

Starting the Conversation About Interdisciplinary Counselor and Teacher Training

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Sejal Parikh Foxx¹  and Kelly Anderson²

Abstract

School counselors and special education teachers are most often the professionals called upon to support students with intensive, challenging behavioral and emotional needs. However, research suggests that many preparation programs fail to provide training specific for intensive evidence-based interventions. We review the context and need for interdisciplinary school counselor and special education teacher training and provide a perspective on potential directions for addressing this need in professional preparation.

Keywords

challenging behaviors, interdisciplinary personnel preparation, mental health concerns

Schools are more diverse today than ever before in history (Brock et al., 2013; Fry & Parker, 2019; Harris, 2013; Kalogrides et al., 2013). The academic, social/emotional, and behavioral needs of K–12 students have dramatically increased and, in some instances, are more complex than in the past (Barrett et al., 2016; Mason-Williams et al., 2017). The increasing cultural, linguistic, social/emotional, and behavioral needs of students, coupled with economic, social, and legislative changes brought about by ever-present interest in school reform, have greatly changed the roles and responsibilities of school counselors and teachers (K. Anderson et al., 2015; Barrow & Mamin, 2016; Hall, 2015). Given the expectation and challenges of implementing evidence-based interventions as a part of the Every Student Succeeds Act (2015) signed by President Obama in 2015, educators have turned to large-scale initiatives such as multitiered systems of support (MTSS), response to intervention (RTI), and school-wide positive behavioral interventions and supports (PBIS) to achieve success for all students (Arden & Pentimonti, 2017; Barrett et al., 2016; Harn, 2017; Mellard, 2017; Olsen, 2016; Olsen et al., 2016; L. C. Smith et al., 2017).

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Evidence-based practices, as defined in special education, are interventions and instructional techniques supported by

high-quality research (Cook et al., 2015). High-quality research includes single-case and group comparison using randomized and nonrandomized design that demonstrates adequate effect size. These practices establish the effectiveness of interventions that educators can use to improve student outcomes (Cook & Cook, 2013; Cook et al., 2015). Unfortunately, in the school counseling profession, research investigating the effectiveness of interventions is lacking. A 10-year content analysis of school counseling intervention research indicated a severe lack of studies from which empirical outcomes could be demonstrated (Griffith et al., 2019). Of the evidence-based practices that do exist, few studies are specific to students with intensive needs. One example of an existing evidence-based intervention is Student Success Skills (SSS). In one research study, Bowers and colleagues (2018) evaluated specific outcomes of the SSS program on students with disabilities. Through collaboration between the school counselor and special education teacher, the SSS intervention resulted in positive outcomes associated with executive functioning, academic competence, and social/emotional learning. Although the outcomes from that study are promising, even the best of schools vary in their ability and

¹ Department of Counseling, University of North Carolina at Charlotte, NC, USA

² Department of Special Education and Child Development, University of North Carolina at Charlotte, NC, USA

Corresponding Author:

Sejal Parikh Foxx, PhD, Department of Counseling, University of North Carolina at Charlotte, Charlotte, NC 28223, USA.

Email: sbparikh@uncc.edu

capacity to effectively implement intensive evidence-based interventions for students with intensive and chronic challenging behaviors. Such interventions are necessary to provide sustained supports for students' continued participation in natural learning environments (Kuchle et al., 2015; McIntosh et al., 2008; Olsen et al., 2016; Sugai & Lewis-Palmer, 2004). Just as practitioners need to build their capacity to provide interventions, researchers need to fill the existing gap in studies that utilize high-quality research designs to investigate evidence-based practices.

In most cases, school counselors and special education teachers are the school personnel called to the front line by school administrators when responding to students with intensive, challenging behavioral and emotional needs, particularly when a student's behavior becomes potentially self-harmful or a risk to teachers or others within a classroom (C. M. Anderson & Rodriguez, 2014; Olsen et al., 2016; L. C. Smith et al., 2017). Many of the students exhibiting intensive, challenging behaviors qualify for special education services under the Individuals with Disabilities Education Act (IDEA, 2004), meeting eligibility criteria across several disability categories (e.g., emotional and behavioral disturbance, specific learning disabilities, intellectual disability, developmental delay, autism spectrum disorder, traumatic brain injury). Other students with social/emotional and behavioral challenges may be among the estimated 20% of children and youth that live with identified or unidentified needs for mental health services (Barrett et al., 2016). For many of these students, the absence of professional training for school counselors and special education teachers specific to the provision of intensive evidence-based interventions typically means a default to conventional decisions, resulting in exclusion from school environments into alternative learning placements and/or long- or short-term suspensions or expulsion.

School counselor preparation programs address a broad range of skills focused on meeting the needs and supporting the academic and behavioral success of diverse groups of students (American School Counselor Association [ASCA], 2019a; Barrow & Mamlin, 2016). As the school counseling profession has evolved, research has emerged advocating for school counselor preparation programs to address the need for collaboration and inclusion of content specific to working with other professionals (specifically special education teachers) in providing interventions, services, and supports for students with disabilities (Hall, 2015; Romano et al., 2009; Studer & Quigney, 2005; Young et al., 2015). School counseling researchers note that while 83% of school counselors provide interventions and behavioral supports for students with disabilities, many school counselors have not completed course work during their graduate training related to special education (Milsom, 2002; Milsom & Akos, 2003).

Similarly, special education teacher preparation and professional development programs focus on skills related to behavior management, strategies for accessing the general

curriculum, assessment of learning difficulties, and working with parents and families of students with disabilities. Several studies have suggested that special education teachers lack training specific to intensive evidence-based interventions, particularly with regard to determining how to implement these interventions with students with challenging social/emotional, mental health, and/or behavioral needs (e.g., Bettini et al., 2019; Evans et al., 2013; Flynn & Lo, 2015; Garland et al., 2013; Mayton et al., 2010; Scott, 2017). Furthermore, special education teacher preparation programs often do not provide ongoing and meaningful clinical field opportunities for candidates to learn and apply collaborative skills needed to work effectively with general education teachers and/or with interdisciplinary teams of professionals (e.g., school counselors, nurses, psychologists, social workers; Collins & Ludlow, 2018; Scott, 2017; Shepherd et al., 2016).

Extant knowledge and practice in preparation and professional development programs sometimes fails to provide training specific to intensive evidence-based interventions for students experiencing challenging social/emotional, mental health, and/or behavioral needs. In the sections that follow, we review the context and need in education to provide possible direction for change in personnel preparation and share conclusions to support the development of alternative training programs.

Context and Need

Students who have intense behavioral challenges are particularly at risk for impaired academic engagement and poor achievement outcomes (Kuchle et al., 2015; McIntosh et al., 2008). The range of challenging behaviors manifested in classrooms varies from nondangerous but disruptive to behavior that is potentially harmful to the child exhibiting the behavior or others within the classroom (C. M. Anderson & Rodriguez, 2014; Martin et al., 2012). For school counselors and for general and special education teachers, responding to students who have high-intensity behavioral and emotional needs can result in increased stress and significant loss of instructional time (Kuchle et al., 2015; McIntosh et al., 2008). This relationship between academic and behavioral difficulties can begin as early as kindergarten and is well-documented in the literature (e.g., Benner et al., 2013; Kuchle et al., 2015; McIntosh et al., 2006, 2008). For some students with intensive behavioral challenges, the trajectory beginning at school entry may contribute to dropping out of school, unemployment, and/or juvenile incarceration. In 2009, 47.4% of incarcerated youth were identified as having emotional and/or behavioral disorders, with 38.6% identified as having learning disabilities. Of equal concern are the 60% of youth in juvenile justice systems with comorbid mental health concerns (Houchins et al., 2012; Shufelt & Cocozza, 2006).

Although a majority of districts across the county have implemented evidence-based instructional and behavioral

practices through MTSS, RTI, and school-wide PBIS, students with high-intensity behavioral needs typically do not respond to secondary interventions (Tier 2; Berkeley et al., 2009; Kuchle et al., 2015). For some students, particularly those with intensive behavioral needs manifesting as extreme behavior (e.g., aggression, self-injury, noncompliance, destructive behavior), traditional interventions within MTSS Tiers 2 and 3 may not be sufficient due to the lack of training for special and general education teachers and interdisciplinary team members (i.e., school counselors) in the implementation of intensive interventions (e.g., applied behavior analysis [ABA]).

According to *Data-Based Individualization: A Framework for Intensive Intervention Report* (National Center on Intensive Intervention, 2013), 3%–5% of students involved in MTSS Tiers 1–2 need more intensive interventions in Tier 3. The exact percentage of students within each disability category requiring more intensive interventions is unknown (Kuchle et al., 2015). Barrett and colleagues (2016) contended that educators implementing intensive behavioral interventions typical in multilevel systems of support do not always take into consideration other complex issues interconnected to students' behavioral and social/emotional needs (e.g., mental health, trauma, extreme abuse and neglect).

According to 2011–2012 national aggregated data from the Centers for Disease Control and Prevention (2016), about 14.2% of children aged 2–8 years had a mental, behavioral, or developmental disorder. Among youth aged 13–18 years, the Substance Abuse and Mental Health Services Administration (SAMHSA, 2018) found that 49.5% had a mental disorder and about 22.2% of adolescents reported a major depressive episode in the prior year. Nationally, more youth are becoming more depressed, as shown in a 1.2% increase in youth with depression and a 1.3% increase in youth with severe depression between 2010 and 2013 (Mental Health America, 2016). Research has demonstrated that overall mental wellness directly correlates to high school graduation rates, academic achievement, and prevention of risky behaviors (Center for Health and Health Care in Schools, 2014).

Although school counselors and special education teachers are often critical members of schools' multilevel problem-solving teams charged with providing evidence-based interventions with students with challenging behavior needs, their preparation seldom equips them with the interdisciplinary skills to collaborate and effectively implement intensive evidence-based behavior and mental health interventions. Several studies suggest that, although special education teachers receive varying levels of teacher preparation in functional behavior assessments (FBA) and behavior intervention plans (BIP), their training specific to intensive evidence-based interventions is insufficient when determining how to implement these interventions with students with challenging behavior and/or mental health concerns (e.g.,

Evans et al., 2013; Flynn & Lo, 2015; Garland et al., 2013; Mayton et al., 2010).

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School-employed mental health professionals (counselors, psychologists, and social workers) have specialized training in meeting the mental and behavioral health needs of students (NASP, 2015). School counselors, in particular, are trained to provide socioemotional supports for students. According to the ASCA (2015), school counselors are prepared to address barriers and assess ways to maximize students' success in schools, communities, and their family structure by offering education, prevention, and crisis and short-term intervention until the student is connected with available community resources. School counselors receive specific training to recognize warning signs (e.g., changes in school performance, attendance, mood changes, trauma) and provide early intervention or crisis services that promote psychosocial wellness and development for students.

Although trained by school counselor preparation programs to provide socioemotional behavioral supports, school counselors do not receive specific knowledge and skills of ABA, FBA, and BIP. This is critical given the lack of school personnel with the expertise needed to provide successful behavioral support. As indicated in previous research, the applicant pool of personnel with these skills is limited (McIntosh & Av-Gay, 2007). Schools typically provide single workshops, which do not establish necessary expertise (Scott et al., 2004). McIntosh and Av-Gay (2007) recommended that schools cultivate local expertise in FBA and noted that teaching other school personnel (e.g., counselors) can lead to effective support and better long-term effects. Finally, previous research indicated that the greater the number of courses with information about disabilities that school counselors completed, the more prepared they felt to perform activities for students with disabilities (Milsom, 2002).

Collateral Considerations

Recent data suggest that the number of students with intensive behaviors and/or mental health concerns will only continue to rise each year (Kuchle et al., 2015; SAMHSA, 2018). The need has never been more critical for school counselors and teachers equipped to engage in collaborative problem-solving teams (e.g., MTSS) that effectively and efficiently implement evidence-based interventions. Several related issues contribute to the urgency for more advanced preparation, such as a master's degree, that provides educators with collaborative

experiences to learn evidence-based interventions and participate in clinical opportunities allowing them to apply knowledge and skills in schools.

Personnel shortages. Although the number of students with disabilities receiving specialized instruction and behavior supports in IDEA Part B programs continues to increase, states are struggling to meet the demand for fully credentialed special education teachers to serve students with disabilities, especially those with intensive needs (e.g., autism spectrum disorder, intellectual disabilities, emotional and behavioral disability). Nationally, approximately 1 million students with disabilities are receiving special education supports and services from untrained or undertrained personnel (Bettini et al., 2019; Bruder, 2004; Rock et al., 2016). The Bureau of Labor Statistics (BLS, 2020e) reported that, although employment of preschool, kindergarten, and elementary school special education teachers is projected to grow 3% from 2018 to 2028, the demand for special education services and teachers will continue to rise with early identification of disabilities and as children with disabilities are enrolled in special education programs. The majority of shortages and retention of highly qualified special education personnel tend to occur most in urban and rural communities (Rock et al., 2016). Several factors may be exacerbating the shortages of special education personnel in schools: (a) education budget cuts, (b) teacher attrition due to burnout and/or unpreparedness for the job, and (c) teacher attrition due to retirement.

ASCA (2019a) recommends a ratio of student-to-school counselor ratio of 250:1, but the 2018–2019 national average was 430:1, with only 11 states averaging less than 350 students per counselor (ASCA, n.d.). Elementary schools have the highest student-to-school-counselor ratios, with numbers decreasing as school level increases (Astramovich & Holden, 2002). In 2018, U.S. schools employed about 324,500 school counselors in elementary and secondary education (BLS, 2020d) and about 1,845,100 kindergarten, elementary, middle, and secondary school teachers (BLS, 2020a, 2020b, 2020c). Although school counselors represent a small portion of the education field, BLS projections for the occupation indicated an 8% growth from 2018 to 2028—higher than the national average for most fields (BLS, 2020d). In spite of demand, certain factors (similar to those affecting special education personnel) are impeding schools from meeting the recommended ratio: (a) education budget cuts, (b) school counselor attrition due to burnout and/or unpreparedness for the job, and (c) school attrition due to retirement. Given these concerns, one option is to prepare special education teachers and school counselors through an interdisciplinary approach.

Economic factors. Budget reductions have had a significant impact on special education. The National Coalition on Personnel Shortages in Special Education and Related Services (NCPSSERS, 2013) reported that federal, state, and local budget cuts in special education resulted in layoffs and unfilled

vacancies, with more than 80% of respondents reporting they have too few personnel to meet the needs of students with disabilities. The report also indicated an increase in special education caseload and a decrease in personnel qualified to meet the needs of students with disabilities. Eighty-three percent of respondents reported that budget cuts have impacted special education service delivery, decreased professional development opportunities, and could affect the outcomes of students with disabilities (NCPSSERS, 2013).

Lazara and colleagues (2016) reported on the dramatic disparity between the increasing number of students being served under IDEA and decreasing amount of federal appropriations from 1977 to 2015. In the past 10 years, the numbers of students aged 6–17 years grew more than 20%, while funding per child decreased more than 26% (Lazara et al., 2016). Researchers estimate that about one in every six children is diagnosed with a disability, largely due to attention deficit hyperactivity disorder (ADHD) and autism (Boyle et al., 2011; Szabo, 2011). More students with disabilities are being served today with less funding than 10 years ago. These data imply a decrease in the quality of services, higher ratios of students to teachers, larger caseloads, and diminished academic and social/emotional outcomes for students with disabilities.

The economic downturn that began in 2008 and its slow recovery also affected hiring of school counselors, which has led to high ratios. Spending on K–12 schools was cut in 44 of 50 U.S. states between 2007 and 2012. These cuts translated into the loss of some 300,000 school district jobs nationally since 2008 and led to a catastrophic shortage of counselors and psychologists (Keigher & Cross, 2010).

Turnover, attrition, and aging out. The high turnover rate for teachers in the United States is well-documented, with an average annual turnover rate of 33% for all teaching staff (Bell et al., 2013). Twelve percent of special education teachers are reported to have left teaching (1988–1989 through 2012–2013), nearly double the rate of their general education colleagues (7.6%; Keigher & Cross, 2010). Special education teachers could be at higher risk for leaving due to increased stress and depression from responding to difficulties with their students, time demands, and low pay (Biglan et al., 2013). As more K–12 students meet eligibility for special education supports and services with complex risk factors (e.g., poverty, mental health issues, abuse, neglect) and student populations from culturally and linguistically diverse backgrounds increase, teachers are being asked to support behavioral and learning needs with inadequate preparation (Biglan et al., 2013).

Sixty percent of new school counselors leave the field within 2 years, an attrition rate that may be related to job stress. Studies have shown that a greater amount of time spent on noncounseling duties affects school counselor burnout (Ballard & Murgatroyd, 1999; DeMato & Curcio, 2004; Lambie, 2007). School counselors, who bring education and mental health together, may be vulnerable because of job demands that

include heavy caseloads, little to no clinical supervision, and environments with constant role ambiguity (Brewer & Clipard, 2002). Baggerly and Osborn (2006) found that, even though a majority of school counselors reported being satisfied with their job, almost 90% reported increased stress due to increases in job demands. As with special education teachers, retirement rates will affect school counselors: By 2024, employment for school counselors (about 22,500 jobs) was due in part to retirements in the profession (McCarthy et al., 2010).

Opportunity for Conversation and Possible Direction for Change in Personnel Preparation

Despite a growing volume of literature supporting the addition of training and coursework on special education and students with disabilities for school counselors, few, if any, training models exist that illustrate master's level collaborative personnel preparation. Some possible solutions for moving forward and bridging this gap in preparation are evident in the professional literature. For example, the ASCA's (2016) position statement on working with students with disabilities provides clear guidelines for the inclusion of embedded content and experiences in working with students with disabilities in counselor preparation training (Barrow & Mamlin, 2016). In response to ASCA's position statement, several recommendations have been shared to address this need in counselor preparation. These include participation in professional learning communities (PLCs) with school counselors and special education teachers, enrollment in a single course designed for special education teachers and taught by special education faculty, and/or class assignments specifically related to special education (Hall, 2015).

School counselors and special education teachers are essential leaders of school intervention teams; however, their varied professional training makes working effectively together difficult because they lack shared information, understanding, and experiences in implementation and monitoring of intensive evidence-based interventions. Effectively responding to the unique and often complex needs of students with challenging behavior and/or mental health concerns requires combined expertise of school counselors and special education teachers in collaborating, problem-solving, and designing focused and individualized intensive interventions. For school counselors and special education teachers to provide efficient, high-quality, integrated services, advanced preparation needs to embed content on evidence-based interventions and clinical experiences that mirror the interdisciplinary, team-based collaboration found in schools (e.g., MTSS, RTI, PBIS; Boe et al., 2013; Evans et al., 2016; McLeskey & Brownell, 2015).

Endorsements for the provision of PLCs, single course offerings in special education, and required practice and assignments focusing on working with students with disabilities are all viable possible solutions to improving school counselors' knowledge and skills in working with students with disabilities. However, we explore an option that expands into

master's level collaborative professional preparation, emphasizing shared expertise and collaboration across disciplines.

With proven success within the field of early childhood early intervention special education preparation, *interdisciplinary personnel preparation* may provide a viable starting point for change in preparation training for school counselors and those in related disciplines. Although not a new concept in special education, interdisciplinary personnel preparation provides opportunities for master's level professionals to learn together and receive training with embedded, collaborative learning experiences that replicate the problem-solving teams in actual school settings (J. D. Smith, 2010). As typically defined in the literature, interdisciplinary preparation involves two or more disciplines in the delivery of course work and practical experiences to professionals pursuing degrees in more than one professional discipline (Kilgo & Bruder, 1997; J. D. Smith, 2010; Stayton et al., 2001). The foundation of interdisciplinary training is the premise of preparing professionals across disciplines resulting in a common core of knowledge and skills while also maintaining discipline-specific expertise (Stayton & Bruder, 1999). Research suggests that professionals who experience interdisciplinary training, as defined above, in master's degree programs are more likely to translate their experiences into interdisciplinary teaming within their professional employment (Stayton et al., 2001).

Interdisciplinary personnel preparation provides master's level learning opportunities for professionals to learn together and receive training with embedded, collaborative learning experiences that replicate the problem-solving teams in actual school settings (J. D. Smith, 2010).

As illustrated in Figure 1, interdisciplinary preparation provides school counselors and special education teachers opportunities to learn from one another, deepening their understanding of roles within school environments. Furthermore, this approach allows for sharing of expertise through clinical experiences that require consultation and collaboration similar to problem-solving for school-based teams (e.g., MTSS, PBIS, RTI) and gives educators potential for greater impact in supporting students with intensive needs.

Because of the critical need for school counselors to be trained in evidence-based interventions for working with students with disabilities, joining school counselor training with master's level special education teacher preparation seems like a critical priority for moving forward. The mutual benefits of this pairing are clear, given that providing supports and services to K–12 students with intensive behavior and mental health issues has become a part of the changing roles of school counselors and special education teachers in schools today. The following describes one approach for establishing an interdisciplinary training program for school counselors and special education teachers.

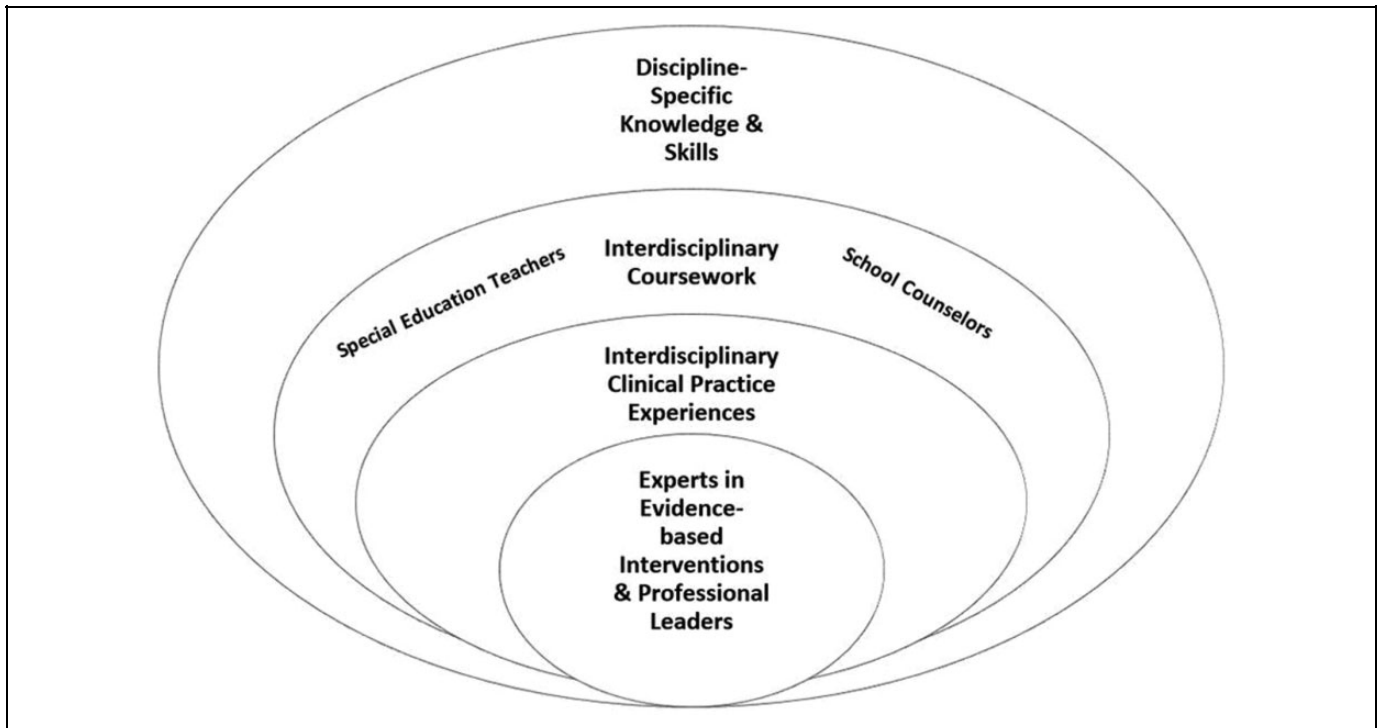


Figure 1. Proposed conceptual framework for interdisciplinary preparation.

First, this approach requires commitment to collaborate in the planning, design, implementation, and evaluation of the interdisciplinary training by faculty from both disciplines. Faculty must discuss and assess each discipline's specific program and professional standards to identify potential interdisciplinary core competencies that school counselors and special education teachers enrolled in the interdisciplinary program will be required to master in addition to their discipline-specific competencies. These interdisciplinary core competencies "need to align with initiatives and critical needs in K–12 schools in which counselors and special education teachers will be employed" (Stayton et al., 2001, p. 399).

Faculty must discuss and assess each discipline's specific program and professional standards to identify potential interdisciplinary core competencies that school counselors and special education teachers enrolled in the interdisciplinary preparation will be required to master in addition to their discipline-specific competencies.

For example, an interdisciplinary preparation program for school counselors and special education teachers may focus on evidence-based interventions in special education such as ABA as one aspect of the interdisciplinary core competencies. Experts in ABA recommend that personnel preparation programs include advanced knowledge and skill in (a) observation, behavioral skills training, and delivery of performance feedback; (b) modeling of technical, professional, and ethical

behavior; (c) behavioral case conceptualization, problem-solving, and decision making; (d) review of behavior programs, data collection including data sheets, and baseline recordings; and (e) analyses of effects of behavior interventions (Beavers et al., 2013; Bethune & Wood, 2013; Bloom et al., 2011; Garland et al., 2013; Hanley et al., 2003; Kunnavatana et al., 2013; Lang et al., 2010; Leaf & McEachin, 1999; Pelios et al., 1999). Due to the nature of behavior stemming from trauma and mental health concerns, the paired evidence-based interventions specific to mental health and crisis intervention may be a logical second component of the interdisciplinary core competencies for school counselors and special education teachers. School counseling experts suggest that preparation programs provide advanced knowledge and skill in basic counseling techniques; multicultural competency; responsive services related to grief and loss; crisis; ADHD; mental health; and recognizing the signs of depression, anxiety, substance abuse, and suicide (ASCA, 2015; Clark & Breman, 2009; Dimmitt et al., 2007; Gruman & Hoelzen, 2011; Schellenberg & Grothaus, 2011).

Another area of training focus for school counselors and special education is the professional standards specific to their field. School counselors demonstrate mastery of the *ASCA School Counselor Professional Standards and Competencies* (ASCA, 2019b), and special education teachers learn the *Special Education Advanced Core Standards* (Council for Exceptional Children, 2015). How and where the interdisciplinary core competencies are embedded within the preparation training can be structured in a variety of ways. For example,

programs might examine an existing course such as school counselor consultation and include special education majors. The content could focus on MTSS, RTI, and consultation models, whereby the students work in teams to consider evidence-based strategies for students with disabilities. Consequently, what distinguishes the interdisciplinary from the discipline-specific coursework is its representation as central, rather than elective or peripheral, and enrollment of school counselors and special education teachers together. Students then have opportunities to collaborate on assignments and projects and can apply their shared knowledge and skills in collaborative clinical school experiences. Without opportunities for professionals to authentically work together, apply what they have learned, and practice interdisciplinary collaboration, the promise and potential benefits of this approach to advanced preparation will be minimized.

Conclusion

Despite continuing and advanced education, school counselors and special education teachers consistently report challenges in meeting the needs of diverse groups of students, particularly those with intensive social/emotional, mental health, and behavioral challenges (Hall, 2015; McIntosh & Av-Gay, 2007; Milsom, 2002; Milsom & Akos, 2003; Romano et al., 2009; Studer & Quigney, 2005). Opportunities for considering change and reflecting on the development of alternative preparation training perspectives and programs are emerging in the literature. Barrow and Mamlin (2016) suggest that to achieve enhanced collaboration among school counselors and special education teachers, system changes in preparation programs are needed. Nichter and Edmonson (2005) took recommendations a step further, prescribing that “school counselors need training in laws and legal mandates, understanding individualized education plans (IEPs), characteristics of disabilities, and classroom-based interventions” (Barrow & Mamlin, 2016, p. 4). Similarly, special education teacher preparation programs are insufficient in terms of content/coursework on working with students with mental health needs and/or working with school counselors, psychologists, or social workers on interdisciplinary problem-solving teams (Barrett et al., 2016; Bettini et al., 2019; Collins & Ludlow, 2018; Scott, 2017). We also suggest that ASCA provide free webinars or podcasts on these topics, so they are easily accessible and can support collaboration with special education teachers.

Hall (2015) projects that the

continuance of advanced professional training absent of coursework related to special education and students with disabilities, accompanied with opportunities for practical experiences in developing knowledge in student referrals, and professional collaboration and problem solving with other professionals, will contribute to continued frustration, stress, and low self-efficacy in school counselors. (p. 223)

Most importantly, failure to examine advanced school counselor programs and lack of willingness to redefine and broaden the scope of content to include responding to the needs of students with disabilities, including students with complex and intensive needs, may contribute to increased attrition of early career school counselors. At the same time, the shortage of special education teachers has plagued the field of special education for decades (Bettini et al., 2019; Rock et al., 2016). Similar to their professional counterparts in counseling, shortages of special education teachers in urban and rural school systems have been largely attributed to stress, burnout, and feeling unprepared for the demands of the role and the complex needs of students with disabilities.

Feelings of unpreparedness to do the job as school counselors and special education teachers is a common theme in the literature on personnel preparation. Interdisciplinary advanced preparation programs are one possible alternative for bridging the gap between professional preparation programs and the real demands and evolving roles of school counselors and special education teachers working with diverse students with intense and complex needs. This gap can also be narrowed by future studies examining the effectiveness of interventions using high-quality research standards to demonstrate empirical outcomes (Cook & Cook, 2013; Cook et al., 2015; Griffith et al., 2019).

Professional leadership by school counselors and teachers is “second only to classroom instruction as a positive influence on student learning” (Louis et al., 2010, p. 9). School counselors and special education teachers with expertise in ABA and mental health evidence-based interventions can serve as advocates and mentors, influence school and agency policies, assist in improving research and school practices, and build capacity for retaining professional personnel (K. Thornton, 2010). Interdisciplinary advanced training options result in professionals with collective expertise and shared understanding. This approach offers school counselors and special education teachers the potential to effectively implement necessary, evidence-based interventions to provide sustained supports for all students, especially those with the greatest academic, behavioral, and social/emotional needs (Kuchle et al., 2015; McIntosh et al., 2008; Olsen, 2016; Sugai & Lewis-Palmer, 2004).


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ORCID iD

Sejal Parikh Foxx  <https://orcid.org/0000-0002-1870-4589>

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Author Biographies

Sejal Parikh Foxx, PhD, is a professor and department chair of the Department of Counseling and director of the Urban School Counseling Collaborative at the University of North Carolina at Charlotte.

Kelly Anderson, PhD, is an associate professor and the program director for the BA in special education and elementary education K–6 dual major in the Department of Special Education and Child Development, also at the University of North Carolina at Charlotte.