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Rebecca B. Smith Hill

University of South Carolina - Columbia

Alexander M. Fields

University of Nebraska at Omaha

Olivia J. Lewis

Oregon State University

Madeline Saunders

University of South Carolina - Columbia

Chelsea Stinnett

University of Massachusetts Boston

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Counselor Education and Inclusive Postsecondary Education: A Partnership Model

Authors

Rebecca B. Smith Hill, Alexander M. Fields, Olivia J. Lewis, Madeline Saunders, Chelsea Stinnett, Anthony Plotner, and Rachel Gilreath

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Rebecca B. Smith Hill , Alexander M. Fields , Olivia J. Lewis ,
Madeline Castle , Chelsea VanHorn Stinnett , Anthony J.
Plotner , Rachel Gilreath 

Abstract

Researchers in the counseling field have alerted practitioners and counselor education professionals to the need for enhanced training related to supporting individuals with disabilities, namely intellectual and developmental disabilities (IDD; Feather & Carlson, 2019). As more individuals with IDD attend college, these emerging adults are specifically in need of counselors with skills and competencies to support their mental health. This article describes a collaborative, mutually beneficial initiative between a counselor education program and an inclusive postsecondary education program to address the scarcity of personnel prepared to work with individuals with IDD.

Significance to the Public

This article shares a novel program partnership between a counselor education program and an inclusive postsecondary education program on a university campus. The authors offer partnership details and highlight the benefits, namely that counselors-in-training receive hands-on experience in working with young adults with intellectual and developmental disabilities, thereby enhancing their skills and competency to work with this marginalized population.

Keywords: counselor education (CE), disability, intellectual and developmental disability (IDD), competency, inclusive postsecondary education (IPSE)

The field of counselor education is tasked with preparing counselors with a diverse array of knowledge, skills, and competencies aimed at supporting the mental health and wellness needs of individuals. However, counselor preparation programs often fall short of adequately preparing future counselors to work with individuals with disabilities, particularly intellectual and developmental disabilities (IDD; Feather & Carlson, 2019). Moreover, merging the Council of Rehabilitation Education (CORE), the former accrediting body for rehabilitation counselors, with

the Council for Accreditation of Counseling and Related Educational Programs (CACREP) introduced new disability-related counseling competencies within counselor education (Emir-Öksüz et al., 2024; Feather & Carlson, 2019).

Yet there largely remains a general dearth in literature in how to prepare counselors to work with folks with IDD. This deficiency is concerning given the increasing demand for mental health services among individuals with IDD (Kramer et al., 2019; Lake et al., 2021). Researchers estimate that the

Rebecca B. Smith Hill, Center for Transition Research & Leadership, University of South Carolina–Columbia; **Alexander M. Fields**, Department of Counselor Education, Florida Atlantic University; **Olivia J. Lewis**, Counseling, Oregon State University; **Madeline Castle**, Dept of Counseling, Higher Education Leadership, Educational Psychology, and Foundations, Mississippi State University; **Chelsea VanHorn Stinnett**, Think College, University of Massachusetts–Boston; **Anthony J. Plotner**, Department of Educational and Developmental Science, University of South Carolina; **Rachel Gilreath**, School of Education and Human Services, University of Wisconsin Oshkosh. Correspondence concerning this article should be addressed to Rebecca B. Smith Hill, Center for Transition Research & Leadership, University of South Carolina–Columbia, College of Education, 820 Main Street, Columbia, SC 29208 (email: smithrb@email.sc.edu).

percentage of adults with IDD who also have a co-occurring mental health condition could be as high as 59% (Reichard et al., 2019), which further necessitates the need for the next generation of counselors to be prepared to work with folks with IDD. The purpose of this article is to highlight the recognized need for counselors to enhance their competency in serving individuals with IDD to effectively meet the growing demand for mental health services among this population. Additionally, we describe one potential solution to increasing disability-related competencies in counselor development: a collaborative model between a university counselor education (CE) program and an inclusive postsecondary education (IPSE) program.

Mental Health and Undergraduate Students with IDD

The Centers for Disease Control and Prevention (CDC, 2020) estimate that 1 in 4 adults in the United States live with a disability and intellectual and developmental disabilities are the most common disabilities in young adults (Okoro et al., 2018). People with IDD may require support with self-care, social communication and relationships, understanding and reciprocating or responding to social cues, and independently understanding risks and consequences (Zisman-Ilani, 2022). Mental health is one of the most significant determinants of quality of life (Mofatteh, 2021). The mental health and wellness of undergraduate students have become a public health concern in recent years, which was further exacerbated by the COVID-19 pandemic (Peifer & Taasobshirazi, 2022). For instance, undergraduate students report higher levels of depression, anxiety, and stress than the general population (Mofatteh, 2021). Indeed, mental health concerns are a well-documented barrier to students successfully engaging in coursework and completing their postsecondary programs (Wang et al., 2020). Carroll and colleagues (2020), using data from the Beginning Postsecondary Students Longitudinal Study, found that students with a mental disability are significantly less likely to complete a degree than students without disabilities or from other disability categories.

A national survey of young adults ($n = 76$) with comorbid diagnoses (in this instance, a person diagnosed with ID and an additional mental health condition) found that 65% face challenges in finding a doctor who understands both their intellectual disability (ID) and their mental health concerns (Kramer et al., 2019). Similarly, Lake et al. (2021) reported that young adults with ID have historically had concerns about receiving adequate mental health services due to a lack of access to competent providers. In an earlier study, McCarthy and Boyd (2002) reinforced caregiver competency concern and suggested that caregivers struggle to access services from adequately trained professionals for their young adults with IDD.

Across campuses nationwide, college counseling centers are grappling with the overwhelming demand for services (Oswalt et al., 2020), adding to the limited accessibility for students with IDD. Moreover, individuals with IDD have historically been marginalized by institutes of higher education (IHE) and underrepresented on college campuses. To that end, inclusive postsecondary education (IPSE) programs were established to meet the growing need for postsecondary options for students with IDD.

Inclusive Postsecondary Education Programs

Think College, the national technical assistance and resource coordinating center for IPSE programs in the United States, defines IPSE as simply college for students with intellectual disability (Stinnett et al., 2023). Programming specific to supporting students with IDD at institutes of higher education (IHE) has been in place for just over 30 years (Think College National Coordinating Center, 2024). These programs are distinct from the specific supports and accommodations provided through college student disability resource offices, as IPSEs provide college supports for students who may not otherwise be admitted to a typical degree-seeking undergraduate program. In the late 1990s and early 2000s, IPSE for students with IDD was a new concept, born from the desires of parents to have their children's employment and quality of life

outcomes enhanced by the opportunity that college campuses provided.

Demand for these programs continued to grow throughout the early 2000s, with the passage of the Higher Education Opportunity Act (HEOA) in 2008, which allowed for non-degree-seeking students with IDD to access federal financial aid. Now, just over 15 years later, over 330 IPSE programs exist nationwide (Think College National Coordinating Center, 2024) and support an estimated 8,000 students with IDD (Grigal et al., 2022). There is variability in the type and level of support offered to students across IPSE programs, as well as the degree of inclusivity students experience in their academic coursework. Traditionally, programs support students in building skills related to employment, independent living, and social engagement, in addition to the coursework they take to meet their personal and professional goals (Hart et al., 2006).

As the number and quality of programs increase across the country, so do new and innovative ideas to meet evolving and growing programmatic staffing needs. To fulfill this need, many IPSE programs utilize peer mentors as a natural support for providing coaching and instruction across all areas of IPSE programming (Carter & McCabe, 2021). Peer mentors may be volunteer or paid student employees who are likely to be enrolled in human service fields like teaching, counseling, and social work. Preservice teachers, especially those studying to be special education teachers, gain numerous professional benefits; students who completed their graduate coursework while also working for an IPSE program reported higher levels of confidence and efficacy in working with people with IDD as a result of the experience (Plotner et al., 2023).

Inclusive postsecondary education programs for students with IDD are not immune to the shifting needs and trends within higher education. One such trend is the growing mental health needs of college students across the country (Kim et al., 2022). As these demands rise, college programs are tasked with meeting the mental health needs of students with IDD in unique ways. In general, college

counseling centers have shown to be less effective in reducing the levels of psychological stress of students with disabilities (O'Shea et al., 2021) and counselors on college campuses report a lack of training and preparation to meet the needs of students with developmental disability (Chandrasekhar & Hu, 2024). This leaves IPSE programs with a growing gap in necessary student support to fill, given what is known about the correlation between mental health and likelihood of college student retention and success (Thomas et al., 2021).

The Need for Mental Health Supports in Inclusive Postsecondary Education

While there is limited research regarding the mental health needs of students with IDD on college campuses, several small studies have not only exposed the need but also the lack of counseling professionals appropriately trained to work with students with comorbid ID and mental health diagnoses (O'Shea et al., 2021). Lizotte and colleagues (2021) surveyed 33 IPSE programs regarding their students' mental health needs and the available services to support those needs. Anxiety and depression were the most commonly reported student mental health concerns, reported by 14 programs and 13 programs respectively. Nine programs also reported suicidal ideation as a common concern among their students with IDD. While many respondents ($n = 20$; 61%) reported making referrals to typical campus mental health resources for their IPSE students in need, eight (24%) programs reported that they did not make referrals to typical campus resources (Lizotte et al., 2021).

In addition to addressing students' mental health needs, there is a growing call for IPSE programs to understand and implement wellness services for college students with IDD (Fields et al., 2024; Oakes et al., 2020a; Oakes et al., 2020b). A *wellness paradigm* is a model widely adopted by the counseling field that views an individual outside of the context of an illness, and it is considered a holistic view of an individual's body, mind, and spirit, which work together to achieve an optimal

quality of life (Myers et al., 2000). From a wellness perspective, mental health is a critical component of overall wellness that is connected to an individual's physical, social, and spiritual health. A wellness paradigm also embraces a prevention mindset and supports an individual attuning to multiple domains of their life simultaneously to reduce the risk of future diseases or symptoms associated with chronic health conditions. Previous scholars have also remarked that wellness education and maintenance support independent living as students or clients are better equipped to implement strategies and habits that support a healthier lifestyle (Pepin & Sawyer, 2022). As an overarching goal of an IPSE program is to support a student in achieving an independent life to the best of a student's ability (Uditsky & Hughson, 2012), a wellness mindset may contribute to supporting students' mental health and ability to achieve and sustain post-school goals. Thus, addressing the mental health needs of college students with IDD presents an opportunity for counseling partnerships to build capacity in this crucial area.

Counselors' Ability to Meet the Needs of Adults With IDD

Despite disability-related counseling competencies (Chapin et al., 2018) and the inclusion of disability language in CACREP (2023) standards, guidance on IDD-specific counseling training standards and practices is limited. Moreover, concerns surrounding counselors being underprepared to meet the needs of individuals with disabilities is a historical concern (Korinek & Prillaman, 1992; Lebsock & DeBlassie, 1975; Smart & Smart, 2006). For example, Feather and Carlson (2019) highlighted this problem in their study investigating instructors' self-perceived competence to incorporate disability-related content into counselor preparation coursework. Thirty-six percent ($n = 41$) of survey respondents indicated that their counselor education program was "ineffective" at addressing the needs of adults with disabilities. Additionally, respondents were asked about their perceptions of the amount of time spent on disability-related concepts and guidelines for integration into the

counselor education curriculum and nearly 69% ($n = 77$) responded either "far too little" or "too little." Only 31% ($n = 35$) of respondents indicated that the amount of time spent on disability-related concepts was "just right" within their CE coursework (Feather & Carlson, 2019). Similarly, Deroche et al. (2020) surveyed master's-level counseling students in CACREP programs ($N = 285$) about their self-perceived disability competencies relating to previous instruction and life experiences. While Deroche and colleagues reported a higher percentage of disability-related instruction from students who took multicultural coursework (54.6%), only 32.6% reported that it was a separate topic. Moreover, Deroche and colleagues (2020) concluded that students in their study with more life experience (e.g., exposure) with disabilities were more likely to report self-perceived disability competencies.

While the landscape of counselor preparation for clinical work with clients with disabilities is evolving through recent initiatives, a significant gap in disability training within CE programs persists. Rivas (2020) emphasized the need for a thorough review and restructuring of disability training across counseling program curricula. In this regard, Rivas (2020) suggested incorporating specific elements, such as instruction on theoretical foundations, historical perspectives, conceptual frameworks, terminology, and criteria for defining disability. Without deliberate and integrated training in a counselor's education, counselor trainees (CTs) have reported feeling unprepared to meet the diverse needs of clients with disabilities (Parkinson, 2006; Rivas, 2020). However, additional research is needed in this area to better understand perceived counselor-related disability competencies.

A valuable and research-recognized avenue to enhance knowledge and skills for counselors working with clients with disabilities is by having disability-related experiences (Strike et al., 2004). However, the reality is that many counseling programs provide little exposure to disability-related information and experiences (Feather & Carlson, 2019; Korinek & Prillaman, 1992). Babb and colleagues (2023) investigated the experiences

of CTs as they worked with students with disabilities in a school setting through a practicum experience. They found that the preservice counselors reported growth as clinicians and a feeling of acceptance of self and others with exceptionalities as a result of their practical experience. Moreover, previous scholarship has supported the notion that CTs engaged in experiential learning (i.e., direct service) enhanced self-efficacy and perceived competencies for future practice (Campbell & Babb, 2023; Maruniakova et al., 2017). Babb and colleagues' (2023) participants also reported the experience aided in reframing their worldview by challenging formerly held biases about individuals with disabilities.

The value of clinical work that includes preservice counselors working with people with IDD is clear. This preparation experience contributes greatly to the competency of the counselor to meet the diverse needs of clients with disabilities. However, intentional opportunities to work with this population may be scarce, as clinical experiences specific to working with people with disability may be limited in most communities (Rivas & Hill, 2018). Partnerships between IPSE programs for students with IDD and CE programs can facilitate access to experiences that are mutually beneficial, both for college students with IDD and CTs in need of proximal access to people with IDD in order to build their competency in this area.

A Mutually Beneficial Partnership to Enhance Counselor Disability Competency

An IPSE partnership with a CE program celebrates a shared interest in supporting individuals with a disability. Current CT education standards require CE faculty to embed disability education into their curriculum (CACREP, 2023). For example, CTs must receive education on “the role and process of the professional counselor advocating on behalf of and with individuals receiving counseling services to address systemic, institutional, architectural, attitudinal, disability, and social barriers that impede access, equity, and success” (CACREP,

2023, Section 2.A.4). Disability language is also included across counseling specialties (e.g., school, clinical mental health, and rehabilitation), acknowledging the multiple settings within which a counselor can expect to work with an individual with a disability. Indeed, CTs from each concentration must be prepared to work with multiple disability identities and counselor educators are tasked to find opportunities to expose their students to aspects of living with an IDD.

In addition to CACREP (2023) standards, the American Rehabilitation Counseling Association (ARCA), a division of the American Counseling Association (ACA), endorsed disability-related counseling competencies to establish best practices for preparing counselors to work with the disability community. Chapin et al. (2018) broadly described competent counseling practice with individuals with disabilities as (a) understanding and accommodating disabilities, (b) advocacy on behalf of the individual with a disability, as well as promoting their self-advocacy, (c) developing a counseling relationship, (d) appropriate testing and assessment, and (e) direct support and supervision of practice across multiple counseling settings. Despite national efforts to include disability-related competencies in counselor training, additional efforts are needed as counselors and counselor educators continue to report a deficit in their disability counseling competencies (Feather & Carlson, 2019), specifically for individuals with IDD (Babb et al., 2023).

Previous scholarship has supported the notion that CTs engaged in experiential learning (i.e., direct service) enhanced self-efficacy and perceived competencies for future practice (Campbell & Babb, 2023; Maruniakova et al., 2017). Therefore, a collaboration between IPSE and counselor education may establish a beneficial relationship. In the program partnership described in the next section, with the guidance of IPSE staff with counseling and social work degrees, CTs learn by doing, as they work to support and understand the unique needs of this underserved population. Additionally, the IPSE program is strengthened by skilled doctoral-level counseling students who

provide essential support to undergraduate college students with IDD.

Our IPSE-Counselor Education Program Partnership

The authors of this article have worked at a large, southeastern university with a well-established IPSE program. Six of seven of the authors worked within the IPSE program in some capacity, three of us as graduate assistants as we worked on our doctoral degrees in counselor education and supervision. The IPSE partnership with the CE department was originally born out of the realization that the students in the IPSE program faced unique challenges related to their disability and inclusion on a college campus.

This IPSE program has been in existence since 2008 and has a current average annual enrollment of 25 undergraduate-level students. The program has a philosophy founded on inclusion, individualization, typicality, and collaboration across university systems. All domains through which we provide support in the IPSE program provide supports that are person-centered and based on each student's interests and identified support needs. All students have the same opportunities as other college students enrolled at the university, including access to all college-level coursework (for audit); on-campus, nonsegregated dorm-living; and access to all university-sponsored clubs and organizations. This level of inclusion and opportunity for "typical" college experiences means that many of the students in our program need nuanced counseling support to effectively attend to their personal development and wellness. In addition, IPSE students often have higher support needs related to mental health, stress, and anxiety than their peers without IDD (Aguilar & Lipson, 2021). Prior to this partnership, staff of the IPSE program primarily consisted of individuals with education backgrounds. Upon realizing that the mental health and social-emotional needs of our students were beyond their expertise, IPSE staff reached out to CE staff regarding a partnership.

The CE program at our university is housed in the same department as our IPSE program and the

faculty commit to hands-on, preservice training and diverse experiences. What began as one doctoral-level counseling graduate assistant position within the IPSE program has quickly grown in the past 4 years to include more than five graduate students per semester, both doctoral- and master's-level, as well as a part-time position for a CE faculty member. In addition to the typical domains of support through IPSE (academic, employment, independent living, and social engagement), our IPSE program includes a fifth domain of support called personal development (PD; Smith Hill et al., 2024). It is this specific domain in which CE students are employed as coaches for undergraduate students with IDD.

An overview of our interdisciplinary PD model of support (Smith Hill et al., 2024) posits that elements of personal development, while unique to each person, often include intangible yet potentially transformative experiences, such as exploring and clarifying personal identity, developing a sense of purpose, developing an awareness of self, gaining functional independence, maturing socially, clarifying religious views, regulating emotions, and navigating interpersonal relationships (Kuh et al., 1988; Park et al., 2020). Within this domain, we employ an interdisciplinary approach during PD coach staffing meetings, integrating the professional expertise of social work, special education, and counseling. In a given academic year, we typically employ PD staff and graduate assistants with social work, counseling, and special education professional backgrounds within the PD domain.

Doctoral-level counselor education students serve as PD coaches, meeting with IPSE students one-on-one weekly to provide support. Counseling students typically spend 1-2 years as graduate assistant employees providing direct mental health and wellness support to college students with IDD through PD sessions. Prior to beginning their role as a PD coach, each counseling student is provided with a week-long orientation, which includes interprofessional education on working with and counseling adults with IDD from licensed counselors, special educators, and social workers who have an extensive history working alongside

folks with IDD. After the training, PD coaches are encouraged to participate in IPSE student orientation activities, such as organized meals, sporting events, and campus exploration. By attending the student orientation activities, the new PD coach is able to begin building rapport with students and learn more about models of inclusion and typicality. To that end, new PD coaches are also encouraged to explore potential biases with senior IPSE staff and faculty members in an effort to promote cultural humility and strengthen future rapport building.

During the academic year, CE graduate students are challenged to apply their professional lens when collaborating with other coaches and program personnel to provide holistic support to college students with IDD. Counselor education students also receive interdisciplinary weekly group supervision from more experienced providers as they develop disability-related competencies. After the initial 1-2 years, the CE students will typically add supervisory roles to their responsibilities during their third year working with the IPSE program. Typically, the doctoral students have completed their supervision internship after their second year and can continue to strengthen their supervision skills as they support newer members of the PD team. In addition, PD coaches are provided professional development opportunities to enhance their disability-related competencies. Examples include diagnostic overshadowing and counseling interventions for adults with autism. Ultimately, our partnership model offers interdisciplinary support to meet the needs of students with IDD in addition to enhancing the disability counseling competency of CTs and the supervisory experiences of doctoral-level CEs.

Implications and Future Research Directions

This collaborative partnership model carries a number of implications. Such partnerships can significantly enhance counselor training in disability awareness and competency and allow for CEs to provide experiential and field-based training opportunities. Counselor trainees can practice

counseling skills and contribute to the accessibility of mental health support for students in an IPSE program. Furthermore, this partnership promotes the integration of intersectionality in counselor training, encouraging counseling students to consider how disability intersects with other marginalized identities such as race, gender, and sexual orientation. With the current counseling focus on wellness and prevention, CE programs can improve mental health outcomes for students with IDD, helping them to build resiliency factors and self-advocacy skills that are vital to navigating educational and life challenges. Moreover, these collaborations foster interdisciplinary teamwork, a critical component to providing comprehensive support to individuals with disabilities. These collaborations also create opportunities for research, allowing counselor educators and doctoral students to contribute to the development of evidence-based practices and interventions specifically tailored to meet the mental health needs of individuals with IDD. Partnerships between programs can significantly advance the training of counselors and the quality of services provided to students in an IPSE program.

When developing our partnership model, we noted a lack of disability competency literature in counseling. Thus, we encourage counselor educators and scholars to advocate for college students with IDD — and those in other stages of life — through additional research efforts. First, researchers may identify disability counseling competency levels of counselor trainees through evaluation efforts (e.g., Disability Counseling Competency Scale; Chapin et al., 2018), to further understand how counselor educators can support student development. Relatedly, researchers should focus on intervention-based research to develop empirically backed strategies to support CTs developing disability counseling competencies.

Next, scholars may want to adapt our model to leverage partnerships for a mutually beneficial relationship. Through partnerships, counselor educators may consider documenting program evaluation research for dissemination in counseling journals. Program evaluation research will support

the partnership model and its impact on counselor trainees and doctoral supervision competency, while centering the voices and experiences of the young adults with IDD. In addition, it is critical to understand how our partnership model, as well as related or adapted models, support college students with IDD. For example, Fields and colleagues (2025) reported on the satisfaction and perception of college students with IDD receiving services through our IPSE's partnership model.

In addition, we note that our partnership model was initially supported through federally funded grants. To that end, the counseling students employed in our IPSE program were all grant funded as graduate assistants. Counselor educators who are actively seeking grant funding to build research lines might consider interprofessional collaborations with special educators and IPSE programs to provide funded training opportunities for their trainees. Moreover, including the graduate assistants in research efforts may further foster interest to reduce the current gap in IDD-related counseling literature. Beyond funding for CTs, we acknowledge that grant-funded sources are not always an option. Indeed, members of our research team have previously worked alongside IPSE programs as master's-level CTs, as part of an unpaid internship experience within an IPSE. Although an unpaid internship is not ideal, CTs providing counseling services within an IPSE-program can be provided with alternative incentives, such as additional professional development and supervision, and access to more direct hours, certifications, and networking opportunities. Ultimately, unfunded CTs can be offered mutually beneficial experiences to learn more about how to work with college students with IDD, a growing population on college campuses.

Finally, research to better understand the current landscape of counseling interventions and practices that best support adults with IDD is needed. Once we better understand the intervention work currently being applied successfully, then counselor educators can better educate preservice counselors in evidence-based practices to support this population. This work is imperative given the

known gap in counselor education related to working with individuals with disabilities and the evident need for counseling services for adults with co-morbid IDD and mental health concerns.



Conclusion

While the need for counselors with the competencies, knowledge, and skills to support adults with IDD continues to increase (Lake et al., 2021), a mutually beneficial avenue to enhance the capacities of these professionals is through a partnership with an IPSE program for students with IDD. Hands-on fieldwork is an optimal learning experience for preservice professionals and many IPSE programs have voiced the need for staff with counseling skills to support student PD (Lizotte et al., 2021). A partnership between CE programs and IPSE programs satisfies both needs and ultimately enhances the competencies of mental health counselors to better serve adults with IDD for the duration of their careers.



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Rebecca B. Smith Hill, PhD, MSW, is associate director at the Center for Transition Research & Leadership and research coordinator at CarolinaLIFE, an inclusive postsecondary education program at University of South Carolina. She earned her PhD in special education with a focus on transition from USC. Her research interests include self-determination, dignity of risk, identity development, and overall wellness for young adults with disabilities. 

Alexander M. Fields, PhD, LMHC, NCC, ACS, is an assistant professor in the Department of Counselor Education at Florida Atlantic University. His research interests include the integration of primary and behavior healthcare, improving care for individuals with disabilities and chronic illnesses, group counseling, and factors that enhance holistic client wellness. 

Olivia J. Lewis, PhD, NCC, is a clinical assistant professor at Oregon State University where she studies client outcome research, single case methodology, and the use of nature for client wellbeing. She earned her PhD in counselor education and supervision at the University of South Carolina. 

Madeline Castle, PhD, is an assistant professor at Mississippi State University. She earned her PhD in counselor education and supervision from University of South Carolina. Her clinical background spans community agencies and university clinics. Her research focuses on college students with disabilities, holistic wellness, autonomy development, individual/group counseling, and best practices. Beyond academia, she has worked in inclusive postsecondary education programs. 

Chelsea VanHorn Stinnett, PhD, coordinates technical assistance for Think College at the Institute for Community Inclusion at the University of Massachusetts–Boston. She works to advance quality inclusive higher education opportunities for students with intellectual disability for both of Think College’s federally funded centers: the National Coordinating Center and the Inclusive Higher Education Network. Her research focuses on program development, evaluation, and sexual agency for adults with an intellectual disability. 

Anthony J. Plotner, PhD, is a professor in special education at University of South Carolina. He received his PhD in special education from the University of Illinois. His primary research interests center around enhancing employment and personal outcomes of transition-age youth with disabilities; improving collaborative service delivery across systems; and developing and implementing rigorous college opportunities for individuals with an intellectual disability. 

Rachel Gilreath, PhD, is an assistant professor at University of Wisconsin–Oshkosh. She earned her PhD in counselor education and supervision from University of South Carolina. She specializes in both school and clinical mental health counseling, with diverse clinical experience, and primarily works with adolescents and young adults. She typically teaches career planning and development while focusing her research on comprehensive school counseling programs and career development for marginalized populations. 

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