

**COUNSELOR EDUCATORS' EXPERIENCES TEACHING STUDENTS TO
INTEGRATE FAITH AND SPIRITUALITY INTO CLINICAL WORK**

by

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Abstract

Faith and spirituality are cultural identifiers that are often overlooked in counseling but significant cultural factors that support positive mental health and overall wellness. This generic qualitative research study explored counselor educators' experiences at CACREP accredited institutions teaching master's level counseling students to integrate faith and spirituality into clinical work. Most of the existing research literature regarding faith and spirituality in counseling has been from counselors' perspectives, with little research from the perspectives of counselor educators. The sample included 15 counselor educators who taught in CACREP accredited clinical mental health, school counseling, and marriage and family counseling therapy programs. A semi-structured interview utilizing the Zoom application recording for audio-only was used to collect data. After collecting data, the audio recordings and automatically generated transcripts from Zoom were uploaded into MAXQDA and saved to an external flash drive. MAXQDA was used to help the researcher validate transcription accuracy, organize, code, analyze and interpret the participants' data. Six final themes emerged from the data analysis: self-awareness, roles and responsibilities, assessment and case conceptualization, therapeutic relationship, academic programs, and methods and approaches. Recommendations for future research include studying the preparation and training of counselor educators to teach faith and spirituality, faith-based programs integration of faith and spirituality across core learning areas and replicating the study using counselor educators from non-CACREP accredited counselor education programs.

Dedication

I dedicate this research study to my husband Connell, who encouraged me, prayed for me, and supported me along this journey; thank you for helping me keep my faith and focus on finishing! To my children, Daniel, Joshua, Naomi, Ashley, CJ, and Cierra, thank you for your patience, encouragement, and understanding of why dinner was not made every night. Also, I want to thank my parents for instilling in me a love of learning and the value of education.

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CHAPTER 1. INTRODUCTION

Faith and spirituality have emerged as critical factors to address when counseling clients because of the positive impact on one's mental health and wellness (Harris et al., 2016; Henriksen et al., 2015; Portnoff et al., 2017). According to Harris et al. (2016), faith and spirituality are culturally relevant identifiers that shape a person's worldview, direct one's life, and maintain overall well-being. This study explored counselor educators' experiences at the Council for Accreditation of Counseling and Related Educational Programs (CACREP) accredited institutions teaching master's level students to integrate faith and spirituality into clinical work. Faith and spirituality are critical components of multiculturalism (Chan et al., 2018). CACREP's (2016) core standards indicated that counselor education programs include multiculturalism topics, including faith and spirituality. Thus, teaching students to integrate faith and spirituality into clinical work is important to counselor education and the competence of future counselors. This chapter consists of the background of the study, need for the study, purpose of the study, the significance of the study, research question, the definition of terms, research design, assumptions, limitations, and the organization of the remainder of the study.

Background of the Study

Individuals are increasingly searching for clinicians who can incorporate their faith and spirituality into their counseling sessions (Errington, 2017; Giordano & Cashwell, 2014; Harris et al., 2016). In a Gallup poll of 1000 American adults, 66% wanted a counselor who aligned with their values and faith beliefs, while 81% of the participants wanted their faith and spiritual values included in counseling (Harris et al., 2016). Portnoff et al. (2017) found that the inclusion of faith and spirituality in counseling reduces depression, anxiety, and suicidal ideation. According to Harris et al. (2016), people want counselors who can include practices like prayer,

scripture reading, and faith-based interventions into counseling to align with their specific cultural identifiers. Similarly, Sutton et al. (2016) reported findings from a study of Christian counseling clinicians who consistently used prayer, biblical scriptures, and spirituality-related activities with their clients. Bland (2018) and Maximo (2019) stated that attunement and empathy, key elements of rapport building, are demonstrated when incorporating a clients' unique cultural identifiers and practices into counseling sessions.

Effectively addressing cultural factors, such as race, ethnicity, socioeconomic status, faith, and spirituality, in counseling is essential for establishing rapport and a robust client-counselor bond (Bayne & Tylsova, 2019; Gladding & Crockett, 2019; Harris et al., 2018; Stewart-Sicking et al., 2017). Bartle-Haring et al. (2016) discussed how a robust client-counselor relationship is a catalyst for change and supports increased positive counseling outcomes. Beck and Kulzer (2018) and Nienhuis et al. (2018) further explained that empathy, genuineness, active listening, silence, and nonverbal communication are counseling microskills learned in the classroom that help build the therapeutic alliance and a client-counselor bond.

In a review of over 100 research studies, only seven addressed faith and spirituality in a classroom setting, and even fewer addressed the topic from a counselor educator's perspective (Coyle, 2017; Greggo, 2016; Leighton, 2016; Loosemore & Fidler, 2019; Scott, 2018, 2019; Trahan & Keim, 2019). Eppler (2018), Holmberg et al. (2017), Swinton (2016), and Williams-Reade et al. (2019) reported that although academic settings addressed religious and spiritual education and training, it was often an afterthought or post ad hoc topic and lacked practicality in clinical settings. Swinton (2016) and Williams-Reade et al. (2019) showed that most counseling students are not taught how to include faith and spirituality in clinical work and enter the field lacking the skills to include clients' cultural identifiers.

Preparing master's level students to integrate faith and spirituality into clinical work effectively could strengthen their confidence and cultural competence (Osborne & Jones, 2020; Swinton, 2016; Walsh et al., 2021) while improving therapeutic outcomes (Kim et al., 2019; Portnoff et al., 2017). In a study of practicing counselors, over 50% of the participants agreed that their education and training did not prepare them to address clients' requests to incorporate faith and spirituality into their counseling sessions (Stewart-Sicking et al., 2017). Additionally, Stewart-Sicking et al. (2017) found that some study participants reported not knowing how to incorporate faith and spirituality, while others felt it was not significant enough to include. Henriksen et al. (2015) found that insufficient classroom training led to a lack of confidence, feelings of inadequacy, and impostor syndrome. These negative feelings and self-perceptions are barriers to clients receiving optimal care and reaching therapeutic outcomes (Bohecker et al., 2017; Walsh et al., 2021). Adams et al. (2015) reported that counselors sometimes felt that their work with clients was not effective, nor were they capable of meeting their client's counseling needs (Adams et al., 2015). The focus must turn to counselor educators and their reasons for not introducing faith and spirituality topics to their students (Johns, 2017).

Counselor educators avoid teaching students to include faith and spirituality in the classroom for various reasons (Adams et al., 2015; Johns, 2017; Leighton, 2016). Adams et al. (2015) found that a lack of information, personal interest, and relevance were primary reasons counselor educators did not incorporate faith and spirituality constructs in the classroom. Adams et al. (2015) noted that some study participants were uncomfortable teaching faith and spirituality topics due to a lack of preparedness, incompetency, and feeling that they were pushing their personal beliefs onto students. Leighton (2016) indicated that counselor educators are ill-prepared to teach faith and spirituality topics as they have not received proper training on

the subject. Additionally, Johns (2017) suggested that counselor educators do not know how to set aside their personal values and beliefs, introducing another barrier to teaching students how to integrate faith and spirituality into counseling.

The intersection of personal beliefs and conflicting students' beliefs is another reason counselor educators exclude faith and spirituality topics in coursework (Harris et al., 2017; Holmberg et al., 2017; Romig et al., 2018; Sutton et al., 2016; Williams-Reade et al., 2019). Harris et al. (2017) studied African American counselors challenged to counsel LGBTQ+ clients because of conflicting personal and spiritual beliefs and the American Counseling Association (ACA) code of ethics that supports the affirmation of LGBTQ+ clients. Most study participants reported that their education and training did not prepare them for this challenge. Thus, counselor educators may consistently avoid topics that could cause ethical conflicts, such as faith and spirituality.

Giordano and Cashwell (2014) reported that some counselor educators believed discussions related to faith and spirituality in counseling were unethical and inappropriate. Counselor educators who believe that faith and spirituality should not be included in counseling must be aware of their power and influence over their students and ensure that they are not imposing their beliefs and values onto them (Giordano & Cashwell, 2014). According to Burns (2020), counselor educators have a level of power and authority over their students, which may positively or negatively influence their professional identity and clinical skills development. Counselor educators who lack awareness of their influence on students may indirectly guide them in an unethical manner and hinder their growth and development (Burns, 2020). Thus, counselor educators need to be aware of their cultural identity, power, and privilege as they

introduce multicultural skills and competency development activities to their students (Chan et al., 2018).

Most of the literature related to cultural competence development focuses on ethnicity (Matthews et al., 2018), race (Dameron et al., 2020), gender (Couture, 2017), sexual orientation (Couture, 2017), and socioeconomic status (Clark et al., 2017), with little attention given to faith and spirituality (Al'Uqdah et al., 2019; Cornish et al., 2014; Farmer, 2017; Jain et al., 2017, Johns, 2017). Chan et al. (2018) discussed the intersectionality of multiculturalism in counselor education and teaching students about cultural competence as many people identify with several cultural factors, including faith and spirituality. Chan et al. (2018) recommended that counselor educators incorporate multiculturalism and social justice topics in the classroom by creating opportunities for open dialogue, processing assignments, and helping students reflect and analyze their identities and cultural intersections.

Al'Uqdah et al. (2019) discussed the importance of engaging students in self-awareness activities and multicultural discussions about counseling African American Muslim clients. Al'Uqdah et al. (2019) found that most students held prejudices, fears, and biases toward Muslims, which emerge as microaggressions negatively influencing their ability to be effective counselors. Further, counseling students' lack of understanding of Islam, Muslims' distrust of the mental health system, and language barriers were the primary challenges when working with African American Muslim clients. Their study explained that a lack of exposure to Muslims, a lack of understanding of the Islamic faith, and limited scholarly literature regarding African American Muslims foster racism and islamophobia from counselors toward clients. Harris et al. (2018) stated that counselors must gain the skills and competence to incorporate clients' varying faith and spiritual identifiers. The lack of attention to faith and spirituality dimensions in the

classroom opens the door to counselors being culturally insensitive and lacking culturally relevant counseling skills (Osborne & Jones, 2020; Swinton, 2016).

Professional counseling organizations provide directives for counselor educators to help students develop culturally relevant skills for use in clinical settings (Adams et al., 2015). Governing bodies like the ACA, the American Association for Marriage and Family Therapy (AAMFT), the Association for Counselor Education and Supervision (ACES), the American School Counseling Association (ASCA), and CACREP provided guidelines and specific ethical codes to help counselor educators include faith and spirituality in clinical work (Adams et al., 2015). The ACA, the AAMFT, and ASCA outline codes of ethics that detail the importance of counselor educators helping counseling students develop cultural competency and clinical skills to support a client's multicultural identity. The ACA considered spirituality and faith-based counseling significant enough to be included as the fifth force in counseling (social justice and advocacy), bolstering the importance of counselor educators helping students develop cultural competency around faith and spirituality (Sauerheber et al., 2014). CACREP is considering the addition of spirituality and religion as the ninth CACREP core curriculum standard, specifically to improve counselor training and competency (Bohecker et al., 2017).

The Association for Spiritual Ethical and Religious Values in Counseling (ASERVIC, 2019) established spiritual competencies that address faith and spirituality questions and issues to support counselors working with clients in clinical settings (Giordano & Cashwell, 2014; Lu & Woo, 2017; Young et al., 2017). Giordano and Cashwell (2014), Lu and Woo (2017), and Young et al. (2017) discussed ASERVIC's Spiritual Competencies, describing them as guidelines to integrate faith and spirituality into clinical work. Findings from these studies showed that many counselors have theoretical knowledge and understanding of the ASERVIC categories (Giordano

& Cashwell, 2014; Young et al., 2017) but are oblivious and incompetent in their application (Lu & Woo, 2017). The limited amount of research from counselor educators' perspectives (Coyle, 2017; Greggo, 2016; Johns, 2017; Leighton, 2016; Loosemore & Fidler, 2019; Scott, 2018, 2019; Trahan & Keim, 2019) indicated that not enough is known about how counselor educators teach students theory, techniques, and approaches to conceptualize clients' faith and spirituality in counseling. This gap in the literature (Johns, 2017) calls for more empirical research about counselor educators' experiences teaching faith and spirituality to counseling students.

Discussions with fellow private practice clinicians and their discomfort using faith and spirituality with clients led to this research study counselor educators' experiences at CACREP accredited institutions teaching master's level counseling students to integrate faith and spirituality into clinical work (Henriksen et al., 2015; Reiner & Dobmeier, 2014; Scott et al., 2016). During case consultations, it was common for clinicians to ask questions about including a client's faith and breaching ethical boundaries. Discussions typically resulted in rigid thought processes and a lack of practical application. The researcher began a quest to discover how to ethically and appropriately integrate faith and spirituality in clinical work. A considerable amount of time was spent studying literature, reviewing state rules and codes, and discovering ethical codes from professional counseling associations. The research topic was also chosen because it is relevant to counselor education and supervision (CES). It was important for this research study to align with CES to meet program expectations and requirements. This research study's findings can potentially contribute to the scholarly literature on counselor education and supervision, which is a requirement of the Capella University CES doctoral program.

The theoretical framework for this research study is constructivism learning theory (Dewey, 1938/1997). Constructivism learning theory is an educational pedagogy built on the

understanding that individuals construct meaning from their experiences (Alt, 2015, 2017; Binkley & Minor, 2020; Olusegun, 2015; Wilkinson & Hanna, 2016). Students can grow and develop through interaction and dialogue more effectively if a learning environment can embrace differences and subjectivity in acquiring knowledge (Binkley & Minor, 2020; Olusegun, 2015). Constructivism learning theory derives from John Dewey's (1938/1997) constructivism theory, the theoretical work of Jean Piaget's (1964) cognitive constructivism theory, and Lev Semyonovich Vygotsky's (1962) social constructivism theory. Through interaction and an appreciation of diverse perspectives and multiple realities, meaning is constructed (Dewey, 1938/1997). Constructivism learning theory was the best lens to understand and document counselor educators' in-depth experiences and perspectives (Alt, 2015), teaching master's level counseling students to integrate faith and spirituality into clinical work.

A second theoretical framework considered for this research study was transformative learning theory (Mezirow, 1994). According to Mezirow (1975), transformative learning helps people evaluate, justify, and revise their perspectives and worldviews. Everyone views the world through a lens based on their experiences and interactions with people and issues they encounter in the world (Alt, 2015). Sometimes people's view of the world is distorted, and problematic necessitating a change; transformative learning theory emphasizes changing worldviews and perspectives (Mezirow, 1994). This research study sought to understand the experiences and perspectives of counselor educators teaching students to integrate faith and spirituality into clinical work, not how their beliefs and perspectives were changed or revised in the process of teaching students. Thus, transformative learning theory was dismissed as a theoretical orientation for this research study.

Need for the Study

A review of counseling literature showed that integrating faith and spirituality in counseling sessions improves therapeutic outcomes because of the counselor's attunement to an individual's cultural identity (Bland, 2018; Maximo, 2019), and with that, exploring counselor educators' experiences teaching master's level students about faith and spirituality in clinical settings could improve counselors' cultural competence and professional identity. The research literature showed that prelicensed counselors and counselor educators struggle with faith and spirituality topics in academic and clinical settings (Carlson et al., 2014; Curry et al., 2015; Errington, 2017; Magaldi-Dopman, 2014; Oxhandler & Parrish, 2018). In their research studies, Henriksen et al. (2015), Reiner and Dobmeier (2014), and Scott et al. (2016) emphasized insufficient training and discomfort with faith and spirituality from prelicensed counselors' perspectives. In contrast, few articles focused on the lack of training and discomfort from counselor educators' perspectives (Giordano et al., 2016; Johns, 2017; Sauerheber et al., 2014; Trahan & Keim, 2019). The lack of scholarly literature addressing faith and spirituality in counselor education from counselor educators' perspectives is an indicator that more research is needed to understand counselor educators' perspectives on the topic (Johns, 2017). This research study begins to address the gap in the literature (Johns, 2017) by answering the research question, "What are counselor educators' experiences at CACREP accredited institutions teaching master's level counseling students to integrate faith and spirituality into clinical work?"

Purpose of the Study

The purpose of this qualitative research study was to answer the question, "What are counselor educators' experiences at CACREP accredited institutions teaching master's level counseling students to integrate faith and spirituality into clinical work?" The predominance of

research literature focuses on prelicensed counseling students' perspectives and their lack of experience and discomfort with faith and spirituality when counseling clients (Henriksen et al., 2015; Reiner & Dobmeier, 2014; Scott et al., 2016). To date, few research studies address counselor educators and their experiences addressing faith and spirituality concepts in clinical settings (Giordano et al., 2016; Johns, 2017; Sauerheber et al., 2014; Trahan & Keim, 2019).

Blalock and Holden (2018), Leighton (2016), and Swinton (2016) addressed the importance of integrating spirituality and world religions into counselor education and supervision programs to support positive mental health while dispelling fallacies that hinder the use of faith and spirituality in professional practice. Leighton (2016) stated that the inclusion of faith and spirituality in counseling was not a taboo or bad practice, rather a catalyst to improve mental health and overall well-being. Similarly, Eppler (2018), Holmberg et al. (2017), Williams-Reade et al. (2019), and Magaldi-Dopman (2014) reported that although religious and spiritual education and training are addressed in academic settings, it is often an afterthought or post ad hoc topic and lacks practicality in clinical settings. If faith and spirituality continue to be left out of multicultural courses and training, counselors will continue to lack the skills and competence to address their client's diverse counseling needs, potentially hindering their clients from attaining their therapeutic goals (Leighton, 2016).

Counselor educators describe several issues that cause them to avoid faith and spirituality topics (Adams et al., 2015; Johns, 2017). Adams et al. (2015) found that a lack of information, personal interest, and relevance were key hindrances to incorporating faith and spirituality constructs in the classroom. Johns (2017) indicated that counselor educators were uncomfortable teaching faith and spirituality topics due to a lack of preparedness, incompetency, and feeling like they were pushing their personal beliefs onto students. Adams et al. (2015) and Johns (2017)

showed how counselor educators' behaviors and worldviews could prevent their students from gaining knowledge and skills required to be multiculturally competent and effective counselors. Moreover, Adams et al. (2015) and Johns (2017) research studies further demonstrated a need to help counselor educators develop the skills and dismantle the beliefs that hinder them from adequately preparing their students to be multiculturally competent beyond race, gender, ethnicity, and socioeconomic status.

Although some literature exists (Adams et al., 2015; Johns, 2017; Leighton, 2016; Sauerheber et al., 2014), this research study begins to fill the gap in counseling literature by exploring counselor educators' experiences at CACREP accredited institutions teaching students to integrate faith and spirituality into clinical work and gathers new knowledge about how counselor educators prepare master's level students to counsel clients. The results from this research study will increase the knowledge available to counselor educators on how to approach teaching students to incorporate faith and spirituality in clinical work. The study's findings can improve counselors' professional identity and cultural competence by increasing students' self-awareness and integrating faith and spirituality into clinical work (Cureton et al., 2019).

Significance of the Study

Counselor educators serve as instructors, supervisors, mentors, advocates, and gatekeepers (Brown-Rice & Furr, 2016). These critical roles help counseling students develop cultural competence (Matthews et al., 2018) while establishing a professional counselor identity (Burns, 2017). Cultural competence is awareness of clients' specific cultural factors, including faith and spirituality, and including them in case conceptualization, treatment planning, and interventions (Matthews et al., 2018). Culturally competent counselors are aware of power differentials, areas of privilege, and the potential of oppression in the client-counselor

relationship (Matthews et al., 2018). Barden et al. (2017), Clark et al. (2017), Cornish et al. (2014), and Matthews et al. (2018) agreed that culturally competent counselors have stronger client-counselor bonds, increased positive counseling outcomes, and higher client satisfaction than counselors that are culturally incompetent. A gap exists in the literature related to how counselor educators teach students to use faith and spirituality in clinical settings (Johns, 2017). Developing skills to integrate faith and spirituality in clinical work increases cultural competence and establishes a professional counseling identity (Cruerton et al., 2019).

A professional counseling identity is an essential development process for all counselors (Burns, 2017). Professional counseling identity integrates personal and professional values, ethics, beliefs, and behaviors that govern the counselor's functioning within the profession (Shuler & Keller-Dupree, 2015). Through this discovery process, counselors become aware of their personal and professional worldviews and how those views influence their beliefs and counseling practices (Schuler & Keller-Dupree, 2015). Counselors have the primary responsibility for developing their professional identity, but counselor educators have a part to play as well (Woo et al., 2016).

Counselor educators help counselors develop a professional identity by fostering learning environments that promote self-awareness, interpersonal resolutions, self-evaluation (Shuler & Keller-Dupree, 2015), and cultural awareness inclusive of faith and spirituality identifiers (Greggo, 2016). Woo et al. (2016) described five ways that counselor educators develop professional counseling identity in their students: designing courses, course materials and providing resources, mentoring, holding leadership positions that influence the profession on a macrolevel, and holding service roles that advocate and contribute to the identity of the collective counseling profession. Counselors with a well-established professional identity

maintain balanced lifestyles, are confident, culturally sensitive, manage stress well, and are fit to practice counseling (Schuler & Keller-Dupree, 2015). The *ACA Code of Ethics* (2014) and *CACREP Standards* (see Section 2) (2016) outlined specific expectations and guidelines for cultural competence and professional identity development (Ratts et al., 2016).

The *ACA Code of Ethics* (2014) (see Sections E.8, F.7, F.8.c, and F.11.c) details the expectations for counselor educators in the development of cultural competence and professional identity (Hull et al., 2016; Ratts et al., 2016). First, counselor educators are expected to include multiculturalism and diversity in all courses and workshops to develop professional counselors (Ratts et al., 2016). This standard suggested that faith and spirituality are cultural identifiers that counseling students must become familiar and comfortable with to meet their client's specific cultural needs and counseling goals (Ratts et al., 2016).

Second, counselor educators are expected to use innovative theories, techniques, modalities, and procedures grounded in theory to train students (Merlin, 2016). Counselor educators must design courses and experiential activities that introduce students to content using innovative practices that encourage learning and development (Binkley & Minor, 2020). Third, counseling students will engage in self-growth experiences because counselor educators teach from a constructivist learning model, offering students the opportunity to grow psychologically, emotionally, and clinically (Binkley & Minor, 2020). If counselor educators effectively use constructivist approaches to learning, they offer students the freedom to learn and grow at their own pace and develop diverse ways to apply the content in real-world situations (Binkley & Minor, 2020). Counselor educators also take on the role of supervisors of their students during fieldwork (Hull et al., 2016).

Counselor educators in a supervisory role are obligated to support students' cultural sensitivity and competence development (Hull et al., 2016). In 2011, ACES published a one-time report, *Best Practices in Clinical Supervision*, under the *Supervisory Relationship* section (see 5.C.i). The report described the supervisors' responsibility to support the growth and development of culture in the supervisor-supervisee relationship by recognizing sensitivity and attunement to faith and spirituality. Similarly, the *Diversity and Advocacy Considerations* section of the ACA (2014) *Code of Ethics* stated that all supervision is multicultural, and supervisors are accountable for infusing faith and spirituality topics in their approach to supervision (Ratts et al., 2016). Finally, ASCA (2019) *Standards for School Counselor Preparation Programs Core Theories and Concepts* stated that school counselors must have established and emerging methods to support multiculturalism, including spirituality (Gallo, 2014). Gallo (2014) indicated that supervisors and school counselors are obligated to design activities and interventions inclusive of faith and spirituality for the supervisee's growth and development.

The goal of this research study was to explore counselor educators' experiences at CACREP accredited institutions teaching master's level counseling students to incorporate faith and spirituality into clinical work. Improving counselors' competency by preparing them to address, conceptualize and integrate faith and spirituality in clinical settings ensures culturally sensitive counseling that promotes positive outcomes and overall well-being (Bayne & Tylsova, 2019; Scott et al., 2016; Swinton, 2016). Insights and themes that emerge from the research study could identify deficiencies in educational programs and uncover barriers in clinical and educational settings that may be obstacles for counselor educators effectively teaching students to integrate faith and spirituality into clinical work (Adams et al., 2015; Johns, 2017; Leighton,

2016). Likewise, university administrators can incorporate findings from this research to improve their multicultural counseling curriculum, support counselor competency, and train students to appropriately conceptualize faith and spirituality in clinical work (Cornish et al., 2014). Supervisors can use this study's findings to engage students in discussions and role-play during individual and group supervision sessions to further their competency and professional identity development (Hull et al., 2016).

Research Question

“What are counselor educators’ experiences at CACREP accredited institutions teaching master’s level counseling students to integrate faith and spirituality into clinical work?”

Definition of Terms

CACREP accredited institutions. CACREP is an independent accrediting organization for graduate counseling programs that ensure that the curriculum meets the eight-core standards required for licensure in most states (CACREP, 2020). Counselor educators that are teaching at CACREP accredited institutions will be observed during the prescreening and semi-structured interviews.

Clinical work. Clinical work is the practice of assessing, diagnosing, treating, and preventing emotional and psychological issues that occur within individuals, couples, families, and groups (Blow & Karam, 2017). Research study participants will answer semi-structured interview questions to report experiences of teaching students to use faith and spirituality in clinical work.

Counselor educators. Counselor educators in this study are doctoral-level faculty who teach at a CACREP accredited institutions whose primary role is to prepare and teach students to professionally apply the theory and principles of counseling in clinical mental health counseling,

marriage and family counseling therapy, and school counseling (Woo et al., 2017). Counselor educators were observed during the prescreening process and the semi-structured interviews.

Faith. Faith is a noun derived from the Latin word *fides*, which means confidence or trust in a person, thing, or concept. According to Bergamo and White (2016), faith is an individual's belief system comprised of trust, confidence, loyalty, honesty, and belief (Tudor, 2019) in a god or higher power. Paul Victor and Treschuk (2019) described faith as a subjective and personal relationship with God and expecting God to do something in your life, and although you cannot see it yet, the belief is that it will happen. Likewise, faith is a human force connected to a transcendent power based on knowledge that may not be tangible or present (Bergamo & White, 2016). In short, faith implies that one believes without any physical proof (Bergamo & White, 2016) in a higher power or God. Research study participants answered semi-structured interview questions to report experiences teaching students how to use this phenomenon in clinical work.

Integrate. To integrate is incorporating a topic, concept, theory, or methodology into a counseling session (Anekstein et al., 2018). Research study participants answered semi-structured interview questions to report their experiences teaching students to integrate faith and spirituality in clinical work.

Religion. Religion is a noun and originates from the Latin word *ligare*, meaning to join, bind, or link as connecting humans to the divine (Duke, 2016). Religion is an organized belief system expressed through rituals, traditions, and practices (Paul Victor & Treschuk, 2019). Bergamo and White (2016) reported that approximately 50 major religions exist globally, tied to specific rules, policies, beliefs, and doctrines that members of each faith must follow. Although religion is beyond the scope of this research study, a definition of the term is shared for clarity.

Spirituality. Spirituality is a noun derived from the Latin word *spiritualitas* (Tudor, 2019), which comes from the root word *spiritus*, which means breath, blow, or giving life to the soul (Paul Victor & Treschuk, 2019). Spirituality is a multidimensional construct that encompasses a search for meaning, life's purpose (Paul Victor & Treschuk, 2019), a recognition of a higher power or something greater than oneself, a connection to nature and the universe, beliefs, ethics, values, and principles within a relationship with a higher power (Bohecker et al., 2017). Spirituality shapes a person's beliefs, self-image, and interactions with the world (Bohecker et al., 2017) and transcends culture (Scott et al., 2016). In short, spirituality is the transcendent relationship, belief, and connection with a higher power, supreme being, or life force (Scott et al., 2016; Tudor, 2019). Research study participants answered semi-structured interview questions to report experiences teaching students how to use this phenomenon in clinical work.

Teaching. The ideas or principles taught by an authority and the ability to instruct, explain or show someone how to do something (Kline, 2015). Research study participants answered semi-structured interview questions to report experiences with this phenomenon relative to faith and spirituality integration in clinical work.

Research Design

This research study utilized a qualitative methodology. Qualitative research aims to discover how people experience issues and events in the world (Aspers & Corte, 2019). Qualitative researchers gather information about peoples' experiences and opinions through observations, document reviews, interviews, and focus groups (Aspers & Corte, 2019). Four traditional designs under the qualitative research umbrella explore specific aspects of peoples' experiences (Kennedy, 2016). Ethnography is a study of peoples' shared culture and customs,

case studies seek to understand a bounded system's behavior patterns, a grounded theory approach develops a theory based on data gathered and analyzed, and a phenomenological study explores the essence of peoples' lived experiences (Creswell & Poth, 2018; Percy et al., 2015). Although traditional qualitative designs provide researchers with an in-depth understanding of peoples' experiences, some research studies do not align with the traditional designs.

A generic qualitative inquiry is chosen when a research study does not align or adapt well to a traditional qualitative design (Percy et al., 2015). A generic qualitative inquiry is similar to the traditional designs that study peoples' experiences but emphasize content reports, attitudes, beliefs, and opinions. Unlike traditional qualitative designs bound by specific philosophical assumptions, a generic qualitative design borrows elements of the traditional approaches to explore the research topic (Morse, 2015a). Moreover, generic qualitative designs use smaller sample sizes than traditional qualitative approaches (Morse, 2015b). Although there are differences between a generic qualitative inquiry and traditional qualitative approaches, both align with constructivism (Morse, 2015a).

All qualitative research studies fall under the epistemological paradigm of constructivism (Morse, 2015a; Percy et al., 2015). The constructivism paradigm assumes that individuals construct meaning based on their experiences and perceptions of reality (Binkley & Minor, 2020). Learning environments established upon constructivism welcome diverse perspectives and appreciate differences while people create meaning through interaction (Binkley & Minor, 2020). Counselor educators teaching from a constructivist lens can instruct students on faith and spirituality topics without discomfort, encouraging their professional identity and cultural sensitivity development (Olusegun, 2015). Thus, a generic qualitative inquiry design is appropriate to understand counselor educators' experiences at CACREP accredited institutions,

objective stances, attitudes, opinions, and perspectives, teaching master's level counseling students to integrate faith and spirituality into clinical work.

Assumptions and Limitations

Assumptions

Generic qualitative methodology fits into a constructivist paradigm; however, it does not follow specific philosophical assumptions like the traditional qualitative designs. Generic qualitative research uses elements of the traditional qualitative assumptions (Poni, 2014). Philosophical assumptions are a researcher's beliefs about reality (ontology), relationship to the participants (epistemology), values as it relates to the research study (axiology), and the research method used to approach the study (methodology) (Poni, 2014). This generic qualitative inquiry was based on the following ontological, epistemological, axiological, and methodological assumptions.

Ontological

Ontological assumptions are focused on the nature of reality (Poni, 2014). Roger et al. (2018) describe ontology as a melding of the observer's perspective and each study participant's unique and individual views to tell a story. This study assumed the co-construction of new realities emerging through dialogue and interaction between counselor educators and students in the classroom. When considering faith and spirituality interactions in a classroom setting, it is assumed that counselor educators have diverse spiritual backgrounds and may or may not ascribe to any faith or spiritual orientation (Roger et al., 2018). Regardless of their faith or spiritual orientation, counselor educators are responsible for upholding specific standards to support students developing multicultural competence specifically related to faith and spirituality (Cornish et al., 2014). Thus, this study presumed that participants engaged with students about

various multicultural topics, including faith and spirituality. Likewise, it was assumed that counselor educators had oral and written dialogues regarding faith and spirituality with their students.

Epistemological

Epistemology is the subjective stance and relationship between the researcher and the study participants (Poni, 2014). This study positions the researcher as an objective and independent observer of participants and their behaviors. Epistemology from a qualitative lens establishes a relationship with the subject to carefully learn and understand their experience with the phenomenon (Creswell & Poth, 2018). For this study, the researcher explored the experiences of counselor educators' at CACREP accredited institutions teaching master's level counseling students to integrate faith and spirituality into clinical work using a semi-structured interview format, maintaining an objective and independent stance with the participants and their responses (Singer & Couper, 2017).

Axiological

Axiology is the researcher's personally held values and beliefs, which cannot be removed from research experience (Poni, 2014). The researcher maintains a Christian worldview that guides their morals, values, and beliefs yet acknowledges the necessity of inclusion and advocacy for faith and spirituality in the counselor education curriculum beyond Christianity. Moreover, the researcher incorporated bracketing, the practice of setting aside one's values, beliefs, and understandings, to create a holding space to engage, learn and gather data from participants that may have similar or differing or beliefs and values (Ostrowdun et al., 2020; Prout et al., 2021).

Methodological

Methodological assumptions in this research study align with the generic qualitative inquiry design exploring counselor educators at CACREP accredited institutions and their experiences teaching master's level counseling students to integrate faith and spirituality in clinical work (Kennedy, 2016). Generic qualitative inquiry provided the researcher a complete understanding of participants' experiences using a semi-structured interview format (Singer & Couper, 2017), allowing participants to respond using their own words (Morse, 2015a). It was assumed that purposive (Ames et al., 2019) and snowball sampling (Dusek et al., 2015) were the most appropriate methods to recruit participants for the study.

Finally, it is assumed that this research study will introduce fresh approaches to teaching students how to integrate faith and spirituality topics in a clinical setting. This research study's findings will have positive implications for counselor education programs, counselor educators, supervisors, and counselors by improving their multicultural counseling curriculum and implementing strategies to effectively develop cultural competence and sensitivity in counseling students (Leighton, 2016). Improving counselors' competency by teaching them how to integrate faith and spirituality into counseling sessions effectively ensures culturally specific and sensitive counseling that promotes positive outcomes (Leighton, 2016).

Limitations

There are two types of limitations in qualitative research: design flaws and delimitations (Theofanidis & Fountouki, 2019). Design flaws are factors that limit the trustworthiness or credibility of the research study (Professor & Albrecht, 2019). Delimitations are factors related to the study that were intentionally omitted from the study by the researcher (Theofanidis & Fountouki, 2019). Both design flaws and delimitations must be outlined as they describe the

boundaries and limits of the research (Theofanidis & Fountouki, 2019). This study includes both design flaw limitations and delimitations.

Design Flaw Limitations

Generic qualitative research designs have several limitations. First, generic qualitative research designs do not have a specific design methodology like the traditional qualitative research designs (Kennedy, 2016). Second, generic qualitative designs do not follow philosophical assumptions like traditional designs (Kennedy, 2016). Finally, generic qualitative designs are limited in the research literature, and the lack of robustness in the research gives rise to possible issues with congruence in the research design (Kennedy, 2016; Morse, 2015a). Thorne (2016) explained that generic qualitative designs are theoretically void and apt to method slurring. Method slurring combines qualitative research approaches without the appropriate alignment to the epistemology and assumptions that support the methodologies being mixed in the study (Thorne, 2016). Research studies that fail to articulate the assumptions and methodologies clearly could lack credibility and fall short of meeting the rigor of scholarly literature (Morse, 2015a). To minimize the potential of method slurring and demonstrate rigor, the researcher adhered to the procedures and protocols of Percy et al.'s (2015) generic qualitative inquiry for the research design, data collection, and inductive thematic analysis.

Another study limitation was the lack of field testing or an expert panel review of the guiding interview questions. In qualitative research, a field test can assess the relevance, quality, and integrity of the interview questions (Kallio et al., 2016). Moreover, a field test may uncover ambiguity, bias, and repetition of the interview questions, which could cause problems during data collection (Kallio et al., 2016). As a field test was omitted from the study, an expert panel review was also omitted.

Implementing an expert panel review of the interview questions is another method to uncover problems with interview questions. In an expert panel review, the researcher identifies several experts with similar backgrounds as the target population to respond to the interview questions (Kallio et al., 2016). The expert reviewers provide feedback to improve the interview questions (Kallio et al., 2016). Although a field test and expert panel review were not conducted, the researcher's dissertation mentor reviewed and approved the interview questions to ensure they were unbiased, clearly written, and designed to answer the research question, "What are counselor educators' experiences at CACREP accredited institutions teaching master's level counseling students to integrate faith and spirituality in clinical work?" Also, the Capella University Institutional Review Board approved the guiding interview questions before data collection. To mitigate any researcher bias and ensure the credibility of the interview questions, the researcher developed an interview guide for the semi-structured interviews with the support and approval of the dissertation mentor. The interview guide was consistently used with all research participants. Kallio et al. (2016) indicated that interview guides with main questions and pre-designed follow-up questions foster consistency and increase the trustworthiness of the data.

Delimitations

There were two delimitations relevant to this research study. Participants in the study were required to have a doctorate in counselor education and supervision. Thus, the study did not explore the experiences of counselor educators with master's degrees or those in the process of earning a doctorate in counselor education and supervision. This study did not investigate participants' experiences who worked in counselor education programs other than clinical mental health counseling, school counseling, and marriage and family counseling therapy. The researcher was only interested in exploring the experiences of counselor educators with a

professional identity that aligned with counselor education and supervision. Also, the study only sought the experiences of participants in CACREP accredited programs.

Organization of the Remainder of the Study

Chapter 1 provided an overview of the study, beginning with the background, need for the study, purpose, significance, the research question, definition of terms, the qualitative design, assumptions, and limitations. Chapter 2 is a comprehensive review of the literature related to counselor educators teaching master's level counseling students to integrate faith and spirituality into clinical work. The chapter includes an outline of constructivism learning theory (Dewey, 1938/1997) as the theoretical orientation for the study. The significance of faith and spirituality in clinical work is discussed and evaluated using sources found in scholarly and peer-reviewed literature. Next is an examination of faith and spirituality in counselor education and alignment to counselor education and supervision (Blalock & Holden, 2018; Leighton, 2016; Swinton, 2016). Barriers that hinder counselor educators from teaching students to use faith and spirituality in clinical settings are discussed. The methodological literature for generic qualitative research designs (Percy et al., 2015) is explored. Chapter 3 details generic qualitative inquiry (Percy et al., 2015) as the methodology applied throughout the study, including the target population, sample, data collection process, and data analysis procedures. Chapter 4 presents the data and results of the inductive thematic data analysis (Percy et al., 2015), including a description of the sample, differences, and departures from protocol and ethical implications. Chapter 5 summarizes findings from the study connecting the results to constructivism learning theory (Dewey, 1938/1997) and counselor education and supervision, implications, and recommendations for future research.

CHAPTER 2. LITERATURE REVIEW

This chapter will present a detailed review of the literature regarding counselor educators at CACREP accredited institutions who teach master's level counseling students to integrate faith and spirituality into clinical work. Teaching master's level students to integrate faith and spirituality in clinical settings is a subject in which little research has been conducted from counselor educators' perspectives (Coyle, 2017; Greggo, 2016; Leighton, 2016; Loosemore & Fidler, 2019; Johns, 2017; Sauerheber et al., 2014; Trahan & Keim, 2019). In contrast, research from prelicensed counselors' perspectives and their inclusion of faith and spirituality in counseling has been conducted (Curry et al., 2015; Errington, 2017; Giordano et al., 2016; Henriksen et al., 2015; Hull et al., 2016; Magaldi & Trub, 2018; Oxhandler & Parrish, 2018; Scott et al., 2016). Counselor educators, unlike counselors, must teach counseling students how to include all aspects of a client's cultural identity into their clinical work (Adams et al., 2015).

The generic qualitative inquiry research design (Percy et al., 2015) was the best methodology to study counselor educators' experiences teaching students to include cultural factors, such as faith and spirituality, with clients. Counselor educators' experiences can provide insight into how they support and encourage professional identity development (Burns, 2017; Cashwell et al., 2016; Cureton et al., 2019; Greggo, 2016) and cultural competence in counselors. Constructivism learning theory (CLT) (Dewey, 1938/1997) is discussed as the theoretical lens to explore counselor educators' experiences teaching students to use faith and spirituality in clinical settings stressing the significance of diversity, valuing differences, and self-guided exploration. Transformative learning theory (TLT) (Mezirow, 1994) is discussed as a second theoretical framework considered for the study. The literature review emphasizes the necessity of faith and spirituality in counseling and the criticality of counselor educators teaching

students about faith and spirituality as a cultural identifier. Professional organizations require multicultural competencies that focus on faith and spirituality in training and practice (Barden et al., 2017; Sells & Hagedorn, 2015), and barriers to including faith and spirituality in counselor education are discussed (Johns, 2017; Leighton, 2016). The chapter closes with a synthesis and critique of the literature.

Methods of Searching

The research articles included in the literature review are primarily from the electronic databases of Capella University and print journals. Electronic databases used were Academic Search Premier, ERIC, Dissertations@Capella, Google Scholar, Summon, ProQuest, PsycARTICLES, and PsycINFO. The following keywords and phrases were used to search the databases *cognitive constructivism, constructivism, constructivism learning theory, constructivist, constructivist pedagogy, constructivist pedagogy counselor education, social constructivism, social constructivism counselor education, social constructivism pedagogy, counselors, counselor educators, counselor educators' faith, counselor educators teaching faith and spirituality, counselor educators teaching religion, counselor education, faith in counselor education, faith and spirituality in counseling, integrating faith in counseling, integrating religion in counseling, integrating spirituality in counseling, faith, spirituality, religion, clinical work, psychotherapy, integrating faith and spirituality in psychotherapy, counseling, professional identity, counselor's professional identity, competence, cultural competence, multicultural competence, multicultural competence in clinical work, multicultural competence in counseling, qualitative research, and generic qualitative research*. The search criteria were publication dates 2015 to 2021, peer-reviewed, full text, academic journals, and doctoral dissertations.

Theoretical Orientation for the Study

In dissertation research, a theoretical orientation provides the assumptions and framework for the researcher to formulate the problem, develop the research question, conceptualize the literature review, establish the design approach and data analysis while providing the lens to interpret the findings and conclusions of the research study (Grant & Osanloo, 2014). The theoretical framework is selected based upon the problem, purpose, significance, and research question that the researcher intends to explore (Grant & Osanloo, 2014). Moreover, the theoretical orientation should align with the researcher's beliefs, epistemological values, and the intended purpose of the research study (Grant & Osanloo, 2014). Regardless of the chosen theoretical orientation, the framework should be a guide and lens for the research study.

A review of the literature focusing on counselor educators teaching students to integrate faith and spirituality into clinical work revealed a significant amount of research from the perspectives of counselors and prelicensed counselors with limited research from the perspectives of counselor educators (Adams et al., 2015; Harris et al., 2016; Johns, 2017; Trahan & Keim, 2019). Existing literature from the lens of counselor educators revealed some research about integrating faith and spirituality in counselor education (Adams et al., 2015), understanding client expectations and preferences for including faith and spirituality in counseling (Harris et al., 2016), tailoring faith and spirituality to client's needs (Captari et al., 2018), and understanding how counselor educators' faith and spirituality beliefs influence their teaching of faith and spirituality to counseling students (Johns, 2017). The gap in the literature showed that more research is needed to understand counselor educators' attitudes, opinions, and perspectives about teaching students to integrate faith and spirituality in counseling and techniques that promote discussions of faith and spirituality with students (Johns, 2017).

According to the research literature, constructivism is a suitable framework to understand diverse perspectives and viewpoints regarding faith and spirituality (Johns, 2017).

Constructivism emphasizes critical thinking, analysis, evaluation, and meaning-making due to interactions between people (Dewey 1938/1997). Applying a constructivist lens to the present research study facilitates filling a gap in the literature by providing space for counselor educators to share their experiences and make meaning from their experiences teaching master's level counseling students to integrate faith and spirituality into clinical work. Two constructivist orientations were considered for this study TLT (Mezirow, 1994) and CLT (Dewey, 1938/1997).

Transformative Learning Theory

In qualitative research, a constructivist lens considers and appreciates a diversity of realities and truths based upon the perspectives of the individuals (Binkley & Minor, 2020). TLT (Mezirow, 1994) was considered as a theoretical framework for this study. TLT is an adult learning theory that aligns with the constructivist paradigm (Prosek & Michel, 2016). Jack Mezirow (1975) is known as the founding theorist of TLT. Mezirow was an American sociologist and professor at Columbia University. He is widely known for his work that focused on women returning to college as older adults. The ten phases of transformative learning emerged from his research. Mezirow's work was influenced by Paulo Freire and Jürgen Habermas, two philosopher-educators and advocates of critical theory. Critical theory is a philosophy that examines and critiques society and culture to uncover and challenge social, economic, and political structures (Chen & Martin, 2015; Hoggan, 2016).

Building on Freire and Habermas's work, Mezirow immersed himself in people's perspectives, worldviews, and what led them to alter and modify their views of the world (Chen & Martin, 2015; Hoggan, 2016). He discovered that intentional self-reflection caused people to

critique themselves, wrestle with their beliefs and experiences, and eventually modify their perspectives and worldviews to be more inclusive and less ethnocentric (Mezirow, 1994).

Mezirow's TLT described adult learning as a process of significant critique that caused people's dysfunctional ideologies and problematic views of the world to transform when challenged and introduced to alternative views (Mezirow, 1994).

Christie et al. (2015) and Prosek and Michel (2016) expressed Mezirow's TLT as a learning model in which an individual's worldview is based on rigid assumptions or beliefs rooted in the individual's culture, upbringing, and experiences. Mezirow's (1994) seminal work concluded that learning follows a 10 phase process categorized into three themes. The first theme, *experience*, includes Phase 1, *a disorienting dilemma*. A disorienting dilemma occurs when an individual encounters an experience that does not fit within their pre-existing worldview. A disorienting dilemma can be a life crisis or significant event that triggers individuals to question their long-held beliefs, assumptions, and values (Mezirow, 1994). Once the disorienting dilemma triggers the individual, they enter a self-examination and assessment period.

Mezirow (1994) aligned Phases 2, *self-examination*, and Phase 3, *critical assessment of assumptions*, with the second theme, *critical reflection*. After encountering the disorienting dilemma, the individual enters a period of discomfort. The individual begins to assess their epistemology, beliefs, and understanding while critically evaluating the validity of these perspectives and opinions. They begin to recognize and accept that some of their beliefs and assumptions are wrong, and they are open to viewing their past from a new lens.

The individual has new insight and openness to alternative perspectives; they enter the final theme, *rational discourse*, consisting of Phases 4 through 10 (Mezirow, 1994). Phase 4,

recognition that others have shared a similar transformation, normalizes the process for the individual and helps them recognize that they are not alone in this experience. Phase 5, *exploration of new roles and actions*, positions the individual to see themselves with new skills and new capabilities due to their new perspectives and understandings. Phase 6, *the development of a plan for action*, requires the individual to make their own decisions and build confidence in their new beliefs and understanding. Phase 7, *acquisition of knowledge and skills for implementing the plan*, the individual has a plan but needs to acquire skills to carry out that plan; this phase helps them access new skills and ready themselves for implementation. In Phase 8, *trying out the plan*, the individual executes their plan, they spend time learning new things and considering new perspectives. Phase 9, *development of competence and self-confidence in new roles*, the individual is actively learning and engaging in new experiences to transform. In the final phase, Phase 10, *reintegration into life on the basis of new perspectives*, the individual has experienced transformation; they are ready to move forward in life with new perspectives aligned to their implementation plan.

Although TLT was considered a suitable theoretical orientation for this research study, two significant weaknesses make it inferior to CLT. First, TLT depends heavily on critical reflection and task-oriented problem-solving that ultimately results in an individual transforming their beliefs, assumptions, and experiences into new perspectives and worldviews (Prosek & Michel, 2016). According to the constructivist paradigm (Binkley & Minor, 2020), reflection alone is not enough to learn and grow in knowledge. There must also be social interaction to elicit knowledge construction, which is a critical component of constructivism (Binkley & Minor, 2020; Olusegun, 2015). The second weakness of TLT is the required disorienting dilemma to initiate the transformative process. Disorienting dilemmas may elicit negative

emotions and cause repressed memories to emerge, resulting in discomfort and adverse reactions (Fazio-Griffith & Ballard, 2016). The potential negative emotions could be harmful to the research study and cause participants to terminate their participation.

The lack of alignment with the purpose of the research study and the focus on transforming distorted and problematic ways of thinking makes TLT (Mezirow, 1994) an inappropriate framework for the research study. This research study focused on understanding counselor educators' unique experiences and perspectives teaching students to integrate faith and spirituality into clinical work. It was not focused on changing the worldviews and perspectives of participants, nor understanding how participants' worldviews and perspectives have been challenged and revised. Thus, TLT was dismissed as a theoretical orientation for this research study. In contrast, CLT (Dewey, 1938/1997) was more appropriate and the best theoretical orientation for this research study.

Constructivism Learning Theory

Constructivism, a term used interchangeably with CLT, is an educational pedagogy built on the assumption that students construct meaning from their past experiences (Alt, 2015, 2017; Binkley & Minor, 2020; Olusegun, 2015; Wilkinson & Hanna, 2016). CLT has been applied across many disciplines, including nursing (Barbour & Schuessler, 2019), psychology (Knapp, 2019), organizational leadership (Shapira-Lishchinsky, 2015), business education (Chandler & Teckchandani, 2015), and counseling (Alt, 2015; Olusegun, 2015). CLT's application in counselor education recognizes that learning is subjective, continuous, and embraces diverse perspectives (Binkley & Minor, 2020; Olusegun, 2015). The constructivist epistemology abandons traditional teacher-centered methods that include passive learning environments that focus on memorizing information transmitted from the teacher to the students (Olusegun, 2015).

In contrast, constructivism embraces an interactive, student-centered environment filled with peer-to-peer dialogue and activities that foster analysis and interpretation of information (Binkley & Minor, 2020; Olusegun, 2015). Teachers welcome their students' thoughts and ideas, enabling them to create activities and materials to meet each student's learning needs (Binkley & Minor, 2020; Olusegun, 2015).

The origin of CLT is rooted in the work of three primary theorists John Dewey, Jean Piaget, and Lev Semyonovich Vygotsky. Dewey is known as the philosophical founder of constructivism (Williams, 2017). He believed that learning was a hands-on activity that occurred through interaction (Dewey, 1938/1997). Dewey found that learning was a shared experience and that people grew and gained knowledge through their interactions (Dewey, 1938/1997). He theorized that learning occurred between two or more people, and through their interaction, each person combined previous experiences with the current interaction to grow in knowledge and make meaning (Dewey, 1938/1997). Subsequently, Piaget and Vygotsky emerged with their unique perspectives of constructivism.

Cognitive Constructivism

Jean Piaget is known as the chief theorist of cognitive constructivism (Lin, 2015; Piaget, 1961, 1964; Waite-Stupiansky, 2017). Piaget's research determined that people do not understand information when they initially hear it; they must construct the meaning of the information through a cognitive experience (Piaget, 1961, 1964). Piaget suggested that experience is a mental learning process of developing a schema or model that causes one to make meaning of the information received. As people move through life, they gain new information and form new schemas that meld with existing schemas.

The melding of schemas, according to Piaget, is called equilibration or the balancing of new information with existing information (Piaget, 1981). Equilibration is facilitated by accommodation and assimilation (Piaget, 1981). Accommodation is a cognitive process of adjusting its structures to absorb information gained from the outer world (Piaget, 1981). At the same time, assimilation is the cognitive process of restructuring existing schemas to make room for new schemas (Piaget, 1981). When there is an imbalance between accommodation and assimilation, reversibility, returning to the starting point, occurs, causing disequilibrium in thought (Inhelder & Piaget, 1958). Cavicchi (2018) described the equilibrating process with children learning about the relationship between a part and the whole containing that part. Children were given 12 wooden beads, ten white and two brown. The children were asked if there were more brown beads or wooden beads. Responses were that all the beads were wooden, and there were more brown beads than white beads. The children recognized the parts (the white and brown beads) together made the whole (wooden beads). This example depicts Piaget's theory of cognitive constructivism, in which individuals grow in knowledge through their experiences and ideas (Cavicchi, 2018). Like Piaget, Vygotsky built on Dewey's philosophy of constructivism by developing his social constructivism theory (Vygotsky, 1962).

Social Constructivism

Social constructivism is a collaborative learning process where individuals grow in knowledge through interaction (Vygotsky, 1978). Vygotsky's (1962) theory suggested that learning environments should be structured and collaborative, welcoming reflection and openness to new thinking patterns. The theory was based on the belief that culture, ancestry, human interaction, and social networks shape cognition, language, and social development

(Vygotsky, 1978). He stated that both internal and external factors influenced learning (Vygotsky, 1978).

Two concepts critical to understanding social constructivism are the zone of proximal development (ZPD), an external factor, and inner speech, an internal factor (Vygotsky, 1978). ZPD refers to the distance between what a student can do with the help of a higher skilled person than themselves and what they can do without any help at all (Vygotsky, 1978). Over time, with the help of a higher-skilled person, a more knowledgeable other, and social interactions, students require less help to develop and master skills (Vygotsky, 1978). Inner speech is an internal factor that Vygotsky described as a monologue in a person's mind or a form of self-directed verbal thinking (Vygotsky, 1934/1987). Inner speech is a way to ponder situations, solve problems, and make meaning of the situations (Vygotsky, 1978). Vygotsky explained that higher-ordered functioning is a product of inner speech and human interaction. His groundbreaking work showed that children demonstrated higher performance levels when collaborating with adults versus their performance when working independently (Vygotsky, 1978).

Cognitive constructivism and social constructivism contribute to making meaning and learning. On the one hand, cognitive constructivism holds that learning occurs within a person's cognitive processes through accommodation and assimilation (Piaget, 1981). In contrast, social constructivism contributes to learning through social interactions and inner speech (Vygotsky, 1978). Both cognitive constructivism and social constructivism share five principles or tenets (Martinez et al., 2017).

Tenets of Constructivism

There are five tenets of constructivism learning theory or constructivism. First, individuals learn as they encounter new information and engage with others; the presentation of

new and differing perspectives must be reconciled with past experiences and knowledge to construct new meaning (Alt, 2015). By encouraging students to engage in conversations and elaborate on their faith and spirituality perspectives, counselor educators demonstrate that they value their students' points of view (Martinez et al., 2017; Olusegun, 2015). Moreover, counselor educators encourage students to become aware of their values, beliefs, and worldviews as they navigate the process of personal and professional identity development (Matthews et al., 2018). Creating opportunities for dialogue and diverse perspectives opens the door to challenge students' assumptions and firmly held values and beliefs (Martinez et al., 2017; Olusegun, 2015).

Challenging students' assumptions and encouraging them to explore new concepts to expand their knowledge and worldview is the second tenet of constructivism (Matthews et al., 2018; Olusegun, 2015). In a classroom setting, course activities that challenge assumptions and encourage students to evaluate their beliefs and ideas foster the expansion of students' knowledge and views (Alt, 2015; Olusegun, 2015). Diverse beliefs about faith and spirituality often emerge as contention points for students and counselor educators (Olusegun, 2015). The intersectionality of differing beliefs and concepts about specific god images and higher powers may erupt as arguments and disagreements in the classroom, causing the educator to avoid the topic altogether (Adams et al., 2015). CLT is a lens that can mitigate these challenges and offer a safe, open, and constructive environment to explore differences while learning and co-creating meaning (Binkley & Minor, 2020; Wilkinson & Hannah, 2016). The co-creation of meaning through dialogue and interaction is essential for students learning to attend to clients navigating real-world issues and problems (Martinez et al., 2017).

The third tenet of constructivism is the intentional exploration of real-world issues and problems. From a constructivist lens, learning is an active and collaborative process; thus,

opportunities to engage in discussions, sensory-stimulating activities, and dialogue about everyday things occurring in the world support exploring real-world issues and problems (Alt, 2015). Constructivism positions the educator as a guide or facilitator of the classroom, setting the stage for discussions and managing the dialogue (Martinez et al., 2017). Introducing current events and topics, such as the Christian church's perspective on domestic violence (Westenburg, 2017), spiritual approaches to solving marriage and family problems (Rauer & Volling, 2015), and how faith and spirituality can mitigate mental health issues help students explore and learn how to think critically and analyze situations they will encounter as counselors (Scott et al., 2016).

A learning environment that fosters critical thinking, inquiry-based exploration, and cause and effect analysis is the fourth tenet of constructivism (Martinez et al., 2017; Olusegun, 2015). Learning is not linear; thus, students do not learn in an isolated manner (Moate & Cox, 2015). Instead, learning is recursive, complex, and connected to everything around us; developing skills to assess and analyze old and new information and investigate new perspectives and ideas are foundational to constructivism (Binkley & Minor, 2020; Moate & Cox, 2015). A significant component of counselor education programs is developing multicultural competence across multiple domains, including faith and spirituality (Bohecker et al., 2017; CACREP, 2016). Thus, counselor educators are expected to explore faith and spirituality in the classroom to prepare students for its application in clinical work (ACA, 2014; ACES, 2020; ASCA, 2019; Barden & Greene, 2015). Moreover, assessing students' competence in applying faith and spirituality is a necessary next step for counselor educators to ensure skill development before practicing on real clients (Martinez et al., 2017).

The fifth tenet of constructivism is the implementation of criterion-based evaluations versus norm-based evaluations. Criterion-based evaluations assess students' academic learning and performance using a predetermined standard, a specific learning goal, or performance level (Chen & Bonner, 2017). In contrast, norm-based evaluations measure students' learning and academic performance by ranking and comparing them to other students (Chen & Bonner, 2017). Although norm-based evaluations, such as standardized tests, help understand how well students have retained information compared to their peers, counselor educators must assess student learning using criterion-based evaluations to gauge how well students can apply what they have learned (Chen & Bonner, 2017; Martinez et al., 2017; Olusegun, 2015). A rubric is a criterion-based evaluation tool that defines the criteria, rating scale, and expectations for students to meet specific performance levels (Chen & Bonner, 2017). A rubric can be used to assess students' ability to integrate faith and spirituality in a clinical setting by observation of peer groups, engagement in discussions related to how students would use elements of spirituality and faith in a clinical setting, and role-plays (Martinez et al., 2017; Olusegun, 2015).

Overall, the application of CLT to explore counselor educators' experiences teaching students to integrate faith and spirituality into clinical work recognizes that people gain knowledge by building upon previous knowledge (Olusegun, 2015). CLT combines principles of social constructivism (Vygotsky, 1978), cognitive constructivism (Piaget, 1961, 1964), and John Dewey's philosophical approach to constructivism (Dewey, 1938/1997). Both social constructivism (Vygotsky, 1978) and cognitive constructivism (Piaget, 1961, 1964) have been applied as popular theoretical frameworks in counselor education and supervision (Binkley & Minor, 2020). Constructivism, although widespread and effective in counselor education, does have limitations.

A lack of structure and too much flexibility in student learning is the most common limitation of constructivism (Binkley & Minor, 2020). Constructivism pedagogy appreciates students learning at their own pace (Binkley & Minor, 2020) and requires educators to provide multiple creative strategies, activities, and approaches for students to learn and gain knowledge (Binkley & Minor, 2020). These limitations may cause students to become frustrated and experience anger while imposing a burden on educators to develop multiple approaches to teaching the same topics to accommodate students' learning styles and needs (Binkley & Minor, 2020). Although constructivism lacks structure and may inconvenience educators, the framework is a proven and effective pedagogical approach in counselor education (Binkley & Minor, 2020). Moreover, CLT (Dewey, 1938/1997) provides an appropriate framework for generic qualitative inquiry studies that seek people's attitudes, opinions, and experiences and understand how they build knowledge and make meaning from their experiences and interactions with others (Binkley & Minor, 2020). Filling the gap in the literature (Johns, 2017) requires more research to understand the role that counselor educators play in students learning to integrate faith and spirituality in a clinical setting. Thus, CLT (Dewey, 1938/1997) was the best theoretical orientation for this study to understand and document counselor educators' in-depth experiences, beliefs, attitudes, and perspectives (Alt, 2015), teaching master's level counseling students to integrate faith and spirituality into clinical work and how they manage students' differing opinions, perspectives, and beliefs in an academic setting (Martinez et al., 2017; Olusegun, 2015).

Review of the Literature

This literature review presents a thorough examination of the existing research on the topic of faith and spirituality in clinical work and counselor education. Substantial research has

been conducted on the topic from the perspectives of counselors and prelicensed counselors (Curry et al., 2015; Errington, 2017; Giordano et al., 2016; Henriksen et al., 2015; Magaldi & Trub, 2018; Oxhandler & Parrish, 2018; Scott et al., 2016). However, the existing research literature on the topic is limited regarding counselor educators' perspectives (Greggo, 2016; Johns, 2017; Leighton, 2016; Scott, 2019; Trahan & Keim, 2019). The literature review began with a discussion about the constructs of faith, spirituality, and religion, including a brief explanation about the exclusion of religion from the present research study. A thorough description of clinical work is also outlined.

The remainder of the literature review is separated into two parts. Part one explored the significance of faith and spirituality in clinical work, examining the literature related to counselors and clients. This section reveals the research problem and exposes the gap in the literature (Johns, 2017) related to the integration of faith and spirituality in clinical work. Part two, faith and spirituality in counselor education, explored master's level counseling students, CACREP accredited programs, curriculum and coursework, counselor educators, current teaching methods, barriers for integrating faith and spirituality, and constructivism in counselor education. A synthesis of the research literature follows, identifying gaps in the research literature that form the research problem and justifies the application of constructivism learning theory (Dewey, 1938/1997) to answer the research question: "What are counselor educators' experiences at CACREP accredited institutions teaching master's level counseling students to integrate faith and spirituality into clinical practice work?" The literature review closes with a critique of previous research methods and a summary.

Faith, Spirituality, and Religion

Faith, spirituality, and religion are three distinct constructs not well defined in the research literature (Harris et al., 2018). The terms are used interchangeably, which can confuse the reader (Victor & Treschuk, 2019). The overlap between the three constructs occurs in both definition and practice (Bergamo & White, 2016). Although the three constructs are distinctly different, they are interrelated (Bergamo & White, 2016). This research study excludes religion and focuses on faith and spirituality as cultural identifiers to include in counseling. Thus, in this study, the exclusion of religion as a standalone construct must be explained.

All religions were established by men who represented God, or god constructs that the religion observes (Paul Victor & Treschuk, 2020). Christianity, Islam, and Judaism are common religions that require members to adhere to a doctrine or creed and practice prayer, meditation, scripture readings, and other religious activities aligned with their specific god representations (Harris et al., 2018). Most organized religions impose a strict set of rules and expectations that must be followed to maintain agreement and unity amongst members (Paul Victor & Treschuk, 2020). Bergamo and White (2016) reported that approximately 50 major religions exist globally, tied to specific rules, policies, beliefs, and doctrines that members of each faith must follow. In contrast to faith and spirituality, which are individual and personal, a religious person learns and practices specific behaviors that reflect their community's cultural values and beliefs (Paul Victor & Treschuk, 2020). The imposition of rules and expectations positions religion as having a rigid and nonexistent relationship with a higher power or God (Paul Victor & Treschuk, 2020) unless it is combined with faith or spirituality

When combined with faith or spirituality, religion can support an individual's positive well-being (Paul Victor & Treschuk, 2020). The interaction and trusting relationship built with a

higher power or God create a sense of meaning and purpose required for healthy well-being (Harris et al., 2016). Conversely, as a standalone construct, religion is not directly associated with well-being as it lacks a connection to a personal relationship with a god or a higher power (Paul Victor & Treschuk, 2020). However, religion does include communal and public relationships with other human beings (Scott et al., 2019), promoting connection and support that could lead to positive well-being (Paul Victor & Treschuk, 2020). Thus, religion independent of faith and spirituality is excluded from this research study. However, it can be understood that faith and spirituality, for this research study, include religion, inclusive of a faith or spiritual relationship with a higher power or God (Scott et al., 2016).

Faith and spirituality have become increasingly relevant cultural factors in counseling (Dickerson et al., 2016; Errington, 2017; Harris et al., 2016). The growth of faith and spirituality in counseling is due to the increase in empirical research that indicated spiritual values and behaviors support physical and psychological well-being (Harris et al., 2016; Henriksen et al., 2015; Paul Victor & Treschuk, 2020; Portnoff et al., 2017). Most research studies on faith and spirituality in counseling focus on counselors' lack of competence and discomfort integrating faith and spirituality into clinical work (Bohecker et al., 2017; Henriksen et al., 2015; Stewart-Sicking et al., 2017). In contrast, the experiences of counselor educators at CACREP accredited institutions teaching students to integrate faith and spirituality into clinical work have not been sufficiently researched (Johns, 2017).

Clinical Work

Clinical work is a broad and descriptive category of psychotherapy or counseling services provided to individuals, couples, and families (Capuzzi & Stauffer, 2016). Psychotherapy services include examining, assessing, and treating clients for various interpersonal and

relational problems (Capuzzi & Stauffer, 2016). Clinical work occurs in various settings, including community mental health clinics, short and long-term care facilities, hospitals, private practices, residential treatment centers, and schools (Capuzzi & Stauffer, 2016). Although each of these settings varies in the type of client served, they provide services to assist people in overcoming mental health problems (Capuzzi & Stauffer, 2016).

The purpose of clinical work is to help clients solve problems that are causing emotional and psychological distress (Sue et al., 2019). Counseling assists clients in processing and developing skills to overcome their problems (Corey, 2016). The basic counseling structure is relationship building, assessment, treatment planning, intervention, and termination (Capuzzi & Stauffer, 2016; Corey, 2016). The essential component of the counseling structure is building the client-counselor relationship (Zilcha-Mano et al., 2016).

A strong emotional bond and positive rapport between the client and counselor predict positive therapeutic outcomes (Kivlighan et al., 2016; Zilcha-Mano et al., 2016). A solid therapeutic relationship is built on empathy, trust, confidence, openness, and honesty (Bafiti, 2021; Nienhuis et al., 2018). If clients feel safe, nurtured, and respected, they are open to acknowledging and exploring their problems (Zilcha-Mano et al., 2016). Once the therapeutic bond is created, the counselor will begin the assessment phase of the process.

Assessment is the process of gathering information to conceptualize a holistic view of the client and the presenting problems (Butts & Gutierrez, 2018; Corey, 2016). Assessments include intake interviews, biopsychosocial assessments, standardized psychological tests and examinations, self-report inventories, and behavioral observations (Butts & Gutierrez, 2018). During the assessment phase, the counselor will formulate a hypothesis or an educated guess

about the client's presenting problems and develop a preliminary plan to help them solve their problems (Gehart, 2015).

A client's faith and spirituality are critical elements to consider during the assessment phase of counseling (Butts & Gutierrez, 2018). To properly conceptualize a client, Butts and Gutierrez (2018) indicated that formal and informal spiritual assessments are necessary to gather information about a client's beliefs, presenting problems, and goals for therapy. Formal assessments include qualitative instruments like the Spiritual Well-being Questionnaire (Seddigh et al., 2016), the Spiritual Assessment Scale (Seddigh et al., 2016), and the Assessment of Spirituality and Religious Sentiments (Seddigh et al., 2016). Informal assessments include the tree ring technique (Akwash, 2020), spiritual life maps (Snodgrass & Noronha, 2015), and spiritual genograms (Limb et al., 2018). Counselors use results from one or more of these assessments and the biopsychosocial information to collaborate with the client on goals for counseling and creating a treatment plan (Butts & Gutierrez, 2018).

A treatment plan is a structured and formalized map that the counselor and client use to guide the therapeutic process (Gehart, 2015). Collaboration between the counselor and the client is necessary to ensure clients are involved in their treatment as experts of their experiences (Wubbolding et al., 2017). Treatment plans outline the client's personal health information, presenting problem, diagnosis, measurable counseling goals, frequency of counseling, a timeline for treatment progress, and interventions (Gehart, 2015). Interventions help clients solve their problems and change their behaviors (Adams et al., 2015).

Interventions are activities counselors use to assist clients in processing traumas (Currier et al., 2021), making behavior changes (McAuliffe & McAuliffe, 2019), improving their mental health (Adams et al., 2015), and adjusting their attitudes and beliefs (McAuliffe & McAuliffe,

2019). Effective interventions are structured to evoke change in a client's thinking and behaviors which helps them overcome mental and emotional problems and achieve their counseling goals (Adams et al., 2015). Counselors select interventions based on the therapeutic approach that fits well with the client, presenting problem, and the client's cultural identifiers (McAuliffe & McAuliffe, 2019), such as race, ethnicity, sexual orientation, faith, and spirituality (Sue et al., 2019). Although faith and spirituality interventions are critical to the counseling process, their inclusion has not always been favorable for several reasons (Oxhandler et al., 2018; Plante, 2016).

Integration of Faith and Spirituality into Clinical Work

The inclusion of faith and spirituality in clinical work has changed several times over the past century (Oxhandler et al., 2018). Before the early 1900s, faith and spirituality were integral parts of many healthcare facilities and mental health treatment programs (Oxhandler et al., 2018). It was common for hospitals and treatment facilities to include religious groups and individuals in treating patients (Oxhandler et al., 2018). Then, in the early 1920s, the practice of faith and spirituality in clinical settings drastically changed (Oxhandler et al., 2018), making the relationship between faith, spirituality, and clinical work almost nonexistent (Plante, 2016).

Between the early 1920s and the 1980s, faith and spirituality were removed from research, academic programs, and across all helping professions due to the voices of a few but well-known, influential men in the field of psychology and psychiatry (Oxhandler et al., 2018; Plante, 2016). Founders and leaders of the psychology and psychiatry professions were divided in their beliefs about faith and spirituality. Abraham Maslow, Carl Jung, and Gordon Allport favored the inclusion of faith and spirituality in counseling (Harris et al., 2016). However, others held contempt for its inclusion, which set the standard for the profession (Plante, 2016).

Sigmund Freud, Albert Ellis, B. F. Skinner, and John Watson believed that the inclusion of faith and spirituality correlated with mental illnesses (Harris et al., 2016; Plante, 2016), making it counterintuitive to include in clinical work. Freud believed that religion was an obsessional neurosis (Harris et al., 2016) and hysterical (Oxhandler et al., 2018), and Watson considered faith and spirituality medievalism (Plante, 2016). Ellis reportedly believed that faith and spirituality were irrational and lacked empirical evidence. At the same time was the emergence of the medical model of care and empirical movement that required significant research to continue practicing faith and spirituality integration in clinical settings (Oxhandler et al., 2018). The consensus was that faith and spirituality were a sign of psychopathology and perpetuated mental illness; thus, faith and spirituality became a negative stigma that remains today for many counseling professionals (Harris et al., 2016; Plante, 2016).

Over the past several decades, the negative stigma of faith and spirituality in clinical work has steadily declined (Oxhandler & Parrish, 2018), and the acceptance of faith and spirituality in clinical work has increased. The increased acceptance is attributed to the increased body of research tied to the significant benefits to one's overall health and mental wellness (Dukes, 2021; Harris et al., 2016; Oxhandler & Parrish, 2018; Portnoff et al., 2017; Prout et al., 2021). The research literature revealed several studies on faith and spirituality in clinical work associated with overall wellness for the body, mind, and spirit (Captari et al., 2018; Errington, 2017; Harris et al., 2016; Portnoff et al., 2017). Errington (2017) presented a theoretical reflection about the importance of spirituality in systemic therapy, clarifying that clients' spirituality is a critical part of the human experience. To facilitate wellness and growth, clients must address the presenting mental health issues and explore their spiritual needs to overcome their problems (Captari et al., 2018; Galek et al., 2015).

Captari et al. (2018) investigated the efficacy of tailoring treatment plans to a client's faith and spirituality beliefs to help them overcome addictions. Their research examined 97 quantitative outcome studies to understand the benefits of spirituality integration to overcome addiction (Captari et al., 2018). Captari et al. (2018) determined that faith and spirituality were strengths and tools for growth throughout the counseling process. One example showed that the inclusion of Buddhist principles into a 12-session program helped participants reduce impulsive behaviors and modify addictive behaviors. Participants were encouraged to practice coping strategies such as spiritual self-affirmation, meditation, and prayer when they experienced urges to use drugs. Clients who consistently implemented coping strategies overcame their addictions and established a stronger sense of overall wellness and meaning for life. Captari et al. (2018) noted that their study focused on Christianity and recommended more research to investigate therapeutic approaches adapted to clients' faith and spirituality beyond Christianity.

In another study, Harris et al. (2016) utilized a systemic literature review methodology to explore clients' expectations and preferences for integrating their faith and spirituality into counseling. The authors examined 64 peer-reviewed articles, which showed that a client's faith and spirituality are connected to their values, and values derive meaning and provide a sense of direction for their lives. Research literature indicated that individuals who have clarity about their life's purpose have lower mental health issues and greater life satisfaction (Galek et al., 2015). One recommendation from the study was to investigate how counselors are taught to integrate faith and spirituality in counseling sessions (Harris et al., 2016), bolstering the need for more research to discover how counselor educators teach students to integrate faith and spirituality into clinical work.

Faith and spirituality in clinical settings can be used as a strength to address many presenting problems (Harris et al., 2016). Portnoff et al. (2017) conducted a quantitative study examining the relationship between depression and spirituality. Their research indicated that individuals with strong levels of faith and spirituality had a reduced risk of moderate depression and suicidal ideation. Although the research literature indicated that the inclusion of faith and spirituality in clinical work is beneficial (Harris et al., 2016; Sami et al., 2021), the majority of research on the topic focuses on counselors, and prelicensed counselors lack of competence, lack of confidence, and discomfort with faith and spirituality in clinical settings (Henriksen et al., 2015; Scott et al., 2016; Woodhouse & Hogan, 2020). More research is needed to understand counselor educators' experiences teaching master's level students about faith and spirituality in clinical settings to improve counselors' cultural competence, comfort with faith and spirituality in clinical settings (Harris et al., 2016), and professional identity (Cureton et al., 2019).

Counselors

Counselors' cultural competence and professional identity are vital components of their effectiveness in clinical work (Woo & Henfield, 2015; Woodhouse & Hogan, 2020). Cultural competence is defined as the ability to understand, value, and interact with individuals from cultures different than one's own (Ratts et al., 2015). The development of cultural competence requires counselors to intentionally become aware of their values, beliefs, worldviews, and attitudes toward different cultures and diverse groups (Burns, 2017). Similarly, counselors must become knowledgeable of the world's cultures (Ratts et al., 2015) and develop skills to effectively engage and communicate with people of diverse cultures (Burns, 2017).

Effectively engaging with clients of diverse cultures is directly tied to professional identity development (Ratts et al., 2015). A counselor's professional identity has two

components the nature of their work as a helping professional (Woo & Henfield, 2015) and their personal selves (Lloyd-Hazlett & Foster, 2017). As helping professionals, counselors are bound to uphold the profession's philosophy, roles, and scope of practice to empower people to achieve mental wellness and career goals (Burns, 2017). On a personal level, counselors are expected to have a high amount of self-awareness (Burns, 2017) related to their perspectives of people and diverse groups, including assumptions, beliefs, and biases (Sue et al., 2019). Counselors must be aware of their own beliefs, biases, and cultural worldview such that it does not negatively influence the client-counselor relationship and hinder the counseling process (Sue et al., 2019).

Counselors could hinder the client-counselor relationship when they fail to understand their faith and spirituality beliefs (Ratts et al., 2015; Woodhouse & Hogan, 2020). Sue et al. (2019) described faith and spirituality as cultural identifiers that emerge in counseling but are often overlooked when developing self-awareness. The lack of attention given to faith and spirituality is attributed to counselors who hold negative beliefs about including faith and spirituality in counseling despite research showing positive outcomes for clients (Evans et al., 2021; Henriksen et al., 2015; Portnoff et al., 2017). As such, counselors that maintain a belief that faith and spirituality do not belong in counseling not only violate the ACA's code of ethics but they limit their ability to help clients reach their counseling goals (Evans et al., 2021; Henriksen et al., 2015).

Clients

More than ever, people seek counseling to help them manage the many mental and emotional challenges they face every day (Mental Health in America, 2021). In early 2020, COVID-19 (a global pandemic due to the spread of SARS-CoV-2, coronavirus) caused many deaths and significant emotional and psychological distress due to the many restrictions and

mandates enacted by the states and the federal government (Ribeiro et al., 2021). In the United States of America, people were not allowed to attend churches, causing many parishioners to attend virtual services or not participate at all (DeSouza et al., 2021; Ribeiro et al., 2021). For many individuals, church settings provide more than teaching on faith and spirituality; the church is a place of connecting and healing to prevent mental and emotional issues. Closing churches during the pandemic eliminated this preventative measure and pushed many people into depression, anxiety, and interpersonal problems (Ribeiro et al., 2021).

Similarly, teachers and students who typically engaged in face-to-face learning were required to connect in a virtual school format called distance learning (Baloran, 2020). Virtual formats are beneficial to self-motivated learners and those who do not have learning disabilities and require interpreters or special education supports (Asbury et al., 2021). However, the virtual format yielded new challenges for students who needed additional support and accommodations, in addition to mental and emotional distress (Asbury et al., 2021). In the same way, teachers who were already struggling to educate and help students manage emotions in this new way of learning had to navigate their own mental and emotional health due to COVID-19 impacts (Roman, 2020).

In addition to COVID-19, the rise in police shootings of unarmed Black men added to the assortment of stressors that adults and children alike were experiencing (Campbell & Valera, 2020). The murder of George Floyd ignited protests and riots worldwide, setting in motion the need for counselors to help people understand their emotions and make sense of situations occurring in the world (Das et al., 2021). In May 2020, one week after the murder of George Floyd, rates of anxiety and depression jumped from 36% to 41% for members of the African

American community, overwhelming counseling agencies with requests for counseling services (Flowers & Wan, 2020).

In 2017, the Barna Group conducted a study that found that 42% of American adults participated in counseling or therapy at some point in their lives. Thirteen percent of the participants reported that they were in counseling at the time of the study. In a Gallup poll of 1000 American adults, Harris et al. (2016) found that not only were people seeking counseling, but 81% of the participants wanted their faith and spiritual values included in counseling sessions. Consequently, if clients want their faith and spirituality included in their counseling sessions, counselors need to be competent to meet their needs (Attoe, 2020; Diallo et al., 2021; Harris et al., 2016).

Faith and Spirituality in Counselor Education

Developing cultural competence relevant to faith and spirituality begins in counselor education (Barden & Green, 2015). In most counselor education programs, faith and spirituality are cultural constructs consistently overlooked (Adams et al., 2015; Leighton, 2016). The negative attitude toward faith and spirituality in counseling created a belief that faith and spirituality were not significant enough to emphasize (Oxhandler et al., 2018; Plante, 2016) in comparison to race (Dameron et al., 2020), gender (Couture, 2017), sexual orientation (Couture, 2017), and socioeconomic status (Clark et al., 2017). A review of the research literature revealed several authors who discussed cultural constructs that emerge in counseling that are emphasized over faith and spirituality.

Dameron et al. (2020) conducted a quantitative study to investigate race. The study sought to understand differences in multicultural competence in school counselors who received infused curriculum about racial issues versus a single course. Infused curriculum includes

multicultural topics spread across all the master's level curriculum (Dameron et al., 2020). Using the Multicultural, Awareness, Knowledge, and Skills Survey-Counselor Form (MAKSS-C), 755 members of ASCA who were employed in a K-12 school counseling program responded to the survey. Results indicated that infused curriculum was more beneficial than a single multicultural course. The inclusion of race was noted as a cultural identifier that must be included across all elements of the master's level curriculum.

In addition to race, gender and sexual orientation are cultural constructs that are emphasized in counseling. Courture (2017) initiated a study to understand the perceived preparedness of college mental health counselors to include support for transgender clients. Their study surveyed 84 mental health counselors across the United States. Study participants reported feeling an obligation and professional responsibility to be informed about gender and sexual orientation issues. The results from the study showed that most respondents felt they had a moderate amount of preparedness, with no differences seen between participants and their years of experiences counseling clients. Courture (2017) indicated that professional development training and increasing the awareness of mental health challenges for people in the transgender population would improve counselors' self-efficacy.

Increased training regarding socioeconomic status is another way to improve a counselor's self-efficacy. The research literature indicated that people living in poverty have an increased likelihood of experiencing mental health issues or a psychological disorder (Wahlbeck et al., 2017). Clark et al. (2017) conducted a study to investigate the relationship between multicultural competence and beliefs about poverty. The study results indicated that participants with a higher multicultural competence had lower negative poverty bias, and an increased multicultural competence was a predictor of poverty beliefs. The findings from this study further

justify the need to ensure that multicultural competence is taught in counselor education programs to ensure counselors are prepared to meet the needs of people of all socioeconomic statuses (Clark et al., 2017). Thus, multicultural competence training must extend to faith and spirituality to ensure that counselors are prepared to address their client's cultural identifiers in the same way as race, gender, sexual orientation, and socioeconomic status.

The lack of attention given to faith and spirituality in counselor education creates a weakness for master's level counseling students hindering them from being effective at clinical work (Sue et al., 2019). Thus, clinical mental health counselors (Pearce et al., 2019), school counselors (Scott, 2019), and marriage and family counseling therapists (Coyle, 2017) are unprepared to address the needs of their clients who identify with faith and spirituality (Stewart-Sicking et al., 2017). Likewise, professional identity supports counselors in effectively attending to their client's clinical needs (Burns, 2017; Cureton et al., 2019; Greggo, 2016).

Burns (2017) indicated that a strong professional identity strengthens the ability of the counselor to work with various client populations, offer services that encompass their full scope of practice, and be seen as credible when advocating for their clients. Factors linked to a counselor's professional identity are decision making (e.g., assessing, attuning, joining, and deciphering avenues to explore with the client) and trusting instincts based on self-awareness and personal convictions (Greggo, 2016). Counselors with a strong professional identity are aware of their faith and spiritual beliefs, values, and worldviews (Cureton et al., 2019). Moreover, they know how to navigate the counseling relationship without allowing their personal convictions and values to play a role (Greggo, 2016).

Counselors with an underdeveloped professional identity lack an awareness of their beliefs, values, and worldviews, which could negatively impact the counseling relationship and

process (Greggo, 2016). Counselors with underdeveloped professional identities may impose their values and beliefs on clients instead of helping clients explore their values and beliefs (Greggo, 2016). Cureton et al. (2019) indicated that an optimal therapeutic self emerges from a counselor who has resolved conflicts between their personal and professional selves. Professional identity development occurs as counselor educators guide students through a learning process, teaching them to resolve ethical dilemmas of faith and spirituality for themselves (Greggo, 2016). Working through these situations in the classroom are skills that can transfer to the counseling or therapy room (Greggo, 2016).

Master's Level Counseling Students

Master's level counseling students in clinical mental health counseling (CMHC), school counseling (SC), marriage and family counseling therapy (MFCT) programs are expected to address faith and spirituality with their clients within their scope of practice (Williams et al., 2021). Operating outside of one's scope of practice raises legal and ethical concerns that put clients at risk of harm and violate several state and professional ethical codes (Johnston & Tarvydas, 2019). Therefore, it is critical to ensure that master's level counseling students understand how to ethically integrate faith and spirituality relevant to their specific discipline and scope of practice (Lawson et al., 2017).

Clinical mental health counseling students. Clinical mental health students are trained to meet the needs of individuals experiencing cognitive, behavioral, and emotional problems (Watson & Schmit, 2019). CMHC professionals work with clients in various settings, including mental health clinics, hospitals, community health centers, colleges and universities, government agencies, and private practices (Williams et al., 2021). The lens of a CMHC conceptualizes problems in an individual psychology framework (Becvar & Becvar, 2017). Addressing client

problems from an individual psychology perspective helps individuals describe, explain, predict, and change their behaviors (Watson & Schmit, 2019). Adhering to the ACA code of ethics helps counseling students understand how to address faith and spirituality issues within the scope of their practice (Bohecker et al., 2017).

The 2014 ACA code of ethics provided counseling students with expectations about their professional responsibility related to faith and spirituality (ACA, 2014, Section C.5; Bohecker et al., 2017; Kaplan et al., 2017). The standard stated that counselors should recognize that culture influences how problems are defined and experienced; thus, they should operate from a culturally sensitive lens (ACA, 2014, Section E.5.b) and not discriminate against clients based on their religious or spiritual affiliation (Bohecker et al., 2017). Also, counselors are expected to administer assessments in a culturally sensitive manner by taking faith and spiritual preferences into consideration (ACA, 2014, Section E.8; Hull et al., 2016). A review of the literature regarding faith and spirituality training in clinical mental health revealed no specific articles that addressed how students are taught to include faith and spirituality in counseling sessions.

School counseling students. School counseling students are trained to support elementary, middle, and high school students in academic, social, and career development (Goodman-Scott, 2015). Through advocacy and collaboration with families, school staff, and community members, counselors help meet the diverse needs of students (Yocum, 2015). Under the Core Theories and Concepts section, the 2019 ASCA standards for school counselor preparation programs stated that school counselors must have established and emerging methods to support multiculturalism, including spirituality (ASCA, 2019, Standard 2.1; Gallo, 2014). Yocum (2015) indicated that ASCA's ethical standards stated that school counselors should support students who identify with diverse backgrounds, including faith and spiritual identities.

Moreover, school counselors should have a keen awareness and knowledge of skills to work with students of various faith and spiritual characteristics (Yocum, 2015).

The inclusion of faith and spirituality in school counseling is shown to be a protective factor for mental health (Pizzigoni et al., 2019), life satisfaction and purpose (Quinn, 2017), and positive behaviors (Malinakova et al., 2018). Although there are significant benefits for including faith and spirituality in a school setting, there are also legal and ethical considerations (Schwarz & Roe, 2015). The risk of legal ramifications by violating church and state laws causes school counselors to avoid faith and spirituality discussions in public schools (Schwarz & Roe, 2015). Avoiding conversations communicates to students that their faith and spiritual identities are not valued or important, resulting in feelings of rejection (Schwarz & Roe, 2015). A review of the literature regarding faith and spirituality training in school counseling revealed no articles that addressed how counseling students are taught to include faith and spirituality in counseling sessions.

Marriage and family counseling therapy students. The epistemology of marriage and family counseling therapy is different from clinical mental health, and school counseling in that marriage and family therapists are trained to think systemically (Gunn et al., 2015). Gunn et al. (2015) describe a systemic lens as viewing a family system, its relationship patterns within the system, and contributions from external factors influencing the system. Marriage and family therapists (MFTs) consider family structures, interaction patterns, and belief systems inclusive of faith and spirituality (Coyle, 2017). Understanding the family's beliefs is a critical cultural factor that should be used to help the family resolve problems that brought them into counseling (Becvar & Becvar, 2017).

A review of the literature regarding spiritual integration training for MFTs resulted in two articles. Williams-Reade et al. (2019) presented a qualitative study exploring a course to train MFTs to integrate spirituality into counseling sessions. The twelve-session practicum style course addressed learning outcomes that aligned with the American Association for Marriage and Family Therapy (AAMFT) core competencies and the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) standards (Williams-Reade et al., 2019).

Alignment to the AAMFT and COAMFTE standards was vague and provided little understanding regarding competence. The AAMFT core competencies identified spirituality and religion in the 2004 publication of the MFT core competencies and in the condensed version of the MFT core competencies (Northey et al., 2020). The competency stated, “Cultural and contextual awareness: conduct assessment and therapy with sensitivity to contextual and systemic dynamics (e.g., gender, age, socioeconomic status, culture/race/ethnicity, sexual orientation, spirituality, religion, larger systems, social context)” (Northey et al., 2020, p. 50). The COAMFTE standard stated that “Diverse, multicultural and/or underserved communities were a foundational curriculum area” (Northey et al., 2020, p. 46).

Coyle (2017) discussed integrating faith and spirituality in marriage and family therapy (MFT) training using a Christian-based pedagogical approach. In their theoretical article, Coyle (2017) discussed the necessity of including a spirituality training curriculum in MFT courses due to an expressed interest by students. The article discussed several approaches incorporating foundational religion courses, spirituality integration in clinical practice, supervision groups, live supervision, and a Capstone presentation. Coyle (2017) suggests that the curriculum balanced with religious coursework and other spiritual reflection opportunities and integrative methods effectively developed faith and spirituality integration skills in master’s level MFT counseling

students. Although this study focused on MFT programs, emphasizing the integration of faith and spirituality also includes CMHC and school counseling.

The research literature regarding integrating faith and spirituality training in counselor education programs specific to CMHC, school counseling, and MFCT has insufficient research literature about teaching faith and spirituality integration in an academic setting (Johns, 2017). This gap in the literature is an indicator that more research is needed to address teaching faith and spirituality in counselor education programs (Johns, 2017). Despite the absence of research literature, the 2016 CACREP standards detail requirements for MFCT, CMHC, and school counseling programs to address faith and spirituality in academic settings. Although addressed in the CACREP standards, specific expectations teaching students to integrate faith and spirituality in an academic setting are vague and open to a vast amount of interpretation (Bohecker et al., 2017).

CACREP Accredited Programs

A critical element of counselor education programs is helping students develop cultural competence (Barden & Greene, 2015). According to the 2016 CACREP standards for counselor education programs, students are expected to meet core curriculum standards for social and cultural diversity (Bohecker et al., 2017; Henriksen et al., 2015). The CACREP standard stated that counselors must be trained to develop a professional identity that includes multicultural counseling competencies and skills that attend to clients' worldviews and spiritual beliefs (CACREP, 2016, Standard 2.2). Although CACREP endorses attending to clients' faith and spirituality needs, the standards fall short of emphasizing the importance of teaching students how to include faith and spirituality in counseling (Bohecker et al., 2017).

The 2009 publication of CACREP standards defined spirituality as “a sense of a relationship with or belief in a higher power or entity greater than oneself that involves a search for wholeness and harmony” (Bohecker et al., 2017, p. 131). However, in the 2016 publication, the definition was removed and replaced with a statement within the Social and Cultural Diversity standard that suggests counselor education programs explore “the impact of spiritual beliefs on clients’ and counselors’ worldviews” (Bohecker et al., 2017, p. 132). Scott et al. (2016) pointed out the absence of faith in the CACREP standards and the discouragement of counselors to include faith due to the lack of empirical research on the topic. Although CACREP presents an expectation for counselor education programs to include spirituality across all core curriculum areas, the topic is minimized in the standards (Bohecker et al., 2017).

The minimization of spirituality and the absence of faith in the current CACREP standards fosters incompetence and unpreparedness (Curry et al., 2015). Ensuring counseling students are culturally competent and ready for the field, counselor education programs must develop their programs to intentionally address faith and spirituality (Adams et al., 2015). Scott et al. (2016) discussed a qualitative study that found that most counselors unintentionally imposed their beliefs and values on clients because they did not know how to navigate the topic in a clinical setting. Counselors reported being unprepared to address the topic since it was excluded from their training program (Scott et al., 2016). Likewise, Henricksen et al. (2015) explored counseling students’ perceptions of their training programs. Findings indicated that greater than 50% of counselors reported that their academic programs ignored the importance of awareness and sensitivity to faith and spirituality in clients’ lives (Henricksen et al., 2015).

Competence development is tied to professional identity, a critical component of counselor education programs (Bohecker et al., 2017). According to the 2016 CACREP

standards, counseling students must develop the appropriate skills to address clients' counseling needs and ensure a strong professional counseling identity (Bohecker et al., 2017; Henricksen et al., 2015). As previously discussed, the research literature indicated that skillfully integrating a client's faith and spirituality into counseling sessions is a critical skill to develop; moreover, integration of faith and spirituality aligns with cultural competence (Scott et al., 2016; Walsh et al., 2021).

In a recent study, Walsh et al. (2021) discussed the need for counselors to develop faith and spirituality competence to work with people in rural communities. Interpretive phenomenological analysis was utilized to explore the lived experiences of 10 counselors from rural communities in Iowa, integrating faith and spirituality into counseling sessions (Walsh et al., 2021). The findings from the study revealed barriers for counselors due to the beliefs, values, and practices of their clients. Participants shared that the cultural factors of rural Iowans were a significant factor in integrating faith and spirituality into clinical work. If counseling programs do not sufficiently emphasize faith and spirituality in the curriculum, counseling students will graduate lacking the competence and professional identity to serve clients adequately (Bohecker et al., 2017). Walsh et al. (2021) suggested that future research should focus on understanding the intersectionality of counselors' identities and value conflicts that emerge between counselors and clients when integrating faith and spirituality in clinical settings.

Curriculum and Coursework

The lack of awareness and sensitivity to a client's faith and spirituality needs reflects a lack of attention given to faith and spirituality in the classroom (Sami et al., 2021; Trahan & Keim, 2019). Most counselor education programs are unstructured and do not have universal standards to integrate multiculturalism into the curricula (Trahan & Keim, 2019). The lack of

structure leads to inconsistent preparation and training of students (Trahan & Keim, 2019).

Impostor syndrome, an internal feeling of inadequacy and incompetence, is likely to emerge in counselors due to unpreparedness resulting in decreased confidence and unfavorable client outcomes (Johnson, 2019).

In 2009, a division of the ACA, the Association for Spiritual, Ethical, and Religious Values in Counseling (ASERVIC), introduced fourteen competencies for addressing spiritual and religious topics to mitigate issues of unpreparedness (Bayne & Tylsova, 2019). The competencies are aligned to six themes or categories *culture and worldview, counselor self-awareness, human and spiritual development, communication, assessment, and diagnosis and treatment* (Bohecker et al., 2017). These competencies are designed to help students and counselor educators initiate conversations and incorporate faith and spirituality into clinical work (Dailey et al., 2015; Hull et al., 2016). The competencies, according to Sauerheber (2014, p. 198), are:

Culture and Worldview

1. The professional counselor can describe the similarities and differences between spirituality and religion, including the basic beliefs of various spiritual systems, major world religions and agnosticism, and atheism.
2. The professional counselor recognizes that the client's beliefs (or absence of beliefs) about spirituality and/or religion are central to his or her worldview and can influence psychosocial functioning.

Counselor Self-Awareness

3. The professional counselor actively explores his or her own attitudes, beliefs, and values about spirituality and/or religion.

4. The professional counselor continuously evaluates the influence of his or her own spiritual and/or religious beliefs and values on the client and the counseling process.
5. The professional counselor can identify the limits of his or her understanding of the client's spiritual and/or religious perspective and is acquainted with religious and spiritual resources and leaders who can be avenues for consultation and to whom the counselor can refer.

Human and Spiritual Development

6. The professional counselor can describe and apply various models of spiritual and/or religious development and their relationship to human development.

Communication

7. The professional counselor responds to client communications about spirituality and/or religion with acceptance and sensitivity.
8. The professional counselor uses spiritual and/or religious concepts that are consistent with the client's spiritual and/or religious perspectives and are acceptable to the client.
9. The professional counselor can recognize spiritual and/or religious themes in client communication and is able to address these with the client when they are therapeutically relevant.

Assessment

10. During the intake and assessment processes, the professional counselor strives to understand a client's spiritual and/or religious perspective by gathering information from the client and/or other sources.

Diagnosis and Treatment

11. When making a diagnosis, the professional counselor recognizes that the client's spiritual and/or religious perspectives can (a) enhance well-being, (b) contribute to client problems, and/or (c) exacerbate symptoms.
12. The professional counselor sets goals with the client that are consistent with the client's spiritual and/or religious perspectives.
13. The professional counselor is able to (a) modify therapeutic techniques to include a client's spiritual and/or religious perspectives and (b) utilize spiritual and/or religious practices as techniques when appropriate and acceptable to a client's viewpoint.
14. The professional counselor can therapeutically apply theory and current research supporting the inclusion of a client's spiritual and/or religious perspectives and practices.

Sauerheber et al. (2014) conducted an exploratory study with counselor educators to assess how the ASERVIC competencies were applied in CACREP accredited programs.

Findings from the nine-participant sample suggested that counselor educators are unsure how to incorporate ASERVIC competencies into their curricula. Most participants indicated that adding another topic to an already packed counseling program is challenging and nearly impossible. The recommendation was for counselor educators to develop a working knowledge of basic religious tenets to grow competence and develop comfort with the topic. Then, counselor educators should engage students in incorporating faith and spirituality topics in clinical settings (Sauerheber et al., 2014). Finally, counselor educators are encouraged to create safe learning environments for students to explore faith and spirituality without fear of judgment, condemnation, and ridicule about their ideas and beliefs (Hunt, 2018).

Counselor Educators

Counselor educators are at the forefront of preparing master's level counseling students for clinical work with diverse populations (Chan et al., 2018; Johns, 2017). Counselor educators can support cultural sensitivity and attunement to clients by teaching students how to develop rapport and engage them in conversations about culture to incorporate their faith and spirituality (Johns, 2017). A constructivist lens allows counselor educators to model their expectations of students in the classroom through engagement and appreciation for diverse cultures to teach students how to engage clients (Alt, 2015; Binkley & Minor, 2020).

Teaching faith and spirituality from a constructivist lens is quite different from teaching from a traditional educator's lens (Kaymakamoğlu et al., 2018). In a traditional classroom, the teacher is the sole authority and transmitter of information (Kaymakamoğlu et al., 2018). Alt (2017) described the role of a teacher from a constructivist lens as an expert facilitator. Although the educator is the authority in the classroom, they are willing to relinquish authority and power and share it with their students as co-creators in the process of learning and development (Moate & Cox, 2015).

Teachers and students are co-creators of meaning; thus, they both have roles in the process of learning (Kaymakamoğlu et al., 2018). Educators are focused on creating collaborative opportunities to help students expand their knowledge through social interactions (Alt, 2015; Binkley & Minor, 2020). Likewise, students play a significant part in facilitating the learning process (Alt, 2015). Students are encouraged to take the initiative to engage peers in culturally in-depth dialogues (Alt, 2015). Ultimately, it is the responsibility of counselor educators to set the stage for students to learn and help guide them through the process (Binkley & Minor, 2020).

The 2014 ACA code of ethics outlined specific expectations of counselor educators in the Responsibilities of Counselor Educators that align with this study (ACA, 2014, Section F.7; Hull et al., 2016). First, counselor educators are expected to include multiculturalism and diversity in all courses and workshops to develop professional counselors (ACA, 2014; Bohecker et al., 2017). Second, counselor educators are encouraged to use innovative theories, techniques, modalities, and procedures grounded in theory to train students (Moate & Cox, 2015). Third, counseling students will engage in self-growth experiences due to counselor educators teaching from a constructivist learning model, offering students the opportunity to grow psychologically, emotionally, and clinically (Binkley & Minor, 2020; ACA, 2014). In the only publication of the ACES Best Practices for Clinical Supervision under the Supervisory Relationship section, the report described the responsibility of supervisors to support the growth and development of cultural aspects of the supervisor-supervisee relationship by recognizing sensitivity and attunement to faith and spirituality (Association for Counselor Education and Supervision Task Force, 2011, Standard, 5.C.i.). Supervisors are obligated to include faith and spirituality, as appropriate, for the growth and development of the supervisee (Hull et al., 2016). In the same way, the Diversity and Advocacy Considerations section of the ACA code of ethics stated that all supervision is multicultural, and supervisors are accountable for infusing topics of faith and spirituality in their approach to supervision (ACA, 2014, Section 6.A.iii; ACES, 2020; Hull et al., 2016).

A review of the literature related to faith and spirituality in counselor education curriculum and coursework revealed several studies worth noting (Captari et al., 2018; Eppler, 2018; Hunt, 2018; Jafari, 2016; Leighton, 2016; Lossemore & Fidler, 2019; Osborne & Jones, 2020; Stewart-Sicking et al., 2017; Trahan & Keim, 2019; Williams-Reade et al., 2019). Hunt

(2018) studied four counselors in their final year of training who identified with a specific faith community (e.g., Christian or Muslim). The qualitative study aimed to discover students' experiences learning to incorporate faith and spirituality in clinical work. The study indicated that none of the students' academic programs offered substantial training on religion, faith, or spirituality. Some participants reported that religion and faith topics were considered irrelevant and absent from any of their coursework. All participants indicated that exploring faith and spirituality in the classroom and during the fieldwork experience was necessary to learn about belief systems, cultures, and customs to break down biases and assumptions that could negatively influence working with clients.

In another study, Jafari (2016) conducted a systematic review of six quantitative studies related to training in religion and spirituality within accredited programs in the U.S. The primary research question was, "What can primary research literature tell us about training in religion and spirituality within counseling/clinical psychology training programs?" (p. 258). The findings from the study indicated inconsistent and infrequent training that was disconnected from the curriculum. Moreover, findings showed that spirituality and religion were included but minimized in diversity courses. Jafari (2016) stated that the lack of concrete methods and frameworks to teach faith and spirituality was nonexistent, leaving counselor educators questioning how to address the topic with students. Future research recommendations included understanding frameworks and training protocols to address faith and spirituality in counselor education programs.

Williams-Reade et al. (2019) discussed a training model to mitigate the negative influence of personal limitations and biases on client outcomes. The researchers described a qualitative study using a curriculum incorporating spiritual integration activities into an MFCT

practicum course. The purpose of the course was to help students at a Seventh-day Adventist university develop an awareness of their spirituality and how it influenced their work as therapists. Application of transcendental phenomenology (Moustakas, 1994) revealed three themes from the study (a) creating a safe environment for learning, (b) using reflexivity to understand the role of faith and spirituality in one's personal life, and (c) growing professionally by appreciating the value of faith and spirituality in clients' lives. Results from the study indicated that students' skills increased after completing the spiritually integrated curriculum, also their confidence to introduce faith and spirituality in a counseling setting increased. Future research recommendations suggested replicating the study using a targeted population of students of various faith and spiritual identities.

Osborne and Jones (2020) discussed the supervisor's role in helping students increase their confidence and comfort with faith and spirituality. In their study, Osborne and Jones (2020), with the expertise of five doctoral level Christian counselor educators, conducted a literature review related to supervision, counselor competence, and assessment instruments. Their research sought to validate the efficacy of the Christian Counseling Supervision Instrument (CCSI) based on the supervisory relationship in helping Christian counselors reduce discomfort and insecurities in integrating faith and spirituality into clinical work (Osborne & Jones, 2020). The study showed that the CCSI effectively measured counselors' ability to integrate Christianity in a counseling setting.

Current Teaching Methods

In addition to curriculum and coursework, counselor educators' pedagogy or teaching methods are crucial in developing students' competencies (Minton et al., 2018). One study explored faith and spirituality concepts using short films (Eppler, 2018). The researcher wanted

to understand how short films could be used as a therapeutic intervention. Participants in the study were asked to watch two spirituality-related short films and provide feedback about their experience to the researcher using semi-structured interviews (Eppler, 2018). Thematic analysis was used to analyze the data (Clarke & Braun, 2013). The study showed that short films were useful in promoting conversations about spirituality in clinical settings. In this approach, people are taught to externalize problems from a spiritual lens and create positive outcomes (Eppler, 2018). The short films were a valuable tool to help clients envision spiritual concepts like wholeness, connection, and reflection and help counselors expand their understanding of integrating spirituality into clinical work (Eppler, 2018).

In a qualitative multi-case study, Trahan and Keim (2019) described the introduction of multicultural topics in the classroom using role-plays, vignettes, discussion questions, and activities. Trahan and Keim (2019) used semi-structured interviews, personal documents, public records, and research-generated documents to discover counselor educators' teaching practices and how they introduced multicultural and diversity topics into the curriculum. A phenomenology approach called horizontalization (Moustakas, 1994) was used to analyze the data resulting in five themes: multicultural teaching framework, personal cultural, culturally inclusive assignments, CACREP program requirements, and existing multicultural research literature. The study showed how counselor educators could use multicultural pedagogies and collaborative learning environments to model the attitudes and behaviors they expected from their students in a clinical setting.

In another study, Stewart-Sicking et al. (2017) explored an approach to help counselors improve their competence in using faith and spirituality in clinical settings. The *Ways Paradigm* was introduced as a framework for helping counselors understand how to integrate faith and

spirituality into counseling (Stewart-Sicking et al., 2017). The framework uses three dimensions to explore faith and spirituality with clients *the way of understanding, the way of being, and the way of intervening*. The way of understanding is the knowledge of human development and counseling theories inclusive of faith and spirituality and their relationship to people. The way of being, or how the counselor presents themselves to the client. Their level of empathy, values, rapport with the client, and how they set the atmosphere and create space for conversations tied to faith and spirituality. The way of intervening describes the execution of clinical work, or how the counselor interrupts the negative cycle causing problems for the client and introduces healthy alternatives that incorporate faith and spirituality practices.

Leighton (2016) approached the integration of faith and spirituality in counselor education by dispelling misconceptions like spiritual clients are hard to counsel; counselors must know the faith or religion to counsel them effectively, and existing counselor education courses cannot be used to introduce faith and spirituality dialogue to train students. Leighton (2016) showed effective methods of integrating faith and spirituality into the existing curriculum to help students develop a stronger sense of faith and spirituality in clinical work. The suggested approach was linking faith and spirituality to social justice and diversity topics and linking faith and spirituality to assignment rubrics and grading.

Lossemore and Fidler (2019) introduced a theoretical framework for counselor educators to integrate Christian beliefs and values in counseling through course assignments. They detailed factors that influence faith and spirituality integration for Christian counselors and practical assignments to support personal and professional growth. The development of a counselor's spiritual identity helps support clients, according to Scott (2019), who discussed the importance of spiritual formation as part of a counselor's professional identity development. The theoretical

essay focused on counselor educators helping students establish solid ethical counseling practices to meet their clients' faith and spirituality needs by teaching them how to bracket their personal values and beliefs, modeling behaviors, and mentoring students.

Initially, learning to bracket personal values and beliefs is challenging for counseling students (McWhorter, 2019). Students tend to express their opinions and beliefs and persuade others to understand their worldviews (Corey, 2016). However, teaching emotional regulation skills could help make the learning process easier (McWhorter, 2019). Sue et al. (2019) discussed the uncomfortable nature of multicultural conversations that cause students to feel vulnerable and isolated (Sue et al., 2019). Conversations tied to faith and spirituality are likely to lead to disagreements and heightened emotions (Sue et al., 2019).

Hilert and Tirado (2018) suggested a contemplative pedagogical approach to help students manage the emotional response to disagreements about multicultural issues. Contemplative pedagogy is a teaching method that incorporates introspection and experiential learning to facilitate social engagement and self-awareness (Hilert & Tirado, 2018). Contemplative practices include mindfulness, deep breathing, and meditation, which help regulate emotions and facilitate executive thinking (Hilert & Tirado, 2018). Combining mindfulness skills and dialogue about faith and spirituality is likely to reduce disagreements and open the door for more productive conversations about faith and spirituality in the classroom (Hilert & Tirado, 2018).

Counseling theories can be directly applied to religious and spiritual practices (Captari et al., 2018). Religiously integrated cognitive-behavioral therapy was investigated by Captari et al. (2018) to infuse faith and spirituality across cultures and mental health problems. The study applied religiously integrated cognitive-behavioral therapy as an intervention to mitigate

symptoms of depression. Psychotherapists helped the client identify elements of their faith traditions as applicable in replacing negative thoughts that were holding the depressive symptoms in place. Through meditation, affirmations, and scripture reading client's thoughts changed, and depressive symptoms were alleviated. Captari et al. (2018) discussed how cognitive-behavioral therapy techniques were used with Buddhist principles to reduce impulsive behaviors and change negative self-beliefs. Similarly, one client experienced decreased anxiety by aligning principles and passages from the Koran to change negative thoughts. The client was taught to strengthen their coping skills by introducing daily prayer and adherence to Muslim customs.

Another common theoretical approach in counseling is motivational interviewing (Miller & Moyers, 2017). Miller and Moyers (2017) recommended motivational interviewing as a client-centered (Miller & Moyers, 2017) approach to teach counselors how to facilitate a discussion with clients about their faith and spirituality without imposing personal beliefs and values. Miller and Moyers (2017) described the alignment of motivational interviewing with spirituality in counseling, noting the successful utility of the approach helps clients address various mental health issues, including trauma, anxiety, and depression, leveraging their cultural identifiers to yield positive outcomes. In contrast, when a client's faith and spirituality practices are considered unhealthy to one's well-being, counselors must be trained to assess the concerns (Magyar-Russell & Griffith, 2016).

Training students to assess and manage ethical situations where faith and spirituality can be harmful or unhealthy to a client's well-being is a critical development area (Magyar-Russell & Griffith, 2016). Harmful or unhealthy expressions of faith and spirituality arise when a client experiences a negative response to their faith or spirituality practices, such as a client diagnosed

as bipolar or schizophrenia becoming triggered by a charismatic worship service, or a Muslim client with an eating disorder having a relapse due to their participation in Ramadan (Magyar-Russell & Griffith, 2016). Teaching students to use existential questions to help clients describe their perspectives about life, relationships, and problems is an effective way to assess harmful faith and spiritual practices (Magyar-Russell & Griffith, 2016). Another approach is to be attentive to clients' language during counseling to differentiate between faith and spirituality being harmful or helpful (Magyar-Russell & Griffith, 2016). Overall, Magyar-Russell and Griffith (2016) and Sauerheber et al. (2014) recommend that counselors be trained to identify language, behaviors, and narratives inconsistent with the client's described beliefs and faith constructs. Counselors should be taught to seek consultation from more experienced colleagues; they should also request permission from the client to consult with their religious leaders, and counselors should research various faith and religious traditions to increase their knowledge (Magyar-Russell & Griffith, 2016).

Barriers for Integrating Faith and Spirituality

In addition to the literature regarding counselor education curriculum, coursework, and current teaching methods, several articles discussed barriers to incorporating faith and spirituality in classroom settings (Adams et al., 2015; Gladding & Crockett, 2019; Harris et al., 2017; Johns, 2017). Barriers or hurdles prevent movement or access to something (Adams et al., 2015). In counselor education, these barriers include a lack of information, relevance to counselor education, personal values and beliefs, and discomfort with faith and spirituality topics (Oxhandler et al., 2019).

Lack of information. A lack of information is a barrier that hinders counselor educators from teaching students to use faith and spirituality in clinical work. Adams et al. (2015)

conducted a Delphi study using 10 expert counselor educators. The purpose of the study was to identify barriers that emerged when trying to incorporate faith and spirituality in academic settings. Findings from the study showed that counselor educators lacked knowledge about faith and spirituality; thus, they were unprepared and incompetent to address faith and spirituality with students. Counselor educators could not differentiate between the constructs of religion and spirituality, and they were incapable of conceptualizing either construct to clients (Adams et al., 2015; Johns, 2017).

The lack of differentiation between religion and spirituality is a shared problem between counselor educators and professional organizations, including the ACA, CACREP, and ASERVIC (Johns, 2017). Johns (2017) raised concerns about inconsistencies with religion and spirituality language within the ACA's code of ethics, CACREP's standards, and ASERVIC's spiritual competencies. Similarly, counselor educators were unaware of faith and spirituality benefits to mental health and its relevance in counseling, thus dismissing faith and spirituality in academic and clinical settings altogether.

Relevance. A lack of information often leads to a misunderstanding about relevance (Johns, 2017). Johns (2017) discussed the dismissiveness of faith and spirituality by counselor educators due to not understanding the benefits to the client's overall well-being. Adams et al. (2015) determined from their study that counselor educators lacked personal interest in faith and spirituality and could not envision its relevance in an academic setting. On the one hand, participants reported faith and spirituality were viewed as a continuum of cultural issues like race, ethnicity, and gender; and that it is essential to address in counseling (Adams et al., 2015). Most participants failed to address faith and spirituality with students since the emerging topics were unrelated to their own faith and spirituality issues (Adams et al., 2015). Some counselor

educators reported feeling as if they were less spiritual than their students, and their lack of spirituality hurt their credibility in teaching on topics of faith and spirituality (Adams et al., 2015). Participants further reported that they lacked awareness of their own faith and spirituality background, making faith and spirituality irrelevant as a teaching or discussion topic in the classroom (Garner et al., 2017). Counselor educators that do not recognize the relevance of faith and spirituality in counseling may also be unaware of their own bias toward faith and spirituality (Adams et al., 2015).

Personal values and beliefs. Personal values and beliefs are also barriers to including faith and spirituality in academic settings (Adams et al., 2015). The intersection between personal beliefs and opposing beliefs of others can cause a conflict (Sauerheber et al., 2014). Johns (2017) conducted a narrative inquiry using nine counselor educators to explore the influence of counselor educators' spirituality beliefs when teaching and supervising master's level counseling students. The data was analyzed using hermeneutic analysis that resulted in six themes: religious and spiritual journeys, religious and spiritual practices, relationships, marginalization, modeling, and risk and taboo. Findings from the study indicated that counselor educators' spiritual beliefs influenced how they addressed faith and spirituality with their students, suggesting that personal values and beliefs like knowledge and skills are components of competency (Johns, 2017). Moreover, this research study is just the tip of the iceberg in learning more about counselor educators' experiences teaching students to integrate faith and spirituality into clinical work, making the case that more research is needed.

In another study related to counselors' perceptions about counselor educators and spiritual competencies, participants noted significant barriers, such as conflicting faith and spirituality beliefs between students and counselor educators who are not prepared to teach

students to use faith and spirituality in clinical settings (Sauerheber et al., 2014). One participant commented that counselor educators were not teaching them anything (Sauerheber et al., 2014). Sauerheber et al. (2014) found that counselor educators avoided faith and spirituality as they were not trained to teach their students' faith and spirituality constructs. Thus, students were confused and incapable of bracketing personal values and beliefs when working with clients of different faith backgrounds and those with differing sexual orientations that do not align with the counselor's belief system.

The intersectionality of faith and sexual orientation is another issue that challenges students and counselor educators due to differing values and beliefs (Harris et al., 2017). Harris et al. (2017) conducted a phenomenological study to explore the experiences of prelicensed African American counselors with significant faith and spirituality beliefs and the ethical and professional expectation to provide affirming counseling services to LGBT clients. The study included 10 participants and employed semi-structured interviews to gather participants' lived experiences which were analyzed using Moustakas's (1994) systematic approach to data analysis. The findings indicated that many counselor education programs failed to prepare counselors for faith, spirituality, sexual orientation conflicts, and balancing intersecting identities (Harris et al., 2017). Participants reported feeling incompetent with diminished confidence in their work with clients. Thus, identity development is hindered due to a lack of preparation to work with clients of intersecting identities and feelings of incompetence. Harris et al. (2017) recommended that future research investigate the relationship between race, ethnicity, religion, and professional identity development.

Discomfort with the topic. As stated previously, most of the research literature focuses on counselors' perspectives regarding the barriers that prevent them from integrating faith and

spirituality in clinical work (Adams et al., 2015; Johns, 2017; Sauerheber et al., 2014). However, two studies outlined counselor educators' discomfort with faith and spirituality (Adams et al., 2015; Johns, 2017). Johns (2017) discussed several emerging themes, including marginalization, risk, and taboos associated with faith and spirituality. According to participants, there was a significant concern that exposing students' personal religious beliefs and values may cause discrimination and personal attacks. Two participants noted incidents at their institutions where they were ostracized and stereotyped when co-workers learned about their cultural backgrounds. One participant noted that differing worldviews opened the door to opinions and discussions that became heated and led to arguments between students (Johns, 2017).

Johns (2017) stated that avoiding discussions about faith and spirituality to protect students is viewed negatively and does not offer students an opportunity to develop skills and competence across all cultural dimensions. The author concluded that counselor educators are unprepared to navigate substantive conversations about faith and spirituality as they lack the training and confidence. Thus, more research is needed to understand how counselor educators navigate faith and spirituality with their students (Johns, 2017). Adams et al. (2015) pointed out that some counselor educators are uncomfortable because of the legal implications of using faith and spirituality in an academic setting. Adams et al. (2015) indicated that some counselor educators feared discussing faith and spirituality topics in the classroom. Counselor educators reported that the inclusion of faith and spirituality in the classroom crossed professional boundaries and broke the law. Adams et al. (2015) recommended more research to discover strategies counselor educators use to enhance their competence in addressing faith and spirituality in the classroom. A second recommendation is to explore professional development programs to increase counselor educators' competence in attending to faith and spirituality issues

and how their training influences their teaching practices, students' competence, and client outcomes.

The research literature indicated that preparing counseling students to be culturally competent requires counselor educators to engage students in learning about faith and spirituality topics regardless of discomfort and barriers that may be present (Adams et al., 2015; Bohecker et al., 2017). Binkley and Minor (2020) suggested implementing experiential approaches to promote culturally competent counselor development. Implementing experiential learning activities designed around faith and spirituality could reduce bias and prejudice in the classroom and promote competence development. Binkley and Minor (2020) recommended using a constructivist lens to implement experiential learning activities.

Constructivism in Counselor Education

For many years, constructivism has gained popularity as an effective teaching and learning approach (Binkley & Minor, 2020; Oxhandler & Parrish, 2018). Due to the emphasis on student agency, self-guided exploration, reflection, and interactive nature, Martinez et al. (2017) suggested a constructivist approach to promoting cultural competence in preparing school counselors to work in urban schools. They recognized the benefits of valuing diversity, infusing cultural and social meaning-making instead of traditional training programs that failed to prepare counselors to meet students' needs in urban settings (Binkley & Minor, 2020). Similarly, Moate and Cox (2015) supported the constructivist approach in didactic courses, recommending that counselor educators create student-centered content that encourages students to take ownership of their learning, inquire and think critically about what they are learning, and make meaning from their experiences.

Student-centered. Constructivist learning environments are student-centered (Alt, 2015; Olusegun, 2015). Passive learning occurs in teacher-centered environments where the focus is on disseminating information to students (Alt, 2015). In contrast, active learning occurs in student-centered settings with considerable dialogue between students where the teacher facilitates knowledge construction (Alt, 2015; Olusegun, 2015). Merlin (2016) reported using a flipped learning approach where out-of-class students watch prerecorded video lectures gaining background on the subject matter. Then, students spend the entire class period focusing on counseling skills development, engaging in peer-to-peer dialogue, role plays, simulations, and reflection. The flipped learning strategy gives students hands-on training integrating faith and spirituality into clinical work by increasing the time students can practice clinical skills and engage in application-based activities in the classroom (Merlin, 2016).

Flexibility to emphasize student learning. Constructivist settings emphasize less structure and focus on students' questions and interests (Alt, 2015, 2017; Olusegun, 2015). Nittoli and Guiffrida (2018) led a study that used popular films to teach multicultural counseling skills. Their study recommended that counselor educators introduce popular films alongside reflective learning activities to promote multicultural competency. The study showed that participants had increased awareness and dialogue between peers on race, ethnicity, and privilege. Eppler (2018) implemented this strategy, teaching students how to help clients use short films to externalize problems from a spiritual lens and make spiritual connections leading to overall wellness and meaning for life.

Interactive learning. Learning in a constructivist setting is interactive and builds upon what students already know versus traditional learning, which focuses on repetition and memorization (Alt, 2015; Olusegun, 2015). Human sexuality is a course and subject discussed in

counselor education programs; although it may generate feelings of anxiety and discomfort for some, it is a topic familiar to many (Lenes et al., 2015). Lenes et al. (2015) studied counseling students who participated in experiential activities to develop human sexuality competence. Students were required to watch music videos that depicted various concepts, orientations, and cultures related to human sexuality. After watching the videos, students wrote personal reflections about their feelings and the relevance of each video. The study suggested that students increased their knowledge about the topic and felt empowered and emotionally connected with a stronger feeling of cohesion with their classmates (Lenes et al., 2015).

Counselor educators can help counseling students increase their knowledge about faith and spirituality and empower them to connect with classmates using experiential activities (Lenes et al., 2015). Like human sexuality, faith and spirituality are sensitive topics that elicit diverse emotions like anxiety and discomfort (Adams et al., 2015). Designing activities like observing students conducting one-to-one mock client sessions and role-plays (Coyle, 2017), functioning as a reflecting team (Shurts et al., 2016), and observing professional counselors (Rauer & Volling, 2015) integrate faith and spirituality in a clinical setting are practical methods to helping students learn using a constructivist approach (Binkley & Minor, 2020).

Student collaboration. Constructivist learning environments promote group work and collaboration with minimal focus on students working independently (Alt, 2015; Olusegun, 2015). Moate and Cox's (2015) case study described a collaborative learning activity that used a reflecting team approach with a small group of counseling students. Students were presented with a panel of couples moderated by the instructor. Students listened to the session, pondered the cases, and presented their thoughts and questions. Through the dialogue, students interacted with each other sharing their perspectives about each couple. Many students wrote reflection

papers that indicated that the experience was one of the most memorable and impactful in their academic programs and taught them how to think critically and conceptualize cases (Moate & Cox, 2015).

The strategy used by Moate and Cox (2015) can be applied to students learning to integrate faith and spirituality into clinical work. One approach introduces a live vignette that conceptualizes the client's faith and spirituality into the session (Fishel et al., 2020). Students would assemble as the reflecting team, considering the scenario and envision working with the client. Students would be allowed to think deeply about people with diverse faith and spirituality practices and learn to analyze and evaluate situations from a constructivist lens (Moate & Cox, 2015). Also, counselor educators could monitor and assess students' skills and competence as they practice conceptualizing and integrating faith and spirituality into the counseling session (Meekums et al., 2016).

Synthesis of the Research Findings

Most counseling professionals agree that faith and spirituality are critical factors to address in counseling because of the significant benefits to mental health and overall wellness (Harris et al., 2016; Henriksen et al., 2015; Portnoff et al., 2017). Increasingly, individuals seek counselors who can infuse faith and spirituality into their counseling sessions (Errington, 2017; Harris et al., 2016; Oxhandler et al., 2018). To attend to clients' faith and spirituality needs, counselors must develop cultural competency beyond race (Dameron et al., 2020), gender (Couture, 2017), sexual orientation (Couture, 2017), and socioeconomic status (Clark et al., 2017) to include faith and spirituality (McAuliffe & McAuliffe, 2019; Sue et al., 2019). The research literature justifies the benefit (Harris et al., 2016; Henriksen et al., 2015) and significance (Portnoff et al., 2017) of faith and spirituality in clinical work but falls short of

understanding how counselor educators teach master's level counseling students to integrate faith and spirituality into clinical work (Bayne & Tylsova, 2019; Captari et al., 2018).

The predominance of literature related to integrating faith and spirituality into clinical work is focused on prelicensed counselors' perspectives (Curry et al., 2015; Errington, 2017; Giordano et al., 2016; Henriksen et al., 2015; Magaldi & Trub, 2018; Oxhandler & Parrish, 2018; Scott et al., 2016). Curry et al. (2015) and Henriksen et al. (2015) discussed unpreparedness and lack of training from counselors' perspectives. Errington (2017), Oxhandler & Parrish (2018), and Scott et al. (2016) discussed counselors' discomfort with faith and spirituality in academic and clinical settings. Giordano et al. (2016) explained why counselors fail to incorporate faith and spirituality into counseling due to insufficient training and awareness of clients' faith and spirituality identifiers. Magaldi and Trub (2018) discussed the importance of counselors being aware of their faith and spiritual identities, which inform their professional identity and multicultural competence. Only two articles from the perspectives of counselor educators discussed the importance of faith and spirituality training in counselor education (Johns, 2017; Sauerheber et al., 2014).

In a review of over 100 journal articles, only fourteen dealt with faith and spirituality in an academic setting (Adams et al., 2015; Barden et al., 2017; Bayne & Tylsova, 2019; Binkley & Minor, 2020; Captari, 2018; Coyle, 2017; Garner, 2017; Johns, 2017; Leighton, 2016; Loosemore & Fidler, 2019; Scott, 2019; Stewart-Sickling et al., 2017; Trahan & Keim, 2019). Consistently, the research literature showed various issues for both counselors and counselor educators incorporating faith and spirituality in clinical and academic settings, including lack of preparedness (Curry et al., 2015; Henriksen et al., 2015), discomfort (Errington, 2017; Scott et al., 2016), and usefulness (Oxhandler & Parrish, 2018). A few articles described counselor

educators' current teaching methods and emphasized the importance of working from a constructivist lens (Barden et al., 2017; Bayne & Tylsova, 2019; Binkley & Minor, 2020; Captari et al., 2018; Coyle, 2017; Loosemore & Fidler, 2019; Scott, 2019; Stewart-Sickling et al., 2017; Trahan & Keim, 2019) bolstering the appropriateness of constructivism as the theoretical orientation for this research study.

Several articles discussed qualitative research studies that identified barriers that hinder counselor educators from incorporating faith and spirituality in academic settings (Adams et al., 2015; Garner, 2017; Harris et al., 2017; Johns, 2017). The barriers included a lack of information and relevance of faith and spirituality in counseling (Johns, 2017; Sauerheber et al., 2014), conflicting values and beliefs (Adams et al., 2015; Johns, 2017), and discomfort with the topic (Adams et al., 2015; Garner, 2017; Harris et al., 2017). Some authors offered recommendations to address these barriers suggesting constructivist methods and approaches which create an environment open to diverse perspectives, exploration, and learning (Binkley & Minor, 2020; Eppler, 2018; Hutchison et al., 2016; Leighton, 2016; Trahan & Keim, 2019).

CACREP (Bohecker et al., 2017; Henriksen et al., 2015) and the ACA (Bohecker et al., 2017; Kaplan et al., 2017) have specific expectations of counselor education programs regarding faith and spirituality (ACA, 2015; CACREP, 2016). However, the standards do not provide a concrete understanding of what counselors or counselor educators are accountable for regarding faith and spirituality (Bohecker et al., 2017). Likewise, ACES (Field et al., 2019), the AAMFT (Branson et al., 2015), and ASCA (Lambie & Stickl Haugen, 2021) outline specific expectations for counselors that must be upheld when counseling clients. ASERVIC provided spiritual competencies as a guide to support the integration of faith and spirituality in clinical settings (Hull et al., 2016). However, counselor educators consistently fail to teach students how to

practically apply the competencies in clinical settings (Sauerheber et al., 2014). The existing literature is also deficient in research focused on counselor educators and their teaching master's level counseling students to integrate faith and spirituality in academic settings (Captari et al., 2018; Eppler, 2018; Hunt, 2018; Jafari, 2016; Leighton, 2016; Loosemore & Fidler, 2019; Stewart-Sicking et al., 2017; Trahan & Keim, 2019; Williams-Reade et al., 2019).

This study addresses the gap in the research literature (Johns, 2017) by exploring counselor educators' perspectives teaching master's level students to integrate faith and spirituality into clinical work. Previous literature showed that counselor education and supervision programs, CACREP, and the ACA expect students to integrate faith and spirituality in clinical work as culturally competent counseling, yet many counselors fail to meet this expectation. Findings from this study respond to recommendations from previous research by exploring how counselor educators develop cultural competency related to faith and spirituality topics in the classroom (Adams et al., 2015; Johns, 2017; Leighton, 2016) and how counselor educators' beliefs influence their teaching of students (Johns, 2017). Likewise, this study sought to address Harris et al.'s (2017) suggestion that more research is needed to understand the connection between students' awareness about their faith and spiritual formation and professional identity development.

Existing literature also indicated that counselor educators do not have sufficient training and pedagogical approaches that integrate faith and spirituality into the curriculum and coursework (Minton et al., 2018). The findings from this research may improve counselors' competency by preparing them to address, conceptualize and integrate faith and spirituality in clinical settings, which ensures culturally sensitive counseling that promotes positive outcomes and overall well-being (Bayne & Tylsova, 2019; Scott et al., 2016; Swinton, 2016). Insights and

themes that emerge from the research study could improve counselor education and supervision programs by identifying deficiencies and uncovering barriers in educational settings that may be obstacles for counselor educators effectively teaching students to integrate faith and spirituality into clinical work (Adams et al., 2015; Johns, 2017; Leighton, 2016).

Likewise, university administrators and counselor educators can incorporate findings from this research to improve how they approach their multicultural counseling curriculum and improve counselors' competency (Mintert et al., 2020). Supervisors can use this study's findings to engage students in discussions and role-play during individual and group supervision sessions to further their competency and professional identity development (Hull et al., 2016). The general public could benefit by receiving culturally sensitive counseling that promotes positive mental health and wellness outcomes (Bayne & Tylsova, 2019; Scott et al., 2016; Swinton, 2016).

Critique of Previous Research Methods

The existing research literature on counselor educators teaching students to integrate faith and spirituality into clinical work suggested that more research was needed to learn about counselor educators' perspectives on the topic (Cureton et al., 2019; Johns, 2017; Leighton, 2016; Williams-Reade et al., 2019). Counselor educators are on the front lines of teaching master's level counseling students to integrate faith and spirituality in clinical work (Johns, 2017). Most of the theoretical literature provided strong support for the inclusion of faith and spirituality in clinical settings (Al'Uqdah et al., 2019; Bayne & Tylsova, 2019; Cashwell et al., 2016; Coyle, 2017; Errington, 2017; Frunzã et al., 2019; Gladding & Crockett, 2019; Harris et al., 2016; Jafari, 2016; Matthews et al., 2018; Oxhandler et al., 2018; Oxhandler & Parrish, 2018; Paul Victor & Treschuk, 2020; Plante, 2016; Ratts et al., 2016; Tudor, 2019).

Existing literature also included several qualitative studies (Kim et al., 2019; Portnoff et al., 2017; Scott et al., 2016; Stewart-Sicking et al., 2017; Williams-Reade et al., 2019), and quantitative studies (Barden & Greene, 2015; Captari et al., 2018; Clark et al., 2017; Galek et al., 2015; Giordano et al., 2016; Harris et al., 2018; Lu & Woo, 2017; Sutton et al., 2016) that explored the integration of faith and spirituality in clinical work from the perspectives of counselors and counselors-in-training. Researchers concluded that discomfort with faith and spirituality (Adams et al., 2015; Johns, 2017), a lack of relevance of faith and spirituality in clinical settings (Johns, 2017), and negative beliefs about counseling outcomes (Henriksen et al., 2015; Portnoff et al., 2017) were reasons why counselor education programs avoided topics of faith and spirituality. Qualitative research focused on counselor educators' experiences teaching faith and spirituality may help identify how to overcome the avoidance of the topic in academic settings.

The few articles that addressed teaching students to integrate faith and spirituality in academic settings from counselor educators' perspectives were primarily theoretical studies that focused on barriers to integrating faith and spirituality (Adams et al., 2015; Barto, 2018). Several studies discussed preparing students to address faith and spirituality to prevent harm to clients due to the counselor's incompetence (Blalock & Holden, 2018; Bohecker et al., 2017; Hull et al., 2016; McWhorter, 2019). Findings from these studies indicated that counselors that are not trained to integrate faith and spirituality in clinical work have the potential for disrupting therapeutic relationships (Bohecker et al., 2017) by imposing personal values and beliefs (McWhorter, 2019), inappropriately conceptualizing presenting problems (Hull et al., 2016), and hindering clients from reaching their counseling goals (Blalock & Holden, 2018).

Chan et al. (2018) found that power dynamics within the teacher-student relationships when teaching multiculturalism and social justice topics were barriers for teaching students to address faith and spirituality. Counselor educators must create an atmosphere of openness and safety so that students feel comfortable discussing sensitive topics like faith and spirituality (Chan et al., 2018). Counselor educators should be aware of power differentials within the teacher-student relationship, especially as they model counseling skills to their students (Chan et al., 2018). Awareness of power differentials helps students learn how to effectively manage their authority and influence in the therapeutic relationship (Chan et al., 2018). A lack of attention to power dynamics in the counselor-client relationship could result in unethical behaviors that may lead to legal problems and the potential loss of a counseling license (Chan et al., 2018). Chan et al. (2018) suggested that more research using intersectionality would benefit counselor education to drive more critical thinking about multiple identities impacting professional identity development and multicultural competence.

Counseling students developing a strong professional identity was a critical component for integrating faith and spirituality in clinical work (Burns, 2020; Greggo, 2016, Woo et al., 2016). The literature indicated that counselors who have resolved conflicts between their personal and professional selves are more apt to initiate discussions with clients about faith and spirituality and effectively bracket their personal values and beliefs (Greggo, 2016). Woo et al. (2016) suggested mentoring to help counselors develop strong professional identities, advocacy skills, and engagement in professional organizations. Participation in professional organizations such as ASERVIC could support professional identity development and increase awareness to work effectively with clients of diverse faith and spirituality backgrounds (Woo et al., 2016).

Henriksen et al. (2015), Hunt (2018), Johns (2017), Leighton (2016), Nittoli and Guiffrida (2018), and Trahan and Keim (2019) were qualitative studies that emphasized a lack of preparation and training of counselor educators to address faith and spirituality in the classroom. Existing research literature indicated a need for counseling students to develop cultural competence around faith and spirituality (Barden & Greene, 2015; Brown-Rice & Furr, 2016). A lack of understanding and skill to integrate faith and spirituality in counseling is a sign of incompetence (Maximo, 2019). It is unethical for counselors to work with clients without the proper skills since such behavior has the potential to cause harm to clients (Maximo, 2019). Causing harm to clients could result in legal problems and the loss of a counseling license (Levitt et al., 2015). Brown-Rice and Furr (2016) discussed gatekeeping in counselor education and the need for imposing appropriate protocols to protect the public from harm. Although these qualitative studies provided some direction for counselor educators to teach students to develop cultural competence around faith and spirituality integration in clinical work, there were only four articles that discussed a clear framework to include faith and spirituality in clinical work (Butts & Gutierrez, 2018; Loosemore & Fidler, 2019; Pearce et al., 2019; Stewart-Sicking et al., 2017). No known qualitative studies have focused on counselor educators' experiences at CACREP accredited institutions teaching master's level counseling students to integrate faith and spirituality into clinical work.

This research study will add to the existing body of literature on teaching faith and spirituality to counseling students by giving counselor educators a platform to describe their experiences (Aspers & Corte, 2019). Counselor educators provided information about strategies, approaches, and techniques to develop their students' competence in faith and spirituality. The results of this study will contribute to improving counselor educators' cultural competence and

professional identity development by shedding light on counselor educators' experiences at CACREP accredited institutions teaching master's level counseling students to integrate faith and spirituality into clinical work. Therefore, a qualitative study for exploring these constructs among counselor educators is appropriate.

Summary

Many studies have addressed the significance of faith and spirituality in counseling as a critical cultural identifier for many people; a need exists to study how counselors are taught to integrate faith and spirituality in clinical work (Johns, 2017). Fusch and Ness (2015) indicated that the criteria for a robust dissertation research study should answer the research question, solve the problem statement, and convince the reader that the chosen methodology was suited to the study. Increasingly, qualitative research is used due to its ability to gather rich, in-depth information about peoples' experiences (Eyisi, 2016; Mohajan, 2018). This study added to the body of literature on teaching master's level students to develop competence to integrate faith and spirituality into clinical work and strengthen their professional identity by allowing counselor educators an opportunity to describe their teaching experiences. Most of the existing literature on faith and spirituality in clinical work addressed counselors and counselors in training, suggesting that a deeper exploration of the topic from counselor educators' perspectives is necessary (Johns, 2017).

The generic qualitative inquiry design was the best fit to answer the research question: "What are counselor educators' experiences teaching master's level counseling students to integrate faith and spirituality into clinical work?" Using this approach provided an opportunity for counselor educators to freely describe their teaching experiences (Fusch & Ness, 2015). Teaching students to integrate faith and spirituality is necessary for all counselor educators who

want to ensure that their students are ready for culturally sensitive clinical work (Bayne & Tylsova, 2019). Faith and spirituality are cultural identifiers for most people who seek counseling. The research contributed to understanding how counselor educators approach faith and spirituality with their students and helping them develop cultural competence and a strong professional identity (Lloyd-Hazlett & Foster, 2017). Chapter 3 presents information to support the purpose of the study, the research design, a description of the research methods used in collecting and analyzing the data, and describes the target population and sample.

CHAPTER 3. METHODOLOGY

The integration of faith and spirituality into counseling sessions is consistently requested by people seeking counseling services (Errington, 2017; Giordano & Cashwell, 2014; Harris et al., 2016), yet counselors avoid including faith and spirituality in counseling sessions (Adams et al., 2015; Johns, 2017; Leighton, 2016). Previous research literature that showed a significant number of quantitative and qualitative studies related to the integration of faith and spirituality in clinical work from the perspectives of counselors and prelicensed counselors had been conducted (Coyle, 2017; Greggo, 2016; Leighton, 2016; Loosemore & Fidler, 2019; Scott, 2018, 2019; Trahan & Keim, 2019). In contrast, little research from the perspectives of counselor educators had been performed (Johns, 2017). The generic qualitative inquiry methodology (Percy et al., 2015) was chosen to begin filling the gap in the literature by exploring the attitudes, opinions, perspectives, and experiences of counselor educators at CACREP accredited institutions teaching master's level students to integrate faith and spirituality into clinical work. Chapter 3 is an in-depth review of the generic qualitative inquiry methodology (Percy et al., 2015). The review details the purpose of the study, a discussion related to the development of the research question, "What are counselor educators' experiences at CACREP accredited institutions teaching master's level counseling students to integrate faith and spirituality into clinical work?" A description of the target population, procedures used to conduct the study, including data collection, application of inductive thematic analysis (Percy et al., 2015), and the research instruments are discussed. Chapter 3 closes with a discussion about the protection of participants, ethical considerations, and steps used to ensure credibility, transferability, and dependability of the study.

Purpose of the Study

Faith and spirituality are known cultural identifiers that support positive health and mental well-being (Harris et al., 2016; Henriksen et al., 2015; Portnoff et al., 2017). Increasingly, individuals, couples, and families seek counselors that can incorporate their faith and spirituality in their counseling sessions (Errington, 2017; Giordano & Cashwell, 2014; Harris et al., 2016). Although desired by clients, counselors report feeling unprepared and incompetent to address clients' faith and spirituality in clinical settings (Curry et al., 2015; Henriksen et al., 2015; Swinton, 2016; Williams-Reade et al., 2019). The purpose of this research study was threefold: (a) to answer the research question, "What are counselor educators' experiences from CACREP accredited institutions teaching master's level counseling students to integrate faith and spirituality into clinical work?" (b) to begin filling the gap in the research literature, and (c) provide new knowledge to counselor education and supervision to address the challenges related to counselors integrating faith and spirituality into clinical work.

The research literature indicated that counselors are unprepared to address faith and spirituality in clinical settings due to a lack of attention given to the topic in counselor education programs (Adams et al., 2015; Harris et al., 2016; Holmberg et al., 2017; Williams-Reade et al., 2019). Counselor educators are responsible for teaching students to develop cultural competence, including cultural identifiers like faith and spirituality (Adams et al., 2015; Barto, 2018; Coyle, 2017). However, counselor educators avoid the topic for a variety of reasons (Adams et al., 2015; Johns, 2017; Leighton, 2016), including lack of information, personal interest, relevance (Adams et al., 2015), a lack of preparedness, and incompetency (Johns, 2017). Most of the existing research literature focuses on prelicensed counselors' perspectives and their lack of experience and discomfort with faith and spirituality in clinical settings (Henriksen et al., 2015;

Reiner & Dobmeier, 2014; Scott et al., 2016). Few research studies explored the perspectives of counselor educators and their experiences teaching students faith and spirituality in academic settings (Giordano et al., 2016; Johns, 2017; Sauerheber et al., 2014; Trahan & Keim, 2019).

Qualitative research explores people's opinions, attitudes, experiences, and beliefs about a phenomenon that cannot be measured statistically (Percy et al., 2015). The qualitative researcher relies on non-numerical data collected during observations, interviews, focus groups, documents, images, audio, and video recordings (Aspers & Corte, 2019). This study intended to collect information and explore the experiences of counselor educators' at CACREP accredited institutions teaching master's level counseling students to integrate faith and spirituality into clinical work. To date, there is little research available that focuses on faith and spirituality in CACREP counselor education programs from the perspectives of counselor educators (Johns, 2017). Thus, this research study begins to fill the gap in the research literature to address teaching faith and spirituality in counselor education programs (Johns, 2017; Williams-Reade et al., 2019).

Research Question

“What are counselor educators' experiences at CACREP accredited institutions teaching master's level counseling students to integrate faith and spirituality into clinical work?” The identified problem is that existing literature lacks research from counselor educators' perspectives on teaching students to integrate faith and spirituality in client counseling sessions (Johns, 2017). A small amount of research has been conducted from the perspectives of counselor educators about how their beliefs and experiences influence teaching faith and spirituality to counseling students (Johns, 2017). The gap in the literature shows that more

research is needed to understand the in-depth experiences and perspectives of counselor educators teaching master's level students to integrate faith and spirituality into clinical work.

Research Design

The research methodology for this research study was qualitative. The purpose of qualitative research is to explore people's opinions, attitudes, experiences, and beliefs about a phenomenon that cannot be measured statistically (Percy et al., 2015). Qualitative research explores how people experience issues in the world (Aspers & Corte, 2019). Unlike quantitative research that uses statistical analysis to study phenomena, qualitative research relies on observations, interviews, focus groups, documents, images, audio, and video recordings (Aspers & Corte, 2019). Four traditional designs align with the qualitative methodology: ethnography, case study, grounded theory, and phenomenology (Percy et al., 2015).

Each traditional qualitative design emphasizes understanding a person's intimate, subjective experiences (Creswell & Poth, 2018; Percy et al., 2015). Ethnography explores people in their natural settings to understand a group's shared cultural elements (Aspers & Corte, 2019; Percy et al., 2015). A case study is an in-depth exploration of a single case, using multiple data sources to learn about a bounded system's behavior patterns (Creswell & Poth, 2018; Percy et al., 2015). Grounded theory is a qualitative design used to develop a theory based on the data gathered and analyzed from the study (Aspers & Corte, 2019; Percy et al., 2015).

Phenomenology studies people's lived experiences and seeks to understand the meaning or essence of the experience (Aspers & Corte, 2019; Percy et al., 2015). Sometimes a research study does not align or adapt to traditional qualitative designs. In these situations, a generic qualitative design is more suitable and appropriate (Percy et al., 2015).

A generic qualitative design focuses on people's content reports, attitudes, beliefs, and experiences (Percy et al., 2015). As a result, a generic qualitative design is not bound by an established set of philosophical assumptions like traditional qualitative methodologies (Percy et al., 2015). Nevertheless, it is common in generic qualitative research studies to borrow elements of traditional qualitative designs to understand the research topic fully (Percy et al., 2015). Other benefits of generic qualitative designs are less rigidity and smaller sample sizes than traditional qualitative and quantitative designs. Percy et al. (2015) recommended a generic qualitative inquiry when doing mixed-method studies, when traditional designs are inappropriate, or when pre-knowledge about a topic would guide a new study by adding to the previous knowledge (Percy et al., 2015).

A generic qualitative design is appropriate to understand counselor educators' experiences at CACREP accredited institutions, objective stances, attitudes, opinions, and perspectives, teaching master's level counseling students to integrate faith and spirituality into clinical work. Percy et al. (2015) identified generic qualitative studies under the epistemological umbrella of constructivism, suggesting that the participants' diverse perspectives are unique, individual, and constructed based on the experiences and perceptions of the individual's reality. Constructivism fosters a learning environment for people to appreciate differences while creating meaning to knowledge based on their engagement and interactions (Binkley & Minor, 2020). From a constructivist standpoint, individuals must grapple with various concepts, vague ideas, and interactions to eventually arrive at an understanding unique and applicable to the topic being discussed (Olusegun, 2015). Counselor educators using a constructivist lens can engage students with faith and spirituality topics without discomfort supporting their cultural competency and skills development (Leighton, 2016).

Generic qualitative designs collect non-numerical data, where the researcher is the primary data collection instrument (Dikko, 2016). Conceptually, data collection focuses on the participants' real-world experiences versus internal or psychological understanding (Percy et al., 2015). This research design seeks a broad range of perspectives and opinions using one or several methods (Percy et al., 2015). One of the most common methods is face-to-face or video conference semi-structured or fully structured interviews (Percy et al., 2015). Typically, the researcher creates the interview based on their pre-knowledge of the study's topic, leaving room for the researcher to ask additional questions and participants to offer additional comments relevant to the discussion (Percy et al., 2015). Additional methods include written and oral surveys, observations, and questionnaires used in mixed-methods studies (Percy et al., 2015).

This research study utilized a face-to-face semi-structured interview format. According to Hawkins (2018) and Kallio et al. (2016), semi-structured interviews are ideal and typical for qualitative research studies. Semi-structured interviews use open-ended questions to elicit an opinion, clarify meaning to a response, interpret motivations, and discover what influences an opinion (Singer & Couper, 2017). Castillo-Montoya (2016) reported that semi-structured interviews have the rigidity of a structured interview but the flexibility to adjust questions throughout the interview to dig into participant responses and better understand their perspectives on a topic. Castillo-Montoya (2016) recommended creating a robust interview guide to mitigate bias and ensure high-quality data collection and trustworthiness within the study.

Target Population and Sample

The target population for this study was counselor educators at CACREP accredited institutions. CACREP counselor educators were selected for two reasons. First counselor educators are among the most critical participants in developing competent counselors (Chan et

al., 2018). Second, in most states within the United States of America, CACREP is the designated accrediting body, with its curriculum and training standards required as necessary elements of counselor education programs (Lawson, 2016). In the United States, there are approximately 650 CACREP accredited counselor education programs that include 253 private, 394 public institutions, and 72 online programs (CACREP, 2020). Participants for this study were faculty counselor educators at CACREP accredited institutions greater than 18 years of age, holding active counseling licenses, teaching master's level students in clinical mental health counseling (CMHC), school counseling, or marriage and family counseling therapy (MFCT) programs. The participants were recruited for the study using purposive (Ames et al., 2019; Setia, 2016) and snowball sampling (Dusek et al., 2015), which are non-probability sampling techniques (Ames et al., 2019; Palinkas et al., 2015). All participants agreed to join the study by signing an informed consent document.

Population

Counselor educators who participated in this study were responsible for teaching master's level counseling students in CMHC, school counseling, or MFCT programs. The American Association for Marriage and Family Therapy (AAMFT, 2020) reported more than 50,000 marriage and family therapists nationwide, and between the years 1960 and 2015, membership in AAMFT has increased from 237 to 25,500 members (AAMFT, 2020). Marriage and family therapists (MFTs) are recognized as "core" mental health professions, joining psychiatry, psychology, social work, and psychiatric nursing. The AAMFT reported a 50-fold increase in the number of MFTs practicing nationwide and treating over 11.8 million people at any given time (AAMFT, 2020).

The American School Counselors Association (ASCA) reported a membership of approximately 36,000 across the United States (ASCA, 2020). School counselors are essential in supporting students navigating their educational journeys from elementary through high school (Gagnon & Mattingly, 2016). Although they are critical, access to school counselors is a significant challenge in many school districts (Gagnon & Mattingly, 2016). According to the Department of Education statistics, there is a 430-to-1 ratio of counselors to students (Can & Robey, 2021). In Forbes magazine, Bernard (2020) reported that the number of people entering the school counseling field has steadily increased for more than 3 decades.

The Association for Counselor Education and Supervision (ACES) reported a membership of approximately 3,605 people (K. Duncan, personal communication, July 29, 2020). ACES membership includes counselors, supervisors, graduate students, and faculty who focus on improving counselors' education and training across disciplines (ACES, 2021). According to ACES, the organization's primary purpose is to advance counselor education and supervision to improve the delivery of counseling in all settings (ACES, 2021). CACREP's online directory listed approximately 82 counselor education programs nationwide (CACREP, 2020). Greater than 2,500 full-time faculty counselor educators serve in these programs across the country (CACREP, 2018a; 2018b).

Sample

The sample for this study included 15 counselor educators representing all regions of the United States of America. The sample emerged from a population of over 4,000 clinical counselor educators from the Counselor Education and Supervision Network Listserv (CESNET-L) online community (CESNET, 2020), members of the ACA's ASERVIC community, and members from three private Facebook Groups (Clinicians of Color in Private Practice,

Phinshed/FinisheEdD-Drs/Future Drs, and the North Central Association for Counselor Education and Supervision) to identify the sample. The sample was identified using two sampling techniques purposive expert (Ames et al., 2019; Palinkas et al., 2015) and snowball sampling (Setia, 2016) to identify participants who met the criteria to participate in the study and answer the research question (Palinkas et al., 2015).

In qualitative research, the recommendation is to use a minimum sample size to answer the research question and reach data saturation (Morse, 2015b). Data saturation describes the point in the research process when no new codes or themes are discovered in the data analysis, called redundancy (Clarke & Braun, 2013; Fusch & Ness, 2015). The Capella University Institutional Review Board (IRB) approved a target sample size of 10 participants for the study. Malterud et al. (2016) indicated that a sample size of 10 participants was sufficient to reach data saturation. Although 10 participants were sufficient to reach data saturation, 15 participants were interviewed and included in the data analysis to ensure data saturation and answer the research question.

A nonprobability sampling strategy was employed in this research study using a purposive expert (Ames et al., 2019; Setia, 2016) and a snowball sampling design (Dusek et al., 2015). Purposive expert sampling targets a specific population for a research study (Ames et al., 2019; Palinkas et al., 2015). This research study targeted a purposive sample using counselor educators from the CESNET Listserv, ASERVIC, and Facebook as the initial population. Members of these groups chose to decline or participate in the study, and they had the option of forwarding the invitation to others, which is a technique called snowball sampling. Snowball sampling was the secondary sampling strategy for this research study. Snowball sampling is used to identify hidden or difficult to find populations (Dusek et al., 2015; Robinson, 2014). Purposive

expert sampling was used to initiate the process of finding counselor educators at CACREP accredited institutions who taught master's level counseling students to integrate faith and spirituality into clinical work (Dusek et al., 2015). Subsequently, counselor educators from the target population forwarded the recruiting materials to others that were possible matches to the criteria for the research study; thus, the term snowball (Moser & Korstjens, 2018).

The inclusion criteria for the study were faculty counselor educators greater than 18 years of age employed in a CACREP accredited program from one or more of the following counselor education programs: CMHC, school counseling, or MFCT, and they held an active counseling license. Excluded from the study were counselor educators who did not have a doctorate in counselor education and any counselor educator that provided instruction to the researcher during the researcher's masters or doctoral program at Capella University. Participants were required to respond "yes" to each screening question to be eligible to participate in the study (Moser & Korstjens, 2018). All questions about the study, the study instructions, and the process were addressed before starting the interview. Each participant in the study received and acknowledged they understood the consent form by signing it before starting the interview. Interviews were conducted over Zoom using predetermined semi-structured open-ended interview questions (Moser & Korstjens, 2018).

Procedures

This study followed a qualitative methodology, the generic qualitative inquiry design (Percy et al., 2015). The generic qualitative inquiry approach was used to develop interview questions for all counselor educators to share a full in-depth description of their teaching experiences (Percy et al., 2015). Data collection and analysis commenced upon receipt of IRB approval to initiate the study. All recruitment was conducted using electronic platforms,

including (CESNET-L), ACA's ASERVIC community, and Facebook groups. Potential participants contacted the researcher by electronic mail. The researcher responded to all participants by electronic mail to arrange a time to complete the screening and schedule an interview. The researcher scheduled a phone screening for each participant. During the phone conversation, each participant answered five screening questions, and those who passed the screening confirmed their willingness to participate in the study and scheduled an interview. The researcher sent an informed consent document, using DocuSign, to each participant following the confirmation of participation. The participant read, signed, and submitted the informed consent to the researcher through DocuSign. Before commencing the interview with each participant, the researcher reviewed the informed consent and answered any questions. Data was collected using Zoom interviews recorded for audio-only and lasted approximately 60 to 90 minutes each. Inductive thematic analysis (Percy et al., 2015) was used for data analysis incorporating MAXQDA to support organization and the analysis of interview transcripts. The following section details participant selection, protection of participants, data collection, and data analysis.

Participant Selection

The participants were counselor educators from CACREP accredited institutions over 18 years of age from CMHC, school counseling, or MFCT programs. The participants were recruited using an electronic invitation posted to CESNET-L, a public website, the ACA's ASERVIC community members, and members from three private Facebook Groups. Administrators for each of the groups granted the researcher permission to advertise and recruit for the study. In addition, an informational flyer describing the study was posted for all potential participants to learn about the study. All participants were recruited using purposive and snowball sampling, a non-probability sampling technique (Moser & Korstjens, 2018).

When a counselor educator was interested in participating in the study, they sent an electronic mail message to the researcher using an email found on the informational flyer or invitation letter. All potential participants answered screening questions to determine if they met the criteria for the study (Moser & Korstjens, 2018). Screening questions were created to identify a pool of counselor educators at CACREP accredited institutions that taught master's level counseling students in the CMHC, school counseling, or MFCT programs. The questions were as follows:

1. Are you at least 18 years of age?
2. Are you employed as a faculty at a CACREP accredited institution?
3. Are you employed as a counselor educator in one of the following programs:
Marriage and Family Counseling Therapy, Clinical Mental Health Counseling, or
School Counseling?
4. Is your program Online and/or traditional face-to-face?
5. Do you have an active license?

In addition to inclusion criteria, there were two specific exclusion criteria. First, counselor educators were excluded from the study if they did not have a doctorate in counselor education. Second, potential participants were excluded if they had provided didactic or fieldwork instruction to the researcher during the researcher's tenure at Capella University as a master's or doctoral student. The potential participant had to answer yes to all screening questions to be eligible for the study. Once the counselor educator passed the screening process and agreed to participate in the study, the researcher scheduled an interview with the participant (Majid et al., 2017). All interviews were scheduled a minimum of 24 hours after the screening process. The researcher also sent an informed consent document to the participant electronically

using DocuSign (Chen et al., 2020). If the counselor educator did not fit the inclusion criteria for the study, they were immediately informed that they were not eligible for the study, and the call was ended. No demographic data was collected for the study.

Protection of Participants

The study did not commence until the researcher received the Capella University IRB approval to conduct the study (Liberale & Kovach, 2017). Participants who responded to the study's recruitment requests and met eligibility were informed over the phone that they were eligible for inclusion in the study. All participants received informed consent forms electronically after the initial screening call and returned the form to the researcher to be included in the study (Chen et al., 2020). Each participant received information about the study, their rights as participants, an overview of the risks of participation, and precautions to preserve confidentiality. In addition, participants were informed of how they could terminate participation at any time. Once participants clearly understood the study and their rights, they freely signed the informed consent document, and a participant number was assigned (Chen et al., 2020). The participant number was used throughout the study to disguise the participant's identity, provide anonymity, and safeguard their privacy and confidentiality (Myers et al., 2020).

Possible risks for participation were discussed with each participant according to the IRB requirements (Nusbaum et al., 2017). These risks included discomfort discussing faith and spirituality. The research study explored topics causally related to counselor educators' core teaching responsibilities for training master's level counseling students. Thus, it was understood that there was minimal risk of harm to participants in the study. Additionally, data collected in the study were stored electronically in cloud-based storage, OneDrive, and password protected using data encryption and a password-accessible Zoom platform (Mozersky et al., 2020). A

backup copy of the audio recordings was stored on a data encrypted password-protected flash drive. The computer, flash drive, and any documents pertaining to the research study were always stored in a locked file cabinet. Keeping all sources of the research data locked in the file cabinet was a protective measure to ensure that participants' privacy and confidentiality were protected throughout the study (Mozersky et al., 2020). Also, all written data was shredded to deem it unreadable once it was no longer needed. The data will remain in the locked filing cabinet throughout the study. After 7 years, according to Capella University's guidelines, the data will be permanently destroyed.

Data Collection

After securing approval from the IRB (Liberale & Kovach, 2017), the researcher initiated recruitment and screening of participants. A request for permission to post recruitment flyers in the CESNET-L listserv, the ACA's ASERVIC community members board, and in three private Facebook Groups was granted. The recruitment flyer required the following content: the researcher's name and contact information, the research mentor's name and contact information, and the name of the researcher's school. Also, the flyer had to indicate the specific purpose of the study, inclusion criteria, incentives for participation, and language that indicated that the IRB approved the study.

Potential participants contacted the researcher by electronic mail to express their interest in the study. The researcher made initial contact with each participant by phone. Potential participants were asked the screening questions to determine eligibility per the inclusion criteria. If the potential participant was not eligible for the study, the individual was thanked for their time, and the phone call ended. If the potential participant was deemed eligible, they were asked to participate in the study. All participants who agreed to participate in the study were provided

an electronic informed consent document through DocuSign, a data encrypted software program (Chen et al., 2020), and an interview was scheduled. After participants read and signed the informed consent form, they submitted it through DocuSign to the researcher (Chen et al., 2020) in preparation for their subsequent interview.

After securing an informed consent document, participants participated in a virtual Zoom interview. Due to COVID-19 and travel restrictions, Zoom was a convenient and time-sensitive way to secure participants across the United States and maintain the safety of the participants and the researcher. The researcher tested the Zoom program to ensure the audio-only recording and transcription features were enabled. Also, the program was tested to ensure no technical challenges would emerge during the interview process. Interviews were conducted in the researcher's private office to protect the privacy and confidentiality of each participant. Participants were asked to join the interview from a private and quiet room to ensure that they were not disturbed during the interview. The interview consisted of five open-ended questions; one question included two sub-questions to solicit descriptions for data collection purposes (Singer & Couper, 2017). Castillo-Montoya (2016) reported that semi-structured interviews have the rigidity of a structured interview but the flexibility to adjust questions throughout the interview to dig into participant responses and better understand their perspectives on a topic. Castillo-Montoya (2016) recommended creating a robust interview guide to mitigate bias and ensure high-quality data collection and trustworthiness within the study.

To protect the integrity of the data, the researcher practiced bracketing and memoing during data collection. Bracketing is the process of setting aside thoughts and ideas that would influence the direction of data collection (Levitt et al., 2017). Bracketing helped the researcher manage emotions, mitigate bias, and remain focused on the guiding interview questions (Levitt

et al., 2017). Memoing was also used during data collection to ensure the credibility and trustworthiness of the research study. Memoing is a reflective note that the researcher creates to record what they learned from the data (Razaghi et al., 2020). The researcher used a reflective journal to capture their reflections, thoughts, ideas, and feelings during each interview. The reflective journal entries were stored in the locked file cabinet in the researcher's office. Lastly, an interview guide was used to facilitate each interview. The guiding questions served as the formal interview guide. Interview guides keep the researcher and participants aligned to the topic and ensure that all interviews follow the same process and procedures (Castillo-Montoya, 2016).

Each interview began with the researcher providing an overview of the study, informing the participant of the interview process and audio-only recording. During the recorded Zoom interview, participants were free to share additional comments, and the researcher was allowed to ask follow-up and clarifying questions as appropriate. The interview ended with the researcher stopping the recording. The researcher informed each participant that they would have an opportunity to confirm the content of their interview transcript and provide corrections and clarifications to their responses before the data analysis. The process of confirming the content of a participant's transcript is called member checking (Birt et al., 2016). Member checking is a useful technique to demonstrate the credibility and trustworthiness of data (Liao & Hitchcock, 2018). The researcher shared that the participant's name and identifying information would be kept confidential and that a participant number was assigned to them to disguise their identity. Participants were informed that a \$25 gift card would be mailed to them using the United States Postal Service mail. Participants were thanked for their time and participation in the study. The researcher ended the Zoom session and proceeded to store the audio recording and transcript on an external flash drive.

Each interview's audio recording was collected and stored in the Zoom platform's cloud storage. A transcript was automatically generated from the Zoom audio recording. The researcher downloaded both the audio recording and the transcript into an electronic master folder called *raw interview data*. Although transcriptions were automatically generated for each interview, the researcher listened to each audio recording and edited each transcript to ensure word-for-word speech to written text (Oswald, 2019). The researcher used member checking by sending each transcript to the corresponding participant to ensure accuracy and confirm the information shared by the participant. Four participants provided minor edits to their transcripts, and the remaining participants confirmed the accuracy of their transcripts.

After performing member checking, transcripts were edited to incorporate the changes made by the four participants to their transcript. Then, a final transcript was created and named for each participant's transcript using the alphanumeric participant code. Two files were created from the final transcript, a working file and a master file. The master file was stored, and the working file was uploaded with the audio files into a qualitative data analysis software (QDAS) MAXQDA to perform the data analysis.

All interview data were stored in a data encrypted cloud storage and on a password-protected USB flash drive. The researcher's reflective journal and laptop computer were stored in a locked file cabinet in the researcher's office. The researcher took precautions to protect the participants' personal information and the data by assigning an alphanumeric code to each participant. Ensuring that private personal information is protected is a critical step in the data collection process (Moser & Korstjens, 2018). Before beginning the study, the researcher informed the participants that following Capella University's guidelines, all data for the study would be retained in a locked file cabinet accessible only by the researcher. Then, after 7 years,

all data and materials retained in the locked file cabinet would be destroyed using a local professional shredding company, Shredit.

Data Analysis

The approach to data analysis of participant responses was inductive thematic data analysis. Percy et al.'s (2015, pp. 80-81) method of inductive thematic analysis was applied using the following steps:

1. Review and become familiar with the collected information by reading and highlighting what appears to be meaningful and significant.
2. Review the highlighted data and select relevant data to keep based on the research question.
3. Eliminate any highlighted data that is not relevant to the research question placing it in a separate file and putting it in storage for future use.
4. Code all highlighted information into groups to keep track of data.
5. Cluster each piece of data that is related or connected to the research question and begin to develop patterns.
6. As patterns begin to emerge from the data, continue to place each new item of data within the appropriate cluster.
7. Reviewing all the patterns, combine and cluster patterns into overarching themes and assign an appropriate descriptor to each.
8. After analyzing all data arrange the themes in a matrix with their corresponding supportive patterns.
9. Write a detailed summary that describes the scope and substance of the theme.
10. Repeat steps 1-9 for each participant's data.

11. Combine the analysis of all participant data sets, including only patterns and themes that are consistent across all participants' data.
12. Synthesize the themes together to form one complete analysis of the data aligned to the research question.

To assist the researcher in the thematic analysis, the researcher used MAXQDA, a QDAS. MAXQDA provided functionality to help the researcher transcribe, code, classify, analyze, and explore all participant data (Oswald, 2019). Moreover, MAXQDA helped the researcher maintain transparency and improve the trustworthiness of the data using specific automated features of the QDAS while minimizing manual approaches, such as the coding and memoing features of the software (Oswald, 2019). Although QDAS promotes trustworthiness and transparency, they do have pitfalls.

Woods et al. (2016) pointed out some of the pitfalls of QDAS tools that may hinder the methodological process. They suggested that QDAS may cause the researcher to abandon their methodology for the sake of using the software (Oswald, 2019). Also, there is a risk that novice researchers can misrepresent data if they do not know how to use the program well (Oswald, 2019). The researcher practiced bracketing and monitoring the software's influence to maintain the integrity of the research study (Oswald, 2019). The researcher also used memoing to create an audit trail of information to show how the researcher moved from raw data to final themes (Razaghi et al., 2020). Despite the risks, MAXQDA enabled the researcher to manually code the data, cluster initial codes into categories of corresponding patterns, and place them into final themes.

Percy et al. (2015) described the process of inductive thematic analysis as a process that considers each participant's data individually then combines all analyzed data into a synthesis.

The following illustrates the researcher's process to perform the inductive thematic analysis for each participant's data (Percy et al., 2015). Step 1 required the researcher to review each participant transcript several times, highlighting meaningful and significant information relevant to the research question. Step 2 consisted of the researcher selecting relevant data to keep that aligned with the research question. In Step 3, the researcher eliminated any highlighted data that was unrelated to the research question. In Step 4, the researcher assigned a code to the highlighted information using MAXQDA to track the codes. Step 5, the researcher grouped into clusters each piece of data that formed similar patterns from the codes (Percy et al., 2015). Step 6, the researcher continued to code the data placing new codes within appropriate clusters. Step 7, the researcher assessed each cluster of patterned codes and combined them into overarching themes assigning a description to each (Percy et al., 2015). Step 8, the researcher created a matrix of themes from the analyzed data. Step 9, the researcher created a summary that described the theme. Step 10, the researcher repeated Steps 1-9 for each participant data set. Step 11, the researcher combined the analysis of all participant data sets, keeping only those patterns and themes that were consistent across all participants' data (Percy et al., 2015) and aligned with the research question. Step 12, the researcher, with the help of MAXQDA, combined all participant data sets into a matrix to visualize the codes, patterns, final themes.

Instruments

The researcher used semi-structured interviews (Percy et al., 2015) over Zoom (a web-based communication program) to conduct each participant interview. Each interview was recorded for audio-only. Semi-structured interviews using open-ended questions were the preferred data source for this study due to the many benefits. Semi-structured interviews have a loose structure and incorporate open-ended questions to gather rich qualitative data (Percy et al.,

2015). Moreover, semi-structured interviews are useful in soliciting specific information about a topic, yet flexible enough to explore other topics relevant to the responses given by the participant (Percy et al., 2015). Semi-structured interviews foster deep exploration of a topic to help the researcher fully understand the participants' opinions, attitudes, and experiences (Percy et al., 2015). The participants were given detailed information about the study before the interviews began. After each interview was completed, the Zoom application automatically generated a complete speech-to-text transcript with timestamps aligned to the Zoom interview. The recorded interviews and corresponding transcripts were uploaded into the MAXQDA application to organize, transcribe, analyze, and store the data (Oswald, 2019). However, the researcher was the main instrument for data collection and analysis, applying inductive thematic analysis (Percy et al., 2015).

The Role of the Researcher

The researcher is the primary instrument in a qualitative study (Percy et al., 20215). Thus, it is imperative to demonstrate trustworthiness and protect data integrity when conducting a qualitative research study (Levitt et al., 2017). Trustworthiness is a combination of credibility, transferability, and dependability (Morse, 2015a). To protect the integrity of the study and ensure credibility, transferability, and dependability, I used bracketing to mitigate bias and ensure that only the participants' voices were captured (McWhorter, 2019). Bracketing is the process of setting aside thoughts and ideas that would influence the direction of data collection (Levitt et al., 2017). The researcher used a reflective journal to collect personal thoughts, ideas, and reflections during the entire research process (Berger, 2015; McWhorter, 2019). Further, I used memoing throughout the data analysis process to ensure that an audit trail was maintained during the thematic analysis phase of the study (Percy et al., 2015).

Ensuring that all participant data was accurately transcribed was also critical to maintaining the integrity of the study (Oswald, 2019). Data transcription is the process of converting speech into a written text document (Oswald, 2019). I checked and rechecked each participant's transcript for accuracy by listening to the audio recording and comparing the recorded statements to the transcript, and acknowledging unwanted researcher biases through the process of bracketing (McWhorter, 2019) and memoing (Razaghi et al., 2020). In addition, I provided each participant with an interview transcript by electronic mail to review, comment, and confirm my interpretation of their statements. The process of reviewing, commenting, and confirming interview transcripts is called member checking (Birt et al., 2016; Liao & Hitchcock, 2018).

My background, training, and experience in data collection and data analysis procedures originated as a bachelor-level chemical engineering student conducting chemistry and engineering studies. Upon graduation, I accepted a position as a product development engineer at Minnesota Mining and Manufacturing (3M) Company, researching nonwoven materials, adhesives, and polymers. I also gained extensive training and experience designing complex research studies, data collection, data analysis, interpretation, and reporting findings while working as a Lean Six Sigma Black Belt at Ecolab, Incorporated, a large chemical manufacturer. Finally, I have experience in data collection and reporting while completing my master's degree in marriage and family counseling therapy and working as a marriage and family therapist.

My work as a marriage and family therapist began as a practicum and internship student at a small Christian counseling private practice. The request to integrate a client's faith and spirituality was an expected competency for counselors at this agency. Many of my peers at the agency struggled to incorporate their client's faith and spirituality practices and became

discouraged. I have 27 years of experience providing spiritual guidance and counseling to individuals, couples, and families due to my role as a minister and Pastor's wife at my nondenominational church. Thus, clients desiring their faith and spirituality in counseling sessions were comfortable and easy for me to accommodate. My knowledge and background in working with people as a counselor, experience with data collection and analysis positioned me to select a qualitative methodology for this study (Creswell & Poth, 2018). Moreover, my ontology and epistemology align with the constructivist lens that appreciates multiple constructed realities and believes that learning is constructed through interactions (Dewey, 1938/1997).

As a qualitative researcher, I also must be neutral, open-minded, non-judgmental, and capable of asking questions and listening to understand participants' responses without bias (Creswell & Poth, 2018). My work as a counselor and Black Belt taught me active listening skills. Active listening is the ability to be present and engaged in a conversation, paraphrasing and reflecting back on what is said, and withholding any judgment or advice (Spataro & Bloch, 2018). I also practiced introspection before data collection, evaluating my mental and emotional processes, assessing my biases and assumptions to avoid influencing any part of the research process (Levitt et al., 2017). Active listening and introspection helped establish rapport with participants and make them feel comfortable throughout the interview process (Spataro & Bloch, 2018). Comfortable participants are willing to share events and in-depth understandings of their experiences (Jenner & Myers, 2019).

Researcher-Created Guiding Interview Questions

Qualitative research is intended to study the meaning, perspectives, attitudes, and behaviors of a subject (Singer & Couper, 2017). Multiple interview styles and structures are used

to gather qualitative data. The data collection method used for this research study was semi-structured interviews. According to Hawkins (2018) and Kallio et al. (2016), semi-structured interviews are ideal and typical for qualitative research studies. Semi-structured interviews use open-ended questions to elicit an opinion, clarify meaning to a response, interpret motivations, and discover what influences an opinion (Singer & Couper, 2017). Castillo-Montoya (2016) reported that semi-structured interviews have the rigidity of a structured interview but the flexibility to adjust questions throughout the interview to dig into participant responses and better understand their perspectives on a topic. Conducting a bias-free interview required the researcher to establish an effective interview protocol or interview guide. Castillo-Montoya (2016) stated that having an effective interview protocol ensures quality data collection and maintenance of reliability within the study. Moreover, Kallio et al. (2016) stated that an interview guide helps to ensure that the study is trustworthy.

The trustworthiness of data in qualitative research is based on the study's credibility (Morse, 2015a). Two methods to address the credibility of data collection are to implement an expert panel review and conduct a field test of the guiding interview questions (Kallio et al., 2016). An expert panel review of the interview questions consists of experts in counselor education outside of the participant pool, reviewing the questions to ensure relevance, appropriateness, and bias-free wording of the interview questions (Kallio et al., 2016). A field test consists of a simulation of the real interview to confirm that the interview questions are relevant, elicit the participants' perspectives and experiences to answer the research question fully, and assess how much time would be needed for each interview (Kallio et al., 2016). Although an expert panel review and field test was not conducted, the interview questions were reviewed and approved by the researcher's dissertation mentor, who served as an independent

auditor (Moser & Korstjens, 2018). Also, the Capella University IRB approved the guiding interview questions before data collection commenced.

Interview Questions

Discovering counselor educators' experiences at CACREP accredited institutions teaching master's level counseling students to integrate faith and spirituality into clinical work will clarify how counselor educators describe their approaches to helping students develop cultural competency related to faith and spirituality. The interview questions were designed by the researcher and approved by the dissertation mentor. Each interview question was designed to gather the unique and diverse experiences of counselor educators to derive meaning through the lens of constructivism learning theory (Dewey 1938/1997). The first two questions were designed to learn about each participants' definition of the constructs of faith and spirituality. "How do you define faith?" "How do you define spirituality?" These questions informed the researcher of new perspectives and ways of understanding faith and spirituality. Also, these questions helped the researcher and participant align on a common definition of faith and spirituality for the remainder of the interview.

The third question was the essence of the research study. "What has been your experience teaching students to integrate faith and spirituality into clinical work?" The rationale for this question was to gather information about participants' attitudes, opinions, feelings, and perspectives about their experiences, teaching students to integrate faith and spirituality in clinical work. Two sub-questions followed to elicit a deeper understanding of the participants' experiences and explore their emotional responses and feelings, teaching students to integrate faith and spirituality into clinical work. "Describe conversations related to faith and spirituality that have emerged with students in your classroom." "Describe what these experiences were like

for you.” Four of the five tenets of constructivism align with the third question and sub-questions. Tenet two, challenging students’ assumptions and encouraging exploration of new concepts; tenet three, exploration of real-world issues; tenet four, learning environments that foster critical thinking; and tenet five, criterion-based evaluations. These tenets of constructivism learning theory (Dewey, 1938/1997) connected to the expressed experiences that counselor educators shared with the researcher, resulting in new knowledge.

The final question was a follow-up question. The rationale for the final question was to ensure that the research question was adequately answered and fill the gap in the research literature regarding counselor educators’ perspectives integrating faith and spirituality in clinical settings (Johns, 2017). “What additional comments can you share about your experiences teaching students how to integrate faith and spirituality in a clinical setting.” This question allowed the participants to share additional thoughts, ideas, feelings, and experiences not discussed during the interview.

Credibility, Dependability, and Transferability

In qualitative research, the researcher is the primary research instrument but not a source of meaning (Morse, 2015a). Thus, data and meaning should only come from the participants based on the researchers’ questions, observations, and notes (O’Brien et al., 2019). Several factors influence how data is collected from participants. Factors include where the information originated, the researcher’s abilities, ethical standards, the interview setting, and the data (Kallio et al., 2016). The researcher should be aware and knowledgeable of these factors to protect the data's credibility, dependability, and transferability (Moser & Korstjens, 2018).

Credibility

Credibility measures the confidence and accuracy or the believability and truth value in a qualitative research study (Liao & Hitchcock, 2018; Morse, 2015a). Credibility is the value that others judge the appropriateness of the design, methods, findings, and interpretations of the research study (Morse, 2015a). Three methods were used to maintain credibility throughout the research study saturation, reflexivity, and member checking.

The first method to maintain credibility was saturation. Saturation is achieved when there is redundancy in the data, and no additional information emerges from data collection (Fusch & Ness, 2015). Previous research literature indicated that small sample sizes are appropriate to reach saturation in qualitative research (Morse, 2015b). Thus, the 15 participants' responses gathered during the 60-90-minute interviews were sufficient to reach saturation and answer the research question. The second method to ensure credibility was to practice reflexivity using a field journal. The reflexivity journal functioned as a log of every activity initiated and completed by the researcher throughout the research process (Liao & Hitchcock, 2018; Morse, 2015a). The final method to maintain credibility was member checking, where the complete transcript was provided to the research participants to confirm the accuracy of interpreted statements collected during the interviews (Morse, 2015a).

Dependability

Dependability is the consistency of the research findings (Dunn et al., 2019). In qualitative research, the researcher must ask the question, is the researcher consistent in asking interview questions and gathering and analyzing data? The first strategy to maintain dependability was to use a code-recode procedure. Data was coded on one day, it sat for one day, and then without reviewing the initial analysis, the researcher analyzed the same data a second

time. The researcher compared the two analyses for consistency and maintained an audit trail to keep track of any changes or additions to the data analysis (Morse, 2015a). A second strategy to ensure dependability in the research study was to use peer examination. Morse (2015a) described peer examination as the process where a peer audits the researcher's analysis to determine consistency in the data collection and analysis. The dissertation mentor completed the peer examination for the research study.

Transferability

Transferability is the applicability of the findings from the research study to other people, time, and settings (Morse, 2015a). The researcher used two strategies to increase the transferability of the study. The first strategy was using thick descriptions. Thick description means that the researcher will provide the reader with a complete and detailed description of the context, participants, and research design to make their determinations about transferability (Morse, 2015a). A second strategy to maintain transferability was to ensure that the sample represented the entire population of counselor educators. The study used a snowball sampling strategy to identify counselor educators at CACREP accredited institutions from CMHC, school counseling, and MFCT programs. Additionally, participants were eligible if they had an active counseling license and were older than 18 years of age.

Snowball sampling is considered a good technique when conducting qualitative research with a specific and small population such as counselor educators (Dusek et al., 2015; Robinson, 2014). A disadvantage of snowball sampling is that there is no guarantee of a complete representation of the entire population (Dusek et al., 2015). To assess the representativeness of the sample, the researcher collected publicly available demographic data to determine the type and size of the CACREP accredited institution, public, private, religious, the regional location

within the United States. Although not solicited by the researcher, most participants provided demographic information throughout their interviews, which informed the researcher of ample information to demonstrate an adequate representation of the population (Morse, 2015a).

Participants in the study represented all regions of the United States of America. Additionally, participants represented CMHC, school counseling, and MFCT within public, private, faith-based, face-to-face, and online formatted programs.

Ethical Considerations

The ACA (2014) code of ethics and standards from *The Belmont Report* were applied (National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research, 1979) to conduct ethical research using human subjects. *The Belmont Report* outlines three specific ethical principles that must be maintained when working with human subjects: respect for persons, beneficence, and justice (Brothers et al., 2019; Miracle, 2016). The first principle is respect for persons, which refers to autonomy, people having the right to make decisions for themselves, and ensuring that vulnerable people receive increased levels of protection. Research study participants should have complete autonomy in the research study with the right to terminate participation at any time (Miracle, 2016). The privacy of each participant must be protected and guaranteed for the duration of the research study and afterward (Hadden et al., 2018; Miracle, 2016). Thus, implementing informed consent helped the researcher protect human subjects and conduct ethical research (Brothers et al., 2019; Hadden et al., 2018).

A robust informed consent is a critical document that helps researchers avoid violating ethical and legal issues in human subject research (Hadden et al., 2018). Omitting informed consent violates the ACA and CACREP ethical codes and IRB requirements (Miracle, 2016).

The informed consent document articulates all aspects of the research process, the rights of the participants, and expectations of any risks and discomforts that the study may impose on the participant (Hadden et al., 2018). The researcher reviewed the informed consent document with each participant before initiating the study to ensure that the participants understood the procedures and protocols of the study. Specifically, participants were informed that interview questions were related to faith and spirituality, which could generate discomfort. Participants were advised of their right to terminate participation at any time if they felt uncomfortable.

The second principle is beneficence, which is to do no harm and identify possible benefits to participants. The IRB required the researcher to determine any amount of risk to human subjects and inform participants of the risks (Hadden et al., 2018). *The Belmont Report* (National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research, 1979) discussed ethical practice and how to protect human subjects when conducting research. Research participants should be protected from any risk of harm, including emotional, physical, or psychological (Hadden et al., 2018). Any factors from the study that would cause participants to be at risk should be avoided and mitigated (Hadden et al., 2018).

Moreover, the researcher must discuss risk factors with participants before initiating any part of the research process (Hadden et al., 2018). In this research study, counselor educators were the target population. Counselor educators are familiar with the dissertation process and intricate details of research studies due to the nature of their role as counselor educators. Research participants are often dissertation mentors, committee members, coaches, and instructors for doctoral students completing their dissertations (Nolte et al., 2015). This research study explored topics causally related to counselor educators' core responsibility of training master's level students. Thus, it can be understood that there is minimal risk of harm to

participants in this research study. Heath et al. (2018) shared that research participants do not typically report distress. Nevertheless, precautions were made to prevent harm by articulating the potential risk to participants and offering participants the option to terminate the study at any time (Hadden et al., 2018).

The third principle is justice, which refers to all participants receiving the same fair and equal treatment (Miracle, 2016). Anyone participating in a research study must be afforded the same type of treatment and the treatment provided must be clearly articulated and written in the informed consent document (Miracle, 2016). If participants terminated their participation before the study was completed, they still had access to the \$25 Amazon gift card, which demonstrated fair and just treatment of all participants (Miracle, 2016).

Once approval from the Capella University IRB was granted, data collection and analysis began. Study participants who responded to the recruitment materials and met the criteria to join the study contacted the researcher by email. The researcher contacted potential participants by phone and conducted the screening questions to confirm that each participant met the study's inclusion criteria. Participants were provided an interview time a minimum of 24 hours after conducting the screening process. Also, the researcher sent each participant a data encrypted electronic version of the informed consent document summarizing the study, confidentiality, and their rights to terminate participation at any time (Chen et al., 2020).

Before beginning each interview, the researcher reviewed the informed consent with participants and answered their questions. Participants were reassured that their identity and responses to interview questions would be protected and remain confidential throughout the study and beyond. They were also informed that the data from the study would be stored for 7 years and destroyed according to the Capella University Data Destruction policy. The

participants affirmed that they understood their rights and responsibilities by electronically signing the informed consent document using DocuSign and submitting it to the researcher (Chen et al., 2020); then, the researcher assigned a participant identification number to conceal their identity (Myers et al., 2020).

In addition to concealing participants' identities (Myers et al., 2020), the researcher shredded all written documents and notes that were no longer needed for data analysis. Memos, notes, and reflexive journal entries were entered into MAXQDA as memos for future use. All data was stored in two locations, cloud storage and on a USB flash drive. The cloud storage was secured using an encrypted data password, and the USB flash drive was stored in a locked filing cabinet. After 7 years, all data will be permanently destroyed following the Capella University research data policy.

Summary

Chapter 3 provided a detailed overview of the generic qualitative inquiry methodology (Percy et al., 2015) and the procedures used in this study. A generic qualitative inquiry approach (Percy et al., 2015) was appropriate for this study to answer the research question, "What are counselor educators' at CACREP accredited institutions experiences teaching master's level counseling students to integrate faith and spirituality into clinical work?" The target population for this study was counselor educators at least 18 years of age, who were faculty members at CACREP accredited institutions working in CMHC, school counseling, or MFCT programs that held active counseling licenses. A recruitment flyer and invitation email were used to identify potential study participants recruited from CESNET-L, ACA's ACERVIC community, and three Facebook groups.

The recruitment activities yielded 15 participants who participated in data collection. Using a semi-structured interview (Percy et al., 2015) conducted over Zoom, participants provided detailed responses to open-ended questions regarding their experiences teaching students to integrate faith and spirituality into clinical work. Pre-designed follow-up questions were used to probe participants for in-depth perspectives regarding their experiences. These interviews were sufficient to reach data saturation and answer the research question, “What are counselor educators’ experiences at CACREP accredited institutions teaching master’s level counseling students to integrate faith and spirituality into clinical work?”

The researcher was the primary data collection instrument for the study. The researcher applied ethical standards to ensure participants were protected throughout the study. Data analysis incorporated a qualitative data analysis software MAXQDA to assist with transcription, organization, and management of the data analysis that followed Percy et al.’s (2015) inductive thematic analysis procedures. Chapter 4 describes the results of the study, reports the data collected, and presents the results of the data analysis and findings from the study.

CHAPTER 4. PRESENTATION OF THE DATA

Previous research regarding the benefits and necessity of faith and spirituality in clinical work from the perspectives of counselors and prelicensed counselors has been thoroughly explored (Curry et al., 2015; Errington, 2017; Giordano et al., 2016; Henriksen et al., 2015; Magaldi & Trub, 2018; Oxhandler & Parrish, 2018; Scott et al., 2016). In contrast, there is little research available regarding teaching faith and spirituality for integration into clinical work from the perspectives of counselor educators (Adams et al., 2015; Johns, 2017; Leighton, 2016). The gap in the literature justified constructivism learning theory (Dewey, 1938/1997) as the theoretical framework and application of a generic qualitative inquiry design (Percy et al., 2015) to expand the body of literature that describes counselor educators' attitudes, opinions, and perspectives regarding their experiences teaching master's level counseling students to integrate faith and spirituality into clinical work.

Chapter 4 is a presentation of the data collected to answer the research question: "What are counselor educators' experiences at CACREP accredited institutions teaching master's level students to integrate faith and spirituality into clinical work?" The chapter begins with a description of the researcher's interest in the topic and details their background, experience, training, and role in data collection and analysis. The chapter provides a description of the research study participants, the sampling procedure, and a description of the generic qualitative inquiry methodology (Percy et al., 2015). The chapter concludes with a presentation of the inductive thematic analysis of the data (Percy et al., 2015) and a summary of the results.

Introduction: The Study and the Researcher

My interest in teaching students the integration of faith and spirituality in counselor education was professional and personal. I completed my master's degree in marriage and family

counseling therapy at Capella University with no coursework directly tied to faith and spirituality. However, faith and spirituality were included if I raised the topic in a discussion or written assignment. I wanted to learn how counselor educators taught their students about faith and spirituality; additionally, my background as a Christian motivated me to explore the topic. I hold a Christian worldview and have over twenty-five years of experience as a minister in a nondenominational Christian church. In addition, I have 4 years of experience working as a marriage and family therapist in a clinical setting, integrating faith and spirituality into counseling sessions.

During my tenure as a master's and doctoral-level learner at Capella University, I developed research skills through online training and passing several courses. I completed a bachelor's degree in Chemical engineering and have greater than 20 years of experience in research, development, and engineering. I have extensive training as a Lean Six Sigma Black Belt. A Lean Six Sigma Black Belt is trained to optimize and improve processes using the Six Sigma Define Measure Analyze, Improve Control (DMAIC) problem-solving methodology and statistical tools (Antony et al., 2016). As a Black Belt, I managed projects, collected, analyzed, and interpreted large data sets. I have over 5 years of experience conducting quantitative research designs in a corporate setting for two chemical manufacturing companies and a nonprofit organization. These experiences introduce preconceptions, pre-understandings, and biases that could influence the outcomes of this study.

I recognize several preconceptions, pre-understandings, and biases about the topic. First, I believe that faith and spirituality must be taught in all counselor education and supervision programs to prepare counseling students to effectively integrate topics of faith and spirituality in a clinical setting. Faith and spirituality are cultural identifiers that are as important as race,

gender, ethnicity, and socioeconomic status (McAuliffe & McAuliffe, 2019). Second, I believe that counselor educators who ascribe to a higher power or spiritual identity are more apt to engage students in conversations related to faith and spirituality than counselor educators who may be agnostic, nonspiritual, or atheist (Johns, 2017). Third, I believe that private Christian-based counselor education programs intentionally introduce topics of faith and spirituality into their multicultural courses and other required courses based on preliminary online research to learn about private counselor education programs. Moreover, I understand that topics of faith and spirituality are challenging to discuss and often lead to dissension between people and groups due to differing opinions (Harris et al., 2017). Finally, I hold a Christian worldview that positions me to be biased toward Christianity's beliefs, values, and traditions.

To protect the integrity of this research study and mitigate the risk of researcher bias, I practiced bracketing throughout the research project (McWhorter, 2019). Bracketing is the process of setting aside thoughts and ideas that would influence the direction of data collection and interpretation of the data (Levitt et al., 2017). A researcher must assess their biases and assumptions throughout the research study to avoid influencing any part of the process (Levitt et al., 2017). The first approach to bracketing that I employed was to engage in dialogue with my dissertation mentor and committee before data collection began to discuss biases, assumptions, pre-understandings, and preconceptions and write them down, thus bracketing anything that would influence the research study (Berger, 2015; McWhorter, 2019).

Second, I practiced bracketing using a reflective journal, memoing thoughts, ideas, and biases that surface during data collection to ensure that only the participants' voices were heard (Berger, 2015; McWhorter, 2019). Throughout the research study, bracketing was used to help me monitor and be aware of biases, assumptions, and pre-understandings that could influence the

data. I also checked and rechecked each participant's transcript for accuracy by listening to the audio recording, comparing the recorded statements to the transcript, and acknowledging unwanted content due to researcher biases (McWhorter, 2019).

The data and thematic groupings were reviewed for dependability and credibility (Morse, 2015a). Participants received their interview transcript by electronic mail to review, correct, comment, and confirm the researcher's interpretation of their statements. The process of confirming the content of the interview transcript is called member checking (Birt et al., 2016; Liao & Hitchcock, 2018). The literature review for this study revealed that the experiences of counselor educators teaching students to integrate faith and spirituality in clinical settings had not been sufficiently studied. Therefore, the purpose of the study was to explore counselor educators' experiences at CACREP accredited institutions teaching master's level counseling students to integrate faith and spirituality into clinical work.

Description of the Sample

Population

The population for the research study was counselor educators teaching in CACREP programs. In 2018, CACREP published a Vital Statistics report indicating that approximately 2,432 full-time faculty members worked in CACREP accredited programs. Additionally, CACREP's online directory listed approximately 82 counselor education programs nationwide (CACREP, 2020). Greater than 2,400 full-time faculty counselor educators serve in these programs across the country (CACREP, 2018b). The report showed that of the full-time faculty members working in CACREP accredited programs, 71% were White, 14.5% were African American, 5% were Hispanic/Latino, 4% were Asian, and the remaining 5.5% included Native Americans, Pacific Islanders, multiracial, and nondisclosed race or ethnicity individuals. The

report also provided a gender breakdown of CACREP faculty members, including 62.4% female, 33.5% male, and 4% undisclosed or alternative identities.

The population for this research study were counselor educators who taught master's level counseling students in CACREP accredited clinical mental health (CMHC), school counseling, or marriage and family counseling therapy (MFCT) programs. The study utilized a purposive (Ames et al., 2019; Setia, 2016) and snowball sampling (Dusek et al., 2015) method to gather participants' opinions, attitudes, perspectives, and in-depth descriptions of their experiences teaching master's level students to integrate faith and spirituality into clinical work. Participants were purposefully recruited using the Counselor Education and Supervision Network Listserv (CESNET-L) 4,000-member online community (CESNET, 2020), the ACA's Association for Spiritual, Ethical, and Religious Values in Counseling (ASERVIC) community, and three Facebook groups known to include counselor educators that fit the inclusion criteria for the study (Ames et al., 2019). Members of the CESNET-L, ACA's ASERVIC community, and Facebook groups were asked to forward (snowball) the request for participants to other counselor educators that met the study criteria (Dusek et al., 2015) to arrive at a sample of 15 participants.

Sample

Webber-Ritchey et al. (2021, p. 235) indicated that qualitative research must include “an adequate representation of diverse populations to “advance science and health equity.” Including rich descriptions of participants, such as race, gender, and other cultural identifiers in qualitative studies creates a basis for the transferability of the research findings to other settings and populations (Moser & Korstjens, 2018) and fills the gap in the existing research on the topic that is limited regarding diverse populations (Johns, 2017). The sample for the study consisted of 15 diverse participants identified from a pool of counselor educators who met the following criteria.

Each participant was 18 years of age or older, holding an active counseling license, teaching as a faculty member at a CACREP accredited institution, in an online or face-to-face CMHC, school counseling, or MFCT program. The sample included 10 female and five male counselor educators from diverse faith and spiritual backgrounds; nine identified as Christian, two identified as spiritual, three did not indicate any faith or spiritual affiliation, and one identified as Hindu. In addition, the sample included eight White, three African American, one Asian, and three unknown race participants. The participants in this study had been counselor educators from 6 months to 31 years. Twelve participants held active LPC licenses, two held active clinical mental health licenses, one held an active school counseling license, and one held an active marriage and family counseling and pastoral counseling license in addition to their LPC license.

Participants' CACREP affiliated programs included 12 participants teaching in clinical mental health programs, nine school counseling programs, and two marriage and family counseling therapy programs. Participants' school affiliation included eight public, seven private Christian, and one private nonreligious institution. Twelve participants taught at institutions using a face-to-face in-person format, and three institutions were 100% online learning. However, due to COVID-19, all participants' institutions utilized an online format for a portion of their 2020 and 2021 academic years. To mask the identity of the participants an alphanumeric code was assigned to each participant using the following format P1, P2, P3, etc. A description of each of the participants from the study is detailed in the following section.

P1 was of an unknown faith or spiritual affiliation. They have 31 years of experience as a counselor educator. They teach at a public institution in a clinical mental health counseling program. P1 was excited, knowledgeable, and passionate about their experiences teaching students faith and spirituality and the origins of counseling within the faith and religious

communities. P1 believes that many counselors are unskilled in integrating faith and spirituality and need adequate training to help them conceptualize clients' beliefs into their treatment plans and counseling sessions.

P2 identified as a Christian. They have 3 years of experience as a counselor educator. P2 teaches school counseling at a public institution. They were excited to share their experiences related to faith and spirituality in the classroom. In addition, they shared details about challenges they experienced integrating faith and spirituality and interactions with peers.

P3 identified as a Christian. They have 7 years of experience as a counselor educator. P3 teaches at a Christian university and seminary in clinical mental health, school counseling, and marriage and family counseling therapy program. P3 was comfortable talking about their experiences and passionate about faith and spirituality in clinical work. They were also very detailed about students' struggles learning to be counselors due to their faith and spiritual backgrounds.

P4 identified as a Christian. They have 5 years of experience as a counselor educator. They teach at a Christian university and seminary in a clinical mental health program. P4 was knowledgeable and passionate about helping students learn and excited to discuss their experiences as a counselor educator. They believe in a holistic approach to teaching students to integrate faith and spirituality to help students develop competence and understand how to navigate value conflicts in a counseling setting.

P5 identified as a Christian. They have 22 years of experience as a counselor educator. They teach at a public university in a clinical mental health and school counseling program. P5 shared that they were taught, as a master's level counseling student, to avoid faith and spirituality in clinical settings. However, as a counselor educator, they understand the importance of

including faith and spirituality in coursework as a best practice. P5 was comfortable discussing their experiences teaching faith and spirituality and difficulties encountered when students are unfamiliar with the topic.

P6 identified as spiritual. They have 10 years of experience as a counselor educator. They teach in a clinical mental health, school counseling, and marriage and family therapy program at a public university. P6 was engaged and excited about sharing their experiences as a counselor educator. They talked about their spiritual identity, which brought them into the counseling field, and how their faith beliefs and professional practice are connected.

P7 identified as a Christian. They have 25 years of experience as a counselor educator. They teach at a Christian university and seminary in a clinical mental health counseling program. P7 was excited to share their experiences teaching students faith and spirituality and discussed how integrating faith and spirituality in clinical settings is both helpful and a hindrance depending on how the client uses it.

P8 identified as a Christian. They have been a counselor educator for approximately 6 months. They teach at a Christian university in a clinical mental health program. P8 was very comfortable talking about their experiences teaching students about integrating faith and spirituality in a crisis counseling course.

P9 was of an unknown faith or spiritual affiliation. They have 3 years of experience as a counselor educator. P9 teaches in a clinical mental health and school counseling program at a small Christian university. P9 was knowledgeable about the topic of faith and spirituality. They shared their experiences teaching an elective course on faith and spirituality every semester that brings a variety of unique experiences for him and the students.

P10 identified as a Christian. They have 8 years of experience as a counselor educator. They teach at a Christian university and seminary in a clinical mental health and school counseling program. P10 was passionate about their role as a counselor educator. They stressed the value and importance of a personal faith relationship with God, enabling them to guide students and help meet their learning needs. Moreover, P10 described their relationship with God as keeping them grounded and serving as an anchor when working academically and clinically.

P11 did not identify with any faith or spiritual affiliation. They have 1 year of experience as a counselor educator. They teach at a public university in a clinical mental health program. P11 was excited to share experiences as a new counselor educator and how they stress the importance of students developing self-awareness and a solid understanding of their faith and spirituality.

P12 identified as a Christian. They have 7 years of experience as a counselor educator. They teach at a public institution in a school counseling program. P12 was comfortable, knowledgeable, and excited to share their experiences teaching students to use faith and spirituality as strengths when working with clients. They described situations where they were challenged to think beyond their traditional values and beliefs and learn to embrace the values and beliefs of others. P12 described their experiences as life-changing and impactful.

P13 was of an unknown faith and spiritual affiliation. They have 5 years of experience as a counselor educator. They teach at a public institution in a clinical mental health and school counseling program. P13 was engaged and excited to share their experiences teaching master's level students. They describe themselves as cautious about integrating faith and spirituality into their teaching methods to avoid unwanted attention and potential political challenges from the faith community in their city and school. P13 was eager to describe how they want to help

students learn to be authentic and culturally competent beyond race, gender, ethnicity, and socioeconomic status.

P14 identified as a Christian. They have 8 years of experience as a counselor educator. They teach at a public institution in a clinical mental health program. P14 has a strong sense of self-awareness as they discussed their work as a counselor educator, specifically around teaching faith and spirituality. They stressed the importance of a personal relationship with God to guide and lead their work with students and work with clients.

P15 identified as a Hindu. They have 8 years of experience as a counselor educator. They teach at a private university in a clinical mental health and school counseling program. P15 was knowledgeable about teaching students to integrate faith and spirituality. They were excited to participate in the study and share valuable insights into their counselor educator experiences.

All the counselor educators selected as participants met the inclusion criteria to be eligible for the study. Three counselor educators requested to participate in the study but did not meet the faculty at a CACREP accredited institution inclusion criterion. Thus, they were not permitted to participate in the study. Once the study was initiated, none of the participants withdrew. The following section details the research methodology applied to the data analysis.

Research Methodology Applied to the Data Analysis

The purpose of this study was to explore counselor educators' experiences at CACREP accredited institutions teaching master's level counseling students to integrate faith and spirituality into clinical work using generic qualitative inquiry. The generic qualitative design methodology and data analysis provided an understanding of participants' experiences as counselor educators (Percy et al., 2015). The Capella Institutional Review Board (IRB) approved

a sample size of 10 participants and a purposive and snowball sampling technique. Although the goal was 10 participants, 15 participants were used in the study.

In qualitative research studies, the sample size should adequately answer the research question and demonstrate saturation (Malterud et al., 2016). It is common for qualitative research studies to include a small number of participants (Morse, 2015b). A sufficient number of participants is determined by data saturation, the point in the research process where no new information is discovered in data analysis, called redundancy (Fusch & Ness, 2015). The redundancy in the data is a signal that data collection may cease (Fusch & Ness, 2015). The IRB initially approved a minimum of 10 participants. Ten participants were sufficient to reach data saturation (Morse, 2015b). Including five additional participants to arrive at a sample size of 15 was taken as an extra precaution to ensure data saturation. Data collection ended after completing 15 interviews as no new themes had emerged (Fusch & Ness, 2015) from the data analysis. Thus, it was determined that saturation was reached, and sufficient data was gathered to answer the research question adequately.

This study was conducted to gather data for counselor educators, supervisors, and counselor education programs responsible for teaching master's counseling students. Most of the previous research on this topic focused on counselors' perspectives and prelicensed counselors and their lack of comfort and training to integrate faith and spirituality into clinical work (Henriksen et al., 2015; Reiner and Dobmeier, 2014; Scott et al., 2016). This research may provide information useful in filling the gap in the research literature regarding counselor educators' perspectives (Johns, 2017).

The data collection method was audio-only recorded semi-structured interviews conducted over Zoom. Gray et al. (2020) indicated that Zoom is a cost-effective and convenient

method for qualitative research where face-to-face audio-recorded interviews are required. Zoom is a web-based video-conferencing platform. Zoom facilitates audiovisual conferencing using a computer and an internet connection (Gray et al., 2020). Participants in the study shared their experiences by answering guided semi-structured, open-ended questions in audio-only recorded Zoom interviews.

Inductive thematic analysis was the data analysis method used to analyze the data for this study (Percy et al., 2015). Inductive thematic analysis is a process where the researcher abandons any pre-knowledge or pre-understanding related to the study (Percy et al., 2015). Moreover, the researcher does not create or pre-designed categories or themes for the data. Instead, each participants' data set is coded individually, looking for repeating patterns that form clusters of like meaning; clusters are then combined with other clusters to form themes (Percy et al., 2015). Once all participants' data sets are individually analyzed, the patterns and themes are synthesized together (Percy et al., 2015).

After collecting data through Zoom interviews, data analysis was initiated. Each Zoom interview was automatically transcribed by a unique feature within the Zoom application (Grey et al., 2020). The researcher uploaded each transcript and audio recording into the MAXQDA software program. MAXQDA is a qualitative data analysis software used to help researchers organize, transcribe, code, classify, analyze, and explore large textual data sets (Oswald, 2019). Initially, the researcher used the MAXQDA playback and editing features of the software program to ensure that each participants' transcription was transcribed word-for-word. The researcher listened and compared the transcript to the recording for accuracy.

To ensure the credibility of the research findings, the researcher used the member checking method, returning the interview transcript to each participant in the study for their

review using electronic mail. Each participant was allowed to review their transcript and make comments and corrections to the researcher's interpretation of their responses as a method of information checking. Birt et al. (2016) and Liao and Hitchcock (2018) described this as member checking. After receiving participants' responses to member checking and edits to the transcripts based on participants' responses, the researcher began the data analysis.

First, the researcher read each transcript several times to become familiar with the data using features of MAXQDA to highlight sentences, phrases, and paragraphs that appeared significant and related to the research question (Percy et al., 2015). Sections of the transcript that were deemed irrelevant and did not answer the research question were eliminated (Percy et al., 2015). The next step was to code relevant data. The researcher did not use the automated coding features of MAXQDA for the analysis. The researcher performed manual coding of all data. MAXQDA provided an effective, organized, and manageable system to code each piece of data and keep it organized (Oswald, 2019). To identify the final themes, the researcher assigned initial codes to each set of participant data. Coded data were grouped based on patterns that formed from the data. The groups of coded data were clustered together into categories that formed subthemes. The subthemes were grouped together based on similarities to form the final themes (Percy et al., 2015).

The final themes and subthemes were organized into a visual matrix (Belotto, 2018). The data analysis revealed 12 subthemes and six final themes. A synthesis of the data analysis detailing the essence of each theme was written (Percy et al., 2015). The analysis includes direct quotes from participants that supported and clarified the patterns, subthemes, and final themes. During the data analysis, no problems were encountered. The following section presents a discussion of the six final themes and corresponding sub-themes.

Presentation of Data and Results of the Analysis

This section presents the data and results of the inductive thematic data analysis (Percy et al., 2015) that depicted the experiences of counselor educators at CACREP accredited institutions teaching students to integrate faith and spirituality into clinical work. A total of 12 initial themes emerged from the counselor educators’ responses about their experiences teaching students to integrate faith and spirituality. The themes were refined and grouped into six final themes and corresponding subthemes. Themes developed in the data were related to the research question: “What are counselor educators’ experiences at CACREP accredited institutions teaching master’s level counseling students to integrate faith and spirituality into clinical work?” The final six themes that emerged from the data are self-awareness, roles and responsibilities, assessment and case conceptualization, therapeutic relationship, academic programs, and methods and approaches. Table 1 depicts the six themes and the corresponding subthemes in order of occurrence and the representation of each theme and pattern aligned to all participants.

Table 1

Matrix of Themes and Corresponding Sub-Themes: Participants 1 through 15

Themes	P1	P2	P3	P4	P5	P6	P7	P8	P9	P10	P11	P12	P13	P14	P15
Theme 1. Self-Awareness															
Identity	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Emotional Responses	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Values Conflict	X	X	X	X	X	X	X	X		X			X	X	X
Imposing Values and beliefs		X	X	X	X	X		X		X			X		
Theme 2. Roles and Responsibilities															
Facilitator	X	X	X	X		X	X	X	X	X	X	X	X	X	X
Supervision	X	X	X	X	X	X				X			X	X	X
Nurturing	X	X	X	X		X		X	X	X	X	X	X		X
Gatekeeping	X	X	X		X	X	X						X		
Theme 3. Assessment and Case Conceptualization															
Cultural Identifiers	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Broaching	X	X	X	X	X					X				X	X
Comfort Level		X	X	X	X			X	X			X		X	X

Themes	P1	P2	P3	P4	P5	P6	P7	P8	P9	P10	P11	P12	P13	P14	P15
Theme 4. Therapeutic Relationship															
Connection	X	X	X	X				X	X	X	X	X			X
Self-Disclosure									X	X					X
Empathetic Attunement	X									X			X		
Theme 5. Academic Programs															
Coursework	X	X		X	X	X	X	X	X						
Type of Institution		X	X	X	X	X	X	X			X	X			
Theme 6. Methods and Approaches															
Techniques		X	X	X			X		X	X		X		X	X
Theories									X			X	X		

Theme 1. Self-Awareness

Self-awareness is knowing one’s attitudes, opinions, values, and beliefs that shape an individual’s worldview (Burns, 2017). Self-awareness is the process of learning about your internal and external self (Bohecker et al., 2017). Counselors must be aware of their own beliefs, biases, and cultural worldview such that it does not negatively influence the client-counselor relationship and hinder the counseling process (Sue et al., 2019). Counselors with a high level of self-awareness understand who they are and why they feel what they feel (Greggo, 2016; Cureton et al., 2019). A heightened self-awareness enables counselors to embrace and appreciate who they are as individuals, which is critical for a strong professional identity (Burns, 2017). Participants identified the following self-awareness subthemes: identity development, emotional responses, values conflict, and imposing values and beliefs.

Identity Development

A counselor’s professional identity has two components the nature of their work as a helping professional (Woo & Henfield, 2015) and their personal selves (Lloyd-Hazlett & Foster, 2017). Participants identified identity development as the first subtheme of self-awareness. Woo and Henfield (2015) indicated that identity development begins by exploring personal values and beliefs and incorporating professional skills to reveal the professional self. P7 said, “I think about

professional identity as the integration of who I am, and the skills that I have, bring those together, integrated skills with identity, that's the professional self."

Professional identity was noted as a continuous process that begins in the master's program and continues into professional practice (Matthews et al., 2019). Two participants shared their experience teaching students to discover themselves through class discussions and reflection. P4 said, "Throughout the entire program, students are forming their own identity professionally, and are looking [at their development] as themes cycle back in different courses." P5 stated, "We talk about them [students] being aware of their biases, and their self-awareness of their own identity, more focused on their cultural identity, gender identity, sex[ual] identity, things like that, and religious identity."

Participants talked about cultural identifiers playing a significant role in self-awareness and identity development. Acknowledging a person's cultural identifiers helps them visualize how they are shaped by the world around them (Jones-Smith, 2019). Moreover, a counselor's awareness of their cultural identifiers helps them to appreciate and value the culture of others (Jones-Smith, 2019). P5 discussed differences in teaching predominantly White students and students of color. They felt that most of their students of color had greater awareness of their identity culturally and spirituality due to their personal life experiences. In contrast, the White students were oblivious to their spiritual identities. They said,

The White students can barely identify their racial identity. Whereas all the students of color are nailing it, they can talk about the racial identity, they can talk about examples of where they're at in their stages and statuses, and they know what they're working on. And they know what they need to do next. I watch them [White students], in these moments of professional growth, it's a little bit more painful for me to watch because I see they're just not getting it, they're not because they don't have their own personal identity in terms of the cultural, the racial, and religious identity. They're not going to be as prepared for professional development if they don't have this other stuff [self-awareness] going on, too.

Several participants talked about intersectionality, the interconnectedness of an individual's social categorization, such as the cultural identifiers race, gender, ethnicity, faith, and spirituality (Adams et al., 2015). Sometimes students struggle to understand which identity to bring into the counseling room (Adams et al., 2015). Participants were divided on whether students should keep their spiritual identities separate from their professional counselor identity. P2 discussed in-class conversations focused on counselors' belonging to several cultural groups, such as being Black, Christian, and female. P2 said, "Intersectionality has come up and being able to talk about the intersection of different identities and their cultural memberships and how those things impact their ability to practice." P6 shared, "They [students] have a hard time separating their counselor professional identity from their spiritual identity." P1 stated,

I have a student in one of my classes; we have great discussions; the student is a woman. She's from [state redacted]. And she's a rabbi. She had to learn how to separate the rabbinical side from her clinical side and to be very astute as to when the people sitting in front of her are members of her congregation and when they are not.

One participant indicated that they believed their spiritual identity was as much a part of them as their other identities. P10 said, "I bring my own sense of spirituality to the counseling room, just like I do [my] gender, I bring my life experiences, my training, all of that spirituality is part of my identity."

Counselor educators encourage identity development by creating opportunities for discovery (Moate & Cox, 2015). Several participants talked about helping students grow their identity through self-reflection and exploration (Moate & Cox, 2015). P7 said,

What I try and do with students is to get them to do a lot of self-reflection, to know themselves more, to explore their values, explore their history that shapes their own personal identity that they're bringing with them into the room.

According to P1, part of a student's exploration is discovering "how their faith influences everything they do." P2 shared, "I invite the students to talk about faith and spirituality by taking a personal inventory and doing some self-reflection exercises." P3 said,

We really need to be sitting with our students and having these conversations and saying, we want you to explore who you are spiritually, and we want you to understand who you are and be very much integrated and own who you are spiritually. That way, you can be very aware and very reflective with your clients on who they are spiritually.

Counselor educators can promote identity development through discussions and encouraging students to reflect on their faith and spirituality (Binkley & Minor, 2020). Exploring faith and spirituality helps students find meaning and purpose for their work as counselors (Paul Victor & Treschuk, 2019). One participant discussed how to help students explore their faith and spirituality by applying principles and stories from the Bible. P10 stated, "I talk about the sacred all the time with my students. The conversations focus on understanding the value of faith and spirituality as a foundational element for the counselor."

P10 talked about using a metaphor to teach students. They shared about their use of a Christian story, the parable of the sower (Mueller, 2020). The parable of the sower talks about good and bad ground or soil. There are four types of soil that a sower plants seeds. In the illustration, three soils cannot produce good harvests because they are fallow ground; but the fourth is good and fertile ground ready for planting (Mueller, 2020). P10 used the parable of the sower to teach students about their role and significance as counselors. They said,

Maybe our role is about preparing the soil. So, when we talk about the weeds, the weeds are the worries of this world. How many of you know how many of our clients focus on their anxieties? So how can we help them untangle some of those weeds? Maybe their soil is so hard that the cares of life have been so hard on them that it's so dry. We [counselors] come in, and we water it. Some of that might be breaking up the clods of their life and making the soil much more smooth and receptive by the way that we are encountering them; and that we are affirming who they are, and that they don't have to be so defensive, and hard that we create an emotionally corrective experience. That hardness

doesn't have to be present all the time. This may be part of our job and our honor to do that in a person's life.

Some participants shared the importance of teaching students about world religions (Blalock & Holden, 2018). The research literature addressed the value of teaching students about world religions to break down barriers of differing faiths and beliefs and encourage the appreciation of diversity (Blalock & Holden, 2018; Leighton, 2016). Participants stated that incorporating specific elements of world religions into counseling sessions requires knowledge and understanding of a religion's specific tenets. Two participants talked about encouraging their students to spend time in and outside of class learning about the major world religions. P7 said, "Read philosophical and theological literature and become familiar with world religions." P9 said, "I spent a lot of time just reviewing world religions [with students], the basics of non-Christian, non-Judeo, and you know, the big three faiths [Christianity, Islam, and Judaism]." Discussions about world religions, faith, and spirituality with students can arouse positive and negative emotional responses from counselor educators (Sue et al., 2019).

Emotional Responses

Counselor educators described their positive and negative emotional responses when teaching students to integrate faith and spirituality into clinical work. An emotional response is a physical or emotional reaction to a situation initiated by an external influence such as another individual or a memory (Gutierrez & Mullen, 2016). Participants describe defensiveness, guardedness, frustration, offense, irritation, and avoidance when teaching students about integrating faith and spirituality. The most prevalent negative emotional response described by participants was opposition and fear.

Participants shared that historically faith and spirituality were intentionally left out of counseling (Oxhandler et al., 2018). The research literature indicated that between the 1920s and the 1980s, any reference or linkage to faith and spirituality was intentionally removed from research, academic programs, and across all helping professions (Oxhandler et al., 2018; Plante, 2016). However, over the past 30 years, new research showed significant benefits to one's overall health and mental wellness when including faith and spirituality in counseling (Harris et al., 2016; Oxhandler & Parish, 2018). One participant talked about their graduate program being void of anything related to faith and spirituality. They shared that in their role as a counselor educator, they know that faith and spirituality are a part of diversity and should be included. P5 shared, "Religion and spirituality; we were taught to avoid since I've been teaching for over 21 years, I know better than that, I've kind of integrated it into all my class discussions in practicum, internship theories, microskills, even in career counseling."

Several participants discussed their university administration opposing the explicit inclusion of faith and spirituality in courses and fieldwork. The research literature indicated that CACREP institutions provide very little guidance on addressing faith and spirituality in the curriculum (Bohecker et al., 2017). Broadly, universities avoid guiding counselor educators on incorporating faith and spirituality in the curriculum due to differing worldviews, beliefs, and perspectives that may cause discord in the classroom (Johns, 2017). Thus, the inclusion of faith and spirituality is minimized, causing challenges for counselor educators to effectively prepare their students for clinical work (Bohecker et al., 2017). P14 said, "I find there's a lot of conflict within counseling across the board as it relates to faith integration; there's a lot of hesitancy and fear. There's hesitancy within education to even talk about faith or religious background,

although I'll say, that has been progressively getting better, with an openness to being able to talk about that [faith]." P6 shared,

I have found that the university that I'm at is a bit of a challenge, not for the students, but as an educator, so I am really active in ASERVIC. I started being involved with it because I wanted to see the kinds of things our profession is doing to help counselors learn how to work with clients. And as an educator, I got it; I got to see what people are doing.

Although the inclusion of faith and spirituality is met with opposition, some participants describe positive emotional responses to their experiences teaching students to integrate faith and spirituality into clinical work. Through modeling and valuing diversity in the classroom, counselor educators create environments that embrace difference and set the stage for positive learning and engagement (Alt, 2015; Binkley & Minor, 2020). P6 said, "I enjoy it. I enjoy having the conversations." P7 shared, "I like being in the classroom with students and engag[ing] around a talk. To me, that's almost like doing group therapy in a room full of people engaged with one another. Lots of energy going back and forth." P14 shared,

It feels so satisfying to be able to support students that are kind of wrestling with this and to send them off with encouragement that hey, you don't have to check that [your beliefs] at the door. This is who you are. You can be proud of that.

Emotional responses may emerge due to conflicting values and beliefs (Adams et al., 2015; Johns, 2017). The data analysis revealed values conflict as another subtheme of self-awareness.

Values Conflict

Research literature indicated that clients and counselors might have conflicting values and beliefs (Harris et al., 2017). Students must learn how to navigate value conflicts by learning about their values and how to effectively bracket them to prevent causing harm to clients (McWhorter, 2019). Bracketing is the process of learning how to avoid imposing personal values and beliefs on clients and how to manage value conflicts with clients (McWhorter, 2019). Most

of the study participants talked about value conflicts when teaching faith and spirituality. P14 shared,

If I'm adhering to counseling identity and accepting and caring for anybody that walks in my door, my personal belief about a particular social issue might be different from my clients. But we can guarantee we're gonna have lots of disagreements about values with our clients. It's just a matter of how do we enter those [disagreements] into the process [of counseling].

Sometimes when counselors do not know how to manage conflicting values and beliefs, they refer clients to other counselors (McWhorter, 2019).

Referring clients out is a common unethical practice when counselors make a referral based solely on conflicting values (McWhorter, 2019). The 2014 *ACA Code of Ethics* indicated that referring clients out based on the counselors personally held values, attitudes, beliefs, and behaviors is a form of discrimination and unethical (Lloyd-Hazlett et al., 2017). P3 said, "We have to be really specific and intentional about how we're going to help nurture our students so that they don't fall into this unethical behavior of referring people [out] based on values."

Students must be taught how to appropriately navigate value conflicts to avoid potential ethical and legal violations due to discrimination (McWhorter, 2019). P8 shared, "I want to be cognizant of everyone's kind of faith and spirituality. When I teach that particular lesson, I'm making sure that I'm acknowledging the differences in the classroom." P6 discussed a week-long face-to-face residency with a master's level cohort. In the cohort was a female student who identified as an orthodox Jew. One of her beliefs was that a woman was not allowed to touch or be in close proximity to any man other than her husband. P6 reflected,

She was telling us all about her religion and her beliefs. And she got to where she was talking about, well, 'I am not a Christian; I have certain beliefs.' And it just got to where it's was really cool how we [the cohort] all talked about different religious and spiritual beliefs and how to navigate that [conversation]. And by the end of that week, she said,

I'm so glad to meet somebody that's not an Orthodox Jew; she said, I don't know much about different beliefs.

In contrast, one participant shared that some students do not want to learn about others' values and beliefs. Conversations that challenge students' worldviews could lead to arguments and disruptions in the classroom (Johns, 2017). P7 said, "Many of them [students] really put up barriers. They don't want their ideas challenged." P6 said, "A lot of times, the students will play the counselor that you're supposed to be to get by. But then when they get out in the real world, their identity, it all gets mixed up and merged." Counseling students must be taught how to manage values conflicts to avoid imposing their values and beliefs onto their clients (Miller & Moyers, 2017).

Imposing Values and Beliefs

Imposition of values and beliefs is a common mistake in counseling when the counselor is unsure how to navigate faith and spirituality in a clinical setting (Scott et al., 2016). Imposing values and beliefs are the intentional or unintentional inflicting of the counselor's values and beliefs onto a client (Scott et al., 2016). Half of the study participants discussed helping students become aware of their values and beliefs to avoid imposing them on clients. P3 said, "Students have to recognize, be aware, and understand their own values so that they don't put their values on other people." P4 shared, "How one engages in conversation with a client are you using the language that they're using or are you imposing your own language?"

Sometimes personal values and beliefs are imposed unconsciously (Scott et al., 2016). Participants discussed how to avoid imposing beliefs and values by relying on counseling microskills. Counseling microskills are skills used to help the counselor build an effective therapeutic alliance with the client (Beck & Kulzer, 2018). Microskills include attending, silence,

reflecting, paraphrasing, summarizing, using clarifying questions, focusing, and rapport building (Beck & Kulzer, 2018). P8 said, “I want the students in the class to be comfortable discussing it [faith and spirituality] with clients that they work with, but also being cognizant not to force their beliefs onto their clients, as well.” P5 reflected on a conversation they had with a student. The student asked the instructor, “How do I keep from inflicting my values unconsciously? And how do I deal with something that’s so foreign to me? That’s when I say to them; you rely on the microskills that we talked about so much.” In contrast, some students impose beliefs onto clients because they have not done sufficient work to understand their values and beliefs and how they drive behaviors (Scott et al., 2016).

Several participants discussed students’ motivation for coming into the field of counseling as a source for imposing values and beliefs. Many students come into the field stating that they want to help people and that their purpose for life led them to the field of counseling (Degges-White & Stoltz, 2015). Sometimes an individual’s motivation is misguided and causes them to impose their beliefs and values onto others (Lloyd-Hazlett & Foster, 2017). One participant talked about how their students’ way of thinking about the counseling profession and why they decided to become counselors led to imposing values and beliefs. P13 shared, “I’m going to go into this community mental health center, and I’m going to help these poor unfortunate people and feel better about myself and work through my own stuff.” Helping students navigate their values and beliefs and understand their identity as future counselors is part of the role and responsibilities of counselor educators (Brown-Rice & Furr, 2016; Burns, 2017; Matthews et al., 2018).

Theme 2. Roles and Responsibilities

Counselor educators are at the forefront of preparing master's level counseling students to work with diverse populations (Chan et al., 2018). In an academic setting, counselor educators have multiple roles and responsibilities. It is typical for counselor educators to serve as didactic course instructors and fieldwork supervisors while gatekeeping and monitoring students' learning and development (Schuermann et al., 2018). At the same time, counselor educators nurture and teach students to become skilled and culturally competent counselors (Johns, 2017). Participants in this study identified the following roles and responsibilities: facilitators, supervision, nurturing, and gatekeeping.

Facilitators

A primary role for counselor educators is that of a facilitator (Martinez et al., 2017). Facilitators teach from a student-centered lens, acting as a guide in a classroom setting (Binkley & Minor, 2020). Facilitators also create space for exploration and collaboration through student-led interactions and discussions (Martinez et al., 2017). Several participants talked about their role as facilitators helping students develop skills and competence to integrate faith and spirituality into clinical work. P15 said, "I just wanted to make this process very fun, and especially, with the hard topics, like discrimination, you know, spirituality." P1 said, "My job is to begin the process and have faith that at some point in their life, it may or may not make sense. But I believe I have an ethical obligation to start that process." P4 shared, "I really enjoy walking with students through the process of [learning], especially teaching this class on spiritual integration."

A primary activity of facilitators is to help students develop skills to integrate faith and spirituality in counseling. Adams et al. (2015) stated that students are uncomfortable with faith

and spirituality in academic and clinical settings (Adams et al., 2015). The counselor educator must help students develop comfort and skills in integrating faith and spirituality into clinical work (Barden & Greene, 2015). One participant discussed their students' apprehensions for including faith and spirituality. P6 said,

I don't want to make anybody upset. I don't want to ask, you know, how do I ask about this? It really brought up a lot of conversations because some of them were saying, I'm not real spiritual or religious. I don't know if I feel real comfortable with that. And I said but is treatment in counseling about you? And they're like, yeah, it's not about me.

P6 responded, "That's why it's so important to have those conversations because it's not about you. It's about the client." Counselor educators can teach students by modeling the behaviors they want to see from their students (Bohecker et al., 2017).

Counselor educators must be aware of their faith and spirituality beliefs to support their students' self-awareness (Hilert & Tirado, 2018). When counselor educators are aware of their faith and spirituality, they are better positioned to be empathetic and supportive to students in the learning process (Bohecker et al., 2017). Several participants discussed the importance of counselor educators understanding their faith and spirituality beliefs and having a strong sense of self to teach their students effectively. P1 shared, "I can take a client no further than I have gone." P10 shared a discussion they had with students to help them remain present in session using personal faith and spirituality. They shared,

I also integrate my own spirituality, like it becomes an anchor for me in the presence of my client. So, whether or not my client has the same spiritual orientation as I do. Even when things become somewhat unclear. In a session, maybe I even begin to panic or feel lost. To me, spiritual integration goes back to the belief that I am present there for a reason.

In addition to the role of facilitator, counselor educators serve as supervisors during master's practicum and internship courses (Brown-Rice & Furr, 2016).

Supervision

Supervision in counselor education is the act of training, monitoring, coaching, and evaluating the performance of a counseling student during fieldwork (practicum or internship) (Hunt, 2018). Supervision is critical for counseling students to learn how to deliver culturally competent counseling (Crockett & Hays, 2015; Duffey et al., 2016). Supervision provides counseling students an opportunity to develop faith and spirituality integration skills which foster culturally sensitive counseling and supports improved client outcomes (Shafranske, 2016). Several participants shared their experiences while serving as fieldwork supervisors. P2 said, “Like in fieldwork, you’re under supervision [at your fieldwork site]. When they [students] are using assessments or any other technique, making sure they’re trained in it. But with spirituality, making sure you set the tone for it, and you’re not just introducing it just because you want to introduce it.” P4 talked about helping students become comfortable with faith and spirituality in counseling sessions. They said, “You’ll never learn if you don’t put your toe into the water but do it with supervision. So, if someone brings religious trauma, then have adequate supervision to be able to work through that.”

Teaching students to pay attention to client language and details about their faith and spirituality is critical for supervisors to stress (Williams-Reade et al., 2019). Students uncomfortable with faith and spirituality can overlook cultural identifiers that may differ from their own (Adams et al., 2015; Leighton, 2016). Several participants spoke about students’ lack of attention to critical statements and issues that clients share. P13 said, “It [faith and spirituality] is something that we end up talking about a lot in supervision because that often represents something that ties into other aspects of identity.” P5 said,

I talked a lot in supervision about making sure with the client that you understand what they're talking about, don't gloss over things, you know, and don't try to assume things. They're learning how to double-check themselves and try and watch for things that they're not understanding very well and trying to focus and explore more about what things they don't necessarily understand that well.

Each participant discussed their roles as supervisors and the type of care and support they provided to students in the form of nurturing.

Nurturing

To nurture is to care and encourage the growth and development of someone (Lawrence et al., 2015; Moate & Cox, 2015). Counselor educators nurture students by providing opportunities for building confidence, assessing situations, navigating ethical situations, and self-discovery (Moate & Cox, 2015). Most participants felt that nurturing students was their responsibility, especially when teaching them to integrate faith and spirituality into clinical work. P3 shared, "We have to be really specific and intentional about how we are going to help nurture our students." P8 said, "I try to make sure that there's support and encouragement for them to process these questions [personal faith and spirituality]."

Nurturing students is also about relationship building. Like the relationship built between counselors and clients, the counselor educator and student relationship must be constructed similarly (Bland, 2018). Incorporating empathy, genuineness, and unconditional positive regard are the key ingredients for a positive teacher-student relationship and students' academic success (Bland, 2018). P12 shared, "It's building relationships that foster opportunities in the community because you know them [students] so much more on that spiritual level on a deeper level and who they are."

Solid teacher-student relationships foster exploration and discovery of their role as counselors and their life's meaning (Bland, 2018). Several participants talked about nurturing

students by helping them discover how their faith and spirituality give meaning to life and help shape their identity as counseling professionals. P2 said, “What I try to do is more or less serve as a guide, and I try to do his [God’s] will, or his [God’s] work.” Counselor educators nurture students by helping them clarify the meaning and purpose of becoming counselors (Oxhandler & Parish, 2018).

Helping students visualize their role as counselors and understand their impact on people’s lives is a responsibility of counselor educators (Greggo, 2016). Also, setting the atmosphere for processing experiences and reflecting supports students’ growth (Binkley & Minor, 2020). P10 reflected on a group session in which a student was struggling to work with incarcerated populations. The student complained about clients’ game playing and feeling manipulated. They asked the student why they pursued the field of counseling and explored that question with the group. P10 continued by illustrating the story of Jesus being crucified on the cross. They began describing that Jesus was between two prisoners who were also being crucified, and he was at the point of death when one of the prisoners asked him to remember him in paradise. They described his last conversation, to the students in the group, before dying. After sharing the illustration, P10 said,

And there was like, this hush that came over the group. And it was pretty obvious at that point that God was at work. And that even when we [counselors] want to push away and question what we’re doing, this is where the anchor of our faith becomes so powerful and instrumental in us staying present. And that is if Jesus, in the midst of all of that, is willing to have a conversation with a prisoner and speak hope and I identify something positive in their lives. Can we not do the same?

Gatekeeping

The final subtheme aligned to roles and responsibilities is gatekeeping. Gatekeeping is an ethical responsibility of counselor educators (Brown-Rice & Furr, 2015). Gatekeeping in

counselor education involves monitoring students who engage in behaviors that could harm clients (Schuermann et al., 2018). Seven of the counselor educators interviewed mentioned gatekeeping as necessary to monitor students' interactions with clients related to faith and spirituality beliefs. One participant talked about the ethical dilemma of managing the student's faith and spiritual life and their role as counselors and not denying one over the other. P1 said, "As a counselor educator, there's always a dilemma in my gatekeeping function by saying how do I insist you be in two different lifestyles, versus to respect your right not to be open." One participant reflected on students who hold beliefs that violate ethical and state codes. P3 reflected, "For those students who really resist [abiding by ethical codes] when they hit that place in their practicum and internship a lot of times, they'll wind up in remediation."

Theme 3. Assessment and Case Conceptualization

According to Eryilmaz and Mutlu (2017), counseling skills describe the fundamental capabilities counselors must learn and possess to progress through counseling sessions effectively. Counseling skills are interpersonal and technical attributes that counselors use to help clients navigate personal challenges and issues that prevent them from living a high-quality life (Drab, 2015; Eryilmaz & Mutlu, 2017). Further, the development of counseling skills in graduate programs by master's level counseling students is critical to clients' positive outcomes (Eryilmaz & Mutlu, 2017).

Developed counseling skills ensure the counselor is positioned to effectively understand and listen to their client, build a strong relationship, and support their process of growth and change (Eryilmaz & Mutlu, 2017). Assessment is a counseling skill counselors use to gather information to conceptualize a holistic view of their clients and the problems they present in counseling (Corey, 2016). Assessment and case conceptualization are counseling skills used to

navigate the counseling process (Eryilmaz & Mutlu, 2017). Assessment begins at the first meeting (intake) and continues throughout the counseling process until termination (Butts & Gutierrez, 2018). Participants in this study identified the following assessment and case conceptualization subthemes: cultural identifiers, broaching, and comfort level.

Cultural Identifiers

Cultural identifiers describe the identity of a group or culture or an individual that influences their belonging to a group or culture (National Association of Independent Schools, 2020). Examples of cultural identifiers include age, race, gender, ethnicity, language, socioeconomic status, sexual orientation, faith, and spirituality (Sue et al., 2019). Faith and spirituality are common but overlooked cultural identifiers for people who seek counseling (Sue et al., 2019). Most participants in the study expressed the importance of intentionally checking in with clients regarding their faith and spirituality during the assessment and conceptualization phase of counseling. P1 shared, “If you look at a wellness model, and I taught several of them, spirituality is always part of it. So, you don’t get to pick and choose what aspects of client wellness you want to attend to based on your comfort level.” P6 said, “I wanted the students to be trained to ask the question, is faith, belief, religion, spirituality important in your life? If so, do you want it to be a part of treatment?”

Incorporating specific questions in a biopsychosocial related to faith and spirituality was discussed by several participants. Including faith and spirituality as cultural identifiers ensure that a comprehensive biopsychosocial and case conceptualization is performed (Butts & Gutierrez, 2018). P14 shared, “I explore that [faith and spirituality]. As part of any intake, would be understanding someone’s faith background, if they had a religious background, how much that means to them today.”

Broaching

Some of the participants talked about assessing faith and spirituality by broaching the topic with clients. Broaching is the counselor's intentional acknowledgment and consideration of cultural factors, such as faith and spirituality, to the client's presenting problem (Day-Vines et al., 2018). Existing research literature discusses broaching topics of race, gender, and sexuality within counseling (Day-Vines et al., 2020). However, broaching can be applied to any cultural identifier, including faith and spirituality (Day-Vines et al., 2018). Broaching is an approach to discovering elements of a client's faith and spirituality that may be critical to their treatment plan. P3 shared,

Broaching these topics can be somewhat uncomfortable. So, bringing it up [faith and spirituality] and then allowing the client to really explore and let you know where they're at with things. It's our job to bring this up with clients, to say, I believe that everyone has a spiritual component to themselves; as counselors, our code of ethics says that we have to attend to the spiritual welfare of our clients, and so I'd really like to hear from you about what that means, and how that might be impacting your life.

Broaching also considers differences between the client and counselor when discussing faith and spirituality (Day-Vines et al., 2018). Students need to navigate power differentials between the client and counselor and ensure that areas of privilege and the potential of oppression do not emerge in the relationship (Matthews et al., 2018). P14 shared how they teach students to broach faith and spirituality with clients in a mock client-counselor role-play. They said,

I come from a Christian faith background, and I might look at this differently from how you are considering this problem. And, and I'm just wondering how I can still be a help in processing through this [problem] because I know that we might be looking at it [the problem] from very different angles. And I'm not here to make you believe a certain thing. And at the same time, I understand that my lens might be different from yours. Do you feel like I can still be helpful as we process through this?

Comfort Level

Faith and spirituality discussions in clinical and academic settings may cause discomfort for students and counselor educators (Henriksen et al., 2015; Scott et al., 2016). Several participants discussed students' discomfort when teaching them about assessing and conceptualizing faith and spirituality with clients. P2 stated,

I had a student share with me that she didn't feel comfortable, all this biblical talking. I had another student who shared; it makes me feel uncomfortable when the class talks about it as a whole. I don't want to hear it.

P2 continued with a story about another student that ended a class presentation with group prayer; they said, "One of their peers stated, 'In the future, ask people if they want to participate or not participate,' and I was like, okay, students should have a right to refuse if they are not comfortable."

Although students may be uncomfortable with faith and spirituality conversations, counselor educators are still obligated to introduce the topics and engage students in the discussion (Henriksen et al., 2015). P3 shared, "No matter if it is comfortable or not comfortable, it has to be addressed; it's like all matters of culture. We can't shy away from them as counselors; we can't shy away from them as counselor educators."

P15 reflected,

We just don't discuss spirituality and politics in our classroom; we don't feel comfortable discussing that [faith and spirituality] with our clients. We need to welcome that [faith and spirituality] in a very non-threatening way, such that my spirituality is not going to be judged; your spirituality is not going to be judged. Let's see how we talk about it globally and organically let it flow, let it emerge, let it evolve.

Counselor educators help students conceptualize client cases by increasing comfort integrating faith and spirituality into clinical work (Adams et al., 2015). P8 stated, "I want the students in the class to be comfortable discussing it [faith and spirituality] with clients that they

work with.” P9 shared, “We [counselor educators] are just very uncomfortable when it comes to religion and spirituality because we think that those [faith and spirituality] are totally different [than other cultural identifiers]. I like kind of pushing some discomfort on the students carefully.”

One participant shared an example of pushing students past their discomfort. Previous literature indicated that learning how to move beyond the discomfort of faith and spirituality in counseling improves a counselor’s competence (Osborne & Jones, 2020) and increases the likelihood of positive therapeutic outcomes (Kim et al., 2019). P12 described teaching a student how to counsel a Christian child whose mother had recently died. The student was fearful about integrating faith into her counseling even though the family requested it. Yet, she was unsure of how to incorporate faith and address the mother’s death. P12 shared, “The fear of my student was like, I don’t want to shove anything like faith down her throat. So, I encouraged the student to take the lead from the child.”

Modeling is an effective approach to help students move beyond the discomfort of faith and spirituality (Alt, 2015). P5 discussed modeling the integration of faith and spirituality and acknowledging that students in practicum and internship are novices and experience impostor syndrome, feelings of inadequacy, and incompetence (Johnson, 2019). P5 said, “I think when they have successes in the internship, they’re able to kind of move past that impostor syndrome because they’re seeing that what we’re teaching them really works.” P3 stated, “We can’t assume that students will naturally integrate these things [faith and spirituality], and so we have to be very specific with them, and we have to give them tools to be able to integrate [faith and spirituality].”

Several participants discussed the need to provide concrete approaches to help students manage discomfort when incorporating faith and spirituality in counseling (Minton et al., 2018). P15 talked about the value of an invitation to discuss faith and spirituality in the assessment and conceptualization phase. P15 said, “I teach my students to invite clients to share by giving them a prompt, like, how does this particular thing [marriage] look from your faith-based perspective?” P4 suggested leveraging the informed consent, a standard legal document that all counselors use to outline the details of the counseling relationship and the counseling process with clients (Nusbaum et al., 2017), as an approach to inviting clients to talk about faith and spirituality. P4 reflected,

Ask them if it is important to them. By asking the question, you allow the client to direct you in terms of what they feel comfortable with discussing with you, sort of shedding the assumption that they can’t bring their religious or spiritual life into clinical work—and then taking the client’s lead from there.

Theme 4. Therapeutic Relationship

Successful client outcomes hinge upon the strength of the therapeutic alliance (Nienhuis et al., 2018; Zilcha-Mano, 2016). The therapeutic relationship is built by developing rapport, trust, extending empathy, and being authentic (Zilcha-Mano et al., 2016). Fourteen of the 15 participants indicated that the therapeutic relationship was vital to integrating faith and spirituality into clinical work. Participants identified the following therapeutic relationship subthemes: connection, self-disclosure, and empathetic attunement.

Connection

Connecting with clients on a therapeutic level supports clients’ growth and overall wellness (Niño et al., 2016). Connection is the bond that holds a relationship together (Niño et al., 2016). Several participants talked about developing a connection when building a therapeutic

relationship. P12 discussed connection when growing the therapeutic relationship when they expressed,

You really do have to get to know the person on a more intimate level; it takes a while to get to know your client. And I don't think that spirituality is something that you can necessarily just jump into right away.

P14 said, "I'm able to kind of look at a person's experience as they come in and making sure that they are sensing that, that I accept them, and I value them regardless of whether we share the same faith."

Several participants shared how they teach students to create an atmosphere of nurture and acceptance to foster connection. Previous research literature discussed implementing constructivist learning environments that emphasize safety, nurturing, and peer connection (Lenes et al., 2015). P2 shared, "Create that nurturing client-centered, welcoming space [and] being able to suspend judgment." P4 stated, "It [counseling] is about the helping relationship, it's about the therapeutic relationship. And in that process, you're creating a space, a holding space for the suffering for the joys for all of the client brings to you." One participant suggested that engaging with clients about faith and spirituality happens organically once the connection is strong. P11 said,

Sometimes the sense of spirituality emerges throughout the relationship, and I think, too, there's also at times with some clients who might be like, highly attuned, or highly spiritually engaged. There can emerge an experience of a spiritual connection between counselor and client throughout the work in the relationship as well as throughout the process. When you're really able to create a sense of safety and a sense of openness about faith and spirituality, I think that you can also open it up to some other experiences between the two of you.

Strong connections between clients and counselors also pose a risk of transference, a redirection of emotions felt toward a specific person in their life onto the counselor, and countertransference, a redirection of feeling held by the counselor onto the client (Niño et al.,

2016). Some participants discussed growing the connection between the client and counselor and managing countertransference. P13 stated, “Faith and spirituality represent the potential for a lot of transference and countertransference.” P4 shared a discussion with students about couples therapy and countertransference. They said,

If you’re doing couples therapy, and you come from a specific spiritual or religious background where they [the couple] need to stay together, you have to be really mindful of what you bring and what the client is bringing in that meeting space, and also recognizing this idea of parallel process where you might have a client going through something that you also need to work through yourself and being aware of the countertransference that’s there.

Several participants discussed bracketing as a method to help students learn to manage countertransference. As previously stated, bracketing is the process of setting aside personal values and beliefs to avoid imposing them onto clients (McWhorter, 2019). Teaching students to effectively bracket their opinions and beliefs creates a safe and nurturing atmosphere to develop relationships and connect with clients (McWhorter, 2019). P6 said, “There’s a process of bracketing, a process of how are you going to not impose what you believe on a client from your worldview? And so, then it leads to us [students and counselor educator] talking about transference and countertransference.” P8 said, “When in the session, being open to their [clients] beliefs and being open to their [clients] faith. Not necessarily casting your beliefs or your faith onto the client, and make sure there’s no countertransference.”

Connection with clients also required authenticity (Hewlin et al., 2020). “The more authentic the counselor, the better the therapeutic relationship,” according to P1. Authenticity is an alignment of one’s internal sense of self and the external expression of it (Hewlin et al., 2020). Authenticity for the counselor is the characteristic of being genuine and real (Hewlin et al., 2020). The counselor’s behaviors align with their values and beliefs (Hewlin et al., 2020). P1

discussed the importance of being authentic with clients while developing a therapeutic relationship. P1 illustrated a conversation with a colleague that they often share with students.

They said,

You're hiding behind your technique. You're not being a human being with your clients; become real with them, share with them who you are as a human being. That's what builds that connection. If you're afraid to share who you are, what gives you the right to ask clients to share who they are?

If the client-counselor bond is not developed and there is a weak therapeutic relationship, clients lack trust and a willingness to move forward with counseling (Niño et al., 2016). P9

discussed their experience of a poor connection within the therapeutic relationship. P9 reflected on a story they shared with students. They said,

I tell them this story; it was a really important, meaningful story for me. When I was counseling a few years ago, I had a client that I had seen a few times. That, you know, the rapport was not great, wasn't bad or anything, but you know, we weren't connecting really well. And finally, she just said, I feel like I just don't know you. And that really landed with me and affected me and affected my approach to counseling.

Self-disclosure

For counselors, sharing a worldview, philosophy of life, and how they make sense of the world are a form of self-disclosure (Day-Vines et al., 2018). Self-disclosure is frowned upon in counseling due to the potential of shifting the focus from the client to the counselor and impeding treatment (Pinto-Coelho et al., 2016). However, when appropriately applied, self-disclosure is a clinical skill that helps build trust, fosters empathy, and strengthens the therapeutic relationship (Pinto-Coelho et al., 2016). P9 said, "I think that our students are taught to avoid it [self-disclosure] quite a bit, just for the protection of clients." P14 shared,

We can decide on using the clinical skill of self-disclosure, [and] to what degree it is appropriate for the client at the moment. Being able to self-disclose at a moment that offers relation and connection with them as their counselor to really reinforce that point

that I'm here with you that I don't understand everything that you've experienced, but you're not alone in this; I've experienced some of what you've, you've described.

P9 said,

We [counselor educators and students] talked about some of the assumptions of counseling is that you are going to build a relationship with the person, you're going to have this connection that promotes healing. They [client] should have a sense of how you make sense of the world if you're going to be the person who's providing them the structure to heal and get better.

Self-disclosure can promote trust and connection between the client and counselor, strengthen the therapeutic relationship, and promote healing (Pinto-Coelho et al., 2016). P9 stated,

We talked about some of the assumptions of counseling is that you are going to build a relationship with the person, and you're going to have this connection that promotes healing. So how can you do that without being authentically in that relationship? And how can you do that? If you aren't able to self-disclose, at least some things about yourself.

Self-disclosure can be a bridge to extending empathy to clients (Levitt et al., 2016). Empathy strengthens the therapeutic relationship demonstrating to clients that the counselor sees them, hears them, and wants to help them navigate their problems (Brown-Rice & Furr, 2016).

Empathetic Attunement

Empathetic attunement describes the ability of the counselor to walk in the shoes of the client to understand their perspective and lens of the problems presented (Nienhuis et al., 2018).

A vital attribute of a solid therapeutic relationship is empathy (Nienhuis et al., 2018). P1 shared,

My challenge [as a counselor] is to see the world through your eyes, not to have you see it through mine. And I'm not sure that I would find a counseling faculty member who would dispute the need for empathy in every therapeutic encounter. If you cannot be empathetic, you can't do counseling.

P13 said, "I feel like my students come from a place of wanting to be helpers and experiencing a lot of empathy [for people]." Counselors extend empathy by creating safe spaces

for clients to be vulnerable (Nacheman, 2020). Creating a safe space to be vulnerable leads to a positive connection (Niño et al., 2016). One participant talked about empathy as a function of their personal relationship with Jesus. P10 shared,

When people come to us [counselors], they are bringing their vulnerability. He [Jesus] valued vulnerability. And because of that, he was safe. He welcomed vulnerability; he affirmed that vulnerability. And when we're working with our clients, we better recognize that we have the opportunity to be the hands and feet of Jesus and that we can welcome that vulnerability; we can be safe with that vulnerability.

Theme 5. Academic Programs

Academic programs aligned to the study were CACREP accredited public or private institutions with clinical mental health counseling, school counseling, or marriage and family counseling therapy programs. A critical element of counselor education programs is helping students develop cultural competence (Barden & Greene, 2015). Participants in this study identified the following academic programs: coursework and type of program.

Coursework

Coursework is the work assigned and performed as part of the counseling student's course of study (Brooks et al., 2015). Most counselor education programs are unstructured and do not have universal standards to integrate faith and spirituality into the curricula (Trahan & Keim, 2019). Half of the participants had something to share about their experiences teaching faith and spirituality in an environment with no structure or CACREP standards. Most of the comments were about the loose nature of including faith and spirituality in coursework. P1 said, "So students get this message repeatedly in practicum and internship, obviously, in their course, in cross-cultural counseling, and their pre-clinical work and family."

P2 said, "A lot of it [faith and spirituality] comes up in my career class." P5 said, "I am probably lacking in a structured lecture that I could provide, but we definitely talk about it

throughout all of my courses.” P7 shared, “I just got through teaching our ethics course, professional ethics, and I try and integrate spirituality into the ethics course.” P8 shared, “I currently teach as an adjunct professor at [redacted], where we have to incorporate faith and spirituality in our lessons.”

Several participants talked about a large amount of content packed into the CACREP required multicultural course. Current CACREP standards require an exuberant amount of information to be delivered in one multicultural course that often neglects to include any substantial content related to faith and spirituality (Brooks et al., 2015). Some participants suggested that CACREP introduce a stand-alone faith and spirituality course. P6 shared, “The problem is, is that that multicultural class is packed with every iota of cultural subcultural, you know, all this stuff, with a little touch of spirituality or religion, you know, or faith.” P7 said, “There’s just so much stuff material that we have to cover in the master’s program in order to satisfy the CACREP standard, right, so much that it’s hard to squeeze this in as well. It’s really hard, especially, you know, I want to squeeze a lot of videos, and there’s just no room for it all.” P9 shared,

There’s no CACREP version of this course [faith and spirituality]. There’s nothing where you can directly pull from to get an idea of what should be done with your time. There’s just not a lot of opportunities in the CACREP structure to talk about this stuff.

Type of Program

CACREP accredited institutions include public, private, faith-based, traditional brick and mortar, and online programs. Sheperis et al. (2020) discussed the ethical and legal challenges associated with online programs, including security, liability, and face-to-face interactions. Participants discussed the pitfalls of online programs and teaching faith and spirituality versus traditional face-to-face programs. P3 shared, “It’s so hard in online programs. It’s just hard to

address these kinds of things in online programs because you just don't have enough contact with the students, in my opinion." P6 said, "I find sometimes it's really hard to be honest, in an online school, where you're not seeing people on a regular basis to kind of catch that, to help them kind of formulate that professional, personal, spiritual, all these different identities." P8 shared, "Both classes are online, so making sure that the student felt like they were in a safe space online is important."

Several participants talked about the expectations and social norms of teaching in the Bible Belt and the region's extensive influence on universities. The Bible Belt is a region of the Southern United States where conservative Christianity significantly influences society, politics, and church attendance (Webster et al., 2015). The Bible Belt includes Texas, the Carolinas, Georgia, Kentucky, Tennessee, Missouri, and the Gulf states (Webster et al., 2015). P5 shared, "I was teaching in the South, and I was in the Bible Belt. It came out all the time; people were always talking about their belief system." P11 shared, "I was aware of an overarching sense of the Southern Baptist orientation amongst many of my students, but then also wanting to continue to create a space where all religious backgrounds and beliefs were accepted." P6 shared,

I live in [redacted], which is considered the Bible Belt. A lot of times, people will seek you out, thinking you're a Christian or a person of faith. In my community, it's usually "Are you a Christian?" And I've had to address that question so many.

Faith-based programs offer students the opportunity to learn how to integrate faith and spirituality into clinical work more directly than non-faith-based institutions (Leighton, 2016). Three participants talked about why students come to their faith-based institutions. P4 shared, "I teach at a seminary. And so, it's a CACREP accredited clinical mental health counseling program, but the students that [attend] come because they want to know how to address spirituality and religion in their work." P7 said,

We, as a faculty at [redacted], think about integrating spirituality into our program is one of the functions of trying to broaden students, minds and awareness about cultural diversity, cultural humility, those kinds of things, that spirituality is a part of that cultural stuff. And all of that is interwoven.

It is common for institutions to avoid any magnification of faith and spirituality in the curriculum as it may cause discomfort and division amongst faculty, staff, and the students (Johns, 2017). Two participants talked about public CACREP accredited programs, and the challenges experienced when attempting to increase faith and spirituality programming. P6 shared, “I actually proposed to my university way back that we should offer a class as an elective on spirituality, religion, and beliefs. And they [said] we don’t need it.” P2 shared, “This is not a faith-based program, you know, this is at a public institution is a brick and mortar. So, you have to be very careful.”

Theme 6. Methods and Approaches

Methods and approaches are the activities counselors employ to help clients modify behaviors and change (Adams et al., 2015; McAuliffe & McAuliffe, 2019). The use of methods and approaches in counseling are chosen for various purposes, including but not limited to processing traumas (Currier et al., 2021), making behavior changes (McAuliffe & McAuliffe, 2019), improving their mental health (Adams et al., 2015), and adjusting their attitudes and beliefs (McAuliffe & McAuliffe, 2019). Participants identified the following methods and approaches: theories and techniques.

Theories

Theories provide a framework that counselors use to conceptualize and interpret client behaviors, thoughts, and feelings and help them develop a plan from diagnosis to treatment (Corey, 2016). Several participants discussed specific theories helpful in teaching students to

integrate faith and spirituality into clinical work. P9 shared, “Relational cultural theory is a theoretical approach that kind of pushes this idea of, listen if you’re going to build a relationship with a client, that might mean that you have to be willing to change a little bit right alongside them.” P12 said,

I talked to my class about the hope action theory. Even though you’re in a state of chaos, it is looking for those elements, kind of like faith, and those elements of spirituality where, you know, something that gives you some hope.

P13 stated,

What I appreciate, and it’s pretty cool, actually, is that several of my students who are working in substance use facilities, they actually have called Wellbriety, which is a native based healing version of [a] 12 step [program] that incorporates traditional Native American medicine and things that are traditional cultural traditions as part of the substance use treatment process.

Techniques

Theories typically align with a specific set of techniques or activities (Adams et al., 2015). Techniques can be any creative approach to helping clients explore their problems, relationships, and behaviors (Adams et al., 2015; Currier et al., 2021; McAuliffe & McAuliffe, 2019). Participants in the study shared several techniques to help students learn how to integrate faith and spirituality into clinical work. P4 shared, “Giving a set of tools to students is useful to be able to use, like a spiritual genogram, or spiritual life map with a client if that feels like that’s helpful too for your client’s development.” P2 shared, “I may talk with them about [how to approach clients with tools like] mindfulness or self-care practices” P3 talked about teaching students how to give clients homework; they said,

Pay attention to what speaks to you [client], you know if you want to read your Bible or look at an App or whatever, or if you want to get a concordance and look for a certain topic. I want you just to come back and tell me was there a verse that spoke to you, was there a passage that spoke to you, did you hear someone speak, and something they say spoke to you, and really putting it on the client to explore.

P9 said,

I like making ethical scenarios; they [students] would break up into groups, and four or five people would tackle each ethical scenario [in a small group]. Then, prepare a written assignment for the class where they have to talk about their initial reaction to the scenarios.

In addition to ethical scenarios about faith and spirituality, P9 said, “I always look for guest speakers. So last year, I had an Islamic sheik and an Episcopalian priest join us, both of whom were trained as counselors.” Religious leaders help teach students about the foundational aspects of world religions (Sauerheber et al., 2014). P10 discussed teaching students what to do in counseling sessions when clients ask for specific activities aligned to their faith practices. P10 said,

There are times that we practice certain spiritual things because they’re asking for that, like prayer, like reading [sacred texts], giving them a Psalms to read, meditation, those types of things that we can be overt if the client is asking for that.

P14 shared,

If they [student] are not comfortable praying with people, I would encourage them not to incorporate prayer into practice with a client. But, if they [student] are comfortable with it, and they really sense a client’s needs, to put that out there to see if the client would benefit from that.

Two participants discussed experiential activities. Experiential activities encourage learning and development through social engagement (Hilert & Tirado, 2018). Experiential activities also reduce bias and prejudice and promote competence development (Binkley & Minor, 2020). Several participants discussed introducing experiential activities to develop counseling skills. P12 discussed an opportunity to attend a grief and loss camp they extended to students. They said,

I involve and welcome any of my students who have their clearances [qualifications for fieldwork], anybody who is interested in that experience because I’ve found that even

though they've gone through all these classes for 3 years when you get into practicum, people are not ready for it [clinical work], they're just not ready.

P15 talked about using sand trays to teach students to integrate faith and spirituality into clinical work. P15 said,

I do a lot of sand trays; there are figurines, which are faith-based gods like Jesus, Mary, the cross. We invite clients to just, you know, give a prompt, like, you know, how does this particular thing look from your faith-based aspect? How does your marriage look from this faith-based aspect? Just take two figurines, which speaks about your current faith in God, your relationship with God, how it's been affected, post this event [e.g., your divorce, coming out for, for a teenager] so and they would put that on the sand, and build a worldview out of it.

P15 further stated,

I teach my students how to use creative art or expressive art to speak about spirituality in a clinical setting, which is nonjudgmental, in nature, non-threatening, and it's mostly very inclusive and understanding of someone coming from a different, diverse perspective. Using creative interventions over just talk therapy helps clients unfold and become less anxious, less apprehensive about the process, about the counselor, themselves, and then communicating about the problems without holding back.

Data Omitted from the Analysis

Participants answered the following interview questions: How do you define faith? How do you define spirituality? The questions were asked to understand the participants' perspectives of the two constructs, *faith* and *spirituality*. According to Bergamo and White (2016), faith is an individual's belief system comprised of trust, confidence, loyalty, honesty, and belief in a god or higher power. Participants' responses echoed the research literature's definition of faith in that most participants felt that faith was about belief in a higher power and something beyond themselves. P9 shared, "Faith, I guess, is a system of beliefs that help you to make sense of the world." P6 stated, "I defined faith as believing in something that is beyond the physical realm, like believing that there is a greater force at work." In addition to their definitions for faith, participants shared their thoughts about spirituality.

Spirituality is a multidimensional construct that encompasses a search for meaning, life's purpose (Paul Victor & Treschuk, 2019), a recognition of a higher power or something greater than oneself, a connection to nature and the universe, beliefs, ethics, values, and principles within a relationship with a higher power (Bohecker et al., 2017). Participants indicated that spirituality was about connection and relationship with something greater than themselves and searching for meaning. P4 said, "Spirituality is an internal relationship with whatever is deemed to be sacred." P13 shared, "I think spirituality to me is like connection in a meaningful way to something outside of yourself. And whether that's like nature, or the earth, or some sort of higher power."

Most participants discussed spirituality as being about meaning and purpose for life. Spirituality shapes an individual's beliefs (Scott et al., 2016), connection to a higher power (Tudor, 2019), and meaning for life (Paul Victor & Treschuk, 2019). P12 shared, "Spirituality for me, personally, is it's leading you to a more faithful experience and more awareness of your higher purpose." P7 stated, "Spirituality is the way that we pursue and respond to what matters most to us." P10 said, "Spirituality not only is transcendent beyond my human ability, but it also provides a sense of meaning and purpose."

Summary

This study was initiated to answer the research question: "What are counselor educators' experiences at CACREP accredited institutions teaching master's level counseling students to integrate faith and spirituality into clinical work?" The purpose of the study was to discover counselor educators' experiences teaching master's level students to integrate faith and spirituality into clinical work. Fifteen counselor educators participated in semi-structured Zoom interviews. The participants provided detailed information about their experiences. Each of the

recorded interviews was automatically transcribed using the Zoom platform transcription. The researcher uploaded the transcripts and audio recordings into MAXQDA to review and edit each transcript for accuracy. MAXQDA was used to help the researcher organize and code the participant data using inductive thematic analysis (Percy et al., 2015). A summary of each participant's demographics, a comprehensive list of themes and patterns that emerged from the data, and a matrix of themes and patterns of participants were provided in narrative and tabular form. The researcher used memoing and maintained a reflective journal to establish an audit trail and mitigate researcher bias throughout the data analysis.

Inductive thematic analysis (Percy et al., 2015) of the 15 participants' transcripts revealed six final themes, and each final theme included corresponding sub-themes. The final six themes were (a) self-awareness, (b) roles and responsibilities, (c) assessment and case conceptualization, (d) therapeutic relationship, (e) academic programs, and (f) methods and approach. Participants' responses were combined into one synthesis to illustrate counselor educators' experiences teaching master's level counseling students to integrate faith and spirituality into clinical work. The following is a summary of the six final themes.

The first theme, self-awareness, was identified by participants as the most significant factor in teaching students to integrate faith and spirituality into clinical work. Self-awareness is the recognition of personal values, beliefs, and truths that shape a person's worldview (Shuler & Keller-Dupree, 2015). All 15 participants' responses indicated that self-awareness was a critical factor in teaching students to integrate faith and spirituality into clinical work. Participants also described teaching students to increase awareness of their many-faceted identities, personal values, and beliefs to help students discover how they view the world and other people. Additionally, participants described their positive and negative emotional responses to students

and faculty peers when teaching faith and spirituality in an academic setting, noting challenges and barriers.

All participants described the second theme, roles and responsibilities, as a crucial component of counselor education and supervision programs (Brown-Rice & Furr, 2016). Participants discussed challenging students, walking them through areas of discomfort, and posing real-world situations to guide students' learning and expand their knowledge (Dewey, 1938/1997). Participants identified facilitator, supervision, nurturing, and gatekeeping as their most common roles and responsibilities. Participants reported a major obligation and accountability for ensuring that students were knowledgeable and competent to integrate faith and spirituality into all phases of the counseling process. Two phases of the counseling process, assessment and case conceptualization, and therapeutic relationship, were identified as the third and fourth final themes.

The third theme was assessment and case conceptualization. Faith and spirituality are cultural identifiers that may or may not be part of a client's cultural make-up. However, assessing and conceptualizing a client's faith and spirituality into their intake, treatment plan, and interventions is necessary (Butts & Gutierrez, 2018). Most participants shared that they teach students to ask questions to assess a client's faith and spirituality as a standard practice, just like assessing for race, gender, sexual orientation, and socioeconomic status. Some participants noted that discomfort with faith and spirituality in a classroom setting caused them to avoid the topic, whereas others reported teaching students how to broach it with clients. These findings connect with previous research that showed most counselors are uncomfortable with faith and spirituality in clinical settings (Henriksen et al., 2015; Reiner & Dobmeier, 2014; Scott et al., 2016).

Therapeutic relationship emerged from the data as the fourth theme. A strong therapeutic relationship is well documented in the literature as the most important factor in positive counseling outcomes (Kivlighan et al., 2016; Zilcha-Mano et al., 2016). Most participants agreed that the client-counselor connection needed to be developed before initiating in-depth conversations about faith and spirituality. P1, P10, P13 noted empathetic attunement as a development area for students to ensure an effective therapeutic relationship. P9, P10, and P15 also discussed the appropriate and inappropriate use of self-disclosure as a microskill (Pinto-Coelho et al., 2016) in developing a therapeutic alliance.

The fifth theme that emerged from the data was academic programs. Data analysis revealed coursework and type of institution as sub-themes of academic programs. Half of the participants shared that faith and spirituality usually appeared in the CACREP required multicultural or standalone religion and spirituality elective courses. Participants' responses confirmed previous literature findings that faith and spirituality are typically taught only in the CACREP required multicultural courses (Sheperis et al., 2020). In contrast, participants from faith-based CACREP institutions reported including faith and spirituality across all the curricula. Some participants from nonfaith-based institutions shared that they have less inclusion of faith and spirituality in their coursework; thus, they intentionally created opportunities to include the topic to support student learning and competency development. Participants also discussed challenges teaching online compared to face-to-face and the barriers online formats cause when teaching sensitive topics like faith and spirituality. The primary challenges noted by participants was the inability to be in-person with students to make connections, engage in face-to-face dialogues, assess body language, and conduct experiential activities, such as role-plays.

Connecting with students using various methods and approaches emerged from the data analysis as the sixth theme. Methods and approaches are the strategies, theoretical frameworks, and techniques used by counselor educators to teach faith and spirituality integration to students (McAuliffe & McAuliffe, 2019). Binkley and Minor (2020) discussed constructivist approaches as effective in teaching cultural topics in the classroom, which aligned with participants' responses from the study. Most participants shared several techniques to teach faith and spirituality integration to their students, including written assignments, reflections, guest speakers, case studies, and role-plays. Participants also shared several theoretical orientations they used as a framework to introduce faith and spirituality to their students. Previous literature indicated that theoretical frameworks aid in teaching cultural topics by helping students focus on competence development (Stewart-Sicking et al., 2017).

Data analysis of the participants' transcribed interviews yielded six final themes and corresponding sub-themes. Counselor educators provided detailed narrative responses regarding their experiences to answer the research question, "What are counselor educators' experiences at CACREP accredited institutions teaching master's level counseling students to integrate faith and spirituality into clinical work?" The information gathered from the participants' responses was sufficient in answering the research question and filling the gap in the literature (Johns, 2017) related to counselor educators' perspectives about the integration of faith and spirituality in clinical settings. The experiences shared by participants shed light on counselor educators' roles in teaching master's level students to integrate faith and spirituality in a classroom setting. Participants reported that creating learning environments that encourage identity exploration and self-reflection promoted self-awareness which aided in students becoming comfortable with faith and spirituality in clinical settings. Moreover, teaching students to develop robust therapeutic

relationships with clients sets the stage for open communication about the inclusion of faith and spirituality in the assessment and conceptualization phases of counseling. Finally, academic programs and counselor educators' methods and approaches were identified as key themes that emerged from the data.

Chapter 5 will discuss in detail the six themes and the corresponding sub-themes of (a) self-awareness, (b) roles and responsibilities, (c) assessment and case conceptualization, (d) therapeutic relationship, (e) academic programs, and (f) methods and approaches. The lens of constructivism learning theory (Dewey, 1938/1997) will be the basis of the discussion comparing and interpreting the study findings through the theoretical framework and leveraging previous literature. The chapter also includes limitations of the study, implications, and recommendations for future research.

CHAPTER 5. DISCUSSION, IMPLICATIONS, RECOMMENDATIONS

Chapter 5 presents a summation and assessment of the dissertation research. This chapter includes a summary, discussion, and conclusions based on the results that begin to fill a gap in the existing research literature (Johns, 2017) by providing information about counselor educators' experiences at CACREP accredited institutions teaching master's level students to integrate faith and spirituality into clinical work. A comparison of findings with the theoretical framework, constructivism learning theory (Dewey, 1938/1997), and previous literature follows. An interpretation of the findings from the inductive thematic analysis (Percy et al., 2015) and the connection to counselor education is shared. Chapter 5 concludes with limitations, implications for practice, recommendations for future research, and guidance for counselor educators to teach students to integrate faith and spirituality into clinical work.

Summary of the Results

The need for this dissertation research study emerged due to the gap in the scholarly, peer-reviewed literature, and research literature addressing faith and spirituality in counselor education from counselor educators' perspectives (Giordano et al., 2016; Johns, 2017; Sauerheber et al., 2014; Trahan & Keim, 2019). In contrast, addressing faith and spirituality in counseling from the perspectives of counselors and prelicensed counselors has been heavily researched (Adams et al., 2015; Henriksen et al., 2015; Reiner & Dobmeier, 2014; Scott et al., 2016; Stewart-Sicking et al., 2017). The research literature indicated that integrating faith and spirituality into clinical work improves therapeutic outcomes (Bland, 2018; Maximo, 2019; Osborne & Jones, 2020; Yamada et al., 2020). Moreover, addressing a client's cultural identifiers strengthens the client-counselor relationship and improves rapport (Bayne et al., 2019; Gladding & Crockett, 2019; Harris et al., 2018; Stewart-Sicking et al., 2017).

Thus, the available literature and research through the lens of constructivism learning theory (Dewey, 1938/1997) were used to conduct a generic qualitative study, which implemented semi-structured interviews to collect data and inductive thematic analysis to analyze the data (Percy et al., 2015). After a critical review of the data, the findings from the dissertation research are believed to sufficiently answer the research question: “What are counselor educators’ experiences at CACREP accredited institutions teaching master’s level counseling students to integrate faith and spirituality into clinical work?”

Fifteen counselor educators were interviewed about their experiences teaching students to integrate faith and spirituality into clinical work. The sample consisted of counselor educators greater than 18 years of age, who hold active counseling licenses, and teach as a faculty in a Council for Accreditation of Counseling and Related Educational Programs (CACREP) accredited clinical mental health, school counseling, or marriage and family counseling therapy program. The participants in the study were recruited using electronic flyers and letters distributed using the Counselor Education and Supervision Network Listserv (CESNET-L), three Facebook groups, and electronic email. Potential participants contacted the researcher for an initial screening. Participants who met the inclusion criteria were enrolled in the study, scheduled for an interview, and provided an informed consent document. As discussed in Chapter 4, virtual interviews were completed, and the responses were transcribed. Subsequently, all interview transcripts were analyzed using inductive thematic analysis (Percy et al., 2015).

The results of the study showed that counselor educators are at the forefront of preparing counselors to integrate faith and spirituality competently and effectively into clinical work (Brown-Rice & Furr, 2016). Osborne and Jones (2020) indicated that the authoritative position of counselor educators makes them influential in their students’ development of conceptualizing

and integrating cultural factors effectively. In their roles as instructors, supervisors, mentors, advocates, and gatekeepers, counselor educators ensure that master's level counseling students are taught how to be culturally sensitive and include clients' faith and spirituality identifiers (Matthews et al., 2018). Studying counselor educators' experiences teaching students to integrate faith and spirituality into clinical work provided new knowledge and understanding (Dewey, 1938/1997) of specific competency areas students must learn in counselor education programs (Mintert et al., 2020).

Data from the study showed that counselor educators play a significant role in the growth and development of master's level counseling students (Matthews et al., 2018). Although practicing as a prelicensed counselor is crucial to development, literature indicated that learning basic skills and cultural competency in the classroom are most important (Evans et al., 2021; Johns, 2017; Northey et al., 2020; Scott, 2020). Participants shared that faith and spirituality conversations frequently emerged in their courses. These discussions were used as opportunities to nurture their students' growth and development and assess the ethical implications of faith and spirituality in clinical settings (Evans et al., 2021). Conversations about faith and spirituality between counselor educators and students are the essence of constructivism learning theory in that the interaction between people fosters meaning-making and new knowledge (Dewey, 1938/1997). Information gathered from this study may improve counselors' professional identity and cultural competence around faith and spirituality. Moreover, the beginning stages of professional identity and competence development must originate from the teaching, and support students receive in the classroom (Johns, 2017).

The participants described their role in the classroom as essential in teaching students how to develop self-awareness related to personal values and beliefs and how to include faith

and spirituality in clinical work (Dorn-Medeiros et al., 2020; Gonzalez-Voller et al., 2020; Scott, 2020). Some participants described their role as facilitators of learning or learning guides to help students understand ethical approaches to integrating faith and spirituality. Additionally, participants indicated that a large part of their role is nurturing, caring, and fostering growth and development opportunities for their students (Bowser et al., 2020; Lawrence et al., 2015). Challenging students' assumptions and posing real-world issues for students to ponder and explore (Dewey, 1938/1997) were discussed by participants as factors to support the learning process. Participants shared experiences as supervisors helping students navigate fieldwork and practically including faith and spirituality in all aspects of the counseling process from intake and assessment (Corey, 2016; Diallo et al., 2021) through interventions (Dukes, 2021; Gehart, 2015; Mintert et al., 2020).

Assessment and case conceptualization was another area that emerged from the data. Participants described teaching students how to include faith and spirituality during the counseling assessment and conceptualization phase as a vital first step (Attoe, 2020; Day-Vines et al., 2020; Hilert & Gutierrez, 2020). The existing research literature indicated that counselors consistently feel uncomfortable discussing faith and spirituality with clients but want to learn how to integrate them (Day-Vines et al., 2020; Walsh et al., 2021). Teaching students to appreciate differences and welcome diverse perspectives are key tenets of constructivism learning theory (Dewey, 1938/1997) and necessary characteristics in helping students integrate faith and spirituality in clinical settings.

Research literature indicated that including cultural identifiers in intake sessions and case conceptualization is vital (Matthews et al., 2018; Osborne & Jones, 2020). Moreover, the literature showed that many clients want their faith and spirituality included in their counseling

process (Akwash, 2020; Diallo et al., 2021). Day-Vines et al. (2020) discussed increased credibility and value in client satisfaction when cultural identifiers are acknowledged and integrated into the counseling process by broaching the topic. Day-Vines et al.'s (2020) research indicated that teaching students how to broach faith and spirituality helps them become comfortable with the topic and more knowledgeable about integrating faith and spirituality into clinical work. Likewise, participants in the present study indicated that modeling how to broach faith and spirituality in the classroom was essential to helping students feel comfortable talking about the topic with peers.

Broaching engages clients in conversations about sensitive cultural factors relevant to the client's presenting problems (Day-Vines et al., 2021; King, 2021). Some participants talked about effective methods to broach faith and spirituality with clients (Day-Vines et al., 2020). Participants shared that, like race, broaching faith and spirituality breaks down barriers between the client and counselor and opens communication creating avenues to include faith and spirituality in counseling sessions (Day-Vines et al., 2021). Some participants discussed their discomfort and students' discomfort with faith and spirituality and strategies to minimize discomfort because the topic must be addressed. Avoiding faith and spirituality may lead to counselors' neglecting cultural identifiers that should be addressed and fostering incompetence (Dukes, 2021; Schwarz & Roe, 2015). Sami et al. (2021) discussed the incongruence between teaching faith and spirituality and maintaining a separation of beliefs due to societal norms. Welcoming diversity of perspectives, values, and beliefs in the classroom fosters learning (Dewey, 1938/1997) and equips students to be competent in addressing diverse beliefs and perspectives in a clinical setting (Sami et al., 2021).

Addressing faith and spirituality in counseling demonstrates attunement and empathy, critical elements of developing the therapeutic relationship (Bland, 2018; Maximo, 2019; Walsh et al., 2021). Research literature indicated that developing a strong therapeutic relationship is the most important factor in positive client outcomes (Nienhuis et al., 2018; Zilcha-Mano, 2016). Many participants stressed the criticality of the therapeutic relationship and teaching students how to develop a strong client-counselor bond. Most participants stressed the value of having a quality connection with clients as an essential component of their client-counselor relationship to integrate faith and spirituality into their treatment effectively. An effective relationship between clients and counselors facilitates the exchange of knowledge and meaning-making, which is the crux of constructivism learning theory (Dewey 1938/1997). Participants discussed the therapeutic relationship centered on connection, including collaboration, managing countertransference, and creating a safe and nurturing environment. Additionally, participants shared that the appropriate application of self-disclosure and empathetic attunement were necessary for a strong therapeutic alliance.

The therapeutic relationship is critical for effectively integrating faith and spirituality into clinical work (Nienhuis et al., 2018; Zilcha-Mano, 2016), but the academic institution and learning format plays a pivotal role in the ease or difficulty of teaching students (Sheperis et al., 2020). Participants indicated that the setting, online or face-to-face, and the educational institution, faith-based or nonfaith-based (secular) (Sami et al., 2021), also play a significant role in the ease or difficulty of helping students develop the competencies to integrate faith and spirituality into clinical work (Barden & Greene, 2015; Haddock et al., 2020; Plante, 2016). Some participants shared that facilitating faith and spirituality conversations online was more complex than in face-to-face settings (Haddock et al., 2020). Similarly, the type of institution can

challenge counselor educators in teaching faith and spirituality effectively (Sami et al., 2021). The lens of constructivism learning theory (Dewey, 1938/1997) values diverse experiences while constructing meaning through interaction. Online formats versus face-to-face instruction provide a diverse experience for master's level counseling students and counselor educators alike. Likewise, participants reported that teaching at faith-based institutions versus nonfaith-based institutions also garnered a mix of experiences.

Existing research literature indicated that teaching faith and spirituality integration at faith-based CACREP institutions is less complex than at secular CACREP institutions (Dorn-Medeiros et al., 2020; Evans et al., 2021; Sami et al., 2021). Participants reported that secular institutions were less likely to include faith and spirituality beyond the multicultural course required by CACREP (Sheperis et al., 2020). Participants reported opposition and resistance from secular institutions when incorporating content and activities to promote faith and spirituality (Dorn-Medeiros et al., 2020). Although CACREP has specific guidelines and expectations for counselor education programs, there is great freedom in what counseling programs choose to introduce within the curriculum related to faith and spirituality (Trahan & Keim, 2019). Participants who taught at faith-based institutions discussed consistency in including specific coursework related to faith and spirituality, whereas participants from secular institutions included faith and spirituality within multicultural courses at the instructor's discretion (Johns, 2017; Leighton, 2016).

Counselor educators are free to incorporate faith and spirituality in their courses to provide multicultural competency training (Cornish et al., 2014; Dorn-Medeiros et al., 2020). Participants discussed methods and approaches they incorporated to teach students faith and spirituality integration (Dukes, 2021). Previous literature indicated that constructivist approaches

to learning (Binkley & Minor, 2020) set the stage for students to construct meaning through interaction, explore real-world issues, and participate in self-guided exploration (Dewey, 1938/1997). Several participants shared specific theoretical orientations applicable to helping students conceptualize and interpret client behaviors, thoughts, and feelings and connect to the client’s faith and spirituality identifiers (Dorn-Medeiros et al., 2020; Corey, 2016; Prescod et al., 2020; Trahan & Keim, 2019). Likewise, counselor educators shared specific techniques to explore clients’ problems and relationship dynamics while incorporating their faith and spirituality (Adams et al., 2015; Currier et al., 2021; McAuliffe & McAuliffe &, 2019). Constructivism learning theory provided an appropriate theoretical framework to study counselor educators’ experiences teaching master’s level students to integrate faith and spirituality into clinical work. Table 2 displays the six final themes aligned with the framework of constructivism learning theory.

Table 2

Final Themes Alignment to Constructivism Learning Theory Framework

Theme	Constructivism Learning Theory Framework
Self-Awareness	Value diverse experiences while constructing meaning through interaction Reflection and self-guided exploration
Roles and Responsibilities	Value diverse experiences while constructing meaning through interaction Challenging assumptions and appreciating multiple realities
Assessment and Case Conceptualization	Value diverse experiences while constructing meaning through interaction Exploration of real-world issues
Therapeutic Relationship	Value diverse experiences while constructing meaning through interaction Challenging assumptions and appreciating multiple realities

Theme	Constructivism Learning Theory Framework
Academic Programs	Value diverse experiences while constructing meaning through interaction Exploration of real-world issues
Methods and Approaches	Value diverse experiences while constructing meaning through interaction Challenging assumptions and appreciating multiple realities Reflection and self-guided exploration

Discussion of the Results

This research study utilized a qualitative research methodology that explores how people experience interactions with others and issues within the world (Aspers & Corte, 2019). A generic qualitative inquiry design (Percy et al., 2015) was an appropriate methodology for understanding counselor educators’ content reports, attitudes, beliefs, and experiences and answering the research question: “What are counselor educators’ experiences at CACREP accredited institutions teaching master’s level counseling students to integrate faith and spirituality into clinical work?” Fifteen counselor educators participated in the study and provided an in-depth description of their teaching experiences (Percy et al., 2015).

Virtual Zoom interviews were used for all participants. Minor connectivity challenges were encountered from the Zoom application. One participant experienced a lost connection, and the researcher had to call back into the interview and restart the session. The Zoom application was both convenient and easy to use for all participants. Most participants indicated that they used Zoom to interact with colleagues, peers, and students. Responses from all participants

provided a comprehensive understanding of counselor educators' experiences teaching students to integrate faith and spirituality into clinical work (Aspers & Corte, 2019; Percy et al., 2015).

Participant responses included descriptions of personal faith and spirituality and the counselor educators' roles and responsibilities. Participants also described a vital need for students to understand their own faith and spirituality (Bowser et al., 2020) and learn how to bracket it in clinical work (Scott, 2019). Participants also discussed the need for students to develop specific skills and competencies necessary to integrate faith and spirituality into clinical work, including assessment (Diallo et al., 2021), case conceptualization (Attoe, 2020; Day-Vines et al., 2020; Hilert & Gutierrez, 2020), and developing a therapeutic relationship (Maximo, 2019; Walsh et al., 2021). Lastly, several participants described challenges from their institution's administration teaching faith and spirituality, while other participants discussed their institution's positive stances and approaches to introducing faith and spirituality in the academic setting (Dorn-Medeiros et al., 2020; Sami et al., 2021). After a critical analysis of the data, the research study results thoroughly answered the research question: "What are counselor educators' experiences at CACREP accredited institutions teaching master's level counseling students to integrate faith and spirituality into clinical work?" The following six themes emerged from the data analysis: self-awareness, roles and responsibilities, assessment and conceptualization, therapeutic relationship, academic programs, and methods and approaches. The epistemological tenets of constructivism learning theory (Dewey, 1938/1997) directly align with the codes and themes that emerged from the data in this study. The four tenets include (a) valuing diverse experiences while constructing meaning through interaction, (b) challenging assumptions and appreciating multiple realities, (c) exploring real-world issues, and (d) reflection and self-guided exploration. The following section discusses each theme relative to the research question and

theoretical lens of constructivism learning theory to give meaning and clarity to the study findings.

Theme 1. Self-Awareness

It is well documented in the research literature that self-awareness is an expectation of counselors (Bowser et al., 2020; Burns, 2017; Gladding & Crockett, 2019). Self-awareness is understanding one's perspectives about people, beliefs, and values (Sue et al., 2019). All participants indicated that to prevent harm to clients and avoid unethical practices, they teach students to become aware of their values, beliefs, and worldviews regarding faith and spirituality (Gonzalez-Voller et al., 2020; Ratts et al., 2015). The information that emerged from participants aligns with valuing diverse experiences while constructing meaning through interaction, and reflection and self-guided exploration tenets of constructivism learning theory (Dewey, 1938/1997). Participants described self-awareness related to identity development (Cureton et al., 2019), emotional responses (Gutierrez & Mullen, 2016), values conflict (McWhorter, 2019), and imposing values (Scott et al., 2016) as primary focus areas in their academic programs.

Identity Development

All participants reported that teaching students how to navigate various identities (gender, ethnicity, race, socioeconomic status, faith, and spirituality) can be challenging (Chan et al., 2018; Cureton et al., 2019). One-third of the participants described intersectionality as a challenge for students and how to be counselors who identify with many multicultural factors (Chan et al., 2018). All participants discussed their experiences teaching students how to discover their personal values and beliefs and how worldviews influence their work as counselors (Greggo, 2016). Participants revealed that most students were aware of their values and beliefs about race, gender, and ethnicity but unsure about their faith and spirituality

identifiers and what to do with them in a counseling setting. Participants shared specific activities, including self-reflection, in-class exploration, and personal assessments (Binkley & Minor, 2020; Moate & Cox, 2015), to help students with identity development. Other participants shared that connecting world religions and specific biblical stories to counseling helped students understand how to incorporate their personal faith and spirituality into their identities.

Values Conflict

Conflicting values about faith and spirituality are common in counseling (Harris et al., 2017; McWhorter, 2019). A values conflict emerges when the client has differing faith and spirituality beliefs from the counselor, and the counselor struggles to effectively work with the client in a clinical setting (Williams-Reade et al., 2019). Teaching students to navigate and manage values conflicts was discussed by eighty percent of participants. Participants reported that values conflicts were a significant problem when teaching students to integrate faith and spirituality into clinical work (McWhorter, 2019). Participants shared that they spend a significant amount of time teaching students how to bracket their faith and spirituality beliefs when working with clients. Participants revealed that students struggle with bracketing because they do not want to be challenged, nor do they want to set aside their worldview and see through the client's lens (McWhorter, 2019). Participants indicated that spending time in the classroom teaching students how to acknowledge differences and find comfort in diversity helps students experience values and beliefs other than their own (Greggo, 2016).

Emotional Responses

Teaching master's level students how to integrate multicultural factors such as faith and spirituality precipitates positive and negative emotional responses. All participants reported

experiencing emotional responses during interactions with students and while grading assignments and discussions (Gutierrez & Mullen, 2016). Brown-Rice and Furr (2015) conducted a quantitative study on problems of professional competency for counselor educators. The study results showed that 67% of participants witnessed a colleague's inability to regulate their emotions.

Counselor educators experience various emotions while gatekeeping (DeCino et al., 2020) and teaching that must be regulated to ensure professional and competent counseling (Brown-Rice & Furr, 2015). Over 90% of participants experienced a negative emotional response. Negative participant responses included fear and opposition (87% of participants) of what their institution would think about their approaches and teaching methods to integrate faith and spirituality into coursework and fieldwork experiences. Some participants expressed feeling high stress and concerns that their universities would not approve of their pedagogical style (Johns, 2017). Thus, participants reported intentionally avoiding specific topics related to faith and spirituality due to negative repercussions and backlash from their institution (Adams et al., 2015). When they introduced faith and spirituality in the classroom, some participants reported that they were careful not to offend any students and were very guarded in their delivery of the topic (Johns, 2017).

Participants shared that some classroom conversations and online discussions became intense at times, causing a variety of emotions. Milan and Bridges (2019) reported that it is common for classroom discussions around multicultural topics to become intense and arouse emotions. Participants shared that students' opposing personal beliefs sometimes emerged in classroom conversations resulting in disagreements between students (Johns, 2017). In contrast, several participants expressed enjoyment in facilitating the intense discussions between their

students. Participants indicated that they did their best to establish boundaries and a safe environment for students to express their thoughts and feelings. Participants also talked about their need to remain calm and balanced, facilitating the dialogue and managing their own emotions.

Imposing Values

Imposing values is the counselors attempt to influence a client's beliefs, feelings, judgments, and behaviors by exerting their values onto the client (Cureton et al., 2019). Self-aware counselors avoid imposing values onto their clients by spending a significant amount of time resolving conflicts between their personal and professional selves (Cureton et al., 2019). Fifty percent of participants indicated that imposing values was another topic that emerges when teaching students. Participants stated that when students are unsure of their personal values, beliefs, and worldviews, they unintentionally impose them on their clients (Evans et al., 2021; Scott et al., 2016). Teaching students to focus on microskills helps students avoid imposing beliefs as the focus remains on the client's needs and desires and not the counselor's (Scott et al., 2016). Several participants discussed students desiring to be counselors for selfish reasons of helping people to feel better about themselves. Participants shared, students with those ideologies often impose their values and beliefs on clients consistently. Thus, helping students increase their self-awareness about their motives and desires for entering the counseling profession is critical in preventing the imposition of values onto clients.

Theme 2. Roles and Responsibilities

All participants discussed their roles and responsibilities as counselor educators and the connection of teaching faith and spirituality as instructors, supervisors, and gatekeepers (Kimball et al., 2020). Counselor educators serve in capacities that support the growth and development of

future counselors (Schuermann et al., 2018). It is paramount that counselor educators are prepared to teach students how to integrate faith and spirituality into clinical work (Chan et al., 2018). Thus, counselor educators described using a constructivist lens to challenge students' assumptions about faith and spirituality while teaching them to appreciate diverse perspectives and the realities of others (Dewey, 1938/1997). Participants revealed facilitator, nurturing, supervision, and gatekeeping as critical areas in their role and responsibilities of teaching students to integrate faith and spirituality into clinical work.

Facilitator

All participants expressed feeling that they served as facilitators in the classroom. Facilitating student discussions around faith and spirituality is a constructivist pedagogy (Binkley & Minor, 2020). Counselor educators who work from a constructivist lens emphasize reflection, interactive learning, and self-guided exploration (Martinez et al., 2017). Guiding students through discussions and reflective exercises related to faith and spirituality promote multicultural competence (Bohecker et al., 2017).

Participants revealed that their roles centered around helping students increase their multicultural competence to include faith and spirituality through all phases of the counseling process and develop comfort in discussing faith and spirituality with clients (Gonzalez-Voller et al., 2020). Several participants talked about specific activities they use to teach students, such as adjusting the syllabus to include specific areas that students are deficient. Several participants shared that they introduced case studies and scenarios to class discussions to teach students how and when to infuse conversations and questions about faith and spirituality (Henricksen et al., 2015).

Facilitators can create an environment ripe for learning complex topics like faith and spirituality by setting a positive tone and space for exploration (Martinez et al., 2017). Some participants discussed their role as facilitators and developed creative ways of implementing the process of learning to integrate faith and spirituality into clinical work (Binkley & Minor, 2020). Participants talked about making the process of including faith and spirituality in clinical work fun to minimize discomfort with students and create a welcoming and nonjudgmental atmosphere.

Several participants shared that their personal faith and spirituality were critical in teaching students to integrate faith and spirituality. Highly self-aware counselor educators are empathetic and supportive to their students learning how to integrate faith and spirituality into clinical work (Bohecker et al., 2017). Participants reported that their faith helped them stay grounded and present when facing difficult situations and conversations in the classroom. Moreover, their faith helped them to be more effective teachers.

Supervision

Effectiveness as an educator includes functioning in the role of supervisor (Schuermann et al., 2018). Counselor educators serve as supervisors to students in fieldwork and monitor, coach, and evaluate their competence in effectively integrating faith and spirituality into counseling sessions (Shafranske, 2016). Fieldwork (practicum and internship) begins in the latter stage of a master's program. Fieldwork is an opportunity for prelicensed counselors to begin practicing the theoretical approaches and clinical microskills they have learned throughout their graduate tenure (Hunt, 2018). Several participants talked about helping students understand when to include conversations about faith and spirituality. One participant reported that students overlook faith and spirituality and focus on issues that they are more comfortable discussing in

sessions. All participants that reported working in the Bible Belt talked extensively about faith and spirituality emerging in every supervision session and how students wanted help learning how to talk about faith and spirituality when their faith differs from the client's. The Bible Belt is a southern region of the United States where conservative Christianity influences all aspects of a person's life, including their beliefs about politics, church attendance, and societal norms (Webster et al., 2015). Some participants from the Bible Belt discussed significant challenges. One participant revealed that they used the sand tray technique with supervisees to help them reflect on counseling sessions in a nonjudgmental way that reduces anxiety and helps students open up about their experiences.

Nurturing

Teaching students requires counselor educators to take on the role of a nurturer (Moate & Cox, 2015). Nurturing is the act of caring and encouraging the growth and development of an individual (Lawrence et al., 2015). Eighty percent of participants indicated that part of their responsibilities was nurturing their students and supporting their growth and development in integrating faith and spirituality into clinical work. Several participants discussed helping students navigate ethical ways to integrate faith and spirituality and providing space in the classroom to discuss questions and concerns about the practicality of faith and spirituality in clinical settings.

Several participants talked about classroom discussions and questions that emerge from students when integrating faith and spirituality into clinical work. Counselor educators develop trusting relationships with students to create openness, empathy, and unconditional positive regard to nurture student learning and development (Bland, 2018). Several participants discussed building solid student-teacher relationships that built on openness, authenticity, and trust.

Participants shared that strong relationships fostered student comfort and helped students feel comfortable talking about their faith and spirituality. Further, students could visualize their role as future counselors and see how their faith and spirituality aligned with their meaning, purpose, and professional identity as a counselor.

Gatekeeping

In addition to their role as nurturers, participants describe their role as gatekeepers of the profession. Brown-Rice and Furr (2015), Kimball et al. (2020), and Scott (2019) stated that gatekeeping is an ethical responsibility of counselor educators and a requirement to ensure that harm does not come to people who seek counseling. Half of the participants indicated that gatekeeping was a responsibility of counselor educators when teaching students to integrate faith and spirituality into clinical work. Participants indicated that helping students manage interactions with clients around faith and spirituality was difficult and caused some students to enter remediation due to unethical practices. Differing beliefs were discussed as the primary cause of conflict between clients and counselors. Those students were described as resistant and unwilling to bracket their beliefs and in need of remediation.

Theme 3. Assessment and Case Conceptualization

Assessment and case conceptualization are two fundamental counseling skills that counselors must possess to work with clients effectively (Attoe, 2020; Day-Vines et al., 2020; Eryilmaz & Mutlu, 2017; Hilert & Gutierrez, 2020). Assessment begins at intake and continues throughout the counseling process (Butts & Gutierrez, 2018). Case conceptualization summarizes a client's presenting problems that incorporate cultural identifiers and are viewed through a theoretical framework (Greggo, 2016). Participants stressed the importance of teaching students how to intentionally assess clients' faith and spirituality and factor them into the

assessment and treatment phase of the counseling process. Constructivism learning theory (Dewey, 1938/1997) emphasizes exploring real-world issues and valuing diverse experiences as key components to help students learn. Participants revealed cultural identifiers, broaching, and comfort level as specific counseling skills required to integrate faith and spirituality into clinical work.

Cultural Identifiers

Cultural identifiers are the characteristics that align an individual to a group or culture (Sue et al., 2019). The most commonly understood cultural identifiers include race, gender, ethnicity, and socioeconomic status (Sue et al., 2019). Faith and spirituality are consistently overlooked as cultural identifiers for people seeking counseling (Sue et al., 2019). All participants discussed the importance of including faith and spirituality in the assessment and case conceptualization phase to ensure that the client's culture is factored into their treatment plan (Butts & Gutierrez, 2018). Specific activities included open discussions about how the client wanted their faith and spirituality included in their counseling sessions and questions in the biopsychosocial document. Moreover, culture plays a significant part in adapting interventions with clients (Butts & Gutierrez, 2018)—ensuring that a client's cultural identifiers are factored into interventions respects the client's values, beliefs, faith, and spiritual practices (Sue et al., 2019). Participants discussed broaching as a practical approach to asking clients questions about their faith and spirituality.

Broaching

Participants discussed teaching students how to broach faith and spirituality with clients. Broaching acknowledges and considers a client's cultural factors and how they relate to their presenting problems (Day-Vines et al., 2020; Diallo et al., 2021). Half of the participants

expressed the value of broaching faith and spirituality with clients as a means of assessing and conceptualizing (Butts & Gutierrez, 2018). Participants indicated that inviting clients to talk about their faith and spirituality helped remove barriers such as power differentials and the potential of oppression in the client-counselor relationship (Matthews et al., 2018). Participants also stated that broaching faith and spirituality helped counseling students improve their comfort level working with clients.

Comfort Level

Counselor educators in the study described many students as uncomfortable with faith and spirituality discussions in their courses (Sami et al., 2021; Woodhouse & Hogan, 2020). Although faith and spirituality discussions cause discomfort, counselor educators must engage students in dialogue about the topic (Henriksen et al., 2015; Walsh et al., 2021). Sixty percent of the participants indicated that they encountered students who had difficulty with faith and spirituality in class discussions and clinical settings. Several participants discussed approaches to help students improve their comfort level by including language in their informed consent, modeling behaviors, and teaching students how to ask questions to help clients articulate their faith and spirituality.

Theme 4. Therapeutic Relationship

Research literature indicated that successful client outcomes depend on a strong client-counselor relationship (Bafiti, 2021; Nienhuis et al., 2018; Zilcha-Mano, 2016). All the participants indicated that developing a trusting relationship based upon empathy and authenticity was critical in integrating faith and spirituality in clinical work. Study participants shared their efforts in teaching students how to suspend judgment and welcome clients' unique experiences to develop rapport and strong client-counselor bonds. Recognizing multiple realities

and valuing clients' diverse experiences while constructing meaning from interactions directly connect with constructivism learning theory (Dewey, 1938/1997). Participants revealed connection, self-disclosure, and empathetic attunement as the subthemes of the therapeutic relationship. All participants shared their experiences teaching students how to build connections with their clients.

Connection

Connection is the bond that holds the client-counselor relationship together (Bafiti, 2021; Niño et al., 2016). Several participants discussed developing rapport with clients and getting to know them to help them feel comfortable sharing their faith and spirituality. Participants stressed the importance of creating an atmosphere of acceptance and value of the client's cultural factors. Similarly, participants discussed creating a holding space that suspends judgment and welcomes the client's diverse worldviews and cultural identifiers.

Creating a strong connection with clients and welcoming their cultural identifiers may also introduce transference and countertransference (Prout et al., 2020; Niño et al., 2016). Countertransference is a known response for counselors when working with clients facing similar issues and challenges as themselves (Niño et al., 2016). Half of the participants talked about countertransference and teaching students how to regulate their emotions and navigate situations where they are triggered. All participants indicated that seeking supervision to manage countertransference is the recommended solution (Niño et al., 2016).

Self-Disclosure

Self-disclosure can help or hinder the counseling process (Day-Vines et al., 2018). Self-disclosure in counseling is recommended only when implemented for the client's benefit (Pinto-Coelho et al., 2016). When used as a clinical skill, self-disclosure can support the counselor in

building trust and strengthening the therapeutic relationship (Pinto-Coelho et al., 2016). One-fifth of the participants discussed self-disclosure. Those that shared their experiences were divided on its use in counseling settings. Some participants talked about avoiding self-disclosure to protect clients from harm. However, other participants discussed the benefits of improving therapeutic relationships and fostering connection, strong rapport, and empathetic attunement.

Empathetic Attunement

Several participants discussed empathy and empathetically attuning their clients. Empathetic attunement demonstrates to clients that you see them, hear them, and value their experiences. Walking in the client's shoes is critical for counselors to maintain the client-counselor bond (Bafiti, 2021; Nienhuis et al., 2018). Participants discussed creating spaces for clients to be vulnerable and share their experiences. Most participants discussed students' reasons for coming into the counseling field to be helpers, describing it as a calling. Participants indicated that counselors must walk in their client's shoes to understand their situations to be empathetic.

Theme 5. Academic Programs

Eighty percent of the participants discussed counselor education programs as a factor in supporting students' faith and spirituality competence (Barden & Green, 2015; Dorn-Medeiros et al., 2020). The study participants described teaching faith and spirituality in clinical mental health, school counseling, and marriage and family counseling therapy programs. Participants indicated that different learning environments present an array of challenges for both students and counselor educators. The diverse experiences of participants and the exploration of their real-world experiences at CACREP accredited institutions align with the tenets of constructivism learning theory (Dewey, 1938/1997). Each of the programs was a CACREP accredited public or

private institution. Coursework and type of program were the two subthemes that emerged from the data analysis.

Coursework

All participants indicated that CACREP standards were too loose and provided no structure for incorporating faith and spirituality into the curriculum (Sheperis et al., 2020). Trahan and Keim (2019) discussed the lack of universal standards and unstructured curriculum in many counselor education programs that hinder student learning. Participants indicated that faith and spirituality discussions emerge in their career courses and sometimes in counseling theory classes; however, the diversity and multicultural courses are where it emerges most often (Dorn-Medeiros et al., 2020). However, participants indicated that faith and spirituality were often omitted from the coursework due to the overwhelming amount of content (Chun et al., 2020). One participant acknowledged that they could be more intentional about including faith and spirituality in their lectures and assignments.

Type of Program

Participants also discussed types of academic programs, including face-to-face and online formats. Eighty percent of the participants had something to say about the types of academic programs. Several participants discussed the pitfalls of online programs and a lack of face-to-face interaction necessary to address faith and spirituality effectively (Sheperis et al., 2020). Comments that echoed from participants included instructors feeling as if they did not know their online students well enough to help them develop their professional, personal, and spiritual identity and instructors feeling as if they could not create a safe place to talk about faith and spirituality to facilitate and manage conversations between students (Haddock et al., 2020).

Faith and spirituality discussions were a significant part of class and supervision discussions for all participants teaching in the Bible Belt (Webster et al., 2015). Some participants from the Bible Belt discussed significant challenges. Participants shared that some students' faith and spirituality beliefs were rigid; students were unwilling to bracket their values and beliefs and ended up in remediation (Kimball et al., 2020). Other participants talked about creating opportunities to increase the visibility of faith and spirituality within their institutions, but their schools' administration was resistant and opposed their ideas (Johns, 2017; Sheperis et al., 2020).

Theme 6. Methods and Approaches

Several participants discussed the methods and approaches they use to teach students how to integrate faith and spirituality into clinical work (Binkley & Minor, 2020). Dorn-Medeiros et al. (2020) and Minton et al. (2018) indicated that a counselor educators' pedagogy is critical in developing students' multicultural competencies. Study participants described several methods and approaches to teaching students to integrate faith and spirituality into clinical work. Participant descriptions of their teaching methods and approaches challenged students' assumptions, caused them to reflect on their values and beliefs, and fostered meaning-making through interactions with peers, tenets of constructivism learning theory (Dewey, 1938/1997). Participants revealed the subthemes theories and techniques as most important in their teaching methods and approaches.

Theories

A theory is a framework used to conceptualize and interpret clients' presenting problems and issues (Corey, 2016). Counseling students are taught to use theoretical frameworks as a guide to help them navigate a client's counseling journey from diagnosis through aftercare

(Dukes, 2021; Moate & Cox, 2015). Trahan and Keim (2019) explained that multicultural pedagogies and collaborative learning environments could position counselor educators to model theories for their students. Participants discussed using relational cultural theory (Dorn-Medeiros et al., 2020), hope action theory (Yoon et al., 2019), and Wellbriety (Wagner & Baldwin, 2020) as effective frameworks for teaching students to conceptualize and guide their clinical work. Wellbriety is a Native American term that means to be sober and well (Kelley et al., 2019). Wellbriety is a healing and addiction recovery program focused on helping the Native American population overcome addiction and find emotional, mental, physical, and spiritual balance (Kelley et al., 2019; Wagner & Baldwin, 2020). Application of theoretical orientations required the implementation of specific techniques (McAuliffe & McAuliffe, 2019).

Techniques

Most theoretical orientations have corresponding techniques (Adams et al., 2015). Techniques are creative ways to promote exploration and change (Currier et al., 2021; McAuliffe & McAuliffe, 2019). Participants indicated that students need tools that can encourage exploration and discovery with clients. Some suggestions included spiritual genograms, spiritual life maps, guest speakers, and mindfulness practices. A few participants talked about giving their clients homework to explore sacred writings and studying topics from their Bible. Then, during the next session, they explored with the client what they had learned (Dukes, 2021; Prout et al., 2021).

A few participants discussed ethical scenarios and client vignettes (Dukes, 2021). Ethical decision-making requires adherence to ethical codes, state ethical codes, and laws (Evans et al., 2021; Levitt et al., 2015). Levitt et al. (2019) encouraged counselor educators to teach students how to integrate faith and spirituality and support student learning using ethical decision-making

models, self-reflection, and classroom activities and assignments. Participants described lively discussions that typically ran past the class scheduled time but provided an opportunity for students to experience diverse perspectives from their classmates.

Experiential activities were another technique discussed by participants. Hands-on learning through social engagement reduces bias and promotes competency (Binkley & Minor, 2020). Two participants discussed how they implemented experiential activities to help students integrate faith and spirituality into clinical work. One counselor educator welcomed their students to participate in a grief camp for children to acclimate them to clinical work in a supervised setting. A second counselor educator used the sand tray technique and expressive art to help students visualize their work with clients and promote conceptualization skill development.

Teaching master's level students how to integrate faith and spirituality into clinical work is necessary and a required responsibility for counselor educators (Dorn-Medeiros et al., 2020; Gonzalez-Voller et al., 2020; Scott, 2020). Avoiding faith and spirituality in academic settings causes students to lack competence and confidence when working with clients who desire their faith and spirituality to be included in counseling (Osborne & Jones, 2020; Swinton, 2016; Woodhouse & Hogan, 2020). Thus, counselor educators should intentionally teach students to effectively incorporate faith and spirituality into clinical work (Chan et al., 2018; Johns, 2017).

Six themes emerged from the data analysis: self-awareness, roles and responsibilities, assessment and case conceptualization, therapeutic relationship, academic program, and methods and approaches. The themes of self-awareness, assessment and case conceptualization, and therapeutic relationship emphasized the need for counselor educators to help students think deeper and develop clarity about their worldviews and faith and spiritual beliefs to be competent

in integrating faith and spirituality into counseling (Swinton, 2016). The themes, roles and responsibilities, and methods and approaches described specific activities and tasks that counselor educators must do to support students' identity and competency development. The theme academic programs described actions that CACREP accredited programs should take to increase the visibility and inclusion of faith and spirituality in didactic courses and fieldwork.

Conclusions Based on the Results

Increasingly, people seek clinicians who can integrate faith and spirituality into their counseling sessions to support positive health and mental well-being (Harris et al., 2016; Henriksen et al., 2015; Portnoff et al., 2017). The research literature showed that counselors were unprepared to integrate faith and spirituality into clinical work due to discomfort and incompetence (Stewart-Sicking et al., 2017). Moreover, counselors reported that they lacked training and preparation to meet their clients' faith and spirituality requests in clinical settings (Henriksen et al., 2015; Reiner & Dobmeier, 2014; Scott et al., 2016). Limited research literature from the perspectives of counselor educators was available, which was insufficient to answer the study's research question. The results from this research study revealed six themes that begin to fill a gap in the literature (Johns, 2017) and provide new information regarding counselor educators' experiences teaching students to integrate faith and spirituality into clinical work.

In this research study, counselor educators shared their experiences teaching students to integrate faith and spirituality into clinical work. Students must be taught to explore faith and spirituality into clinical work just as they are taught to include race, gender, ethnicity, and socioeconomic status (McAuliffe & McAuliffe, 2019). Counselor educators detailed their interactions with students to develop self-awareness regarding their faith and spirituality, assess and conceptualize client cases for faith and spirituality, and develop a strong client-counselor

bond to broach faith and spirituality conversations without barriers. Findings from the study also indicated that counselor educators' roles and responsibilities as facilitators, supervisors, nurturers, and gatekeepers are critical to students' competence and confidence.

A noteworthy result was the lack of training that counselor educators receive in introducing faith and spirituality to their students. Research literature indicated that counselor educators avoid faith and spirituality in the classroom due to lack of information, relevance, discomfort with the topic, and conflicting personal values and beliefs (Adams et al., 2015; Johns, 2017; Sauerheber et al., 2014). Counselor educators that are uncomfortable and avoid teaching faith and spirituality to their students foster incompetence and the potential for their students to be ill-prepared for clinical work (Johns, 2017).

Effectively preparing master's counseling students for clinical work was also discussed by participants related to academic programs and methods and approaches. Counselor educators reported that coursework deficiencies were a significant barrier in teaching students. A lack of concrete guidance for counselor education programs and an overabundance of content in multicultural courses causes many counselor educators to omit faith and spirituality from coursework (Swinton, 2016; Williams-Reade et al., 2019). In contrast, some participants indicated that their counselor education programs included faith and spirituality across all courses and fieldwork. Additionally, counselor educators discussed a strong awareness of their faith and spirituality beliefs and how they leverage them as strengths to help them be effective educators. All participants agreed that it was their responsibility to teach faith and spirituality to their students. Moreover, they all discussed teaching faith and spirituality using a constructivist lens.

Comparison of Findings With Theoretical Framework and Previous Literature

The theoretical framework for this research study was constructivism learning theory (Dewey, 1938/1997). Constructivism learning theory is an appropriate framework to understand this research study's findings (Dewey, 1938/1997). The themes that emerged from this study aligned with constructivism learning theory and findings from previous literature. The research study results are grounded in the constructivist philosophical assumptions: ontology, nature of reality, epistemology, theory of knowledge, axiology, the role of the researcher, and methodology, process, and procedures to construct findings. In this study, multiple realities existed for the participants based on their experiences teaching master's level students to integrate faith and spirituality into clinical work. The theory of knowledge was revealed through deep reflection by each participant and their experiences. The researcher facilitated learning by co-constructing meaning from the findings through interactive dialogue with participants in semi-structured Zoom interviews to understand counselor educators' experiences teaching students to integrate faith and spirituality into clinical work.

Previous literature indicated that constructivism learning theory is built on the understanding that students construct meaning through interactions (Dewey, 1938/1997). Constructivism learning theory in counselor education recognizes that learning is subjective, embraces diverse perspectives, and develops through interactive experiences with others (Binkley & Minor, 2020; Olusegun, 2015). The six themes that emerged from this research study consistently aligned with constructivism learning theory and previous research, predominantly conducted from counselors' and prelicensed counselors' perspectives, with little research conducted from counselor educators' perspectives.

There is significant existing research regarding the integration of faith and spirituality from the perspectives of counselors and prelicensed counselors (Carlson et al., 2014; Curry et al., 2015; Errington, 2017; Magaldi-Dopman, 2014; Oxhandler & Parrish, 2018). However, counselor educators' experiences teaching master's level students to integrate faith and spirituality into clinical work has not been sufficiently studied (Giordano et al., 2016; Johns, 2017; Milan & Bridges, 2019; Sauerheber et al., 2014; Trahan & Keim, 2019). The results of this research study affirm previous research that indicated that teaching students to integrate faith and spirituality increases counselors' confidence and cultural competence (Osborne & Jones, 2020; Swinton, 2016). Further, the results from this study confirm previous research findings that indicated self-awareness (Burns, 2017; Shuler & Keller-Dupree, 2015), the role of counselor educators (Binkley & Minor, 2020; Hull et al., 2016), effective assessment, and case conceptualization (Butts & Gutierrez, 2018; Corey, 2016; Gehart, 2015), the therapeutic relationship (Beck & Kulzer, 2018; Nienhuis et al., 2018), types of academic programs (Barden & Greene, 2015), and counselor educator methods and approaches (Adams et al., 2015; McAuliffe & McAuliffe, 2019) are essential areas of learning to support counseling students in becoming comfortable and competent with faith and spirituality in clinical settings.

When introducing topics of faith and spirituality, counselor educators create opportunities for students to develop competence by increasing self-awareness. McWhorter (2019) discussed self-awareness and learning to bracket personal values and beliefs to avoid imposing them on clients. The results from the research study confirmed McWhorter's (2019) research regarding bracketing and the ongoing practice of developing self-awareness. Participants indicated that self-awareness regarding values, beliefs, and worldviews was vital to teaching students how to work through opposing beliefs and avoid imposing personal values on clients. Increased self-

awareness leads to increased competence and comfort in integrating faith and spirituality into clinical work (Leighton, 2016; Sami et al., 2021). Thus, counselor educators must be prepared to teach students faith and spirituality topics in the classroom (Johns, 2017)

According to Johns (2017) and Leighton (2016), counselor educators are not adequately prepared to teach students how to integrate faith and spirituality into clinical work. This study's findings confirmed this previous research. Participants indicated that they were unprepared to teach topics of faith and spirituality and unsure of how to include the topic without offending students or causing discomfort. Thus, participants shared that they avoid faith and spirituality within academic settings (Adams et al., 2015; Johns, 2017; Leighton, 2016). This research study adds to the literature by contributing detailed information about counselor educators' experiences teaching master's level counseling students to integrate faith and spirituality into clinical work.

Interpretation of the Findings

Six themes emerged from the research study: self-awareness, roles and responsibilities, assessment and case conceptualization, therapeutic relationship, academic programs, and methods and approaches. The theoretical framework of constructivism learning theory provided the lens to view the findings from the data analysis (Dewey, 1938/1997). Application of the constructivism learning theory (Dewey, 1938/1997) lens provides an understanding of the 15 participants' experiences teaching faith and spirituality to master's level students. The results of the data analysis provided information to begin filling the gap in the research literature regarding experiences of counselor educators' at CACREP accredited institutions teaching master's level counseling students to integrate faith and spirituality into clinical work.

The study results indicated that counseling students will continue to be incompetent and lack the skills necessary to integrate faith and spirituality into clinical work if counselor

education programs and counselor educators are not intentional about teaching the topic. CACREP provides general guidelines and minimum standards for counselor education programs regarding faith and spirituality (Bohecker et al., 2017; Scott et al., 2016). Moreover, CACREP defers the responsibility to counselor education program administrators to develop the curriculum to integrate faith and spirituality into coursework (Bohecker et al., 2017). Participants from public secular institutions indicated that faith and spirituality are included in multicultural courses, but little time is spent on the topic. Several participants indicated that faith and spirituality are included in other courses but not required by their institutions. Counselor educators from nonsecular institutions indicated that faith and spirituality are included across all coursework, but helping students integrate faith and spirituality into clinical work is problematic for various reasons.

According to research participants, the most prominent reason for difficulty teaching students to integrate faith and spirituality into clinical work is the students' underdeveloped professional identity which is rooted in a lack of awareness regarding their faith and spirituality beliefs (Burns, 2017; Cureton et al., 2019; Greggo, 2016). When students have a solid understanding and comfort with their faith, spirituality, and worldviews, they are more apt to bracket their personal convictions, be present with their clients, and be comfortable integrating faith and spirituality into their treatment. The optimal client-counselor relationship emerges from a highly self-aware counselor who has resolved personal and professional identity conflicts (Greggo, 2016). Participants indicated that more should be done to help students explore their values, beliefs, and worldviews and learn how to embrace them while valuing and appreciating the differences of their peers and clients. These findings are aligned to previous research by

Johns (2017) and Leighton (2016), in which both authors emphasized the importance of creating opportunities for exploration and self-discovery of personal values, faith, and spirituality beliefs.

The findings from the research study also indicated that counselor educators must become more informed about their roles and responsibilities (Kimball et al., 2020). In addition to supervising, gatekeeping, nurturing, and teaching counseling skills (Brown-Rice & Furr, 2016), counselor educators must also be aware of their faith and spirituality beliefs to effectively teach their students how to discover and embrace their beliefs. Existing research literature showed that counselor educators avoid teaching faith and spirituality due to a lack of training (Sauerheber et al., 2014), discomfort with the topic (Adams et al., 2015), possessing beliefs that differ from their students (Adams et al., 2015), and feeling that faith and spirituality were not relevant (Johns, 2017). Counselor education programs have an opportunity to support the ongoing development of counselor educators by creating and offering training modules and curriculum to train counselor educators and counseling students alike.

Limitations

Discussing limitations in a research study is critical to interpreting the study's findings (Theofanidis & Fountouki, 2019). Clearly articulating the limitations of the study helps the reader understand how the theoretical framework and methodology impacted the researcher's interpretation of the data and results (Theofanidis & Fountouki, 2019). Further, outlining the study's limitations increases the trustworthiness of the data and supports the transferability of the findings (Professor & Albrecht, 2019). In this research study, there were both methodological or design limitations and theoretical limitations. The following section discusses the impact of the methodological and theoretical limitations on research study.

Theoretical Limitations

The limitations of constructivism learning theory (Dewey, 1938/1997) must be considered. Constructivism learning theory views learning as subjective, individual, and continuous (Olusegun, 2015). Through interaction with people and things in the world, individuals make meaning and grow in knowledge through these experiences and personal reflection (Binkley & Minor, 2020). The lack of structure is the most significant limitation of constructivism learning theory (Binkley & Minor, 2020; Olusegun, 2015). CLT (Dewey, 1938/1997) emphasizes student-centered learning, allowing students to focus on areas of interest and topics that concern them. Counselor educators relinquish control over specific learning areas and center their attention on the academic needs of each student, which could result in students avoiding sensitive topics like faith and spirituality and its integration into clinical work. This research study expanded CLT by demonstrating a need for counselor educators to include faith and spirituality consistently and intentionally across all core learning areas to increase students' self-awareness and cultural competency.

Methodological Limitations

The methodological limitations for this generic qualitative inquiry (Percy et al., 2015) were the study's inclusion criteria, technical challenges with the researcher's internet connection, and transferability of the data. Limitations are an aspect of the research process that hinders the study and the findings (Babchuk, 2019; Theofanidis & Fountouki, 2019). The researcher must clearly articulate the limitations of the study to inform the reader about the conditions that the results should be interpreted (Babchuk, 2019). Technical difficulties were the first limitation identified in the study.

Technical difficulties with the researcher's internet connection were the first limitation of the study. The internet facilitated the Zoom application used to carry out the audio-recorded interviews (Hawkins, 2018; Kallio et al., 2016). During one participant interview, the researcher lost the internet connection after about 5 minutes into the interview. The researcher and the participant had to reconnect to the Zoom application. The researcher and the participant agreed to restart the interview due to a break in the conversation and to ensure that no data was lost.

The second limitation of this study is related to transferability. Transferability measures the usefulness of the study's data for a broader group of people or settings (Morse, 2015a; Professor & Albrecht, 2019). In this study, the data collected included responses from 15 counselor educators from all regions of the United States with a wide range of experiences teaching in counselor education programs (Moser & Korstjens, 2018). Open-ended questions were used to solicit detailed responses from the participants, but the interview questions were not field tested or validated by an expert panel of reviewers, limiting the trustworthiness of the data. Kallio et al. (2016) indicated that field testing and an expert panel review could strengthen the interview questions by identifying bias and ensuring the relevance of the questions to the research question. Instead of a field test and expert panel of reviewers, the researcher's dissertation mentor audited the interview questions to remove bias and ensure that the interview questions would answer the research question fully. Some participants provided short answers to the guided interview questions without much substance. Singer and Couper (2017) stated that open-ended questions capture detailed, in-depth responses from most participants. One participant in the present study was a new counselor educator with only 6 months of experience. The participant had valuable information to share but was less in-depth than some of the other participants.

Nevertheless, after a critical review of the data, all participants described similar experiences teaching students to integrate faith and spirituality into clinical work. Thus, it is believed that this research study can be transferred to other counselor educators within CACREP accredited programs (Professor & Albrecht, 2019). In contrast, transferring the learning to counselor educators in non-CACREP programs should be carefully considered. This research study did not include participants from non-CACREP programs or disciplines other than clinical mental health counseling, school counseling, or marriage and family counseling therapy.

Delimitations

This research study also had delimitations. Delimitations are factors omitted from the study at the researcher's discretion (Theofanidis & Fountouki, 2019). Delimitations relevant to this study are associated with the participants' demographics. The disclosure of a faith affiliation and ethnicity was not required for participation. However, some participants shared their faith affiliation and ethnicity during the interviews, while others did not. Counselor educators with a strong faith affiliation are more apt to discuss faith and spirituality with their students than those with less or no faith affiliation (Johns, 2017). This study allowed for participants of any faith and spirituality to participate; however, explicitly asking questions about the participant's faith affiliation, ethnicity, and origins of their faith and spirituality beliefs could have provided additional information to understand the perspectives and origins of participant's perspectives and what informs their worldviews on teaching students to integrate faith and spirituality into clinical work.

Implications for Practice

Theoretical Implications

Many counselors reported that their counselor education programs did not adequately prepare them to integrate faith and spirituality into clinical work (Adams et al., 2015; Johns, 2017); as such, they lack the competence and comfort to effectively attend to their client's cultural identifiers (Osborne & Jones, 2020; Swinton, 2016). Thus, constructivism learning theory was the theoretical lens used to view counselor educators' experiences at CACREP accredited institutions teaching master's level students to integrate faith and spirituality into clinical work. Tenets of constructivism learning theory indicated that students learn and make meaning through self-guided exploration, reflection, interaction, and from past experiences and interactions with others (Martinez et al., 2017). Moreover, constructivist learning theory values diversity through social and cultural meaning-making that is student-centered and collaborative (Binkley & Minor, 2020; Moate & Cox, 2015). This research study utilized constructivism learning theory to describe counselor educators' experiences, attitudes, opinions, and perspectives. Further, this study sought to expand constructivism learning theory by demonstrating the applicability in counselor educators teaching counselors to integrate faith and spirituality into clinical work.

Constructivism learning theory emphasizes student-centered learning environments, flexibility, interaction, and collaboration with peers (Alt, 2015; Olusegun, 2015). Existing counselor education research involving constructivism learning theory showed that counselor educators could effectively teach students culturally sensitive topics like faith and spirituality by encouraging students to become aware of their personal values and beliefs through self-reflection and exploration of values and beliefs. Participants reported that they provided many

opportunities for students to explore their faith and spirituality independently and within a classroom setting. Most participants shared that coursework, experiential activities, and supervision sessions provided opportunities for students to talk about their experiences with faith and spirituality, their biases, beliefs, and assumptions while collaborating and interacting with their peers and instructors.

Facilitating student collaboration and interaction was identified as a subtheme in the study. A fundamental construct of constructivism learning theory is facilitation (Binkley & Minor, 2020; Martinez et al., 2017). Counselor educators that teach from a student-centered lens act as a guide or facilitator to their students, yielding to student-led discussions and creating space for exploration collaboration (Martinez et al., 2017). Participants indicated that faith and spirituality conversations frequently emerged in their multicultural courses, eliciting dialogues, disagreements, and exploration of faith and spirituality practices across many faith affiliations. The experiences shared by counselor educators demonstrate how constructivism learning theory influences teaching methods and approaches to integrate faith and spirituality in the classroom.

Practical Implications

The findings from this research study revealed several practical implications for counselor educators and education and supervision programs. Improving counselors' competency by preparing them to address, conceptualize and integrate faith and spirituality in clinical settings ensures culturally sensitive counseling that promotes positive outcomes and overall well-being (Bayne & Tylsova, 2019; Scott et al., 2016; Swinton, 2016). Insights and themes that emerged from the research study revealed deficiencies in counselor education programs and exposed barriers in educational settings that may be obstacles for counselor educators to effectively teach students to integrate faith and spirituality into clinical work

(Adams et al., 2015; Johns, 2017; Leighton, 2016). Participants indicated that some CACREP programs are resistant to the inclusion of diverse faith and spiritual teachings and make it difficult for counselor educators to provide students with diverse experiences. Some participants also discussed a lack of training available for counselor educators and a lack of clarity in introducing faith and spirituality to their students.

CACREP accredited programs may incorporate findings from this research to improve the training that they provide to their faculty (Bohecker et al., 2017; Henriksen et al., 2015). Participants indicated they were unsure how to integrate faith and spirituality into the curriculum without offending students or crossing ethical or school policy boundaries. Counselor education and supervision programs could also improve their multicultural counseling curriculum to support counselor competency by training students to intentionally assess and conceptualize faith and spirituality in clinical work (Cornish et al., 2014). Most participants discussed teaching students to ask direct questions about clients' faith and spirituality to ensure inclusion in treatment planning and interventions.

Participants also discussed integrating faith and spirituality during fieldwork supervision via discussions, ethical case scenarios, and sand tray exercises. Engaging students in dialogue and hands-on activities during individual and group supervision sessions further their competency and comfort with faith and spirituality in a clinical setting (Adams et al., 2015). Moreover, supervisors can help students explore their faith and spirituality to develop their professional identity (Hull et al., 2016). Counselors with a strong professional identity and cultural competence strengthen a counselor's ability to be effective with clients (Woo & Henfield, 2015). Participants indicated that a high-quality and positive therapeutic relationship was critical to broaching faith and spirituality with clients. A strong client-counselor bond is

linked to a strong professional identity in those counselors with great self-awareness about their cultural identifiers (Ratts et al., 2015). A heightened awareness of personal faith and spirituality enables counselors to bracket their values and beliefs and not impose them upon clients (McWhorter, 2019).

The present study also presents practical implications for the ACA. Assisting students to strengthen their skills to bracket and avoid imposing values and beliefs on clients is an expectation of the ACA. Specifically, findings from this study align with the 2014 ACA code of ethics on strategies to improve how counselors develop cultural sensitivity (ACA, 2014, A.2.c.) and avoid harm and imposing values on clients (ACA, 2014, A.4.a.; A.4.b.). Participants reported a significant amount of time focused on guiding students to explore their personal values and beliefs to understand their worldviews better. Research literature indicated that knowledge and awareness of faith and spirituality help counselors avoid imposing values and improve client interaction (Gonzalez-Voller et al., 2020; Ratts et al., 2015).

In addition to CACREP and the ACA, this study has practical implications for counselor education and supervision. Findings from this study begin to fill the gap in the research literature (Johns, 2017) regarding counselor educators' perspectives related to how they teach master's level counseling students to integrate faith and spirituality into clinical work. The results from the study exemplify what counselor educators are doing to instruct students in developing competence in faith and spirituality integration in a clinical setting. Although the present study revealed findings that begin to fill the gap in the research literature (Johns, 2017), more research is needed to fully understand counselor educators' perspectives teaching master's level students to integrate faith and spirituality into clinical work.

Recommendations for Further Research

This research study explored the experiences of 15 counselor educators' at CACREP accredited institutions teaching master's level counseling students to integrate faith and spirituality into clinical work. The sample size was sufficient to answer the research question and reach saturation (Morse, 2015b). The data were analyzed using inductive thematic analysis (Percy et al., 2015). Six themes emerged from the analysis of participants' data. The findings from the data analysis were viewed through the lens of constructivism learning theory (Dewey, 1938/1997). The themes and experiences shared by the participants can be used to guide future research regarding teaching master's level counseling students to integrate faith and spirituality into clinical work. Four recommendations are offered for future research regarding the integration of faith and spirituality in counselor education, nonsecular programs integration of faith and spirituality across core learning areas, professional identity development for prelicensed counselors related to faith and spirituality, and replicating this study using non-CACREP counselor education programs.

First, several participants indicated that they were deficient in methods and approaches to teaching students to integrate faith and spirituality and wanted to learn practical ways to help students learn (McAuliffe & McAuliffe, 2019). The present research confirmed findings from Adams et al.'s (2015) study that indicated more research is needed to explore how counselor education programs prepare counselor educators to teach faith and spirituality to master's level students. Also, findings from the present research study indicated that some counselor education programs include faith and spirituality as ad hoc topics (Eppler, 2018; Holmberg et al., 2017; Swinton, 2016; Williams-Reade et al., 2019), magnifying the need for more research to discover how to include faith and spirituality as a core learning construct.

A second recommendation is to research how nonsecular programs include faith and spirituality as a core construct in their curriculum. The present study found that nonsecular programs embed faith and spirituality across the curriculum. More research to unveil how these programs integrate faith and spirituality would support meeting the CACREP (2016) standard for multicultural diversity integration as a competency for master's programs. Moreover, discovering how faith and spirituality are embedded across all core curriculum learning areas could strengthen multicultural courses. Most participants from nonsecular programs indicated that faith and spirituality were embedded across all courses and fieldwork. Learning how faith-based CACREP accredited schools have integrated faith and spirituality across the curriculum could be transformative for secular CACREP accredited programs.

All participants discussed teaching students to explore their values, beliefs, and worldviews to understand better who they are personally and professionally to develop their professional identity (Burns, 2020). A third recommendation is to study professional identity development in prelicensed counselors specifically related to faith and spirituality. Participants indicated that students with a strong self-awareness regarding their faith and spirituality had strong therapeutic alliances and rapport with clients. In contrast, participants indicated that students with low self-awareness regarding faith and spirituality consistently imposed their values and beliefs onto clients.

A fourth recommendation is to replicate this research study using an alternate theoretical lens. Previous literature indicated several theoretical frameworks that may support future research, including multicultural competency theory (Sue et al., 1992), Bandura's social learning theory (1977), and critical theory (Horkheimer, 1972). Also, the inclusion of counselor educators from non-CACREP programs and counselor educators from across the counseling disciplines,

including addiction counseling, rehabilitation counseling, and career counseling, may shed light on how non-CACREP accredited programs teach students to integrate faith and spirituality into clinical work. Integration of faith and spirituality in addictions using 12-step and other faith-based programs (Diallo et al., 2021) could provide new perspectives and approaches to integrate faith and spirituality into CACREP accredited programs. Pandya (2019) discussed the deconstruction of a disability using spirituality as a strength and motivator to support clients in rehabilitation. Thus, exploring spirituality in rehabilitation could provide new ways of understanding how to include faith and spirituality in clinical mental health, school counseling, and marriage and family counseling therapy.

Conclusion

This generic qualitative research study explored 15 counselor educators' experiences at CACREP accredited institutions teaching master's level counseling students to integrate faith and spirituality into clinical work. Participants in the study were counselor educators working in CACREP accredited institutions from half a year through 31 years. A significant amount of textual data was collected using semi-structured Zoom interviews recorded for audio-only and transcribed. Data collection continued until no new themes were identified, indicating saturation was reached (Fusch & Ness, 2015). Participant interview recordings and transcripts were uploaded into the MAXQDA application to assist the researcher in coding, clustering, and analyzing the interview data. To maintain the study's trustworthiness, the researcher took steps to ensure that the study maintained credibility, dependability, transferability, and conformability (Professor & Albrecht, 2019). Thus, member checking was implemented to confirm the accuracy of participants' transcripts before initiating data analysis, and the researcher maintained an audit trail throughout the data analysis phase of the study.

Chapter 5 provided a review, evaluation, and summary of the data analysis that resulted in six final themes and 17 subthemes (Percy et al., 2015). The final themes and (subthemes) include: (a) self-awareness (values conflict, emotional responses, imposing values); (b) roles and responsibilities (facilitator, supervision, nurturing, gatekeeping); (c) assessment and case conceptualization (cultural identifiers, broaching, comfort level); (d) therapeutic relationship (connection, self-disclosure, empathetic attunement); (e) academic programs (coursework, type of program); and (f) methods and approaches (theories techniques). Several participants shared specific theories to teach faith and spirituality, including hope action theory, relational cultural theory, Wellbriety, and existential theory. Applying these theories may shed light on how counselor educators can teach master's level students to integrate faith and spirituality in clinical work by providing a framework to introduce, model, and derive specific steps for students to follow (Minton et al., 2018).

The interpretation of the meaning of participant data was viewed through the lens of constructivism learning theory (Dewey, 1938/1997). Comparing the study findings to existing research literature showed that more education and training are needed to prepare counselor educators to teach students how to integrate faith and spirituality into clinical work. Further, counselor education programs need to improve the existing curriculum to include faith and spirituality across all learning areas. Counseling students need guidance and instruction around personal faith and spirituality exploration to support increased competence and professional identity development (Bohecker et al., 2017; Scott et al., 2016). Recommendations for future research include replicating this study using counselor educators from non-CACREP programs and other counseling disciplines outside of the counselor education and supervision programs.

Additionally, applying an alternative theoretical orientation such as multicultural competence theory (Sue et al., 1992), social learning theory (Bandura, 1977), or critical theory (Horkheimer, 1972), may offer alternative ways to understanding how counselor educators teach master's level students to integrate faith and spirituality into clinical work. Finally, the findings from this research study contribute to the scholarly research literature in counselor education and may benefit counselor education and supervision programs (Cornish et al., 2014), counselors, prelicensed counselors (Adams et al., 2015; Johns, 2017; Leighton, 2016), and supervisors (Hull et al., 2016) by driving social change. Social change is how people interact with others to transform cultures and societies (Mintert et al., 2020). Ensuring that counselors are competent in integrating faith and spirituality in clinical settings improves the counselor-client relationship and strengthens the interactions between counselors and clients, which improves therapeutic relationships, and removes barriers that hinder clients from utilizing their cultural strengths to help them heal.

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