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Charmayne R. Adams
University of Nebraska at Omaha

Casey A. Barrio Minton
University of Tennessee

Jennifer Hightower
Idaho State University

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Teaching Trauma Theory and Practice in Counselor Education: A Multiple Case Study

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Charmayne R. Adams , Casey Barrio Minton , Jennifer Hightower 

Abstract

Teaching about trauma theory and practice is an integral part of counselor preparation. The purpose of this multiple case study was to understand how counselor educators (CEs) designed and facilitated significant learning experiences regarding trauma theory and practice. We aimed to answer two research questions: (1) How do CEs choose which content to address in trauma courses?; and (2) Which teaching methods do CEs use to facilitate significant learning experiences in trauma courses? The study participants were three CEs teaching trauma courses in multiple formats (face-to-face, online, and hybrid) in CACREP programs. The results indicated that instructors faced unique situational factors that impacted their choice of teaching and learning activities and assessment measures. The themes *instructor role*, *instructor identity*, and *eliciting fundamental change in learners* impacted which teaching methods were chosen to facilitate significant learning experiences. This article includes implications for CEs designing and teaching trauma courses.

Significance to the Public

Training counselors to work with clients that have a history of trauma is a vital component of counselor education. This study builds on previous research by focusing on what content is taught and how it is taught to counselors in training. Findings indicate that instructor experiences, identity, and role play have a significant influence on what is taught, and how it is taught in trauma courses.

Keywords: counselor education, trauma, multiple case study

Teaching about trauma practice and theory is a critical component of counselor education. Client exposure to traumatic events can lead to post-traumatic stress disorder (PTSD), acute stress disorder, depression, and anxiety, and may be linked to much of the distress that brings clients to see mental health professionals (Blankenship, 2017; Herzog & Schmahl, 2018; Lutton & Swank, 2018). Additionally, exposure to traumatic experiences, especially chronic traumatic experiences, has been correlated with physical and psychological distress, an increased likelihood of addiction-related disorders, and interpersonal difficulties (Courtois & Ford, 2013; Herman, 1997; Van der Kolk, 2005).

Most professional counselors will provide services to clients who have experienced a traumatic event (Layne et al., 2014; Zelechowski et al., 2013). Professional counselors who lack adequate training are at a higher risk of personal distress (Courtois & Gold, 2009), overestimating their own competency (Wilson & Lindy, 1994), providing inadequate services (Wilson & Lindy, 1994), exacerbating client distress through retraumatization (Symonds, 1980), and being inadequately equipped to support the large number of individuals impacted by the prolonged stress of COVID-19 (Moh & Sperandio, 2022). Additionally, practicing outside of the scope of competency is one

Charmayne R. Adams, Academic Affairs and Department of Counselor Education in the School of Education, Gonzaga University; **Casey Barrio Minton**, Educational Psychology and Counseling Department, University of Tennessee – Knoxville; **Jennifer Hightower**, College of Education, Department of Educational and Developmental Science, University of South Carolina. Correspondence concerning this article should be addressed to Charmayne R. Adams, Student Affairs, Gonzaga University, 502 E. Boone Ave, Spokane, WA, 99258 (email: adams3@gonzaga.edu).

of the most common ethical violations reported to state licensing boards for professional counselors (Even & Robinson, 2013).

In contrast, practitioners with knowledge and skills related to trauma are better equipped to empathize, customize interventions, and create environments that do not retraumatize clients (SAMHSA, 2014). Scholars have called for the need to better understand professional competencies necessary to serve those impacted by trauma (Avery, 2017; Layne et al., 2014; Mattar, 2011; Paige, 2015). Counselor educators may use various counseling organizations (e.g., American Counseling Association and American Mental Health Counselors Association), private and government organizations (e.g., National Child Trauma Stress Network, SAMHSA, Association of Traumatic Stress Specialists), and allied mental health professions (e.g., American Psychological Association, Council for Social Work Education) to provide a roadmap for trauma competency. Currently, there are educational and practice standards, sometimes referred to as competencies, available from a variety of associations. Educational trauma standards include multiple CACREP standards that mention trauma (CACREP, 2016), the American Mental Health Counselors Association's trauma training standards (AMHCA; 2017), the American Psychological Association New Haven Competencies (APA; Cook et al., 2014), and the Council on Social Work Education's advanced trauma concentration standards (CSWE; 2008). Professional standards, which originate from organizations and are intended to enhance professional practice, include those from the National Center for Traumatic Stress Network (NCTS; 2012); the Trauma-Informed Care in Behavioral Health Services Treatment Improvement Protocol (TIP), published jointly by the National Center for Biotechnology Information (NCBI), the National Library of Medicine (NLM), the National Institute of Health (NIM), and SAMHSA (2014); and the U.S. Department of Veterans Affairs, who created the clinical practices guidelines (Department of Veterans Affairs and Department of Defense, 2010, 2017). An in-depth analysis of each

of those educational and practice standards can be found in the dissertation authored by Adams (2019).

In the field of professional counseling specifically, there has been a push to require trauma training for all entry-level counselors (Moh & Sperandio, 2022). The American Counseling Association also recently (2022) added a division dedicated to trauma and resilience counseling (the International Association for Trauma and Resilience Counseling), which further emphasizes the importance of the topic area for professional counselors. The allied helping fields of psychology and social work have provided conceptual and empirical literature on teaching processes for trauma theory and practice. Researchers within these fields highlighted concern with instructors who haphazardly exposed students to trauma content in the classroom (Abrams & Shapiro, 2014; Black, 2006, 2008; Bussey, 2008; Cunningham, 2004; Gilin & Kauffman, 2015).

To date, there is little professional counseling literature regarding how to facilitate learning experiences related to trauma theory and practice for counselors in training (Greene et al., 2016; Kitzrow, 2002; Lokeman, 2011; Sommer, 2008; Veach & Shilling, 2018). The current literature highlights the need for instructors to utilize both didactic and experiential methods, delivering content related to types of traumas, trauma interventions, and practitioner distress, and aiding students in increasing distress tolerance related to the content (Kitzrow, 2002; Lokeman, 2011; Sommer, 2008; Veach & Shilling, 2018). The trauma education research in counselor education has focused on trauma competencies, which include foundational knowledge and skills necessary for trauma counseling (Avery, 2017; Layne et al., 2014; Mattar, 2011; Paige, 2015; Watkins Van Asselt et al., 2016), and has left a void in exploring how instructors can teach trauma content and skills effectively (Greene et al., 2016).

The purpose of this multiple case study was to better understand how counselor educators (CEs) design and facilitate significant learning experiences related to trauma theory and practice. Specifically, this study focused on how CEs chose

which content to address and which teaching methods to use to facilitate significant learning experiences in trauma courses.

Theoretical Framework

We utilized Fink's theory of significant learning (2013) as a framework to conceptualize course design, which includes both content and delivery. Creating significant learning experiences begins by focusing on learner-centered approaches in contrast to content-centered approaches to teaching (Fink, 2013). Fink (2013) built a taxonomy of significant learning that moved away from the cognitive domain and attended to affect and process. He broadened and created a new taxonomy that includes six domains of significant learning: (a) foundational knowledge, (b) application, (c) integration, (d) human dimension, (e) caring, and (f) learning how to learn (Fink, 2013).

Fink's Theory of Significant Learning Domains

In this section we will provide a brief description of each of the six domains of significant learning in addition to examples of learning and assessment activities in each domain.

Fundamental knowledge "refers to the students' ability to understand and remember specific information and ideas" (Fink, 2013, p. 34). This domain includes learning through lecture and assessment such as multiple-choice exams that focus on learning and recalling basic information.

Application refers to students learning how to engage with the material and educators using action-oriented student learning to develop new skills. This domain could include the application of material in case studies, client simulations, and role plays.

Integration refers to students learning how to view connections between ideas, settings, domains, or other learning experiences. Integration often includes students creating presentations or their own case studies which require them to draw on multiple domains (e.g., counseling theory, human

development, diagnosis, trauma theory) to create a cohesive product.

Human dimension is when students learn "the personal and social implications of what they have learned" (Fink, 2013, p. 35). This domain could include real client cases, guest speakers, podcasts, and videos that allow students to see what theoretical concepts look like within the context of a client's life.

Caring involves a change in the student in how to reflect on feelings, values, and interests, and indicates an intrinsic change for the student. This domain aligns with many of the reflection assignments that students are required to do throughout counseling programs.

The final dimension is *learning how to learn*, which is when students learn how to be better students, and educators teach a process that encourages them to be self-directed learners (Fink, 2013). This is often incorporated with assignments such as annotated bibliographies, literature review papers, and research-based presentations that require students to seek out and synthesize content independently.

Fink stressed that this model is not hierarchical, but relational and interactive, which is what we believed made it a good fit for research in counselor education. There is no value on which type of learning is better than another; in contrast, a mixture of the types of learning was most appropriate because utilizing one type of learning often enhances another. We chose Fink's framework for this inquiry because CEs are preparing practitioners who must utilize information presented in the classroom in a variety of settings and situations across the course of their careers. Furthermore, the framework aligns with the wellness and developmental foundations of professional counseling (Kaplan et al., 2014). CEs should "want that which students learn to become part of how they think, what they can and want to do, what they believe is true about life, and what they value" in addition to "increase[ing] their capacity for living life fully and meaningfully" (Fink, 2013, p. 6). CEs who can create these types of experiences with their

students align with the foundational mission of our profession to promote wellness through a developmental lens. Additionally, they ensure that student counselors can serve vulnerable populations who have experienced traumatic events.

We designed this inquiry to address the following research questions:

1. Which teaching methods do counselor educators utilize to facilitate significant learning experiences in master's-level trauma theory and practice courses?
2. How do counselor educators choose which trauma content to address in master's-level trauma theory and practice courses?

Method

Due to the complexity of classroom dynamics and the uniqueness of instructors' philosophical perspectives, multiple case study design (Stake, 2006) was most appropriate for capturing a holistic understanding of teaching methods while drawing comparisons between instructor content choice and methods. By using a multiple case study design, we were able to preserve the individual voices and experiences of each instructor while also having comparative data points across the instructors. The aim is not to create carbon copies of trauma courses across counseling curriculum, but to figure out what is being done in each of these three courses so that other counselor educators can replicate it if it fits their teaching philosophy and style. The collective phenomenon or characteristic that binds the cases together that researchers study in a multiple case study is the *Quintain* (Stake, 2006). Understanding how the Quintain functions in different contexts is central to multiple case study design (Stake, 2006). The Quintain for this inquiry is *trauma courses intended for master's-level graduate students in counselor education*. The instructors of the course belong to the Quintain, as they are the primary decision makers for course content and course design. Course instructors for master's-level trauma

courses in counselor education served as single cases to aid in understanding the Quintain.

Case Selection and Participants

To be eligible for inclusion in this study, instructors must have taught a 3-credit hour course comprised mostly of trauma content (i.e., over 50%) in a CACREP-accredited program between fall 2017 and fall 2018. Further, participants must have participated in the course design and been able to submit course syllabi and course artifacts for analysis. Participants in the study were bound by the course they taught and the specific semester in which they taught it. We examined three cases to offer depth in each individual case and opportunity for cross-case analysis. This number aligned with the median number of cases identified in other education and social science multiple case study dissertations (Rectanus, 2017; Thomas, 2011), articles (Doré et al., 2002; Shaw, 2014; Wester et al., 2016), and Stake's (2006) recommendations.

CEs were recruited via email from a list of instructors who indicated they had taught trauma content to master's-level students during a feasibility inquiry conducted in spring 2017. The recruitment email included a link to a participant screening demographic form and an electronic informed consent. The participant screening demographic form included the region of the country in which their program was located, the course format (i.e., face-to-face, online, hybrid), whether the course was a trauma-specific course or a course with trauma content, and the types of artifacts instructors were able to submit (e.g., PowerPoint slides, case studies, instructor notes). Instructors submitted their course syllabus with the screening form to ensure that courses were mostly trauma content prior to case selection. Seven CEs responded to the screening survey. We selected three cases with priority to regional variations, trauma-specific courses, and evidence that instructors could provide a depth of information about the course design process. Characteristics regarding the three resulting participants are included in Table 1.

Table 1*Participant Demographic Information*

Name	Age	Gender Identity	Racial or Ethnic Identity	Professional Counselor	Counselor Educator	Clinical Background	Course Format
Jade	36	Cisgender Woman	Caucasian/ White	9 years	3 years	Training sites focused on trauma/grief/loss; private practice specializing in this area	Hybrid
Jimmy	38	Cisgender Male	Caucasian/ White	11 years	4 years	Focus with children and documented cases of abuse	Asynchronous Online
Alex	41	Cisgender Woman	Caucasian/ White	15 years	15 years	Current practicing clinician in a college	In-Person

Data Collection

Data collection and analysis of individual cases happen simultaneously in case study research (Merriam, 1998). A hallmark of quality case study design is use of multiple data sources to triangulate the data. Data sources included: two rounds of individual interviews with instructors; analysis of syllabi and other course artifacts (e.g., course assignment descriptions, syllabi, rubrics, and PowerPoint slides); and an instructor and course context questionnaire. The first author piloted the data collection and analysis protocol with a volunteer instructor and adjusted it based on feedback prior to recruiting participants. A visual representation of data collection for each case is included in Figure 1.

Instructor and Course Context Questionnaire

The first author chose to utilize an in-depth questionnaire in addition to the interviews. This open-response questionnaire gathered information about the instructor, the program, and the course. Specifically, there were 30 questions on the questionnaires. The first 11 questions were specially

about the instructor. Those included questions such as: *How many years have you been a counselor educator? What is your educational background in trauma education? Would you consider trauma one of your specialty areas?* The next section had 13 questions focused on the trauma course. This section included questions such as: *At what point in the program do students take the trauma course? What is the typical size of the trauma course? Is the trauma course a requirement for students in one or more specialty areas? What are the primary instructional methods (e.g., lecture, case-based learning, service learning, guest speakers)?* In the final section we asked six questions about the community. This section included questions such as: *What types of traumatic events appear to be most prevalent in your local community? Are there specific populations that have been particularly impacted by traumatic events in your community?* The questionnaire was completed prior to the initial interview so that the researcher could review the answers and ask follow-up questions if necessary.

Interviews

The first author conducted individual, semi-structured interviews with instructors twice in the

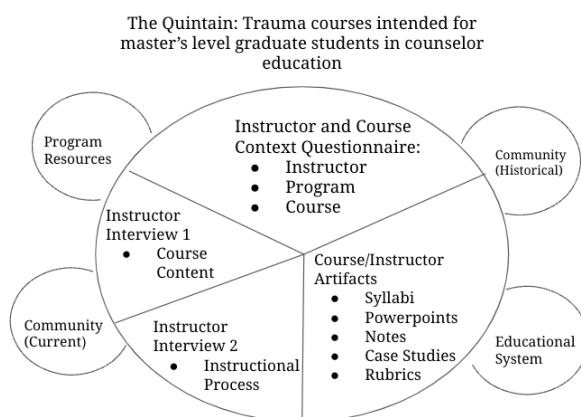
research process. Interviews took approximately 45–60 minutes each and were recorded for transcription. Interviews were transcribed verbatim and de-identified prior to data analysis. The first interview focused on course content and design, homing in on *what* content instructors taught. It included 10 questions, such as: *Describe the trauma course that you taught or are currently teaching. What content areas do you place the most emphasis on in your trauma course? How did you choose what content to teach in the trauma course?* The second interview focused on instructor methods or process, homing in on *how* instructors taught the content. This interview included nine questions, such as: *What methods do you utilize to teach trauma theory and practice? From your perspective, how is teaching the trauma course similar to or different from teaching other courses in counselor education?*

Artifacts

Each instructor submitted a course syllabus during the screening stage. The first author extracted descriptive information including course procedures, content, and the course calendar. Following the first interview, instructors were asked to submit course artifacts including assignment descriptions, PowerPoint slides, rubrics, case studies, and reading lists that were not included in the syllabus.

Figure 1

Data Collection Process



Data Analysis

The overarching aim of multiple case research is to better understand the Quintain (Stake, 2006). We utilized Stake's five steps of analysis, which include within-case analysis, across-case analysis, comparison with the literature, writing the case report, and checking for validity. Each of the three cases was analyzed individually prior to cross-case analysis. The first and third author completed individual cases month by month to allow for minor adjustments in the protocol as themes emerged and were refined (Merriam, 1998; Stake, 2006).

Single-Case Analysis

We analyzed questionnaires inductively (Merriam, 1998), incorporating them into the overall thematic analysis of the case (Flick, 2014). Coders first worked individually, using open coding to derive in vivo and descriptive labels (Saldaña, 2015). The questionnaire, interview, and artifact data were all triangulated during individual coding. Additionally, the co-coder took notes on the analyst's notes while reading a case report worksheet and kept the worksheet through the analysis process for each case.

We analyzed interviews utilizing thematic conceptual content analysis (Carley, 1990). We monitored frequency and presence of concepts through conceptual content analysis (Carley, 1990). To analyze the interviews, we first de-identified the data for analysis. The first and third author then engaged in an independent coding process in which we both: (a) conducted an initial review of the data and created codes, (b) completed a second review of the data and established patterns and categories among the codes, (c) developed themes based on the emergent patterns and categories, and (d) completed the analyst's notes. After completing this individual process, the co-coder and first author met to review the codes, patterns and categories, and themes that were developed individually to establish consensus. We collaborated to rectify differences in coding by examining the analyst's notes, identifying potential biases, and returning to the data itself for review. The same process was completed for both

the first and second interview for each case. The co-coder and first author then analyzed the syllabi and supplemental artifacts, first coding independently for emerging themes in the study, reflective of the responsive nature of data collection and data analysis indicative of Merriam (1998) style case study. Then, we met to reconcile the identified themes, using our individual analytic memo writing (Saldaña, 2015), identification of biases, and additional reviews of the data.

After completing analysis of the instructor and course context questionnaire, two interviews, and course artifacts, the first author debriefed with the second author and then drafted a final case report for each participant. Case reports included instructor and course context questionnaire interpretation, participant details, program specifics, community factors, course overview, and the findings. Participants received the case report as part of the member-checking process. All three participants affirmed the information presented in the case was representative of their experience. The individual case reports are available upon request.

Cross-Case Analysis

The data for the cross-case analysis in multiple case study research are the individual case findings. The first author and third author utilized the single case reports to determine overall fit with Fink's (2013) six components of significant learning. Next, the first author explored themes that emerged across cases and merged individual case findings into clusters based on similarities, merging findings from single case reports to create assertions about the themes across cases. Assertions were grounded in the evidence from the cases examined. Finally, the first author compared the final multicase assertions to literature related to trauma competencies, teaching about trauma in the helping fields, and Fink's (2013) taxonomy of significant learning.

Trustworthiness

Trustworthiness was ensured via data source triangulation through multiple interviews, artifact

collection, and examination of instructor and course context questionnaires. These sources provided a deep understanding of the single cases, which led to a clearer picture of cross-case themes to support assertions (Stake, 2006). Co-coding procedures during single-case analysis increased reliability of transcript and artifact coding. The co-coder also monitored for subjectivity, reading the final documents to ensure quotes, themes, and interpretations represented the information originally presented in the data sources. Furthermore, use of member checking provided opportunity for integration of feedback prior to cross-case analysis.



Findings

The single-case study report highlighted unique situational factors that contributed to case findings, and the multicase report identified similarities across cases, detailing how each case contributed to an understanding of the whole (Stake, 2006). Due to this incongruence, a prominent challenge for us was to create a multicase report that preserves the uniqueness of each case while drawing similarities for the reader. We continued to use the individual instructor names throughout the multiple case study findings to preserve the uniqueness while drawing parallels and distinctions between the three instructors. This section details findings of the cross-case analysis, including teaching and learning activities utilized, assessment and feedback methods employed, and multicase assertions that resulted.

Results: Research Question 1

Research question one asked: *Which teaching methods do counselor educators utilize to facilitate significant learning experiences in master's-level trauma theory and practice courses?*

Alex, Jimmy, and Jade each taught master's-level trauma courses with unique situational factors that impacted their choice of teaching and learning activities and the activities they utilized to assess learning. Consistent with procedures for multicase

study (Stake, 2006), results are presented based on alignment with Fink's (2013) taxonomy of significant learning.

Teaching and Learning Activities

Jade, Jimmy, and Alex all used three teaching methods: case study, discussion, and lecture. Additionally, Alex and Jade utilized role-play, guest speakers, mindfulness and/or self-care activities, external modules and/or training, and media such as video or podcast. Each of the instructors included activities that attended to significant learning themes of foundational knowledge, application, integration, and human dimension.

Jimmy, Alex, and Jade utilized many different types of teaching and learning activities to enhance foundational knowledge. These included virtual and face-to-face lectures, guest speakers, outside resources, and media. All three instructors utilized lectures to introduce foundational ideas and information to their students in virtually and/or face-to-face settings. Jade and Jimmy stated that they utilized lectures to ensure students understood complex content, and Alex utilized PowerPoint slides with lecture to help pace the course and create a firm foundation so that students could later apply material in class.

Learning activities coded as application included case study, role play, mindfulness, discussion, guest speakers, experiential activities, outside modules and training, and self-care. Jade, Jimmy, and Alex utilized case study as a primary method to apply course content. Jade and Alex used case study to present examples from clinical practice and prompt critical thinking. Additionally, Jimmy had students create a case study they continued to use throughout the semester to demonstrate skills and think critically through the course material.

All three instructors also used case studies to attend to integration. Instructors asked students to connect ideas and learning experiences to better understand how course concepts such as development, intervention, assessment, and foundational information about trauma impacted different cases. Other activities utilized to stimulate

integration included discussion, media, video communication, experiential activities, guest speakers, and discussion.

The final theme shared among the three instructors was the human dimension. All three instructors facilitated activities that allowed students to better understand themselves and others through dialogue with other students or exposure to novel human experiences through media. Unlike the first three domains, instructors used different activities to attend to this theme. Jade and Alex utilized discussion and media; Jimmy utilized synchronous and asynchronous video communication.

Assessment and Feedback Methods

All three instructors used papers and projects/presentations to assess student learning and provide feedback. Additionally, Alex and Jade assessed participation or attendance in the class, and Jimmy and Jade assessed discussions and an annotated bibliography. Jimmy utilized many different assessment methods that were folded into weekly homework assignments. All three instructors assessed for all themes of significant learning throughout their course, often using single assignments to capture several components of significant learning.

Assessment and feedback methods coded as foundational knowledge assessed students' understanding and retention of foundational ideas and information. Methods included online discussion sets, homework, small group discussions, annotated bibliographies, oral presentations, and final exams. Jimmy and Alex utilized an annotated bibliography assignment to assess for foundational knowledge. No other methods in this theme category overlapped between instructors.

Jimmy, Jade, and Alex assessed students' ability to apply information using participation, online discussion, projects, homework, and annotated bibliographies. Jade and Alex shared two types of assignments aimed at assessing students' ability to apply information: a course paper and a project. Jade's film reaction paper and Alex's final exam

paper both asked students to think critically and apply the skills they had learned in class to a particular case. Additionally, the integration project in Jade's course and the oral presentation project in Alex's course assessed students' ability to apply skills to a particular subject and create a concise, cohesive presentation to demonstrate their ability to apply information.

All three instructors assessed students' ability to integrate content through a written assignment. Jade used the film reaction paper, Jimmy used a white paper assignment, and Alex used the final exam. Each of these assignments instructed students to connect ideas, learning experiences, and realms of life to the course content to demonstrate their ability to integrate concepts such as foundational information about trauma and trauma recovery, biological information such as stress response and basic neurobiology, and developmental theory.

There were no common assessment methods for the human dimension. The instructors used reflective journals, participation and discussion sets, homework, small group discussion, papers, and projects to assess students' ability to learn about others and themselves. This was often done by exposing them to populations or situations that were different from themselves and asking them to reflect on those experiences.

Like the human dimension, there were no assignments all three instructors utilized to assess caring. Jade, Jimmy, and Alex used class participation, reflective journals, and homework aimed at helping students understand their values, interests, and skills. Both Jade and Alex used class participation to assess students' ability to be mindful of their own reactions, self-regulate, and demonstrate self-awareness.

Results: Research Question 2

Research question two asked: *How do counselor educators choose which trauma content to address in master's level trauma theory and practice courses?*

Eleven individual case findings regarding how each instructor chose the trauma content and methods in their courses emerged in analysis. Three case findings were endorsed with evidence from all three cases and emerged as the following assertions: instructor role, instructor identity, and eliciting fundamental change in learners. One case finding was endorsed within two of the three cases and emerged as a tentative assertion: developing student skill acquisition.

Instructor Role

How participants conceptualized their roles as instructors impacted how they chose the content and methods for their respective courses. Jade believed that an aspect of the instructor role was to be responsive to student development level and pacing the course in a way that allowed assignments to build off each other. Jimmy stated that CEs should view themselves as facilitators of content and connection. Furthermore, he believed that his primary role was to provide information on a variety of topics and allow students to direct their learning experience. Finally, Alex viewed her role as collaborative, with a focus on creating classroom environments that facilitated student feedback, choice, and processing of their experience with the content.

Instructor Identity

Jimmy, Jade, and Alex all spoke to the impact of their clinical and personal experiences in addition to their specialty areas, theoretical orientations, and personal dispositions on course design. Jade's orientation toward feminist theory impacted her humility and transparency in the classroom, leading her to approach teaching from a nonexpert perspective. Alex's clinical background impacted her conceptualization of trauma and crisis as two separate content areas, her utilization of clinical examples in class, and her attunement to student needs. For both Jimmy and Alex, their clinical backgrounds impacted the emphasis they placed on specific content, the depth with which they

addressed topic areas, and the use of experiential or application-based assignments and methods.

Alex and Jade both mentioned mentorship as a large influence on how they inherited their respective courses, chose which content to incorporate, and facilitated learning. Both instructors had the opportunity to work with the individual who taught the course prior to them, and they utilized content and methods from their mentor's version of the course as the foundation for the current iteration of the course. These relationships shaped content in the course and allowed Jade and Alex to share many philosophical ideas of their mentors. For example, Jade credited her feminist and contextual understanding of trauma response to her mentor. This assertion provides evidence that CEs' clinical and personal experiences impact which content they emphasize and how they do so.

Eliciting Fundamental Change in Learners

The final assertion endorsed by all participants focused on a fundamental change in the worldview or disposition of the learner. Jimmy hoped that the course material and teaching methods would help his students understand their identity as advocates. Alex hoped that through class processing, reflective assignments, activities, and continual conversations, students would gain deeper understanding of themselves and how "counselor as a person" impacts the therapeutic process. Jade structured course assignments and assessment methods to help students gain a better understanding of trauma, trauma response, and diagnosis in context. She hoped that students would gain a more nuanced understanding of how pathology and treatment are impacted by various factors. This assertion provides evidence that each instructor hoped for deeper learning than skill or knowledge acquisition.

Developing Student Skill Acquisition

Jimmy and Alex both provided findings that aligned course content and methods to increase student skill acquisition or application of course material,

making this a tentative assertion. Jimmy and Alex both strongly believed in the need to move from conceptualizing to action quickly. They both emphasized their worry about counseling students who had foundational knowledge without knowing how to put it into practice. Both instructors removed content from their courses that did not align with an application focus and pushed students to practice with case studies, role plays, and homework.



Discussion and Implications

Across cases, participants illustrated how their identity, experiences, values, and beliefs impacted the content they chose and the teaching methods they utilized in trauma courses. Each instructor acknowledged that they chose content or methods because of personal and professional preferences. CEs should reflect on "why" when choosing course content and teaching methods. Such an exploration may help instructors ensure that their course design ties together course goals, teaching and learning activities, and assessment and feedback to create integrated courses that facilitate significant learning experiences (Fink, 2013). Additionally, there is a need for instructors to continually reflect on their own identities and how they are impacting the learning environment. Finally, instructors need to ensure that course content is reflective of best practices in the topic area and provide a wide variety of content that expands beyond their personal preferences to include literature-based best practices, including attention to trauma response and treatment literature generated outside of the counseling profession.

None of the instructors in this inquiry reported in-class activities that aligned with the learning how to learn domain, where people are stimulated to "become a better student, inquire about a subject, and become self-directed learners" (Fink, 2013, p. 34). Based on Fink's theory of learning, instructors should be teaching and assessing in each domain. Using class time to allow students to work in small groups to research topics, submit questions about the content for that week and allow their peers to

answer them, or workshop interventions would align with the domain of Fink's learning taxonomy (2013). Fink stated that the value of this domain is that "this kind of learning enables students to continue learning in the future and to do so with greater effectiveness" (p. 36). This type of learning is especially important for a topic such as trauma that is evolving quickly and requires careful evaluation of each passing fad for its validity. Each of these cases included assessment and feedback opportunities that pushed students to integrate, synthesize, and think critically about the research they were finding. The missing component was an in-class activity to align with those assessments.

All three instructors have been teaching trauma courses for at least 3 years and consider trauma and/or crisis to be a specialty area. None of them mentioned the AMHCA trauma standards (2017) or any other standards as an influence on their course design. As mentioned in the introduction, there are a variety of educational and practice standards that CEs could choose to ground their content choices in. Those range from standards specifically for professional counselors (AMHCA, 2017), to those produced from the robust research conducted by the Department of Defense and the Veterans Administration (2010, 2017), and those specifically for children and families (Layne et al., 2014). Although the findings can only tentatively be generalized to other instructors teaching trauma courses, it appears that instructors may not be aware that there are counseling specific educational standards available, or they may find the existing standards not aligned to student developmental need or demands of practice. Having instructors ground their content in the same set of teaching standards may decrease variability in content across sections while still maintaining instructor academic freedom. Additionally, from an instructor perspective, it is important for CEs to incorporate both their own experience, expertise, and preferences while also being aware of the professional resources available to them in their content area. This has implications both for instructors and for professional organizations that provide standards and resources related to these areas.

This study adds to the growing body of literature (Avery, 2017; Layne et al., 2014; Mattar, 2011; Paige, 2015; Watkins et al., 2016) calling for trauma competencies in counselor education and practice. This study's findings support the notion that without broadly accepted training standards and competencies to guide course design, instructors may rely on their past experiences, personal preferences, and professional expertise, all factors which vary widely across instructors.

Limitations and Future Research

Inherent in all qualitative research is the potential for the researcher's bias to impact the work. Consistent with case study research, findings were contextually bound to individual cases, and assertions were contextually bound to the three collective cases. All three participants identified as cisgender and White or Caucasian. With instructor identity being such a prominent theme, the lack of participant diversity may impact applicability. We also wonder if the lack of participant racial diversity impacted the types of content covered in the courses. Inclusion of additional cases may have led to greater generalizability and greater nuance to the assertions.

This current study only explored instructor perceptions and did not focus on outcomes for students. Few researchers have explored effectiveness of different teaching methods in counselor education courses, beyond Greene et al. (2016), who measured counselor self-efficacy after introducing a case-based approach to a practicum course that infused crisis, trauma, and disaster preparation. Outcome research regarding teaching methods related to student preparedness in client interactions is necessary to gain a better understanding of students' abilities to utilize the content they learn effectively with clients. There has been an increase in published empirical research in the general CE teaching literature (Barrio Minton, et al., 2018), with movement toward more direct assessment of student learning outcomes in general. Future researchers could work to establish

consensus related to what knowledge and skills students should be expected to develop in this area and assess how specific methods for learning about trauma impact counseling students' knowledge and skill acquisition.

Conclusion

Overall, this study was the first to provide an in-depth examination of course content and teaching methods utilized in trauma courses for master's-level counseling students. This study supports existing literature recommending exposing students to types of trauma, trauma interventions, and practitioner distress while attending to the needs of students who may experience distress from the content (Kitzrow, 2002; Lokeman, 2011; Sommer, 2008; Veach & Shilling, 2018). Additionally, it was consistent with the literature that recommended teaching methods that were both didactic and experiential (Greene et al., 2016; Kitzrow, 2002). The study provided unique findings about the impact of instructor identity on course design, which raises questions about how influential instructor characteristics are in a larger representation of the population. The results of this study may increase awareness of the need for CEs to be reflective in their decision-making process as they choose course content and highlights evidence of the need for teaching standards and entry-level professional competencies in trauma education.

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Charmayne R. Adams, PhD, is an assistant dean of student health, counseling, and wellness, and also affiliate faculty to the Department of Counselor Education in the School of Education, at Gonzaga University. Her research and clinical interests focus on the stress continuum .

Casey Barrio Minton, PhD, NCC, is a professor of counselor education and interim department head at the University of Tennessee – Knoxville. Her research interests include professionalization through teaching and leadership .

Jennifer Hightower, PhD, NCC, is an assistant professor at the University of South Carolina. Her research interests include multicultural counseling, with a focus on queer affirming counseling, and suicidality .

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