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School-Based Counseling in the United States: Mode of Practice and International Comparisons Related to Five Dimensions of Practice

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Abstract

This study used the five dimensions of practice identified by Carey, Fan, He, and Jin (2020) to describe the preferred mode of practice of US school-based counselors and compare this mode of practice with nine other countries. A total of 380 US school counselors completed the International Survey of School Counselor Activities-United States. Mean item ratings and mean BART scores were used for both descriptions and comparisons. US counselors indicated that Counseling Services; Advocacy and Systemic Improvement; Prevention Programs; and, Educational and Career Planning were all important aspects of their role. In comparison to international counterparts, US counselors placed greater emphasis on Advocacy and Systemic Improvement and Prevention Programs. Results confirmed previous scholarship suggesting that counselors in the US have a very broad role. Any reformulation of this role would benefit from comparative international research on the strengths and limitations of different modes of practice.

Keywords: school-based counseling, school counselor role, cross-national comparative research, international school counseling, policy research.

School-based counseling in the United States is a mature profession with well-established modes and standards for practice. Counselors have been employed in U.S. schools for over 100 years and over that time several shifts in the nature of the work have occurred (Cinotti, 2014; Gysbers, 2004). However, several factors have operated to establish a high level of consensus regarding the mode of practice for school-based counseling in the United States. First, the professional associations have developed important statements and guidelines regarding the school counselors' role and function. Most notably these include: the American School Counseling Association ([ASCA], 1999) role statement; the current ASCA statements on appropriate and inappropriate school counselor duties (ASCA, n.d.a); school counselor competencies (ASCA, n.d.b); and the role of the school counselor (ASCA, n.d.c).

In addition, comprehensive developmental guidance (CDG) gradually emerged as the dominant model for the organization and evaluation of school-based counseling programs and the majority of state departments of education adopted official models based on its principles (Sink & MacDonald, 1998). CDG specifies a broad role for school-based counselors that includes activities related to

individual planning, guidance curriculum, responsive services, and system support (Gysbers & Henderson, 2012). The ASCA National Model for School Counseling Programs (ASCA, 2003, 2012) updated CDG to increase its compatibility with contemporary models of schooling. This model enumerated many activities that constitute the role of school counselors. Martin and Carey's (2014) analysis of the ASCA's (2012) National Model identified six distinct categories of school counselor activities related to: direct services (counseling with students), indirect services (consultation and training with teachers and parents), school counselor personnel evaluation, counseling program management, counseling program evaluation, and professional advocacy. After the initial development of the ASCA National Model (2003), most state departments of education updated their official state models to align them with the ASCA National Model (Martin, Carey, & DeCoster, 2009).

The professional association guidelines on role and function and the ASCA National Model influenced the Accreditation Standards of the Council on the Accreditation of Counseling and Related Education Programs ([CACREP], 2015). CACREP oversees a voluntary national accreditation process for university-based counselor preparation programs. As a result, the curriculum of training programs seeking CACREP accreditation must be aligned with professional practice as specified in the professional guidelines and the ASCA National Model. The CACREP Accreditation Standards, professional association guidelines, and state models have influenced in turn: (a) state licensure and certification standards that are used to determine whether candidates for school counseling positions in public schools are approved for employment and practice; and (b) state training program accreditation standards that influence the curriculum of university-based training programs (Trevisan, Carey, & Martin, in press). In summary, mutually reinforcing models and standards of professional associations, accrediting bodies and state departments of education have led to an increasing level of consensus on the mode of practice for school-based counselors in the United States.

That said, scholars have noted that there is still not a perfect consensus on the ideal mode of school-based practice (Cinotti, 2014; Lambie & Williamson, 2004). Whether school-based counselors should offer mental health counseling services to needy students or restrict themselves to engaging in the referral and monitoring of students with mental health problems is a particularly

troublesome question related to the professional role (Christian & Brown, 2018). It has been suggested that the professional identity of school-based counselors may influence the extent to which they engage in the actual delivery of mental health counseling with students vs. handling students' mental health issues through referral (Kaplan & Gladding, 2011).

Research has also consistently demonstrated that even though school-based counselors in the United States may have achieved a reasonable consensus on their role and associated activities, school administrators, teachers and parents may not necessarily understand or share this perspective (e.g., Reiner, Colbert, & Perusse, 2009; Wilder & Ray, 2013; Zalaquett, & Chatters, 2012). Many U.S. school-based counselors may be limited in the extent to which they can enact their ideal role because critical stakeholders have different expectations for them (Culbreth, Scarborough, Banks-Johnson, & Solomon, 2005; Nelson, Robles-Pina, & Nichter, 2008; Scarborough, & Culbreth, 2008).

In addition, several important critiques of the current U.S. school-based counseling mode of practice should be noted. It has been suggested that the role of U.S. school-based counselors is so broad that it is impossible to enact the full range of prescribed activities with high quality (Carey & Martin, 2017; College Board, 2011). In addition, Agramovich, Hoskins, and Bartlett (2010) have suggested that many of the tasks associated with this broad role do not require a high level of professional training and that students are best served when school-based counselors are free to focus on the delivery of direct counseling services. Suggestions to revise the U.S. school-based mode of practice have included: eliminating activities considered to be extraneous by aligning university training with actual school-based counseling practice (College Board, 2011), using paraprofessionals to perform activities that do not require advanced counselor training (Agramovich et al., 2010), and developing school-based counseling specializations to enable schools to create teams of counselors with the expertise that they need (Carey & Martin, 2017).

Recent studies using the *International Survey of School Counselor Activities (ISSCA)* contributed to the understanding of the current mode of practice in the United States. In a recent study, Fan, Carey, He, and Martin (2019) found that there was a great deal of consensus among the participants from a national sample of U.S. school-based counselors regarding the importance of the various activities included in the survey. U.S. school-based counselors showed very few practically significant, demographic differences in role perceptions. Interestingly, counselors' professional identity did not seem to be strongly related to their perspectives on role. These results were replicated in a follow-up study of school-based counselors in West Virginia (He, Brady, & Carey, in press).

The international comparative study of school counseling practice has the potential to offer interesting and

important insights into the efficacy of different modes of practice (Aluede, Carey, Harris, & Lee, 2017). The *ISSCA* was designed to enable such international comparisons. In the lead article of this special issue, Carey, Fan, He, and Jin (2020) presented the results of a ten-nation comparative study of the mode of practice of school-based counselors. This study found that there are at least five important dimensions along which school-based counseling practice differs across countries: *Counseling Services; Advocacy and Systemic Improvement; Prevention Programs; Administrator Role; and, Educational and Career Planning*. The purposes of the present study were: (a) to describe the preferred mode of practice of U.S. school-based counselors based on these five dimensions; and (b) to contrast the U.S. mode of practice with that of the other nine nations.

Method

The methods of data collection for the present study have been described in detail by Fan, et al. (2019). A brief synopsis is presented below.

Measure

Participants completed the United States version of the *International Survey of School Counselors' Activities (ISSCA-US)*; Fan et al., 2019)

Participants

Data were collected from two different samples. For the first sample, the American Counseling Association (ACA) provided emails for members who had indicated that they were employed as school counselors and who had given permission to be contacted for research purposes ($N = 2,137$). Of this group, 403 people returned surveys, 219 of which completed the entire 42-item *ISSCA-US*. A second sample was drawn from a state department of education list of 815 school counselors in West Virginia. Of this group, 236 people returned surveys, 171 of who completed the entire 42-item *ISSCA-US*. In all, 390 U.S. school-based counselors contributed data to this study.

Procedures

The *ISSCA-US* and all research materials and procedures were reviewed and approved by the University of Massachusetts Human Subjects UMASS Institutional Review Board prior to study implementation. A survey was built in Survey Monkey that included an Informed Consent page, demographic items, and the 42-item *ISSCA-US*. A link to the online survey was sent out to participants in January 2017 in an email from the first author that informed them of the purposes of the research, the nature of the *ISSCA-US*, the potential impact their participation could have on policy research, and the confidentiality of their responses. The link led to an Informed Consent page.

If participants agreed to participate, they were directed to the demographic items and *ISSCA-US*. After the initial request, two reminders were also sent out at one-week intervals to participants who had not yet responded to the Informed Consent request.

Data Analysis

Data analysis procedures were described by Carey et al. (2020). The data from U.S. school counselors was pooled with data from counselors in 9 other countries and subjected to an exploratory factor analysis. Five dimensions of practice were identified. Mean item ratings and mean BART scores were also computed to provide descriptive information on U.S. ratings and permit international comparisons on these five dimensions.

Results

Response Rates

In order to increase the number of respondents, the tailored design method for electronic surveying methods was used in regard to email communications and the timing of delivery (Dillman, Smyth, & Christian, 2014). Out of a possible 2,952 participants who were invited to complete the research instrument, 390 complete data sets were obtained. This represents an overall return rate of 13%, a figure that, while low, is on par with prior survey research involving school counselor populations (Limberg, Lambie, & Robinson, 2016; McCabe, Rubinson, Dragowski, & Elizalde-Utnick, 2013; Mullen, Lambie, Griffith, & Sherrell, 2015). While internal online surveys within organizations (e.g., places of employment or university systems) tend to have an average response rate of 30-35% (Baruch & Holtom, 2008; Nulty, 2008), survey response rates among large, external populations typically fall between 10-15% (Fan & Yan, 2010). A low response limits the generalizability of findings and may reflect non-response bias, though Cook et al. (2000) argue that in survey research, population representativeness is ultimately more essential than response rate.

Participant Characteristics

Among the participants: 17% were male and 83% were female; 43.1% worked in a Rural setting, 34.1% in a Suburban setting, 17.7% in an Urban setting, and 4.6% in an Inner City setting. Their experience of working as a school counselor ranged from 1 to 40 years with 23% reporting as less or equal to 4 years, 22% (5-9 years), 16% (10-14 years), 21% (15-19 years), and 18% (20+ years). With regard to the grade levels with which they worked, 25% of the participants indicated working at the elementary level, 18% at middle school level, 37% at high school level, and 20% at the other overlapped grade levels.

U.S. School Counselor Ratings of Appropriateness

Average item ratings by U.S. school counselors on the five dimensions of practice are presented in Table 1. U.S. school counselors rated four dimensions of practice very highly: *Counseling Services* ($M = 3.5$; $SD = 0.40$); *Advocacy and Systemic Improvement* ($M = 3.5$; $SD = 0.42$); *Prevention Programs* ($M = 3.4$; $SD = 0.45$); and *Educational and Career Planning* ($M = 3.5$; $SD = 0.58$). Considering the anchoring of the ratings (3 = "Appropriate"; 4 = "Very Appropriate") this indicated that U.S. school counselors consider all four of these dimensions of practice as being very appropriate. U.S. school counselors rated the *Administrator Role* dimension ($M = 2.0$; $SD = 0.5$) as being inappropriate for the professional school counselor role in the United States.

BART Scores for U.S. School Counselor Ratings

Average BART scores of the ratings of U.S. school counselors and their international counterparts on the five dimensions of practice are presented in Table 2. Compared to their counterparts in 9 other countries, U.S. school counselors showed: the highest average BART score for the *Advocacy and Systemic Improvement* dimension ($M = 0.643$; $SD = 0.632$) and the third highest average BART score for *Prevention Programs* ($M = 0.688$; $SD = 0.648$). Compared to the United States, only Turkey and Nigeria showed a greater emphasis on *Prevention Programs*. The United States approach to practice can be considered to show a strong emphasis on these two dimensions in comparison to the international sample as a whole.

In contrast, U.S. school counselors showed the lowest average BART score for the *Administrator Role* dimension ($M = -0.959$; $SD = 0.930$) out of all the 10 countries sampled. The U.S. approach to practice does not include activities associated with school administrative functions.

For *Educational and Career Planning*, the U.S. BART score was the 5th highest ($M = 0.494$; $SD = 0.900$). Similarly, for *Counseling Services*, the U.S. BART score was the 6th highest ($M = -.347$; $SD = 0.976$). In comparison to the other 9 countries, the U.S. approach to practice is in the middle on both these dimensions. It should be noted that U.S. counselors considered both of these dimensions as very important aspects of professional practice. However, comparatively, the approaches to school counseling practice in approximately half of the other countries sampled showed a greater emphasis on these two dimensions.

Discussion

The results of the present study confirm previous scholarship (Carey & Martin, 2017; College Board, 2011) that suggested that school-based counselors in the United States have a broad role. U.S. school-based counselors indicated that activities related to *Counseling Services* (e.g., student individual counseling, student group

counseling, parent consultation); *Advocacy and Systemic Improvement* (e.g., advocating for the needs of individual students and for improvements in school policies and procedures); *Prevention Programs* (e.g., guidance curriculum and prevention program delivery) and, *Educational and Career Planning* (e.g., career awareness groups, career counseling, and college placement counseling) were all important aspects of the school counseling role. Furthermore, in international comparisons, U.S. school-based counselors showed a strong emphasis on the importance of activities related to *Advocacy and Systemic Improvement* along with *Prevention Program*. Their emphasis on *Counseling Services* and *Educational and Career Planning* proved to be near the midpoint of the 10 country sample. Finally, U.S. school-based counselors (along with counselors from 8 of the remaining 9 countries) showed a strong consensus that activities associated with the *Administrator Role* were inappropriate for the school counselor role. This result would be expected given the United States emphasis on comprehensive developmental models of practice (including the ASCA National Model) that specify a wide range of types of activities (Martin & Carey, 2014) and professional association statements that both suggest a broad range of appropriate activities and indicate that aspects of administrator role are incompatible with the school counselor role (ASCA, 1999; n.d.a; n.d.c).

Other countries participating in this study showed a narrower role. Maltese school-based counselors, for example, considered *Educational and Career Planning* activities as inappropriate for the role. Costa Rican and Venezuelan counselors rated activities related to delivering *Prevention Programs* as having relatively little importance regarding their role. Nigerian counselors rated activities related to *Advocacy and Systemic Improvement* as having relatively little importance regarding their role. Interestingly, Nigerian counselors also rated activities related to the *Administrator Role* as being important elements of school-based counseling practice. Further comparative research is needed to identify the reasons that modes of school-based counseling programs differ and to identify the strengths and limitations associated with these differences.

At present we suggest that the reason a broad model of practice exists in the United States is because of the consensus that has developed as a result of (a) defining the school-based counselor role in terms of comprehensive developmental guidance; and (b) the use of this broad definition of role in professional licensure/certification statutes, training program accreditation standards, and professional role statements. We further suggest that this broad role is enabled by the affluence of the United States that allows for both rich staffing of school-based counselors in public schools and an extended period of university training. It is further enabled by a tradition that vests responsibility for all activities related to the role in the school-based counselors themselves rather than (as is

true in several other countries) by having different professionals responsible for different sets of activities. While several possible reformulations of role have been suggested (e.g., Astramovich et al., 2010; Carey & Martin, 2017; College Board; 2011), at this point necessary data on the strengths and limitation of different modes of practice is sorely lacking. A reformulation of the role of school-based counselors in the United States would be greatly aided by comparative international research. Relatedly, the debate over how school-based counselors in the United States should address the mental health issues of students needs to be grounded in research on the strengths and limitations of different approaches to addressing mental health issues.

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Table 1.

Means and standard deviation for items for five dimensions of practice for ten countries

Country	N	Counseling Services		Advocacy and Systemic Improvement		Prevention Programs		Administrator Role		Educational and Career Planning	
		M	SD	M	SD	M	SD	M	SD	M	SD
US	390	3.5	0.40	3.5	0.42	3.4	0.45	2.0	0.51	3.5	0.58
Malta	37	3.4	0.36	3.3	0.52	3.0	0.65	1.8	0.63	2.0	0.93
Costa Rica	107	3.1	0.47	3.2	0.47	2.7	0.56	1.9	0.50	3.2	0.69
Venezuela	30	3.1	0.45	3.1	0.48	2.8	0.59	2.1	0.52	3.1	0.74
South Korea	1687	3.7	0.32	3.1	0.54	2.9	0.63	2.4	0.72	3.3	0.59
Turkey	185	3.4	0.38	3.2	0.44	3.4	0.42	2.1	0.50	3.4	0.53
China	209	3.2	0.38	3.0	0.42	3.1	0.46	2.4	0.52	3.1	0.55
Kenya	47	3.6	0.47	3.1	0.48	3.1	0.47	2.3	0.62	3.7	0.66
Nigeria	176	3.5	0.34	2.9	1.02	3.4	0.54	3.2	0.51	3.7	0.50
India	45	3.6	0.58	3.4	0.69	3.4	0.72	2.4	0.60	3.3	0.76

Note. 1 = Very Inappropriate; 2 = Inappropriate; 3 = Appropriate; 4 =Very Appropriate

Table 2.

Means and standard deviation for BART Scores for 5 dimensions of practice for 10 countries

Country	N	Counseling Services		Advocacy and Systemic Improvement		Prevention Programs		Administrator Role		Educational and Career Planning	
		M	SD	M	SD	M	SD	M	SD	M	SD
USA	390	-0.347	0.976	0.643	0.632	0.688	0.648	-0.959	0.930	0.494	0.900
Malta	37	-0.329	0.763	0.318	0.726	0.165	0.897	-0.904	0.855	-2.134	1.475
Costa Rica	107	-1.138	1.143	0.462	0.796	-0.555	0.854	-0.617	0.714	0.744	0.950
Venezuela	30	-1.213	1.072	0.133	0.746	-0.149	0.807	-0.219	0.647	0.779	1.042
South Korea	1687	0.373	0.780	-0.096	0.867	-0.355	0.980	0.137	0.828	-0.233	0.918
Turkey	185	-0.433	0.942	0.118	0.690	0.716	0.495	-0.337	0.754	-0.116	0.779
China	209	-0.935	0.958	-0.195	0.594	0.427	0.518	0.178	0.769	0.065	0.672
Kenya	47	0.224	1.160	-0.383	0.725	0.103	0.390	-0.071	0.613	1.134	0.712
Nigeria	176	-0.231	0.838	-0.737	2.214	0.699	1.107	1.666	0.588	0.802	0.676
India	45	-0.005	1.397	0.189	0.939	0.641	0.679	-0.097	1.027	-0.477	1.062