 2011). Being able to use the right brainwave at the right time for the right task is paramount to healthy living (Chapin & Russell-Chapin, 2014). When it is time to sleep, your slow delta waves (0–4 hertz or cycles per second) assist in falling asleep at nighttime. When it is time to focus to read this material, your busier beta waves (13–18 hertz) transition into alertness when you need to read and comprehend.

**Brainwave state flexibility**: Achieving brainwave state flexibility allows counselors and clients to rehearse and improve their self-regulation by utilizing needed brain waves for intentional activities. Brainwave state flexibility practices moving up or down brainwaves as tasks are required such as practicing imagery when relaxation is needed to produce theta (5–8 hertz) and alpha (9–12 hertz) waves.

As you know, not every person's brain is healthy enough and regulated enough to be able to have that brainwave state flexibility. One method of teaching brainwave flexibility is the use of imagery where essential brainwave states can be utilized and practiced through relaxation exercises, scripts, and visualizations.

# **Practical Reflection 2: An Intentional Imagery Exercise**

Read through the following scripted imagery exercise. You may prefer to have a friend or fellow practicum/internship student read it for you as you engage in the exercise.

Begin to focus on your diaphragmatic breathing. With the next inhalations, take that rich oxygenated breath to any part of your body that might have tension from the day. With the next breath that you exhale, take that stress and tension and gently push it out through your fingertips and your toes. As you continue, and your body begins to relax, envision sitting across from one of your clients for the first time. You see the details of their clothing. You listen to the tone of their voice. You are hearing her or his story, noting emotions, cognitions, and behaviors that play a central role in present functioning. You are developing the therapeutic relationship by empathizing, mirroring, attuning, and establishing resonance. The difference this time around is that you are also focusing on neurocounseling and how you can bridge the gap between your client's brain, behaviors, and symptoms.

Suddenly this new emphasis opens up an entirely new territory for additional knowledge, skills, treatment, and outcome possibilities. You begin to understand how neurocounseling teaches your clients about their physiology and how the brain impacts behaviors and emotions. You begin to understand how selecting an intentional skill of paraphrasing may resonate with your client feeling safe and listened to for the first time in a long time. This emotional safety engages the mirror neurons in the brain

and activates parts of the pre-frontal cortex. You can visualize all of the 100 billion neurons firing in the brain. It is a beautiful sight.

Teaching neurocounseling to your clients helps them better understand how they are more than just thoughts and behaviors. Better understanding the functions of the brain offers you and your clients a deeper understanding of who they are. Your clients seem relieved with this large picture of self. You feel more confident with your intentional selection of skills knowing how and why they work in the brain. You realize you have activated your theta and alpha waves through this imagery exercise. You are relaxed and content. (Adapted from Russell-Chapin, L.A. & Jones, L. (2014).)

Reflect on this imagery exercise. How does your body feel? What brain wave states were flexibly achieved? What did you learn?	

# The Microcounseling Supervision Model

Now let's get busy and focus on the Microcounseling Supervision Model as a standardized approach assisting you in reviewing, offering feedback, teaching, and evaluating microcounseling skills. The Microcounseling Supervision Model has three major components:

- 1. Reviewing Skills with Intention,
- 2. Classifying Skills with Mastery, and
- 3. Processing Supervisory Needs.

Its tenets are based on microcounseling skills first reported by Ivey et al. (1968), and all the skills correspond to the five stages of the counseling interview.

**Microcounseling Supervision**: Supervision that allows you to work independently and in peer group supervision to understand the fundamentals of the counseling process and interview. Microcounseling skills are used in almost every model of supervision, and this model of supervision builds a strong foundation for needed basic skills. It has three stages: (1) Reviewing Skills with Intention, (2) Classifying Skills with Mastery, and (3) Understanding the Supervisory Process.