

Advising Master's Students Pursuing Doctoral Study: A Survey of Counselor Educators and Supervisors



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This study explored what faculty members are recommending to counselor education master's students regarding post-master's experience when considering doctoral studies and what the current faculty hiring preferences are in reference to the amount of post-master's experience needed. Advisors in counselor education master's programs encounter these questions, and the authors believe the findings are beneficial in helping provide answers. Findings indicate faculty members believe post-master's experience informs supervision, teaching, research and professional identity during the doctoral program and in faculty roles. Findings also indicate faculty members consider the characteristics and circumstances of each individual in determining how important post-master's experience is prior to entering a doctoral program.

Keywords: counselor education, faculty, supervision, post-master's experience, doctoral study

An important duty of faculty counselor educators is advising master's-level students interested in obtaining doctoral education. A doctoral degree is designed to provide the student with advanced competencies in clinical practice, classroom instruction, supervision, research and leadership so that the student may serve as a future leader for the profession of counselor education in academic positions (Bernard, 2006; Goodrich, Shin, & Smith, 2011). While the primary focus of the counselor education doctoral degree is to prepare future leaders in the profession (Goodrich et al., 2011), counselor education has historically lacked clear professional standards regarding the amount or type of necessary counseling experience for admission into doctoral programs (Boes, Ullery, Millner, & Cobia, 1999; Schweiger, Henderson, McCaskill, Clawson, & Collins, 2012; Warnke, Bethany, & Hedstrom, 1999).

When applying for and entering a doctoral-level counselor education and supervision (CES) program, it is assumed that the student has achieved the competencies of an entry-level clinician and has met the requirements of a Council for Accreditation of Counseling and Related Educational Programs (CACREP) accredited master's program (Goodrich et al., 2011). However, few guidelines have been provided to doctoral applicants about the types or amount of post-master's experience (PME) necessary or preferred for optimal hiring into a faculty position, for which CES graduates are uniquely qualified. Lack of guidelines can create confusion about how graduate students can best position themselves for successful academic employment (Schweiger et al., 2012; Warnke et al., 1999).

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Though conventional wisdom may tell us that the more experience one has, the better, we do not have empirical data in the CES field of how counselor educators are advising master's students on this issue, or of what faculty search committees prefer in terms of the clinical experience level of candidates. Thus, this study broadly examines the questions: What are faculty members recommending to counselor education master's students regarding PME when considering doctoral studies? What are current faculty hiring preferences in reference to levels of experience needed? Faculty members, supervisors and advisors frequently encounter these questions from master's students, and the researchers believe students, faculty and ultimately the counseling field will benefit from information clarifying the current industry standard for counselor education.

Research on CES Preferred Clinical Experience

The field of counselor education lacks clear professional standards regarding the amount or type of necessary counseling experience for admission into doctoral programs (Schweiger et al., 2012; Warnke et al., 1999). One study's findings concluded that work experience was a necessary component to doctoral admissions (Nelson, Canada, & Lancaster, 2003). Of the 25 CACREP programs that participated in this study, 20 programs rated successful work experience as a criterion for admission to their doctoral programs. In addition, 16 of those reported that work experience is often helpful or always helpful in selecting good doctoral students. One of their respondents reported difficulty in requiring successful work experience because so few applicants had post-master's counseling experience.

A recent study reviewed the requirements and preferences listed in counselor education faculty position postings on the Counselor Education and Supervision Network (CESNET) between 2005 and 2009 (Bodenhorn et al., 2014). The researchers found 83% of assistant and associate professor position announcements listed counseling experience or licensure as a required or preferred qualification. This remains consistent with a previous finding from Rogers, Gill-Wigal, Harrison, and Abbey-Hines (1998) that counselor education programs ranked clinical experience as the second most important criteria for faculty positions, second only to a PhD in counselor education. Researchers of the 1998 study asserted that although it is clear in their findings that clinical experience is important, whether that clinical experience occurs during internships or outside of coursework is unclear.

These studies showed that experience is prioritized in doctoral admissions (Nelson et al., 2003), as well as in hiring CES faculty members (Bodenhorn et al., 2014; Rogers et al., 1998), yet the counselor education field still lacks important information around this topic. Specifically, the field is lacking data indicating what advice counselor educators give master's-level students about the amount of experience to obtain prior to entering a doctoral program, and data indicating the amount of post-master's clinical experience CES faculty search committees prefer in candidates. The current study addresses these gaps in the literature in the exploration of preferences for PME.

Research on Other Helping Professions' Preferred Clinical Experience

A review of American Psychological Association (APA) accredited clinical psychology programs found academic criteria to be the most important in selecting doctoral students, with achievement of clinical competence also being important (O'Leary-Sargeant, 1996, as cited in Nelson et al., 2003). Another study's findings included that success in a marriage and family therapy doctoral program correlated positively with age, and students with clinical experience were rated as better clinicians than those who did not have clinical experience (Piercy et al., 1995). It should be noted that researchers did not distinguish between participants who became faculty or expert clinicians in their study.

In the related field of social work, Proctor (1996) and Munson (1996) had opposing viewpoints of whether doctoral programs should admit graduate students with fewer than 2 years of post-master's in social work (MSW) experience. Proctor argued that doctoral programs in social work should not require PME because it is a detriment to the field. He justified this viewpoint with the idea that by requiring experience, programs are missing out on students who are research-minded and eager to continue with their education; therefore, programs may lose them to other disciplines. Proctor also argued this requirement delays the onset of careers in social work education and research, with educators and researchers starting often in their late thirties and early forties, behind their counterparts in other disciplines. Munson argued that it is not possible for graduates of social work doctoral programs to fulfill the needs of the field, which include building knowledge, conducting practice research and effectively teaching social work practice, without post-MSW experience.

The research in CES and related fields in the area of experience preferred for doctoral programs and faculty positions is dated. Further, the CES field is lacking data on how counselor educators are advising master's students in terms of amount, if any, of PME that would be beneficial to obtain prior to entering a doctoral program. The field also is lacking clear data on preferences of CES search committees on clinical experience gained outside of program practicum and internships. An exploration of these two questions will equip counselor educators in more effectively advising master's students who are interested in doctoral programs and faculty careers in CES.

Method

The authors used a survey with both closed and open-ended questions to gain both quantitative and qualitative data about the research questions: What are faculty members recommending to counselor education master's students regarding PME when considering doctoral studies? What are current faculty hiring preferences regarding levels of experience needed? Surveys were developed by the research team and piloted among CES colleagues with questions about serving on search committees and what priority considerations are given during a search for CES clinical and tenure-track faculty. Hypothetical situations involving a master's student asking for advice about pursuing a doctoral degree and a search committee situation also were posed in the survey, with space to provide a rationale for the responses, which garnered qualitative data.

Procedure

Access to participants was developed in two different formats, using the same survey. Using a purchased list of 500 randomly selected members of the Association for Counselor Education and Supervision (ACES), half of the names on the list were contacted by postal mail, and half were contacted by e-mail with a request to complete the survey. Response rates have been shown to be higher for surveys sent through postal mail than for surveys sent electronically (Shannon & Bradshaw, 2002) and the researchers aimed to maximize the response rate; however, financial constraints mandated that only half of the surveys be sent through postal mail. Three weeks after the surveys were distributed, a reminder was sent electronically to request completion of the survey, providing the alternative of electronic completion for those who had received the initial request in postal mail. The survey was housed on SurveyMonkey, using the secure feature. The authors input the results in SurveyMonkey for the postal responses.

Simultaneously, the authors sent a survey electronically to the liaison for each of the programs listed on the CACREP Web site as accredited for a doctoral CES program. A question from that survey was used to provide insight about positive and negative impact of post-master's counseling experience on students' performance in doctoral classes.

Participants

One hundred and sixty-six respondents completed the ACES survey (33% response rate). In terms of rank, 35 respondents (21%) indicated they were a professor, 53 (32%) associate professor, 49 (30%) assistant professor, 23 (14%) non-tenure track (clinical or adjunct), and 6 (3%) indicated they fell into an other category. About 51% of the respondents had taught a doctoral-level counselor education course before (84), and the other half had not (81), having only taught master's-level classes. Twenty-seven percent (44) of respondents reported they had never served on a CES faculty search committee. Among the respondents who indicated they had served on CES faculty search committees, 44% (72) master's-level served on 1–4 committees, 19% (31) served on 5–8 committees, 4% (7) served on 9–12 committees, and 6% (10) served on more than 12 committees. Eighteen out of 57 CACREP liaisons responded to the survey (32% response rate). Demographic data was not collected from this group.

Survey Design

To respond to the stated research questions, the authors deemed it was important to request demographic information on rank, programs offered, doctoral teaching experience and the number of search committees on which the participants had served. Two questions were developed asking for level of importance of qualifications when considering candidates for a tenure-track position and a non-tenure track (i.e., adjunct or clinical) position. The qualifications the authors identified were: post-master's counseling, publications, grants, supervision, college teaching, professional organization involvement and professional organization leadership. Participants rated the level of importance as 1 (not at all), 2 (somewhat), 3 (quite a bit) and 4 (extremely). The participants also were asked to provide a minimum quantity for each qualification, if the participant deemed the qualification to be quite a bit or extremely important. The qualifications included were selected based on surveying position announcements for CES positions. Four hypothetical scenarios were presented to the participants that included situations involving serving on a search committee and serving as an advisor to a master's student with particular questions about pursuing a doctoral degree. Each of the hypothetical scenario questions asked for a response and a rationale for that response. Researchers piloted the survey with three faculty members who all reported that the survey was clear. The pilot participants' responses were reviewed to ensure survey questions measured what was intended.

Data Analysis

Authors analyzed the demographic and scaling questions by count and percentages using the SurveyMonkey results produced by the software. The results include numerical count of the participant responses.

The authors analyzed responses to the open-ended comment requests using a constant comparative method described by Anfara, Brown, and Mangione (2002), along with a form of check coding described by Miles and Huberman (1994). The first three authors were the analysis team for this process. Two team members independently conducted a first iteration of assigning open codes for each of the five open-ended questions by reading the data from each question broadly and noticing regularities (Anfara et al., 2002). The two authors then conducted a second iteration of comparison within and between codes in order to create categories and identify themes. The constant comparative method of analysis allows a way to make sense of large amounts of data by organizing into manageable parts first and subsequently identifying themes and patterns.

The third team member served in a peer review capacity (Miles & Huberman, 1994) during the categorizing and theme identification for that question. For each question, different team members were assigned as coders and the peer reviewer. Once the team members assigned individually

derived themes, the team came together and the peer reviewer for each question led the discussion to arrive at consensus for the categories. Each coder presented individually derived themes, listened to the other and, in areas of difference, the team discussed analysis and wording. During this discussion, the peer reviewer clarified and probed using the original comment wording, and the team came to consensus for the themes through this process. These team members sent the themes and the original data for each of the questions to each of the other authors, who served in another layer of peer review to examine the analysis.

Results

Hiring Preferences and Practices for CES Positions

When evaluating applicants for tenure-track CES positions at the assistant professor level, the largest group of respondents (46%) reported that post-master's counseling experience was *quite a bit important*. Forty-four percent of those respondents deemed 2 years to be the minimum number of experience. Also rated *quite a bit important* by most respondents was supervision experience (40%), with a minimum of 2 years of experience (45%), and professional organization involvement (43%), with a minimum of 2 years of experience (33%). As for publications, grants, college teaching and professional organization leadership experience, most respondents (48%, 55%, 35%, and 57% respectively) reported those qualifications were *somewhat important* when evaluating applicants for tenure-track positions. Respondents who deemed these areas as important reported a minimum of 2 publications submitted (41%), 1 year of college teaching experience (49%), and 1 year of professional organization leadership experience (71%).

When asking the same question, but when hiring for a non-tenure-track (clinical or adjunct) CES faculty position, respondents reported a different emphasis on priorities. Most respondents (43%) indicated that PME was *extremely important*, with a minimum number of 2 years (28%), and supervision experience was *quite a bit important* (43%), with a minimum of 2 years (31%). Most respondents indicated grants and professional organization leadership as *not at all important* (74% and 50% respectively), and respondents were split between *not at all important* (48%) and *somewhat important* (48%) for publications. The majority of respondents indicated college teaching (41%) and professional organization involvement (42%) as *somewhat important*.

Seventy-two participants responded to a question to indicate the top three priorities of counseling experience preferred for the most recent tenure-track CES assistant or assistant/associate professor faculty search committee they served on. The majority of respondents (64%) indicated school counseling experience was preferred, while 61% preferred experience with populations diverse in culture or ethnic identity, and 59% preferred experience in community-based agencies. Other areas of experience preference included the following: families (25%), addictions (17%), other (13%), private practice (13%), populations diverse in age (11%), play therapy (9%), populations diverse in religious/spiritual identity (9%), populations diverse in sexual identity (7%), inpatient or day treatment (5%), bilingual (2%) and in-home treatment (1%).

Hypothetical Situation Hiring for Tenure Track

Participants were asked which candidate they would prefer to hire for a tenure-track assistant professor position, given two candidates with all things being equal with one exception. Candidate 1 earned a master's degree, directly entered and completed a doctoral program and then went into the field and gained 3 years of professional experience. Candidate 2 earned a master's degree, directly went into the field and gained 3 years of professional experience, then entered and completed a

doctoral program. One hundred and thirty-eight participants responded to this question. Sixty percent of respondents would prefer candidate 2, 34% would have no preference and 6% would prefer candidate 1. Four themes emerged in the qualitative responses to this question: (1) PME is more relevant and important in training master's students, (2) PME makes the doctoral program more valuable, (3) research staleness and (4) fit.

PME is more relevant and important in training master's students relates to what the candidate would be doing in their role as a counselor educator, and participants reported having the clinical experience following their master's program and prior to their doctoral program was more beneficial in training master's students. One participant indicated:

This candidate understands what it's like to work in the field with a master's degree—a very different experience than working with a PhD. They will be able to better prepare students for the common pressures and issues of working with a master's (degree) in an agency. This was critical for me as I began teaching.

Another participant spoke to this, specifically in training school counselors:

(The) candidate needs to understand the professional role of a school counselor. This is best accomplished when employed as a school counselor—then a doctoral program afterwards—allows more thorough research on a profession. They understand at a ground level through personal experience.

The second theme, *PME makes the doctoral program more valuable*, represents participants' beliefs that having the clinical experience prior to their doctoral studies would make that learning more valuable, as they would have practical experience to help make sense of the abstract learning. One participant illustrated this theme: "I believe the post-master's degree experience provides candidates with context that helps make doctoral study richer and more relevant to practice." Another participant pointed to the benefit of PME evident in this theme: "Having experience prior to the PhD allows the (doctoral) student to anchor knowledge and the clinical experiences at the doctoral level, especially courses like supervision."

The third theme, *research staleness*, speaks to participants' concerns that candidates who had been practicing for several years after graduating from a doctoral program would be out of touch with research and writing required in academia. A participant clearly stated this concern: ". . . the candidate that worked after a doctoral program may lose scholarly writing and research skills." Another participant relayed a similar concern:

I think coming right from the doc-level program would provide some of the most current literature/research knowledge for the new faculty, as well as increase the likelihood that the person is poised to submit manuscripts, have a research agenda and probably would have some grant writing experience. I know how busy the counselors in the field are with client productivity, and I think it's harder to commit to writing and research as a full-time clinician.

Finally, the fourth theme, *fit*, encompasses participants' feelings that either candidate would be fine if they were a good fit for the position and program. One participant shared his or her concern for the individual, rather than when they accrued experience:

They have the same amount of professional experience, just at different times in their career. I think there would probably be some pros and cons to each path. I would be more interested in HOW they each spoke about their experiences and the decision-making process they used.

Another participant stated that either candidate would work: "Regardless of order, the applicant received some of the same experience. Either the doctoral work informed their clinical work or their clinical work informed their doctoral work."

Hypothetical Advising Situations

Researchers asked participants how they would respond to a hypothetical advising situation with a master's student:

Hypothetically, in October, a master's-level student who will graduate in May comes to you for advice. The student's ultimate goal is to be a faculty member and is planning to apply to doctoral programs for entrance in August. Please indicate what your response would be and explain your response in the space below.

One hundred and forty-two participants responded to this question. Twenty-nine percent responded that their recommendation would depend on the quality of the work accomplished by the student. Twenty-seven percent responded that it would depend on the age and maturity of the student. Eighteen percent responded that it would depend on some other factor. Fifteen percent responded they would encourage the student, and 12% responded that they would discourage the student. Three themes emerged from the explanations related to this question: (1) depends on the quality of the student (quality of work, etc. and things related to readiness), (2) need PME and license and (3) encourage student regardless.

The first theme, *depends on the quality of the student*, includes responses about the quality of the master's student's work, maturity level, life experience and readiness. This participant's response highlights this theme:

It really depends on the quality of work AND the life experiences and maturity level of the student (not the age, but the maturity level). Thus, if (the student) had high levels of quality work, and had experience in a variety of settings (e.g., volunteering, clinical work, GA, etc.) outside of "just" coursework, and seemed to have a breadth of understanding and perspective (i.e., maturity), then I would encourage the doctoral program. However, if any of these areas were lacking I might discuss the possibility of gaining some experience first before applying. It also depends on how active (the student) was in terms of service at the master's level (e.g., CSI, or community activities).

Although this respondent clearly differentiated maturity from age, other respondents indicated age was a factor, such as this participant: "If the student is younger or has very limited mental health experience, I would probably suggest getting some counseling experience before beginning a doctorate."

The second theme, *needs PME and license*, includes the respondents who felt that regardless of the student qualities, PME and licensure are important. The following quote illustrates this theme: "I would encourage the student to work in the field and gain licensure or certification first. I believe that working provides valuable insight into the profession and prepares professors to be more effective when teaching students."

Finally, on the other end of the spectrum from the previous theme, some respondents said they would encourage any of their students who wished to pursue a doctorate, making up the third theme, *encourage student regardless*. A respondent expressed the opinion, "One can never know the success level of prospective doctoral student[s]. If they have the desire, they should be encouraged to pursue their goal."

In another hypothetical situation, researchers asked respondents the following:

Hypothetically, a master's student who has the GOAL OF becoming a FACULTY MEMBER asks you for advice. The question asked is how many years of post-master's clinical experience the student should obtain prior to applying to a doctoral program. What would your advice be?

There were 136 respondents to this question. Forty-nine percent would advise at least 2 years of post-master's clinical experience, 21% would advise the student to enter the doctoral program right away without any experience, 13% would advise obtaining at least 3 years of experience, 14% would advise at least 1 year, 3% would advise at least 5 years, and none would advise more than 5 years. Two themes emerged related to the associated rationale for respondents' choices to this question: (1) depends on personal factors of the student and (2) enough time to gain experience.

The first theme, *depends on personal factors of the student*, included factors such as quality of the student, their readiness and maturity level, as well as doctoral program of interest. One respondent spoke to the importance of the student's readiness:

If the student feels ready to enter the doctoral program, then I would encourage them. I would tell them to trust their own sense of timing. I would not recommend it if they were just trying to get through without being fully interested, eager and invested in the program.

Another respondent stressed the importance of considering each student and the quality of master's performance and desires for the future:

I did not respond here because it does not include an "it depends" answer, as it depends what experience they have, what they have gained in their master's program, have they gone above and beyond the call of doing the basic requirements of clinical internship in the master's program and what type of faculty member are they hoping to be (e.g., teaching only, research heavy, etc.). Thus, it really depends on the uniqueness of each student as to what I would recommend.

Finally in this theme, some respondents referred to the importance of considering which doctoral programs the student is interested in applying to. One respondent spoke to this consideration here:

Doctoral programs are designed differently. Some are designed to have clinical hours built in and are good for individuals going straight through while other programs require 2–5 years of work experience in the field and have less supervision and clinical hours.

Other respondents reported that having experience before entering a doctoral program was critical, regardless of the student, making up the second theme, *enough time to gain experience*. These respondents spoke to needing enough experience to earn licensure and supervision licensure and to develop a sense of professional identity first. Many also felt students should get a sense of the field before entering a doctoral program to see if they would prefer to practice at the master's level. The

following respondent spoke to the need for experience primarily to aid in his or her future doctoral student role of supervising and teaching master's students:

In 2 years, a student would have completed or (be) near completion of licensure requirements and thus have some applied knowledge from which to draw upon. In so doing, the prospective doctoral student would bring experience and be better positioned, hierarchically speaking, to work with master's degree-seeking students. With no experience, the doctoral student may find themselves in a position where they would be supervising or teaching a master's degree-seeking student with greater clinical/life experience creating . . . an interesting power differential.

Similarly, another respondent expressed, "How can one teach or supervise what he or she has not yet experienced?"

Many respondents indicated that gaining licensure before entering a doctoral program was critical: "Licensure in most states requires a minimum of 2 years post-master's supervised work. I think licensure should be required before proceeding." Speaking to the need to develop professional identity and to confirm career goals, a respondent said, "(Two years)—this provides enough time to establish a professional identity, create a track record of excellence in the field and clarify their desire to enter the academy."

Not all respondents believed PME was vital for future faculty members however, as is evident with the following quote: "I entered right away and it worked out fine for me. I don't think it makes a big difference either way." Another respondent expressed concern that students who take time away from school often do not return: "I believe that people who go into post-master's work almost never go back to get their doctorate, no matter how strong the intentions of the person are at graduation."

In a final hypothetical situation, we asked participants the following:

Hypothetically, a master's student who has the GOAL of becoming an ADVANCED PRACTITIONER asks you for advice. The question asked is how many years of post-master's clinical experience the student should obtain prior to applying to a doctoral program. What would your advice be?

There were 134 respondents to this question. Thirty-eight percent would advise at least 2 years of experience, 16% responded there is no need for a doctoral degree in this situation, 10% would advise that no experience is needed and to enter right away, another 13% would advise at least 5 years of experience before applying to a doctoral program, 13% would advise at least 3 years, 9% at least 1 year, and 1% would advise more than 5 years. Four themes emerged related to this question: (1) uncertainty about the purpose of the question, (2) no need for a doctorate to practice, (3) depends on the student and their attributes and (4) desire to specialize.

The first theme, *uncertainty about the purpose of the question*, encompasses many responses that communicated confusion about the meaning of "advanced practitioner." This is evident in the following quote: "Not sure what you mean by advanced practitioner." The intention of the question was to capture potential guidance given to advisees who may seek to obtain a doctoral degree with a goal to enter or return to the clinical field, or to advance into supervision or administrative positions. However, this theme clearly shows there was confusion among respondents over the question and its intent.

The second theme, *no need for a doctorate to practice*, consists of responses expressing the lack of need for someone to pursue a doctoral degree in order to practice because counselors can become fully licensed at the master's level. As one respondent stated, "A master's degree is a terminal degree. Our 60-hour requirement makes our master's degree an advanced clinical degree. No further coursework is needed for full licensure." This theme also includes responses indicating that a degree in CES does not prepare you for further clinical practice, as this respondent communicated: "Degrees in counselor education are really about preparing someone for a faculty or supervisor position, in my opinion, and often require little in the way of advanced counseling skill development."

For this question, as in many of the others, a theme emerged related to the individual student, *depends on the student and their attributes*. One respondent said that young and bright people can make it happen: "Still believing that bright young people can master most things easily, I don't believe that waiting to get experience is necessary."

The final theme, *desire to specialize*, includes responses indicating the following recommendations: use PME to find a specialization before pursuing a doctorate, PME would make the doctoral program more meaningful, and some students may decide they do not need the doctorate in order to do what they want. A respondent illustrated this theme: "Get some counseling experience and have your counseling license in hand before embarking on doctoral study. Gain some perspective about the areas you want to study in depth, based on what challenges you encounter in actual practice."

Impact of PME on Doctoral Student Performance

Finally, researchers asked CACREP liaisons about the positive or negative impact of post-master's counseling experience on their doctoral students' performance in class. Two themes emerged in the participants' answers: (1) the more experience the better and (2) experience is valuable, but not essential.

In the first theme, *the more experience the better*, respondents described the ways that PME helps doctoral students in the classroom. This includes observations from CACREP liaisons that doctoral students who have worked in the field know what mental health issues look like and how to respond. They also are better able to apply content learned in the doctoral program to practice. PME helps doctoral students feel more confident and increases their credibility with master's students they are teaching and supervising. When doctoral students have PME, they are better equipped to help master's students in their developmental journey. One respondent illustrated some of these thoughts:

The more experience the better, particularly in terms of supervision and teaching. Without a fairly substantial fund of knowledge about applied practice, doctoral students have difficulty helping master's counselors-in-training understand abstract concepts in practical terms. What does PTSD look like? How do I respond to a client who becomes suicidal in session? . . . Because our doc students begin providing supervision in the first year of their program, I would be particularly concerned if the ONLY experience they had was in their own master's internships. They would be essentially just one year (maybe semester) ahead of those they are supervising.

In the second theme, *experience is valuable, but not essential*, respondents wrote about the experience gained in the master's and doctoral programs being enough. An example of this rationale is shown here: ". . . although we will admit students without post-master's experience, we offer deep clinical experience while in our doc program. Many doc students complete two full years of internship while in the program."

Discussion

The findings of this study help fill a gap in the literature identified by Boes et al. (1999) and Warnke et al. (1999) about the amount of counseling experience needed prior to entering doctoral programs. Goodrich et al. (2011) and Bernard (2006) asserted that doctoral degrees in CES are intended to provide the student with advanced competencies in clinical practice, classroom instruction, supervision, research and leadership so that the student may serve as a future leader for the profession of counselor education in academic positions. Specifically, these findings shed light on what faculty members are recommending to master's students regarding PME prior to entering a doctoral program and faculty members' preferences in hiring colleagues with regard to PME.

PME is important both for doctoral students and faculty members, as is indicated by our findings. According to respondents, experience informs supervision, teaching, research and professional identity during the doctoral program and in faculty roles. These findings are compatible with previous research (Bodenhorn et al., 2014; Munson, 1996; Nelson et al., 2003; Rogers et al., 1998). Nelson et al.'s (2003) findings point to the importance of PME in doctoral admissions. They found this was a helpful factor in selecting quality doctoral students, though their participants reported not all applicants have this experience. As for future faculty members, experience has been found to be important as well by Rogers et al. (1998) and Bodenhorn et al. (2014). Bodenhorn established that the majority of assistant and associate professor announcements on CESNET listed counseling experience or licensure as a required or preferred qualification, and Rogers et al. found that counselor education programs ranked clinical experience as their second most important criteria for faculty positions. Similarly, in the social work discipline, Munson (1996) asserted social work PhDs need to have post-MSW experience in order to fulfill the needs of the field, which include teaching master's-level students and researching to enhance knowledge.

CES faculty spoke to the importance of clinical practice in areas of teaching, supervision and research. Munson (1996) connected clinical experience to research performance in reporting that doctoral students who lack clinical experience tend to avoid practice-related dissertation studies. Similarly, respondents in our study wrote about doctoral students' clinical experience providing fodder for research ideas. Further, clinical experience may validate teaching credibility (Rogers et al., 1998). This was evident in this study's findings as well, along with validating supervision credibility. There was concern among respondents about doctoral students providing supervision to master's students who would possibly be only one semester behind them in experience. In addition, respondents expressed concern that doctoral students and future faculty members with no PME would exhibit rote, by-the-book teaching, rather than drawing on clinical experience to illustrate abstract concepts in counseling.

Though there was much support for PME in our findings, many respondents emphasized evaluating the circumstances of each student individually. Among the circumstances that stood out were age and maturity. Some respondents expressed concern that it can be difficult to return to school once individuals have careers and families. The academic and skill level of the master's student was another factor emphasized by respondents. Proctor (1996) asserted that the social work field might miss out on academically skilled and eager students by requiring PME. This may be a fear for some in the counselor education field as well. Indeed, within this study's findings, there was a tension between academically and clinically gifted students entering doctoral programs right away and the importance of getting experience.

For many respondents, the amount of experience obtained during the master's and doctoral programs is enough, especially in cases where students work in clinical positions while completing their doctoral degrees. Some respondents pointed out that doctoral programs in CES are designed differently, with some emphasizing clinical work as part of the doctoral training and others operating on the assumption that the doctoral student is already an experienced clinician. For example, faculty members might support a master's student going straight to a doctoral program if the student is applying to a doctoral program with robust opportunities to gain clinical experience.

Implications

These findings will help counselor educators better advise master's students who have aspirations for doctoral work. Specifically, this study informs the CES field about the value placed on PME. It may be beneficial for advisors to share the findings of this study with advisees who are considering doctoral programs. In addition, advisors may consider the academic and skill level strength of the master's student and may emphasize more years of clinical experience before applying to doctoral programs to those students who could benefit from the additional experience. Further, students who exhibit more maturity through age and life experience may be perceived as ready to handle doctoral work sooner than those who have entered the master's program immediately from their undergraduate program.

Responses in this study are in line with Goodrich et al.'s (2011) findings that CACREP-accredited doctoral programs train students in somewhat different ways. Advisors may have familiarity with a variety of doctoral programs and can help their advisees consider the cultures of each to find the best fit in terms of experience, as well as other characteristics.

Finally, it appears clear that experience is valuable; thus, advisors would be wise to encourage students to get PME. The findings of this study show that counselor educators believe experience enriches individuals' teaching, supervision and research. As such, master's students will make more effective future doctoral students and faculty members if they gain PME first.

There are limitations to this study that are important to note. While a 33% response rate is considered acceptable, we would prefer to have more than 166 responses. There is likely a portion of professional counselor educators who are not members of ACES and therefore were not included in our sample, and there is no way to determine the numbers or the characteristics of those who choose membership and those who do not. A significant number of the participants had not served on search committees or taught a doctoral class, so those responses might be considered more theoretical than historical. Finally, our hypothetical question related to how participants would advise master's students with the goal of becoming an advanced practitioner was not clear or well received given the confusion evident in the responses. Regardless of these limitations, the results of this study are compelling. Because of the length of the survey, the demographic questions did not include personal demographics such as gender, age, or ethnicity. Similarly, we did not ask for the type of university at which the participant works (e.g., Carnegie research or teaching designation). There may be intricacies of type of university and relevance of experience or advice that were not identified in this study.

Future research is needed on the role PME plays in the development of the counselor educator as a scholar, teacher and academic leader. Additional research exploring the impact of PME on a CES faculty member's success in a faculty role, particularly teaching and supervision, would be helpful to

the field. Furthermore, research delineating the different types of institutions and possibly different qualifications would assist CES advisors. Lastly, research exploring current practices and potential in the CES field for producing doctoral-trained counselors to represent the counseling discipline at the administrative and supervisory levels of mental health facilities may provide beneficial information for advancing the field.

Conflict of Interest and Funding Disclosure

The authors reported no conflict of interest or funding contributions for the development of this manuscript.

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