



MASTER OF ARTS IN COUNSELING Annual Assessment (2021)

Mission

The Master of Arts in Counseling (MAC) program strives to create a Christ-centered community where students can excel as professional clinicians. To achieve this, we infuse the following core values throughout the program:

- *Spiritual integration*: Integrate Christian theology and practice on conceptual, clinical, and personal levels throughout the coursework.
- *Healing presence*: Emphasize the development of strong clinical skills, building from a Rogerian foundation and integrating additional models as skill develops.
- *Advocacy & diversity*: Promote the understanding and awareness of diversity issues on theoretical, professional, and personal levels such that students can work in a culturally inclusive way.
- *Professional identity*: Cultivate student dispositions such that they can interact ethically, professionally, competently, and comfortably in the counseling field.
- *Educational excellence*: Foster student learning around essential knowledge in the field, ranging from counseling theories to evidence-based practices to assessment tools.

Program Accreditation

[Multnomah University](#) is accredited by the Northwest Commission on Colleges and Universities ([NWCCU](#)). The MAC program also meets all educational requirements for licensure as a licensed professional counselor (LPC) via the [Oregon Board of Licensed Professional Counselors and Therapists](#) or a mental health counselor via the [Washington State Department of Health](#). The program is further in the process of working towards additional accreditation with the Counsel for the Accreditation of Counseling and Related Educational Programs ([CACREP](#)) via the clinical mental health counseling track; additional information regarding anticipated timelines for CACREP accreditation is available upon request.

Evaluation Overview

In order to ensure excellence in all the above stated areas, the program conducts regular evaluations and reviews this data annually. This data is primarily collected via key assignments in select courses, a mid-program evaluation of all students, a final case presentation done by all students (i.e., Oral Exam), and site evaluations during practicum and internship. Supplementary data is also collected from graduating students, alumni, and site supervisors (who often employ graduates).

All student data is included from the time evaluations are completed. This includes both undergraduate students in the accelerated MAC track and students who may not complete the

program. Since the inception of the program, data from the Registrar's Office estimates the completion rate as averaging about 80% per year. While this rate is lower than we'd like, there were a few years when the rate dropped due to the lack of a program director. In addition, the program tends to cater to working adults who often have life crises (e.g., health issues, job/financial changes) during the program and may not be able to finish as a result. Many are proving to come back later, when life circumstances again allow; none, to the current director's knowledge, are leaving to transfer to other programs due to dissatisfaction with our degree program. Actually, it seems to be quite the opposite, as one finishing student recently reported, "I am here [passing his oral exams] because of you [faculty] in this room; I would have given up and dropped out of any other program, but your authentic support allowed me to get this point."

This particular report discusses data from the 2021 calendar year, along with corresponding program adjustments. It may be helpful to note that 16 students entered the program in 2021, and 10 students graduated from the program. Even in the midst of an ongoing, worldwide pandemic, 50% of these students reported that they had lined up work as a professional counselor before graduating. While 33% were unemployed, this was mostly by choice for students who wanted to pursue a doctoral degree.

According to our 2018 alumni survey results, 77% of graduates are working full-time as licensed, professional counselors; this group had unanimously (100%) passed appropriate national credentialing exams. Those who were not practicing as licensed professional counselors were often choosing work in related settings, such as education. It should be noted that response rates for this group were low, and the MAC program is pursuing an updated alumni survey in 2022.

Specific Assessment Outcomes

- ***Spiritual Integration***
 - S1. Articulate a view of human nature and transformation that integrates counseling theory and Christian theology, while recognizing the impact of these spiritual beliefs on the counselors' worldview and engaging them in an ethical and professional manner.
 - S2. Practice spiritual assessment and clinical integration in an ethical and professional manner
 - S3. Pursue ongoing personal and spiritual development, demonstrating self-care strategies appropriate to the counselor role.
- ***Healing Presence***
 - H1. Demonstrate essential interviewing and counseling skills, building from a Person-Centered model.
 - H2. Utilize a variety of techniques and interventions for the prevention and treatment of a broad range of mental disorders, stemming from a variety of modalities.
 - H3. Demonstrate appropriate procedures for assessing risk of aggression or danger to others, self-inflicted harm, or suicide.
 - H4. Apply clinical skills to facilitating client skill development for career, educational, and life-work planning and management.

- H5. Identify and embody characteristics and functions of an effective group leader.
- **Advocacy & Diversity**
 - A1. Understand and utilize multicultural counseling competencies, such as providing culturally inclusive services with people from diverse backgrounds.
 - A2. Understand differential diagnosis with sensitivity to clients' culture and diversity factors.
 - A3. Articulate strategies for advocating for diverse clients' career and educational development and employment opportunities.
- **Professional Identity**
 - P1. Articulate and abide by ethical standards of the profession via the ACA code of ethics and applicable legal standards.
 - P2. Demonstrate professional dispositions consistent with the profession; see Appendix A for more detail.
 - P3. Articulate and make reasonable progress toward a plan for their professional career in terms of work setting(s), licensure (if desired), membership in professional organizations, ongoing training, etc.
- **Educational Excellence**
 - E1. Articulate a variety of theories related to individual and family development across the lifespan and apply them to conceptualizing clients.
 - E2. Articulate multiple theories and models of counseling to create effective treatment plans for clients.
 - E3. Utilize research to identify evidence-based counseling practices for various diagnoses and disorders, and critically evaluate their application to actual clients.
 - E4. Identify assessments for diagnostic and intervention planning purposes.
 - E5. Articulate dynamics associated with group process and development.

Evaluation Summary

Each assessment outcome is measured by at least two measures, generally administered at different points of time during the program. The program generally looks for at least 80% of students to have achieved appropriate competency for their developmental level. Actual results are discussed by core area below.

- **Spiritual Integration:** Overall, the program met its goals for all spiritual integration outcomes. This means that at least 80% of students met or exceeded developmental benchmarks across all measures in relation to conceptual (S1), clinical (S2), and personal integration (S3). In fact, actual results were significantly above 80%--e.g., 100% of students met or exceeded developmental benchmarks for all measures of conceptual (S1) integration and some measures of both clinical (S2) and personal integration (S3). These results seem to indicate that students are engaging a robust integration of their faith with counseling across several domains.

- ***Healing Presence:*** Overall, the program met all of its goals for the healing presence outcomes. More specifically, 100% of students met or exceeded developmental benchmarks across all measures in relation to using basic, Person-Centered counseling skills (H1); assessing risk (H3), and applying clinical skills to career and educational types of interventions (H4). At least 80% of students met or exceeded developmental benchmarks across all measures in relation to leading groups (H5) and utilizing a variety of techniques and interventions in the treatment of individual clients (H2). Taken together, these results seem to indicate that students are excelling at basic counseling tasks, such as embodying their professional role, building rapport, and managing risk factors across various settings and domains. They are also learning to layer other, more advanced modalities on top of their basic counseling skills, which seems to indicate that the changes implemented in 2020 are working to help students solidify this aspect of professional practice.
- ***Advocacy & Diversity:*** Overall, the program met most of its goals for the advocacy and diversity outcomes. More specifically, at least 80% of students met or exceeded developmental benchmarks for their ability to utilize multicultural competencies (A1) and advocate for diverse clients in relation to career, education, or other needs (A3).

Results were mixed for students' ability to engage culturally sensitive diagnosis (A2). 100% of students met benchmarks for this area at the mid-program evaluation from their supervisors, while only 73% met them at the end of program Oral Exam. While these results could be interpreted in several ways, a likely explanation is that external supervisors are satisfied with the clinical skills of MAC students, yet faculty bring a higher standard and would like to see some improvement in this area by the end of the program; this indicates both a program strength (in that student appear to be performing well in the field) and a potential growth area.

- ***Professional Identity:*** Overall, the program met most of its goals for the professional identity outcomes. This means that at least 80% of students met or exceeded developmental benchmarks across all measures in relation to professionalism (P2). In addition, students met or exceeded benchmarks in relation to their professional identity (P3)—e.g., joining professional organization, identifying places they want to work, and even beginning to find counseling related jobs prior to graduation.

Results were mixed for ethical practice (P1). While 100% of students met benchmarks at the mid-program evaluation, only 73% met them at the end of program oral exam. As noted above, these results may indicate that students are showing basic, developmentally expected competency in relation to ethical practice in counseling, yet faculty are hoping for a higher level of sophisticated, clinical application by the end of the program.

- ***Educational Excellence:*** Overall, the program met most of its goals for the educational excellence outcomes. More specifically, over 80% of students met or exceeded benchmarks across all measures related to conceptualizing clients from various theoretical lenses (E1), using assessments in clinical practice (E4), and articulating group process and development (E5).

Results were more mixed for the other measures. More specifically, while 100% of students met benchmarks for creating effective treatment plans (E2), only 73% met benchmarks at the end of program Oral examination. Similarly, 88% of students met benchmarks at the mid-program evaluation for utilizing research to support evidence-based counseling practices (E3), but only 73% met benchmarks at the Oral exam. Once again it seems that students are performing well in the field or on standardized measures, but faculty identify subtle growth areas where they would like to see improvement.

Overall, the MAC Program is commended for continuing to successfully complete the evaluation process, including implementing new and revised assessment procedures for a number of program objectives. In addition, the Program is commended for continuing to meet or exceed standards in most areas—in fact, in more areas than last year; the following standards moved from “mixed” results in 2020 to “met” results in 2021: S3, H2, A1, P3, E1, and E4. While there were still a few areas with mixed results, which will be assessed and addressed below, there were NO areas where benchmarks were below standards across the board. This is particularly striking in the midst of the events of 2020-21, and seems to indicate that the program is not only effectively training students but effectively shoring up gaps through these cycles of evaluation and revision.

Recommended Program Modifications

The program is always in a process of continuous improvement, and the following modifications were or are being made in the program in response to the assessment data:

- ***Spiritual Integration:*** No changes were made based upon assessment data, as this is a program strength.
 - However, the program has continued a multi-year effort to roll out a new faith integration plan, which began in Fall 2020 and will continue through December 2022. The new plan works to more specifically align all courses with goals **S1, S2, & S3**. This includes defining new, more concrete and specific integration questions for students to address during their time in the Program.
 - In addition, each class is being reviewed as they come up in the schedule to see how they can better support these questions. Lastly, both the Integration Overview and Spiritual Formation classes were re-vamped to better support these specific, clinical and personal questions as well (**S2 & S3**).
- ***Healing Presence:*** This is also a program strength that did not require any changes, based upon assessment data.
 - However, the program continued to add more modality-based electives in order to support students in developing their clinical skills beyond a Rogerian/Person-Centered foundation (**H2**) as well as identifying their own theories of choice (**P3**). In addition to Motivational Interviewing (fall 2020) and Gottman Couples Therapy (spring 2021), the program added Trauma Interventions (fall 2021) and scheduled Narrative Therapy (summer 2022). It also again offered Dance/Movement Therapy (fall 2021) and scheduled

Cognitive-Behavioral Therapy (spring 2022), Telehealth (spring 2022), and Dialectical-Behavioral Therapy (summer 2022). It is still looking to add EFIT (hopefully in the 2022-23 school year!) and other models, as faculty and resources allow. The program is also looking to add more trauma and addiction related electives to support clinical development and evidence-based practice in the field (**H2, E2, E3**).

- While group counseling scores (**H5**) met or exceeded standards, it was revealed that students may not be getting enough experience in this area. Thus, the Internship Syllabus was updated during 2021 to specify that students are ideally to lead or co-lead a group of at least 10-15 hours.

- **Advocacy & Diversity:**

- In response to the mixed results regarding practicing differential diagnosis related to a diverse clientele (**A2**), the faculty team is in the process of adding more related articles/chapters and/or culturally diverse, diagnostic vignettes to the Diagnosis, Diversity, and possibly Internship courses.
- Although not explicitly required by the program data, professors also continued to work on implementing new and improved ways to model diversity and inclusion (**A1**) in their coursework (e.g., more diverse authors for course readings, varieties of ways to show competency on a single assignment—including papers or alternative methods).

- **Professional Identity:**

- In response to the mixed results for ethical practice (**P1**), the team will add a Practicum assignment where students review an ethical decision-making model and ask students to practice choosing/discuss all relevant codes for a specific client each semester of internship. This should help students bridge the gap from the Ethics course early in the program to their actual time with clients.
- While no other issues were noted in this area by the assessment, the program also took steps to strengthen **P3** as noted under Healing Presence above.

- **Educational Excellence:**

- In response to the mixed results regarding treatment plans (**E2**), the team is working on a specific, treatment planning template that will be introduced by the end of the first year of the program (likely in Advanced Counseling Skills) and utilized in the practicum/internship sequence. Students will still have the option to use different templates while at sites, but this will provide a fall back for any who do not have strong templates/practice at their sites.
- In response to the mixed results related to utilizing research to support evidence-based counseling practices (**E3**), the team is working to require more detail in this area on practicum and internship papers. They are also considering making these graded courses (rather than P/F) so that students have greater accountability to the effort they put into such papers. In addition, the team is considering adding an assignment in the Professional Orientation class that requires students to create an organization system for “signature” assignments (that align to specific parts of internship

papers/orals) and help students identify and collect these throughout the program, so they have a greater reference points when trying to complete their Oral Exam.

- Lastly, in response to the 2020 assessment, the team continued to implement tests and assessments (E4) earlier in the coursework so that students would have a foundation to work from when they entered the Testing course.

Other Program Notes and Changes

During 2021, COVID and the other collective trauma events continued, challenging both students and staff/faculty. This caused pedagogical strategies to be adjusted multiple times over two years—from in-person (through Feb 2020) to virtual (March – Aug 2020) to “adaptive”—i.e., students choose whether to be in-person or online (Sept 2020 – Aug 2021); and, finally, from Aug-Dec 2021, the strategy was tailored to specific cohorts, based upon their unique circumstances and desires. In the midst of all of this, the entire community (and world!) was impacted by the increasing rates of loss, mental illness, and trauma.

These events undoubtedly challenged student engagement and performance, and stretched staff/faculty. It seems appropriate to pause and make space for such struggles, honoring the losses and pain. Among these losses were the departure of a dearly loved faculty member (Professor Tiffany Warner), who was compelled to move out-of-state to be closer to family due to the events of the pandemic. Due to both funding and world events, it was a difficult time to consider a full employee search, so the existing staff and faculty at Multnomah were shifted to cover this gap. More specifically, Professor Jeremiah Peck shifted from part to full-time, taking on the Clinical Training Supervisor role, and Professor Danielle Render Turmaud shifted from half-time in Multnomah online to half-time teaching in MAC.

In addition to acknowledging our challenges and losses, we also honor the incredible perseverance of our community during this time. We specifically commend faculty and staff for the immense care and support they provided to students, as evidenced by the phenomenal retention numbers during such difficult times.

Summary

In conclusion, this program assessment suggests a well-rounded program with numerous strengths. Developing spiritual integration and a Person-Centered, “healing presence” appear to be some of the top program strengths. Across the board, however, students are learning and performing well. The program faculty are particularly encouraged to see the strong results from site supervisors, thereby indicating that students are performing well in comparison to students from other programs. At the same time, results indicate the continued investment of faculty who want to see students excel to their full capacity. Faculty continue to model this standard by continuous improvement within their courses and clinical practice as well (see improvements noted above).