Theoretical Conceptualization for a New Generation of Trainees: The Theoretical Conceptualization, Assessment, and Documentation Course Model (TCAD-CM)

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Abstract

This article presents the Theoretical Conceptualization, Assessment, and Documentation Course Model (TCAD-CM). This pedagogical method helps trainees translate theory into practice by actively engaging in the process of assessment, case conceptualization, and documentation in a context-driven constructivist learning environment. Exploration of potential benefits and implications of implementation in graduate-level counseling coursework are presented.

Keywords: pedagogy, counselor education, conceptualization

Pedagogy has become increasingly important in counselor education (Council for Accreditation of Counseling and Related Educational Programs, 2016). This trend is illustrated by increased publication of manuscripts highlighting pedagogical underpinnings of teaching methods. A review of literature conducted in 1998 by Nelson and Neufeldt found no scholarly publications that focused on pedagogy in counselor education. Subsequently, over the past two decades, there has been keen exploration of teaching methods in counselor education (Akos & Scarborough, 2004; Barrio Minton & Pease-Carter, 2010; Brubaker, Puig, Reese, & Young, 2010; Cummings, 2000; Dollarhide, Smith, & Lemberger, 2007; Granello, 2000; Granello & Granello, 1998; Grant, 2006; Griggs & Collisson, 2013; Minton, Morris, & Yaites, 2014; Moate, & Cox, 2015; Odegard & Vereeri, 2010; Smith-Adcock, Ropers-Huilman, & Choate, 2004). Themes of the pedagogy literature seem to reflect a moving away from didactic techniques that rely primarily on knowledge of the instructor and create a hierarchical environment in favor of constructivist pedagogy, contextual teaching and learning, and technology-enabled instructional methods (Granello, 2000; McCaughan, Binkley, Wilde,
Parmanand, & Allen, 2013; O’Flaherty & Phillips, 2015). These themes are briefly explored below.

Themes of Pedagogy Literature

Constructivist Pedagogy

Constructivism is based on the theory that people learn by building on previous experiences interpreted through their social context and reflecting on these experiences to create new knowledge or awareness (McCaughan et al., 2013). Students do not rely on the instructor to feed them information; instead, they are active participants in the learning process. Constructivist pedagogy facilitates the creation of a learner-centered environment that focuses on creating shared meaning of experiences, real-world learning tasks, self-monitoring through reflection, transparency in instruction, and problem-solving skills (Dollarhide et al., 2007; Nelson & Neufeldt, 1998).

Contextual Teaching and Learning Strategies

Contextual teaching and learning is a collection of pedagogical tools that emphasize student engagement in real-world experiences outside of the classroom. This model combines constructivist and social learning elements and, according to Granello (2000), it had not yet been applied to counselor education. The five components of contextual teaching and learning include situated learning, social construction, the distributed nature of cognition, problem-based learning, and authentic assessment.

Situated learning, similar to contextual teaching and learning, occurs when the learner actively engages in a new experience. In counselor education practicum, internship or any classroom-based situation that involves active participation in the experience being studied could meet this criteria (Granello, 2000). The social nature of cognition is based on the belief that students interpret new knowledge through the lens of their social context and previous experiences. Therefore knowledge is not accessed; it is created through social experiences. This is easily demonstrated in counselor education through peer interaction, group discussion, or assignments that engage multiple learners (Granello, 2000).

The distributed nature of cognition references the belief that an individual cannot mentally hold all knowledge; instead, knowledge is distributed among the individual, group, and environment. Common instructional strategies, such as group projects or group lectures in which students divide the material and present it to their peers, meet this criteria (Granello, 2000). Problem-based learning is the theory that students retain information and increase their problem-solving skills by addressing a contextual problem to solve as part of their learning (Granello, 2000). If learners must work as a group, problem-based learning can encompass the social nature of cognition, distributed nature of cognition, and situated learning, potentially leading to a more enriching experience. Examples of problem-based learning in counselor education include role-play or diagnosis and treatment planning as part of a treatment team. Authentic assessment reflects a pedagogical shift from traditional methods such as multiple-choice exams used within didactic courses to more contextual methods for example verbal assessments, application, analysis, and synthesis (Granello, 2000). In counselor education, authentic
assessment may be tape evaluations, live supervision, live demonstration of the process being learned, or synthesis of material such as treatment plans.

**Technology-Enhanced Teaching and Learning Methods**

Technology-enhanced teaching and learning methods, in addition to the Internet, allow instructors to present a greater breadth of information to students (Trepule, Tereseviciene, & Rutkiene, 2015). Incorporating technology-enhanced learning strategies may facilitate the use of simulations and support the use of pedagogies that encourage skill development through participation in real-world learning tasks and focus on performance such as contextual teaching and learning (Merrill, 2002). One instructional strategy that has been used in secondary and postsecondary education across disciplines is the flipped classroom (Bergmann & Sams, 2012; Betihavas, Bridgman, Kornhaber, & Cross, 2016; Chen, Chen, & Chen, 2015; Engin, 2014; O’Flaherty & Phillips, 2015). The flipped classroom combines self-paced review of course material via technological means prior to class and active group-based in-class activities (Bergmann & Sams, 2012). Prerecorded lectures and reading materials are assigned so that students can engage with the information at their own pace, much like what is typically assigned for homework. In class, the time is used for application and active learning (Stone, 2012). Research shows that the use of the flipped classroom technique across various disciplines has garnered positive results such as higher performance on exams, increased student satisfaction, and other positive student learning outcomes (O’Flaherty & Phillips, 2015). To date, there have been limited scholarly publications focusing on this technique in counselor education (Fulton & Gonzalez, 2015; Moran & Milsom, 2015; Young & Hundley, 2013).

**A New Generation of Learners**

Constructivist pedagogies, contextual models, and technology-enabled teaching methods are integral to meeting the needs of learners in an increasingly multicultural, technology-enabled, and active society. Ferreri and O’Connor (2013) suggested that the most effective way to engage students in the learning process is with instruction that encourages action, beyond that seen in typical didactic courses. It is also suggested that millennials, students born after 1980, prefer learning that is “reactionary and immediate” (O’Flaherty & Phillips, 2015 p. 86). Beyond students’ changing learning styles, the demographics of graduate students have also changed. According to the U.S. Department of Education (2014), there has been a steady increase in the enrollment of Black, Asian, Hispanic, and Native-American graduate student populations since the late 1970s. Constructivist and contextual pedagogies offer a framework for exploring and creating shared meaning from the diverse experiences of an increasingly diverse student population.

**Translating Theory Into Practice**

While constructivist pedagogy, contextual strategies, and technology-enabled learning guide the pedagogical underpinning of the model presented within this article, it should also be noted that case conceptualization skills, the model’s overarching developmental aim, are foundational clinical skills, as they provide a framework for
understanding client concerns (Ivey, 2006). Case conceptualization has been defined as “a working hypothesis about what causes, precipitates, and maintains a person’s psychological, interpersonal, and behavioral difficulties” (Betan & Binder, 2010, p. 143). This process can seem complicated and ambiguous to students due to its indeterminate nature and not having clear-cut right or wrong answers. Yet, case conceptualization skills are central in translating theory into practice. In counselor education, this skill links the theoretical content taught in major areas such as counseling theory, diagnosis and treatment planning, career development, or multicultural counseling to the intentional actions of counselor trainees with their clients.

It is clear that there is continued need to expand the pedagogical literature in counselor education by developing methods that meet the needs of today’s learners while honoring what is central to the tradition of counselor education, guiding students’ ability to translate theory into practice. The Transparent Counseling Pedagogy (TCP), contributed by Dollarhide et al. (2007), is an active teaching method that guides the development of these complicated skills. In TCP, two facilitators engage in a role-play counseling session, stopping periodically to ask the class how would they respond next if they were acting as the counselor. In small groups, the class then discusses several options for proceeding and presents these options to the facilitators. The facilitators then select how to move forward from the options presented. In this model, the facilitators make their thought process transparent when selecting their next counseling response.

While TCP represents one classroom pedagogy aimed at translating theory into practice in counselor education, the Theoretical Conceptualization, Assessment, and Documentation Course Model (TCAD-CM) is offered as an alternative method in order to continue to broaden the literature base. The TCAD-CM was developed with the goal of highlighting effective pedagogical elements of constructivist and contextual learning, actively engaging students in the learning process, and shaping learning, while instructors are engrossed in the experience alongside students. This pedagogical strategy could help students learn to translate theory into practice by actively engaging in the process of assessment, case conceptualization, and documentation in a context-driven constructivist learning environment. The course model described herein provides a structured method for guiding counseling students in the acquisition of theoretical content, conceptualization of the meaning of the theoretical content in context, application of theory-guided counseling interventions, receipt of consistent instructor and peer feedback, and oral and written assessment of student learning.

In this article, a new pedagogical method is first presented, the Theoretical Conceptualization, Assessment, and Documentation Course Model (TCAD-CM), which encompasses the Group-Guided Case Conceptualization Role-Play (GGCCRP) model. Second, implementation of both models, developed by the author for use within an entry-level Theories of Counseling course, is explored. Next, a discussion of potential benefits of implementation is presented. Finally, implications for implementation and research are also explored.

The Theoretical Conceptualization, Application, and Documentation Course Model

The TCAD-CM is a creative and engaging method of modeling the application and synthesis of theoretical content-based material developed for use within graduate-
level counseling coursework. The TCAD-CM combines the use of flipped classroom pedagogy (Bergmann & Sams, 2012) and active instructional techniques, such as simulated clients, actors, and a process model, the GGCCRP. The course model is applied using flipped classroom pedagogy and relies on a structured presentation of the theoretical material outside of class time.

The instructor organized multiple methods of presenting the course material. These elements included predetermined reading assignments from a theories of counseling textbook, mini-lecture videos, audiotaped podcasts of theory interviews conducted by the instructor with local researchers and practitioners highlighting use of theory in the real world, and videotaped technique demonstrations of the instructor highlighting theory-specific counseling tools and techniques. Students were required to prepare for class by reviewing all of the material, including the text, audiotaped, and videotaped elements. The instructor proceeded with the assumption that students had a basic level of understanding of the theory prior to attending class and could begin the process of application. The instructor briefly reviewed highlights of the material and clarified questions for about 30 minutes each class period, using the remainder of the time allotted to facilitate two rounds of the GGCCRP, and closed with guided documentation.

Although last, the instructor-guided documentation process is equally as important as the presentation of the self-paced material and the facilitation of the GGCCRP. An integral component of the TCAD course model is the instructor-guided process of reflecting on the experience of the GGCCRP and written demonstration of student understanding of the material and its application in a theory-specific and real-world manner. In the case of the TCAD-CM used in a counseling theories and techniques course, documentation could represent an activity that requires students to create a brief case conceptualization and treatment plan each week using the theory discussed in class. The instructor required that students submit a portfolio that consisted of a short biopsychosocial assessment, conceptualization and treatment plan for each client discussed in class. Students received feedback at multiple points during the semester. Immediate guidance was given while students worked individually or in small groups on their documentation at the end of each class. The instructor provided feedback at midterm and final submissions of the portfolio assignment. This assignment required students to demonstrate their understanding of the material in a manner that is immediately applicable to how theory is used in a clinical setting. As such, students were not learning skills separated from their real-world use, they were practicing the use of a set of skills while supported by a skilled facilitator before reaching supervised practice with real clients in practicum or internship.

Participants of the initial application of the TCAD-CM were enrolled in a master’s-level Counseling Theory and Techniques course. The group was comprised of 12 students in the first year of their counseling program. Out of the 13 categories of theories of psychotherapy covered in the course, 11 were included in the active portion of the TCAD-CM, and GGCCRP were conducted with the following material: Adlerian therapy, existential therapy, person-centered therapy, gestalt therapy, behavior therapy, cognitive-behavioral therapy, reality therapy, feminist therapy, solution-focused brief therapy, narrative therapy, and family systems theory. These theories were chosen due to demonstrable concepts and techniques and ease of application with the model. Each day
that a GGCCRP was conducted, the students spent 30 minutes reviewing and clarifying material from the pre-assigned self-paced reading and video content, about 90 minutes engaging in two GGCCRPs with different clients, and the remainder of allotted class time was split between student breaks and instructor-guided documentation of the assessment and conceptualization process. Over the course of the semester, students worked with 19 student actors and engaged in 19 GGCCRPs.

There were 10 days over the course of the semester in which two student participants of an Oral Interpretation course from the university’s Theater and Dance Department came having prepared a detailed character sketch representing a client with a mental health concern. Near the beginning of the semester, student actors were given a case description developed by the instructor of the master’s-level Counseling Theories and Techniques course and approved by the instructor of the undergraduate-level acting course. Each case was different and represented a client with in-depth background, identity, experiences, and presenting concerns. Student-actors were challenged to study and embellish the character in order to present a realistic representation of the client, their mannerisms, and emotions.

Counseling students were not given the case or description of the client ahead of each class period, and, instead, their task was to conduct a brief assessment of the client’s presenting concerns and begin to develop a preliminary conceptualization of the client through the lens of the counseling theory being discussed each week. Students worked together as a group to assess and conceptualize the client, guided by the instructor using the GGCCRP model. This process was dynamic and would grow and change depending on what was presented by the student-actor and questions posed by student-counselors, which is very similar to the process of counseling with real-world clients. As such, counseling students must have a sound understanding of the basic concepts of each theory in order to assess and conceptualize each client with intent.

**The Group-Guided Case Conceptualization Role-Play Model**

Major components of the TCAD-CM include realistic engagement with a simulated client, instructor-guided theoretical conceptualization, application of theory-informed techniques, continuous feedback, and oral and written assessment of student learning. The crux of the TCAD-CM is the GGCCRP (Appendix), which focuses on conceptualization skills and translating theory into practice. Case conceptualization skills require that clinicians understand and apply theoretical content in context and generate a cohesive description of a case through the lens of a given theory. When applied to a client’s case, the clinician’s work with the client is much like a funnel, with the conceptualization becoming increasingly refined as more data is gathered. The GGCCRP model is an active role-play-based teaching method that applies theoretical material and demonstrates case conceptualization by mimicking the process of “funneling” with a series of structured rounds.

**Phase 1.** Prior to beginning the activity, the roles of client, process observer, and counselors must be assigned. The GGCCRP can be conducted with as few as four participants and is comprised of eight phases. The activity begins with the assessment phase; in phase one, the client sits facing the remainder of the group, with the group surrounding the client in a horseshoe shape. Group members act as counselors and
participate in a brief information-gathering session, collecting demographic and other biopsychosocial data.

**Phase 2.** In the rough conceptualization phase, phase two, the client is silent while the group discusses initial observations and concepts of importance based on the theory being studied. Discussion in this phase represents observation followed by curious assessment. After several observations have been made, the group then begins the task of determining five pursuits, defined as questions, statements, or responses to the client intended to further gather information and shape conceptualization. Counselors choose future pursuits based on the theory guiding the exercise; relevant data must be further explored.

**Phase 3.** In phase three, follow-up, the counselors play-out their five pursuits, reengaging the client. As more data is gathered, relevant concepts continue to emerge. Counselors continue to develop a clearer picture of their conceptualization of the client.

**Phase 4.** After testing their initial hypotheses with the client, in phase four, refined conceptualization, the group then discusses the additional data that was gathered. The client is again silent while the group continues the process of theory-informed observation and curious assessment. In this phase, counselors have the opportunity to build on, discard, or create new conceptualizations of the client based on the increasingly complex client data. Guided by a more refined conceptualization of the client and their presenting concerns, the group next determines three pursuits intended to further explore relevant concepts.

**Phase 5.** In phase five, follow-up, the counselors play-out their three pursuits, reengaging the client. As more data is gathered, relevant concepts continue to emerge. Counselors continue to create a clearer picture of their conceptualization of the client.

**Phase 6.** Phase six engages the process observer whom has been silent prior to this point. While the group members are silent, the process observer highlights the larger group process as it unfolded during the activity. Highlighted themes may include concepts that were overlooked, tendencies of the group, feedback about rapport and the client’s relationship with the group, etc.

**Phase 7.** Once observations have been given, in phase seven, the group begins the follow-up process by again sifting through the client data and information learned about the group’s process. The process observer and client are silent and the group determines one final pursuit to close their work with the client. This phase is considered closed when the group has agreed on a final plan or future directions for continuing with this client.

**Phase 8.** Finally, in phase eight, post-process discussion, all participants debrief and talk about their overall experience of the activity. Topics discussed may include: the client’s experience of the direction of the group’s line of questioning, important points that may have been overlooked or misunderstood, successes or difficulties, etc. After all discussion, the group ends the activity with a clearer picture of their conceptualization of the client and potential ideas about how to proceed if counseling were continued. At the close of each GGCCRP, the group then moves to the documentation phase of the course model and the facilitator guides the students in their written translation of the theoretical material explored in the activity.

The GGCCRP demonstrates this process of structured refinement of theoretical conceptualization in context. Students practice a myriad of clinical skills during the assessment, follow-up, and conceptualization phases of the model. Therefore, students do
not simply read about theoretical content and discuss how they would apply the material in flat cases such as in a case study. They engage with the material on multiple levels. Students talk with clients and determine relevant pieces of data and then filter this information through the lens of the theory in order to generate a preliminary hypothesis; next they refine their hypothesis based on continued assessment.

This process is underscored by the group’s discussion and intentional decisions about future pursuits and lines of questioning. In these phases, the instructor has the power to guide the group, highlighting important concepts and serving as a model for how to clinically explore client data through the lens of the theory being practiced. The instructor may also choose to stay silent until the final phase of the model and give more pointed feedback about the overall process that participants engaged in.

**Discussion**

The TCAD-CM offers a structured and active alternative to a traditionally organized didactic presentation of theoretical material. There are potential benefits of the course model. The TCAD-CM offers an alternative approach to traditional course organization that is supported by pedagogically sound theories of instruction. It actively engages students in the process of translating theory into practice, from start to finish, beginning with the acquisition of the content, moving to verbal application of the theory in a real-world context, and ending with written demonstration of knowledge of the material. Practicum and internship can be overwhelming for students and instructors because it represents the culmination of a myriad of counseling skills. Often, instructors are not able to adequately focus on guiding students’ use of clinical skill because students may not have a firm grasp of elements that support the process of counseling, such as conceptualization. Utilizing an approach such as the TCAD-CM addresses this issue by providing learners with multiple opportunities to practice their developing skills in context prior to beginning to work with real clients, which typically happens in practicum and internship nearly a year later.

The GGCCRP, the group process model, offers a structured method of active application of theoretical material and case conceptualization while minimizing risks of using peers as clients, such as breaches of confidentiality or boundary issues. The model uses a funnel approach to demonstrate the decision-making nature of conceptualization, beginning broad and exploring hypotheses with the goal of narrowing in focus. The model engages students and facilitators in a process central to constructivist pedagogy and contextual techniques; together the group creates and investigates a shared understanding of the client.

The TCAD-CM and GGCCRP show promise for use in counselor education. Students enrolled in the author’s initial application of the course model expressed excitement about the active nature of the course and implied that engaging in the GGCCRP’s facilitated the development of a solid understanding of how using theory looks in practice. Students also reported an increased sense of confidence in their conceptualization ability and clinical skills. While the initial anecdotal student reports are positive, further exploration of the comparison of the TCAD-CM and student case conceptualization ability, student satisfaction with the course, and students’ experiences of the course organization versus other course models is needed.
References


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Appendix

**Group-Guided Case Conceptualization Role-Play Model**

Prior to beginning the group activity, three roles must be assigned: role-play client/s (1+), process observer (1), and clinicians (2+). Suggested time allowances represent the maximum allotted time for each phase; a well-organized group activity should take no more than 45–60 minutes.

1. **Group Process Phase 1 – Assessment**
   The role-play client/s sits facing the remainder of the group and participates in a brief information gathering session led by the role-play clinicians. Demographics, presenting concern, and other biopsychosocial data are explored.
   
   **20 minutes**

2. **Group Process Phase 2 – Rough Conceptualization**
   The role-play client/s is silent while the group wonders aloud about initial observations, concepts of importance, future directions, lines of questioning, etc. This phase should represent observation followed by curious assessment. The facilitator may guide the group by using prompts such as: a) What themes arose from our initial assessment? b) Through this specific theoretical lens, what are noteworthy concepts from the client’s story? c) What are you curious about? Student statements such as: “I noticed,” “I am curious about,” or “Due to the client’s _____, I wonder” are appropriate. The group determines five pursuits (questions, statements, or responses) intended to further gather information and shape conceptualization of the role-play client/s.
   
   **10 minutes**

3. **Group Process Phase 3 – Follow-Up**
   The group members, acting as clinicians, directly address their five pursuits with the role-play client/s. Each pursuit is role-played until there are no more lingering questions, to the satisfaction of the role-play clinicians, or the time limit has been reached.
   
   **5 minutes**

4. **Group Process Phase 4 – Refined Conceptualization**
   The role-play client/s is silent while the group wonders aloud about subsequent observations, concepts of importance, future directions, lines of questioning, etc. This phase should represent continued observation, building on information gathered during the previous phase of the group role-play, followed by curious assessment. The facilitator may guide the group by prompting them to answer the question: What information do we still need in order to round out our conceptualization of the client/s through this specific theoretical lens? In addition to aforementioned examples, student statements such as: “While I initially wondered about the client’s experience of _____, due to the client’s additional
statements of symptomology, I am now curious about ____” are appropriate. The group determines three pursuits intended to further gather information and shape conceptualization of the role-play client/s.

5 minutes

5. **Group Process Phase 5 – Follow-Up**
   The group members, acting as clinicians, directly address their pursuits with the role-play client/s. Each pursuit is role-played until there are no more lingering questions, to the satisfaction of the role-play clinician, or until the time limit is reached.

5 minutes

6. **Group Process Phase 6 – Process Observation**
   The role-play client/s and group members are silent while the process observer makes statements about the larger group process as it unfolded during the activity. Observations may include: theoretical concepts that were overlooked, the client’s tendencies, clinician’s tendencies, etc. Student statements such as “I am aware that explorations of diversity were only addressed by our diverse group members and they were overlooked by the majority of group” or “I wonder if the client may have opened up more if we chose to explore______?” are appropriate.

3 minutes

7. **Group Process Phase 7 – Follow-Up**
   The role-play client/s and process observer are silent while the group determines one final pursuit intended to represent the culmination of their conceptualization of the role-play client/s. Group members, acting as clinicians, directly address their pursuit with the role-play client/s. The pursuit is role-played until there are no more lingering questions, to the satisfaction of the role-play clinician, or until the time limit is reached. This phase is considered closed when the group has agreed on a final plan or future directions for counseling if the group were to continue working with this client/s.

2 minutes

8. **Group Process Phase 8 – Post-Process Discussion**
   In this phase, the entire group—role-play client/s, process observer, and group members—debrief and share overall experiences of the activity. Topics discussed may include: the client’s experience of the direction of the group’s line of questioning, important points that may have been overlooked or misunderstood, successes or difficulties, etc.

*Unlimited (at the discretion of the instructor or facilitator)*