Positive Psychology in Counselor Education: An Exploration of Counselor Educators’ Opinions

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Abstract

The purpose of this study was to complete an initial exploration of counselor educators’ opinions about the burgeoning field of positive psychology. Eighty-eight counselor educators responded to an online survey pertaining to three major aspects of the positive psychology movement. The participants’ responses pointed toward a consistent interest in training counseling students in studies related to positive subjective experiences, positive emotions, and positive communities and groups. Statistical analysis of the data revealed a significant discrepancy between counselor educators’ current and ideal training practices regarding positive psychology, suggesting that theory and research in this field
should be integrated into future counselor education training standards. Implications for the field of counselor education, and Council for Accreditation of Counseling and Related Educational Programs (CACREP) standards in particular are provided.

Central to the American Counseling Association’s (2009) Vision for the Future of Counseling is the tenet that “The counseling profession should promote optimum health and wellness for those served as the ultimate goal for counseling interventions” (Kaplan & Gladding, 2011, p. 371). The research findings from the field of positive psychology may be especially relevant in the pursuit of this goal—especially given that the primary focus of positive psychology is also on optimal functioning (Seligman & Csikszentmihalyi, 2000). As a definition, Gable and Haidt (2005) stated, “Positive psychology is the study of the conditions and processes that contribute to the flourishing or optimal functioning of people, groups, and institutions” (p. 104).

There have been many notable precursors to positive psychology including William James on healthy-mindedness, Alfred Adler on encouragement and social interest, Carl Rogers and Abraham Maslow on growth and self-actualization, Gordon Allport on positive human characteristics, Milton Erikson on utilization, etc., but the emergence of the field as a formal discipline is closely linked to Martin Seligman and colleagues around the end of the last century (see special issue of American Psychologist, Seligman & Csikszentmihalyi, 2000). Seligman introduced the field as a counterbalance to the perceived overwhelming emphasis in psychology, and in psychotherapy in particular, on mental illness, disorder, and damage (Gable & Haidt, 2005; Seligman & Csikszentmihalyi, 2000). Positive psychology implies that without an emphasis on studying what is right with people and what makes life worth living, it is difficult to help people reach their full potential (Seligman & Csikszentmihalyi, 2000). More than just an attitude or clinical mindset, the advent of positive psychology was also unique in its emphasis on building a wide body of scientific evidence on topics that contribute to well-being of both individuals and groups.

Much has been written over the past two decades about positive psychology, with close to 1,000 peer-reviewed articles having been published between 2001 and 2010 (Azar, 2011). Although a formal operational definition of positive psychology as a construct is still evolving within positive psychology (Harris, Thoresen & Lopez, 2007; Mollen, Ethington, & Ridley, 2006), common research areas have included investigation of positive emotions, positive subjective experiences, and positive organizations (Schueller, 2009). Positive emotions (e.g., joy, gratitude, serenity, etc.) are posited to serve as markers of optimal well-being (Fredrickson, 2001), and are seen as evolved adaptations that function to build lasting resources (Fredrickson 1998; Fredrickson & Cohn, 2008), and ultimately increase life satisfaction by building resilience (Cohn, Fredrickson, Brown, Mikels, & Conway, 2009). Common areas of research regarding positive subjective experiences (and related processes) have frequently included studies of well-being, life satisfaction, flow, mindfulness, and happiness (Harris et al., 2007; Seligman & Csikszentmihalyi, 2000). Lastly, civility, community and altruism, and other variables that foster better citizenship for individuals have been studied within the context
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of positive organizations (Seligman & Csikszentmihalyi, 2000). These three areas have served as the core focus for much of the existing scholarly work in positive psychology.

Whereas positive psychology is a field in its infancy, the rapid growth of the discipline and its influence on the helping professions is worth noting. After all, a psychology focused on the conditions and processes that promote optimal functioning in people and institutions (Gable & Haidt, 2005) mirrors the traditional foundation of counseling and counselor education, which has at its heart an emphasis on normal human development, wellness, and prevention rather than amelioration of psychopathology (Juntunen & Atkinson, 2002). Both positive psychology and counselor education share the basic assumptions that human goodness, growth, development, and excellence are as authentic and deserving of attention as disease, disorder, and distress. Further, counseling is a learning activity in which the client is educated about oneself, with an emphasis on personal growth, wellness, prevention, and the enhancement of optimal health (Sweeney, 2001). To that point, literature has begun to examine the intersection of positive psychology and strengths-based counseling (Harris et al., 2007), school counseling (Park & Peterson, 2008), career counseling (Zikic & Franklin, 2010), and rehabilitation counseling (Chapin & Boykin, 2010).

Currently, there appears to be a great deal of evidence for the clinical utility of positive psychology interventions (Joseph & Linley, 2004; Seligman, Rashid, & Parks, 2006; Seligman, Steen, Park, & Peterson, 2005; Sin & Lyubomirsky, 2009), although a full review of these studies is beyond the scope of this article. Despite this proliferation of literature, only four articles with “positive psychology” in the title have been published in the 19 journals representing all divisions of the American Counseling Association as of 2013. In other words, it does not appear that this voluminous positive psychology literature—along with its related clinical utility—is formally making its way into the discipline of counselor education.

Although terminology from positive psychology is seldom referenced in the counseling education literature per se, this may at least partially be due to semantics, since it appears that there are natural overlaps and interest areas between positive psychology, counseling, and counselor education. Themes often identified in the psychology literature as “positive psychology” may be framed in counselor education in terms of wellness and strengths-based counseling. For instance, specific processes often identified in the vernacular of positive psychology are being topically explored to a small extent in ACA journals. Examples include strengths-based advocacy in school counseling (Geltner & Liebforth, 2008), strength-based school counseling (Park & Peterson, 2008), spirituality in counselor preparation (Galassi, Griffin & Akos, 2008; Myers & Willard, 2003), strength-based approaches to working with male clients (Englar-Carlson & Kiselica, 2013), and teaching of mindfulness (Schure, Christopher, & Christopher, 2008), counselor wellness (Lawson, Venart, Hazler, & Kottler, 2007; Yager & Tovar-Blank, 2007) and wellness in supervision (Lenz, Sangganjanavanich, Balkin, Oliver, & Smith, 2012; Lenz & Smith, 2010).

Again, although there are a few studies related to positive psychology that have found their way into counselor education literature, it appears that the vast majority of this important research is not likely being consumed by counselor educators. With the spectacular growth of the field of positive psychology and the shared philosophical interests between positive psychology and counselor education, it behooves counselor
educators to consider infusing positive psychology research into their programs, especially since the current (2009) CACREP standards require counselor education programs to integrate theoretical and practical concepts related to optimal well-being, optimal development, and wellness across the lifespan.

The purpose of the present study was thus to investigate attitudes about positive psychology research among counselor educators across the United States. Of particular interest was an exploration regarding the extent to which concepts and practices of positive psychology are 1) valued, and 2) currently being utilized in training. For instance, if many counselor educators value research about mindfulness or positive emotions, how has it been formally integrated into training, if at all? It’s conceivable, for example, that despite placing a high value on the usefulness of this line of research, in actuality, educators may not be specifically building these important, often evidence-based findings into their training programs.

Method

Participants

The sample for the online survey included counselor educators from both CACREP-accredited programs and non-CACREP programs. There were several methods used to contact as many counselor educators as possible. Using the CACREP directory, a graduate assistant generated a list of all counselor educators located within each of the 221 CACREP programs’ Web sites. A link to the survey was e-mailed to all of these professors’ e-mail addresses. Links were also sent to three of the five regional ACES listservs (listservs for the other two ACES regions were non-existent at that time, according to their respective presidents). An invitation to participate and links to the survey were also posted on the general counselor education listserv CESNET in 2011.

Eighty-eight counselor educators completed the entire survey. Just over 70% (70.5%) of the respondents were teaching within CACREP programs. Basic demographic data were collected and appears in Table 1.

Table 1

Respondent Characteristics

<table>
<thead>
<tr>
<th>Demographic</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>CACREP</td>
<td>70.5%</td>
</tr>
<tr>
<td>Non-CACREP</td>
<td>29.5%</td>
</tr>
<tr>
<td>Mean Age</td>
<td>50.3</td>
</tr>
<tr>
<td>Mean Years as full-time CE</td>
<td>9.6</td>
</tr>
<tr>
<td>Mean Years as Clinician</td>
<td>15.6</td>
</tr>
<tr>
<td>Status</td>
<td></td>
</tr>
<tr>
<td>Tenured</td>
<td>41.4%</td>
</tr>
<tr>
<td>Tenure-track</td>
<td>33.3%</td>
</tr>
<tr>
<td>Other</td>
<td>25.3%</td>
</tr>
<tr>
<td>Primary Orientation</td>
<td></td>
</tr>
<tr>
<td>Community/Clinical</td>
<td>50.0%</td>
</tr>
<tr>
<td>School Counseling</td>
<td>23.9%</td>
</tr>
<tr>
<td>Other</td>
<td>26.1%</td>
</tr>
</tbody>
</table>
Instrumentation

Following an extensive literature search on positive psychology, an Internet-based survey was developed. Initial drafts of the survey were forwarded to several counselor educators who had been actively involved in scholarly activities related to positive psychology and/or wellness and well-being studies. Based on their review of the items and overall structure of the survey, a final version of the survey was developed which incorporated their minor suggestions. The complete survey is available upon request from the first author.

After the introductory and informed consent pages, a definition of positive psychology was provided in order to approximate an operational definition for positive psychology. This definition emerged from a variety of seminal sources (Cameron, Dutton, & Quinn, 2003; Frederickson & Losada, 2005; Gable & Haidt, 2005; Gardner, Csikszentmihalyi, & Damon, 2001; Harris et al., 2007; Seligman et al., 2005), and referenced three major domains of research in positive psychology: positive emotions, positive subjective experiences, and positive organizations. The definition page included a statement about positive psychology’s recent history, noting that positive psychology applied to counseling is “typically not framed by most researchers and psychotherapists as a replacement to traditional psychotherapy. Rather, it is more commonly envisioned as a means for augmenting traditional evidence-based psychotherapy treatment which addresses approaches to symptom reduction for clients struggling with the full-range of DSM diagnoses.”

Following the definition page, the 20-item survey was presented. There were five demographic items, 13 Likert-type scale items, and two open-ended questions. Comment boxes were also available where appropriate. The survey items are summarized below.

**Current training versus ideal training.** After a four-point Likert scale initial item assessed participants’ “familiarity with the positive psychology movement,” the next section of the survey contained questions pertaining to current and ideal teaching practices with regard to training master’s level counseling students in 18 constructs related to positive psychology. These items all utilized a four-point Likert-type scale ranging from “strongly agree” to “strongly disagree.” These 18 items reflected the aforementioned three major domains of positive psychology research:

- Positive subjective experiences; studies pertaining to well-being, “flow,” satisfaction, happiness and mindfulness;
- Positive emotions; for which Fredrickson’s (2001) 10 prominent positive emotions were utilized: joy, gratitude, serenity, interest, hope, pride, amusement, inspiration, awe, and love;
- Interpersonal and/or Group-level virtues, such as studies of civility, sense of community, and altruism.

For instance, item 7 pertained to the level of agreement with the notion that graduate level counseling students “should be knowledgeable about research” related to each of the following: well-being, satisfaction, flow, happiness, and mindfulness; item 8 pertained to the degree to which each counselor educator’s program “currently trains students” in each of those 5 domains, and so on. Using this method, we were aiming to evaluate any potential discrepancy between ideal training ratings related to positive psychology concepts versus current training related to these concepts.
Optimally-functioning work settings. There were two items designed to assess level of agreement with the notion that counselors-in-training should be knowledgeable about research related to optimally-functioning agencies/clinics, and with the notion that school counselors-in-training should be knowledgeable about research related to optimally-functioning school counseling programs. These two items were developed in accordance with the “positive interpersonal and/or group-level” line of research. The intent behind these two items was simply to gauge, for instance, the degree to which counselor educators should be exposing students to research related to high-functioning behavioral health agencies at which interns, post-graduate counselors, and licensed psychotherapists work.

Relevance to counselor training. Participants were also surveyed about their level of agreement with the idea that positive psychology, in “the context of training counselors,” is: interesting, useful, relevant for our work, worthy of being familiar with, information that counselor educators should increase their focus on, and worthy of increasing integration into counselor education curricula.

Medical model and/or positive psychology. One final item was designed to reflect counselor educators’ opinions about the “best blend” between the medical model and the positive psychology model as it pertains to training counselors and also used a Likert-scale. The options ranged from 100% medical model and 0% positive psychology, to 90% medical and 10% positive psychology, down to the other extreme, 0% medical model with 100% positive psychology. With this question, the researchers hoped to capture a sense of the ratio of importance that counselor educators place on the medical model as compared to the positive psychology paradigm in the context of training counselors.

Open-ended questions. One open-ended question asked respondents to state in which counseling courses, if any, would positive psychology content “best fit.” The final open-ended item pertained to the future of positive psychology in counselor education. Comment boxes were also available for every demographic and every Likert-scale item in the survey.

Data Analysis

All statistical analyses for the quantitative aspects of the online survey were computed using SPSS 11.0 for Windows. Dependent sample t-tests were completed for the current training versus ideal training data. Regression analyses were also completed in order to analyze potential differences in the current versus ideal training data by age, years as counselor educator, years as clinician, and CACREP status. A chi square goodness of fit test was used to analyze the “best blend” data. The remaining quantitative data was analyzed via descriptive statistics. For the open-ended data, basic content analyses were performed by three of the researchers who aggregated all individual responses into logical themes.

Results

One survey item requested that respondents rate their familiarity with the positive psychology movement on a four-point Likert-type scale. Again, a lengthy operational definition of positive psychology had been provided following the informed consent
statement so that all participants would be operating from the same definition. Almost two-thirds (65.9%) considered themselves “very familiar” or “familiar” with the positive psychology movement, and another 26.1% rated themselves as somewhat familiar, with only 8% rating themselves as not very familiar with positive psychology.

Table 2

Paired Sample t-tests of the Current vs. Ideal training opinions

<table>
<thead>
<tr>
<th>Positive Subjective Experiences</th>
<th>Ideal Training Means</th>
<th>Current Training Means</th>
<th>Mean Difference</th>
<th>t-test value</th>
<th>Sig 2-tailed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Well-Being</td>
<td>3.74</td>
<td>2.92</td>
<td>.821</td>
<td>9.70</td>
<td>.000***</td>
</tr>
<tr>
<td>Satisfaction</td>
<td>3.56</td>
<td>2.65</td>
<td>.915</td>
<td>10.58</td>
<td>.000***</td>
</tr>
<tr>
<td>Flow</td>
<td>3.35</td>
<td>2.40</td>
<td>.955</td>
<td>9.99</td>
<td>.000***</td>
</tr>
<tr>
<td>Happiness</td>
<td>3.60</td>
<td>2.60</td>
<td>1.00</td>
<td>11.81</td>
<td>.000***</td>
</tr>
<tr>
<td>Mindfulness</td>
<td>3.74</td>
<td>2.80</td>
<td>.941</td>
<td>10.04</td>
<td>.000***</td>
</tr>
<tr>
<td>Positive Emotions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Joy</td>
<td>3.38</td>
<td>2.29</td>
<td>1.09</td>
<td>12.06</td>
<td>.000***</td>
</tr>
<tr>
<td>Gratitude</td>
<td>3.48</td>
<td>2.42</td>
<td>1.05</td>
<td>11.81</td>
<td>.000***</td>
</tr>
<tr>
<td>Serenity</td>
<td>3.43</td>
<td>2.38</td>
<td>1.05</td>
<td>11.16</td>
<td>.000***</td>
</tr>
<tr>
<td>Interest</td>
<td>3.42</td>
<td>2.54</td>
<td>.879</td>
<td>9.02</td>
<td>.000***</td>
</tr>
<tr>
<td>Hope</td>
<td>3.69</td>
<td>2.82</td>
<td>.872</td>
<td>9.45</td>
<td>.000***</td>
</tr>
<tr>
<td>Pride</td>
<td>3.29</td>
<td>2.47</td>
<td>.826</td>
<td>8.83</td>
<td>.000***</td>
</tr>
<tr>
<td>Amusement</td>
<td>3.23</td>
<td>2.25</td>
<td>.977</td>
<td>12.09</td>
<td>.000***</td>
</tr>
<tr>
<td>Inspiration</td>
<td>3.46</td>
<td>2.5</td>
<td>.956</td>
<td>10.09</td>
<td>.000***</td>
</tr>
<tr>
<td>Awe</td>
<td>3.39</td>
<td>2.36</td>
<td>1.03</td>
<td>11.48</td>
<td>.000***</td>
</tr>
<tr>
<td>Love</td>
<td>3.57</td>
<td>2.62</td>
<td>.954</td>
<td>9.60</td>
<td>.000***</td>
</tr>
<tr>
<td>Positive Group-virtues</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Civility</td>
<td>3.62</td>
<td>2.76</td>
<td>.857</td>
<td>9.46</td>
<td>.000***</td>
</tr>
<tr>
<td>Community</td>
<td>3.63</td>
<td>2.93</td>
<td>.696</td>
<td>7.86</td>
<td>.000***</td>
</tr>
<tr>
<td>Altruism</td>
<td>3.60</td>
<td>2.81</td>
<td>.789</td>
<td>8.62</td>
<td>.000***</td>
</tr>
</tbody>
</table>

Note. *** a priori statistical significance level set at .0028 (.05/18 variables)

Current Versus Ideal Training Analyses

One of the primary goals of this project was to evaluate current versus ideal counselor education curriculum regarding positive psychology. In other words, we were interested in analyzing potential differences between what counselor educators are currently teaching with regard to positive psychology concepts and what they believe their students should ideally be knowledgeable about with regard to the three major domains identified consistently within positive psychology literature: positive subjective experiences, positive emotions, and interpersonal and/or group-level positive psychology research. Dependent sample t-test analyses were conducted in order to assess any potential differences. To avoid potential Type 1 error complications, we performed a
Bonferroni adjustment to the per experiment-wise plan, which yielded a .0028 (.05/18) significance threshold. As shown in Table 2, there were significant differences between the current versus ideal training results across all 18 variables. Thus, counselor educators consistently rated that their students ideally “should be knowledgeable about” each of these 18 positive psychology constructs to a much higher degree than these constructs are currently being taught. For example, participants indicated that students should be well-versed in studies related to mindfulness, love, joy, gratitude, serenity, altruism, etc., at statistically significantly higher rates than they are currently receiving training in those constructs (see Figure 1).

Figure 1. *Graphic representation of current versus ideal training opinions.*

We also investigated the effects that each of the four primary independent variables of interest—age, years as counselor educator, years as clinician, and CACREP status—might have on current versus ideal training scores. Rather than evaluating all 18 variables independently, we aggregated the means of each of the 18 variables within their respective three domains. A best-subsets linear regression analysis was performed. There were no statistically significant differences in any of the three current versus ideal training domains relative to participant age, CACREP status, years as counselor educator or years as clinician.

**Optimally-Functioning Work Settings**

Almost all (98%) of the respondents agreed (or strongly agreed) with the statement: “Clinical Mental Health Counselors-in-training should be knowledgeable about research related to optimally functioning agencies/clinics.” Similarly, almost all (99%) agreed or strongly agreed that research related to optimally-functioning school counseling/guidance departments should be studied by counselors-in-training. A regression analysis revealed that, once again, age, years as counselor educator, years as clinician and CACREP status played no role in these outcomes ($p > .05$).
Relevance to Counselor Training

Over 90% of the participants agreed (or strongly agreed) with the notion that positive psychology, “in the context of training counselors,” is “interesting” (96%), “useful” (97%), “relevant for our work” (96%), “information counselor educators should be very familiar with” (92%), “information that counselor education should increase its focus on” (91%), and worthy of being “increasingly integrated into counselor education curricula” (92%). There were no significant differences between the respondents from CACREP programs versus those from non-CACREP programs.

Medical Model, Positive Psychology, or Both

Participants were given the chance to endorse their opinions about the relative value of training counseling students in either the medical model or positive psychology concepts, or, in some degree of both. A small handful (less than 3%) commented that they disagreed with the premise of the question. One commented that the question itself represented a “false dichotomy.” However the overwhelming majority chose to respond to this item as it was presented. As depicted in Table 3, the modal response was “50-50”: many (34%) valued a 50% medical model along with 50% positive psychology model as the optimal “training blend,” skewed negatively in the direction of positive psychology. A chi square goodness of fit analysis revealed this trend to be statistically significant $\chi^2(7, N=78) = 34.82, p = .000)$. A linear regression revealed that none of the independent variables had any effects on this outcome ($p > .05$). Presence (or absence) in a CACREP program played no role in this outcome (Levene’s, $F .729, p = .395)$. In addition, almost half (47.1%) of the participants endorsed a blend skewed toward positive psychology versus those that favored a medical model skew (18.3%). Additionally, a much higher percentage of participants (47.1%) leaned more heavily toward a skew in the direction of positive psychology.

Open-Ended Curricular Items

Over 77% of the participants responded to the question pertaining to which courses positive psychology content would “best fit into,” with the counseling theories course receiving 29% of those endorsements, “all courses” receiving support from 19% of the participants, and the remaining percentages dispersed among multiple other courses. Another survey item pertained to the 2009 CACREP standards and whether those standards “satisfactorily address positive psychology research.” Almost half (48.1%) of the respondents endorsed the “unaware” option (if positive psychology research was already embedded within those standards), while 19.8% agreed or strongly agreed, and almost a third (32.1%) claimed to disagree or strongly disagree with the notion of positive psychology research already being infused into the 2009 CACREP standards. On the other hand, almost 80% (79.5%) strongly agreed or agreed with the statement that “future CACREP standards should integrate positive psychology research.”

Roughly three-quarters (76%) of the participants responded to the open-ended question: “How do you envision the future of positive psychology?” Thirty-six percent of the responders indicated they thought positive psychology has a favorable future in the field of counseling, compared to 28% who provided unfavorable comments, while 12% of comments were either neutral or simply ambiguous.
Discussion

In this study, we have attempted to explore counselor educators’ opinions about the exponentially growing body of research in positive psychology and its potential utility in the training of counselors. Counselor educators responded to a survey about their beliefs related to research in three major domains of positive psychology: positive subjective experiences, positive emotions, and positive communities or groups.

It is certainly vital for counselor educators to continually self-reflect in order to optimize training philosophies, pedagogical and supervision methods, and in particular, curricula. Conceivably, clients receiving services from counselors trained within counselor education programs may derive significant benefits from the more robust discoveries within positive psychology. Thus, it may be incumbent upon counselor educators to more closely examine this line of research in order to continue to evolve the discipline.

It appears that the respondents in this study’s sample were reasonably familiar with positive psychology and highly valued several facets of positive psychology. Perhaps the most striking finding in this study was the relatively deep chasm between what is currently being taught in counselor education and what ideally should be taught vis-a-vis positive psychology. As seen in Table 2, the mean difference between the ideal and actual training in all 18 positive psychology constructs (from each of the three domains) was statistically significant. This finding implies that although counselor education professors recognize the value of positive psychology, they also endorse the fact that their training programs fall short of delivery. For instance, respondents indicated a strong desire to train counseling students in themes such as mindfulness, well-being...
research, gratitude, hope, and altruism; and yet are not doing so at a rate approximating these intentions – if at all. In addition, an analysis of the data also suggests that counselor educators believe that positive psychology, in the context of training counselors, is highly relevant, interesting, useful, and worthy of increased focus. Further, key concepts from positive psychology should ideally co-exist in a relatively balanced fashion within the assessment-diagnosis-treatment paradigm from the medical model. Many counselor educators thought that future CACREP standards “should integrate positive psychology research.” Finally, additional research and training is necessary to enhance models of optimally-functioning school guidance departments and behavioral health agencies.

Limitations
The limitations of the current study may inform additional research. Although many attempts were made to contact as many participants as possible, given that the final sample included just 88 counselor educators, it is possible that these results cannot be adequately generalized to the overall population of counselor educators representing well over 200 CACREP programs, and many other non-CACREP programs as well. Future research might aim for additional methods to contact as many professors as possible, or to limit the research to CACREP program faculty only, since CACREP is certainly the dominant accreditation body in the discipline. Additionally, the constructs studied herein, although representative of many aspects of the more predominant themes within current positive psychology research, may not represent all of the most salient positive psychology constructs that are worthy of inquiry. Finally, operational definitions for each of the 18 primary variables assessed in this study were not provided within the survey. As such, professors may have responded to these items with a varied and even idiosyncratic understanding of each of these variables rather than a more precise and formal definition.

Implications and Recommendations
Results of this study might be used in several ways. Ideally, these findings might lead counselor educators to take a much closer look at the ways that the most significant findings in positive psychology research might be worthy of curricular and training consideration. If, for instance, evidence were to continue to mount that gratitude practices were strongly predictive of enhanced well-being (as described in Young & Hutchinson, 2012), then evaluating ways in which the teaching of these practices might be infused into counselor education coursework would seem warranted. The same might be said for mindfulness, forgiveness, altruistic practices, and positive emotion research. Perhaps the most salient and impactful research from both positive psychology and wellness literature could be combined into one required course, or interwoven throughout the curriculum (Magyar-Moe, 2011). For instance, an experientially-delivered survey course that samples core constructs of positive psychology would allow counselors-in-training to experience interventions firsthand that promote the kind of optimal health and wellness that ACA mandates (Kaplan & Gladding, 2011).

Another recommendation refers to the ways in which constructs from positive psychology (e.g., flourishing, subjective well-being, etc.) and wellness might overlap. Although an exhaustive literature review of the conceptual convergence of positive psychology with wellness is beyond the scope of this paper, it is certainly conceivable that the differences between these two constructs may be at least somewhat semantic, and
thus, one future research recommendation might be to compare and contrast wellness research—largely found in ACA literature—with the positive psychology research that is typically housed within American Psychological Association journals. In the 2009 CACREP standards there are no references to positive psychology per se, whereas there are 12 separate references to wellness, as well as a definition of wellness in the glossary: “a culturally defined state of being in which mind, body, and spirit are integrated in a way that enables a person to live a fulfilled life” (p. 62). Wellness is also mentioned three times in the “common core curricular experiences” (CACREP 2009, p. 89) section embedded with the Professional Identity section alone. By comparison, wellness is referenced just twice within the 2001 CACREP standards, and only within the Gerontological Counseling specialty. Wellness appears to be a construct in ascendancy in the eyes of counselor educators. In addition to its apparent increased focus, CACREP’s standards (2009) reference “optimal wellness and growth of the human spirit, mind, or body” (p. 91), “optimal development and wellness over the life span” (p. 91), “optimal human development” (p. 111), ”family wellness” (p. 115) and “factors of resiliency” (p. 120), all of which sound quite familiar in conjunction with Gable and Haidt’s (2005) definition of positive psychology, “…processes that contribute to the flourishing or optimal functioning of people, groups and institutions” (p. 104), as well as the definition offered by the International Positive Psychology Association: “Positive psychology is founded on the belief that people want to lead meaningful and fulfilling lives, to cultivate what is best within themselves, and to enhance their experiences of love, work, and play” (IPPA, 2012). Perhaps factor analytic studies might help elucidate the commonalities and differences between the core constructs of wellness versus those of positive psychology.

Another recommendation stems from the finding related to the survey question pertaining to a potential “optimal blend” between training counseling students in the medical model and in positive psychology. As noted above, all counselor educators envision both concepts as important conceptual partners (see Table 3), though many indicated that they believe positive psychology should be given even more value than the medical model. Research of a more qualitative nature might draw out a clearer distinction between positive psychology and the medical model, as well as how these two paradigms might optimally coexist within the behavioral health systems in which counseling students ultimately operate.

The field of counselor education has struggled for years to form a unified identity for the profession (Watts, 2004), though some authors (Gale & Austin, 2003; Myers, Sweeney, & White, 2002) have suggested its focus should be on, among other ideas, mental health, strengths and abilities (as opposed to psychopathology) and on holism and wellness. One possible implication of this study might be to expand the ways in which counselor educators train students to assess and conceptualize clients. For example, incorporating psychometric measures and interventions that are strengths-based and that make room for classifying levels of well-being in addition to psychopathological perspectives has been suggested by Lopez et al. (2006). The Depression-Happiness Scale (McGreal & Joseph, 1993) is an example of a reliable measure that counselor educators might consider employing given that it conceptualizes depression and happiness as “opposite ends of a single continuum” (p. 1282), in contrast with an instrument like the Beck Depression Inventory-II (Beck, Steer & Brown, 1996), which merely assesses presence or absence of depression, but fails to capture high levels of well-being. In
summary, as counselor educators continue to reaffirm and strengthen their identity, which focuses on normal growth and development, clients’ strengths and assets, wellness, and a holistic perspective (Watts, 2004), they might find positive psychology research to be fertile ground for inspiring curricular development.

References


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